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Design and Operation of the National Survey of Adoptive Parents of Children with Special Health Care Needs, 2008



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

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Program and Collection Procedures

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

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Finally, we extend our appreciation to the thousands of parents and other family members who were willing to share their stories. Their efforts made this project a reality.

Abstract

Objective

This report presents the development, plan, and operation of the National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN), a module of the State and Local Area Integrated Telephone Survey conducted by the Centers for Disease Control and Prevention's National Center for Health Statistics. The survey was designed to produce national estimates of the characteristics, health, and well-being of adopted children with special health care needs (CSHCN) and their families, the preadoption experiences of the adoptive parents, and their access to and utilization of postadoption services. Funding was provided by the Office of the Assistant Secretary for Planning and Evaluation and the Administration for Children and Families, both of the U.S. Department of Health and Human Services.

Methods

The National Survey of Children with Special Health Care Needs 2005–2006 (NS-CSHCN), a random-digit-dial telephone survey of households with children, included questions that identified whether the sampled child was adopted. Adopted CSHCN under age 18 in 2008 who lived in households where English was spoken were eligible for the NSAP-SN follow-up interview. The NSAP-SN interview was a follow-back telephone call 1 to 3 years after the original NS-CSHCN interview. Sampled children included CSHCN adopted from other countries, from the U.S. foster care system, and from private domestic sources. Respondents were either the adoptive mother or the adoptive father.

Results

A total of 1,007 NSAP-SN interviews were completed from February 2008 to July 2008. The interview completion rate (i.e., cooperation rate) for eligible respondents was 67.3%. The overall response rate, taking account of nonresponse to NS-CSHCN, was 37.7%.

Keywords: adoption • foster care • adoption services • child health

Design and Operation of the National Survey of Adoptive Parents of Children with Special Health Care Needs, 2008

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Introduction

Several agencies within the U.S. Department of Health and Human Services (HHS), including the Office of the Assistant Secretary for Planning and Evaluation (ASPE), the Administration for Children and Families (ACF), and the Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) have collaborated to develop the National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN). Administered for the first time in 2008, NSAP-SN focuses on the characteristics and needs of adopted children with special health care needs (CSHCN) and their parents. The survey is tailored to collect data from three types of adoptive families:

- Those who adopted through the U.S. foster care system.
- Those who adopted internationally.
- Those who adopted through domestic private sources.

Due to the relatively low prevalence of adoptive families of children with special health care needs in the United States, surveying this population would typically represent a significant challenge in terms of identifying a

sample large enough for analysis that is nationally representative of all adopted CSHCN. NSAP-SN cases, however, were screened via administration of a parent survey, the National Survey of Children with Special Health Care Needs (NS-CSHCN).

The 2005–2006 NS-CSHCN provided a nationally representative sample of adopted CSHCN in the United States. Households containing these adopted children identified in the 2005–2006 NS-CSHCN were subsequently called back to administer the NSAP-SN instrument if English was spoken in the household and the child had not yet reached age 18. As a result of its link with NS-CSHCN, the NSAP-SN sample has coverage that represents all adopted CSHCN who were aged 0–15 in 2005–2006 and living in English-speaking households in the United States, and is able to provide much needed data on:

- Adopted child and family characteristics.
- Parent and child well-being.
- Adoption agreements and postadoption financial services.
- Postadoption nonfinancial support.

These data, combined with those collected in the NS-CSHCN interview, will provide researchers with previously

unavailable insights into the health and well-being of adopted CSHCN and their families. The content of NS-CSHCN is broad, addressing a variety of physical, emotional, and behavioral health indicators and measures of children's health experiences with the health care system (1).

Both NS-CSHCN and NSAP-SN were administered as modules of the State and Local Area Integrated Telephone Survey (SLAITS), a telephone survey mechanism designed to benefit from the extensive random-digit-dial (RDD) sampling investment made by the National Immunization Survey (NIS). The synchronicity between NIS, NS-CSHCN, and NSAP-SN enables NSAP-SN to take advantage of a singularly robust RDD sample design and field a new survey in a highly cost-effective manner. Furthermore, the association with NS-CSHCN enriches each NSAP-SN case with a wealth of additional information on the health, well-being, and health care system experiences of adopted CSHCN and their families.

The National Survey of Adoptive Parents (NSAP) instrument was also administered to a sample of adoptive parents identified through the 2007 National Survey of Children's Health (NSCH) in 2007 and early 2008. The selected children in NSAP represented all adopted children aged 0–17 in 2007, not just those with special health care needs. For more detail on the NSCH sample design, readers are encouraged to refer to the 2007 NSCH design and operations report (2). Detail about the NSAP sample design is available in the NSAP design and operations report (3).

The SLAITS Program

The SLAITS program, conducted by NCHS, is a broad-based, ongoing survey system available at the national, state, and local levels for tracking and monitoring the health and well-being of children and adults. Surveys conducted as part of the SLAITS system use the same sampling frame as NIS, and immediately follow NIS in selected households, using its sample for

efficiency and economy. NIS is a large-scale RDD telephone survey that screens households for the presence of young children and collects immunization history information for children aged 19–35 months. To achieve an adequate sample of households with children in this age range, NIS contacts over 1 million households per year to determine if they contain age-eligible children. The process of identifying this large number of households—most of which are ineligible for NIS—provides an economical opportunity to administer other surveys on a range of health- and welfare-related topics in an operationally seamless, cost-effective, and statistically sound manner.

Surveys conducted as part of the SLAITS system vary in content, duration, and sample size based on the research needs of their sponsors. Sponsors work with NCHS to establish parameters, including sample size, questionnaire design, and other survey requirements. Since 2005, NORC at the University of Chicago has implemented all aspects of the survey operations under contract with NCHS, including development and testing of the computer-assisted telephone interview (CATI) instrument, recruiting and training interviewers, completing the targeted number of interviews, and preparing data files and documentation. NCHS is responsible for all aspects of SLAITS administration.

SLAITS began in 1997 with a pilot in two states (Iowa and Washington) with a series of questions on health, including issues of access to care, health status, and insurance. In 1998, a SLAITS module concerning child well-being and welfare issues was implemented using three samples: a Texas RDD sample, known Medicaid program participants seeded into the Texas RDD sample, and known Medicaid or MinnesotaCare participants in Minnesota. The first national SLAITS module was fielded in 2000: the National Survey of Early Childhood Health collected data from a national sample regarding parents' perceptions of their children's pediatric care and

examined relationships between the promotion of health in the pediatric office and promotion of health in the home (4).

In 2000–2002, SLAITS fielded the first National Survey of CSHCN, designed to collect data on CSHCN, children's health insurance coverage, and uninsured children from low-income households (5). This was the first SLAITS module to take full advantage of the NIS sampling frame to produce state-level estimates. In 2003, SLAITS fielded the first iteration of the National Survey of Children's Health, which examined the physical and emotional health of children aged 0–17 years (6). In 2003, SLAITS also fielded the National Asthma Survey, which examined the health, socioeconomic, behavioral, and environmental factors that relate to better control of asthma for children and adults (7). In 2005–2006, SLAITS fielded the second iteration of NS-CSHCN (1), and in 2007, SLAITS fielded the second iteration of NSCH (2), concurrently with NSAP (3).

2005–2006 NS-CSHCN

The 2005–2006 NS-CSHCN marked the second time that SLAITS has been used to conduct this survey. From April 2005 to February 2006, a total of 40,840 interviews were completed with parents of CSHCN, approximately evenly distributed among the 50 states and Washington, D.C. In addition to English, interviews were conducted in Cantonese, Korean, Mandarin, Spanish, and Vietnamese.

NS-CSHCN was funded by the Maternal and Child Health Bureau (MCHB) of the Health Resources and Services Administration. MCHB defines CSHCN as:

... those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally. (8)

Of the 40,840 children who were the subjects of completed interviews in the 2005–2006 NS-CSHCN, 1,912 were identified as adopted children who did not live with a biological parent. Adopted CSHCN living with a biological parent were ineligible for NSAP-SN in order to exclude stepparent adoptions. Those children who had not yet reached age 18 by the time of the follow-back call and lived in English-speaking households were eligible for NSAP-SN. Because most of the children aged 16 and 17 during the original data collection reached age 18 by the time of the follow-up interview, the few who had not yet reached age 18 were also excluded in order to yield a sample representative of adopted CSHCN aged 0–15 in 2005–2006. A total of 1,607 cases were thus eligible for NSAP-SN.

Background

NSAP-SN was jointly funded by ASPE and ACF, both of HHS.

ASPE advises the Secretary of HHS across the many topical areas within the Department's areas of responsibility. ASPE leads special initiatives, coordinates the Department's evaluation, research, and demonstration activities, and manages cross-Department planning activities such as strategic planning, legislative planning, and review of regulations. Integral to this role, ASPE conducts research and evaluation studies, develops policy analyses, and estimates the cost and benefits of policy alternatives under consideration by the Department and Congress. Within ASPE, the Office of Human Services Policy focuses on economic self sufficiency and human services delivery issues, as well as policies affecting children, youth, and families. The office works closely with ACF and a variety of other agencies and departments. ASPE has a long history of research in foster care and adoption issues, publishing over 40 research reports on the topic over the past two decades. All of ASPE's related publications may be found on their website, <http://aspe.hhs.gov>, under the topical heading "child welfare."

ACF is responsible for federal programs that promote the economic

and social well-being of families, children, individuals, and communities. Within ACF, support for NSAP came from the Children's Bureau, which works with state and local agencies to develop programs that focus on the prevention and protection of children from maltreatment, the provision of services to children and families to assist with reunification efforts, and finding permanent placements for those children who cannot safely be returned to their birth families. The Children's Bureau seeks to provide for the safety, permanency, and well-being of children through leadership, support for necessary services, and productive partnerships with states, tribes, and communities. The Bureau administers over \$2 billion in funding for adoption programs under several legislative authorities. These programs are intended to support state and local efforts to recruit adoptive families for children in foster care and to support these families over time and include: the title IV-E Adoption Assistance Program, which provides adoption subsidies to many families that adopt children with special needs from the foster care system; the Adoption Opportunities Program, which funds demonstration grants to fuel innovation in foster care adoption practice; the Promoting Safe and Stable Families Program, which includes funding for adoption promotion and support services; and the Adoption Incentives Program, which provides incentive funds to states that increase the number of foster care adoptions they perform in several categories. The Children's Bureau also administers the Infant Adoption Awareness Training Program, authorized by the Children's Health Act, which trains staff of eligible health centers in providing adoption information and referrals to pregnant women. The Children's Bureau funds the national adoption recruitment campaign, in partnership with the Ad Council, as well as the AdoptUsKids project, which provides fulfillment activities to the campaign, operates the national photo-listing site of waiting children, and provides training and technical assistance to states on the recruitment and retention of foster and adoptive parents. In addition, the Bureau

funds the National Resource Center for Adoption, which provides training and technical assistance on a variety of other adoption issues to states.

NSAP was intended to gather information on the characteristics of adopted children and their families and to gain insights into their adoption-related experiences and postadoption service utilization and needs. Much of the social services literature uses adoption as an end point to the search for a family and gives relatively little attention to children's needs and well-being after the adoption has been finalized, or to families' potential ongoing challenges. As the number of children adopted both from foster care and international sources has grown in recent years, there has been increased interest in understanding children's long-term well-being following adoption. However, for government agencies involved in adoption, contact with families is usually extremely limited following finalization. In addition, because children's names, social security numbers, and other potentially identifying information may change at the time of adoption, it is not usually possible to use administrative data to track children's use of government assistance or services from the preadoption to the postadoption periods.

Most federal activity and funding related to adoption relates to adoptions from foster care. However, in recent years the negotiation and ratification of the Hague Convention on Intercountry Adoption has increased the role of the State Department with respect to children adopted internationally. This international treaty, which entered force in the United States in 2008, is intended to protect the rights of all parties involved in intercountry adoptions—the child, the birth parents, and the adoptive parents. The enhancement of a population-based survey made it possible to look across adoption types for a view of the full range of adoptive families as well as to provide the opportunity for comparisons among families adopting from different sources. While not a formal partner in NSAP, staff at the State Department with expertise in intercountry adoption issues

were consulted at several points during the survey's development to assure that issues specific to international adoptions were addressed as much as possible.

The number of children adopted from foster care increased dramatically in the late 1990s, in part as a result of the Adoption and Safe Families Act of 1997, which emphasized the need to find permanent alternatives for children in foster care who could not be reunified with their birth families. As a result, in many states the number of adopted children receiving adoption subsidies currently exceeds the number of children in foster care. Information on the experiences of families who have adopted can provide insights into the factors that facilitate or hinder the success of adoptions and the postadoption support that may be helpful to assure the continued well-being of adopted children and their families. In addition, with respect to children adopted from foster care, a better understanding of how families utilize adoption subsidy funds for their children's well-being may help demonstrate their utility in recruiting families for children in foster care.

The prevalence of special health care needs, as defined by MCHB and assessed by NS-CSHCN, is higher among children adopted from foster care than among children adopted by other means: slightly more than half of children adopted from foster care have special health care needs, while fewer than one-third of children adopted internationally or through domestic private sources have special health care needs, based on analysis of NSAP data. NSAP-SN allows for a focus of analysis on a larger sample of adopted children of greatest interest to ASPE and ACF and with the highest policy relevance: children adopted from the U.S. foster care system who have special health care needs. The needs of these families and their use of and satisfaction with postadoption support and services are of great interest to ASPE and ACF because these are the families most likely to need and request support and services, and the larger sample will permit more extensive analysis of this particular group.

The information obtained through NSAP-SN will be used to develop ways to better identify and communicate with potential adoptive parents for children in the U.S. foster care system by describing the reasons why families adopt and the characteristics of adoptive families and CSHCN they adopt. The information will also improve our understanding of the support adoptive families find most helpful. In addition, NSAP-SN will provide data on openness in adoptions, transracial and transcultural aspects of adoption, and adoption satisfaction across adoption types for CSHCN.

Development of the Survey Instrument

In August 2005, ASPE issued a task order to The Urban Institute and NORC at the University of Chicago to develop the instrument for the National Survey of Adoptive Families. Instrument development began with an effort to locate as many previous adoption surveys as possible. Urban Institute staff conducted an extensive literature review of adoption research to identify past surveys and other related research regarding adoption. Survey instruments used in these research efforts were obtained and categorized according to the part of the adoption process they addressed and by the topics covered. Results were compiled into a comprehensive planning document identifying existing survey questions on each topic of importance. The planning document was used to construct the survey instrument, choosing the most relevant questions on desired topics from existing surveys and constructing new questions on several topics that were not adequately addressed in any of the preexisting instruments. The ordering of questions was adjusted to flow in a way that made sense as a telephone interview, and transitional scripts were added to guide the respondent from one section of the survey to another.

ASPE and ACF staff reviewed draft questions, suggested new topics for inclusion and sources of questions, and provided overall supervision throughout

the questionnaire and survey design process. Staff at the State Department's Office of Children's Issues concerned with intercountry adoptions was also consulted to ensure the survey adequately addressed issues regarding intercountry adoption and that questions were worded in ways that made sense for families adopting from international as well as domestic sources.

Before finalizing the instrument, both cognitive interviews and a small instrument pretest were conducted. The cognitive interviews were conducted with a convenience sample of participants: five parents who adopted through foster care, one who adopted privately, and one who adopted internationally. The goal of the cognitive interviews was to learn how the survey questions sounded in the ear of an adoptive parent (i.e., assessing whether the terminology made sense, if the order of the questions flowed well, and whether parents were able to answer the questions as they were asked). After each subsection of the questionnaire participants were asked about certain items that might have been confusing. Feedback from the cognitive interviews was used to inform a new draft of the instrument, which was used in the instrument pretest. The instrument pretest was also a convenience sample and consisted of three international adoptive parents, three parents who adopted through foster care, and two who adopted privately. The main goal of the instrument pretest was to learn about the timing and the flow of the instrument. However, participants also provided feedback on the items themselves, and so this also served to inform the wording and content of the instrument.

Following the instrument pretest, decisions were made about the final inclusion of questions, with a number of items being dropped to ensure the survey fit within time constraints of an approximately 30-minute interview. The NSAP questionnaire was programmed as a CATI instrument and pretested in December 2006. Following final revisions based on the CATI pretest results, the instrument was administered to the NSAP households identified in

NSCH from April 2007 to July 2008, and to the NSAP-SN households identified in NS-CSHCN from February 2008 to July 2008. Details about the CATI pretest and revisions made to the instrument during the administration of NSCH and NSAP are available in the NSAP design and operations report (3).

By the time NSAP-SN interviewing began in February 2008, the instrument was in its final form and did not change during the NSAP-SN administration period. Minor changes were made to the NSAP instrument to modify it for NSAP-SN, including revisions to the designation of variables from the base survey that drive certain skips in the questionnaire, revisions to accommodate the span of time between the original interview and the follow-up interview, and revisions to exclude sample children who were discovered to have reached age 18 by the time of follow-up interviewing.

Sample Design

Eligibility screening for NSAP-SN was conducted as part of the 2005–2006 NS-CSHCN. Therefore, the initial sample of telephone numbers for NSAP-SN was a subset of the sample of telephone numbers for the 2005–2006 NS-CSHCN. To adequately describe the origin of the NSAP-SN sample, then, it is necessary to describe the NS-CSHCN sample.

The NS-CSHCN was designed to identify households with children, screen all children in the household for special needs, and conduct a detailed interview about one child with special health care needs in the household (randomly selected if there was more than one child with special health care needs in the household). Like all SLAITS modules, NS-CSHCN took advantage of the large number of screening calls required for NIS.

To accomplish the goal of 750 completed special-needs interviews in each state, telephone numbers were initially selected from the telephone numbers randomly selected for the NIS screening effort. Therefore, the procedures for drawing the NIS sample

were the first steps in the procedures for drawing the NS-CSHCN sample. However, because of the scope of NS-CSHCN, there were some states for which the NIS sample was not large enough to achieve the desired number of completed interviews. In these cases, additional sample (called “augmentation sample”) was drawn for the purpose of administering the NS-CSHCN interview, but without going through NIS first.

The next two sections describe the basic NIS sample design and serve as a nontechnical description of the NS-CSHCN sample design and allocation procedures. [Appendix I](#) of this report includes a more technical description of NSAP-SN sample design and weighting procedures. For more detail on NIS sample design, readers are referred to the 2007 methodology report for NIS (9), which is available from NCHS. Further information regarding NIS itself can be found in “National Immunization Survey: The Methodology of a Vaccination Surveillance System” (10). For more detail on NS-CSHCN sample design, readers are referred to the 2005–2006 NS-CSHCN design and operations report (1).

The NIS Sampling Plan

NIS was established to monitor vaccination levels of very young children within states and local areas. These “estimation areas,” consisting of one or more “sampling areas,” are nonoverlapping, encompass the United States, and are each enclosed within the borders of a single state. In effect, each quarter-year NIS conducts a separate survey in each estimation area, sharing a common sample design that employs list-assisted RDD (9,10). The target number of completed interviews in each sampling area reflects the goal of obtaining equally precise estimates in each estimation area. If necessary, the target for a sampling area in each quarter is adjusted to compensate for its total shortfall or excess in the previous quarters.

The target population for NIS is children aged 19 to 35 months, the primary targets of immunization programs. Because less than 5% of households in the United States contain

children in this age range, NIS screens over 1 million households per year to identify a sufficient number of households with eligible children. SLAITS modules use this NIS screening sample.

NIS uses the list-assisted method of RDD (11). This method selects a random sample of telephone numbers from “banks” of 100 consecutive telephone numbers (e.g., 773–256–0000 to 773–256–0099) that contain at least one directory-listed residential telephone number. The sampling frame of telephone numbers is updated each quarter to reflect new telephone exchanges and area codes. Although the number of cellular telephone users in the United States has increased rapidly, most households with children continue to maintain landline telephone service (12). Also, most cellular telephone users pay for incoming calls. Therefore, the NIS sampling frame excluded cellular telephone exchanges in 2005–2006.

NS-CSHCN Sample Design and Allocation

The goal of the NS-CSHCN sample design was to generate samples representative of the state populations of children and sufficiently large enough to permit analysis of the characteristics of CSHCN in each state. To achieve this goal, state samples were initially designed to obtain completed interviews with parents of 850 CSHCN. The number of CSHCN to be selected in each sampling area was determined by allocating the total of 850 children in the state to each sampling area within the state in proportion to the total estimated number of households with CSHCN in the sampling area. (During the sixth quarter of data collection, the targets were reduced by 100 to 750 per state.) Given this allocation, the number of households that needed to be screened in each sampling area was calculated using the expected proportion of households with children under age 18 in the sampling area. Then, the number of telephone lines that needed to be called was computed using the expected working residential number rate, accounting for expected nonresponse.

Drawing the NS-CSHCN Sample

After the number of telephone lines necessary to achieve the target number of completed interviews in each sampling area had been estimated, the samples were drawn. The sample draw proceeded in three steps.

First, telephone lines were sampled in each sampling area as described above. Next, a portion of these telephone lines in each sampling area was flagged for NS-CSHCN. Finally, any remaining telephone lines that were not flagged were left for the sole use of NIS. Thus, after these three steps, every telephone line to be called for NIS screening fell into one of two categories: 1) NIS and NS-CSHCN sample, or 2) NIS-only sample.

In 14 states (Alaska, Arkansas, Colorado, Delaware, Hawaii, Idaho, Iowa, Louisiana, Minnesota, Mississippi, Nevada, North Carolina, Oregon, and Utah), there was insufficient NIS sample available to obtain the desired number of completed NS-CSHCN interviews. Therefore, samples of additional telephone lines were drawn in these states. [Table A](#) shows the proportion of the total NS-CSHCN sample that was augmented for each state. That is, for each state in [Table A](#), the proportion listed is the proportion of the total sample called only for NS-CSHCN and not for NIS.

Conducting the NS-CSHCN Interviews

Each telephone line selected for NS-CSHCN was called and screened for residential status and the presence of NIS age-eligible children. (The augmentation sample was the one exception to this rule, as it was selected and called solely for NS-CSHCN and not NIS. These households were not screened for NIS age-eligible children.) NIS interviews were conducted if NIS age-eligible children lived in the household. If NIS age-eligible children did not live in the household, interviewers asked if there were any children under age 18 living in the

Table A. Percentage of main sample called only for NS-CSHCN (augmentation sample), by state

State	Percent
Alaska	4.1
Arkansas	0.4
Colorado	14.0
Delaware	2.4
Hawaii	4.5
Idaho	34.2
Iowa	20.7
Louisiana	0.6
Minnesota	6.7
Mississippi	3.7
Nevada	16.6
North Carolina	3.5
Oregon	16.8
Utah	35.5

NOTE: NS-CSHCN is National Survey of Children with Special Health Care Needs.

household.

Regardless of whether an NIS interview was conducted, if any children lived in the household, information about the sex and date of birth was gathered for each child. (If this information had been collected during the NIS interview, the questions were not asked again. An instrument change was made in late 2005 to eliminate the date of birth question and replace it with a simpler question asking each child's age.) The respondent was then asked the NS-CSHCN screener questions to determine the special health care needs status of each child in the household. If any children in the household were identified as having special health care needs, one was randomly selected to be the subject of a detailed interview.

Conducting the NSAP-SN Interviews

CSHCN with a complete NS-CSHCN interview were identified as eligible for the NSAP-SN interview if they lived in English-speaking households, were aged 0–15 as of the 2005–2006 interview and had not reached age 18 by the time of the follow-up interview, and had been identified as adopted (i.e., they lived with an adoptive parent and no biological parent lived in the household—to exclude stepparent adoptions). These households were then

called between February 2008 and June 2008 to conduct an NSAP interview about the child. In some cases, respondent households had moved or could not be reached at the number called for the NS-CSHCN interview. In anticipation, interviewers received special training on locating respondent households; that training is described below.

Questionnaire

Content

Introduction and consent

Upon determination that a household from NS-CSHCN had been found for NSAP-SN, the interviewer asked to speak with the selected child's parent. After the parent came to the phone, or after the person who answered the telephone identified herself or himself as the parent, the respondent was asked screening questions to determine if he or she was eligible (i.e., the respondent was an adoptive parent and the child was under age 18). After eligibility was determined, the respondent was informed of her or his rights as a survey participant. Verbal consent for study participation was then obtained and documented in the CATI system. The informed consent statement informed respondents of the voluntary nature of the survey, assured them that their responses would be kept confidential, and indicated that there was no penalty for not answering questions. In addition, the informed consent statement provided information about the content of the survey and the expected duration. The respondent was also told that he or she would receive \$25 (or \$30 if the household met certain refusal pattern benchmarks) in appreciation of his or her time. Finally, the respondent was told that the interview might be recorded and monitored by a supervisor for quality purposes.

The NSAP-SN interview covered the six topics described below. A copy of the questionnaire appears in [Appendix II](#).

- Adoption-eligibility screening and demographic characteristics. This section asked about the country of origin (for international adoptions only), relationship of the respondent to the child, current marital status of the adoptive parent(s), adoption agencies involved in the adoption, whether the adoption was an interstate adoption, and questions regarding the foster parent(s) and length of stay if the adoptive parent was a foster parent to the child prior to adoption. Demographic data collected in NSCH were not repeated in the NSAP interview.
- Characteristics. This section gathered information about the adopted child and his or her situation before adoption, including age at adoption finalization, age at first placement in home, whether the child ever lived with the birth family or had birth siblings, whether the child had any of several behavioral disorders or developmental problems, whether the child had needed treatment from mental health professionals, had used alcohol or drugs (asked only for teenagers), had been arrested (asked only for teenagers), or had been pregnant (asked only for teenagers), and the child's native language and education experiences. In addition, this section gathered information about the adoptive parent(s), including whether the adoptive parent(s) had their own biological children, their reasons for adopting, what types of adoption they considered, their reasons for choosing a specific type of adoption, and whether they chose activities or moved because of the child's race or culture. This section also collected data on information provided to the adoptive parent(s) before adoption, including whether it was an open adoption, whether there was any relationship with the birth family, the level of involvement of adoption attorneys or caseworkers, and whether any psychological report, medical history, or educational records were provided.
- Parent and child well-being. This section gathered data on the relationship of the respondent with the adopted child in terms of affection, understanding, distance, and trust; the child's relations with other members of the family; the child's feelings about being adopted; whether the respondent would recommend adoption to others based on his or her experience; whether the child had spent time away from home due to behavioral issues; and whether the respondent had thought about or taken action on ending the adoption and, if applicable, what his or her reasons were for wanting to end the adoption.
- Adoption agreement and postadoption financial services. This section inquired about the existence of an adoption agreement and a monthly subsidy, the total costs associated with adoption, the respondent's Medicaid experience, the mental health care needs of the child, mental health medications, dental care needs, medical care needs including vision and hearing, who paid for all of these services for the adopted child, and the federal tax credit for adoption.
- Postadoption nonfinancial support. This section contained questions on postadoption services, adoption support groups for the adopted child, adoption support groups for the respondent or his or her spouse or partner, mental health care or counseling for the adopted child, family counseling, crisis counseling, alcohol or drug evaluation or treatment for the adopted child, education and childcare services, respite care, residential treatment or psychiatric care, and information or education received about adoption.
- Final demographics. This section collected other demographics not previously collected in NS-CSHCN, including the year of the respondent's birth, the year of the respondent's spouse's or partner's birth, ethnicity and race of the respondent and of the spouse or

partner, and the respondent's employment status.

Significant Changes During Data Collection

No significant changes to the questionnaire occurred during the data collection period. Some minor protocol changes are described in [Appendix III](#).

CATI Programming

NSAP-SN was conducted using a CATI system. The CATI data collection software presents the questionnaire on a computer screen to each interviewer. The program guides the interviewer through the questionnaire, automatically routing the interviewer to appropriate questions based on the respondent's answers to previous questions. Interviewers enter survey responses directly into the computer; the CATI program determines whether the selected response is within an allowable range and saves the responses in a survey data file. Online help screens and text are available to aid interviewers. This data collection technology reduces the time required for transferring, processing, and releasing data, and ensures accurate questionnaire flow. Once initial programming was completed, the instrument underwent rigorous testing to ensure correct functioning of the CATI system.

Interviewer Training

NORC at the University of Chicago conducted all interviews for NSAP-SN. Interviewer training was conducted by NORC at the University of Chicago staff at the production center located in Chicago, IL. All interviewers selected to attend the training were previously certified staff. Twenty NSAP-SN interviewers were trained at the Chicago production center in February 2008, and all 20 passed the training.

Training Sessions

Interviewer training sessions began with an introduction and project

overview. Interviewers were informed about project goals, the purpose and history of the study, study sponsors, and the study design. A review of the screener and each section of the questionnaire were taught, with emphasis on quality data collection. The relationship between NS-CSHCN and NSAP-SN was also covered.

Several cooperation-gaining exercises were conducted throughout the training to ensure that interviewers were equipped to answer frequently asked questions (FAQs) and handle refusals. Part of the exercises included a review of FAQs and other job aids provided for interviewers.

Mock Interviews

NSAP-SN training utilized two round robin mock interviews. During the mock interviews the interviewers were acclimated to the questionnaire, the CATI system, and methods of gaining cooperation. Each mock interview was designed to highlight various sections of the screener and the main questionnaire, and to provide different cooperation scenarios.

Locator Training

A subset of seven of the NSAP-SN interviewers was selected to attend the locator training. Locators were informed about locating goals and objectives and about how to utilize specific free Internet search engines and identify viable leads to locate the NS-CSHCN household. Locators also reviewed the locator scripts, job aids, and relevant FAQs.

Several mock-locating cases were given to each locator to generate a new lead. The locators were required to demonstrate their proficiency at effectively using the recommended Internet search engines and identifying viable leads. The class proceeded to a round robin mock locating case using the prompting script and FAQs to contact the lead and determine if they had located the 2005–2006 NS-CSHCN household.

Data Collection

Pretesting

NSAP-SN survey administration preparations did not involve a pretest as the questionnaire contained minimal changes from the previously and concurrently fielded NSAP study. A detailed description of the NSAP pretest that occurred prior to NSAP data collection is available in the NSAP design and operations report (3).

Advance Letters

When a mailing address was available, an advance letter (see [Appendix IV](#)) describing the nature of the study was mailed to the household. Letters were mailed for 82.8% of eligible NSAP-SN sample cases. The letter reminded recipients that they had completed a prior survey about children's health care and indicated that additional information about their children's health, well-being, and use of services was desired. A toll-free number was provided for those who wished to participate immediately or learn more about the study, and for those who wished to learn more about their rights as a respondent.

Toll-free Telephone Number

A toll-free telephone line was established for NSAP-SN that offered respondents the flexibility to call at their convenience if they had questions about the survey, wanted to complete the interview, or wished to submit feedback on any aspect of the survey. Advance letters, incentive letters, answering machine scripts, and closing scripts referenced the toll-free number, and interviewers provided the number to respondents who requested it during the interview. The telephone line was answered by interviewers trained on NIS who subsequently connected respondents to an NSAP-SN-trained interviewer. During the course of the NSAP-SN data

collection effort, two calls were made to the toll-free line for NSAP-SN, with both cases completing the survey during that toll-free call.

Selection of Sampled Child

In the 2005–2006 NS-CSHCN sample, all households with children under age 18 living or staying in the household were screened for the presence of CSHCN. If a household only had one child with special needs, that child was selected as the focus of the interview by default. In households with multiple children with special needs, one child was randomly selected to be the focus of the detailed interview. During the 2005–2006 NS-CSHCN interview, it was determined if any parent of the selected child was an adoptive parent. To be eligible for NSAP-SN, no biological parents of the child could be living in the household (to exclude stepparent adoptions). In addition, the NS-CSHCN interview had to be completed in English. Nine cases were ineligible for NSAP-SN because the NS-CSHCN interview was not completed in English.

Households from the 2005–2006 NS-CSHCN that were identified to be NSAP-SN-eligible (i.e., there was an adoptive parent but no biological parent in the household, the household was English speaking, and the child was under age 18 at re-interview) were recontacted to conduct NSAP-SN on the same selected child.

Selection of Respondent

Participation was limited to the adoptive mother or adoptive father of the selected child. Most often, the mother of the adopted child completed the NSAP-SN interview. The parent who completed NS-CSHCN was most likely to complete NSAP-SN (for 83.6% of completed NSAP-SN interviews), although this was not a requirement of NSAP-SN participation. [Table B](#) shows the frequency distribution of the relationship of study respondents to the sampled child.

Table B. Number and percentage of respondents, by relationship to sampled child

Relationship of respondent to sampled child	Number	Percent
Total	1,007	100.0
Adoptive mother	786	78.1
Adoptive father	221	21.9
Don't know, refused, or missing	0	0.0

Informed Consent

The NSAP-SN informed consent script informed respondents of the voluntary nature of the survey, assured them that their responses would be kept confidential, and indicated that there was no penalty for refusing to answer questions and that participation had no effect on any benefits the family might receive. In addition, the informed consent statement provided information about the expected interview duration. Respondents were also told that they would receive \$25 (or \$30 if the household met certain refusal pattern benchmarks; described in Appendix V) in appreciation of their time. Finally, the respondent was told that the interview might be recorded and monitored by a supervisor for quality purposes.

In accordance with HHS regulations (45 CFR 46), these procedures were reviewed by the NCHS Research Ethics Review Board (ERB) and the NORC at the University of Chicago Institutional Review Board (IRB). Approval for data collection was received in August 2007 from the NCHS ERB and in November 2007 from the NORC at the University of Chicago IRB. The Office of Management and Budget (OMB) control number for this collection of information was 0920-0406.

Assurance of Confidentiality

Participation in surveys conducted by NCHS is voluntary, and information collected on individuals is confidential. For NSAP-SN, an assurance of confidentiality was provided to potential respondents as part of the informed consent procedures. In the CATI system, interviewers acknowledged that they had

read the following statement to respondents:

Before we continue, I'd like you to know that taking part in this research is voluntary. You may choose not to answer any question you don't wish to answer or stop at any time. Whether or not you take part in this survey has no effect on any benefits you may receive and there are no known risks. We are required by Federal law to develop and follow strict procedures to protect your information and use your answers only for statistical research. I can describe these laws if you wish. In appreciation for your time in taking the survey, we will send you \$25/\$30. The survey will take about half an hour. In order to review my work, my supervisor may record and listen as I ask the questions. I'd like to continue now unless you have any questions.

If respondents requested to hear more about the federal laws, they were read the following statements:

The Public Health Service Act is Volume 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. The confidentiality of your responses is assured by Section 308d of this Act and by the Confidential Information Protection and Statistical Efficiency Act. Would you like me to read the Confidential Information Protection provisions to you?

If the respondent indicated that he or she would like to hear the Confidential Information Protection provisions, the interviewer read the following statement:

The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or

agents. By law, every employee of the National Center for Health Statistics, the National Center for Immunization and Respiratory Diseases, and its agent, the National Opinion Research Center, who works on this survey has taken an oath and is subject to a jail term of up to 5 years, a fine of up to \$250,000, or both, if he or she willingly discloses ANY identifiable information about you or your household members.

If respondents had any additional questions or concerns, they were directed to the project website for more information: <http://www.cdc.gov/nchs/slats.htm>.

When NCHS (including its contractors and agents) collects personally identifiable information under a pledge of confidentiality for exclusively statistical purposes, Section 308d of the Public Health Service Act and Section 512b of the Confidential Information Protection and Statistical Efficiency Act (CIPSEA) require that confidentiality be maintained without exception. Violations of CIPSEA are a class E felony, punishable by imprisonment for not more than 5 years, a fine not more than \$250,000, or both. Strict procedures are used by NCHS, its data collection contractors, and other agents to prevent disclosure of confidential data in survey operations and data dissemination.

Interview Length

The average NSAP-SN interview length was 35 minutes, 52 seconds, and the median time was 34 minutes, 36 seconds. Mean and median interview lengths appear in Table C.

Interview Breakoffs

When NSAP-SN interviews were terminated prior to completion, interviewers attempted to convert the incomplete interview into a completed interview using refusal conversion strategies developed for NS-CSHCN and NSAP. By the end of data collection, 48 interviews were completed with households that had initially refused to

Table C. Mean and median length of the NSAP-SN interview (in minutes and seconds)

Section of interview	Interview length	
	Mean	Median
Overall length	35:52	34:36
Section S: Screener	03:26	03:06
Section C: Characteristics	12:41	12:10
Section W: Parent and child well-being	05:28	05:06
Section F: Adoption agreement and postadoption services (financial)	04:39	04:12
Section N: Postadoption support (nonfinancial)	09:32	08:52

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs.

participate (4.8% of completed interviews).

There were 113 households contacted from 2005–2006 NS-CSHCN where NSAP-SN was unable to be completed. It was determined that 49 of the households could not participate in NSAP-SN based on screening criteria (the child had to be less than 18 years old, adopted, and still living with the adoptive parent, and the adoptive parent needed to be able to complete the interview in English). Of the remaining 64 cases, 12 cases broke off before screening was completed, 13 cases broke off after screening but before giving informed consent, and 14 cases gave consent but continued no further. There was little commonality in the location of the questionnaire where the interview was terminated for the remaining 25 breakoff cases.

Incentive Effort

While all NSAP-SN-eligible households were offered an incentive payment of \$25 for participation, households that presented with a certain pattern of nonresponse were offered an additional incentive of \$5 (total incentive of \$30). The NSAP-SN incentive plan was in place shortly after data collection began in February 2008. Respondents who completed the survey on a cell phone were offered an additional \$10 to defray any costs associated with their cell phone usage. A more detailed discussion of the NSAP-SN incentive model, the processes by which incentive-eligible cases were identified and subsequently offered an incentive, and response rates for incentive-eligible cases are included in [Appendix V](#).

Response Rates

[Table E](#) provides the number of completed interviews and unweighted interview completion rates by adoption type. [Table F](#) provides the corresponding weighted interview completion rates. Overall, the project completed 1,007 interviews. Two interview completion rates have been calculated. Interview completion rate I is the ratio of the number of completed interviews to the total sample. Interview completion rate II is an alternative rate using released sample as opposed to total sample and where known out-of-scope cases have been excluded from the released sample count. The weighted interview completion rate, or “cooperation rate,” indicating the response propensity of identified eligible adoptive parents (excluding out-of-scope cases) was 67.3%.

It is important to note the NSAP-SN interview completion rate is only one component of the overall response rate since the NSAP-SN sample originated from adopted children with a complete 2005–2006 NS-CSHCN interview. To obtain the overall response rate, by taking account of nonresponse to NS-CSHCN, the NSAP-SN interview completion rate must be multiplied by the response rate from the 2005–2006 NS-CSHCN. Details on the derivation of the NS-CSHCN response rate, based on

Cases Pending at Close of Data Collection

Of the 1,607 cases in the NSAP-SN sample, 1,120 households were successfully contacted (69.7%). Of the 1,120 households, it was determined that 1,059 could participate in NSAP-SN based on screening criteria. Of these 1,059 households, 1,007 completed the NSAP-SN interview. A partial NSAP-SN complete was defined as a case that completed the interview up to and including question F20 in Section F titled “Adoption Agreement and Post Adoption Services—Financial.” Only one case out of the 1,007 cases included on the final dataset was a partially completed interview. The final case dispositions are shown in [Table D](#).

Table D. Final disposition of the NSAP-SN sample

Final disposition	Number of selected households	Percent of total selected households
Total	1,607	100.0
Not released	31	1.9
Nonresidential	18	1.1
Disconnect	81	5.0
Noncontact	36	2.2
Answering machine	40	2.5
Contact unsuccessful	150	9.3
Internet locating unsuccessful	131	8.2
Household found, screening pending	12	0.7
Household found, not adoptive	13	0.8
Household found, parent(s) deceased	3	0.2
Household found, language ineligible	1	0.1
Household found, child 18 years or older	3	0.2
Household found, child lives elsewhere	29	1.8
Household found, incomplete interview	52	3.2
Household found, partial interview	1	0.1
Household found, full interview	1,006	62.6

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs.

Table E. Number of completed interviews and unweighted interview completion rates, by type of adoption as of the 2005–2006 NS-CSHCN

	International	Foster care	Private	Overall
Total sample size	318	717	572	1,607
Sample released ¹	312	705	559	1,576
Out of scope for interview ²	3	25	21	49
Completed interviews	229	438	340	1,007
	Percent			
Interview completion rate I ³	72.0	61.1	59.4	62.7
Interview completion rate II ⁴	74.1	64.4	63.2	65.9

¹Thirty-one cases were not released because it was known that the selected child would have been aged 18 years and over at the time of the NSAP-SN interview. The NSAP-SN interview was only completed when the selected child was under age 18 years at the time of NSAP-SN screening.

²Cases determined to be out of scope for interview during NSAP-SN screening.

³Interview completion rate I = Completed interviews / Total sample size.

⁴Interview completion rate II = Completed interviews / (Sample released - Out of scope).

NOTE: NS-CSHCN is National Survey of Children with Special Health Care Needs; NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs.

Table F. Weighted interview completion rates, by type of adoption as of the 2005–2006 NS-CSHCN

	International	Foster care	Private	Overall
Weighted interview completion rate I ¹	72.5	60.7	62.4	63.6
Weighted interview completion rate II ²	76.7	63.6	67.0	67.3

¹Weighted interview completion rate I = Weighted count of completed interviews / Weighted count of total sample size.

²Weighted interview completion rate II = Weighted count of completed interviews / Weighted count of (Sample released - Out of scope).

NOTE: NS-CSHCN is National Survey of Children with Special Health Care Needs.

Table G. Unweighted and weighted NSAP-SN overall response rates

	Unweighted	Weighted
NS-CSHCN CASRO response rate	54.2	56.1
NSAP-SN interview completion rate I ¹	62.7	63.6
NSAP-SN interview completion rate II ²	65.9	67.3
NSAP-SN CASRO response rate ³	34.0	35.7
Alternative NSAP-SN CASRO response rate ⁴	35.7	37.7

¹Interview completion rate I = Completed interviews / Total sample size.

²Interview completion rate II = Completed interviews / (Sample released - Out of scope).

³NSAP-SN CASRO response rate = (NS-CSHCN CASRO response rate) * (NSAP-SN interview completion rate I).

⁴Alternative NSAP-SN CASRO response rate = (NS-CSHCN CASRO response rate) * (NSAP-SN interview completion rate II).

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs.

the Council of American Survey Research Organizations (CASRO) guidelines, are available in the NS-CSHCN design and operations report (1). [Table G](#) provides the unweighted and weighted overall response rates using both interview completion rate I and the alternative interview completion rate II. The weighted CASRO response rate for NSAP-SN, excluding out-of-scope cases, was 37.7%. Because of this low overall CASRO response rate, an examination

of the potential for nonresponse bias is presented in [Appendix VI](#).

Efforts to Maximize Response Rates

NSAP-SN worked to encourage respondent participation by informing respondents of the importance of the survey, offering incentives, and allowing respondents to call a toll-free number at their convenience. NCHS and NORC at

the University of Chicago staff conducted ongoing assessments and modifications of the data collection instrument, data collection procedures, and calling rules. Integrated sample management teams focused on NSCH, NSAP, and NSAP-SN met frequently to manage the sample in an effective and efficient manner.

The NSAP-SN production preparations did not involve a pretest as the survey contained minimal changes from the previously fielded NSAP study. After every quarter of data collection, a list of potential changes to the instrument was reviewed and implemented if necessary. These changes were based on analysis of questionnaire breakoffs and reports from interviewers of problem areas within the questionnaire.

NSAP-SN monitored response rates throughout the data collection period. In response to findings of certain nonresponse patterns in NSAP, the NSAP-SN incentive model targeted these nonresponsive subpopulations. All NSAP-SN interviewers were trained refusal converters and attempted to convert nonrespondents by targeting the case-specific source of the refusal based on the case history. More detailed descriptions of the incentive models, the process by which cases were offered an incentive, and important response rates are included in [Appendix V](#).

NSAP-SN maintained a toll-free number and listed the number in all letters to respondents. The toll-free number allowed respondents to participate immediately, ask questions regarding the survey, or obtain additional survey-related information.

Locating Respondents

Numerous locating tactics were explored as an essential part of data collection due to the unpredictable nature of the 3-year-old sample. Locating efforts consisted of several stages: a) identification of cases that qualified for locating, b) generation of leads using Accurint and Internet databases, c) dialing leads in order to identify the correct household, and d) mailing “trying to reach you” letters to nonresponsive households.

Identifying cases qualified for locating

NORC at the University of Chicago began locating activities approximately 3 weeks into the data collection effort. Initial call attempts yielded a number of cases for which NORC at the University of Chicago staff was unable to proceed with the original phone number for various reasons:

- Permanent noncontact households.
- Disconnected number.
- Fast busy.
- Fax or modem.
- Business or government.
- No adult in household.
- No such person in household.
- Number changed.

The submission of cases to Accurint consisted of 217 cases identified as “locating needed” in the early weeks of data collection and 698 persistent noncontact cases (i.e., cases that resulted in noncontact on repeated calls), for a total of 915 cases.

Accurint database searches

Accurint is a locating vendor that maintains a database of public records. Two types of Accurint database searches were conducted. The first was an “initial custom batch reverse search.” The locating effort on NSAP-SN was hampered by the fact that minimum information was available from the 2005–2006 NS-CSHCN:

- RDD phone number from the 2005–2006 NS-CSHCN.
- Respondent name only when an incentive had been paid in 2005–2006.
- Adopted child’s age in months and years at the time of the 2005–2006 interview.
- 2005–2006 adopted child’s name when provided.
- Adopted child’s gender.

Accurint was used to produce a custom batch reverse search that yielded names and addresses of individuals ever associated with the phone numbers in the sample. NORC at the University of Chicago submitted the 915 cases to be run through this batch reverse search. Of

the 915 cases submitted, 782 cases (85%) received reverse search results.

The second type of Accurint database used was a “current batch search.” The name and address information for 776 cases (782 minus 6 with an out-of-range date) retrieved from the custom batch search were then used in running a standard address batch search to find the current name, address, and telephone information for the individuals listed.

Of the 217 cases identified for locating, 69 cases (31.8%) received current batch search results containing a new phone number. All 69 cases were updated in the CATI system to be worked by the telephone interviewers and 28 of these cases completed the NSAP-SN interview. For the remaining 698 cases submitted, current batch search results with a new phone number were received for 69 cases (9.9%). Thirty-one of these cases resulted in a completed interview.

“Trying to reach you” letters

A “trying to reach you” letter (shown in [Appendix IV](#)) was mailed to households when Accurint produced a mailing address but no new telephone number after unsuccessful contact using the 2005–2006 NS-CSHCN sampled telephone number. This letter explained that attempts were made to contact the household via telephone to complete the NSAP-SN interview. It also briefly described NSAP-SN and included an FAQ section on the survey. In this way, the letter served as an additional method of locating the household. Of 84 cases that were mailed a “trying to reach you” letter, two respondents contacted the 1–800 line and completed the survey. An additional 14 completes were achieved among these 84 cases through Internet locating.

Locating protocol

Cases being located were updated based on phone number information returned from the locating batch searches. Those cases were then delivered to the telephone interviewers and dialed. Appropriate status codes were assigned to each case as it was dialed.

A separate group of cases was identified for Internet locating. A special team of seven locators was specially trained to work through these cases methodically and find the respondents’ most recent information.

Locators followed a protocol that allowed them to work through the cases efficiently and focus their efforts on cases that were more attainable.

Locators used a combination of Web searches and vendor batch searches. If this information did not lead to the 2005–2006 respondent, the case was designated “unlocatable.”

While dialing leads, locators used one of the following introductions:

“Hello. My name is _____, and I’m calling from the National Opinion Research Center at the University of Chicago. I’m trying to locate [2005–06 parent]. Does [he/she] live here?”

OR

“Hello. My name is _____, and I’m calling from the National Opinion Research Center at the University of Chicago. In 2005, we may have conducted a survey with an adult in this household about the health care of a child who was approximately [AGE] years old. The child would now be about [AGE PLUS 2 to AGE PLUS 3 years]. If possible, I’d like to speak with that child’s [MOTHER/FATHER] now. Is [he/she] AVAILABLE?”

After the introduction, locators followed a script that guided them through the different scenarios encountered during locating:

- If the respondent was confirmed and available, the locator immediately attempted to complete the interview.
- Appointments were scheduled to call back households that were confirmed to be the target household but the respondent was unavailable.
- If the respondent did not live in the household but the informant knew the respondent, locators probed to obtain new address and phone information.

If the informant refused to give out the information, the locator left the project’s toll-free number and asked that it be passed along to the respondent.

Throughout the locating effort, locators were careful not to mention adoption or that the child was adopted until the respondent was confirmed as the adoptive parent of the child. This was done to prevent the accidental disclosure of adoptive status to any person in the household unaware of the child's adoptive status.

Quality Control

Quality Control of Interviewing

Telephone center supervisors were available to the interviewing staff at all times to resolve any questions or concerns about a case. Supervisors regularly observed the data collection process to monitor interviewers informally. In addition, supervisory staff used remote telephone- and computer-monitoring technology to evaluate whether interviewers performed according to project specifications. This formal monitoring was conducted to ensure that introductory materials were properly read, that item wording and sequence of the questionnaire were followed correctly, that respondent questions were answered properly, and that any vague responses were properly probed. Computer monitoring also allowed supervisors to ascertain whether answers were entered accurately into the CATI system.

All supervisors attended an 8-hour training session that introduced them to the Monitoring Evaluation Form, the Monitoring Database where forms are filled out electronically, and the Monitoring Selection Database where telephone interviewers are prioritized and selected for monitoring. In addition to learning these basics of how to monitor, supervisors participated in an exercise to learn the basics of giving effective feedback and coaching interviewers. After this training session, each new supervisor was scheduled for 1 week to conduct dual-monitoring sessions with experienced staff. In these

sessions, the new monitors observed live monitoring side by side with an experienced monitor, and each completed a Monitoring Evaluation Form. At the end of each session, they compared notes and discussed proper scoring guidelines and strategies for giving feedback. These strategies ensured that all supervisors were evaluating interviewers using the same criteria.

To avoid bias in selecting whom to monitor, the CATI monitoring system automatically selected which interviewers to monitor and gave newly trained interviewers—those with the fewest monitoring sessions or those with the weakest performance reviews—the highest priority for selection. Experienced interviewers were prioritized for monitoring based upon the length of time since their last monitoring session and recent monitoring scores. Each interviewer was typically monitored at least once a week; however, some were monitored more often.

Throughout, data collection interviews were recorded (after gaining agreement from respondents). These recordings were valuable tools for trainings, as well as for providing feedback to interviewers on specific case-related performance. The recordings were kept for four quarters of data collection and then deleted.

Data Quality Control

The CATI system was programmed to help ensure complete and accurate data collection using automated data-checking techniques such as response-value range checks and consistency edits during the interview process. These features enabled interviewers to obtain needed clarifications while still on the telephone with the respondent. Throughout data collection, interview data were reviewed for consistency between fields, appropriate response-value ranges, skip logic patterns, and missing information.

Weighting and Estimation Procedures

This section provides a nontechnical overview of the weighting procedures for the NSAP-SN sample. A more detailed and technical description can be found in [Appendix I](#).

Base Weight

Because the sample for NSAP-SN was obtained by including all English-speaking, adopted children aged 0–15 years as of the 2005–2006 NS-CSHCN, the base weights for NSAP-SN are the final weights for the 2005–2006 NS-CSHCN. The final NS-CSHCN weights were derived by applying adjustments to account for nonresponse, for households with multiple telephone numbers, and for noncoverage of children in households without landline telephones, as well as adjustments to known population control estimates. For a detailed description of the derivation of the NS-CSHCN final weights, readers are referred to the 2005–2006 NS-CSHCN design and operations report (1).

Adjustment for Incomplete Interviews

To compensate for interview nonresponse, an adjustment is made to the base weights of the interview-completed cases. The adjustment factors are computed by forming adjustment cells using the following variables listed in order of priority:

- Census region.
- Type of adoption.
- Age group (at the time of the 2005–2006 NS-CSHCN interview).
- Race/ethnicity.

Within each adjustment cell, the adjustment factor is computed as the ratio of the sum of base weights for all cases in the adjustment cell to the sum of base weights for all interview-completed cases in the adjustment cell.

For interview-completed cases, the interview weight is obtained by multiplying the base weight and the adjustment factor.

Raking Adjustment to External Control Totals

There are no external control totals available for NSAP-SN target children. As the only source available is the 2005–2006 NS-CSHCN, the control totals for NSAP-SN are obtained from 2005–2006 NS-CSHCN estimates.

The raking adjustment of the weights is such that at the national level, for the following margins, the sum of the weights agrees with the control totals for:

- Census region.
- Number of male and female children within each of four age groups.
- Number of children in age group by type of adoption.
- Race/ethnicity.
- Number of children in the household by grouped highest reported education in the household.
- Number of children in the household by grouped household income.

For each interview-completed case, the raking adjusted weight is the final NSAP-SN weight.

Quality Control

Staff compared the formulas for the weights and adjustments developed by the sampling statistician with the actual weights and adjustments constructed by the statistical programmer. An independent check was performed on the programmer's implementation of the statistician's weighting specifications.

Imputation of Relevant Variables

Because NSAP-SN cases are a subset of 2005–2006 NS-CSHCN cases, for variables that need to be imputed in the weighting process, imputed values from the 2005–2006 NS-CSHCN were used. Hence, no new imputation was necessary.

Public-use Data File

One public-use data file was created using SAS version 9.1. The file included data from complete interviews (complete through Section F: Adoption Agreement and Post Adoption Services—Financial) that were conducted in 2008. In order to maintain confidentiality, certain variables that could be used to identify respondents were excluded from the file.

This file contains data on adopted child and family characteristics, parent and child well-being, adoption agreement and postadoption financial services, and postadoption nonfinancial support. There is one record for each child. Of the 1,007 records, 1,006 cases completed the full interview, and 1 case is a partially completed interview. Four of the records represented CSHCN whose parents were interviewed in Louisiana prior to Hurricane Katrina in August 2005 and were subsequently dropped from the NS-CSHCN data so that the Louisiana data for 2005–2006 would reflect the post-Katrina population of CSHCN in the state [for more information, see the 2005–2006 NS-CSHCN design and operations report (1)]. Because these cases have a NS-CSHCN final weight value of zero and all weighting adjustments are multiplicative, the final NSAP-SN weight value for these cases is also zero. With these four cases dropped from the file, the final NSAP-SN data file contains 1,003 records.

Editing

As discussed in the data quality control section, the CATI system was designed to perform edits as an interviewer entered data into the computer system. To prevent interviewer error, the CATI system was developed to include range and consistency checks. If an interviewer entered a value that was out of range, a warning screen appeared, instructing the interviewer that the value was not accepted and that he or she had to reenter the response to the question. For example, the acceptable range for C1A, "How old was [S.C.] when [his/her] adoption was finalized?" is from 0 to 17 years, 0 to 12 months,

and 0 to 52 weeks. If an interviewer entered a value outside these ranges, such as 13 months or greater, a warning screen would appear saying "Please, enter value between 0 and 12." Another consistency check also had to do with the child's age at adoption finalization. For example, a respondent might mistakenly report or the interviewer might mistakenly enter the child's age at adoption as older than the child's current age. In that event, a consistency check would appear indicating the discrepancy: "[S.C.]'s age when [his/her] adoption was finalized must be less than or equal to child's age." Even with many built-in CATI checks, data cleaning was still necessary. Invalid values were deleted and missing values were investigated. On rare occasions, certain data were not collected correctly, but based on related questions, the missing data could be determined. An important part of data cleaning was ensuring that the child identified for the interview was the selected child from the 2005–2006 NS-CSHCN interview and that the child's type of adoption was correct. Finally, missing data had to be determined to be the result of a legitimate skip, a partially completed interview, or data that actually were missing in error. Questionnaire variables in the public-use file that have been altered in any way after data collection, either due to cleaning or other editing steps described below, had the letter "R" appended to the variable name to denote "recode."

Missing Data

Missing data are not desirable when doing analyses and are often ignored completely by data analysts. However, it is very helpful to know why data are missing. The following codes have been used in the interview file to give analysts as much information as possible on why certain data are missing.

(.A) Added question. Variable is missing because this question was added after the start of data collection and the interview was conducted before the question was added.

(.D) Deleted question. Variable is missing because this question was

removed after the start of data collection and the interview was conducted after the question was deleted.

(.L) Legitimate skip. Variable is missing due to valid questionnaire paths based on a previous answer to a root question.

(.M) Missing in error. Variable is missing due to interviewer or system errors. In cases of interviewer error, the interviewer may have deleted the data by accident or simply may have not answered the question. In cases of system error, the data may not have been collected or saved properly after they were entered by the interviewer in the CATI system.

(.P) Partially completed interview. Variable is missing because the respondent hung up after completing Section F but before completing the full interview.

Derived variables do not include the detailed coding of missing data. Missing values for derived variables received an “.M” code regardless of the reason for the missing data.

Coding of Verbatim Answers Into Question Responses

For many questions in the NSAP-SN interview, respondents provided a response that did not match any preexisting category. If this occurred, the interviewer chose “other” and typed in the response provided by the respondent. At the end of the data collection period verbatim responses were recoded into existing response categories where appropriate.

There were three ways in which verbatim responses were used to recode or back-code data:

- Some verbatim responses were back-coded to existing response categories on the preceding question.
- Some verbatim responses were used to create new response categories for the preceding question, which are indicated by new dummy variables.
- Some verbatim responses were used to create new variables to capture

the data because no root question existed for which to create new categories or back-code verbatim responses into preexisting categories.

More detail about coding of verbatim responses is provided in [Appendix VII](#).

Edits to Protect Confidentiality

NCHS takes extraordinary measures to assure that the identities of survey subjects cannot be disclosed. The risk of inadvertent disclosure of confidential information regarding individual respondents is higher with a publicly released dataset having detailed geography variables, a detailed and extensive set of survey observations, and a sizable proportion of the total population of interest. Coarsening a dataset by suppressing survey variables, collapsing multiple variables into one, collapsing response categories for other variables, or introduction of noise in the data are common techniques to reduce the risk of inadvertent disclosure.

NSAP-SN data face a special challenge in assuring the confidentiality of respondents. The base survey data from NS-CSHCN include state identifiers on the public-use file. NSAP-SN’s national sample size of 1,003 is too small to release state identifiers, as the risk of disclosure would be increased. This also means that the public-use NSAP-SN data cannot be linkable to the public-use NS-CSHCN data, as such linkage would allow the state identifiers to be attached to the NSAP-SN data file.

To prevent the linkage of the public-use files for NSAP-SN and NS-CSHCN, the following steps were taken: for all NS-CSHCN variables that were included on the NSAP-SN public-use file (n), and all common data elements that exist on both public-use files (m), ($n + m$)-way cross-tabulations were examined to identify any NSAP-SN case with a particular combination of characteristics that could be uniquely matched to an NS-CSHCN case with the same combination of characteristics. Whenever five or fewer NS-CSHCN cases existed as potential

matches to a single NSAP-SN case, the NS-CSHCN and NSAP-SN sampling weights were examined to determine if differences in the order of magnitude in sampling weights could be used to conclusively identify which of the five or fewer cases was the exact match to the NSAP-SN case (although the NSAP-SN sampling weight does not equal the NS-CSHCN sampling weight, a hypothetical single NSAP-SN case with an NSAP-SN weight of 65 that had two potential matching NS-CSHCN cases, with NS-CSHCN sampling weights of 60 and 2,500, respectively, could be deduced to match to the first of those two NS-CSHCN cases).

To mask three cases in which the child had not yet reached age 3 by re-interview, the age of the child at NSAP-SN interview was collapsed such that children aged 2 were grouped with children aged 3. To reduce the number of ($n + m$)-common data elements that could be used to match records between the two public-use files, household income relative to the federal poverty level (FPL) was collapsed to five categories (0%–100% of FPL; greater than 100%–200%; greater than 200%–300%; greater than 300%–400%; greater than 400%) in the NSAP-SN file.

NSAP-SN variables C8A, C8C, C9A, C9C, and C9E (which indicate the exact number of children of various types in the household) and variables indicating the specific race and ethnicity of both the respondent and the respondent’s spouse or partner (N24, N24A, N25, and N25A) were dropped from the NSAP-SN public-use file to prevent them being used to specifically identify a household based on detailed family structure. Variables indicating whether the sample child had had any biological children (C52) and the age of the child when action to end the adoption was taken (W20B) were dropped from the NSAP-SN public-use file because they were extremely rare, and potentially observable. Additionally, a few records were perturbed as described below. These edits ensure that no NSAP-SN case in the public-use file can be matched to its respective NS-CSHCN record in the NS-CSHCN public-use file with certainty.

Geography

NSAP-SN public-use data contains no geographic identifiers of any kind. Although the state is identified on the NS-CSHCN public-use file, it is not possible to match NSAP-SN respondents to their respective NS-CSHCN records using only the NSAP-SN and NS-CSHCN public-use files.

Race

NS-CSHCN question CW10Q02 asked about the sample child's race. Respondents were permitted to identify all possible categories that described the child's race. If a race other than one of the seven existing categories was indicated, then a verbatim response was captured. Verbatim responses were reviewed and matched against a database of alternative race terminology maintained by the U.S. Census Bureau. Where possible, "other" race responses were back-coded into one of the seven existing categories. Once all possible verbatim responses were back-coded, a new race variable was created by collapsing the seven categories into six categories: White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, and Multiple Race. Multiple Race was reserved for those cases where more than one of the other five categories applied. If the respondent did not know or refused to provide the race, then race was coded as missing. Cases where a verbatim response could not be conclusively back-coded (e.g., American, Indian, Jewish) and no other race was reported were also coded as missing.

To reduce the number of common data elements and prevent the matching of NSAP-SN records to their respective NS-CSHCN records, race was combined with Hispanic ethnicity for the NSAP-SN public-use file, as described below for derived variable HISPRACE.

Top-coded and collapsed variables

Several other variables were top-coded to conceal the values of

outliers at the high end of the distribution of responses or collapsed to coarsen the detail of the measurement. Due to their unusual characteristics, records including this detail might have been more readily identifiable.

- Age at NSAP interview (AGEYRNSAP) had three cases with age = 2 collapsed with age 3.
- The country of origin (S1_NR) was collapsed such that countries other than China, Russia, Guatemala, and South Korea are grouped by continent: Other: Asia, Other: Europe, and Other.
- The time between when the child was placed in the home and when adoption became the case goal (S11_MONTHS) was measured in months, and 60 months or more was the maximum reported.
- The child's age when the adoption was finalized (C1AR) was collapsed into the following categories: 0 years, 1 year, 2 years, 3 years, 4–5 years, 6–7 years, 8–10 years, 11 years and over.
- The child's age when first placed in the home (C1BR) was collapsed into the following categories: 0 years, 1 year, 2–3 years, 4–5 years, 6–8 years, 9 years and older.
- Responses of "another adoptive family" and "a residential treatment facility" for the place where the child lived prior to placement (C2_NR) were collapsed with "other."
- For respondents who were themselves adopted as children, the respondent's age at adoption (C15A_MONTHS) was measured in months, and 120 months or more was the maximum reported.
- For respondents' spouses or partners who were themselves adopted as children, the respondent's spouse's or partner's age at adoption (C15C_MONTHS) was measured in months, and 48 months or more was the maximum reported.
- For the number of postadoption reports filed (C25AAR), 20 or more was the maximum reported.
- For the first language the child spoke (C53R), Korean and

Ukrainian were collapsed into "other."

- For the number of times the child has lived outside the home for 2 weeks or more (W17AR), 10 or more was the maximum reported.
- The adoption subsidy monthly dollar amount (F4R) was collapsed into the following categories: \$0–\$300, \$301–\$400, \$401–\$500, \$501–\$600, \$601–\$750, \$751–\$1,000, and greater than \$1,000.
- Respondent's (N23R) and respondent's spouse's or partner's (N23AAR) years of birth were collapsed into the following categories: before 1950, 1950–1954, 1955–1959, 1960–1964, 1965–1969, and after 1969.
- The calculated year of adoption (YR_ADOPT) was collapsed into eight categories: 1990–1992, 1993–1995, 1996–1997, 1998–2000, 2001–2002, 2003–2004, 2005–2006, and 2007–2008.

Data perturbations

Because there were no cases where a single NSAP-SN case had five or fewer potential NS-CSHCN matches based on common data elements such that it was possible to discern which of the five was the correct match based on examination of the sampling weights, it was not necessary for additional data perturbation to prevent the matching of records.

Analysts interested in working with data that were suppressed, coarsened, or otherwise perturbed to protect confidentiality may apply to access unmodified data files through the NCHS Research Data Centers (RDCs). These facilities are located at NCHS headquarters in Hyattsville, Maryland, a Washington, D.C. suburb, and in Atlanta, Georgia, CDC's home base. Data files housed in an RDC may also be accessed remotely via e-mail or through affiliated U.S. Census Bureau RDCs, but the initial proposal to access NSAP-SN data must be submitted to the NCHS RDC. Analysts should visit their website at <http://www.cdc.gov/rdc/> for more information.

Derived Variables

A number of derived variables appear on the public-use data file. The definitions of these variables are provided below. Derived variables from the NS-CSHCN interview that were appended to the NSAP-SN public-use file are also included.

ADOPT_TYPE—Based on NS-CSHCN variables C10Q04 and C10Q05 and indicates the selected child’s type of adoption (international, foster care, or private domestic). While this information was collected during the 2005–2006 NS-CSHCN interview, this variable reflects any updates as of the NSAP-SN interview (24 cases were affected as described below).

AGEYRNSAP—Based on NSAP-SN variable AGE and is a collapsed version of child’s age at NSAP-SN interview in categories of whole years of age: 2–3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, and 17.

ANYSIBS—Based on NS-CSHCN variable TOTKIDSR, which gives the total number of children under age 18 years in the household. ANYSIBS indicates if there are any other children in the household (= 1) or not (= 0).

C15A_MONTHS—Based on NSAP-SN variables C15A_YEAR and C15A_MONTH, which give the respondent’s age at adoption, for cases in which the adult respondent was also adopted as a child. C15A_MONTHS is measured in months, and top-coded at 120 months or more.

C15C_MONTHS—Based on NSAP-SN variables C15C_YEAR and C15C_MONTH, which give the respondent’s spouse’s or partner’s age at adoption, for cases in which the respondent’s spouse or partner was also adopted as a child. C15C_MONTHS is measured in months, and top-coded at 48 months and over.

HISPRACE—Based on CW10Q01 and C1002X01 through C1002X08 from NS-CSHCN, including responses back-coded from the verbatim variable CW10Q02A and indicates whether or not the child is of Hispanic or Latino origin, and if not, indicates the race of

the child. If the child is of Hispanic or Latino origin, then HISPRACE = 1. If the child is not of Hispanic or Latino origin, then HISPRACE specifies the race of the selected child as of one of four categories: non-Hispanic white only (= 2), non-Hispanic black only (= 3), non-Hispanic Asian only (= 4), and non-Hispanic other (= 5), including American Indian only, Alaska Native only, Native Hawaiian only, Pacific Islander only, other unknown, or multiple races. Twenty cases of “don’t know” or “refused” responses were replaced with imputed values for the NSAP-SN public-use file.

POVLEVEL5—Is a collapsed version of NS-CSHCN-derived variable POVLEVEL, which is based on total household members (C11Q01_A) and the household income value. If data for either of these two components are missing, refused, or had a “don’t know” response, this variable is assigned a missing value. Once an income-to-household-size measure is computed, it is compared with HHS poverty guidelines. [Appendix VII](#) of the NS-CSHCN design and operations report details the derivation of POVLEVEL (1). POVLEVEL5, released on the NSAP-SN public-use file, collapses POVLEVEL into the following five categories: 0%–100% of the FPL, greater than 100%–200% FPL, greater than 200%–300% FPL, greater than 300%–400% FPL, and greater than 400% FPL.

S11_MONTHS—Based on NSAP-SN variables S11_Y and S11_M, which give the span between the time the child was placed in the home and when adoption became the case goal. S11_MONTHS is measured in months and top-coded at 60 months and over.

SEX—Based on NS-CSHCN variable C2Q03 and specifies the gender of the child. Three cases of “don’t know” or “refused” responses were replaced with imputed values for the NSAP-SN public-use file.

TRANSRACE—Based on NSAP-SN variables C17_N and C17_A and indicates whether or not the child’s race/ethnicity differs from the

race/ethnicity of both parents or differs from the race/ethnicity of the single parent.

YR_ADOPT—Derived from the date of NSAP-SN interview and the child’s reported age at adoption and age in months at interview. The number of months between the date of adoption and the date of interview were obtained by comparison of the child’s age in months at adoption and age in months at interview, and was subtracted from the century-month code (CMC) of the date of interview to derive CMC of the date of adoption. This variable was collapsed as eight categories: 1990–1992, 1993–1995, 1996–1997, 1998–2000, 2001–2002, 2003–2004, 2005–2006, and 2007–2008.

Dummy Variables

When respondents were permitted to provide multiple answers for the same question, a variable was created for each possible answer. The values for these new dummy variables are “yes, this answer was given” and “no, this answer was not given.” When respondents could not or did not provide an answer to the question, a value of “don’t know” or “refused” was reported for each of the dummy variables.

Variable	Dummy variable
C10_N	C10_NX01 to C10_NX03
W20A	W20AX01 to W20AX03
N1D	N1DX01 to N1DX06
N2BA	N2BAX01 to N2BAX08
N2D	N2DX01 to N2DX05
N3B	N3BX01 to N3BX07
N3D	N3DX01 to N3DX05
N5D	N5DX01 to N5DX09
N5F	N5FX01 to N5FX05
N6B	N6BX01 to N6BX09
N6D	N6DX01 to N6DX07
N7B	N7BX01 to N7BX07
N7D	N7DX01 to N7DX07
N8B	N8BX01 to N8BX08

N8D	N8DX01 to N8DX07
N9B	N9BX01 to N9BX08
N9D	N9DX01 to N9DX06
N10BB	N10BBX01 to N10BBX08
N10D	N10DX01 to N10DX07
N11B	N11BX01 to N11BX07
N11D	N11DX01 to N11DX07
N12B	N12BX01 to N12BX07
N12D	N12DX01 to N12DX07
N14BB	N14BBX01 to N14BBX08
N14D	N14DX01 to N14DX07
N18B	N18BX01 to N18BX07
N18D	N18DX01 to N18DX05
N24A	N24AX01 to N24AX08
N25A	N25AX01 to N25AX08

Additional Data Notes

There were 24 cases for which a change was made to the case's original ADOPT_TYPE assignment because information regarding the type of adoption provided by the respondent during the NSAP-SN interview conflicted with similar information provided during the NS-CSHCN interview. Derived variable ADOPT_TYPE reflects the later value for these cases.

Values of the child's age at the time of NSAP-SN were updated for two cases during data cleaning. Variables were set to "missing in error" as needed when updated age no longer corresponded with age-based skip patterns.

As the result of a system error, eight cases have C9E set to "missing in error."

During NSAP-SN data collection it was discovered that the mental health medication questions (F16A_A–F16A_EA) were being asked if the child had ever taken mental health medications. However, the questions should only have been asked if the child had taken such medication in the previous 12 months. Variable F16_A_FLAG identifies cases where the respondent indicated that the child had not taken mental health medications in

the previous 12 months. There are 11 such cases.

Quality Control

A team of programmers and project staff was responsible for cleaning data at the end of data collection. The cleaned data were also thoroughly checked by other project staff. Below is a brief description of the steps involved in producing the final data file.

Using the questionnaire specifications, project staff produced several computer programs to review the data and identify data items that required cleaning. These programs were also used during data collection to monitor production. The programming team developed cleaning programs so that the resulting cleaned data file could be replicated and reviewed by others. These programs applied any final data corrections based on data recovery, checked that skip patterns were followed, created derived variables from questionnaire variables, and assigned special codes to reflect various missing data.

Project staff then ran several quality control checks on the cleaned data file. Project staff cross-checked the cleaned file against an independently prepared data file. Variable frequencies were reviewed to confirm skip patterns, missing code assignments, and expected distributions. Derived variable specifications and computations were carefully reviewed. Variable labels were compared against the questionnaire to confirm accurate label assignments.

The cleaning programs were run on each new version of the data file until no problems were identified in the quality control checks. The reviewer then signed off on the data file. Finally, senior project management reviewed the data file and supporting documents.

Estimation and Hypothesis Testing

The NSAP-SN data were obtained through a complex sample design involving the selection of a single child with special health care needs per

household and stratification of households within states. To produce estimates that are nationally representative of adopted CSHCN, sampling weights must be used. These sampling weights account for the unequal probabilities of selection for households and children, and they include adjustments for multiple-telephone households, unit nonresponse, and noncoverage of nontelephone households and households without landline telephones, as well as adjustments to known population control estimates. As described earlier, the sampling weights for NSAP-SN respondents have further been adjusted for nonresponse to NSAP-SN and readjusted to population control estimates for adopted CSHCN derived from the 2005–2006 NS-CSHCN. Estimates based on the sampling weights generalize to the U.S. population of adopted CSHCN who were aged 0–15 years in 2005–2006 and living in households where English is spoken. These estimates do not generalize to the population of adoptive parents, or the population of adoptive mothers, or the population of adopted children's health care providers.

Variables Used for Variance Estimation

The sample design of NSAP-SN is complex, and the interview records have unequal weights, so statistical software that assumes simple random sampling will most often compute standard errors that are too low. Tests of statistical hypotheses may suggest statistically significant differences or associations that are misleading. Computer programs are available that provide the capability of variance estimation for complex sample designs (e.g., SUDAAN, Stata, WesVar). To provide the user with the capability to estimate the complex sample variances for the NSAP-SN data, stratum and primary sampling unit (PSU) identifiers have been provided on the data file. These variables and the sample weights are necessary to properly calculate variances.

The stratum identifiers reported on the dataset are not identical to the strata

used to draw the main sample. In states with multiple estimation areas, independent samples were drawn from each estimation area in proportion to the total number of households with children in each estimation area. Therefore, these estimation areas should be considered strata for variance estimation. However, disclosure of the specific estimation area for each child could increase the risk of disclosure of a respondent's or child's identity. In the absence of estimation-area-specific identifiers, the NS-CSHCN collapsed stratum identifier is the state identifier. By using the state identifier rather than the suppressed estimation area identifier, the standard errors for national and state estimates with key variables are affected only slightly and not in a consistent direction.

The NSAP-SN sample size of 1,003 is considerably smaller than the NS-CSHCN sample size of 40,723, and the former is too small to allow for the release of state identifier, as the risk of disclosure of a respondent's or child's identity would be increased. Therefore, the NSAP-SN collapsed stratum identifier (PSUID) collapses the 51 strata for the 50 states plus Washington, D.C., into 10 categories. The categories were determined by rank ordering the 51 strata by average sampling weight, and dividing the 51 strata into 10 strata by whole state. Nine categories contain five strata and one category contains six strata. By using this collapsed stratum identifier rather than the suppressed state identifier, the standard errors for national estimates and for estimates by adoption type with key variables are affected only slightly and not in a consistent direction. Households were sampled within strata, and the unique household identifier is called NSAPSNID.

The overall number of persons in this survey is sufficient for many statistical inference purposes. However, analyses of some rare responses and analyses of subclasses can lead to estimates that are unreliable. Small sample sizes used in the variance calculations may also produce unstable estimates of the variances. Consequently, these analyses require that

the user pay particular attention to the variability of estimates of means, proportions, and totals.

Variance Estimation Using SUDAAN or Stata

Standard errors of estimates from NSAP-SN can be obtained using the Taylor Series approximation method, available in software such as SUDAAN, SAS, and Stata. The stratum should be identified by the variable PSUID, and the household should be identified by the variable NSAPSNID.

The simplifying assumption that households have been sampled with replacement allows most complex survey sample design computer programs to calculate standard errors in a straightforward way. This method requires no recoding of design variables, but it is statistically less efficient (and therefore more conservative) than some other methods. For SUDAAN, the data file needs to be sorted by stratum (PSUID) and household (NSAPSNID). The following SUDAAN design statements are used for analyses:

- PROC ... DESIGN = WR;
- NEST PSUID NSAPSNID;
- WEIGHT NSAPSNWT;

For Stata, the following design statements are used:

- svyset strata PSUID.
- svyset psu NSAPSNID.
- svyset pweight NSAPSNWT.
- svyset.

Other variance estimation procedures are also applicable to NSAP-SN. Specifically, the jackknife method with replicate weights and the bootstrap resampling method with replicate weights can also be used (via software such as WesVar) to obtain standard errors that fully reflect the impact of the weighting adjustments on standard errors.

Variance Estimation for Subsets of the Data

Many analyses of the NSAP-SN data will focus on specific population

subgroups, such as CSHCN adopted internationally or adopted CSHCN living with a single parent. Some analysts will therefore be tempted to delete all records outside of the domain of interest in order to work with smaller data files and run computer jobs more quickly. This procedure of keeping only selected records and list-wise deleting other records is called subsetting the data. Subsetted data that are appropriately weighted can be used to generate correct point estimates (e.g., estimates of population subgroup frequencies or means), but most software packages that analyze complex survey data will incorrectly compute standard errors for subsetted data. When complex survey data are subsetted, the sample design structure is often compromised because the complete design information is not available. Subsetting the data can delete important design information needed for variance estimation (e.g., deleting all records for certain subgroups may result in entire PSUs being removed from the design structure). Typically, the standard errors for subsetted data will be inflated, resulting in a higher probability of type-II error (i.e., failing to detect significant differences that do in fact exist). SUDAAN has a SUBPOPN option that allows the user to target specific subpopulations for analysis while retaining the full unsubsetted dataset that includes the full sample design information. Analysts interested in specific subpopulations must use SUBPOPN with the full sample data rather than subsetting the dataset.

Weighted Frequencies, Prevalence Estimates, and Standard Errors

Weighted frequencies of adopted CSHCN by adoption type, with standard errors calculated using the Taylor Series approximation method in SUDAAN, appear in [Appendix VIII](#). Analysts may wish to replicate this table to determine if they are using the weights and sample design variables correctly.

Guidelines for Data Use

With the goal of mutual benefit, NCHS requests that users of data files cooperate in certain actions related to their use. Any published material derived from the data should acknowledge NCHS as the original source. The suggested citation, “SOURCE: CDC/NCHS, National Survey of Adoptive Parents of Children with Special Health Care Needs, 2008” should appear at the bottom of all tables. Published material derived from the data should also include a disclaimer that credits any analyses, interpretations, or conclusions reached to the author and not to NCHS, which is responsible only for the initial data. Consumers who wish to publish a technical description of the data should make a reasonable effort to ensure that the description is not inconsistent with that published by NCHS.

CIPSEA and the Public Health Service Act (section 308d) provide that these data collected by NCHS may be used only for the purpose of statistical reporting and analysis. Any effort to determine the identity of any reported case is prohibited by these laws. NCHS takes extraordinary measures to assure that the identity of survey subjects cannot be disclosed. All direct identifiers, as well as any characteristics that might lead to identification, have been omitted from the dataset. Any intentional identification or disclosure of a person or establishment violates the assurances of confidentiality given to providers of the information. Therefore, users must:

- Use the data in this dataset for statistical reporting and analysis only.
- Make no use of the identity of any person discovered, inadvertently or otherwise, and advise the NCHS Director of any such discovery (301–458–4500).
- Not link this dataset with individually identifiable data from any NCHS or non-NCHS data sources.
- Use of the dataset signifies users’ agreement to comply with the above-stated statutory-based requirements.

Further Information

Data users can obtain the latest information about SLAITS by periodically checking the SLAITS website at <http://www.cdc.gov/nchs/slaits.htm>. This site features downloadable data files and documentation for SLAITS modules, as well as important information about any modifications and updates to data or documentation. Data users will also find current contact information if there are any additional questions. Data users with questions may also send e-mail to slaits@cdc.gov.

Researchers may also wish to join the SLAITS e-mail listserv. To subscribe or unsubscribe, visit http://www.cdc.gov/nchs/slaits/slaits_listserv.htm and follow the directions listed. The listserv has approximately 1,000 subscribers around the world who use SLAITS data or are interested in SLAITS. Subscribers periodically receive e-mail containing news about SLAITS surveys (e.g., new releases or modifications to existing data), publications, or related conferences. The listserv is moderated and listserv membership is private.

For more information on CDC, you may contact CDC’s Information Contact Center (CDC-INFO) in English or Spanish by calling 800–CDC–INFO (800–232–4636) or e-mailing cdcinfo@cdc.gov. Persons with hearing impairment may contact CDC-INFO with a TTY machine at 888–232–6348. The CDC-INFO fax machine line is 770–488–4760. Please note, however, that CDC-INFO cannot respond to questions about individual medical cases, provide second opinions, or make specific recommendations regarding therapy. These issues should be addressed directly with personal health care providers.

References

1. Blumberg SJ, Welch EM, Chowdhury SR, et al. Design and operation of the National Survey of Children with Special Health Care Needs, 2005–2006. National Center for Health Statistics. *Vital Health Stat* 1(45). 2008.
2. Blumberg SJ, Foster EB, Frasier AM, et al. Design and operation of the National Survey of Children’s Health, 2007. National Center for Health Statistics. *Vital Health Stat* 1. Forthcoming.
3. Bramlett MD, Foster EB, Frasier AM, et al. Design and operation of the National Survey of Adoptive Parents, 2007. National Center for Health Statistics. *Vital Health Stat* 1(50). 2010.
4. Blumberg SJ, Olson L, Osborn L, et al. Design and operation of the National Survey of Early Childhood Health, 2000. National Center for Health Statistics. *Vital Health Stat* 1(40). 2002.
5. Blumberg SJ, Olson L, Frankel M, et al. Design and operation of the National Survey of Children with Special Health Care Needs, 2001. National Center for Health Statistics. *Vital Health Stat* 1(41). 2003.
6. Blumberg SJ, Olson L, Frankel MR, et al. Design and operation of the National Survey of Children’s Health, 2003. National Center for Health Statistics. *Vital Health Stat* 1(43). 2005.
7. O’Connor KS, Osborn L, Olson L, et al. Design and operation of the National Asthma Survey. National Center for Health Statistics. *Vital Health Stat* 1(46). 2008.
8. McPherson M, Arango P, Fox H, Lauver C, McManus M, Newacheck PW, et al. A new definition of children with special health care needs. *Pediatrics* 102(1 Pt 1):137–40. 1998.
9. NORC at the University of Chicago. 2007 methodology report: National Immunization Survey. Chicago, IL: NORC. 2008.
10. Zell ER, Ezzati-Rice TM, Battaglia MP, Wright RA. National Immunization Survey: The methodology of a vaccination surveillance system. *Public Health Rep* 115(1):65–77. 2000.
11. Lepkowski JM. Telephone sampling methods in the United States. In: Groves RM, et al. (Eds.), *Telephone Survey Methodology*. New York, NY: John Wiley and Sons. 1988.
12. Blumberg SJ, Luke JV, Cynamon ML, Frankel MR. Recent trends in household telephone coverage in the United States. In: Lepkowski JM, et al. (Eds.), *Advances in Telephone Survey Methodology* (Chapter 3). New York, NY: John Wiley and Sons, Inc. Forthcoming.

Appendix I

Weighting Technical Summary

NSAP-SN weighting procedures

This appendix summarizes the methodology used for weighting the National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN) sample. The weighting scheme is a simplified version of the weighting scheme for the National Immunization Survey (NIS). The weighting procedures for the NSAP-SN sample involve the following steps:

- Obtain base weights from 2005–2006 National Survey of Children with Special Health Care Needs (NS-CSHCN) final weights.
- Adjustment for nonresponse to the NSAP-SN interview.
- Raking adjustment to available control totals.

Step 1: Obtain base weight

The sample for NSAP-SN is obtained by including all adopted children in English-speaking households in the target age range identified in the 2005–2006 NS-CSHCN sample. For these identified cases, the weighting process starts with the final weight from the 2005–2006 NS-CSHCN. However, 4 out of 140 cases with CSHCN_AGE = 14 (age as of 2005–2006 NS-CSHCN) and 27 out of 150 cases with CSHCN_AGE = 15 were excluded from the sample based on updated age (i.e., NSAP-SN age, 18 years and over).

The final NS-CSHCN weights were derived by applying adjustments to account for nonresponse, for households with multiple telephone numbers, and for noncoverage of children in households without landline telephones, as well as adjustments to known population control estimates. For a detailed description of the derivation of the NS-CSHCN final weights, readers are referred to the 2005–2006

NS-CSHCN design and operations report (1).

The NSAP-SN base weight for each child was defined as the 2005–2006 NS-CSHCN final weight for that child, adjusted for children aged 14 and 15 years (as of 2005–2006 NS-CSHCN interview) who were excluded from the sample based on updated age by proportionally increasing the weights of the remaining children aged 14 and 15 in 2005–2006 to account for those excluded. The proportional adjustments were $140 / (140 - 4)$ and $150 / (150 - 27)$, respectively.

Step 2: Adjust for incomplete interviews

Not all identified cases in the NSAP-SN sample completed the interview. To compensate for interview nonresponse, the weights of the children with complete interviews were adjusted. The adjustment was made by forming nonresponse adjustment cells. The nonresponse-adjusted weight was derived by dividing the base weight for each child by the weighted NSAP-SN interview completion rate for the adjustment cell containing the child. The interview nonresponse adjustment was made separately within each census region. The adjustment cells were formed using the following variables listed in order of priority:

- Census region.
- Type of adoption (as of 2005–2006 NS-CSHCN).
- 2005–2006 NS-CSHCN age group.
- Race/ethnicity.

Any cell where the number of responding cases was less than 20 was collapsed with a neighboring cell.

Step 3: Raking adjustment to external control totals

The interview nonresponse-adjusted weight was further adjusted such that the sum of the weights agreed with the control totals. Since there are no external control totals available on the NSAP-SN target children, data from the 2005–2006 NS-CSHCN were used to derive the control totals. That is, the

NS-CSHCN final weight was summed for all English-speaking, adopted children aged 0–15 years (age as of 2005–2006 NS-CSHCN), with the sums to the appropriate levels serving as the control totals. The raking adjustment was done using various categories of the following margins at the national level:

- Census region.
- Number of male and female children within each of four 2005–2006 NS-CSHCN age groups.
- Number of children in age group by type of adoption as assessed in 2005–2006 NS-CSHCN.
- Race/ethnicity.
- Number of children in households by highest reported education in household.
- Number of children in households by household income.

Categories of these raking dimensions with less than 20 cases were collapsed with a neighboring category.

Raking took each variable in turn and applied a proportional adjustment to the interview nonresponse-adjusted weights of the children who belonged to the same category of the variables. After a number of iterations over all raking dimensions, the raked weights have totals that match all the desired control totals. The raked weight can be expressed as the nonresponse-adjusted weight for the child multiplied by the raking adjustment factor for the child derived through the iteration process.

At this point, the weights were checked for extreme values. Similar to the process for NIS, the weights that exceeded the median weight plus six times the inter-quartile range of the weights were truncated to this cutoff. The raking step was applied again after the truncation of the weights, and the weights were rechecked for extreme weights and truncated as before. The process was iterated until there was no extreme weight after raking.

The raking and truncation process produced a final weight for each child with a completed NSAP-SN interview.

National estimates and summary statistics of weights

Descriptive statistics for the final NSAP-SN weight are provided in [Table I](#). The final NSAP-SN weight is used to obtain estimates at the national level.

Table I. Summary statistics for the NSAP-SN final weight

Statistic	Value
Unweighted sample size	1,007
Minimum weight	0.00
Maximum weight	2,758.60
Mean weight	401.45
Median weight	219.70
Sum of weights	404,261.85

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs.

Appendix II

Questionnaire

This appendix contains the National Survey of Adoptive Parents of Children with Special Health Care Needs questionnaire. The National Survey of Children with Special Health Care Needs (NS-CSHCN) questionnaire can be found in the 2005–2006 NS-CSHCN design and operations report (1) and on the SLAITS website: <http://www.cdc.gov/nchs/slaits.htm>.

National Survey of Adoptive Parents of Children with Special Health Care Needs

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NS-CSHCN 2005–2006 KEY QUESTIONS FOR SCREENING IN ADOPTIVE FAMILIES

C10Q03 IF S10Q00 = 04 OR 08 OR S10Q02X04 = 01 OR S10Q02X08 = 01, CONTINUE WITH C10Q03. ELSE, SKIP TO C11Q01.

The next questions will help us better understand the health needs of adopted children.

How old was [S.C.] when the adoption was finalized? By “finalized,” I mean when the court papers were signed that completed the adoption process.

C10Q03 ____ VALUE (MUST BE LESS THAN OR EQUAL TO AGE OF CHILD)

- (6) DON'T KNOW
- (7) REFUSED

INTERVIEWER INSTRUCTION: IF CHILD WAS LESS THAN 1 MONTH AT THE TIME OF ADOPTION, ENTER “0 MONTHS.

C10Q03A Months (00–12)
Years (Range 00–17)

(CATI PROGRAMMING NOTE: 2 NUMERIC-CHARACTER FIELD FOR MONTHS

2 NUMERIC-CHARACTER FIELD FOR YEARS
AGE SHOULD BE CONVERTED TO MONTHS)

C10Q04 Was [S.C.] adopted from another country?

IF RESPONDENT SEEMS UPSET BY THIS QUESTION, READ: We ask this question for all children with adoptive parents.

- (1) YES [SKIP TO C11Q01] [S.C.] Sorts as International Adoption]
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C10Q05 Was [S.C.] residing in foster care prior to being placed for adoption? This includes children placed by private agencies on behalf of a state or county child welfare agency.

IF THE CHILD WAS ADOPTED THROUGH A PRIVATE AGENCY AND THE PRIVATE AGENCY WAS ACTIONG IN ASSOCIATION WITH OR IN COOPERATION WITH A STATE OR COUNTY WELFARE AGENCY, THEN THIS QUESITON SHOULD BE ANSWERED “YES.”

IF A FOSTER PARENT ADOPTED ONE OF THEIR OWN FOSTER CHILDREN, THEN THIS QUESTION SHOULD BE ANSWERED “YES.”

IF RESPONDENT SEEMS UPSET BY THIS QUESTION, READ: We ask this question for all children with adoptive parents.

- (1) YES [S.C.] Sorts as Foster Care Adoption]
- (0) NO [S.C.] Sorts as Private Adoption]
- (6) DON'T KNOW [S.C.] Sorts as Private Adoption]
- (7) REFUSED [S.C.] Sorts as Private Adoption]

ELIGIBILITY FOR NSAP:

ADOPT_TYPE (Derived Variable):

ADOPT_TYPE = Null

IF C10Q04 = 1 THEN ADOPT_TYPE = 1

IF C10Q05 = 1 THEN ADOPT_TYPE = 2

IF C10Q05 = NO, DON'T KNOW, or REFUSED THEN ADOPT_TYPE = 3

AGE AT NSAP Derived Variables

- ELIGIBILITY DATE WAS SET WHEN FIRST CSHCN QUESTION WAS ANSWERED
- CALCULATE NUMBER OF MONTHS BETWEEN ELIGIBILITY DATE & NSAP START DATE
- ADD TO “AGE IN MONTHS” VARIABLE FROM CSHCN DATA FILE
 - DERIVED VARIABLE ESTAGEMO = ESTIMATED AGE IN MONTHS AT NSAP START DATE

- o DERIVED VARIABLE ESTAGEYR = ESTIMATED AGE IN YEARS AT NSAP START DATE
- o DERIVED VARIABLE AGEMONSAP = AGE IN MONTHS AS REPORTED AT AGE
- o DERIVED VARIABLE AGEYRNSAP = AGE IN YEARS AS REPORTED AT AGE

NOTE: ESTAGEMO AND ESTAGEYR WILL BE USED AT TO HELP IDENTIFY THE ELIGIBLE CHILD. AGEMONSAP AND AGEYRNSAP WILL BE CALCULATED BASED ON THE CHILD'S CURRENT AGE AS REPORTED BY THE PARENT DURING THE INTERVIEW.

IF (ADOPT_TYPE = 1, 2, OR 3) AND (AGEMONSAP<216) THEN CASE IS NSAP-ELIGIBLE AND SHOULD PROCEED TO INTRO_1

PROGRAMMING KEY

This key provides information about this instrument to facilitate programming.

- Skip instructions are contained within “< . . >” symbols.
- When a skip instruction is not written next to a response option, this response goes to the next item.
- When skipping to an item, include any introductory text before that item. For example, when skipping to C1a, include the text before this item: “Now I would like to ask you a few questions . . .”
- Textfills are contained within “[. . .]” symbols.

“Approximate Year of Adoption” (drives skip at Checkpoint before F19) is calculated as follows: Current Year minus (AGEYRNSAP) plus ([S.C.]’s age at adoption from C1a) = approximate year of adoption

If approximate year of adoption = 1997 or later ask F19

Example: Current year = 2006, AGE = 10 years, C1a = years
 $2006 - 10 + 1 = 1997$

The purpose of this calculation is to be sure to include all adoptions that occurred in 1998 or later – even though this will include some in 1997, too. The cutoff is 1997 b/c a child could have been adopted in 1998 but appear to have been adopted in 1997 if the adoption finalization happened earlier in the year than their birthday and the interview is taking place after the child’s birthday for the current year.

- Adoption group drives numerous skips throughout this instrument. Below are the definitions of the three adoption groups.
 - o NOTE: The 2005–06 CSHCN questionnaire did not include a question asking whether the adoption was finalized (it assumed that the adoption was finalized as question C10Q03 asks how old [S.C.] was when the adoption was finalized). The 2007 NSCH does include that question and makes finalization a requirement for being eligible for NSAP. For CSHCN-NSAP, we’ll take an adoption case that falls into one of the following three categories.

IF C10Q04=YES: International Adoption

IF C10Q05=YES: Foster Care Adoption

IF C10Q05=NO OR DON’T KNOW OR REFUSED: Private Adoption

QUESTIONNAIRE TEXTFILLS

There are several textfills that appear repeatedly throughout the instrument. To avoid cluttering the instrument with the same logic rules over and over, the textfill rules are provided here:

[S.C.]’s Name:

Textfill Child’s name for [S.C.] throughout instrument

Gender:

IF C2Q03=1, [S.C.] IS MALE, use male pronouns (he, him, his, etc. . .)

IF C2Q03=2, [S.C.] IS FEMALE, use female pronouns (she, her, etc. . .)

Household Textfill:

Use “You” or “Your” . . . (do not use “spouse/partner” textfill) if there is only one adoptive parent in the HH. Specifically:

IF (S10Q00 = 04 OR 08) AND (S10Q01 = NO OR DON’T KNOW OR REFUSED) OR

IF (S10Q00 = 04 OR 08) AND (S10Q02 INDEX does not = 04 OR 08) OR

IF (S10Q00 does not = 04 OR 08) AND (S10Q02 INDEX = 04 OR 08) OR

IF (S3_N = 3 OR 4)

TEXTFILL = “You or/and your spouse” or “Your or/and your spouse’s” . . . if there are two adoptive parents in the HH and they are spouses. Specifically:

IF (S10Q00 = 04 OR 08) AND (S10Q02 INDEX = 04 OR 08) AND (S3_N = 1) OR

IF (S10Q00 does not = 04 or 08) AND (S10Q02 INDEX = 04 and 08) AND (S3_N = 1)

TEXTFILL = “You or/and your partner” or “Your or/and your partner’s” . . . if there are two adoptive parents in the HH and they are partners. Specifically:

IF (S10Q00 = 04 OR 08) AND (S10Q02 INDEX = 04 OR 08) AND (S3_N = 2) OR

IF (S10Q00 does not = 04 or 08) AND (S10Q02 INDEX = 04 and 08) AND (S3_N = 2)

TEXTFILL:

Use “My spouse and I were”

IF (S10Q00 = 04 or 08) AND (S10Q02 = 04 or 08) AND (S3_N = 1) OR

IF (S10Q00 does not = 04 or 08) AND (S10Q02 INDEX = 04 and 08) AND (S3_N = 1)

Use “My partner and I were”

IF (S10Q00 = 04 or 08) AND (S10Q02 = 04 or 08) AND (S3_N = 2) OR

IF (S10Q00 does not = 04 or 08) AND (S10Q02 INDEX = 04 and 08) AND (S3_N = 2)

Use “I was”

IF S3_N = 3,4,6, OR 7

TEXTFILL:

Use “or your spouse’s”

IF (S10Q00 = 04 or 08) AND (S10Q02 = 04 or 08) AND (S3_N = 1) OR

IF (S10Q00 does not = 04 or 08) AND (S10Q02 INDEX = 04 and 08) AND (S3_N = 1)

Use “or your partner’s”

IF (S10Q00 = 04 or 08) AND (S10Q02 = 04 or 08) AND (S3_N = 2) OR

IF (S10Q00 does not = 04 or 08) AND (S10Q02 INDEX = 04 and 08) AND (S3_N = 2)

Time of Adoption Textfill:

IF (AGEYRNSAP) minus ([S.C.]’s age at adoption from C1a) = 1 or 0 use textfill: “Since the time of [S.C.]’s adoption”.

IF (AGEYRNSAP) minus ([S.C.]’s age at adoption from C1a) = 2 or more use textfill: “During the last 12 months”.

NSAP SCREENER

TIMESTAMP_SECTION_S1 (all time stamps captured in the format yyymmddhhmmss)

INTRO_1 Hello, my name is _____. I'm calling on behalf of the Centers for Disease Control and Prevention. On [FILL INTDATE] we conducted a nationwide telephone survey on children's health with an adult at this phone number about a child who would now be about [FILL ESTAGEYR] years old. The CDC is interested in speaking with this [FILL ESTAGEYR]-year old's [FILL mother / father / mother or father] again.

NSAP_ INTRO

IF ADOPTIVE MOTHER IN HH BUT NO ADOPTIVE FATHER ((S10Q00=04 OR S10Q02=04) AND (S10Q00 NE 08 AND S10Q02 NE 08)), FILL "MOTHER" AND "SHE." IF ADOPTIVE FATHER IN HH BUT NO ADOPTIVE MOTHER ((S10Q00=08 OR S10Q02=08) AND (S10Q00 NE 04 AND S10Q02 NE 04)), FILL "FATHER" AND "HE." IF BOTH ADOPTIVE MOTHER AND FATHER IN HH (((S10Q00=04 OR S10Q02=04) AND (S10Q00=08 OR S10Q02=08)) OR ((S10Q00 NE 04 AND NE 08) AND S10Q02=04 AND 08)), FILL "MOTHER OR FATHER" AND "HE OR SHE."

Is [FILL: mother/father] available?

- (1) Yes, speaking with that person <GO TO S1PRE>
- (2) Yes, mother/father comes to phone <GO TO NSAP_INTRO2>
- (3) No, not available now <GO TO S1PRE3>
- (4) No, parent has moved <GO TO R_CONTACT>
- (5) Do not know this person <GO TO NSAP_TERM> [set ITS=71]
- (6) No, parent is deceased <IF TWO ADOPTIVE PARENTS IN HH, GO TO OTH_PAR ELSE GO TO F1Q_PAR>
- (7) No, youth is deceased <GO TO F1Q_CHLD>

NOTE: IF NSAP_INTRO equals 5 (or 4 in some cases), the case would be eligible for locating via Accurint. If a new telephone number can be found via Accurint, it will be loaded and dialed.

ON-SCREEN INTERVIEWER LOCATING HELP & INSTRUCTION:

- o CHILD'S NAME OR INITIALS:
- o CHILD'S GENDER:

REMEMBER, YOU NEED TO FIND EITHER ONE OF [S.C.]'S ADOPTIVE PARENTS. THE ADOPTIVE PARENT MIGHT NOT BE THE 2005 R.

OTH_PAR I'm sorry to hear that. Please accept my condolences. Would the [TEX TFILL: ESTAGEYR]-year old's [TEXT FILL: IF C2Q04=1 'father' / ELSE IF C2Q04=2 'mother' / ELSE 'other parent'] happen to be available?

- (01) YES <GO TO NSAP_INTRO2 (ONCE PARENT COMES TO THE PHONE)>
- (02) NO <GO TO S1PRE3>

F1Q_CHLD I'm sorry to hear that. I do not need to continue. Thank you, and please accept my condolences. Goodbye. <SET AS INELIGIBLE=3>

F1Q_PAR I'm sorry to hear that. I do not need to continue. Thank you, and please accept my condolences. Goodbye. <SET AS INELIGIBLE=3>

R_CONTACT Could you please tell me [him/her] new telephone number?

- (1) YES <GO TO R_NPHONE>
- (2) NO <GO TO R_NAME>

NOTE: If the case gets to R_CONTACT and a new telephone number is provided, CATI will dial that new number on subsequent calls. If a name but no telephone number is provided, that information will be used to conduct an Accurint search. If no name and no telephone number provided, an Accurint search on the original number will be conducted.

R_NPHONE_1 What is [him/her] telephone number?
 _____-_____-_____-_____

R_NPHONE_ TYPE Is that a landline or cellular telephone number?
 (1) LANDLINE
 (2) CELLULAR

R_NPHONE_ 2 Does this person have another number that you would like to provide?
 (1) YES <GO TO R_PH_2>
 (2) NO <GO TO R_NAME>

R_PH_2 What is this telephone number?
 _____-_____-_____-_____

R_PH_TYPE2 Is that a landline or cellular telephone number?
 (1) LANDLINE
 (2) CELLULAR

R_NPHONE_ 3 Does this person have another number that you would like to provide?
 (1) YES <GO TO R_PH_3>
 (2) NO <GO TO R_NAME>

R_PH_3 What is this telephone number?
 _____-_____-_____-_____

R_PH_TYPE3 Is that a landline or cellular telephone number?
 (1) LANDLINE
 (2) CELLULAR

R_NAME Could you please tell me [him/her] name?
 (1) YES <GO TO R_FIRSTNAME>
 (2) NO <GO TO NSAP_TERM>

R_FIRST NAME What is [his/her] first and last name?
 FIRST NAME: _____

R_LAST NAME What is [his/her] first and last name?
 LAST NAME: _____

<GO TO NSAP_TERM>

INTRO2 Hello, my name is _____. I'm calling on behalf of the Centers for Disease Control and Prevention. On [FILL INTDATE] we conducted a nationwide telephone survey on children's health with an adult at this phone number about a child who would now be about [FILL ESTAGEYR] years old.

[IF (01<S10Q00<=08), THEN READ: The person we spoke with told us [FILL:IF (01<S10Q00<=04): she/IF (05<=S10Q00<=08): he], was the child's [FILL: IF (01<=S10Q00<=04: mother/ IF (05<=S10Q00<=08): father]. Are you this child's parent?]

[ELSE IF (S10Q00 LT 01 OR GT 08)], THEN READ: Are you this child's parent?]

(1) YES <GO TO NASAP_INTRO2A>
 (2) NO <GO TO S1PRE3>

NSAP_
INTRO2A

We are interested in speaking with you again because we are doing a survey about the experiences of adoptive parents and the person in this household who responded to the earlier survey told us that [FILL: IF S10Q00=4: she was [S.C.]’s adoptive mother/ ELSE IF S10Q00=8: he was [S.C.]’s adoptive father/ ELSE IF (S10Q02 INDEX = 04 AND NOT 08): [S.C.]’s adoptive mother lives in this household/ ELSE IF (S10Q02 INDEX = 08 AND NOT 04): [S.C.]’s adoptive father lives in this household/ ELSE IF (S10Q02 INDEX = 04 AND 08): [S.C.]’s adoptive mother and father live in this household]. I have a few questions to ask to determine if you are eligible for the survey.

Are you [S.C.]’s adoptive parent?

- (1) YES <GO TO S1PREB>
- (2) NO <GO TO S1PRE3>

S1PRE

[IF NSAP_INTRO = 1, THEN READ: We are doing a survey about the experiences of adoptive parents and the person in this household who responded to the earlier health survey told us that [FILL: IF S10Q00=4: she was [S.C.]’s adoptive mother/ ELSE IF S10Q00=8: he was [S.C.]’s adoptive father/ ELSE IF (S10Q02 INDEX = 04 AND NOT 08): [S.C.]’s adoptive mother lives in this household/ ELSE IF (S10Q02 INDEX = 08 AND NOT 04): [S.C.]’s adoptive father lives in this household/ ELSE IF (S10Q02 INDEX = 04 AND 08): [S.C.]’s adoptive mother and father live in this household]. I have a few questions to ask to determine if you are eligible for the survey.

Are you [S.C.]’s adoptive parent?

- (1) YES <GO TO S1PREB>
- (2) NO <GO TO S1PRE3>

INTERVIEWER: PLEASE VERIFY THAT RESPONDENT IS [S.C.]’s ADOPTIVE PARENT.

S1PRE3

When would be a good time to reach [S.C.]’s [IF NSAP_INTRO = 1 OR 2 READ: adoptive] parent?

- (1) R IS AVAILABLE NOW <GO TO NSAP_INTRO2>
- (2) SCHEDULE APPOINTMENT <GOTO CB1>
- (3) THERE IS NO ADOPTIVE PARENT IN HOUSEHOLD <GO TO NSAP_TERM>

NSAP_
TERM

Those are all the questions I have. I’d like to thank you on behalf of the Centers for Disease Control and Prevention for the time and effort you’ve spent answering these questions.

S1PREB

What is your relationship to [S.C.]?

- (1) ADOPTIVE MOTHER
- (2) ADOPTIVE FATHER
- (6) DON’T KNOW
- (7) REFUSED

INTERVIEWER INSTRUCTION: THIS QUESTION SHOULD ONLY BE ASKED IF YOU NEED TO CLARIFY THE RESPONDENT’S GENDER.

AGE

When we last spoke, [S.C.] was (CSHCN age in years/mos). How old is [he/she] now?

-
- (6) DON’T KNOW
 - (7) REFUSED

AGEUNIT: SELECT UNIT

- (1) YEARS
- (2) MONTHS

PROGRAMMING NOTE: CALCULATE AGEMONSAP AND AGEYRNSAP HERE.

IF AGEMONSAP is ≥ 216 months old (i.e., child is 18 years old or older), case is not eligible for CSHCN-NSAP. SET INELIGIBLE = 1 AND GO TO NSAP_TERM2

INHOUSE: Is [S.C.] still living with you?

- (1) YES <GO TO CONSENT_INTRO>
- (2) NO <GO TO NSAP_TERM3 AND SET INELIGIBLE = 2>
- (6) DON'T KNOW
- (7) REFUSED

NSAP_
TERM2

We are only interviewing parents whose child is less than 18 years old. I'd like to thank you on behalf of the Centers for Disease Control and Prevention for the time and effort you've spent answering these questions.

NSAP_
TERM3

We are only interviewing parents if the child still resides in their household. I'd like to thank you on behalf of the Centers for Disease Control and Prevention for the time and effort you've spent answering these questions.

CONSENT_
INTRO

Before we continue, I'd like you to know that taking part in this research is voluntary. You may choose not to answer any question you don't wish to answer or stop at any time. Whether or not you take part in this survey has no effect on any benefits you may receive and there are no known risks. We are required by Federal law to develop and follow strict procedures to protect your information and use your answers only for statistical research. I can describe these laws if you wish. In appreciation for your time in taking the survey, we will send you \$ [Text Fill: IF NSAP_INCENT=, then use 25 / ELSE use NSAP_INCENT]. The survey will take about half an hour. In order to review my work, my supervisor may record and listen as I ask the questions. I'd like to continue now unless you have any questions.

READ IF NECESSARY: The Public Health Service Act is Volume 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. The confidentiality of your responses is assured by Section 308d of this Act and by the Confidential Information Protection and Statistical Efficiency Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ: The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. By law, every employee of the National Center for Health Statistics, the National Center for Immunization and Respiratory Diseases, and its agent, the National Opinion Research Center who works on this survey has taken an oath and is subject to a jail term of up to 5 years, a fine of up to \$250,000, or both, if he or she willingly discloses ANY identifiable information about you or your household members.

- (1) CONTINUE, RECORDING ACCEPTABLE
- (2) CONTINUE, DO NOT RECORD

<CHECKPOINT CPS1:

IF C10Q04=1 (International Adoption), GO TO S1_N; ELSE GO TO CPS3>

S1_N

From what country was [S.C.] adopted?
DROP DOWN LIST FROM STATE DEPARTMENT
BRAZIL
CHINA (MAINLAND)
COLOMBIA
ETHIOPIA
GUATEMALA
HAITI
INDIA
JAMAICA
KAZAKHSTAN
LIBERIA
MEXICO
MOLDOVA
NEPAL
NIGERIA
PHILLIPINES

- POLAND
- RUSSIA
- SOUTH KOREA
- TAIWAN
- THAILAND
- UKRAINE
- OTHER <GO TO S1AA>
- (6) DON'T KNOW
- (7) REFUSED

<IF OTHER IS NOT SELECTED, GO TO S1B>

S1AA

-
- (6) DON'T KNOW
 - (7) REFUSED

S1B In what country was [S.C.]'s adoption completed? Was it in the U.S., the child's country of origin, or both?

- (1) IN THE UNITED STATES
- (2) THE CHILD'S COUNTRY OF ORIGIN
- (3) BOTH THE U.S. AND THE COUNTRY OF ORIGIN
- (4) ADOPTION IS NOT FINALIZED YET
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPS3:

IF (S10Q02=04 OR 08 AND S10Q00=04 OR 08) OR IF ((S10Q00 does not = 04 or 08) and (S10Q02 = 04 AND S10Q02 =08)), GO TO S3_A; ELSE Go To CPS4

S3_A When we spoke to you for the previous survey, you and [S.C.]'s other adoptive parent lived in the same house. Is this still correct?

- (1) YES
- (0) NO <SET S3_N TO 4 AND GO TO CPS4>
- (6) DON'T KNOW <SET S3_N TO 4 AND GO TO CPS4>
- (7) REFUSED <SET S3_N TO 4 AND GO TO CPS4>

S3_N What is your relationship to [S.C.]'s other adoptive parent who lives in this household?

- (1) SPOUSE/HUSBAND/WIFE
- (2) PARTNER/BOYFRIEND/GIRLFRIEND
- (3) OTHER
- (4) THERE IS NO OTHER ADOPTIVE PARENT IN THIS HOUSEHOLD
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPS4:

Ask S4_N if there are two adoptive parents in the household. Specifically: IF (S10Q02 = 04 OR 08) AND (S10Q00 = 04 OR 08) GO TO S4_N; OR IF ((S10Q00 does not = 04 or 08) and (S10Q02 = 04 AND S10Q02 = 08)) GO TO S4_N; ELSE GO TO S6>

S4_N Were you married to [S.C.]'s other adoptive parent at the time of [S.C.]'s adoption?

- (1) YES <IF S3_N=1 GO TO S6; ELSE GO TO S4A>
- (0) NO <GO to S6>
- (6) DON'T KNOW <GO TO S6>
- (7) REFUSED <GO TO S6>

S4A Are you still married to this person?

- (1) YES <GO TO S6>
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

- S6 Before you [TEXTFILL: and your spouse/partner] adopted [S.C.], were you [TEXTFILL: or your spouse/partner] already related to him/her? For example, were you [TEXTFILL: or your spouse/partner] [S.C.]’s grandparent, aunt/uncle, or other relative?
- (1) YES
(0) NO
(6) DON’T KNOW
(7) REFUSED
- S7 Did you [TEXTFILL: or your spouse/partner] know [S.C.] before [TEXTFILL: if S6=1: you considered adopting [him/her]; if S6 ne 1: being matched with [him/her] for adoption]?
- (1) YES <If ADOPT_TYPE = International or Private GO TO C41>
(0) NO <If ADOPT_TYPE = International or Private GO TO C41>
(6) DON’T KNOW <If ADOPT_TYPE = International or Private GO TO C41>
(7) REFUSED <If ADOPT_TYPE = International or Private GO TO C41>
- S8 Were you [TEXTFILL: or your spouse/partner] [S.C.]’s foster parent at the time you began the adoption process?
- (1) YES
(0) NO <GO TO S9>
(6) DON’T KNOW <GO TO S9>
(7) REFUSED <GO TO S9>
- S8A Are you currently a licensed foster parent?
- (1) YES <GO TO CPS10>
(0) NO <GO TO CPS10>
(6) DON’T KNOW <GO TO CPS10>
(7) REFUSED <GO TO CPS10>
- S8B In the past three months have you cared for foster children in your home?
- (1) YES <GO TO CPS10>
(0) NO <GO TO CPS10>
(6) DON’T KNOW <GO TO CPS10>
(7) REFUSED <GO TO CPS10>
- S9 At any time before the adoption was finalized, were you [TEXTFILL: or your spouse/partner] [S.C.]’s foster parent?
- (1) YES
(0) NO
(6) DON’T KNOW
(7) REFUSED

<CHECKPOINT CPS10:

IF S8= 1 OR S9= 1 GO TO S10; ELSE GO TO S14A>

- S10 Did you [TEXTFILL: or your spouse/partner] become a foster parent with the intent to adopt a child from the foster care system?
- (1) YES
(0) NO
(6) DON’T KNOW
(7) REFUSED
- S11 How long was [S.C.] living in your home before his/her case goal became adoption?
- READ IF NECESSARY: How long was (child) living in your home before you decided you wanted to adopt [him/her] from the foster care system?
- S11_Y __ Years
S11_M __ Months

- (6) DON'T KNOW
- (7) REFUSED

INTERVIEWER INSTRUCTION: ENTER 0 IF GOAL WAS ALWAYS ADOPTION

S12 Did you [TEXTFILL: or your spouse/partner] feel pressured by the child welfare agency to adopt [S.C.]?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

S13 When you [TEXTFILL: and your spouse/partner] were making your decision to adopt [S.C.] were other options such as [TEXTFILL: IF S8=1: continuing as/ELSE: becoming] (his/her) foster parent or becoming (his/her) legal guardian discussed with you?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

S14A. Were any of the following agencies involved in the adoption of [S.C.]:
Public child welfare agency, that is, the state or county department of social services?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

S14B. Private agency under contract with public child welfare agency (for example, Catholic Charities, Lutheran Social Services)?

<READ IF NECESSARY: Were any of the following agencies involved in the adoption of [S.C.]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

S15. Was S.C.'s adoption an interstate adoption?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<HELP SCREEN: PRIOR TO [S.C.] coming to live with you, did you and [S.C.] live in different states?>

CHARACTERISTICS

TIMESTAMP_SECTION_C1

C41. Now I would like to ask you a few questions about [S.C.] and the experience of adopting (him/her). Overall, was your [TEXTFILL: and your spouse's/partner's] experience with your adoption agency or attorney very positive, positive, mixed (positives and negatives about equal), negative, or very negative?

- (1) VERY POSITIVE
- (2) POSITIVE
- (3) MIXED
- (4) NEGATIVE
- (5) VERY NEGATIVE
- (6) THERE WAS NO ATTORNEY OR AGENCY
- (96) DON'T KNOW
- (97) REFUSED

C1A. How old was [S.C.] when his/her adoption was finalized?

<AGE CHECK: C1A MUST BE <OR = AGEYRNSAP>

[TI INSTRUCTION: ENTER 6 FOR DON'T KNOW AND 7 FOR REFUSED]

C1A_year: ___ years and

C1A_month: ___ months

[TI INSTRUCTION: IF LESS THAN ONE YEAR OLD, ENTER "0" FOR YEARS]

[TI INSTRUCTION: IF LESS THAN ONE MONTH OLD, ENTER "0" FOR MONTHS]

OR

C1A_week: ___ weeks [RANGE: 0-52]

- (6) DON'T KNOW
- (7) REFUSED

C1B. How old was [S.C.] when he/she was first placed in your home?

<AGE CHECK: C1B MUST BE < OR = AGEYRNSAP>

[TI INSTRUCTION: ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED]

C1B_year: ___ years and

C1B_month: ___ months

[TI INSTRUCTION: IF LESS THAN ONE YEAR OLD, ENTER "0" FOR YEARS]

[TI INSTRUCTION: IF LESS THAN ONE MONTH OLD, ENTER "0" FOR MONTHS]

OR

C1B_week: ___ weeks [RANGE: 0-52]

- (6) DON'T KNOW
- (7) REFUSED

C1C. Has [S.C.] ever lived with his/her birth family?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C2_N. Just before being placed with you, where did [S.C.] live?

[TI INSTRUCTION: SELECT ONLY ONE.]

- (1) A FOSTER FAMILY <GO TO C4_N>
- (2) ANOTHER ADOPTIVE FAMILY <GO TO C4_N>
- (3) BIRTH PARENTS <GO TO C4_N>

- (4) WITH MEMBERS OF HIS/HER BIRTH FAMILY
OTHER THAN PARENTS <GO TO C4_N>
- (5) A GROUP HOME IN THE U.S. FOSTER CARE SYSTEM,
THAT IS, A HOME WITH 4 FOSTER CHILDREN OR MORE <GO TO C4_N>
- (6) A RESIDENTIAL TREATMENT FACILITY IN THE U.S.,
THAT IS, A FACILITY WHERE LARGE NUMBERS OF
CHILDREN AND YOUTH LIVE <GO TO C4_N>
- (7) AN INSTITUTION OR ORPHANAGE <GO TO C4_N>
- (8) A HOSPITAL OR HEALTH CLINIC <GO TO C4_N>
- (9) SOMEPLACE ELSE NOT MENTIONED <GO TO C4_N>
- (10) ADOPTED AT BIRTH <GO TO C4_N>
- (96) DON'T KNOW <GO TO C4_N>
- (97) REFUSED <GO TO C4_N>

<HELP SCREEN: A HOSPITAL OR HEALTH CLINIC WOULD BE AN EXTENDED HOSPITAL OR CLINIC STAY, NOT JUST THE COUPLE DAYS STAY WHILE MOTHER GAVE BIRTH.>

C2A. (specify) _____

- (6) DON'T KNOW
- (7) REFUSED

C4_N. To your knowledge, does [S.C.] have birth siblings, that is, brothers or sisters of [S.C.], including half siblings?

- (1) YES
- (0) NO <GO TO C8_N>
- (6) DON'T KNOW <GO TO C8_N>
- (7) REFUSED <GO TO C8_N>

C5_N. Have any of [S.C.]'s birth siblings including half siblings ever been available for adoption?

- (1) YES
- (0) NO <GO TO C8_N>
- (6) DON'T KNOW <GO TO C8_N>
- (7) REFUSED <GO TO C8_N>

C6_N. Were you [TEXTFILL: or your spouse/parent] interested in adopting any of [S.C.]'s birth siblings?

- (1) YES
- (0) NO <GO TO C8_N>
- (6) DON'T KNOW <GO TO C8_N>
- (7) REFUSED <GO TO C8_N>

C7_N. Have you adopted any of [S.C.]'s birth siblings?

- (1) YES
- (0) NO
- (3) NOT YET, BUT PLANNING TO OR IN THE PROCESS OF ADOPTING
- (6) DON'T KNOW
- (7) REFUSED

C8_N. Do you [TEXTFILL: or your spouse/partner] have biological children?

- (1) YES
- (0) NO <GO TO C9_N>
- (6) DON'T KNOW <GO TO C9_N>
- (7) REFUSED <GO TO C9_N>

C8A. How many? _____

- (6) DON'T KNOW
- (7) REFUSED

- C8B. TEXTFILL: IF C8A=1: Was this child/IF C8A>1: Were any of these children) born before S.C.'s adoption?
- (1) YES <IF C8A=1, GO TO C9_N; ELSE GO TO C8C>
 (0) NO <GO TO C9_N>
 (6) DON'T KNOW <GO TO C9_N>
 (7) REFUSED <GO TO C9_N>
- C8C. How many? _____
- (6) DON'T KNOW
 (7) REFUSED
- C9_N. Do you [TEXTFILL: or your spouse/partner] have adopted children other than [S.C.] [TEXTFILL IF C7_N=1: and [S.C.]]'s birth siblings]?
- (1) YES
 (0) NO <GO TO C12_INTRO>
 (6) DON'T KNOW <GO TO C12_INTRO>
 (7) REFUSED <GO TO C12_INTRO>
- C9A. How many? _____
- (6) DON'T KNOW
 (7) REFUSED
- C9B. [TEXTFILL: IF C9A=1: Was this child / IF C9A>1: Were any of these children] adopted before [S.C.]?
- (1) YES <IF C9A=1, GO TO C10_N; ELSE GO TO C9C>
 (2) NO <GO TO C9_D>
 (6) DON'T KNOW <GO TO C9_D>
 (7) REFUSED <GO TO C9_D>
- C9C. How many? _____
- <IF C9A=C9C, GO TO C10_N; If C9CA ne C9C, go to C9D>
- (6) DON'T KNOW <GO TO C10_N>
 (7) REFUSED <GO TO C10_N>
- C9D. [TEXTFILL: IF C9A=1: Was this child / IF C9a>1: Were any of these children] adopted at the same time as S.C.?
- (1) YES <IF C9A=1 or C9A – C9C =1, GO TO C10_N; ELSE GO TO C9E>
 (0) NO <GO TO C10_N>
 (6) DON'T KNOW <GO TO C10_N>
 (7) REFUSED <GO TO C10_N>
- C9E. How many? _____
- (6) DON'T KNOW
 (7) REFUSED
- C10_N. Did you [TEXTFILL: or your spouse/partner] adopt the other child or children through the United State foster care system, through a private adoption in the United States, or through an international adoption? [SELECT ALL THAT APPLY]
- (1) UNITED STATES FOSTER CARE SYSTEM
 (2) PRIVATE ADOPTION IN THE U.S.
 (3) INTERNATIONAL ADOPTION
 (6) DON'T KNOW
 (7) REFUSED

<CHECKPOINT CPC11: IF (C10Q04 = 1 (INTERNATIONAL ADOPTION) and C10_N = 3 (INTERNATIONAL ADOPTION): GO TO C11_N; ELSE GO TO C12_INTRO>

C11_N. Were the other children adopted from the same country as S.C.?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C12_INTRO. There are many reasons why people decide to adopt a child. I am going to read a list of possible reasons why people sometimes choose to adopt. For each reason, please tell me whether or not this was one of the reasons why you [TEXTFILL: or your spouse/partner] chose adoption.

C12A. [TEXTFILL: My spouse/partner and I were/ I was] unable to have a biological child.

<READ IF NECESSARY: Please tell me whether or not this was one of the reasons that you [TEXTFILL: or your spouse/partner] had for adopting [S.C.]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C12B. [TEXTFILL: My spouse/partner and I / I] wanted to expand [TEXTFILL: S3_N=1 OR 2 "our"/ S3_N=3,4,6,7 "my"] family.

<READ IF NECESSARY: Please tell me whether or not this was one of the reasons that you [TEXTFILL: or your spouse/partner] had for adopting [S.C.]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC12C: IF C7_N = 1 OR C8B = 1 OR C9B = 1 OR C9D =1, THEN ASK C12C. ELSE GO TO CPC12E>

C12C. [TEXTFILL: My spouse/partner and I / I] wanted a sibling for another child.

<READ IF NECESSARY: Please tell me whether or not this was one of the reasons that you [TEXTFILL: or your spouse/partner] had for adopting [S.C.]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC12E: IF C7_N = 1, THEN ASK C12E. ELSE GO TO CPC12F>

C12E. [TEXTFILL: I/we] already adopted S.C.'s sibling.

<READ IF NECESSARY: Please tell me whether or not this was one of the reasons that you [TEXTFILL: or your spouse/partner] had for adopting [S.C.]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C12F. [TEXTFILL: My spouse/partner and I / I] wanted to adopt a child in need of a permanent family

<READ IF NECESSARY: Please tell me whether or not this was one of the reasons that you [TEXTFILL: or your spouse/partner] had for adopting [S.C.]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

- C12G. Was there another reason that I did not mention?
- (1) YES
 - (0) NO <GO TO C13_N>
 - (6) DON'T KNOW <GO TO C13_N>
 - (7) REFUSED <GO TO C13_N>
- C12GA. What was the other reason? (specify) _____
- (6) DON'T KNOW
 - (7) REFUSED
- C13_N. Do any of your [TEXTFILL: or your spouse's/partner's] relatives have adopted children?
- (1) YES
 - (0) NO <GO TO C14>
 - (6) DON'T KNOW <GO TO C14>
 - (7) REFUSED <GO TO C14>
- C13A. Did any of your [TEXTFILL: or your spouse's/partner's] relatives adopt in the same manner as you did – that is, were any of these children adopted through [TEXTFILL: IF C10Q05=1 a foster care/ ELSE IF C10Q04=1 an international/ IF C10Q05=NO/DON'T KNOW/REFUSED a private] adoption?
- (1) YES
 - (0) NO
 - (6) DON'T KNOW
 - (7) REFUSED
- C14. Do any of your [TEXTFILL: or your spouse's/partner's] friends or close acquaintances have adopted children?
- (1) YES
 - (0) NO <GO TO C15_N>
 - (6) DON'T KNOW <GO TO C15_N>
 - (7) REFUSED <GO TO C15_N>
- C14A. Did any of your [TEXTFILL: or your spouse's/partner's] friends or acquaintances adopt in the same manner as you did – that is, were any of these children adopted through a/an [TEXTFILL: foster care/international/private] adoption?
- (1) YES
 - (0) NO
 - (6) DON'T KNOW
 - (7) REFUSED
- C15_N. Were you adopted as a child?
- (1) YES
 - (0) NO <IF S3_N=1 OR 2: GO TO C15b; ELSE GO TO C16_N>
 - (6) DON'T KNOW <IF S3_N=1 OR 2: GO TO C15b; ELSE GO TO C16_N>
 - (7) REFUSED <IF S3_N=1 OR 2: GO TO C15b; ELSE GO TO C16_N>
- C15A. How old were you when you were adopted?
- [TI INSTRUCTION: ENTER 6 FOR DON'T KNOW AND 7 FOR REFUSED]
- C15A_year: ___ years and
C15A_month: ___ months
- [TI INSTRUCTION: IF LESS THAN ONE YEAR OLD, ENTER "0" FOR YEARS]
[TI INSTRUCTION: IF LESS THAN ONE MONTH OLD, ENTER "0" FOR MONTHS]
- OR
- C15A_week: ___ weeks [RANGE: 0–52]

- (6) DON'T KNOW <IF S3_N=1 OR 2: GO TO C15B; ELSE GO TO C16_N>
- (7) REFUSED <IF S3_N=1 OR 2: GO TO C15B; ELSE GO TO C16_N>

C15B. Was your spouse/partner adopted as a child?

- (1) YES
- (0) NO <GO TO C16_N>
- (6) DON'T KNOW <GO TO C16_N>
- (7) REFUSED <GO TO C16_N>

C15C. How old was your spouse/partner when he/she was adopted?

C15C_year: ___ years and
C15C_month: ___ months

[IF LESS THAN ONE YEAR OLD, ENTER "0" FOR YEARS]

OR

C15C_week: ___ weeks
(6) DON'T KNOW
(7) REFUSED

C16_N. Do you [TEXTFILL: or your spouse/partner] have siblings who were adopted?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C17_N. Compared to yourself, is [S.C.] a different race or ethnicity or from a different culture?

- (1) YES <IF S3_N=2 OR 1: GO TO C17A; ELSE GO TO C18A>
- (0) NO <IF S3_N=2 OR 1: GO TO C17A; ELSE GO TO C21A>
- (6) DON'T KNOW <IF S3_N=2 OR 1: GO TO C17A; ELSE GO TO C21A>
- (7) REFUSED <IF S3_N=2 OR 1: GO TO C17A; ELSE GO TO C21A>

C17A. Is [S.C.] a different race or ethnicity or from a different culture than your spouse/partner?

- (1) YES
- (0) NO <IF C17_N=1 GO TO C18A; ELSE GO TO C21A>
- (6) DON'T KNOW <IF C17_N=1 GO TO C18A; ELSE GO TO C21A>
- (7) REFUSED <IF C17_N=1 GO TO C18A; ELSE GO TO C21A>

C18A. Since the time of the adoption, has your family done any of the following:

Lived in or moved to a racially or culturally diverse neighborhood

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18B. Lived or moved where [S.C.] can attend schools that are racially or culturally diverse?

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18C. Were involved in religious, social, tribal or recreational groups or activities that reflect [TEXTFILL: his/her] race or ethnicity or culture

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES

- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18D. Chosen multiracial or multicultural entertainment such as movies or plays that reflect [TEXTFILL: his/her] race or ethnicity or culture

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (2) NO
- (6) DON'T KNOW
- (7) REFUSED

C18E Chosen child care providers, teachers or other role models similar to [TEXTFILL: his/her] race or ethnicity

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18F Participated in racial/ethnic holidays that reflect [TEXTFILL: his/her] race or ethnicity or culture

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18G Have friends who share [TEXTFILL: his/her] racial or ethnic or cultural background

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18H Prepared foods associated with [TEXTFILL: his/her] racial or ethnic or cultural background

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C18I Read books to your child about [TEXTFILL: his/her] racial or ethnic or cultural group or heritage

<READ IF NECESSARY: Since the time of the adoption, has your family done any of the following>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C19_N Would you [TEXTFILL: or your spouse/partner] encourage others to adopt transracially or transculturally?

- (1) YES <GO TO C21A>
- (0) NO <GO TO C20>
- (6) DON'T KNOW <GO TO C20>
- (7) REFUSED <GO TO C21A>

- C20 Why not? _____
(6) DON'T KNOW
(7) REFUSED

- C21A At the time you began thinking about adopting a child which of the following types of adoption did you consider.
adoption from U.S. foster care
(1) YES
(2) NO
(6) DON'T KNOW
(7) REFUSED

- C21B international adoption
<READ IF NECESSARY: At the time you began thinking about adopting a child which of the following types of adoption did you consider.>
(1) YES
(2) NO
(6) DON'T KNOW
(7) REFUSED

- C21C. private U.S. adoption
<READ IF NECESSARY: At the time you began thinking about adopting a child which of the following types of adoption did you consider.>
(1) YES
(2) NO
(6) DON'T KNOW
(7) REFUSED

<CHECKPOINT CPC22:

IF C10Q05=NO, DON'T KNOW OR REFUSED and S6 does not = 1 and S7 does not = 1, GO TO C22;
IF C10Q04=1 and S6 does not = 1 and S7 does not = 1, GO TO C23A_N;
IF C10Q05=1 and S6 does not = 1 and S7 does not = 1, GO TO C24A;
ELSE (i.e. Relative Adoptions) GO TO C36_INTRO>

- C22A. Earlier you indicated that you adopted [S.C.] through a domestic private adoption. I am going to read a list of reasons to you for choosing this type of adoption. For each reason that I read to you please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing a domestic private adoption.
Thought [TEXTFILL: I/We] would get a child sooner
(READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing a domestic adoption)
(1) YES
(0) NO <GO TO C22B>
(6) DON'T KNOW <GO TO C22B>
(7) REFUSED <GO TO C22B>

- C22AA Was this a very important reason, somewhat important reason, or not an important reason?
(1) VERY IMPORTANT REASON
(2) SOMEWHAT IMPORTANT REASON
(3) NOT IMPORTANT
(6) DON'T KNOW
(7) REFUSED

- C22B (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing a domestic private adoption)
Didn't think [TEXTFILL: I/We] would qualify to adopt a child internationally.

- (1) YES
- (0) NO <GO TO C22C>
- (6) DON'T KNOW <GO TO C22C>
- (7) REFUSED <GO TO C22C>

C22BA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22C (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Adoption workers or lawyer discouraged [TEXTFILL: me/us] from trying to adopt a child from the foster care system.

- (1) YES
- (0) NO <GO TO C22D>
- (6) DON'T KNOW <GO TO C22D>
- (7) REFUSED <GO TO C22D>

C22CA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22D (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Wanted an infant.

- (1) YES
- (0) NO <GO TO C22E>
- (6) DON'T KNOW <GO TO C22E>
- (7) REFUSED <GO TO C22E>

C22DA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22E (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Wanted a healthy child

- (1) YES
- (0) NO <GO TO C22F>
- (6) DON'T KNOW <GO TO C22F>
- (7) REFUSED <GO TO C22F>

C22EA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22F (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Wanted a child the same race/ethnicity as our family

- (1) YES
- (0) NO <GO TO C22G>
- (6) DON'T KNOW <GO TO C22G>
- (7) REFUSED <GO TO C22G>

C22FA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22G (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Wanted a closed adoption, that is, no information exchange or contact with child's birth family

- (1) YES
- (0) NO <GO TO C22H>
- (6) DON'T KNOW <GO TO C22H>
- (7) REFUSED <GO TO C22H>

C22GA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22H (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Previously adopted another child through a private, domestic adoption

- (1) YES
- (0) NO <GO TO C22I>
- (6) DON'T KNOW <GO TO C22I>
- (7) REFUSED <GO TO C22I>

C22HA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C22I (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a domestic private adoption)

Did you have another reason for choosing a private, domestic adoption that I did not mention?

- (1) YES
- (0) NO <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (6) DON'T KNOW <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (7) REFUSED <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>

C22IA What was this reason that I did not mention? _____

- C22IAA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
<If S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
 - (2) SOMEWHAT IMPORTANT REASON
<If S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
 - (3) NOT IMPORTANT
<If S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
 - (6) DON'T KNOW
<If S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
 - (7) REFUSED
<If S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- C23A_N. Earlier you indicated that you adopted [S.C.] through an international adoption. I am going to read a list of reasons to you for choosing this type of adoption. For each reason that I read to you please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption.
- Interest in a particular culture
- (1) YES
 - (0) NO <GO TO C23B>
 - (6) DON'T KNOW <GO TO C23B>
 - (7) REFUSED <GO TO C23B>
- C23AA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON
 - (3) NOT IMPORTANT
 - (6) DON'T KNOW
 - (7) REFUSED
- C23B Adoption workers or lawyer encouraged [TEXTFILL: IF (S3_N=3,4,6,7 "me" / IF S3_N= 1 OR 2 "us")] to adopt internationally
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>
- (1) YES
 - (0) NO <GO TO C23C>
 - (6) DON'T KNOW <GO TO C23C>
 - (7) REFUSED <GO TO C23C>
- C23BA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON
 - (3) NOT IMPORTANT
 - (6) DON'T KNOW
 - (7) REFUSED
- C23C Adoption workers or lawyer discouraged [TEXTFILL: me/us] from trying to adopt a child from the U.S.
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reason for choosing an international adoption>
- (1) YES
 - (0) NO <GO TO C23D>
 - (6) DON'T KNOW <GO TO C23D>
 - (7) REFUSED <GO TO C23D>
- C23CA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON

- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C23D Wanted an infant

<READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>

- (1) YES
- (0) NO <GO TO C23E>
- (6) DON'T KNOW <GO TO C23E>
- (7) REFUSED <GO TO C23E>

C23DA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C23E Wanted a closed adoption, that is, no information exchange or contact with child's birth family

<READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>

- (1) YES
- (0) NO <GO TO C23F>
- (6) DON'T KNOW <GO TO C23F>
- (7) REFUSED <GO TO C23F>

C23EA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C23F Thought it would be too difficult to adopt a child from the U.S.

<READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>

- (1) YES
- (0) NO <GO TO C23G>
- (6) DON'T KNOW <GO TO C23G>
- (7) REFUSED <GO TO C23G>

C23FA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C23G Didn't think I would qualify to adopt a child from the U.S.

<READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>

- (1) YES
- (0) NO <GO TO C23H>
- (6) DON'T KNOW <GO TO C23H>
- (7) REFUSED <GO TO C23H>

- C23GA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON
 - (3) NOT IMPORTANT
 - (6) DON'T KNOW
 - (7) REFUSED
- C23H Thought I/we would get a child sooner
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>
- (1) YES
 - (0) NO <GO TO C23I>
 - (6) DON'T KNOW <GO TO C23I>
 - (7) REFUSED <GO TO C23I>
- C23HA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON
 - (3) NOT IMPORTANT
 - (6) DON'T KNOW
 - (7) REFUSED
- C23I Not interested in the children available for adoption in the U.S.
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>
- (1) YES
 - (0) NO <GO TO C23K>
 - (6) DON'T KNOW <GO TO C23K>
 - (7) REFUSED <GO TO C23K>
- C23IA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON
 - (3) NOT IMPORTANT
 - (6) DON'T KNOW
 - (7) REFUSED
- C23IAA. Why did you think that children available for adoption in the U.S. would not be the best option for you?
-
- (6) DON'T KNOW
 - (7) REFUSED
- C23K. Previously adopted another child internationally
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing an international adoption>
- (1) YES
 - (0) NO <GO TO C23L>
 - (6) DON'T KNOW <GO TO C23L>
 - (7) REFUSED <GO TO C23L>
- C23KA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 - (2) SOMEWHAT IMPORTANT REASON
 - (3) NOT IMPORTANT

- (6) DON'T KNOW
- (7) REFUSED

C23L Did you have another reason for choosing an international adoption that I did not mention?

- (1) YES
- (0) NO <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (6) DON'T KNOW <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (7) REFUSED <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>

C23LA What was this reason that I did not mention? _____

C23LB Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (2) SOMEWHAT IMPORTANT REASON
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (3) NOT IMPORTANT
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (6) DON'T KNOW
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (7) REFUSED
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>

C24A Earlier you indicated that you adopted [S.C.] through a foster care adoption. I am going to read a list of reasons to you for choosing this type of adoption. For each reason that I read to you please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing a foster care adoption.

Thought [TEXTFILL: I/We] would get a child sooner

- (1) YES
- (0) NO <GO TO C24B>
- (6) DON'T KNOW <GO TO C24B>
- (7) REFUSED <GO TO C24B>

C24AA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

C24B (READ IF NECESSARY: Please tell me whether or not this was one of your [TEXTFILL: or your spouse's/partner's] reasons for choosing a foster care adoption)

Adopting from U.S. foster care was less costly than adopting internationally or privately

- (1) YES
- (0) NO <GO TO C24C>
- (6) DON'T KNOW <GO TO C24C>
- (7) REFUSED <GO TO C24C>

C24BA Was this a very important reason, somewhat important reason, or not an important reason?

- (1) VERY IMPORTANT REASON
- (2) SOMEWHAT IMPORTANT REASON
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

- C24C Wanted an older child
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a foster care adoption>
- (1) YES
 (0) NO <GO TO C24D>
 (6) DON'T KNOW <GO TO C24D>
 (7) REFUSED <GO TO C24D>
- C24CA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 (2) SOMEWHAT IMPORTANT REASON
 (3) NOT IMPORTANT
 (6) DON'T KNOW
 (7) REFUSED
- C24D Wanted a child with special needs
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a foster care adoption>
- (1) YES
 (0) NO <GO TO C24E>
 (6) DON'T KNOW <GO TO C24E>
 (7) REFUSED <GO TO C24E>
- C24DA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 (2) SOMEWHAT IMPORTANT REASON
 (3) NOT IMPORTANT
 (6) DON'T KNOW
 (7) REFUSED
- C24E Previously adopted another child through the foster care system
- <READ IF NECESSARY: please tell me whether or not this was one of your [TEXTFILL: or your spouse's/ partner's] reasons for choosing a foster care adoption>
- (1) YES
 (0) NO <GO TO C24F>
 (6) DON'T KNOW <GO TO C24F>
 (7) REFUSED <GO TO C24F>
- C24EA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON
 (2) SOMEWHAT IMPORTANT REASON
 (3) NOT IMPORTANT
 (6) DON'T KNOW
 (7) REFUSED
- C24F Did you have another reason for choosing to adopt a child from foster care that I did not mention?
- (1) YES
 (0) NO <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
 (6) DON'T KNOW <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
 (7) REFUSED <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- C24FA What was this reason that I did not mention? _____
- C24FAA Was this a very important reason, somewhat important reason, or not an important reason?
- (1) VERY IMPORTANT REASON

- <IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (2) SOMEWHAT IMPORTANT REASON
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (3) NOT IMPORTANT
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (6) DON'T KNOW
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>
- (7) REFUSED
<IF S6 ne 1, GO TO C25, ELSE go to C36_INTRO>

C25 At the time of the adoption, did the adoption agency or attorney offer any options for an open adoption?

<HELP SCREEN: By open adoption, we mean sharing written information such as letters or email, or in-person visits between you [TEXTFILL: or your spouse/partner] and the birth family or between your child the the birth family?>

- (1) YES <If C10Q04=1, GO TO C25A; ELSE GO TO C26>
- (0) NO <If C10Q04=1, GO TO C25A; ELSE GO TO C26>
- (6) DON'T KNOW <If C10Q04=1, GO TO C25A; ELSE GO TO C26>
- (7) REFUSED <If C10Q04=1, GO TO C25A; ELSE GO TO C26>

C25A Were you [TEXTFILL: or your spouse/partner] required to provide post-adoption reports to the child's country of origin?

<HELP SCREEN: These could be reports to either the government or to any other organization in the country of origin.>

- (1) YES
- (0) NO <GO TO C26>
- (6) DON'T KNOW <GO TO C26>
- (7) REFUSED <GO TO C26>

C25AA How many post-adoption reports were filed?

- (6) DON'T KNOW
- (7) REFUSED

C25AB. Will you [TEXTFILL: or your spouse/partner] be providing post-adoption reports in the future?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C26 Was there any kind of pre-adoption agreement in which you agreed to provide information about [S.C.] to one or both of his/her birth parents or other birth family members?

- (1) YES
- (0) NO <GO TO C28>
- (6) DON'T KNOW <GO TO C28>
- (7) REFUSED <GO TO C28>

C26A Was this agreement written or verbal?

- (1) WRITTEN
- (2) VERBAL
- (3) BOTH
- (6) DON'T KNOW
- (7) REFUSED

C27 Was information ever provided?

- (1) YES
- (0) NO

- (6) DON'T KNOW
- (7) REFUSED

C28 Since the time of [S.C.]'s adoption, have you, [TEXTFILL: SPOUSE OR PARTNER], or [S.C.] ever had contact with his/her birth family members?

[INTERVIEWER INSTRUCTION: DEFINITION OF CONTACT SHOULD BE: LETTERS, EMAILS, TELEPHONE CALLS OR IN-PERSON VISITS]:

- (1) YES
- (2) NO <GO TO C36_INTRO>
- (6) DON'T KNOW <GO TO C36_INTRO>
- (7) REFUSED <GO TO C36_INTRO>

C28A Since the time of [S.C.]'s adoption, how often has [S.C.] had contact with his/her Birthparent(s)

- (1) NEVER <GO TO CPC29>
- (2) ONCE A YEAR OR EVERY FEW YEARS
- (3) A FEW TIMES A YEAR
- (4) ABOUT EVERY MONTH OR MORE
- (6) DON'T KNOW <GO TO CPC29>
- (7) REFUSED <GO TO CPC29>

C28B How comfortable are you [TEXTFILL: and your spouse/partner] with [S.C.] having contact with his/her birth parents? Would you say very comfortable, somewhat comfortable, somewhat uncomfortable, or very uncomfortable?

[INTERVIEWER INSTRUCTION: IF OPINIONS DIFFER BETWEEN RESPONDENT AND SPOUSE/PARTNER, ASK FOR RESPONDENT'S OPINION]

- (1) VERY COMFORTABLE
- (2) SOMEWHAT COMFORTABLE
- (3) SOMEWHAT UNCOMFORTABLE
- (4) VERY UNCOMFORTABLE
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC29: If C4_N = NO, DON'T KNOW, or REFUSED GO TO C30/ ELSE go to C29>

C29 Since the time of S.C.'s adoption, how often has S.C. had contact with birth brothers or sisters who do not live in your household

- (1) NEVER <GO TO CPC30>
- (2) ONCE A YEAR OR EVERY FEW YEARS
- (3) A FEW TIMES A YEAR
- (4) ABOUT EVERY MONTH OR MORE
- (6) DON'T KNOW <GO TO CPC30>
- (7) REFUSED <GO TO CPC30>

C29A How comfortable are you [TEXTFILL: and your spouse/partner] with [S.C.] having contact with his/her birth brothers or sisters who do not live in your household? Would you say very comfortable, somewhat comfortable, somewhat uncomfortable, or very uncomfortable?

[INTERVIEWER INSTRUCTION: IF OPINIONS DIFFER BETWEEN RESPONDENT AND SPOUSE/PARTNER, ASK FOR RESPONDENT'S OPINION]

- (1) VERY COMFORTABLE
- (2) SOMEWHAT COMFORTABLE
- (3) SOMEWHAT UNCOMFORTABLE
- (4) VERY UNCOMFORTABLE
- (6) DON'T KNOW
- (7) REFUSED

C30 Since the time of S.C.'s adoption, how often has S.C. had contact with other birth relatives such as birth grandparents, birth aunts and uncles, etc...

- (1) NEVER <GO TO CPC31>
- (2) ONCE A YEAR OR EVERY FEW YEARS
- (3) A FEW TIMES A YEAR
- (4) ABOUT EVERY MONTH OR MORE
- (6) DON'T KNOW <GO TO CPC31>
- (7) REFUSED <GO TO CPC31>

C30A How comfortable are you [TEXTFILL: and your spouse/partner] with [S.C.] having contact with his/her other birth relatives? Would you say very comfortable, somewhat comfortable, somewhat uncomfortable, or very uncomfortable?

- (1) VERY COMFORTABLE
- (2) SOMEWHAT COMFORTABLE
- (3) SOMEWHAT UNCOMFORTABLE
- (4) VERY UNCOMFORTABLE
- (6) DON'T KNOW
- (7) REFUSED

C31 These next questions are about any contact that you [or your spouse/partner] have had with [S.C.]'s birth family. Since [S.C.]'s adoption was finalized, have you [or your spouse/partner] ever had planned contact with [S.C.]'s birth parents or other extended birth family?

[INTERVIEWER DEFINITION OF CONTACT SHOULD BE: LETTERS, EMAILS, OR IN-PERSON VISITS]

- (1) YES
- (0) NO <GO TO C36_INTRO>
- (6) DON'T KNOW <GO TO C36_INTRO>
- (7) REFUSED <GO TO C36_INTRO>

C32 Was this contact with:

Birthparent(s)?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC33: If C4_N = NO, DON'T KNOW, or REFUSED then GO TO C34/ ELSE go to C33>

C33 Brothers/sisters living elsewhere?

<READ IF NECESSARY: Was this contact with>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C34 Other blood relatives (grandparents, aunts/uncles)?

<READ IF NECESSARY: Was this contact with>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C35 Do you [TEXTFILL: or your spouse/partner] **currently** stay in contact with [S.C.]'s birth parents or other extended birth family?

- (1) YES

- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C36_INTRO These next questions are about information you may have received about [S.C.] before adopting [him/her].

C36 Prior to [S.C.]'s adoption, did you [TEXTFILL: or your spouse/partner]...

<CHECKPOINT CPC36A: IF ADOPT_TYPE not=FOSTER CARE go to C36B/ELSE Go to C36A>

C36A Receive or review the child's case record

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C36B Prior to [S.C.]'s adoption, did you [TEXTFILL: or your spouse/partner] Discuss the child's past with an adoption caseworker

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C36C Discuss the child's past with an adoption attorney

<READ IF NECESSARY: Prior to [S.C.]'s adoption, did you [TEXTFILL: or your spouse/partner]>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC36D: IF C1A<3 YEARS GO TO C36E

/ ELSE IF (C1A= 6 or 7) AND (AGEYRNSAP< 3), GO TO CPC36F

/ ELSE, go to C36D

C36D Receive or review a written psychological report

<READ IF NECESSARY: Prior to [S.C.]'s adoption, did you [TEXTFILL: or your spouse/partner]>

- (1) YES <GO TO C36DA>
- (0) NO <GO TO C36E>
- (6) DON'T KNOW <GO TO C36E>
- (7) REFUSED <GO TO C36E>

C36DA Did you [TEXTFILL: or your spouse/partner] consult with a professional of your choosing regarding the contents of the psychological report?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C36E Receive or review information about [S.C.]'s medical history

<READ IF NECESSARY: Prior to [S.C.]'s adoption, did you [TEXTFILL: or your spouse/partner]>

- (1) YES <GO TO C36EA>
- (0) NO <GO TO C36>
- (6) DON'T KNOW <GO TO C36>
- (7) REFUSED <GO TO C36>

C36EA Did you [or your spouse/partner] consult with a professional of your choosing regarding [S.C.]’s medical history?
 (1) YES
 (0) NO
 (6) DON’T KNOW
 (7) REFUSED

<CHECKPOINT CPC36F: IF C1A <5 YEARS, or IF (C1A= 6 or 7) AND (AGEYRNSAP< 5) , GO TO C38 / ELSE GO TO C36F

C36F Receive or review records of [S.C.]’s school or educational history, such as grades or test scores
 <READ IF NECESSARY: Prior to [S.C.]’s adoption, did you [TEXTFILL: or your spouse/partner]>
 (1) YES <GO TO C36FA>
 (0) NO <GO TO C38>
 (6) DON’T KNOW <GO TO C38>
 (7) REFUSED <GO TO C38>

C36FA Did you [TEXTFILL: or your spouse/partner] consult with a professional of your choosing regarding [S.C.]’s school or educational records?
 (1) YES
 (0) NO
 (6) DON’T KNOW
 (7) REFUSED

C38 Do you believe that the agency knew important information about [S.C.] that they did not share with you [TEXTFILL: or your spouse/partner] before [S.C.]’s adoption was finalized?
 (1) YES
 (0) NO
 (6) DON’T KNOW
 (7) REFUSED

C3A These next questions are about problems your child may have experienced before being adopted by you. You may not know the answers, but please answer to the best of your knowledge. We ask these questions to all parents.
 Before [S.C.] first came to your home, how likely was it that he/she was...
 Would you say very likely, likely, unlikely, or very unlikely?

	Very likely	Likely	Unlikely	Very unlikely	CHILD ADOPTED AT BIRTH	DON'T KNOW	REFUSED
a. Physically abused	1	2	3	4	0	6	7
b. Sexually abused	1	2	3	4	0	6	7
c. Neglected	1	2	3	4	0	6	7
d. Exposed to drugs or alcohol before birth?	1	2	3	4	0	6	7
e. Emotionally abused	1	2	3	4	0	6	7

<CATI INSTRUCTIONS: FOR EACH SCREEN C3A-C3E, READ IF NECESSARY: Before [S.C.] first came to your home, how likely was it that he/she was >

<HELP SCREEN: These questions may not apply to your child, but it is important that we ask these questions of everyone.>

C42_INTRO The next few questions concern the child’s mental health and while these questions may sound similar to previously asked questions, they ask about different conditions.

C44 I am going to read you a list of conditions. For each condition, please tell me if a doctor or other health care provider ever told you that [S.C.] had the condition, even if (he/she) does not have the condition now
 Post-Traumatic Stress Disorder (PTSD)?

INTERVIEWER INSTRUCTION: IF THE RESPONDENT HAS NEVER HEARD OF THE MEDICAL CONDITION OR DOES NOT KNOW WHAT THE CONDITION IS, THEN A DOCTOR OR OTHER HEALTH CARE PROVIDER PROBABLY HAS NOT TOLD THE RESPONDENT THAT THE CHILD HAS THE CONDITION.

IF A DOCTOR OR OTHER HEALTH CARE PROVIDER HAS NOT TOLD THE RESPONDENT THAT THE CHILD HAS THE CONDITION, BUT THE RESPONDENT INSISTS THAT THE CHILD HAS THE CONDITION, WE STILL NEED TO CODE THE ANSWER AS “NO.”

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C45 Attachment disorder

<READ IF NECESSARY: Has a doctor or other health care provider ever told you that [S.C.] had the condition>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC46: IF AGEMONSAP < 24 MONTHS, SKIP TO CHECKPOINT CPC42

C46 Oppositional Defiant Disorder (ODD)

<READ IF NECESSARY: Has a doctor or other health care provider ever told you that [S.C.] had the condition>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C47 Conduct disorder

<READ IF NECESSARY: Has a doctor or other health care provider ever told you that [S.C.] had the condition>

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC42: If AGEMONSAP <36 months, skip to CPC53>

C42 Mental health professionals include psychiatrists, psychologists, psychiatric nurses, and clinical social workers. Since the time the adoption was finalized, has [S.C.] received any treatment or counseling from a mental health professional?

- (1) YES
- (0) NO <GO TO CPC49>
- (6) DON'T KNOW <GO TO CPC49>
- (7) REFUSED <GO TO CPC49>

<CHECKPOINT CPC43: IF AGEMONSAP < 96 MONTHS, SKIP TO CPC53>

C43 Since the time the adoption was finalized, has [S.C.] been placed in a psychiatric hospital, group home, or residential treatment center?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC49: IF AGEYRNSAP <13 Years of age, GO TO C53_INTRO/ ELSE go to C49>

C49 Has [S.C.] ever had any alcohol or drug problems?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C50 Has [S.C.] ever been arrested or in trouble with the police?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

C51 Has [S.C.] ever (TEXTFILL: been pregnant /gotten someone pregnant)?

- (1) YES
- (0) NO <GO TO CPC53>
- (6) DON'T KNOW <GO TO CPC53>
- (7) REFUSED <GO TO CPC53>

C52 Does [S.C.] have biological children of his/her own?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC53: IF AGEMONSAP < 12 MONTHS, Go to W1_INTRO/ ELSE Go TO C53_INTRO>

C53_INTRO The next few questions concern [S.C.]'s native language and education experiences.

C53 What was the first language [S.C.] learned to speak?

Drop down list of languages

- (1) ENGLISH <GO TO CPC55>
- (2) CHINESE <GO TO CPC55>
- (3) RUSSIAN <GO TO CPC55>
- (4) SPANISH <GO TO CPC55>
- (5) KOREAN <GO TO CPC55>
- (6) UKRAINIAN <GO TO CPC55>
- (7) OTHER <GO TO C53A>
- (96) DON'T KNOW <GO TO CPC55>
- (97) REFUSED <GO TO CPC55>

C53A SPECIFY _____

<CHECKPOINT CPC55: GO TO C55>

C55 Does [S.C.] have any developmental problems for which (he/she) has a written intervention plan called an [TEXTFILL:IF AGEMONSAP <36 MONTHS, INSERT: Individualized Family Services Plan or an IFSP?; IF AGEMONSAP 36 MONTHS, INSERT: Individualized Education Program or IEP?]

HELP SCREEN (C55): Some young children have developmental delays or other problems for which they receive services from a program called Early Intervention Services or Special Education. Children receiving these services have a written intervention plan called an IFSP if the child is 3 or under, or an IEP if older than about 3 years. Services on an IFSP or an IEP might include things such as special instruction; speech language therapy; vision and hearing services; psychological services; health services; social work services; family counseling and support; transportation; service coordination or other services needed to support the child's development.

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPC56: IF AGEYRNSAP IS <5 YEARS OF AGE, GO TO W1_INTRO; ELSE Go to C56>

C56. *NSAP Would you describe [S.C.]’s school performance in reading and language arts as excellent, very good, good, fair or poor?

- (1) EXCELLENT
- (2) VERY GOOD
- (3) GOOD
- (4) FAIR
- (5) POOR
- (6) NOT IN SCHOOL <GO TO CPK7Q05>
- (6) DON’T KNOW
- (7) REFUSED

C56A. *NSAP Would you describe [S.C.]’s school performance in math as excellent, very good, good, fair or poor?

- (1) EXCELLENT
- (2) VERY GOOD
- (3) GOOD
- (4) FAIR
- (5) POOR
- (6) DON’T KNOW
- (7) REFUSED

K7Q05 Since starting kindergarten, has [he/she] repeated any grades?

- (1) YES
- (0) NO
- (6) DON’T KNOW
- (7) REFUSED

<CHECKPOINT CPC57: Ask C57 and C58 only if AGEYRNSAP = OR > 10 years; ELSE GO TO W1_INTRO>

C57 [TEXTFILL: IF (AGEYRNSAP - C1A) = 2 or more “During the past 12 months” / ELSE IF (AGEYRNSAP - C1A) = 1 or 0 “Since [S.C.]’s adoption was finalized” / ELSE IF C1A=6 or 7 “During the past 12 months.”], how many times has [S.C.] skipped school, cut classes without your permission, or refused to go to school? Was it ...

- (1) NEVER
- (2) ONCE
- (3) TWO OR MORE TIMES
- (6) DON’T KNOW
- (7) REFUSED

C58 Including both in-school and out-of-school suspensions, [TEXTFILL: IF (AGEYRNSAP - C1A) = 2 or more “During the past 12 months” / ELSE IF (AGEYRNSAP - C1A) = 1 or 0 “Since [S.C.]’s adoption was finalized” / ELSE IF C1A=6 or 7 “During the past 12 months.”], has [S.C.] been suspended or expelled from school?

- (1) YES
- (0) NO
- (6) DON’T KNOW
- (7) REFUSED

PARENT AND CHILD WELL-BEING (W)

TIMESTAMP_SECTION_WB1

W1_INTRO The next series of questions are about how you, your child, and your family are doing. By family, we mean the people in your family who live in your household.

K7Q70_INTRO I am going to read a list of items that sometimes describe children. For each item, please tell me how often this was true for [S.C.] during the past month. Would you say never, rarely, sometimes, usually, or always?

QUESTION STEM: [Please tell me if this statement was never, rarely, sometimes, usually, or always true for [S.C.] during the past month.]

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS
- (6) DON'T KNOW
- (7) REFUSED

[CATI: DISPLAY QUESTION STEM FOR EACH OF THE FOLLOWING SCREENS.]

K7Q70 [He/She] argues too much.

K7Q73 [He/She] gets along well with other children.

K7Q74 [He/She] is disobedient.

K7Q75 [He/She] is stubborn, sullen, or irritable.

K7Q76 [He/She] tries to understand other people's feelings.

K7Q77 [He/She] tries to resolve conflicts with classmates, family, or friends.

K7Q79 [He/She] is unhappy, sad, or depressed.

W1 *NSAP How would you describe your relationship to [S.C.]? Would you say very warm and close, somewhat warm and close, somewhat distant, or very distant?

<HELP SCREEN: Please describe your relationship as it exists now>

- (1) VERY WARM AND CLOSE
- (2) SOMEWHAT WARM AND CLOSE
- (3) SOMEWHAT DISTANT
- (4) VERY DISTANT
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW1A: IF(S3_N IS NOT 1 OR 2), SKIP W1A AND GO TO CPW2>

W1A How would you describe your [TEXTFILL: spouse's/partner's] relationship to [S.C.]? Would you say very warm and close, somewhat warm and close, somewhat distant, or very distant?

HELP SCREEN: Please describe their relationship as it exists now

- (1) VERY WARM AND CLOSE
- (2) SOMEWHAT WARM AND CLOSE
- (3) SOMEWHAT DISTANT
- (4) VERY DISTANT
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW2: IF AGEMONSAP <6 months old, GO TO W7; ELSE GO TO W2>

W2 *NSAP How often is [S.C.] affectionate or tender with you? Would you say never, rarely, sometimes, usually or always?

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS
- (6) DON'T KNOW
- (7) REFUSED

W3 How satisfied are you with how affectionate or tender [S.C.] is with you? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

- (1) VERY SATISFIED
- (2) SOMEWHAT SATISFIED
- (3) SOMEWHAT DISSATISFIED
- (4) VERY DISSATISFIED
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW4: IF AGEYRNSAP <13 YEARS OLD, GO TO CPW5/ ELSE Go to W4>

W4 *NSAP Do you feel that [S.C.] and you make decisions about (his/her) life together. Would you say never, rarely, sometimes, usually or always?

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW5: IF AGEYRNSAP <5 YEAR OLDS, GO TO K8Q34/ ELSE go to W5>

W5 *NSAP During the past month, how often have you felt that you just did not understand (him/her). Would you say never, rarely, sometimes, usually or always?

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS
- (6) DON'T KNOW
- (7) REFUSED

W6 *NSAP During the past month, how often have you felt that you can really trust (him/her). Would you say never, rarely, sometimes, usually or always?

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS
- (6) DON'T KNOW
- (7) REFUSED

K8Q34 During the past month, how often have you felt angry with [him/her]? **[READ RESPONSES AS NECESSARY:** Would you say never, rarely, sometimes, usually, or always?]

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS

- (6) DON'T KNOW
- (7) REFUSED

K8Q30 **CATI INSTRUCTION (K8Q30):** IF C2Q04 = (1) Mother OR (2) Father FILL "parenthood". ELSE FILL "raising children".

In general, how well do you feel you are coping with the day to day demands of (parenthood/raising children)?
Would you say that you are coping very well, somewhat well, not very well, or not well at all?

- (1) VERY WELL
- (2) SOMEWHAT WELL
- (3) NOT VERY WELL
- (4) NOT WELL AT ALL
- (6) DON'T KNOW
- (7) REFUSED

W7 Thinking about [S.C.]'s relationship with you, would you say things are better than you ever expected, about what you expected, or more difficult than you ever expected?

- (1) BETTER THAN YOU EVER EXPECTED
- (2) ABOUT WHAT YOU EXPECTED
- (3) MORE DIFFICULT THAN YOU EVER EXPECTED
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW8: IF (S3_N=1 OR 2) GO to W8/ ELSE Go to CPW9>

W8. Thinking about [S.C.]'s relationship with your [TEXTFILL: spouse/partner], would you say things are better than you ever expected, about what you expected, or more difficult than you ever expected?

- (1) BETTER THAN YOU EVER EXPECTED
- (2) ABOUT WHAT YOU EXPECTED
- (3) MORE DIFFICULT THAN YOU EVER EXPECTED
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW9: IF C8_N= NO/DON'T KNOW/REFUSED AND C9_N = NO/DON'T KNOW/REFUSED) OR AGEYRNSAP <1 YEAR GO TO W12 / ELSE GO TO W9_INTRO>

W9_INTRO Now I would like to ask you to think about how [S.C.] gets along with other children in your family.

W9 In general, how often does [S.C.] experience difficulty in getting along with other children in the household?
Would you say never, rarely, sometimes, usually or always?

- (1) NEVER
- (2) RARELY
- (3) SOMETIMES
- (4) USUALLY
- (5) ALWAYS
- (6) DON'T KNOW
- (7) REFUSED

[TI INSTRUCTION: BY "CHILDREN IN THE HOUSEHOLD" WE MEAN THOSE CHILDREN WHO LIVE PERMANENTLY IN THIS HOUSEHOLD. DO NOT INCLUDE CHILDREN STAYING WITH THE RESPONDENT TEMPORARILY.]

W12 Overall, how has having [S.C.] in your life affected your family? By family, we mean your family who live in your household. Would you say it has affected your family very positively, somewhat positively, somewhat negatively, very negatively, or mixed?

- (1) VERY POSITIVELY
- (2) SOMEWHAT POSITIVELY
- (3) MIXED
- (4) SOMEWHAT NEGATIVELY

- (5) VERY NEGATIVELY
- (6) DON'T KNOW
- (7) REFUSED

W13 So far, how has having [S.C.] in your life compared with what you thought it would be like? Would you say it is better than you expected, about what you expected, or more difficult than you expected?

- (1) BETTER THAN YOU EVER EXPECTED
- (2) ABOUT WHAT YOU EXPECTED
- (3) MORE DIFFICULT THAN YOU EVER EXPECTED
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPW14: IF AGEYRNSAP <5 YEARS Go to W15/ ELSE Go to W14>

W14 Overall, how do you think [S.C.] feels about being adopted? Would you say [S.C.]... feels positive about it, feels mostly positive about it, feels mostly negative about it, or feels negative about it?

- (1) FEELS POSITIVE ABOUT IT
- (2) FEELS MOSTLY POSITIVE ABOUT IT
- (3) FEELS NEITHER POSITIVE NOR NEGATIVE ABOUT IT
- (4) FEELS MOSTLY NEGATIVE ABOUT IT
- (5) FEELS NEGATIVE ABOUT IT
- (6) CHILD DOES NOT KNOW HE/SHE IS ADOPTED
- (96) DON'T KNOW
- (97) REFUSED

W15 If you [TEXTFILL: and your spouse/partner] knew everything about [S.C.] before the adoption that you now know, how might that have affected your decision to accept him/her for adoption? Would you have....

Definitely accepted the child, probably accepted the child, probably not accepted the child, or definitely not accepted the child.

- (1) WOULD HAVE DEFINITELY ACCEPTED THE CHILD
- (2) WOULD HAVE PROBABLY ACCEPTED THE CHILD
- (3) WOULD HAVE PROBABLY NOT ACCEPTED THE CHILD
- (4) WOULD HAVE DEFINITELY NOT ACCEPTED THE CHILD
- (6) DON'T KNOW
- (7) REFUSED

W16 Given your [TEXTFILL: and your spouse's/partner's] experience of adoption with this child, would you recommend adoption to others?

- (1) YES
- (2) NO
- (3) DEPENDS
- (6) DON'T KNOW
- (7) REFUSED

W17 Since the adoption was finalized, has [S.C.] ever lived outside of your home for two weeks or longer?

INTERVIEWER INSTRUCTION: DO NOT INCLUDE EXTENDED VACATIONS

- (1) YES
- (0) NO <GO TO CPW18>
- (6) DON'T KNOW <GO TO CPW18>
- (7) REFUSED <GO TO CPW18>

W17A How many times?

- (6) DON'T KNOW
- (7) REFUSED

W17B Was [S.C.]’s time away from home related to problems or conflicts among family members?

- (1) YES
- (0) NO <GO TO CPW18>
- (6) DON’T KNOW <GO TO CPW18>
- (7) REFUSED <GO TO CPW18>

W17C As a result of [S.C.]’s time away from your home did the situation... improve, stay about the same, or get worse?

- (1) IMPROVE
- (2) STAY ABOUT THE SAME
- (3) GET WORSE
- (4) NOT APPLICABLE/STAY AWAY FROM HOME NOT RELATED TO PROBLEMS
- (6) DON’T KNOW
- (7) REFUSED

<CHECKPOINT CPW18: IF (W12 = 4 OR 5) OR (W15 = 3 OR 4) GO TO W18 / ELSE GO TO CPF1>

W18 Have you [TEXTFILL: or your spouse/partner] ever thought about ending this adoption?

- (1) YES
- (0) NO <GO TO CPF1>
- (6) DON’T KNOW <GO TO CPF1>
- (7) REFUSED <GO TO CPF1>

W19 Have you [TEXTFILL: or your spouse/partner] ever taken any action to end this adoption?

- (1) YES
- (0) NO <GO TO W23>
- (6) DON’T KNOW <GO TO CPF1>
- (7) REFUSED <GO TO CPF1>

W20A What actions have you [TEXTFILL: or your spouse/partner] taken?

- (1) SPOKE TO CASEWORKER ABOUT IT
<IF “OTHER” also selected, GO TO W20AA; ELSE GO TO W20B>
- (2) SPOKE WITH ATTORNEY ABOUT IT
<IF “OTHER” also selected, GO TO W20AA; ELSE GO TO W20B>
- (3) OTHER <GO TO W20AA>
- (6) DON’T KNOW
<IF “OTHER” also selected, GO TO W20AA; ELSE GO TO W20B>
- (7) REFUSED
<IF “OTHER” also selected, GO TO W20AA; ELSE GO TO W20B>

W20AA. Specify:_____

W20B How old was [S.C.] when this action took place?

- ___years <GO TO W21A_INTRO>
- (6) DON’T KNOW
- (7) REFUSED

IF LESS THAN ONE YEAR, ENTER 0 FOR YEARS AND GO TO W20BA

W20BA ___ months

- (6) DON’T KNOW
- (7) REFUSED

W21A_INTRO I am going to read a list of reasons some parents may take this action. Please tell me if each was a very important, somewhat important, or not important reason for you.

W21A Child behavioral or education problems.

<READ IF NECESSARY: Was this a very important, somewhat important, or not important reason for taking action to end the adoption?>

- (1) VERY IMPORTANT
- (2) SOMEWHAT IMPORTANT
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

W21B Child did not get along with siblings

<READ IF NECESSARY: Was this a very important, somewhat important, or not important reason for taking action to end the adoption?>

- (1) VERY IMPORTANT
- (2) SOMEWHAT IMPORTANT
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

W21E Child's medical problems

<READ IF NECESSARY: Was this a very important, somewhat important, or not important reason for taking action to end the adoption?>

- (1) VERY IMPORTANT
- (2) SOMEWHAT IMPORTANT
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

W21D Financial reasons

<READ IF NECESSARY: Was this a very important, somewhat important, or not important reason for taking action to end the adoption?>

- (1) VERY IMPORTANT
- (2) SOMEWHAT IMPORTANT
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

W21C Other family problems not associated with child

<READ IF NECESSARY: Was this a very important, somewhat important, or not important reason for taking action to end the adoption?>

- (1) VERY IMPORTANT
- (2) SOMEWHAT IMPORTANT
- (3) NOT IMPORTANT
- (6) DON'T KNOW
- (7) REFUSED

W21F Were there any other important reasons?

- (1) YES
- (0) NO <GO TO W22>
- (6) DON'T KNOW <GO TO W22>
- (7) REFUSED <GO TO W22>

W21FA What were those reasons? _____

- (6) DON'T KNOW
- (7) REFUSED

W22 Are you [TEXTFILL: or your spouse/partner] currently trying to end the adoption?

- (1) YES <GO TO CPF1>
- (0) NO
- (6) DON'T KNOW <GO TO CPF1>
- (7) REFUSED <GO TO CPF1>

W23 I am going to read a list of reasons why you [TEXTFILL: or your spouse/partner] may have changed your mind about ending it. Please tell me if each was a reason you are no longer trying to end the adoption.

W23A You resolved the problem(s) within family

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23B You discussed the situation with other relatives, neighbors, clergy.

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23C You discussed the situation with an adoption worker

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23D You discussed the situation with another adoptive family

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23E You received additional supportive services such as respite care, intensive family preservation, or day care

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23F You engaged in family or individual therapy

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23G You placed the child in a residential program

<READ IF NECESSARY: Please tell me if this was a reason you are no longer trying to end the adoption >

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

W23H Were there any other reasons?

- (1) YES
- (0) NO <GO TO CPF1>
- (6) DON'T KNOW <GO TO CPF1>
- (7) REFUSED <GO TO CPF1>

W23HA What were those reasons? Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

ADOPTION AGREEMENT AND POST ADOPTION SERVICES – FINANCIAL (F)

<CHECKPOINT CPF1: If C10Q04=1 or C1-Q05=NO, DON'T KNOW, OR REFUSED, GO TO F11>

F1. These next few questions are about financial services you may have received related to the adoption of [S.C.].

At the time of [S.C.]'s adoption, was an adoption agreement finalized between your family and the adoption agency? By adoption agreement we mean an agreement made before the finalization of the adoption that may include monthly maintenance payments from the agency, medical coverage, and other services such as therapy.

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

F2. Do you currently receive a monthly subsidy payment to help you meet the needs of [S.C.]?

- (1) YES <GO TO F3>
- (0) NO <GO TO F2A>
- (6) DON'T KNOW <GO TO F2A>
- (7) REFUSED <GO TO F2A>

F2A. Have you ever received an adoption subsidy (payment every month) for [S.C.]?

<HELP SCREEN: An adoption subsidy is a monthly payment>

- (1) YES <GO TO F3>
- (0) NO <GO TO F10>
- (6) DON'T KNOW <GO TO F10>
- (7) REFUSED <GO TO F10>

<CHECKPOINT CPF3: IF F1=2 GO TO F4 / ELSE GO TO F3

F3. (If F2=1: Is/ If F2A=1: Was) this monthly subsidy payment written into your adoption agreement?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

F4. What [TEXTFILL: IF F2=1: is; IF F2a=1: was] the amount per month of the adoption subsidy you [TEXTFILL: IF F2=1: currently receive; IF F2a=1: received] for this child?

- \$___/month <IF S8=1 OR S9=1 GO TO F4a; ELSE GO TO F5>
- (6) DON'T KNOW <IF S8=1 OR S9=1 GO TO F4a; ELSE GO TO F5>
 - (7) REFUSED <IF S8=1 OR S9=1 GO TO F4a; ELSE GO TO F5>

READ IF NECESSARY: We collect this information so we can compare support levels for different states, racial/ethnic groups, or people with different income levels.

F4A. [TEXTFILL: IF F2=YES: Is; IF F2a=YES: Was] this monthly amount higher, lower, or the same as the amount you received when you were [S.C.]'s foster parent?

- (1) HIGHER
- (2) LOWER
- (3) SAME AS
- (6) DON'T KNOW
- (7) REFUSED

F5. Did you request the subsidy or was this subsidy given to you without requesting it?

- (1) I/WE REQUESTED THIS SUBSIDY
- (2) SUBSIDY GIVEN TO ME/US WITHOUT REQUESTING IT <GO TO F7>
- (6) DON'T KNOW
- (7) REFUSED

- F6A. Did you request a subsidy because . . .
[S.C.] needed additional services you could not afford?
- (1) YES
 - (0) NO
 - (6) DON'T KNOW
 - (7) REFUSED
- F6B. The child welfare worker or adoption worker suggested that you request one?
<READ IF NECESSARY: Did you request a subsidy because >
- (1) YES
 - (0) NO
 - (6) DON'T KNOW
 - (7) REFUSED
- F6C. Your attorney suggested you request one?
<READ IF NECESSARY: Did you request a subsidy because >
- (1) YES
 - (0) NO
 - (6) DON'T KNOW
 - (7) REFUSED
- F6D. Was there any other reason why a subsidy was requested?
- (1) YES <GO TO F6DA>
 - (0) NO <IF F2=Yes, GO TO F7; ELSE GO TO F8>
 - (6) DON'T KNOW <IF F2=Yes, GO TO F7; ELSE GO TO F8>
 - (7) REFUSED <IF F2=Yes, GO TO F7; ELSE GO TO F8>
- F6DA. Specify: _____ <IF F2=1, GO TO F7; ELSE GO TO F8>
- (6) DON'T KNOW
 - (7) REFUSED
- F7. Do you feel that the subsidy received for [S.C.] helps to adequately meet [S.C.]'s needs?
- (1) YES
 - (0) NO
 - (6) DON'T KNOW
 - (7) REFUSED
- F8. Without a subsidy would you say the likelihood of you having adopted [S.C.] would have been ...very likely, likely, unlikely, or very unlikely?
- (1) VERY LIKELY <IF F1=1, and F2=2, GO TO F9; ELSE GO TO F11>
 - (2) LIKELY <IF F1=1, and F2=2, GO TO F9; ELSE GO TO F11>
 - (3) UNLIKELY <IF F1=1, and F2=2, GO TO F9; ELSE GO TO F11>
 - (4) VERY UNLIKELY <IF F1=1, and F2=2, GO TO F9; ELSE GO TO F11>
 - (6) DON'T KNOW <IF F1=1, and F2=2, GO TO F9; ELSE GO TO F11>
 - (7) REFUSED <IF F1=1, and F2=2, GO TO F9; ELSE GO TO F11>

F9. Why don't you currently receive an adoption subsidy for [S.C.]? Is it because you no longer need the subsidy, no longer qualify for the subsidy, or some other reason?

- (1) NO LONGER NEEDED SUBSIDY <GO TO F11>
- (2) NO LONGER QUALIFY FOR SUBSIDY <GO TO F11>
- (3) SOME OTHER REASON <GO TO F11>
- (6) DON'T KNOW <GO TO F11>
- (7) REFUSED <GO TO F11>

F9A. What is the reason? _____ <GO TO F11>

- (6) DON'T KNOW
- (7) REFUSED

F10. Why don't you receive an adoption subsidy for [S.C.]? Is it because you

<INTERVIEWER INSTRUCTION: IF RESPONDENT SAYS "I WOULDN'T QUALIFY" OR "THEY WOULD HAVE TURNED US DOWN" CODE 1: DID NOT REQUEST A SUBSIDY>

- (1) DID NOT REQUEST A SUBSIDY <GO TO F11>
- (2) WERE TURNED DOWN <GO TO F11>
- (3) DECLINED THE OFFERED SUBSIDY <GO TO F11>
- (4) SOME OTHER REASON <GO TO F11>
- (6) DON'T KNOW <GO TO F11>
- (7) REFUSED <GO TO F11>

F10A. What is the reason? _____ <GO TO F11>

- (6) DON'T KNOW
- (7) REFUSED

F11. These next few questions are about costs you may have incurred related to the adoption of [S.C.].

Did you pay anything at the time of the adoption, for example, did you pay for a homestudy or pay an attorney?

READ IF NECESSARY: A homestudy is the process by which an adoption social worker determines your suitability as adoptive parents. It usually includes applications, educational classes, interviews, and visits to the home of the prospective parents.

- (1) YES <IF C10Q04=1 OR C10Q05=NO, GO TO F11B, ELSE GO TO F11A>
- (0) NO <GO TO CPF13>
- (6) DON'T KNOW <GO TO CPF13>
- (7) REFUSED <GO TO CPF13>

F11A. Approximately how much did [S.C.]'s adoption cost?

INTERVIEWER INSTRUCTION: DO NOT READ CATEGORIES

- (1) LESS THAN \$5,000 <GO TO F12>
- (2) AT LEAST \$5,000 BUT LESS THAN \$10,000 <GO TO F12>
- (3) \$10,000 OR MORE <GO TO F12>
- (6) DON'T KNOW <GO TO F12>
- (7) REFUSED <GO TO F12>

F11B. Approximately how much did [S.C.]'s adoption cost (including [textfill if International: cost of travel to the child's country of origin/ if private: travel], legal fees, etc.)?

- (1) Less than \$5,000
- (2) At least \$5,000 but less than 10,000 <GO TO CPF13>
- (3) At least \$10,000 but less than \$15,000 <GO TO CPF13>
- (4) At least \$15,000 but less than \$20,000 <GO TO CPF13>
- (5) At least \$20,000 but less than \$25,000 <GO TO CPF13>
- (6) At least \$25,000 but less than \$30,000 <GO TO CPF13>
- (7) At least \$30,000 but less than \$35,000 <GO TO CPF13>
- (8) At least \$35,000 but less than \$40,000 <GO TO CPF13>
- (9) \$40,000 or more <GO TO CPF13>

- (96) DON'T KNOW
- (97) REFUSED

F12. Did the adoption agency reimburse all, some, or none of these expenses?

- (1) ALL
- (2) SOME
- (3) NONE
- (6) DON'T KNOW
- (7) REFUSED

F13_INTRO. These next questions are about your experiences with Medicaid. Some of these questions may seem similar to other questions you have already answered, but they ask about different things.

<CHECKPOINT CPF13: IF F1=1: GO TO F13 / ELSE IF F1=null or missing, 2, 6, or 7: GO TO F14A>

F13. Was [S.C.]'s Medicaid or state-subsidized health insurance included in the adoption agreement?

- (1) YES
- (0) NO <GO TO F14A>
- (6) DON'T KNOW
- (7) REFUSED

F13A. Is any additional medical coverage included in the adoption agreement?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

F14A. Have you ever used Medicaid to obtain mental health services for [S.C.]?

- (1) YES
- (0) NO <GO TO F14B>
- (6) DON'T KNOW <GO TO F14B>
- (7) REFUSED <GO TO F14B>

F14AA. How easy or difficult was it to use Medicaid to pay for these mental health services for [S.C.]? Would you say it was very easy, somewhat easy, somewhat difficult, or very difficult?

- (1) VERY EASY
- (2) SOMEWHAT EASY
- (3) SOMEWHAT DIFFICULT
- (4) VERY DIFFICULT
- (6) DON'T KNOW
- (7) REFUSED

F14B. Have you ever used Medicaid to obtain dental or orthodontia care for [S.C.]?

- (1) YES
- (0) NO <GO TO F14C>
- (6) DON'T KNOW <GO TO F14C>
- (7) REFUSED <GO TO F14C>

F14BA. How easy or difficult was it to use Medicaid to pay for this dental or orthodontia care for [S.C.]? Would you say it was very easy, somewhat easy, somewhat difficult, or very difficult?

- (1) VERY EASY
- (2) SOMEWHAT EASY
- (3) SOMEWHAT DIFFICULT
- (4) VERY DIFFICULT
- (6) DON'T KNOW
- (7) REFUSED

F14C. Have you ever used Medicaid to obtain medical care for [S.C.]? Please include health care related to vision and hearing.

- (1) YES
- (0) NO <GO TO F15>
- (6) DON'T KNOW <GO TO F15>
- (7) REFUSED <GO TO F15>

F14CA. How easy or difficult was it to use Medicaid to pay for these medical services for [S.C.]? Would you say it was very easy, somewhat easy, somewhat difficult, or very difficult?

- (1) VERY EASY
- (2) SOMEWHAT EASY
- (3) SOMEWHAT DIFFICULT
- (4) VERY DIFFICULT
- (6) DON'T KNOW
- (7) REFUSED

F15. These next few questions are about mental health care [S.C.] may have received during the last 12 months.

Mental health professionals include psychiatrists, psychologists, psychiatric nurses, and clinical social workers. During the past 12 months, has [S.C.] received any treatment or counseling from a mental health professional?

- (1) YES <GO TO F16>
- (0) NO <GO TO F17>
- (6) DON'T KNOW <GO TO F17>
- (7) REFUSED <GO TO F17>

F16. What portion of [S.C.]'s mental health services in the last 12 months was paid for by each of the following sources: would you say none, some, almost all or all of [S.C.]'s mental health services were paid for by ...

<CHECKPOINT CPF16A: IF F14A=2 go to F16B/ ELSE Go to F16A >

F16A. Medicaid?

<READ IF NECESSARY: What portion of [S.C.]'s mental health services in the last 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CPF14A_A>
- (6) DON'T KNOW
- (7) REFUSED

F16B. Insurance other than Medicaid?

<READ IF NECESSARY: What portion of [S.C.]'s mental health services in the last 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CPF14A_A>
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPF16C: If [S.C.] is not FOSTER CARE (C10Q05 ne 1) GO TO F16d/ ELSE go to F16C>

F16C. Child Welfare or Adoption Agency?

<READ IF NECESSARY: What portion of [S.C.]'s mental health services in the last 12 months was paid for >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CPF14A_A>
- (6) DON'T KNOW
- (7) REFUSED

F16D. You?

<READ IF NECESSARY: What portion of [S.C.]'s mental health services in the last 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CPF14A_A>
- (6) DON'T KNOW
- (7) REFUSED

F16E Is there any other source helping pay for medical care?

- (1) YES
- (0) NO <GO TO F14A_A>
- (6) DON'T KNOW <GO TO F14A_A>
- (7) REFUSED <GO TO F14A_A>

F16EA. What is that source? _____

- (6) DON'T KNOW
- (7) REFUSED

F14A_A. Mental health medications are used to treat difficulties with emotions, concentration, or behavior. Have you ever used Medicaid to obtain mental health medications for [S.C.]?

- (1) YES
- (0) NO <GO TO F16_A>
- (6) DON'T KNOW <GO TO F16_A>
- (7) REFUSED <GO TO F16_A>

F14A_AA. How easy or difficult was it to use Medicaid to pay for these mental health medications for [S.C.]? Would you say it was very easy, somewhat easy, somewhat difficult, or very difficult?

- (1) VERY EASY
- (2) SOMEWHAT EASY
- (3) SOMEWHAT DIFFICULT
- (4) VERY DIFFICULT
- (6) DON'T KNOW
- (7) REFUSED

F16_A. What portion of [S.C.]'s mental health medication needs in the last 12 months was paid for by each of the following sources:

<CHECKPOINT CPF16A_A: IF F14A_A=2 SKIP F16A_A and go to F16A_B >

F16A_A. Medicaid?

<READ IF NECESSARY: What portion of [S.C.]'s mental health medication needs in the last 12 months was paid for by each of the following sources>

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F17>
- (6) DON'T KNOW
- (7) REFUSED

F16A_B. Insurance other than Medicaid?

<READ IF NECESSARY: What portion of [S.C.]'s mental health medication needs in the last 12 months was paid for by each of the following sources>

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F17>
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPF16A_C: If [S.C.] is not FOSTER CARE (C10Q05 ne 1) SKIP F16A_C AND GO TO F16A_D>

F16A_C. Child Welfare or Adoption Agency?

<READ IF NECESSARY: What portion of [S.C.]'s mental health medication needs in the last 12 months was paid for by each of the following sources >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F17>
- (6) DON'T KNOW
- (7) REFUSED

F16A_D. You?

<READ IF NECESSARY: What portion of [S.C.]'s mental health medication needs in the last 12 months was paid for by each of the following sources>

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F17>
- (6) DON'T KNOW
- (7) REFUSED

F16A_E. Is there any other source helping pay for mental health medications?

<READ IF NECESSARY: What portion of [S.C.]'s mental health medication needs in the last 12 months was paid for by each of the following sources>

- (1) YES
- (0) NO <GO TO F17>
- (6) DON'T KNOW <GO TO F17>
- (7) REFUSED <GO TO F17>

F16A_EA. What is that source? _____

- (6) DON'T KNOW
- (7) REFUSED

F17. These next few questions are about dental care [S.C.] may have received in the last 12 months.

In the last 12 months did [S.C.] receive any dental or orthodontia care?

- (1) YES
- (0) NO <GO TO F18>
- (6) DON'T KNOW <GO TO F18>
- (7) REFUSED <GO TO F18>

<CHECKPOINT CPF17A: IF F14B=2 GO TO F17B/ ELSE GO TO F17A >

F17A. What portion of [S.C.]’s dental or orthodontia care in the past 12 months was paid for by each of the following sources:

Medicaid?

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F18>
- (6) DON’T KNOW
- (7) REFUSED

F17B. What portion of [S.C.]’s dental or orthodontia care in the past 12 months was paid for by each of the following sources:

Insurance other than Medicaid?

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F18>
- (6) DON’T KNOW
- (7) REFUSED

<CHECKPOINT CPF17C: IF [S.C.]’s is not FOSTER CARE (C10Q05 ne 1) GO TO F17D/ ELSE Go to F17C >

F17C. Child Welfare or Adoption Agency?

<READ IF NECESSARY: What portion of [S.C.]’s dental or orthodontia care in the past 12 months was paid for by each of the following sources >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F18>
- (6) DON’T KNOW
- (7) REFUSED

F17D. You?

<READ IF NECESSARY: What portion of [S.C.]’s dental or orthodontia care in the past 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO F18>
- (6) DON’T KNOW
- (7) REFUSED

F17E. Is there any other source helping pay for dental care?

- (1) YES
- (0) NO <GO TO F18>
- (6) DON’T KNOW <GO TO F18>
- (7) REFUSED <GO TO F18>

F17EA. What is that source? _____

- (6) DON'T KNOW
- (7) REFUSED

F18. In the last 12 months has [S.C.] had any medical care including vision and hearing?

- (1) YES
- (0) NO <GO TO F19>
- (6) DON'T KNOW <GO TO F19>
- (7) REFUSED <GO TO F19>

<CHECKPOINT CPF18A: IF (F14C=2) SKIP F18A AND GO TO F18B/ ELSE Go to F18A >

F18A What portion of [S.C.]'s medical care in the past 12 months was paid for by each of the following sources:

Medicaid

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CHECKPOINT CPF19>
- (6) DON'T KNOW
- (7) REFUSED

F18B. Insurance other than Medicaid

<READ IF NECESSARY: What portion of [S.C.]'s medical care in the past 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CHECKPOINT CPF19>
- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPF18C: IF ADOPT_TYPE IS NOT=FOSTER CARE (C10Q05 ne 1) GO TO F18D/ ELSE Go to F18C >

F18C. Child Welfare or Adoption Agency

<READ IF NECESSARY: What portion of [S.C.]'s medical care in the past 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CHECKPOINT CPF19>
- (6) DON'T KNOW
- (7) REFUSED

F18D. You?

<READ IF NECESSARY: What portion of [S.C.]'s medical care in the past 12 months was paid for by >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO CHECKPOINT CPF19>
- (6) DON'T KNOW
- (7) REFUSED

F18E. Is there any other source helping pay for medical care?

- (1) YES
- (0) NO <GO TO CPF19>
- (6) DON'T KNOW <GO TO CPF19>
- (7) REFUSED <GO TO CPF19>

F18EA. What is that source? _____

- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPF19: IF (AGEYRNSAP - C1A) < or = (CURRENT YEAR - 1997), GO TO F19/ ELSE GO TO F20 / IF C1A = 6 or 7 GO TO F20>

F19. The next few questions are about other sources of financial support you may have received at the time of the adoption.

At the time of [S.C.]'s adoption, were you [TEXTFILL: or your spouse/partner] aware of the federal adoption tax credit?

INTERVIEWER INSTRUCTION: IF RESPONDENT ASKS ABOUT THE FEDERAL TAX CREDIT, TELL THEM THEY SHOULD CONSULT A TAX SPECIALIST FOR MORE INFORMATION.

- (1) YES
- (0) NO <GO TO F20>
- (6) DON'T KNOW
- (7) REFUSED

F19A. Did you [TEXTFILL: or your spouse/partner] file for the adoption tax credit on your income tax return?

INTERVIEWER INSTRUCTION: IF RESPONDENT SAYS "WE WILL", CODE YES

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

F20. At the time of [S.C.]'s adoption, did your [TEXTFILL: or your spouse's/partner's] employer provide financial assistance for the adoption?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

POST ADOPTION SUPPORTS – NON-FINANCIAL (NF)

TIMESTAMP_SECTION_NF1

SUPPORT 1

N1. For the next section, I'm going to ask you about different types of services that you may have received or wanted. Did you [TEXTFILL: or your spouse/partner] ever meet with someone at an adoption agency or post-adoption agency to discuss post-adoption services?

- (1) YES
- (0) NO <GO TO N1C>
- (6) DON'T KNOW <GO TO N1C>
- (7) REFUSED <GO TO N1C>

N1A. Was this someone you [TEXTFILL: or your spouse/partner] had contact with prior to [S.C.]'s adoption?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N1B. Did you [TEXTFILL: or your spouse/partner] find this to be very helpful, somewhat helpful, or not very helpful to you, your family, or [S.C.]?

- (1) VERY HELPFUL <GO TO CPN2>
- (2) SOMEWHAT HELPFUL <GO TO CPN2>
- (3) NOT VERY HELPFUL <GO TO CPN2>
- (6) DON'T KNOW <GO TO CPN2>
- (7) REFUSED <GO TO CPN2>

N1C. Did you [TEXTFILL: or your spouse/partner] want to meet with someone at an adoption agency to discuss post-adoption services and supports after the adoption was finalized?

<HELP SCREEN: At any time after the adoption was finalized>

- (1) YES
- (0) NO <GO TO CPN2>
- (6) DON'T KNOW <GO TO CPN2>
- (7) REFUSED <GO TO CPN2>

N1D. Why weren't you [TEXTFILL: or your spouse/partner] able to meet with someone to discuss post-adoption services and supports? [SELECT ALL THAT APPLY]

- (1) NO SUCH WORKER AT MY AGENCY
- (2) AGENCY DID NOT OFFER SERVICES REQUESTED
- (3) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
- (4) SCHEDULES CONFLICTED
- (5) NO TIME
- (6) OTHER <GO TO N1DA>
- (6) DON'T KNOW
- (7) REFUSED

<IF "OTHER NOT SELECTED, GO TO Checkpoint before N2>

N1DA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

SUPPORT 2

TIMESTAMP_SECTION_NF2

<CHECKPOINT CPN2: IF AGEYRNSAP > OR =5 years, GO TO N2; ELSE GO TO N3>

- N2. Has [S.C.] ever participated in an adoption support group for children or youth?
- (1) YES
 - (0) NO <GO TO N2C>
 - (6) DON'T KNOW <GO TO N2C>
 - (7) REFUSED <GO TO N2C>
- N2A. Did you find this to be very helpful, somewhat helpful, or not very helpful?
- (1) VERY HELPFUL
 - (2) SOMEWHAT HELPFUL
 - (3) NOT VERY HELPFUL
 - (6) DON'T KNOW
 - (7) REFUSED
- N2B. Did S.C. find this to be very helpful, somewhat helpful, or not very helpful?
- (1) VERY HELPFUL
 - (2) SOMEWHAT HELPFUL
 - (3) NOT VERY HELPFUL
 - (6) DON'T KNOW
 - (7) REFUSED
- N2BA. How did you [TEXTFILL: or your spouse/partner] or [S.C.] hear about this support group? [SELECT ALL THAT APPLY]
- (1) CHILD'S SCHOOL
 - (2) ADOPTION WORKER
 - (3) ADOPTION AGENCY/CHILD WELFARE AGENCY
 - (4) ADOPTION ATTORNEY
 - (5) COMMUNITY OR LOCAL NEWSPAPER
 - (6) ADOPTION WEBSITE OR LISTSERV
 - (7) OTHER PARENTS
 - (8) OTHER <GO TO N2BAA>
 - (96) DON'T KNOW
 - (97) REFUSED
- <GO TO N3 IF OTHER NOT SELECTED>
- N2BAA. (specify) _____ <GO TO N3>
- (6) DON'T KNOW <GO TO N3>
 - (7) REFUSED <GO TO N3>
- N2C. Did you [TEXTFILL: or your spouse/partner] ever want [S.C.] to participate in an adoption support group?
- (1) YES <GO TO N2D>
 - (2) NO <GO TO N3>
 - (6) DON'T KNOW <GO TO N3>
 - (7) REFUSED <GO TO N3>
- N2D. Why wasn't [S.C.] able to participate in a group? [SELECT ALL THAT APPLY]
- (1) DID NOT KNOW WHERE ONE WAS
 - (2) NONE CLOSE TO US
 - (3) COST
 - (4) CHILD REFUSED OR NOT INTERESTED
 - (5) OTHER (specify: _____) <GO TO N2DA>
 - (6) DON'T KNOW
 - (7) REFUSED
- <GO TO N3 IF OTHER NOT SELECTED>

N2DA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

SUPPORT 3

TIMESTAMP_SECTION_NF3

N3. Have you [TEXTFILL: or your spouse/partner] ever participated in an adoption support group?

- (1) YES <GO TO N3A>
- (2) NO <GO TO N3C>
- (6) DON'T KNOW <GO TO N3C>
- (7) REFUSED <GO TO N3C>

N3A. Did you [TEXTFILL: or your spouse/partner] find this to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N3B. How did you [TEXTFILL: or your spouse/partner] hear about this support group(s)? [SELECT ALL THAT APPLY]

- (1) ADOPTION WORKER
- (2) ADOPTION AGENCY OR CHILD WELFARE AGENCY
- (3) ADOPTION ATTORNEY
- (4) COMMUNITY OR LOCAL NEWSPAPER
- (5) ADOPTION WEBSITE OR LISTSERV
- (6) OTHER PARENTS
- (7) OTHER <GO TO N3BA>
- (6) DON'T KNOW
- (7) REFUSED

<GO TO CP N5 IF OTHER NOT SELECTED>

N3BA. Specify: _____ <GO TO CPN5>

- (6) DON'T KNOW <GO TO CPN5>
- (7) REFUSED <GO TO CPN5>

N3C. Did you [TEXTFILL: or your spouse/partner] ever want to participate in an adoption support group?

- (1) YES <GO TO N3D>
- (0) NO <GO TO CPN5>
- (6) DON'T KNOW <GO TO CPN5>
- (7) REFUSED <GO TO CPN5>

N3D. Why weren't you [TEXTFILL: or your spouse/partner] able to participate in a group? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) COST
- (3) DIDN'T KNOW WHERE TO FIND ONE
- (4) NONE CLOSE TO US
- (5) OTHER <GO TO N3DA>
- (6) DON'T KNOW
- (7) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN5>

N3DA. Specify: _____
 (6) DON'T KNOW
 (7) REFUSED

SUPPORT 5

TIMESTAMP_SECTION_NF5

<CHECKPOINT CPN5: IF AGEYRNSAP > OR =5 years GO TO N5; ELSE GO TO N6>

N5. Since the time of his/her adoption, Has [S.C.] ever received mental health care or counseling?
 <HELP SCREEN: BY "counseling" we mean any mental health counseling, not just counseling related to being adopted>

- (1) YES <IF F1=Yes, GO TO N5A; ELSE GO TO N5B>
- (0) NO <GO TO N5E>
- (6) DON'T KNOW <GO TO N5E>
- (7) REFUSED <GO TO N5E>

N5A. Was payment for counseling for [S.C.] written into your adoption agreement?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N5B. Did you find this to be very helpful, somewhat helpful, or not very helpful for [S.C.]?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N5C. Did [S.C.] find this to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N5D. How did you hear about this mental health care or counseling? [SELECT ALL THAT APPLY]

- (1) CHILD'S SCHOOL
- (2) MEDICAL PROFESSIONAL
- (3) ADOPTION WORKER
- (4) ADOPTION AGENCY OR CHILD WELFARE AGENCY
- (5) ADOPTION ATTORNEY
- (6) COMMUNITY OR LOCAL NEWSPAPER
- (7) ADOPTION WEBSITE OR LISTSERV
- (8) OTHER PARENTS
- (9) OTHER <GO TO N5DA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO N6>

N5DA. Specify: _____

- (6) DON'T KNOW <GO TO N6>
- (7) REFUSED <GO TO N6>

N5E. Did you ever want [S.C.] to receive mental health care or counseling?

- (1) YES <GO TO N5F>
- (0) NO <GO TO N6>
- (6) DON'T KNOW <GO TO N6>
- (7) REFUSED <GO TO N6>

N5F. Why didn't [S.C.] receive the mental health care or counseling that he/she needed? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) COST
- (3) DIDN'T KNOW WHERE TO FIND ONE
- (4) NONE CLOSE TO US
- (5) OTHER <GO TO N5FA>
- (6) DON'T KNOW
- (7) REFUSED

<IF OTHER NOT SELECTED, GO TO N6>

N5FA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

SUPPORT 6

TIMESTAMP_SECTION_NF6

N6. Since [S.C.]'s adoption, did your family ever participate in family counseling?

<HELP SCREEN: BY "family counseling" we mean any counseling for family problems, not just counseling related to be adopted>

- (1) YES
- (0) NO <GO TO N6C>
- (6) DON'T KNOW <GO TO N6C>
- (7) REFUSED <GO TO N6C>

N6A. Did you find this to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N6B. How did you hear about this service? [SELECT ALL THAT APPLY]

- (1) CHILD'S SCHOOL
- (2) MEDICAL PROFESSIONAL
- (3) ADOPTION WORKER
- (4) ADOPTION AGENCY
- (5) ADOPTION ATTORNEY
- (6) COMMUNITY OR LOCAL NEWSPAPER
- (7) ADOPTION WEBSITE OR LISTSERV
- (8) OTHER PARENTS
- (9) OTHER <GO TO N6BA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED GO TO N7>

N6BA. Specify: _____ <GO TO N7>

- (6) DON'T KNOW
- (7) REFUSED

N6C. Did you ever want your family to participate in family counseling since [S.C.]'s adoption?

- (1) YES
- (0) NO <GO TO N7>
- (6) DON'T KNOW <GO TO N7>
- (7) REFUSED <GO TO N7>

N6D. Why didn't your family participate in the counseling that you wanted? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) AGENCY DID NOT OFFER SERVICES
- (3) WERE TOLD WE DID NOT QUALIFY FOR THIS SERVICE
- (4) COST
- (5) DIDN'T KNOW WHERE TO FIND SERVICES
- (6) NO SERVICES CLOSE TO US
- (7) OTHER <GO TO N6DA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO N7>

N6DA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

SUPPORT 7

TIMESTAMP_SECTION_NF7

N7. After [S.C.]'s adoption, did your family ever receive crisis counseling?

- (1) YES
- (0) NO <GO TO N7C>
- (6) DON'T KNOW <GO TO N7C>
- (7) REFUSED <GO TO N7C>

N7A. Did you find this to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N7B. How did you hear about this service? [SELECT ALL THAT APPLY]

- (1) ADOPTION WORKER
- (2) ADOPTION AGENCY
- (3) ADOPTION ATTORNEY
- (4) COMMUNITY OR LOCAL NEWSPAPER
- (5) ADOPTION WEBSITE OR LISTSERV
- (6) OTHER PARENTS
- (7) OTHER <GO TO N7BA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN8>

N7BA. Specify: _____ <GO TO CPN8>

- (6) DON'T KNOW <GO TO CPN8>
- (7) REFUSED <GO TO CPN8>

N7C. Did you ever want your family to receive crisis counseling since [S.C.]'s adoption?

- (1) YES
- (0) NO <GO TO CPN8>
- (6) DON'T KNOW <GO TO CPN8>
- (7) REFUSED <GO TO CPN8>

N7D. Why didn't your family receive the crisis counseling that you needed? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) AGENCY DID NOT OFFER SERVICES
- (3) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
- (4) COST
- (5) DIDN'T KNOW WHERE TO FIND THIS SERVICE
- (6) NO SUCH SERVICES CLOSE TO ME/US
- (7) OTHER <GO TO N7DA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN8>

N7DA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPN8: IF AGEYRNSAP < 13 YEARS OLD GO TO N9; ELSE GO TO N8>

SUPPORT 8

TIMESTAMP_SECTION_NF8

N8. Since the time of his/her adoption, has [S.C.] ever received an alcohol or drug evaluation and/or treatment? Please do not include routine SCREENing for purposes of employment or participation in school activities.

- (1) YES
- (2) NO <GO TO N8C>
- (6) DON'T KNOW <GO TO N8C>
- (7) REFUSED <GO TO N8C>

N8A. Did you find these services to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N8B. How did you hear about these services for [S.C.]? [SELECT ALL THAT APPLY]

- (1) MEDICAL PROFESSIONAL
- (2) ADOPTION WORKER
- (3) ADOPTION AGENCY
- (4) ADOPTION ATTORNEY
- (5) COMMUNITY OR LOCAL NEWSPAPER
- (6) ADOPTION WEBSITE OR LISTSERV
- (7) OTHER PARENTS
- (8) OTHER <GO TO N8BA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO N9>

N8BA. Specify: _____ <GO TO CPN9>
 (6) DON'T KNOW <GO TO CPN9>
 (7) REFUSED <GO TO CPN9>

N8C. Did you ever want or need these services for [S.C.]?
 (1) YES
 (0) NO <GO TO CPN9>
 (6) DON'T KNOW <GO TO CPN9>
 (7) REFUSED <GO TO CPN9>

N8D. Why didn't [S.C.] receive this service? [SELECT ALL THAT APPLY]
 (1) PROGRAM/SERVICE DID NOT HAVE ROOM
 (2) AGENCY DID NOT OFFER SERVICES
 (3) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
 (4) COST
 (5) DIDN'T KNOW WHERE TO FIND THIS SERVICE
 (6) NO SUCH SERVICES CLOSE TO ME/US
 (7) OTHER <GO TO NDA>
 (96) DON'T KNOW
 (97) REFUSED
 <IF OTHER NOT SELECTED, GO TO CPN9>

N8DA. Specify: _____
 (6) DON'T KNOW
 (7) REFUSED

SUPPORT 9

TIMESTAMP_SECTION_NF9

<CHECKPOINT CPN9: IF AGEYRNSAP = OR > 5 years GO TO N9; ELSE GO TO N10>

N9. Next, I am going to ask you some questions about educational and child care services that you might have received for [S.C.] following his/her adoption. Following his/her adoption, did [S.C.] ever have a mentor? By mentor I mean an adult paired with your child through a school or community organization.
 (1) YES
 (0) NO <GO TO N9C>
 (6) DON'T KNOW <GO TO N9C>
 (7) REFUSED <GO TO N9C>

N9A. Did you find this to be very helpful, somewhat helpful, or not very helpful for [S.C.]?
 (1) VERY HELPFUL
 (2) SOMEWHAT HELPFUL
 (3) NOT VERY HELPFUL
 (6) DON'T KNOW
 (7) REFUSED

N9AA. Did [S.C.] think this was very helpful, somewhat helpful, or not very helpful?
 (1) VERY HELPFUL
 (2) SOMEWHAT HELPFUL
 (3) NOT VERY HELPFUL
 (6) DON'T KNOW
 (7) REFUSED

N9B. How did you hear about this service? [SELECT ALL THAT APPLY]

- (1) CHILD'S SCHOOL
- (2) ADOPTION WORKER
- (3) ADOPTION AGENCY
- (4) ADOPTION ATTORNEY
- (5) COMMUNITY OR LOCAL NEWSPAPER
- (6) ADOPTION WEBSITE OR LISTSERV
- (7) OTHER PARENTS
- (8) OTHER <GO TO N9BA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN10>

N9BA. Specify: _____ <GO TO CPN10>

- (6) DON'T KNOW <GO TO CPN10>
- (7) REFUSED <GO TO CPN10>

N9C. Did you [TEXTFILL: or your spouse/partner] ever want [S.C.] to have a mentor?

- (1) YES
- (0) NO <GO TO CPN10>
- (6) DON'T KNOW <GO TO CPN10>
- (7) REFUSED <GO TO CPN10>

N9D. Why didn't [S.C.] receive a mentor? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) AGENCY DID NOT OFFER SERVICES
- (3) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
- (4) DIDN'T KNOW WHERE TO FIND THIS SERVICE
- (5) NO SUCH SERVICES CLOSE TO ME/US
- (6) OTHER <GO TO N9DA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN10>

N9DA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

SUPPORT 10

TIMESTAMP_SECTION_NF10

<CHECKPOINT CPN10: IF AGEYRNSAP = OR > 5 years GO TO N10; ELSE GO TO CPN11>

N10. At any time since he/she was adopted, has [S.C.] had an academic tutor?

- (1) YES <IF F1=Yes, GO TO N10A; ELSE GO TO N10AA>
- (0) NO <GO TO N10C>
- (6) DON'T KNOW <GO TO N10C>
- (7) REFUSED <GO TO N10C>

N10A. Is the payment for tutoring for [S.C.] written into your adoption agreement?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N10AA. Did you find this to be very helpful, somewhat helpful, or not very helpful for [S.C.]?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N10B. Did [S.C.] think that tutoring was very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N10BB. How did you hear about this tutoring? [SELECT ALL THAT APPLY]

- (1) CHILD'S SCHOOL
- (2) ADOPTION WORKER
- (3) ADOPTION AGENCY
- (4) ADOPTION ATTORNEY
- (5) COMMUNITY OR LOCAL NEWSPAPER
- (6) ADOPTION WEBSITE OR LISTSERV
- (7) OTHER PARENTS
- (8) OTHER <GO TO N10BA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN11>

N10BA. (Specify) _____ <GO TO CPN11>

- (6) DON'T KNOW <GO TO CPN11>
- (7) REFUSED <GO TO CPN11>

N10C. Did you [TEXTFILL: or your spouse/partner] ever want tutoring for (S.C.)?

- (1) YES
- (0) NO <GO TO CPN11>
- (6) DON'T KNOW <GO TO CPN11>
- (7) REFUSED <GO TO CPN11>

N10D. Why didn't [S.C.] receive the tutoring that he/she needed? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) AGENCY DID NOT OFFER SERVICES
- (3) COST
- (4) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
- (5) DIDN'T KNOW WHERE TO FIND THIS SERVICE
- (6) NO SUCH SERVICES CLOSE TO ME/US
- (7) OTHER <GO TO N10DA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN11>

N10DA. (specify : _____)

- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPN11: IF C10Q05 = 1 (FOSTER CARE ADOPTION) GO TO N11; ELSE GO TO CPN12>

SUPPORT 11

TIMESTAMP_SECTION_NF11

N11. Following [S.C.]’s adoption, did you [TEXTFILL: or your spouse/partner] receive assistance paying for child care for (S.C)?

- (1) YES
- (0) NO <GO TO N11C>
- (6) DON’T KNOW <GO TO N11C>
- (7) REFUSED <GO TO N11C>

N11A. Did you find this to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON’T KNOW
- (7) REFUSED

N11B. How did you hear about this child care assistance? [SELECT ALL THAT APPLY]

- (1) ADOPTION WORKER
- (2) ADOPTION AGENCY
- (3) ADOPTION ATTORNEY
- (4) COMMUNITY OR LOCAL NEWSPAPER
- (5) ADOPTION WEBSITE OR LISTSERV
- (6) OTHER PARENTS
- (7) OTHER <GO TO N11BA>
- (96) DON’T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN12>

N11BA. (Specify) _____ <GO TO CPN12>
(6) DON’T KNOW <GO TO CPN12>
(7) REFUSED <GO TO Checkpoint before N12>

N11C. Did you ever want or need help paying for child care for [S.C.]?

- (1) YES
- (0) NO <GO TO CPN12>
- (6) DON’T KNOW <GO TO CPN12>
- (7) REFUSED <GO TO CPN12>

N11D. Why didn’t you receive the assistance that you needed? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) AGENCY DID NOT OFFER SERVICES
- (3) COST
- (4) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
- (5) DIDN’T KNOW WHERE TO FIND THIS SERVICE
- (6) NO SUCH SERVICES CLOSE TO ME/US
- (7) OTHER, GO TO N11DA <GO TO N11DA>
- (96) DON’T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN12>

N11DA. (specify : _____)

- (6) DON’T KNOW
- (7) REFUSED

<CHECKPOINT CPN12: IF C10Q05=1, GO TO N12; ELSE GO TO CPN14>

SUPPORT 12

TIMESTAMP_SECTION_NF12

- N12. Did you [TEXTFILL: or your spouse/partner] receive any respite care following your adoption of [S.C.]?
 READ IF NECESSARY: Respite care is care for the child so the family can have a break from ongoing care of the child. Respite care can be thought of as child care or babysitting by someone trained to meet any special needs the child may have. Both professional and non-professional respite care should be included.
- (1) YES
 - (0) NO <GO TO N12c>
 - (6) DON'T KNOW <GO TO N12c>
 - (7) REFUSED <GO TO N12c>
- N12A. Did you [TEXTFILL: or your spouse/partner] find this to be very helpful, somewhat helpful, or not very helpful?
- (1) VERY HELPFUL
 - (2) SOMEWHAT HELPFUL
 - (3) NOT VERY HELPFUL
 - (6) DON'T KNOW
 - (7) REFUSED
- N12B. How did you [TEXTFILL: or your spouse/partner] hear about this service? [SELECT ALL THAT APPLY]
- (1) ADOPTION WORKER
 - (2) ADOPTION AGENCY
 - (3) ADOPTION ATTORNEY
 - (4) COMMUNITY OR LOCAL NEWSPAPER
 - (5) ADOPTION WEBSITE OR LISTSERV
 - (6) OTHER PARENTS
 - (7) OTHER <GO TO N12BA>
 - (96) DON'T KNOW
 - (97) REFUSED
- <IF OTHER NOT SELECTED, GO TO CPN14>
- N12BA. (Specify) _____ <GO TO CPN14>
- (6) DON'T KNOW <GO TO Checkpoint before N14>
 - (7) REFUSED <GO TO Checkpoint before N14>
- N12C. Did you [TEXTFILL: or your spouse/partner] ever need this service since adopting [S.C.]?
- (1) YES
 - (0) NO <GO TO CPN14>
 - (6) DON'T KNOW <GO TO CPN14>
 - (7) REFUSED <GO TO CPN14>
- N12D. Why didn't you receive this service that you needed? [SELECT ALL THAT APPLY]
- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
 - (2) AGENCY DID NOT OFFER SERVICES
 - (3) COST
 - (4) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
 - (5) DIDN'T KNOW WHERE TO FIND THIS SERVICE
 - (6) NO SUCH SERVICES CLOSE TO ME/US
 - (7) OTHER <GO TO N12DA>
 - (96) DON'T KNOW
 - (97) REFUSED
- <IF OTHER NOT SELECTED, GO TO CPN14>
- N12DA. Specify: _____
- (6) DON'T KNOW
 - (7) REFUSED

SUPPORT 14

TIMESTAMP_SECTION_NF14

<**CHECKPOINT CPN14:** CHECKPOINT: IF AGEMONSAP < 96 MONTHS, GO TO N18 / ELSE IF C43=1 GO TO N14_INTRO / ELSE IF C42 or C43 = NULL GO TO N18 / ELSE GO TO N14C>

N14_INTRO. Earlier you told me that [S.C.] has spent time in a residential treatment or psychiatric facility since the time of his/her adoption.

<**CHECKPOINT CPN14A:** <IF F1=1, GO TO N14A; ELSE GO TO N14AA>

N14A. Was the payment for residential treatment or psychiatric facility for [S.C.] written into your adoption agreement?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N14AA. What portion of [S.C.]'s placement(s) in a group home or residential treatment facility or psychiatric facility was paid for by each of the following sources:

N14AA1. Medicaid

<READ IF NECESSARY: What portion of [S.C.]'s placement (s) in a group home or residential treatment facility or psychiatric facility was paid for by each of the following sources >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO N14B>
- (6) DON'T KNOW
- (7) REFUSED

N14AA2. Insurance other than Medicaid

<READ IF NECESSARY: What portion of [S.C.]'s placement (s) in a group home or residential treatment facility or psychiatric facility was paid for by each of the following sources >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO N14B>
- (6) DON'T KNOW
- (7) REFUSED

CHECKPOINT CPFN14AA3: <If C10Q05=1 then ask N14AA3, ELSE GO TO N14AA4>

N14AA3. Child welfare or adoption agency

<READ IF NECESSARY: What portion of [S.C.]'s placement (s) in a group home or residential treatment facility or psychiatric facility was paid for by each of the following sources >

- (1) NONE
- (2) SOME
- (3) ALMOST ALL
- (4) ALL <GO TO N14B>
- (6) DON'T KNOW
- (7) REFUSED

N14AA4. You?

<READ IF NECESSARY: What portion of [S.C.]'s placement (s) in a group home or residential treatment facility or psychiatric facility was paid for by each of the following sources >

- (1) NONE
- (2) SOME

- (3) ALMOST ALL
- (4) ALL <GO TO N14B>
- (6) DON'T KNOW
- (7) REFUSED

N14AA5. Is there any other source helping pay for the placement?

- (1) YES <GO TO N14AAB>
- (2) NO <GO TO NF14B>
- (6) DON'T KNOW <GO TO NF14B>
- (7) REFUSED <GO TO NF14B>

N14AAB. Other (specify :)_____)

- (6) DON'T KNOW
- (7) REFUSED

N14B. Did you find this to be very helpful, somewhat helpful, or not very helpful for [S.C.]?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N14BB. How did you hear about this facility? [SELECT ALL THAT APPLY]

- (1) MEDICAL PROFESSIONAL
- (2) ADOPTION WORKER
- (3) ADOPTION AGENCY
- (4) ADOPTION ATTORNEY
- (5) COMMUNITY OR LOCAL NEWSPAPER
- (6) ADOPTION WEBSITE OR LISTSERV
- (7) OTHER PARENTS
- (8) OTHER <GO TO N14BBA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO N18>

N14BBA. (Specify) _____ <GO TO N18>

- (6) DON'T KNOW <GO TO N18>
- (7) REFUSED <GO TO N18>

N14C. IF C42=NO, ASK: Earlier you told me that [S.C.] has not received any treatment or counseling from a mental health professional since the time of the adoption. Did you ever want [S.C.] to spend time in a residential treatment or psychiatric facility? IF C42 = DON'T KNOW or REFUSED, ASK: Did you ever want [S.C.] to spend time in a residential treatment or psychiatric facility? ELSE IF C43 = NO, DON'T KNOW OR REFUSED, ASK: Earlier you told me that [S.C.] has not spent time in a residential treatment or psychiatric facility since the time of the adoption. Did you ever want [S.C.] to spend time in a residential treatment or psychiatric facility?

- (1) YES
- (0) NO <GO TO N18>
- (6) DON'T KNOW <GO TO N18>
- (7) REFUSED <GO TO N18>

N14D. Why didn't [S.C.] spend time in a facility that you felt he/she needed? [SELECT ALL THAT APPLY]

- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
- (2) AGENCY DID NOT OFFER SERVICES
- (3) COST
- (4) WERE TOLD I/WE DID NOT QUALIFY FOR THIS SERVICE
- (5) DIDN'T KNOW WHERE TO FIND THIS SERVICE
- (6) NO SUCH SERVICES CLOSE TO ME/US
- (7) OTHER <GO TO N14DA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO N18>

N14DA. Specify: _____

- (6) DON'T KNOW
- (7) REFUSED

SUPPORT 18

TIMESTAMP_SECTION_NF18

N18. Now I'd like to ask you about different types of information or education that you received about adoption after you adopted [S.C.]. Following your adoption of [S.C.], did you [TEXTFILL: or your spouse/partner] attend any classes, conferences, lectures or seminars about adoption?

<INTERVIEWER INSTRUCTION: IF RESPONDENT ASKS ABOUT CHILDREN ADOPTED BEFORE [S.C.], THIS QUESTION REFERS TO [S.C.]. IF RESPONDENT ASKS ABOUT TIME FRAME, IT IS "AT ANY TIME FOLLOWING YOUR ADOPTION OF [S.C.]">

- (1) YES
- (2) NO <GO TO N18C>
- (6) DON'T KNOW <GO TO N18C>
- (7) REFUSED <GO TO N18C>

N18A. Did you find this to be very helpful, somewhat helpful, or not very helpful?

- (1) VERY HELPFUL
- (2) SOMEWHAT HELPFUL
- (3) NOT VERY HELPFUL
- (6) DON'T KNOW
- (7) REFUSED

N18B. How did you [TEXTFILL: or your spouse/partner] hear about these classes, conferences, lectures or seminars? [SELECT ALL THAT APPLY]

- (1) ADOPTION WORKER
- (2) ADOPTION AGENCY
- (3) ADOPTION ATTORNEY
- (4) COMMUNITY OR LOCAL NEWSPAPER
- (5) ADOPTION WEBSITE OR LISTSERV
- (6) OTHER PARENTS
- (7) OTHER <GO TO N18BA>
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO N20>

N18BA. Specify _____ <GO TO N20>

- (6) DON'T KNOW <GO TO N20>
- (7) REFUSED <GO TO N20>

- N18C. Did you [TEXTFILL: or your spouse/partner] ever wish you could attend classes, conferences, lectures or seminars about adoption since adopting [S.C.]?
- (1) YES
 - (2) NO <GO TO N20>
 - (6) DON'T KNOW <GO TO N20>
 - (7) REFUSED <GO TO N20>
- N18D. Why were you [TEXTFILL: or your spouse/partner] not able to attend classes, lectures or seminars on adoption? [SELECT ALL THAT APPLY]
- (1) PROGRAM/SERVICE DID NOT HAVE ROOM
 - (2) COST
 - (3) DIDN'T KNOW WHERE TO FIND ONE
 - (4) NONE CLOSE TO US
 - (5) OTHER <GO TO N18DA>
 - (6) DON'T KNOW
 - (7) REFUSED
- <IF OTHER NOT SELECTED, GO TO N20>
- N18DA. Specify _____ <GO TO N20>
- (6) DON'T KNOW <GO TO N20>
 - (7) REFUSED <GO TO N20>

SUPPORT 20

TIMESTAMP_SECTION_NF20

- N20. Following the adoption of [S.C.], have you [TEXTFILL: or your spouse/partner] utilized any web- or internet-based resources like websites, listservs, or chat rooms for information on adoption-related issues?
- (1) YES
 - (0) NO <GO TO N21>
 - (6) DON'T KNOW <GO TO N21>
 - (7) REFUSED <GO TO N21>
- N20A. Did you find this to be very helpful, somewhat helpful, or not very helpful?
- (1) VERY HELPFUL
 - (2) SOMEWHAT HELPFUL
 - (3) NOT VERY HELPFUL
 - (6) DON'T KNOW
 - (7) REFUSED
- N21. Now, I am going to ask you some questions about assistance that you might have provided to other adoptive families. Have you [TEXTFILL: or your spouse/partner] ever been asked by anyone to assist in helping other adoptive families?
- (1) YES
 - (2) NO <GO TO N22>
 - (6) DON'T KNOW <GO TO N22>
 - (7) REFUSED <GO TO N22>
- N21A. Who asked you to assist in helping other adoptive families?
- (1) ADOPTION AGENCY
 - (2) FRIEND, RELATIVE OR NEIGHBOR
 - (3) CHURCH OR COMMUNITY GROUP
 - (4) OTHER ADOPTIVE PARENTS
 - (5) OTHER, <GO TO N21AA>
 - (6) DON'T KNOW
 - (7) REFUSED
- <IF OTHER NOT SELECTED, GO TO N21B>

N21AA. PLEASE SPECIFY _____.

- (6) DON'T KNOW
- (7) REFUSED

N21B. Following the request, did you [TEXTFILL: or your spouse/partner] assist in helping other adoptive families?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N22. Has anyone ever asked you [TEXTFILL: or your spouse/partner] to recruit other adoptive families?

- (1) YES
- (0) NO <GO TO N23>
- (6) DON'T KNOW <GO TO N23>
- (7) REFUSED <GO TO N23>

N22A. Who asked you to assist in recruiting other adoptive families?

- (1) ADOPTION AGENCY
- (2) FRIEND, RELATIVE OR NEIGHBOR
- (3) CHURCH OR COMMUNITY GROUP
- (4) OTHER ADOPTIVE PARENTS
- (5) OTHER <GO TO N22AA>
- (6) DON'T KNOW
- (7) REFUSED

<IF OTHER NOT SELECTED, GO TO N22VB>

N22AA. PLEASE SPECIFY _____.

- (6) DON'T KNOW
- (7) REFUSED

N22B. Following the request did you [TEXTFILL: or your spouse/partner] assist in recruiting other adoptive families?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N23. Now I'm going to ask a few final questions about you [TEXTFILL: and your spouse/partner]. What year were you born?

_____year [POSSIBLE FILL FROM NIS C10AMDY, C10B]

- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPN23AA: IF (S3_N does not = 1 OR 2) GO TO N24>

N23AA. What year was [your spouse/partner] born?

_____year

- (6) DON'T KNOW
- (7) REFUSED

N24. Are you of Hispanic or Latino origin?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N24A. Please choose one or more of the following categories to describe your race. Are you White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander? [SELECT ALL THAT APPLY].

- (1) WHITE
- (2) BLACK/AFRICAN AMERICAN
- (3) AMERICAN INDIAN
- (4) ALASKA NATIVE
- (5) ASIAN
- (6) NATIVE HAWAIIAN
- (7) PACIFIC ISLANDER
- (8) OTHER <GO TO N24AA>
- (96) DON'T KNOW
- (97) REFUSED

N24AA. OTHER (specify): _____

- (6) DON'T KNOW
- (7) REFUSED

<CHECKPOINT CPN25: IF (S3_N does not = 1 OR 2) GO TO N26>

N25. Is your [TEXTFILL: spouse/partner] of Hispanic or Latino origin?

- (1) YES
- (0) NO
- (6) DON'T KNOW
- (7) REFUSED

N25A. Please choose one or more of the following categories to describe your spouse/partner's race. Is your spouse/partner White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander? [SELECT ALL THAT APPLY].

- (1) WHITE
- (2) BLACK/AFRICAN AMERICAN
- (3) AMERICAN INDIAN
- (4) ALASKA NATIVE
- (5) ASIAN
- (6) NATIVE HAWAIIAN
- (7) PACIFIC ISLANDER
- (8) OTHER <GO TO N25AA>
- (96) DON'T KNOW
- (97) REFUSED

N25AA. OTHER (specify): _____

- (6) DON'T KNOW
- (7) REFUSED

N26. Last week were you working full time, working part time, temporarily not working, unemployed, retired, going to school, keeping house, or something else?

- (1) WORKING FULLTIME
- (2) WORKING PART TIME
- (3) TEMPORARILY NOT WORKING
- (4) UNEMPLOYED
- (5) RETIRED
- (6) SCHOOL
- (7) KEEPING HOUSE
- (8) OTHER <GO TO N26A>
- (9) DISABLED OR ON DISABILITY
- (96) DON'T KNOW
- (97) REFUSED

<IF OTHER NOT SELECTED, GO TO CPN27>

N26A.

- _____
(6) DON'T KNOW
(7) REFUSED

<CHECKPOINT CPN27: IF (S3_N does not = 1 OR 2) GO TO END>

N27. Last week was your spouse/partner working full time, working part time, temporarily not working, unemployed, retired, going to school, keeping house, or something else?

- (1) WORKING FULLTIME
(2) WORKING PART TIME
(3) TEMPORARILY NOT WORKING
(4) UNEMPLOYED
(5) RETIRED
(6) SCHOOL
(7) KEEPING HOUSE
(8) OTHER <GO TO N27A>
(96) DON'T KNOW
(97) REFUSED

<IF OTHER NOT SELECTED GO TO END>

N27A.

- _____
(6) DON'T KNOW <GO TO END>
(7) REFUSED <GO TO END>

CELL_PAY

Did we conduct this survey on your cell phone?

- (1) YES [GO TO CELL_SCRIPT]
(2) NO [GO TO END]

CELL_SCRIPT

You will receive an additional \$10 to defer your costs for doing the interview on your cell phone.

END Those are all the questions I have. Before I go, I'll need to confirm your mailing address so we can send you \$25 as a token of our appreciation for taking the time to answer these questions.

<GET/CONFIRM ADDRESS and GO TO END_2>

END_2 I'd like to thank you on behalf of the Centers for Disease Control and Prevention for the time and effort you've spent answering these questions. If you have any questions about this survey, you may call my supervisor toll-free at [TEXTFILL: 1-xxx-xxx-xxxx]. If you have questions about your rights as a survey participant, you may call the chairman of the Research Ethics Review Board at 1-800-223-8118. Thank you again.

NSAP_END_TIME

CALLBACK / REFUSAL CONVERSION SCRIPT**FOR RETURN PHONE CALLS/REFUSAL CONVERSION CALLS IN CSHCN**

- INTRO_1 Hello, my name is _____. I'm calling on behalf of the Centers for Disease Control and Prevention. Earlier, we contacted your household to participate in a survey about the health of children and teenagers. I'm calling back to continue the interview. In appreciation for your time, we will send you \$25 for completing the interview. (IF NAME WAS GIVEN FOR APPOINTMENT, ASK FOR THAT PERSON.)
- BE SURE TO CONFIRM THAT YOU ARE SPEAKING WITH THE SAME PERSON WHO STARTED THE INTERVIEW. THE PERSON WHO STARTED THE INTERVIEW MUST COMPLETE THIS INTERVIEW.
- S1 Am I speaking to someone who lives in this household who is over 17 years old? IF NO, ASK "Is there someone who lives in this household who is over 17 that I may speak with?"
- (01) YES, I AM THAT PERSON **[IF [S.C.] IS SELECTED GO TO REMIND1/ ELSE CONTINUE WITH INTERVIEW]**
- (02) THIS IS A BUSINESS **[SKIP TO SALZ_BUS]**
- (03) NEW PERSON COMES TO PHONE **[SKIP BACK TO INTRO_01]**
- (08) DOES NOT LIVE IN HOUSEHOLD **[CALLBACK, SET DISP AND TERMINATE]**
- (09) NO PERSON AT HOME WHO IS OVER 17 **[SKIP TO S2_B]**
- (7) REFUSED **[GO TO REFUSAL CONVERSION, SET DISP AND TERMINATE]**
- SALZ_BUS We are interviewing only private residences. Thank you very much. **[ENTER DISPOSITION AND TERMINATE INTERVIEW AND SET ITS=38]**
- S2_B Does anyone live in your household who is over 17 years old?
- (01) YES > When would be a good time for me to call back and talk to that person?
[SCHEDULE APPOINTMENT]
- (02) NO **[TERMINATE INTERVIEW]**
- REMIND1 I want to remind you that we will be asking questions about (S.C) for the rest of this interview.
[CONTINUE WITH INTERVIEW AT POINT OF BREAKOFF]

ANSWERING MACHINE MESSAGES

Answering Machine Message :

MSG_NSAP - Answering Machine Message: FOR ALL CASES IN THE NSAP INTERVIEW (PAST NSAP_1A)

(PLEASE READ SLOWLY AND CLEARLY.)

Hello. The Centers for Disease Control and Prevention is conducting a survey about the health and well-being of children and the use of medical services. Your household participated in the survey about a year ago and now we would like to collect a little additional information. Would you please call us, toll-free, at [TEXTFILL: 1-xxx-xxx-xxxx] ? We would be glad to answer any questions you have. In appreciation for your time, we will send you \$25 for completing the interview. The toll-free number again is [TEXTFILL: 1-xxx-xxx-xxxx]. Thank you.

Answering machine message for appointments:

MSG_Y_APPT_NSAP- Answering Machine Message: FOR APPOINTMENTS IN THE NSAP INTERVIEW (PAST

NSAP_1A)

(PLEASE READ SLOWLY AND CLEARLY.)

Hello. I am calling on behalf of the Centers for Disease Control and Prevention regarding a nationwide study about the health of children and the use of medical services. When we spoke previously about this important study, you requested that we call you back at this time. I'm sorry that we've missed you. We'll try to contact you again soon but please feel free to return our call anytime at [TEXTFILL: 1-xxx-xxx-xxxx]. In appreciation for your time, we will send you \$25 for completing the interview. If you have any questions, that number again is [TEXTFILL: 1-xxx-xxx-xxxx]. Thank you.

MSG_NSAP_INCENT- Answering Machine Message: FOR ALL POST-REFUSAL CASES IN THE NSAP INTERVIEW (PAST NSAP_1A)

(PLEASE READ SLOWLY AND CLEARLY.)

Hello. The Centers for Disease Control and Prevention is conducting a survey about the health and well-being of children and the use of medical services. Your household participated in the survey about a year ago and now we would like to collect a little additional information. Would you please call us, toll-free, at 1-866-900-9601? We would be glad to answer any questions you have. In appreciation for your time, we will send you \$[Text Fill: IF NSAP_INCENT=<null>, then use 25 / ELSE use NSAP_INCENT] for completing the interview. The toll-free number again is 1-866-900-9601. Thank you.

Appendix III

beginning of NSAP-SN data collection, are described in detail in the NSAP design and operations report (3).

Summary of Questionnaire Changes During Data Collection

There were no questionnaire changes during the National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN) data collection. However, NSAP-SN staff did release additional interviewer job aid text that provided respondents with information pertaining to postadoption services.

During data collection, interviewers reported some confusion with questions F14A_A and F16_A because the questionnaire did not contain an intermediate screening question between these two questions. Respondents who reported that they had used Medicaid to obtain mental health medications for the sample child in F14A_A were asked in F16_A what portion of the sample child's mental health medications were paid for by that source. The wording of question F16_A assumed that the child had used medications in the past 12 months when the interviewers had not asked if the child had used medications during that time frame.

The following procedure was developed to work around this problem: If the parent spontaneously indicated at F16_A that the child had not used mental health medications in the past 12 months, the interviewer entered "don't know" to questions F16A_A through F16A_D without reading the text that was presented on the screen. At F16A_E ("Is there any other source helping pay for mental health medications?") the interviewer entered "yes" and typed "CHILD HAS NOT USED MEDS IN LAST 12 MOS" when prompted for the verbatim entry at F16A_EA. When NORC at the University of Chicago cleaned the final data file, the answers to F16A_A through F16A_EA were blanked out as legitimate skips. There are 11 such cases.

Changes that were made to the National Survey of Adoptive Parents (NSAP) questionnaire during the administration of NSAP, but prior to the

Appendix IV

Letters Sent to Sampled Households

This appendix contains the National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN)-specific complement of letters sent to households during the data collection period in 2008. The full complement of advance letters, follow-up letters, and thank you letters used over the course of data collection for the National Immunization Survey and the National Survey of Children with Special Health Care Needs (NS-CSHCN) in 2005–2006 can be found in the 2005–2006 NS-CSHCN design and operations report (1).

The following six NSAP-SN letters are included in this appendix:

- Advance letter sent prior to calling.
- Follow-up letter when incentives were offered to households that had refused twice or passively refused.
- Follow-up letter for households with no telephone contact asking respondents to call the toll-free number.
- Thank you letter when incentive was mailed (\$25). Cases receiving this thank you letter were either eligible for \$25 or eligible for \$30 and already received a \$5 prepaid incentive.
- Thank you letter when incentive was mailed (\$30). Cases receiving this thank you letter were eligible for \$30 and did not receive a \$5 prepaid incentive.
- Thank you letter when incentive was mailed (\$35). Cases receiving this thank you letter were either eligible for \$25 and received a \$10 compensation for participating by cellular telephone or eligible for \$30, already received a \$5 prepaid incentive, and received a \$10 compensation for participating by cellular telephone.

NSAP-SN Advance Letter**DEPARTMENT OF HEALTH & HUMAN SERVICES**Public Health Service
Centers for Disease Control and PreventionNational Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Parent or Guardian,

The Centers for Disease Control and Prevention (CDC) is conducting a nationwide survey and we need your help! In 2005 or 2006, we spoke to someone in your household about children's healthcare. We would like to interview you now to obtain additional information about children's health, well-being, and use of services. The questions cover many broad topics including experiences with health care, child care, foster care, educational and counseling services, local support groups, adoption, and parent and child relationships. Not all topics will apply to all families.

You can call the study's toll-free telephone number, 1-866-900-9601, if you want to take part in the study now or to learn more about the study's background and what you will be asked. You can also visit this website if you would like to learn more: <http://www.cdc.gov/nchs/slait.htm>.

We need your help to make this survey a success, and hope that you will agree to participate. It is your choice to participate. You will find answers to questions you might have about the study on the back of this letter. Please feel free to call us toll free at 1-866-900-9601 with any additional questions you may have.

This study is authorized by the U.S. Public Health Service Act. It and other strict federal laws require us to treat your information as confidential. The information you report will be combined with answers from other families for statistical research only.

Thank you in advance for your help with this important research. We look forward to speaking with you.

Sincerely,

/Edward J. Sondik/

Edward J. Sondik, Ph.D.

Director, National Center for Health Statistics

Centers for Disease Control and Prevention



If you would like to contact us using a TTY, please call the AT&T Relay Service at 1-800-855-2880 and request that 1-866-900-9601 be called.

Frequently Asked Questions

Why are you doing this study?

The Centers for Disease Control and Prevention is committed to improving children's health and well-being. State and federal health agencies will use the results of this study to help them understand how best to meet the needs of all types of children.

How will you use my answers?

A survey sponsor, the Administration for Children and Families (ACF) in the Department of Health and Human Services (HHS), creates federal programs that promote the economic and social well-being of families, children, individuals, and communities. The ACF will use the information we collect to determine where funding is needed for state and local public health services which support children and their families. Federal, state, and local agencies (such as the CDC and State Health and Welfare Departments) will use the information we collect to better understand the special needs and circumstances of families. You may visit <http://www.cdc.gov/nchs/slait.htm> to find general information about the study.

Who sees my answers?

You will be called by a trained interviewer who enters your answers into a computer. Everyone who works on the survey must sign an oath that promises they will never give out anyone's personal information. Only a few people who work on this survey ever see any personal information. Answers that could identify you or your family in any way are separated from your other answers. Survey findings are put into summary reports that contain no names or other information that identifies you.

How do you protect my information?

Your answers are used for health research purposes only. We conduct this survey under the Public Health Service Act. It and other strict U.S. laws require that we protect your family's information and keep it confidential. If you would like to know more about how we protect your answers, these laws are described in detail at www.cdc.gov/nchs/about/policy/confiden.htm.

If you want to know more about your rights as a study participant you may call 1-800-223-8118, toll free. This is the number for the Research Ethics Review Board at CDC. You will be asked to leave a message. Say you are calling about Protocol 2007-08. You may also contact the CDC's general number at 1-800-CDC-INFO (1-800-232-4636) or by e-mail at cdcinfo@cdc.gov

Participation in the study is your choice. You may choose not to answer any question that you do not wish to answer or stop at any time.

Can I call you to participate?

Yes, call **1-866-900-9601** toll free to take part in the study right away, learn more about the study, and hear what you will be asked.

NSAP-SN Refusal Conversion Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Parent or Guardian,

The CDC needs your help!

We recently asked you to take part in a survey to help federal, state, and local agencies learn more about the special needs and concerns of families. The information we are asking for will help us assess the health and well-being of the nation's children and their families. The questions cover many broad topics including experiences with health care, child care, foster care, educational and counseling services, local support groups, adoption, and parent and child relationships.

We hope you will choose to take part in this important survey when an interviewer calls. You can call the study's toll-free telephone number, 1-866-900-9601, if you want to take part now or to learn more about the study's background and what you will be asked.

The information you provide is confidential and protected by federal law. You will find answers to questions you might have about the study on the back of this letter.

Thank you very much for your help with this important research. We look forward to speaking with you.

Sincerely,

/Edward J. Sondik/

Edward J. Sondik, Ph.D.

Director, National Center for Health Statistics

Centers for Disease Control and Prevention

P.S. To thank you for your time and effort, we have enclosed \$5. We will send an additional \$25 in cash once you participate in the interview.



If you would like to contact us using a TTY, please call the AT&T Relay Service at 1-800-855-2880 and request that 1-866-900-9601 be called.

Frequently Asked Questions

Why are you doing this study?

The Centers for Disease Control and Prevention is committed to improving children's health and well-being. State and federal health agencies will use the results of this study to help them understand how best to meet the needs of all types of children.

How will you use my answers?

A survey sponsor, the Administration for Children and Families (ACF) in the Department of Health and Human Services (HHS), creates federal programs that promote the economic and social well-being of families, children, individuals, and communities. The ACF will use the information we collect to determine where funding is needed for state and local public health services which support children and their families. Federal, state, and local agencies (such as the CDC and State Health and Welfare Departments) will use the information we collect to better understand the special needs and circumstances of families. You may visit <http://www.cdc.gov/nchs/slait.htm> to find general information about the study.

Who sees my answers?

You will be called by a trained interviewer who enters your answers into a computer. Everyone who works on the survey must sign an oath that promises they will never give out anyone's personal information. Only a few people who work on this survey ever see any personal information. Answers that could identify you or your family in any way are separated from your other answers. Survey findings are put into summary reports that contain no names or other information that identifies you.

How do you protect my information?

Your answers are used for health research purposes only. We conduct this survey under the Public Health Service Act. It and other strict U.S. laws require that we protect your family's information and keep it confidential. If you would like to know more about how we protect your answers, these laws are described in detail at www.cdc.gov/nchs/about/policy/confiden.htm.

If you want to know more about your rights as a study participant you may call 1-800-223-8118, toll free. This is the number for the Research Ethics Review Board at CDC. You will be asked to leave a message. Say you are calling about Protocol 2007-08. You may also contact the CDC's general number at 1-800-CDC-INFO (1-800-232-4636) or by e-mail at cdcinfo@cdc.gov.

Participation in the study is your choice. You may choose not to answer any question that you do not wish to answer or stop at any time.

Can I call you to participate?

Yes, call **1-866-900-9601** toll free to take part in the study right away, learn more about the study, and hear what you will be asked.

NSAP-SN “Trying to Reach You” Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Parent or Guardian,

The Centers for Disease Control and Prevention (CDC) has been trying to reach you for a very important survey on children’s health, well-being, and use of services!

In 2005 or 2006, we called and spoke to someone in your household about children’s healthcare. We would very much like to speak to you again, but we have been unable to reach you. **Please call us at 1-866-900-9601 to participate in the study now. When you call, please tell the interviewer that you are calling about the follow-up study.** By calling us you can learn more about the study’s background and what you will be asked. You can also visit this website if you would like to learn more: <http://www.cdc.gov/nchs/slits.htm>. You will find answers to questions you might have about the study on the back of this letter.

The current study has questions covering many broad topics including experiences with health care, child care, foster care, educational and counseling services, local support groups, adoption, and parent and child relationships. Not all topics will apply to all families.

It is your choice to participate. When we speak to you, we will ask a few questions to determine if you are eligible for the study. Families that qualify for the survey will be sent \$25.

This study is authorized by the U.S. Public Health Service Act. It and other strict federal laws require us to treat your information as confidential. The information you report will be combined with answers from other families for statistical research only.

Thank you in advance for your help with this important research. We look forward to speaking with you.

Sincerely,

/Edward J. Sondik/

Edward J. Sondik, Ph.D.

Director, National Center for Health Statistics

Centers for Disease Control and Prevention



If you would like to contact us using a TTY, please call the AT&T Relay Service at 1-800-855-2880 and request that 1-866-900-9601 be called.

Frequently Asked Questions

Why are you doing this study?

The Centers for Disease Control and Prevention is committed to improving children's health and well-being. State and federal health agencies will use the results of this study to help them understand how best to meet the needs of all types of children.

How will you use my answers?

A survey sponsor, the Administration for Children and Families (ACF) in the Department of Health and Human Services (HHS), creates federal programs that promote the economic and social well-being of families, children, individuals, and communities. The ACF will use the information we collect to determine where funding is needed for state and local public health services which support children and their families. Federal, state, and local agencies (such as the CDC and State Health and Welfare Departments) will use the information we collect to better understand the special needs and circumstances of families. You may visit <http://www.cdc.gov/nchs/slait.htm> to find general information about the study.

Who sees my answers?

You will be called by a trained interviewer who enters your answers into a computer. Everyone who works on the survey must sign an oath that promises they will never give out anyone's personal information. Only a few people who work on this survey ever see any personal information. Answers that could identify you or your family in any way are separated from your other answers. Survey findings are put into summary reports that contain no names or other information that identifies you.

How do you protect my information?

Your answers are used for health research purposes only. We conduct this survey under the Public Health Service Act. It and other strict U.S. laws require that we protect your family's information and keep it confidential. If you would like to know more about how we protect your answers, these laws are described in detail at www.cdc.gov/nchs/about/policy/confiden.htm.

If you want to know more about your rights as a study participant you may call 1-800-223-8118, toll free. This is the number for the Research Ethics Review Board at CDC. You will be asked to leave a message. Say you are calling about Protocol 2007-08. You may also contact the CDC's general number at 1-800-CDC-INFO (1-800-232-4636) or by e-mail at cdcinfo@cdc.gov

Participation in the study is your choice. You may choose not to answer any question that you do not wish to answer or stop at any time.

Can I call you to participate?

Yes, call **1-866-900-9601** toll free to take part in the study right away, learn more about the study, and hear what you will be asked.

NSAP-SN \$25 Thank You Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Parent or Guardian,

Thank you for taking part in the National Survey of Adoptive Parents. The information that you gave about your child will help the Centers for Disease Control and Prevention develop programs to promote adoption and examine the health of adopted children in your state and throughout the United States.

In appreciation for your time and effort spent answering our questions, we have enclosed \$25.

If you would like more information about the National Survey of Adoptive Parents, you can visit the study's web site at www.cdc.gov/nchs/slaits.htm or call the toll-free telephone number for the study at 1-866-900-9601.

Thank you again for your help with this important research.

Sincerely,

/Edward J. Sondik/

Edward J. Sondik, Ph.D.

Director, National Center for Health Statistics

Centers for Disease Control and Prevention

NSAP-SN \$30 Thank You Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Parent or Guardian,

Thank you for taking part in the National Survey of Adoptive Parents. The information that you gave about your child will help the Centers for Disease Control and Prevention develop programs to promote adoption and examine the health of adopted children in your state and throughout the United States.

In appreciation for your time and effort spent answering our questions, we have enclosed \$30.

If you would like more information about the National Survey of Adoptive Parents, you can visit the study's web site at www.cdc.gov/nchs/slaits.htm or call the toll-free telephone number for the study at 1-866-900-9601.

Thank you again for your help with this important research.

Sincerely,

/Edward J. Sondik/

Edward J. Sondik, Ph.D.

Director, National Center for Health Statistics

Centers for Disease Control and Prevention

NSAP-SN \$35 Thank You Letter



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Parent or Guardian,

Thank you for taking part in the National Survey of Adoptive Parents. The information that you gave about your child will help the Centers for Disease Control and Prevention develop programs to promote adoption and examine the health of adopted children in your state and throughout the United States.

In appreciation for your time and effort spent answering our questions, we have enclosed \$35.

If you would like more information about the National Survey of Adoptive Parents, you can visit the study's web site at www.cdc.gov/nchs/slaits.htm or call the toll-free telephone number for the study at 1-866-900-9601.

Thank you again for your help with this important research.

Sincerely,

/Edward J. Sondik/

Edward J. Sondik, Ph.D.

Director, National Center for Health Statistics

Centers for Disease Control and Prevention

Appendix V

Incentive Effort

The National Survey of Adoptive Parents (NSAP) was the last of up to three concurrent surveys [National Immunization Survey (NIS), National Survey of Children’s Health, and NSAP] and nonresponse was a concern in regards to respondent burden. The National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN), however, was a stand-alone follow-back conducted years after the original NIS and National Survey of Children with Special Health Care Needs (NS-CSHCN) interviews. Nonresponse was a key issue because NSAP-SN was a follow-back survey and had the added challenge of finding 2005–2006 NS-CSHCN households. It had been approximately 1–3 years since households identified for NSAP-SN were contacted as part of the 2005–2006 NS-CSHCN. While the reasons for the likelihood of nonresponse on NSAP-SN differed, it was recognized that NSAP-SN would benefit from a similar incentive model as used on NSAP to address nonresponse.

Eligible cases

All households that completed the NSAP-SN screener and screened as in-scope for the interview were offered \$25 for completion of the survey. Households became eligible for an additional \$5 incentive (total \$30 incentive payment) based on their interview status and calling history characteristics.

Cases could become eligible for the additional \$5 incentive in one of two ways. First, a case could qualify after having refused participation verbally (i.e., active refusal). After two refusals in an NSAP-SN-eligible case’s call history, the case became eligible for an additional \$5 incentive (\$30 total incentive payment). Second, a case could qualify as a passive refusal based on patterns of continued nonresponse.

Two groups of passive refusal cases qualified for the additional \$5 incentive: NSAP-SN-eligible households that had

never verbally refused in their call history, but had multiple calls placed to the household over a period of time without successful contact; and NSAP-SN-eligible households that had verbally refused once during their call history, but since this refusal multiple calls were placed to the household over a period of time without successful contact.

Procedures

Once NSAP-SN-eligible cases became eligible for the additional \$5 incentive (\$30 total incentive), they were offered the incentive either by mail or on call back in the following manner. After a second verbal refusal or qualifying for a passive refusal incentive, cases were temporarily finalized, or removed from calling, within the CATI system. For households with an available address, a letter (Appendix IV) was mailed with \$5 enclosed. The letter explained that attempts had been made to contact the household via phone to complete the NSAP-SN interview. It also briefly described NSAP-SN, included an FAQ section about the survey, and mentioned that \$25 would be mailed upon continued participation in NSAP-SN. In this way, the letter served as a supplementary mode of refusal conversion. After approximately 1–2 weeks from the time the case finalized, the active refusal and passive refusal incentive cases were reactivated and offered \$25 by phone. The incentive offer was introduced in various interview scripts (i.e., consent script, callback script, answering machine script) based on case progress within the interview. For active refusal or passive refusal incentive-eligible households without an address, \$30 was introduced at similar points in the survey, again

based on the point at which the refusal occurred.

After the incentive offer, cases would be permanently finalized and not called again based on refusal counts. Active refusal cases (with two previous refusals) and passive refusal cases (with one previous refusal) were finalized after one subsequent refusal. Passive refusals with no previous refusals finalized after the second refusal postincentive offer. In addition, if any case refused in a hostile manner or requested to be removed from the calling list, the case was finalized and not called again.

If any passive refusal or active refusal incentive-eligible household completed NSAP-SN, or if a respondent requested the incentive without completing the interview, address information for the household was either confirmed or collected. The appropriate \$25 or \$30 payment was mailed to the household, along with a letter expressing appreciation for the respondent’s time and effort spent participating in the interview. If a household completed NSAP-SN without becoming eligible for the \$5 incentive, \$25 was mailed to the household enclosed in a letter expressing appreciation for their participation. Households that completed the NSAP-SN interview, but declined to confirm or provide address information (36 cases), were not mailed the incentive payment.

Results

The \$5 additional incentive effort, both for active and passive refusals, helped achieve 15 additional NSAP-SN interviews, as shown in Table II. Of the active refusal incentive cases, six (26.1%) completed the interview. Of the passive incentive cases, nine (45.0%) completed the interview.

Table II. Completion rates, by NSAP-SN incentive type

	NSAP-SN-eligible	Completed interview	Interview completion rate
\$25 initial incentive, qualified for additional \$5 active refusal incentive	23	6	26.1
\$25 initial incentive, qualified for additional \$5 passive refusal incentive	20	9	45.0

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs.

The \$5 additional incentive increased the number of completed interviews from 992 to 1,007. These additional completes increased the unweighted interview complete rate 1 (ratio of completes to total sample) from 61.7% to 62.7% and the unweighted interview complete rate 2 (ratio of completes to released sample excluding out-of-scope cases) from 65.0% to 65.9%.

Appendix VI

Nonresponse Bias Analysis

As previously described, the overall response rate for the National Survey of Adoptive Parents of Children with Special Health Care Needs (NSAP-SN) was 37.7%. Nonresponse to the NSAP-SN occurred in two stages: nonresponse to the 2005–2006 National Survey of Children with Special Health Care Needs (NS-CSHCN), and nonresponse to the follow-up interview for NSAP-SN. What is unusual in this case is that all of the nonrespondents in the second stage had already completed NS-CSHCN, and as a result, a great deal of information was known about these nonrespondents; information that is usually not available for nonrespondents. This had two main implications: first, it was possible to conduct a more extensive and accurate analysis of the potential for nonresponse bias resulting from the second stage of nonresponse than would normally be possible, and second, it was possible to adjust the weights very precisely to correct for nonresponse bias (as described in [Appendix I](#)). As a result of the weighting adjustments, the overall response rate for NS-CSHCN itself, i.e., the overall response rate for the first stage of nonresponse, could be considered the more accurate indicator of potential nonresponse bias in NSAP-SN.

[Tables III, IV, and V](#) present a comparison of NSAP-SN respondents and nonrespondents on selected NS-CSHCN data elements. All cases completed NS-CSHCN; they are differentiated by whether they responded or not in the second stage (i.e., whether they responded to NSAP-SN or not). [Table III](#) shows child-level demographic and health characteristics, [Table IV](#) shows household-level socioeconomic and demographic characteristics, and [Table V](#) shows NS-CSHCN data elements that are topically similar to the sorts of data collected in NSAP-SN. These tables demonstrate that there are significant differences between respondents and nonrespondents on

Table III. Percentage of children, by demographic and health characteristics, for respondents and nonrespondents in NSAP-SN

Child-level characteristic	Weighted percent (SE)	
	NSAP-SN-eligible, nonrespondents	NSAP-SN-eligible, respondents
Adoption type		
International	†14.7 (2.60)	†22.2 (2.01)
Foster care.	50.1 (3.38)	44.3 (2.66)
Private domestic	35.2 (3.08)	33.5 (2.74)
Age		
0–2 years	18.7 (2.96)	17.8 (1.94)
3–5 years	42.4 (3.33)	50.5 (2.73)
6–11 years	16.1 (2.25)	18.6 (2.60)
12–17 years	†22.9 (2.88)	†13.1 (1.62)
Sex		
Male.	55.0 (3.30)	57.0 (2.62)
Female	45.0 (3.30)	43.0 (2.62)
Race/ethnicity		
Hispanic	10.0 (1.95)	11.1 (1.69)
Non-Hispanic white.	†44.8 (3.18)	†53.9 (2.68)
Non-Hispanic black.	†28.4 (3.23)	†16.8 (1.94)
Non-Hispanic Asian	7.9 (2.27)	12.4 (1.65)
Non-Hispanic other.	8.9 (2.23)	5.9 (0.93)
CSHCN screener criteria endorsed		
Prescription medications	75.4 (2.99)	77.3 (2.11)
Elevated service usage or need	52.7 (3.39)	53.7 (2.71)
Limitation in activity	28.8 (3.15)	27.9 (2.57)
Physical, occupational, or speech therapy.	24.3 (2.90)	26.8 (2.21)
Behavioral, emotional, or developmental problem	48.8 (3.39)	50.6 (2.73)
Type of health insurance		
Private or employment-based only	†43.2 (3.29)	†53.8 (2.71)
Public only	†38.2 (3.42)	†29.2 (2.56)
Private and public	14.6 (2.52)	14.0 (1.54)
Other comprehensive insurance.	1.6 (0.71)	1.7 (0.47)
Uninsured	2.4 (0.77)	1.3 (0.50)
Ever uninsured previous 12 months		
Yes	†7.4 (1.50)	†3.8 (0.90)
No	†92.7 (1.50)	†96.2 (0.90)
Sample size	598	1,003
Weight	NS-CSHCN	NS-CSHCN

† Estimates for respondents and nonrespondents differ at the 0.05 level.

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs; SE is standard error; CSHCN is children with special health care needs; NS-CSHCN is National Survey of Children with Special Health Care Needs.

SOURCE: CDC/NCHS, NS-CSHCN, 2005–2006.

many dimensions. Nonrespondents were significantly less likely to represent international adoptions, non-Hispanic white children with special health care needs (CSHCN), privately insured CSHCN, and CSHCN with no insurance coverage gaps, and significantly more likely to represent older CSHCN, non-Hispanic black CSHCN, publicly insured CSHCN, and those with insurance coverage gaps ([Table III](#)). Nonrespondents were significantly less likely to represent households in the

highest income or education categories, households with two adults or two children, and households in the Midwest, and significantly more likely to represent households in the south ([Table IV](#)). Nonrespondents were significantly less likely to represent households with two adoptive parents, CSHCN adopted at age 1 year, and CSHCN not covered by Medicaid, and significantly more likely to represent households with one adoptive parent and CSHCN covered by Medicaid ([Table V](#)).

Table IV. Percentage of children, by household socioeconomic and demographic characteristics, for respondents and nonrespondents in NSAP-SN

Household-level characteristic	Weighted percent (SE)	
	NSAP-SN-eligible, nonrespondents	NSAP-SN-eligible, respondents
Total household income		
Less than \$10,000	6.5 (1.69)	2.7 (0.98)
\$10,000–\$19,999	8.8 (1.73)	5.7 (1.25)
\$20,000–\$39,999	19.6 (2.82)	14.0 (1.75)
\$40,000–\$59,000	17.8 (2.63)	18.3 (1.93)
\$60,000 or more	†47.3 (3.37)	†59.2 (2.62)
Highest educational attainment		
Less than high school	5.5 (1.43)	3.2 (0.89)
High school or equivalent	17.7 (2.60)	12.5 (1.92)
More than high school	†76.8 (2.82)	†84.4 (2.06)
Number of adults		
1	16.9 (2.49)	12.2 (1.65)
2	†61.4 (3.25)	†69.9 (2.37)
3 or more	21.7 (2.63)	17.9 (1.96)
Number of children		
1	40.7 (3.25)	38.6 (2.60)
2	†24.7 (2.74)	†33.6 (2.47)
3 or more	34.6 (3.47)	27.8 (2.69)
Primary language in the household		
English	99.3 (0.34)	99.5 (0.36)
Not English	0.7 (0.34)	0.5 (0.36)
Census region		
Northeast	17.1 (2.25)	15.6 (1.33)
Midwest	†20.5 (2.14)	†29.5 (1.66)
South	†44.3 (2.87)	†34.5 (1.96)
West	18.1 (2.29)	20.5 (2.13)
MSA status		
In MSA	85.9 (1.97)	85.5 (1.55)
Not in MSA	14.1 (1.97)	14.5 (1.55)
Sample size	598	1,003
Weight	NS-CSHCN	NS-CSHCN

† Estimates for respondents and nonrespondents differ at the 0.05 level.

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs; SE is standard error; MSA is metropolitan statistical area; NS-CSHCN is National Survey of Children with Special Health Care Needs.

SOURCE: CDC/NCHS, NS-CSHCN, 2005–2006.

In addition to these statistically significant differences, many other characteristics showed differences between respondents and nonrespondents that are not statistically significant, but are large enough to prompt the question as to the magnitude of the effect of second-stage nonresponse on survey estimates.

Tables VI, VII, and VIII present estimates for the final NSAP-SN sample, weighted by the nonresponse-adjusted sampling weights, compared with estimates for the full pool of NS-CSHCN cases that were eligible for NSAP-SN (i.e., the NSAP-SN respondents and nonrespondents combined; the final NSAP-SN sample that would have been attained if there

were no second-stage nonresponse at all). After the weighting adjustments described in Appendix I, estimates for NSAP-SN respondents are much closer to the estimates for the full pool of NSAP-SN-eligible cases, and in many, comparisons are so close that the remaining difference is negligible. Although this is to be expected for the characteristics that were used to adjust the weights, such as age, it is also the case for characteristics that were not directly controlled in the adjustment of the sampling weights, presumably because they are related to the variables that were controlled for in the weighting adjustment.

The only characteristic that shows a significant difference in Tables VI–VIII is the percentage of households with three or more children (the final NSAP-SN sample underestimates the proportion of adoptive households with three or more children by 4 percentage points). Other than the significant difference found for three or more children, only two other characteristics in Tables VI–VIII showed a difference between the final NSAP-SN sample and the full pool of NSAP-SN-eligible cases that was as high as 3 percentage points: two children in the household (3.6 percentage points, overestimated in the final NSAP-SN file, Table VI) and CSHCN adopted at age 0 (3 percentage points, underestimated in the final NSAP-SN file, Table VIII).

Of all the characteristics examined, there is a second-stage nonresponse bias of at least 3 percentage points for categories of only two variables: the number of children in the household and the age at adoption. Although this analysis does not necessarily demonstrate that no nonresponse bias derives from second-stage nonresponse, it strongly suggests that the overall first-stage response rate (56.1%) is very likely a better indicator of the potential nonresponse bias in NSAP-SN than the final overall response rate of 37.7%.

Table V. Percentage of children, by NS-CSHCN characteristics similar to NSAP-SN data elements for respondents and nonrespondents in NSAP-SN

Household-level characteristic	Weighted percent (SE)	
	NSAP-SN-eligible, nonrespondents	NSAP-SN-eligible, respondents
Number of adoptive parents in household		
1	†51.9 (3.37)	†40.5 (2.65)
2	†48.2 (3.37)	†59.5 (2.65)
Age at adoption finalization		
0 years	34.1 (3.22)	29.0 (2.48)
1 year	†11.5 (1.90)	†19.2 (2.46)
2–5 years	37.9 (3.33)	31.2 (2.33)
6 years and over	16.4 (2.26)	20.6 (2.29)
Child has difficulty with behavior problems		
Yes	42.7 (3.38)	43.7 (2.66)
No	57.3 (3.38)	56.3 (2.66)
Child has received mental health treatment		
Yes	39.1 (3.33)	45.1 (2.74)
No	60.9 (3.33)	54.9 (2.74)
Child has received substance abuse treatment		
Yes	2.6 (0.91)	2.6 (0.90)
No	97.4 (0.91)	97.4 (0.90)
Child has Individualized Family Service Plan or Individualized Education Plan		
Yes	43.2 (3.35)	43.6 (2.61)
No	56.8 (3.35)	56.4 (2.61)
Child is covered by Medicaid or CHIP		
Yes	†52.8 (3.36)	†43.1 (2.70)
No	†47.3 (3.36)	†56.9 (2.70)
Any difficulty using health care services		
Yes	12.6 (2.12)	14.5 (1.73)
No	87.4 (2.12)	85.5 (1.73)
Reasons for difficulty using services		
Lack of information	6.4 (1.60)	8.0 (1.25)
Cost	4.3 (1.10)	5.3 (1.23)
Transportation	2.0 (0.81)	2.4 (0.81)
Services not available when needed	8.4 (1.89)	10.2 (1.52)
Language, communication, or culture problems	1.3 (0.60)	2.3 (0.89)
Not available in area	8.5 (1.92)	6.3 (1.26)
Child not eligible for services	4.2 (1.01)	6.1 (1.13)
Sample size	598	1,003
Weight	NS-CSHCN	NS-CSHCN

† Estimates for respondents and nonrespondents differ at the 0.05 level.

NOTE: NS-CSHCN is National Survey of Children with Special Health Care Needs; NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs; SE is standard error; CHIP is Children's Health Insurance Program.

SOURCE: CDC/NCHS, NS-CSHCN, 2005–2006.

Table VI. Percentage of children, by demographic and health characteristics in the final NSAP-SN, and for all NSAP-SN-eligible cases

Child-level characteristic	Weighted percent (95% CI)	
	All NSAP-SN-eligible cases	Final NSAP-SN data file
Adoption type		
International	19.5 (16.5–22.8)	18.5 (15.4–22.1)
Foster care.	46.4 (42.3–50.6)	48.5 (43.5–53.5)
Private domestic	34.1 (30.1–38.3)	33.0 (28.5–37.9)
Age		
0–2 years	18.1 (15.1–21.6)	18.1 (14.7–22.1)
3–5 years	47.6 (43.5–51.7)	47.6 (42.7–52.5)
6–11 years	17.7 (14.3–21.7)	17.7 (14.2–21.9)
12–17 years	16.7 (13.9–19.8)	16.7 (13.2–20.8)
Sex		
Male	56.3 (52.2–60.3)	56.3 (51.3–61.1)
Female	43.7 (39.7–47.8)	43.7 (38.9–48.7)
Race/ethnicity		
Hispanic	10.7 (8.4–13.4)	10.7 (8.0–14.1)
Non-Hispanic white.	50.6 (46.5–54.7)	51.6 (46.6–56.5)
Non-Hispanic black.	21.0 (17.8–24.6)	21.0 (16.9–25.8)
Non-Hispanic Asian	10.8 (8.4–13.7)	10.8 (8.2–14.0)
Non-Hispanic other.	7.0 (5.2–9.3)	6.0 (4.4–8.2)
CSHCN screener criteria endorsed		
Prescription medications	76.6 (73.1–79.9)	76.9 (72.5–80.8)
Elevated service usage or need	53.4 (49.2–57.5)	53.1 (48.2–58.0)
Limitation in activity	28.2 (24.4–32.3)	28.0 (23.7–32.8)
Physical, occupational, or speech therapy.	25.9 (22.6–29.4)	27.4 (23.2–32.0)
Behavioral, emotional, or developmental problem	50.0 (45.8–54.1)	50.9 (45.9–55.9)
Type of health insurance		
Private or employment based only	49.9 (45.8–54.1)	49.1 (44.1–54.1)
Public only	32.5 (28.5–36.6)	32.7 (27.8–38.0)
Private and public	14.2 (11.8–17.0)	14.4 (11.5–17.9)
Other comprehensive insurance.	1.7 (1.1–2.7)	1.9 (1.1–3.3)
Uninsured	1.7 (1.1–2.8)	2.0 (0.9–4.3)
Ever uninsured previous 12 months		
Yes	5.1 (3.8–6.9)	4.6 (2.8–7.2)
No	94.9 (93.1–96.2)	95.5 (92.8–97.2)
Sample size	1,601	1,003
Weight	NS-CSHCN	NSAP-SN

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs; CI is confidence interval; CSHCN is children with special health care needs; NS-CSHCN is National Survey of Children with Special Health Care Needs.

SOURCES: CDC/NCHS, NS-CSHCN, 2005–2006 and NSAP-SN, 2008.

Table VII. Percentage of children, by household socioeconomic and demographic characteristics in the final NSAP-SN, and for all NSAP-SN-eligible cases

Household-level characteristic	Weighted percent (95% CI)	
	All NSAP-SN-eligible cases	Final NSAP-SN data file
Total household income		
Less than \$10,000	4.1 (2.7–6.2)	3.7 (1.9–7.1)
\$10,000–\$19,999	6.9 (5.1–9.1)	7.2 (4.8–10.6)
\$20,000–\$39,999	16.1 (13.3–19.2)	16.1 (12.6–20.2)
\$40,000–\$59,000	18.1 (15.3–21.4)	18.1 (14.8–22.0)
\$60,000 or more	54.9 (50.8–58.9)	54.9 (49.8–59.8)
Highest educational attainment		
Less than high school	4.0 (2.7–5.8)	4.3 (2.4–7.4)
High school or equivalent	14.4 (11.6–17.7)	14.1 (10.5–18.8)
More than high school	81.6 (78.2–84.7)	81.6 (76.7–85.7)
Number of adults		
1	13.9 (11.4–16.9)	14.0 (10.7–18.0)
2	66.8 (62.9–70.5)	67.0 (62.1–71.6)
3 or more	19.3 (16.4–22.5)	19.0 (15.3–23.4)
Number of children		
1	39.4 (35.5–43.4)	39.8 (35.1–44.7)
2	30.4 (26.9–34.1)	34.0 (29.3–38.9)
3 or more	†30.3 (26.3–34.6)	†26.3 (21.9–31.1)
Primary language in the household		
English	99.4 (98.6–99.8)	99.5 (98.3–99.8)
Not English	0.6 (0.2–1.4)	0.5 (0.2–1.8)
Census region		
Northeast	16.2 (14.6–17.9)	16.2 (14.2–18.4)
Midwest	26.2 (24.4–28.0)	26.2 (24.0–28.5)
South	38.1 (35.8–40.3)	38.1 (35.3–40.8)
West	19.6 (17.2–22.3)	19.6 (17.6–21.8)
MSA status		
In MSA	85.7 (83.2–87.9)	84.9 (81.4–87.9)
Not in MSA	14.3 (12.1–16.8)	15.1 (12.1–18.6)
Sample size	1,601	1,003
Weight	NS-CSHCN	NSAP-SN

† Estimates for NSAP-SN final data and NSAP-SN-eligible cases differ at the 0.05 level.

NOTE: NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs; CI is confidence interval; MSA is metropolitan statistical area; NS-CSHCN is National Survey of Children with Special Health Care Needs.

SOURCES: CDC/NCHS, NS-CSHCN, 2005–2006 and NSAP-SN, 2008.

Table VIII. Percentage of children, by NS-CSHCN characteristics similar to NSAP-SN data elements in the final NSAP-SN, and for all NSAP-SN-eligible cases

Characteristic	Weighted percent (95% CI)	
	All NSAP-SN-eligible cases	Final NSAP-SN data file
Number of adoptive parents in household		
1	44.6 (40.6–48.8)	44.4 (39.4–49.5)
2	55.4 (51.2–59.4)	55.6 (50.5–60.6)
Age at adoption finalization		
0 years	30.9 (27.1–34.8)	27.9 (23.8–32.5)
1 year	16.5 (13.3–20.1)	18.3 (14.6–22.5)
2–5 years	33.6 (29.9–37.5)	31.9 (27.6–36.5)
6 years and over	19.1 (16.0–22.6)	22.0 (17.7–27.0)
Child has difficulty with behavior problems		
Yes	43.3 (39.3–47.5)	45.6 (40.6–50.7)
No	56.7 (52.5–60.7)	54.4 (49.3–59.4)
Child has received mental health treatment		
Yes	42.9 (38.8–47.1)	45.3 (40.4–50.4)
No	57.1 (52.9–61.2)	54.7 (49.6–59.7)
Child has received substance abuse treatment		
Yes	2.6 (1.6–4.3)	3.4 (1.7–6.8)
No	97.4 (95.7–98.4)	96.6 (93.2–98.4)
Child has Individualized Family Service Plan or Individualized Education Plan		
Yes	43.4 (39.5–47.5)	44.1 (39.2–49.1)
No	56.6 (52.6–60.5)	55.9 (51.0–60.8)
Child is covered by Medicaid or CHIP		
Yes	46.6 (42.5–50.8)	47.0 (42.0–52.1)
No	53.4 (49.2–57.5)	53.0 (47.9–58.1)
Any difficulty using health care services		
Yes	13.8 (11.4–16.7)	15.4 (12.0–19.5)
No	86.2 (83.4–88.6)	84.6 (80.5–88.0)
Reasons for difficulty using services		
Lack of information	7.4 (5.7–9.6)	8.7 (6.2–12.0)
Cost	4.9 (3.4–6.9)	6.2 (3.9–9.9)
Transportation	2.3 (1.4–3.8)	2.8 (1.4–5.6)
Services not available when needed	9.6 (7.5–12.1)	11.2 (8.3–15.1)
Language, communication, or culture problems	1.9 (1.0–3.5)	2.8 (1.3–5.9)
Not available in area	7.1 (5.3–9.5)	7.1 (4.7–10.4)
Child not eligible for services	5.4 (4.0–7.2)	6.7 (4.6–9.9)
Sample size	1,601	1,003
Weight	NS-CSHCN	NSAP-SN

NOTE: NS-CSHCN is National Survey of Children with Special Health Care Needs; NSAP-SN is National Survey of Adoptive Parents of Children with Special Health Care Needs; CI is confidence interval; CHIP is Children's Health Insurance Program.

SOURCES: CDC/NCHS, NS-CSHCN, 2005–2006 and NSAP-SN, 2008.

Appendix VII

Coding of Verbatim Answers Into Question Responses

For many questions in the NSAP-SN interview, respondents provided a response that did not match any preexisting category. If this occurred, the interviewer chose “other” and typed in the response provided by the respondent. After the end of the data collection period verbatim responses were recoded into existing response categories where appropriate.

There were three ways in which verbatim responses were used to recode or back-code data:

- Some verbatim responses were back-coded to existing response categories on preceding questions.
- Some verbatim responses were used to create new response categories for preceding questions, which are indicated by new dummy variables.
- Some verbatim responses were used to create new variables to capture the data because no root question existed for which to create new categories or back-code verbatim responses into preexisting categories.

Any questionnaire variable that was recoded or back-coded based on verbatim responses had the letter “R” appended to the variable name to denote “recoded version” of the variable.

Verbatim responses were used to back-code “other” into preexisting categories for the following variables:

- C2_N asked where the child lived prior to placement with the family and “other” responses were recorded verbatim in C2A. Verbatim responses were used to change a few cases of “other” to one of the preexisting codes on C2_NR.
- C12A–C12F asked if a list of items were reasons why the respondent chose to adopt, C12G asked if there were any other reasons, and C12GA recorded the verbatim reason. Verbatim responses were used to change “no” to “yes” for a few

cases each on C12AR, C12BR, C12CR, C12ER, and C12FR.

- C22A–C22H asked if a list of items were reasons why the respondent chose to adopt via a private domestic adoption and C22I asked if there were any other reasons and C22IA recorded the verbatim reason. C22A–C22H and C22IA were each followed by a question that asked if the reason was very important, somewhat important, or not important. Verbatim responses were used to change “no” to “yes” for a few cases each on C22AR, C22ER, and C22HR, and in each case, the value for the importance follow-up C22IA was assigned as appropriate to C22AAR, C22EAR, and C22HAR.
 - C23A_N–C23K asked if a list of items were reasons why the respondent chose to adopt via an international adoption, C23L asked if there were any other reasons, and C23LA recorded the verbatim reason. C23A_N–C23K and C23LA were each followed by a question that asked if the reason was very important, somewhat important, or not important. Verbatim responses were used to change “no” to “yes” for a few cases each on C23A_NR, C23DR, C23ER, C23FR, C23GR, and C23HR and in each case, the value for the importance follow-up C23LB was assigned as appropriate to C23AAR, C23DAR, C23EAR, C23FAR, C23GAR, and C23HAR.
 - F6A–F6C asked if a list of items were reasons why the respondent requested a subsidy, F6D asked if there were any other reasons, and F6DA recorded the verbatim reason. Verbatim responses were used to change “no” to “yes” for a few cases on F6AR.
 - N1D, N2D, N3D, N5F, N6D, N7D, N9D, N10D, N11D, N12D, N14D, and N18D are items that asked why the respondent or respondent’s child did not receive a particular postadoption support or service; multiple answers were possible and the answers were recorded in dummy variables. Verbatim responses were used to change “other” to one of the preexisting codes for a few cases on each of the following dummy variables: N1DX01R, N1DX02R, N1DX04R, N2DX01R, N2DX02R, N3DX03R, N3DX04R, N5FX01R, N5FX02R, N6DX02R, N7DX02R, N9DX01R, N9DX02R, N9DX03R, N10DX01R, N10DX02R, N10DX04R, N10DX05R, N10DX06R, N11DX02R, N11DX04R, N11DX05R, N12DX01R, N12DX02R, N12DX04R, N12DX05R, N14DX04R, and N18DX03R.
 - N3B, N5D, N6B, N10BB, N11B, and N12B are items that asked how the respondent heard about particular postadoption support and services; multiple answers were possible and the answers were recorded in dummy variables. Verbatim responses were used to change “other” to one of the preexisting codes for a few cases on each the following dummy variables: N3BX02R, N5DX01R, N5DX02R, N6BX03R, N10BBX01R, N10BBX02R, N11BX01R, and N12BX01R.
 - N21A and N22A asked the respondent who helped them assist or recruit other adoptive families. Verbatim responses were used to change “other” to one of the preexisting codes for a few cases on N21AR and N22AR.
 - N26 and N27 are items that asked the respondent’s and respondent’s spouse’s or partner’s employment status the previous week. Verbatim responses were used to change “other” to one of the preexisting codes for a few cases on N26R and N27R.
- Verbatim responses were used to create new response categories for the following variables:
- F10A asked for other reasons why the family didn’t receive an adoption subsidy. Some “other” responses were put into a new category on F10R indicating the subsidy was not available.
 - N1DA, N2DA, N3DA, N5FA, N6DA, N7DA, N9DA, N10DA, N11DA, N12DA, N14DA, and

- N18DA are items that asked for other reasons why the respondent or respondent's child did not receive a particular postadoption support or service. For each, some "other: verbatim" responses have been back-coded into new categories: one that combines responses such as "distance" and "transportation issues," another that combines responses such as "time" and "scheduling difficulties," another that combines responses that indicate the child's condition or behavior prevented the family from receiving the service, and another that combined responses such as "it wasn't needed," "a family member refused," and "we didn't follow through with it." All of these variables got the new code "no need/someone refused/no follow-through" and none of these variables got more than two new codes in total. The new response categories were captured by the dummy variables N1DA_1, N1DA_2, N2DA_1, N2DA_2, N3DA_1, N3DA_2, N5FA_1, N6DA_1, N7DA_1, N9DA_1, N10DA_1, N11DA_1, N12DA_1, N14DA_1, N18DA_1, and N18DA_2.
- N2BAA, N3BA, N5DA, N6BA, N7BA, N8BA, N9BA, N10BA, N11BA, N12BA, N14BBA, and N18BA are items that asked for other sources from whom the respondent heard about particular postadoption support and services. For each, some "other: verbatim" responses have been back-coded into two new categories: one that combines responses such as "friends," "acquaintances," "church," and "word of mouth," and another that combines responses such as "clinic," "hospital," and others as "other service providers." The new response categories are captured by the dummy variables N2BAA_1, N2BAA_2, N3BA_1, N3BA_2, N5DA_1, N5DA_2, N6BA_1, N6BA_2, N7BA_1, N7BA_2, N8BA_1, N9BA_1, N9BA_2, N10BA_1, N10BA_2, N11BA_2, N12BA_1, N12BA_2, N14BBA_1, N14BBA_2, N18BA_1, and N18BA_2.
 - N21AA and N22AA asked the respondent for other sources that helped them assist or recruit other adoptive families. A new category has been created for these variables that groups together responses such as "social services," "other public agency," and "non-governmental organization." The new response categories were captured by the dummy variables N21AA_1 and N22AA_1.
- Verbatim responses were used to create new variables for the following situations:
- C12GA asked for other reasons why the respondent chose to adopt. New variable C12GA_1 indicates that the respondent had formed a bond or already loved the child prior to adoption, C12GA_2 indicates that the child was a relative's or friend's child prior to the adoption, C12GA_3 indicates a general statement such as "I love children," and C12GA_4 indicates that the respondent wanted to help the child avoid going to foster care.
 - C22IA, C23LA, and C24FA asked for other reasons why the respondent chose the specific type of adoption he or she did (private domestic, international, or foster care). New variable C22IA_1 indicates responses such as convenience or a desire to help American children, C22IA_2 indicates responses such as lower cost or less risk, C22IA_3 indicates responses such as wanting an open adoption or knowing the child prior to adoption, and C22IA_4 indicates responses such as familiarity with that agency. C23LA_1 indicates responses such as wanting a Chinese girl, C23LA_2 indicates responses such as wanting to bring a child to the United States, C23LA_3 indicates responses such as seeing a great need in that country, C23LA_4 indicates responses such as not qualifying for a U.S. adoption because of single-parent status, C23LA_5 indicates responses such as having friends that adopted that way, and C23LA_6 indicates responses such as the child having the same race/ethnicity or national origin as the family. C24FA_1 indicates responses such as wanting to give a home to a child who really needed one.
 - C23IAA asked why the respondent felt that a U.S. adoption would not be the best option. New variable C23IAAR has three categories created from the verbatim responses: "legal issues/fear of birth parents changing their minds," "race or age considerations," and "drug abuse/special needs considerations."
 - F6DA asked the respondent for other reasons why he or she requested an adoption subsidy. New variable F6DA_1 indicates one category created from the verbatim responses: because they could always use extra income or because it was available.
 - F16EA, F17EA, and F18EA asked if there was any other source helping to pay for services. New variables F16EA_1 and F16EA_2 indicate answers of "insurance (other than Medicaid)" and "school," F17EA_1 and F17EA_2 indicate answers of "insurance" and "Medicaid," and F18EA_1 and F18EA_2 indicate answers of "insurance" and "Medicaid."

Appendix VIII

Prevalence Estimates and Weighted Frequencies

Table IX. Unweighted and weighted estimates of the frequency and prevalence of type of adoption for adopted CSHCN

Type of adoption	Total unweighted number of children	Total weighted estimate of number of children	Standard error of weighted estimate of number of children	Percent of children	Standard error of percent of children
Total	1,003	404,262	11,612.7	100.0	. . .
International	225	74,855	6,822.4	18.5	1.74
Foster care	457	196,027	12,339.7	48.5	2.53
Private domestic	321	133,379	10,627.4	33.0	2.42

. . . Category not applicable.

NOTE: CSHCN is children with special health care needs.

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