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Materials from Dept. of
ED on the Early Childhood
Longitudinal Study -
Birth Cohort.

— Janny Werfel

ADDENDUM TO ECLS-B OMB CLEARANCE REQUEST
July 13, 1999

This addendum provides updates to the request for clearance to conduct the first phase of the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B) that Westat prepared on March 12, 1999. Several changes have occurred in the study design since the original clearance request was prepared, and some other changes are in development. The following changes have already occurred:

- Inclusion of a sample of Chinese births;
- Addition of asset items;
- Revision of asthma questions;
- Addition of dental/feeding questions;
- Addition of more father data at 9-months; and
- Modifications in the advance letters and inclusion of signed consent forms.

The following changes are very likely to occur and are in various stages of development:

- Inclusion of an oversample of children enrolled in Even Start;
- Various enhancements with funding by the Administration for Children, Youth, and Families; and
- The addition of a resident father questionnaire at 18-months.

This addendum describes the actual and potential changes and includes replacement pages for the questionnaires.

1. Changes That Have Already Occurred Since the OMB Clearance Request Was Prepared

Altogether, six changes have occurred since the clearance request was prepared. The first change affects the sample design: an oversample of Chinese births has been incorporated, with funding from the National Institute for Child Health and Human Development, the National Institutes of Health. Questionnaire changes have occurred in four areas: assets, asthma, dental/feeding, and fathers. The sixth set of changes pertains to the advance letters and

informed consent process, as a result of the Institutional Review Board process at the National Center for Health Statistics, in the Centers for Disease Control.

1.1 Inclusion of an Oversample of Chinese Births

This is a modification to Part B: Description of Statistical Methodology, B.1, Statistical Design and Estimation. Throughout the ECLS-B design and development interest has been expressed in subdivisions of the race/ethnicity analytic subgroups (as presented in section B.1.2.1 of the clearance request), especially with regard to the Hispanic¹ and Asian/Pacific Islander subgroups. Additional funding was provided by the National Institute for Child Health and Development (NICHD), National Institutes of Health (NIH) to increase the number of Chinese children in the sample, in order to examine health and development issues particular to this population, especially with regard to the unusually good health prospects for these children despite lower birth weights.

The ECLS-B PSU sample was drawn with this potential oversampling of Chinese births in mind. The PSU measures of size were calculated as a function of births by occurrence, adjusted by the sampling rates for each specific subgroup (see section B.1.3.2), including the Chinese as a separate analytic subgroup in the race/ethnicity domain. In this manner, PSUs with unusual concentrations of oversampled subgroups were selected with probabilities larger than what would otherwise result.

We estimated about 270 actual Wave 1 completes with Chinese children would be achieved within the Asian/Pacific Islander subgroup under the original design. A review of the precision and power achieved with this sample size, careful consideration of the analytic objectives and funds available for an oversample of this subgroup, and precision and power calculations of a larger number of completes led to a target effective sample size of 500 actual Wave 1 completes with Chinese children under this option.

The Chinese oversample was implemented by introducing a fifth level within the race/ethnicity domain, with its own target effective sample size, and repeating the steps described

¹ During 1998 and early 1999, conversations occurred within the ECLS-B Technical Review Panel and with NICHD regarding the Hispanic group. Approximately 70% of Hispanic births are in the Mexican-American subgroup. This subgroup will be sufficiently large in the ECLS-B sample of Hispanics to support separate analyses, with nearly the same power as for the Hispanic group as a whole. Therefore, it was decided that the sample of Hispanics would not be augmented to enlarge any of the Hispanic subgroups.

in sections B.1.2.3 through B.1.2.9. Introducing the Chinese as a specific race/ethnicity subgroup changes the total and actual sample sizes reported in tables B1-3 through B1-7, as well as the overall sampling rates by stratum reported in table B1-10. Provided below are new tables, identical in layout to tables B1-4, B1-5, B1-7 and B1-10 giving the total wave 1 actual and effective completes, the total wave 6 actual and effective completes, the total actual sample sizes and the new overall sampling rates, respectively.

Table B1-4A. Wave 1 completes, weighting effects, and effective Wave 1 completes by level of domain

Group	Wave 1 completes	Weighting effect	Effective Wave 1 completes
Total	12,408	1.5150	8,190
White/non-Hispanic, and all others	6,259	1.3689	4,572
Black/non-Hispanic	2,288	1.4393	1,590
Chinese	541	1.0032	539
Other Asian/Pacific Islander	1,352	1.0230	1,322
Hispanic	1,968	1.2375	1,590
VLBW	1,594	1.0026	1,590
MLBW	1,856	1.1671	1,590
NBW	8,958	1.2517	7,156
Single births and other non twins	10,738	1.3750	7,810
Twins	1,669	1.0499	1,590

Table B1-5A. Wave 6 completes, weighting effects, and effective sample sizes by level of domain

Group	Wave 6 completes	Weighting effect	Effective sample size
Total	10,158	1.5150	6,705
White/non-Hispanic, and all others	5,124	1.3689	3,743
Black/non-Hispanic	1,874	1.4393	1,302
Chinese	443	1.0032	441
Other Asian/Pacific Islander	1,107	1.0230	1,082
Hispanic	1,611	1.2375	1,302
VLBW	1,305	1.0026	1,302
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NBW	7,334	1.2517	5,859
Single births and other non twins	8,791	1.3750	6,394
Twins	1,367	1.0499	1,302

Table B1-7A Initial sample sizes by level of domain

Group	Initial sample size
Total	15,550
White/non-Hispanic, and all others	7,728
Black/non-Hispanic	2,923
Chinese	705
Other Asian/Pacific Islander	1,779
Hispanic	2,416
VLBW	2,543
MLBW	2,237
NBW	10,770
Single births and other non twins	13,433
Twins	2,118

Table B1-10A. Selection probabilities by sampling strata

Race/ethnicity	Birth weight	Twins	Single births and other non twins
White	VLBW	0.048945	0.043031
White	MLBW	0.018896	0.006972
White	NBW	0.017428	0.002045
Black	VLBW	0.049017	0.043116
Black	MLBW	0.018999	0.007239
Black	NBW	0.017534	0.002805
Chinese	VLBW	0.063613	0.058213
Chinese	MLBW	0.032915	0.026645
Chinese	NBW	0.031621	0.025246
Other Asian/Pacific Islander	VLBW	0.056345	0.050173
Other Asian/Pacific Islander	MLBW	0.024264	0.014678
Other Asian/Pacific Islander	NBW	0.022792	0.012535
Hispanic	VLBW	0.048987	0.043089
Hispanic	MLBW	0.018974	0.007171
Hispanic	NBW	0.017507	0.002628

The addition of a Chinese oversample affects Table A-4, the estimated response burden for the ECLS-B Phase I. A new table below reflects these changes in the response burden.

Table A-4A. Estimated response burden for the ECLS-B Phase I

Data Collection Form	Estimated time (minutes)	Number of Interviews	Total Time (hours)
Field Test (9-months)			
Parent Interview	70	1,200	1,400
Child Assessment	20	1,200	400
Resident Father SAQ	20	500	167
Non-Resident Father Interview ²	20	210	70
Field Test (18-months)			
Parent Interview	70	1,080	1,260
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Field Test Total		5,640	3,932
9-Month Data Collection			
Parent Interview	70	12,408	13,767
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Phase I Data Collection Total		59,607	41,652

² In the field test we will be assessing two versions of the instrument for non-resident fathers, to identify the impact of the length of the interview on response rates. The "long" form of the interview will average approximately 25 minutes while the "short" form of the interview will average 10 minutes. The present request does not include a non-resident father interview component in the Phase I full-scale study. The field test results and the availability of federal agency support will determine its implementation in the full-scale data collection and, if this were to occur, a separate request will be submitted.

³ Assumes that 45% of the completed home visited cases will have child care arrangements, and that the response rate for the child care provider interviews is 80%.

1.2 Additional Asset Items

In the course of a review of the ECLS-B questionnaires by a network of experts on children and family issues convened by NICHD, some questions were raised about the ECLS-B income and asset items. Nonresponse probes have been added to the 9-month Parent Questionnaire, after item X8 (present value of house/apartment), to determine if the home value would amount to \$50,000 or more, \$150,000 or more, or \$5,000 or more. Additional questions have been added after X8, to determine whether there is a mortgage on the property, the remaining principal on the mortgage, and (if nonresponse to the remaining principal item) whether the outstanding balance is \$50,000 or more, \$150,000 or more, or \$5,000 or more. The home value probes and the mortgage question and probes are taken from the Panel Survey of Income Dynamics and allow for respondents to provide some information if they are not willing to give specific dollar amounts. An insert page for the parent questionnaire is attached.

1.3 Revised Asthma Questions

Dr. Pamela Meyer in the Center for Environmental Health at the Centers for Disease Control and Prevention reviewed the items on asthma, and suggested that it was important to separate "asthma" from "other breathing problems." This suggestion led to an examination of all the asthma and respiratory items in the parent questionnaires. Rewording some of the questions in the O12-O20 series sharpened the focus of the items on asthma. An insert page for the questionnaire is attached.

1.4 Additional Dental/Feeding Questions

NIDCR (the National Institute of Dental and Craniofacial Research) requested that the ECLS-B 9-month parent questionnaire include a question about whether the child is put to bed with a bottle and if so, the content since this behavior is thought to be a primary cause of caries. They also recommended an additional question for the 18-month parent questionnaire regarding added sweeteners. NIDCR has limited evidence from a study of Hispanic populations that parents often add sugar or honey to milk or water in a bottle at bedtime, but would not think to mention this if not explicitly asked. The ECLS-B could provide national prevalence measures about such behaviors and could conceivably provide data for designing public message

interventions to help prevent caries. These questions have been added after T2 (in the 9-month instrument) and M7 (in the 18-month); see the attached insert.

1.5 Additional Father Data at 9-months

In the review of the ECLS-B questionnaires by the NICHD network of experts on children and family issues that was mentioned above, some questions were also raised about the father data. (1) It may be important in predicting future involvement of the father whether paternity was voluntary or was forced by the mother or state. Both SIPP (child support module) and the NLSY97 ask a series of questions about what was done to establish paternity. One category missing in ECLS-B is: Has the biological father been legally identified as the child's father by a blood test or other genetic test? We have added a question to this effect in the 9-month parent questionnaire. (2) The expert panel also recommended adding a short question on the relationship between the biological mother and the non-resident father in the parent questionnaire, to parallel a question in the non-resident father questionnaire. This question has been added after G13. (3) The expert panel recommended that all three instruments (the 9-month parent questionnaire, the resident father questionnaire, and the non-resident father questionnaire) include an item on whether the father is self-employed. This question has been added. See the attached insert sheets for the additional father questions.

1.6 Modifications in Advance Letters and Introduction of Signed Consent Forms

The ECLS-B recently underwent an extensive review by the NCHS Institutional Review Board. The Board has approved the 9- and 18-month protocol, but with some changes in the informed consent procedures. The advance letters to parents and child care providers were revised to more fully incorporate the informed consent elements, and the parent will be asked to sign an informed consent form. Copies of the revised materials are attached.

2. Changes That Are Likely to Occur

This section of the addendum describes 3 changes that have not yet been incorporated in the study design, but are in various stages of development and are viewed as very likely to occur: an oversample of children enrolled in Even Start starting in Wave 2, with funding from the Even Start program in the Department of Education; several major enhancements funded

by the Administration for Children, Youth and Families; and the addition of a resident father questionnaire at 18-months, similar to the 9-month instrument, funded by the National Institute for Child Health and Human Development, the National Institutes of Health.

2.1 Inclusion of an Oversample of Children Enrolled in Even Start

Even Start is a family literacy program intended to break the cycle of poverty by teaching parents the literacy and parenting skills they need to help their children learn to high standards. About 78,000 children and 31,500 families are currently enrolled in the program. About 30% of the children are between 0 and 2 years old; about 41% are in the program for more than one year; and slightly more than half of the programs are rural. Preliminary discussions have been held between NCES and Department of Education staff who are responsible for the Even Start program. There is strong interest in adding several hundred cases to the ECLS-B sample, starting in Wave 2 when the children are 18 months old, and continuing to follow the Even Start children and families throughout the course of the ECLS-B.

The sample would be selected from lists of Even Start enrollees in the ECLS-B primary sampling units. The additional Even Start cases would be given the same data collection treatment as the main ECLS-B sample. The Even Start program staff contemplate awarding a task order shortly to develop an approach for this ECLS-B addition. Children are now eligible for Even Start from birth through age 8. No data would be collected directly from the programs. The Even Start program staff would link the ECLS-B data on children and their families to data on programs in their national program data base. When and if this sample addition to the ECLS-B occurs, another addendum will be issued to this clearance request, informing OMB of the change.

2.2 ACYF Enhancements: Videotaping the NCAST, Questionnaire Additions, and In-person Data Collection from a Subsample of Child Care Providers

NCES has been pursuing a collaboration with the Administration on Children, Youth and Families (ACYF) that includes several additions and enhancements to the ECLS-B: videotaping the NCAST in the 9- and 18-month home visits, and coding the videotapes in a central location; adding 5 minutes of questions to the 18-month, 30-month, and 48-month parent interviews; and conducting observations of a subsample of child care providers at 18- and 48-

months. These changes were the outcome of a design task order that ACYF awarded to Westat; an inter-agency agreement is currently being drafted to document the scope of these changes.

The objectives of these additions are to: (1) enhance information about the types and quality of substitute care received by young children from low-income families in the U.S., and the consequences of differences in care quality for children's development and later academic achievement; (2) enhance information about variations within the population of low-income families, and comparisons between low-income and non-low income families, in the intellectual stimulation and emotional support that young children receive from their parents, and the consequences of these differences for children's development and later achievement; (3) collect information about the recruitment and selection process for Head Start and other center-based preschool programs; and (4) examine the consequences of Head Start participation for later development and achievement, controlling for the child's developmental status prior to Head Start, selection factors that lead different types of low-income families to participate in Head Start at different rates, and variations in program quality.

The original clearance request included the NCAST teaching task, and specified that it would be videotaped. (See Section C, pages C-17 to C23.) The ACYF addition will provide the funding for this videotaping and coding the NCAST as part of the 9-month and 18-month data collection waves.

The additional items for the 18-month parent questionnaire are in development. All parents will receive the items. They will focus on the selection of substitute care arrangements and awareness of the importance for child development of quality care.

A sample of children will be selected for the observational substudy at 18-months based on family income and child care arrangements. Table 3-1 illustrates the subsampling scheme. A total of 1721 completes in child care provider settings are expected.

For those substudy children who are receiving substitute care, the data collectors will visit the care provider, conduct in-person interviews and make observations about structural and process characteristics of care arrangements, quality of care, the relationship between the child and the care provider, and the child's behavior in substitute care. These observations will be done in a variety of child care settings, including center-based and other formal care arrangements as well informal care arrangements. The data collection time in each child care setting will average 140 minutes per child care provider. Additionally, for center-based

arrangements only, we will send the center administrator a self-administered questionnaire to complete (and return during the visit) that will average 10 minutes to complete.

Table 3-1. Subsampling Scheme for In-Person Visits to Child Care Providers at 18 Months

Category	Sub-sampling Rate
Low-income children in Relative Care	553 out of 922 (Sub-sampling rate = .60)
Low-income children in Non-relative Care	172 out of 287 (Sub-sampling rate = .60)
Low-income children in Center Care	205 out of 341 (Sub-sampling rate = .60)
TOTAL Low-income in Care	930 out of 1,550 (Sub-sampling rate = .60)
Non-poor children in Relative Care	283 out of 1413 (Sub-sampling rate = .20)
Non-poor children in Non-relative Care	347 out of 1734 (Sub-sampling rate = .20)
Non-poor children in Center Care	161 out of 806 (Sub-sampling rate = .20)
Total Non-poor children in Care	791 out of 3,953 (Sub-sampling rate = .20)
TOTAL POOR and NON-POOR in Care	1721 out of 5,503 (Sub-sampling rate = .31)

Notes: Estimates of total cases based on NHES 1995 tables, primary care arrangements for one-year olds. Low-income level set at 125% of official poverty level.

Weighting Effect and Effective Sample Size for Point Estimates for the 18-month subsample as a whole: Weighting Effect: 1.2695; Effective sample size: 1356

Additional questions are also contemplated for the 30-month parent questionnaire asking about their additional experiences in nonparental child care, and their knowledge of Early Head Start and Head Start programs in their communities. At 48-months the ACYF subsample will be enhanced to compensate for attrition (mainly due to families leaving poverty) and movement into different child care arrangements. These aspects of the design will be documented in the clearance request for later phases of the ECLS-B.

2.3 Resident Father Questionnaire at 18-months

NICHD is very committed to augmenting the ECLS-B with father data. In addition to their current funding of the 9-month resident father questionnaire, they are vigorously seeking funds to extend data collection from fathers into the second wave. It is anticipated that an 18-month father questionnaire would be nearly identical to the 9-month questionnaire, a self-

administered instrument with telephone followup, averaging 20 minutes in length. The possibility of this enhancement to the ECLS-B Phase 1 design is mentioned here because the likelihood of NICHD obtaining the necessary funding appears to be high. If NICHD succeeds in obtaining funding, we will submit another addendum to this clearance request with more details about the enhancement.

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1.4 Additional Dental/Feeding Questions

NIDCR (the National Institute of Dental and Craniofacial Research) requested that the ECLS-B 9-month parent questionnaire include a question about whether the child is put to bed with a bottle and if so, the content since this behavior is thought to be a primary cause of caries. They also recommended an additional question for the 18-month parent questionnaire regarding added sweeteners. NIDCR has limited evidence from a study of Hispanic populations that parents often add sugar or honey to milk or water in a bottle at bedtime, but would not think to mention this if not explicitly asked. The ECLS-B could provide national prevalence measures about such behaviors and could conceivably provide data for designing public message

interventions to help prevent caries. These questions have been added after T2 (in the 9-month instrument) and M7 (in the 18-month); see the attached insert.

1.5 Additional Father Data at 9-months

In the review of the ECLS-B questionnaires by the NICHD network of experts on children and family issues that was mentioned above, some questions were also raised about the father data. (1) It may be important in predicting future involvement of the father whether paternity was voluntary or was forced by the mother or state. Both SIPP (child support module) and the NLSY97 ask a series of questions about what was done to establish paternity. One category missing in ECLS-B is: Has the biological father been legally identified as the child's father by a blood test or other genetic test? We have added a question to this effect in the 9-month parent questionnaire. (2) The expert panel also recommended adding a short question on the relationship between the biological mother and the non-resident father in the parent questionnaire, to parallel a question in the non-resident father questionnaire. This question has been added after G13. (3) The expert panel recommended that all three instruments (the 9-month parent questionnaire, the resident father questionnaire, and the non-resident father questionnaire) include an item on whether the father is self-employed. This question has been added. See the attached insert sheets for the additional father questions.

1.6 Modifications in Advance Letters and Introduction of Signed Consent Forms

The ECLS-B recently underwent an extensive review by the NCHS Institutional Review Board. The Board has approved the 9- and 18-month protocol, but with some changes in the informed consent procedures. The advance letters to parents and child care providers were revised to more fully incorporate the informed consent elements, and the parent will be asked to sign an informed consent form. Copies of the revised materials are attached.

2. Changes That Are Likely to Occur

This section of the addendum describes 3 changes that have not yet been incorporated in the study design, but are in various stages of development and are viewed as very likely to occur: an oversample of children enrolled in Even Start starting in Wave 2, with funding from the Even Start program in the Department of Education; several major enhancements funded

by the Administration for Children, Youth and Families; and the addition of a resident father questionnaire at 18-months, similar to the 9-month instrument, funded by the National Institute for Child Health and Human Development, the National Institutes of Health.

2.1 Inclusion of an Oversample of Children Enrolled in Even Start

Even Start is a family literacy program intended to break the cycle of poverty by teaching parents the literacy and parenting skills they need to help their children learn to high standards. About 78,000 children and 31,500 families are currently enrolled in the program. About 30% of the children are between 0 and 2 years old; about 41% are in the program for more than one year; and slightly more than half of the programs are rural. Preliminary discussions have been held between NCES and Department of Education staff who are responsible for the Even Start program. There is strong interest in adding several hundred cases to the ECLS-B sample, starting in Wave 2 when the children are 18 months old, and continuing to follow the Even Start children and families throughout the course of the ECLS-B.

The sample would be selected from lists of Even Start enrollees in the ECLS-B primary sampling units. The additional Even Start cases would be given the same data collection treatment as the main ECLS-B sample. The Even Start program staff contemplate awarding a task order shortly to develop an approach for this ECLS-B addition. Children are now eligible for Even Start from birth through age 8. No data would be collected directly from the programs. The Even Start program staff would link the ECLS-B data on children and their families to data on programs in their national program data base. When and if this sample addition to the ECLS-B occurs, another addendum will be issued to this clearance request, informing OMB of the change.

2.2 ACYF Enhancements: Videotaping the NCAST, Questionnaire Additions, and In-person Data Collection from a Subsample of Child Care Providers

NCES has been pursuing a collaboration with the Administration on Children, Youth and Families (ACYF) that includes several additions and enhancements to the ECLS-B: videotaping the NCAST in the 9- and 18-month home visits, and coding the videotapes in a central location; adding 5 minutes of questions to the 18-month, 30-month, and 48-month parent interviews; and conducting observations of a subsample of child care providers at 18- and 48-

months. These changes were the outcome of a design task order that ACYF awarded to Westat; an inter-agency agreement is currently being drafted to document the scope of these changes.

The objectives of these additions are to: (1) enhance information about the types and quality of substitute care received by young children from low-income families in the U.S., and the consequences of differences in care quality for children's development and later academic achievement; (2) enhance information about variations within the population of low-income families, and comparisons between low-income and non-low income families, in the intellectual stimulation and emotional support that young children receive from their parents, and the consequences of these differences for children's development and later achievement; (3) collect information about the recruitment and selection process for Head Start and other center-based preschool programs; and (4) examine the consequences of Head Start participation for later development and achievement, controlling for the child's developmental status prior to Head Start, selection factors that lead different types of low-income families to participate in Head Start at different rates, and variations in program quality.

The original clearance request included the NCAST teaching task, and specified that it would be videotaped. (See Section C, pages C-17 to C23.) The ACYF addition will provide the funding for this videotaping and coding the NCAST as part of the 9-month and 18-month data collection waves.

The additional items for the 18-month parent questionnaire are in development. All parents will receive the items. They will focus on the selection of substitute care arrangements and awareness of the importance for child development of quality care.

A sample of children will be selected for the observational substudy at 18-months based on family income and child care arrangements. Table 3-1 illustrates the subsampling scheme. A total of 1721 completes in child care provider settings are expected.

For those substudy children who are receiving substitute care, the data collectors will visit the care provider, conduct in-person interviews and make observations about structural and process characteristics of care arrangements, quality of care, the relationship between the child and the care provider, and the child's behavior in substitute care. These observations will be done in a variety of child care settings, including center-based and other formal care arrangements as well informal care arrangements. The data collection time in each child care setting will average 140 minutes per child care provider. Additionally, for center-based

arrangements only, we will send the center administrator a self-administered questionnaire to complete (and return during the visit) that will average 10 minutes to complete.

Table 3-1. Subsampling Scheme for In-Person Visits to Child Care Providers at 18 Months

Category	Sub-sampling Rate
Low-income children in Relative Care	553 out of 922 (Sub-sampling rate = .60)
Low-income children in Non-relative Care	172 out of 287 (Sub-sampling rate = .60)
Low-income children in Center Care	205 out of 341 (Sub-sampling rate = .60)
TOTAL Low-income in Care	930 out of 1,550 (Sub-sampling rate = .60)
Non-poor children in Relative Care	283 out of 1413 (Sub-sampling rate = .20)
Non-poor children in Non-relative Care	347 out of 1734 (Sub-sampling rate = .20)
Non-poor children in Center Care	161 out of 806 (Sub-sampling rate = .20)
Total Non-poor children in Care	791 out of 3,953 (Sub-sampling rate = .20)
TOTAL POOR and NON-POOR in Care	1721 out of 5,503 (Sub-sampling rate = .31)

Notes: Estimates of total cases based on NHES 1995 tables, primary care arrangements for one-year olds. Low-income level set at 125% of official poverty level.

Weighting Effect and Effective Sample Size for Point Estimates for the 18-month subsample as a whole: Weighting Effect: 1.2695; Effective sample size: 1356

Additional questions are also contemplated for the 30-month parent questionnaire asking about their additional experiences in nonparental child care, and their knowledge of Early Head Start and Head Start programs in their communities. At 48-months the ACYF subsample will be enhanced to compensate for attrition (mainly due to families leaving poverty) and movement into different child care arrangements. These aspects of the design will be documented in the clearance request for later phases of the ECLS-B.

2.3 Resident Father Questionnaire at 18-months

NICHD is very committed to augmenting the ECLS-B with father data. In addition to their current funding of the 9-month resident father questionnaire, they are vigorously seeking funds to extend data collection from fathers into the second wave. It is anticipated that an 18-month father questionnaire would be nearly identical to the 9-month questionnaire, a self-

administered instrument with telephone followup, averaging 20 minutes in length. The possibility of this enhancement to the ECLS-B Phase 1 design is mentioned here because the likelihood of NICHD obtaining the necessary funding appears to be high. If NICHD succeeds in obtaining funding, we will submit another addendum to this clearance request with more details about the enhancement.

G12. When did you stop living with (CHILD)'s biological father?
ECLS-K

MONTH YEAR

DON'T KNOW 98
 REFUSED 99

IF G1 = 3 (DIVORCED) AND F7 NE 1 (LIVING WITH PARTNER WHO IS NOT
 CHILD'S BIOLOGICAL FATHER), GO TO G13.
 ELSE GO TO G14A.

G13. What month and year did your marriage to (CHILD)'s biological father legally end in divorce?
NEW

MONTH YEAR

DON'T KNOW 98
 REFUSED 99

G14A. Which of the following statements best describes your current relationship with {CHILD}'s
Adapted biological father?
from

Colorado
Paternity

We generally get along pretty well 1
 We don't get along too well 2
 We fight a lot and do not get along well 3
 We avoid seeing each other 4
 DON'T KNOW
 REFUSED

IF G1=1 (MARRIED) OR F3=1 (LIVING WITH A PARTNER), GO TO G14B.
 ELSE, GO TO SECTION H.

G14B. Now, some questions about your (marriage/relationship) with (NAME OF CURRENT
NSC SPOUSE/ PARTNER). Would you say that your (marriage/relationship) is...

Very happy, ... 1
 Fairly happy, or 2
 Not too happy? 3
 DON'T KNOW 98
 REFUSED 99

G15. About how often do you and (NAME OF CURRENT SPOUSE/PARTNER) do the following things? Would you say almost every day, once or twice a week, once or twice a month, or less often?

NSC/DAS

	<u>Almost every day</u>	<u>Once or twice a week</u>	<u>Once or twice a month</u>	<u>Less often</u>	<u>Don't know</u>	<u>Refused</u>
a. Talk to each other about your day?	1	2	3	4	98	99
b. Laugh together?	1	2	3	4	98	99
c. Calmly discuss something?	1	2	3	4	98	99
d. Work together on a project?	1	2	3	4	98	99
e. Talk about things that interest you both?	1	2	3	4	98	99

G16. Couples deal with serious disagreements in different ways. When you have a serious disagreement with your (husband/partner), how often do you:

ECLS-K/
FF

	<u>Often</u>	<u>Some- times</u>	<u>Hardly Ever</u>	<u>Never</u>	<u>Don't know</u>	<u>Refused</u>
a. Just keep your opinions to yourself?	1	2	3	4	98	99
b. Discuss your disagreements calmly?	1	2	3	4	98	99
c. Argue heatedly or shout at each other?	1	2	3	4	98	99
d. End up hitting or throwing things at each other?	1	2	3	4	98	99
e. Reach a compromise?	1	2	3	4	98	99
f. Criticize each other?	1	2	3	4	98	99

G17. Some people are afraid that their spouse or partner will hit them if they argue with (him/her) or do something (he/she) doesn't like. How much would you say you are afraid of this? Would you say...

CTS

Not at all, ...	1
A little, ...	2
Quite a bit, or	3
Very afraid?	4
DON'T KNOW	98
REFUSED	99

O10 How many times did this happen?

NEW

|_|_|
NUMBER OF TIMES

DON'T KNOW
REFUSED

O11 Following any of these times did you talk to your doctor or other medical professional about the fact
NEW that your baby stopped breathing?

YES 1
NO 2
DON'T KNOW
REFUSED

O12 Has your doctor, nurse, or other medical professional ever told you that {CHILD/TWIN} has
NEW asthma?

YES 1
NO 2 (O17)
DON'T KNOW (O17)
REFUSED (O17)

O13 OMITTED.

O14 Was {CHILD/TWIN} first treated for this problem in the last 3 months?

NEW

YES 1
NO 2
DON'T KNOW
REFUSED

HELP AVAILABLE

O15 How was {CHILD/TWIN}'s most recent episode of asthma treated by your doctor, nurse, or other
NEW medical professional?

CODE ALL THAT APPLY.

INHALER/NEBULIZER	1 (O16)
NO TREATMENT/WATCH AND WAIT	2 (O16)
ANTIBIOTICS.....	3 (O16)
OVER-THE-COUNTER MEDICATION.....	4 (O16)
SPECIFY	
OTHER (SPECIFY).....	91 (O16)
DON'T KNOW	(O16)
REFUSED	(O16)

O16 Has {CHILD/TWIN} ever been taken to an emergency room or hospitalized for at least one night
NEW because of asthma?

YES	1
NO	2
DON'T KNOW	
REFUSED	

O17 Has your doctor, nurse, or other medical professional ever told you that {CHILD/TWIN} had a
NEW respiratory illness, such as bronchitis, pneumonia, or bronchiolitis?

YES	1
NO	2 (O21)
DON'T KNOW	(O21)
REFUSED	(O21)

O19 How was {CHILD/TWIN}'s most recent bout of bronchitis, pneumonia, or bronchiolitis treated by
NEW your doctor, nurse, or other medical professional?

CODE ALL THAT APPLY.

NO TREATMENT/WATCH AND WAIT	1 (O20)
ANTIBIOTICS.....	2 (O20)
OVER-THE-COUNTER MEDICATION.....	3 (O20)
SPECIFY	
OTHER (SPECIFY).....	91 (O20)
DON'T KNOW	(O20)
REFUSED	(O20)

O20 Has {CHILD/TWIN} ever been taken to an emergency room or hospitalized for at least one night
NEW because of bronchitis, pneumonia, or bronchiolitis?

YES 1
NO 2
DON'T KNOW
REFUSED

O21 Has a doctor, nurse, or other medical professional ever told you that {CHILD/TWIN} had an ear
NEW infection?

YES 1
NO 2 (O26)
DON'T KNOW (O26)
REFUSED (O26)

O22 How many times?
NEW

|_|_|
NUMBER OF TIMES

DON'T KNOW
REFUSED

O23 How old was {CHILD/TWIN} when {he/she} had the first ear infection?
NEW

|_|_|
MONTHS

OR

|_|_|
WEEKS

DON'T KNOW (O23BX)
REFUSED (O23BX)

O23BX
IF $O22 \geq 1$ (CHILD HAS HAD MORE THAN ONE EAR INFECTION
DIAGNOSED BY A DOCTOR, NURSE, OR OTHER MEDICAL
PROFESSIONAL), GO TO O24.
ELSE, GO TO O25.

O24 NEW How was {CHILD/TWIN}'s {first/second/third} ear infection treated by your doctor, nurse, or other medical professional?

CODE ALL THAT APPLY.

NO TREATMENT/WATCH AND WAIT	1 (O24BX)
DECONGESTANTS	2 (O24BX)
ANTIBIOTICS	3 (O24BX)
WITH EAR TUBES	4 (O24BX)
OVER-THE-COUNTER MEDICATION	5 (O24BX)
SPECIFY	
OTHER (SPECIFY)	91 (O24BX)
DON'T KNOW	(O24BX)
REFUSED	(O24BX)

O24BX

IF O22 $\geq$ 2, GO TO O24 FOR SECOND/THIRD EAR INFECTION.
ELSE GO TO O25.

O25 NMIHS How many other times do you think {CHILD/TWIN} has had an ear infection or earache for which you did not seek medical treatment?

NEVER	0
ONCE	1
TWICE	2
3-5 TIMES	3
6 OR MORE TIMES	4
DON'T KNOW	
REFUSED	

HELP AVAILABLE

O26 NEW Has your doctor, nurse, or other medical professional ever told you that {CHILD/TWIN} has a severe gastrointestinal illness, as indicated by frequent vomiting, diarrhea or dehydration?

YES	1
NO	2 (O30)
DON'T KNOW	(O30)
REFUSED	(O30)

O28 How was {CHILD/TWIN}'s most recent severe gastrointestinal illness treated by your doctor, nurse,
NEW or other medical professional?

CODE ALL THAT APPLY.

NO TREATMENT/WATCH AND WAIT	1 (O29)
ANTIBIOTICS.....	2 (O29)
OVER-THE-COUNTER MEDICATION.....	3 (O29)
SPECIFY	
OTHER (SPECIFY).....	91 (O29)
DON'T KNOW	(O29)
REFUSED	(O29)

O29 Has {CHILD/TWIN} ever been hospitalized for at least one night because of a severe
NEW gastrointestinal illness?

YES	1
NO	2
DON'T KNOW	
REFUSED	

9-MONTH PARENT INTERVIEW **SECTION T - FAMILY ROUTINES**

T1 First, when you put {CHILD/TWIN} to bed, is {he/she} usually awake or asleep?

NEW

AWAKE	1
ASLEEP	2
DON'T KNOW	
REFUSED	

T2 Do you usually put {CHILD/TWIN} to bed with a bottle?

NEW

YES	1
NO	2
DON'T KNOW	
REFUSED	

T2A Does the bottle usually contain...

NEW

Juice, ...	1 (T3)
Milk, ...	2 (T3)
Water, or	3 (T3)
Something else?	91 (T3)
DON'T KNOW	(T3)
REFUSED	(T3)

T3 When {CHILD/TWIN} was about 3 months old, in what position did you usually put {him/her} to sleep?

NCHS

LYING ON STOMACH WITH FACE TO SIDE	1 (T4)
LYING ON STOMACH WITH FACE DOWN	2 (T4)
LYING ON BACK	3 (T4)
LYING ON SIDE	4 (T4)
PROPPED IN A SITTING POSITION	5 (T4)
OTHER (SPECIFY)	91 (T4)
DON'T KNOW	(T4)
REFUSED	(T4)

T4 When {CHILD/TWIN} was newborn, in what position did you put {him/her} to sleep?

NCHS

LYING ON STOMACH WITH FACE TO SIDE	1 (T4BX)
LYING ON STOMACH WITH FACE DOWN	2 (T4BX)
LYING ON BACK	3 (T4BX)
LYING ON SIDE	4 (T4BX)
PROPPED IN A SITTING POSITION	5 (T4BX)
OTHER (SPECIFY)	91 (T4BX)
DON'T KNOW	(T4BX)
REFUSED	(T4BX)

T4BX
**IF RESPONDENT'S SPOUSE/PARTNER IS PRESENT IN
HOUSEHOLD, GO TO T5; ELSE GO TO SECTION U.**

T5. The next questions are about the types of things [(CHILD)'s father/your husband/your partner] may do
EHS with (CHILD). In the past month, how often did [(CHILD)'s father/your husband/your partner] do the
following things with (him/her)? Was it more than once a day, about once a day, a few times a week,
a few times a month, rarely, or not at all? How often did he ...
PROBE: Rarely means once a month or less

**SHOW
CARD
T5**

	<u>MORE THAN ONCE A DAY</u>	<u>ABOUT ONCE A DAY</u>	<u>A FEW TIMES A WEEK</u>	<u>A FEW TIMES A MONTH</u>	<u>RARELY</u>	<u>NOT AT ALL</u>	<u>DON'T KNOW</u>	<u>REFUSED</u>	<u>N/A</u>
a. Change (CHILD)'s diaper?	1	2	3	4	5	6	98	99	00
b. Feed (CHILD) or give (him/her) a bottle?	1	2	3	4	5	6	98	99	00
c. Play peek-a-boo with (CHILD)? ...	1	2	3	4	5	6	98	99	00
d. Read or tell stories to (CHILD) or look at picture books together?	1	2	3	4	5	6	98	99	00
e. Hold (him/her)?	1	2	3	4	5	6	98	99	00
f. Do things like tickle (CHILD), blow on (his/her) belly, or move (his/her) arms and legs around in a playful way?	1	2	3	4	5	6	98	99	00
g. Sing songs or nursery rhymes to (CHILD)?	1	2	3	4	5	6	98	99	00
h. Put (CHILD) to sleep?	1	2	3	4	5	6	98	99	00
i. Wash or bathe (CHILD)?	1	2	3	4	5	6	98	99	00
j. Take (CHILD) outside for a walk or to play in the yard, a park or playground?	1	2	3	4	5	6	98	99	00
k. Take (CHILD) to or from the sitter or day care center?	1	2	3	4	5	6	98	99	00

T6. When the following things happen or need to be done, how often is [(CHILD)'s father/your husband/your partner] the one who does them? Is it always, often, sometimes, rarely, never do them?

SHOW
CARD
T6

	<u>ALWAYS</u>	<u>OFTEN</u>	<u>SOME- TIMES</u>	<u>RARELY</u>	<u>NEVER</u>	<u>DON'T KNOW</u>	<u>REFUSED</u>	<u>N/A</u>
a. Get up with (CHILD) when (he/she) wakes up during the night?.....	1	2	3	4	5	98	99	00
b. Soothe (CHILD) when (he/she) is upset?	1	2	3	4	5	98	99	00
c. Take (CHILD) to the doctor?	1	2	3	4	5	98	99	00
d. Stay home to care for (CHILD) when (he/she) is ill?.....	1	2	3	4	5	98	99	00

U20A Is {CHILD}'s father self-employed?
NEW

YES 1
NO 2
DON'T KNOW.....
REFUSED.....

U20B As part of his {main} job, does {CHILD}'s father do any of his work at home?
CPS PROBE: This means he has a formal arrangement with his employer to work at home, not just taking work home from the job.

YES 1
NO 2
DON'T KNOW.....
REFUSED.....

U21 For whom does he work?
ECLS-K PROBE FOR NAME OF THE COMPANY, BUSINESS, ORGANIZATION, OR OTHER EMPLOYER. IF MORE THAN ONE CURRENT JOB, ASK ABOUT THE ONE AT WHICH THE FATHER SPENDS THE MOST TIME.

NAME OF COMPANY

DON'T KNOW.....
REFUSED.....

U22 What kind of business or industry is this?
ECLS-K PROBE: What do they make or do? For example: TV and radio manufacturing, retail shoe store, state labor department, farming.

TYPE OF INDUSTRY

DON'T KNOW.....
REFUSED.....

U23 What kind of work is he doing?
ECLS-K PROBE: For example: electrical engineer, stock clerk, typist, farmer.

JOB TITLE

DON'T KNOW.....
REFUSED.....

U24 What are his most important activities or duties on this job? What does he actually do at this job?
ECLS-K PROBE: For example: typing, keeping account books, filing, selling cars, operating a printing press, finishing concrete.

IMPORTANT DUTY

DON'T KNOW.....
REFUSED.....

GO TO BOX BEFORE U37

U41 Did {CHILD}'s father ever sign the application for {CHILD}'s birth certificate or sign a statement that
EHS legally says he is {CHILD}'s father?

YES 1
NO 2
DON'T KNOW
REFUSED

U41BX

IF MOTHER R'S SPOUSE/PARTNER IS CHILD'S BIOLOGICAL FATHER OR MOTHER
EVER MARRIED TO CHILD'S BIOLOGICAL FATHER, GO TO SECTION V -
MOTHER'S EDUCATION, EMPLOYMENT, AND INCOME;
ELSE GO TO U42.

U42 Did you have to go to court to establish that he was {CHILD}'s legal father?
EHS

YES 1
NO 2
DON'T KNOW
REFUSED

U41A Was {CHILD}'s father ever legally identified by a blood test or other genetic test?
SIPP

YES 1
NO 2
DON'T KNOW
REFUSED

U42BX

IF CHILD'S BIOLOGICAL FATHER LIVES IN THE HOUSEHOLD, GO TO
SECTION V-MOTHER'S EDUCATION, EMPLOYMENT, AND INCOME.
ELSE IF U40 = 1 OR 2 (HAS LEGAL OR INFORMAL SUPPORT
ARRANGEMENT), GO TO U43;
ELSE GO TO SECTION V-MOTHER'S EDUCATION, EMPLOYMENT, AND
INCOME.

U43 How much per month is he supposed to pay for {CHILD}'s support?
EHS

PROBE: Your best estimate will be fine.

\$[] , [] [] [] PER MONTH

DON'T KNOW
REFUSED

U44
NEW

How much per month do you usually get for {CHILD}'s support?

PROBE: Your best estimate will be fine.

\$|_|, |_|_|_| PER MONTH

DON'T KNOW

REFUSED

X8B Would it amount to \$150,000 or more?
PSID

YES 1 (X9)
NO 2 (X9)
DON'T KNOW (X9)
REFUSED (X9)

X8C Would it amount to \$5,000 or more?
PSID

YES 1
NO 2
DON'T KNOW
REFUSED

X9 Do you have a mortgage on this property?
PSID

YES 1 (X10)
NO 2 (X11)
DON'T KNOW (X10A)
REFUSED (X10A)

X10 About how much is the remaining principal on this mortgage?
PSID

PROBE: Remaining principle is the amount still owed on the mortgage.

\$|_|_|_|_|_|_|_|_|_|_|
PRINCIPAL

DON'T KNOW (X10A)
REFUSED (X10A)

X10A Would it amount to \$50,000 or more?
PSID

YES 1 (X10B)
NO 2 (X10C)
DON'T KNOW (X11)
REFUSED (X11)

X10B Would it amount to \$150,000 or more?
PSID

YES 1 (X11)
NO 2 (X11)
DON'T KNOW (X11)
REFUSED (X11)

X10C. Would it amount to \$5,000 or more?
PSID

YES 1
NO 2
DON'T KNOW
REFUSED

X11. Do you {or anyone in your household} own a car or truck?
PSID

YES 1
NO 2
DON'T KNOW
REFUSED

X12. Do you or anyone in your household have any shares of stock in publicly held corporations,
PSID mutual funds, or investment trusts, including stocks in IRAs?

YES 1
NO 2
DON'T KNOW
REFUSED

X13. Do you or anyone in your household have any money in checking or savings accounts, money
PSID market funds, certificates of deposit, or government savings bonds, or Treasury bills, including
IRAs?

YES 1
NO 2
DON'T KNOW
REFUSED

X14BX

IF TWIN IN HOUSEHOLD AND TWIN INFORMATION NOT YET
COLLECTED, GO TO SECTION B - FEEDING AND
DEVELOPMENT;
ELSE GO TO SECTION Z - CLOSING STATEMENT AND TRACING
INFORMATION.

M5. Has (CHILD) started primarily feeding (himself/herself)?

USDA

YES	1
NO	2
DON'T KNOW	98
REFUSED	99

M6. Does (CHILD) use a bottle?

USDA

YES	1 (M7)
NO	2 (M8)
DON'T KNOW	98 (M8)
REFUSED	99 (M8)

M7. Does the bottle usually contain...

USDA

	<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>	<u>REFUSED</u>
a. Juice?	1	2	98	99
b. Milk?	1	2	98	99
c. Water?	1	2	98	99
d. Something else?	1	2	98	99
SPECIFY _____				

M8A Do you usually put (CHILD) to bed with a bottle?

USDA

YES	1 (M9)
NO	2 (M10)
DON'T KNOW	98 (M10)
REFUSED	99 (M10)

M8B Does the bottle usually contain...

USDA

	<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>	<u>REFUSED</u>
a. Juice?	1	2	98	99
b. Milk?	1	2	98	99
c. Water?	1	2	98	99
d. Something else?	1	2	98	99
SPECIFY _____				

M8C On average, how many ounces of juice does (CHILD) drink a day?
 USDA PROBE: Don't include water if you dilute (CHILD)'s juice.

|_|_|_| oz.

DON'T KNOW..... 998
 REFUSED..... 999

M9 Would you say (CHILD)'s health is...
 NHIS

Excellent..... 1
 Very good..... 2
 Good, ... 3
 Fair, or 4
 Poor?..... 5
 DON'T KNOW..... 98
 REFUSED..... 99

Dear [PARENT'S NAME]:

I am pleased to invite you and your baby to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B). It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. This is the first national study that looks at the development and learning experiences of infants and young children. The goal is to provide information to help understand how children's early experiences affect their learning and development.

Your child was selected to join 15,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. The growth and development of the children who participate will be followed from infancy through the end of the first grade, and we will contact you to ask for your participation when your child is about 9-, 18-, 30-, 48-, 60- and 72-months of age. We plan to come back 5 more times over the next 6 years, and we will need to spend about the same amount of time with you and your child on each visit. It is important that each and every child participate so that the study will describe the early experiences of all babies in the United States accurately. However, your participation and the participation of your child are completely voluntary and you may decline to participate in the study. If you choose to participate you are free to leave the study at any time or to decline to answer any question. There are no negative consequences to you should you choose not to participate." **ALL INFORMATION COLLECTED DURING THIS STUDY IS CONFIDENTIAL.** No information about an individual child or parent will be reported in any way. No names will be released to anyone.

Because parents play a big part in their children's early growth, we want to ask you some questions about you, your family, your child's health and development and your child's experiences in child care. A trained ECLS-B staff member from Westat will be calling on you soon for an interview. The interviewer will ask you questions about your child's health, behavior and development. The interviewer will also ask you questions about yourself, your health and your family's health, your family routines, and stressful life events. We will also observe your child's play and learning, for example learning to ring a hand bell or swing a ring from a string. The entire interview will take less than an hour and a half.

Your participation is very important to the success of the ECLS-B. The information you give us will improve the quality of education and childcare programs for all children. We hope that you decide to join us in this exciting study. After completing the interview, we will give you \$20/15 and a gift for your child} in appreciation for your participation in the study.

Thank you for your time. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

BE/RGR

ECLS-B information is collected under Authority of the following: Section 308(d) of the Public Health Service Act (42 USC 242m) and the Privacy Act of 1974 (5 USC 552a), which state that we are forbidden to release any information that identifies you or your family to anyone, for any purpose, without your consent. Under Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382, NCES is authorized to collect information about infants and children. No information collected under this Act may be used for any purpose other than the purpose for which it was supplied. This Act, which expands upon the Privacy Act of 1974, requires strict procedures to protect the privacy of individual respondents. Public response burden: time for this collection of information is estimated to average 90 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Education, Washington, DC 20202-4651. The valid OMB control number for this information is xxxx-xxxx.

DRAFT

9-Month Parent Consent Form – 2nd Draft

Early Childhood Longitudinal Study, Birth Cohort 2000

You have been chosen to take part in the Early Childhood Longitudinal Study, Birth Cohort 2000. The ECLS-B is conducted by the National Center for Education Statistics (NCES), the National Center for Health Statistics (NCHS), and a number of other Federal agencies. The study will tell us about the health, growth, and early childhood experiences of children in the United States. It combines an interview with a direct assessment of your child's abilities. At your home, our interviewer will ask some questions. They will be about your child's health, behavior, and development. The interviewer will also ask you questions about yourself, your health and your family's health, your family routines, and stressful life events. We will also observe your child's play and learning, for example learning to ring a hand bell or swing a ring from a string. The interviewer will also ask to videotape a learning activity between you and your child and will ask to measure your child's height and weight. The entire interview will take less than 1½ hours of your time. Soon after this interview, you may be contacted by someone from Westat responsible for ensuring the quality of the interview. In addition, other individuals may be contacted for information about how to contact you if you cannot be located for the next interview. We will contact you again for further interviews, when your child is 18-, 30-, and 48-months-old, and again when your child is in kindergarten and first grade. Each of those interviews will take about 1½ hours.

We will use the data collected in this survey to study many health and growth issues. The goal of the study is to provide information to help understand how children's early experiences affect their learning and development. We will use information only for research and statistical reports. All health and development data we collect in ECLS-B will be kept strictly private. We gather and protect information in keeping with the requirements of Federal Law: The Public Health Service Act (42 USC 242k) authorizes collection and Section 308(d) of that law (42 USC 242m) and the Privacy Act of 1974 (5 USC 552a) prohibit us from giving out information that identifies you or your family without your consent. Under Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382, NCES is authorized to collect information about infants and children. No information collected under this Act may be used for any purpose other than the purpose for which it was supplied. This Act, which expands upon the Privacy Act of 1974, requires strict procedures to protect the privacy of individual respondents.

You may participate in the survey or not. That is your choice. No penalties or loss of benefits will come from refusing to take part. If you choose to take part, you may choose not to answer any question.

If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

I have read the information above. I freely choose to participate in the ECLS-B study. I understand that data about me, my child, and my family will be released only as described.

NAME OF CHILD: _____ ID _____

Signature of parent/guardian

Date

Signature of staff member

Date

Print name of respondent

First

Middle

Last

Public response burden: time for this collection of information is estimated to average 90 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Education, Washington, DC 20202-4651. The valid OMB control number for this information is xxxx-xxxx.

DRAFT

Parent Consent Form for Videotaping the NCATS

Early Childhood Longitudinal Study, Birth Cohort 2000

The entire videotaping of the Nursing Child Assessment Teaching Scale (NCATS) will take less than 5 minutes of your time.

The information collected on this videotape will be used only for research and statistical report, and will be kept strictly private. We gather and protect information in keeping with the requirements of Federal Law: The Public Health Service Act (42 USC 242k) authorizes collection and Section 308(d) of that law (42 USC 242m) and the Privacy Act of 1974 (S USC 552a) prohibit us from giving out information that identifies you or your family without your consent. Under Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382, NCES is authorized to collect information about infants and children. No information collected under this Act may be used for any purpose other than the purpose for which it was supplied. This Act, which expands upon the Privacy Act of 1974, requires strict procedures to protect the privacy of individual respondents.

We will destroy the videotape of you and your child when the study is completed.

You may agree to allow us to videotape you and your child or not. That is your choice. No penalties or loss of benefits will come from refusing to be videotaped.

To discuss any aspect of the survey, you can make a toll-free call to Brad Edwards at 1-800-937-8281, Monday-Friday, 9 a.m.-6 p.m. EST. If you have any questions about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

I have read the information above. I freely choose to allow myself and my child to be videotaped for the ECLS-B study. I understand that videotape about me and my child will be released only as described.

NAME OF CHILD: _____ ID _____

Signature of parent/guardian Date

Signature of staff member Date

Print name of respondent

First Middle Last

Public response burden: Time for this collection of information is estimated to average 5 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Education, Washington, DC 20202-4651. The valid OMB control number for this information is xxxx-xxxx.

Dear _____

I am pleased to invite you to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study – Birth Cohort 2000 (ECLS-B). It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention, and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. Your child, _____, and _____ have already agreed to participate. Now we would like your views about being a father and to learn more about you and your family. Very little is known about fathers of young children. Thus, you are a very important part of this study. Because this is a scientific study, we cannot replace your answers with anyone else's. Your participation is completely voluntary, but we really need your help.

Your child was selected at random to join 15,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. It is important that each and every child participate so that the study accurately describes the early experiences of all babies in the United States. The goal is to provide information to help understand how children's early experiences affect their learning and development. This is the first national study that looks at the early learning experiences of infants.

Your participation is very important to the success of the Early Childhood Longitudinal Study, Birth Cohort. The information you give us can help resolve many questions regarding fathers and young children. We hope that you decide to participate in this exciting study. We are giving you \$10/15 in appreciation for your participation in completing and returning this questionnaire. You may refuse to answer any question that you choose. However, your answers are all very important to us, and we hope that you will answer each question. There are no negative consequences to you should you choose not to participate.

The questions in this booklet are about you, _____, and _____. Whenever the terms **the child** or **your child** are used, we mean _____. You will be asked about things you do with your child, your attitudes about being a father, your family life, your health, your background, and stressful events in your life, including your experiences with the law or legal system. All information you give us will be kept completely confidential and private, as required by law. No information about an individual child or parent will be reported in any way. No names will be released. The questionnaire should take about 20 minutes to complete. When you are finished, please seal it in the postage-paid envelope provided, and mail it back to us.

Thank you for your time. Researchers from Westat are directing the study. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

BE/TLR

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Dear _____

I am pleased to invite you to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study – Birth Cohort 2000 (ECLS-B). It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention, and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. Your child, _____, and _____ have already agreed to participate. Now we would like your views about being a father and to learn more about you and your family. Very little is known about fathers of young children. Thus, you are a very important part of this study. Because this is a scientific study, we cannot replace your answers with anyone else's. Your participation is completely voluntary, but we really need your help.

Your child was selected at random to join 15,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. It is important that each and every child participate so that the study accurately describes the early experiences of all babies in the United States. The goal is to provide information to help understand how children's early experiences affect their learning and development. This is the first national study that looks at the early learning experiences of infants.

Your participation is very important to the success of the Early Childhood Longitudinal Study, Birth Cohort. The information you give us can help resolve many questions regarding fathers and young children. We hope that you decide to participate in this exciting study. After completing and returning the questionnaire, we will send you \$15/10 in appreciation for your participation. You may refuse to answer any question that you choose. However, your answers are all very important to us, and we hope that you will answer each question. There are no negative consequences to you should you choose not to participate.

The questions in this booklet are about you, _____, and _____. Whenever the terms **the child** or **your child** are used, we mean _____. You will be asked about things you do with your child, your attitudes about being a father, your family life, your health, your background, and stressful events in your life, including your experiences with the law or legal system. All information you give us will be kept completely confidential and private, as required by law. No information about an individual child or parent will be reported in any way. No names will be released. The questionnaire should take about 20 minutes to complete. When you are finished, please seal it in the postage-paid envelope provided, and mail it back to us.

Thank you for your time. Researchers from Westat are directing the study. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

BE/TSR

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Dear [PARENT'S NAME]:

I am pleased to invite you to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B). It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. This is the first national study that looks at the development and learning experiences of infants and young children. The goal is to provide information to help understand how children's early experiences affect their learning and development.

[MAIN PARENT'S NAME] and [CHILD'S FIRST AND LAST NAME] are taking part in this study. [MAIN PARENT'S NAME] said that you were [CHILD]'s father and told us how to contact you. [CHILD] was selected at random to join 15,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. The growth and development of [CHILD] and the other children who participate will be followed from infancy through the end of first grade. [CHILD] and [MAIN PARENT'S INTERVIEW] have already been interviewed once. We will be contacting them again when [CHILD] is about 18-, 30-, 48-, and 60-months-old. Current plans call for interviewing fathers (both those who live with their children and those who live apart from their children) only once. We are seeking funds, however, to interview them one or two more times, as their children get older.

You are an important part of this study. There has been increased public attention to the role that nonresident fathers play in their children's lives. However, there is very little information about such fathers, especially from the fathers themselves. Because this is a scientific study, we cannot replace your answers with anyone else's. Your participation is completely voluntary, but we really need your help. The information you give us can help resolve many questions regarding fathers and young children.

A trained ECLS-B staff member from Westat will be calling on you soon for an interview. The interviewer will ask you about things you do with [CHILD], your attitudes about being a father, and things about yourself. The information you provide will be kept completely confidential and private, as required by law. No information about an individual child or parent will be reported in any way. No names will be released. The interview should take about 20 minutes to complete. We hope that you decide to participate in this exciting study. After completing the interview, we will give you \$20 in appreciation for your participation in the study. You may refuse to answer any question that you choose. However, your answers are all very important to us, and we hope that you will answer each question. There are no negative consequences to you should you choose not to participate.

Thank you for your time. Researchers from Westat are directing the study. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

BE/NRL

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Dear [PARENT'S NAME]:

I am pleased to invite you to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B). It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. This is the first national study that looks at the development and learning experiences of infants and young children. The goal is to provide information to help understand how children's early experiences affect their learning and development.

[MAIN PARENT'S NAME] and [CHILD'S FIRST AND LAST NAME] are taking part in this study. [MAIN PARENT'S NAME] said that you were [CHILD]'s father and told us how to contact you. [CHILD] was selected at random to join 15,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. The growth and development of [CHILD] and the other children who participate will be followed from infancy through the end of first grade. [CHILD] and [MAIN PARENT'S INTERVIEW] have already been interviewed once. We will be contacting them again when [CHILD] is about 18-, 30-, 48-, and 60-months-old. Current plans call for interviewing fathers (both those who live with their children and those who live apart from their children) only once. We are seeking funds, however, to interview them one or two more times, as their children get older.

You are an important part of this study. There has been increased public attention to the role that nonresident fathers play in their children's lives. However, there is very little information about such fathers, especially from the fathers themselves. Because this is a scientific study, we cannot replace your answers with anyone else's. Your participation is completely voluntary, but we really need your help. The information you give us can help resolve many questions regarding fathers and young children.

A trained ECLS-B staff member from Westat will be calling on you soon for an interview. The interviewer will ask you about things you do with [CHILD] and things about yourself. The information you provide will be kept completely confidential and private, as required by law. No information about an individual child or parent will be reported in any way. No names will be released. The interview should take about 10 minutes to complete. We hope that you decide to participate in this exciting study. After completing the interview, we will give you \$20 in appreciation for your participation in the study. You may refuse to answer any question that you choose. However, your answers are all very important to us, and we hope that you will answer each question. There are no negative consequences to you should you choose not to participate.

Thank you for your time. Researchers from Westat are directing the study. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

BE/NRS

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18-MONTH PARENT LETTER – 2nd DRAFT

Dear [PARENT'S NAME]:

Once again I am pleased to invite you and your toddler to participate in the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B). As you may remember, we visited you about 9 months ago as a part of a study about the early learning experiences of children. This study is an ongoing study sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention, and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. This is the first national study that looks at the development and learning experiences of infants and young children. The goal is to provide information to help understand how children's early experiences affect their learning and development.

Thank you for participating in our study when your child was 9-months-old. Now that your child is about 18-months-old, we would like you and your child to participate again. Your child, along with about 15,000 other children from all over the country, was selected to represent the experiences of the more than 4 million children in the United States. It is important that each and every child participate so that the study will describe the early experiences of all toddlers in the United States accurately. However, your participation and the participation of your child are completely voluntary, and you may decline to participate in the study. If you choose to participate, you are free to leave the study at any time or to decline to answer any question. There are no negative consequences to you should you choose not to participate.

Our 18-month visit will be similar to the 9-month visit. A trained ECLS-B staff member from Westat will be calling on you soon for an interview. The interviewer will ask you questions about your child's health, behavior and development. The interviewer will also ask you questions about yourself, your health and your family's health, your family routines, and your child care experiences. We will also observe your child's play and learning, for example learning to build a tower of blocks or complete a puzzle. The entire interview will take less than an hour and a half. **ALL INFORMATION COLLECTED DURING THIS STUDY IS CONFIDENTIAL.** No information about an individual child or parent will be reported in any way. No names will be released to anyone.

Your continued participation is very important to the success of the ECLS-B. The information you give us will improve the quality of education and child care programs for all children. We hope that you decide to participate again in this exciting study. After completing the interview, we will give you \$20 in appreciation for your participation in the study.

Thank you for your time. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

ECLS-B information is collected under authority of the following: Section 308(d) of the Public Health Service Act (42 USC 242m) and the Privacy Act of 1974 (5 USC 552a), which state that we are forbidden to release any information that identifies you or your family to anyone, for any purpose, without your consent. Under Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382, NCES is authorized to collect information about infants and children. No information collected under this Act may be used for any purpose other than the purpose for which it was supplied. This Act, which expands upon the Privacy Act of 1974, requires strict procedures to protect the privacy of individual respondents. Public response burden: time for this collection of information is estimated to average 90 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Education, Washington, DC 20202-4651. The valid OMB control number for this information is xxxx-xxxx.

CENTER DIRECTOR'S LETTER

Dear Center Director:

I am pleased to invite your center to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B) and is the first national study that looks at the early learning experiences of infants and toddlers. It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. The goal of the study is to provide information to help understand how children's early experiences affect their learning and development.

[CHILD'S NAME] was selected at random to join 14,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. It is important that we collect information on each and every child selected so that the study accurately describes the early experiences of all babies in the United States.

Because child care plays a big part in children's early growth, we want to ask you and [CHILD'S primary caregiver]) some questions about the care your center provides to [CHILD]. [CHILD'S PARENT] has agreed to [CHILD'S] participation and has given us written consent to contact your center and ask you to participate in this study. A trained ECLS-B staff member from Westat will be calling you soon to collect this information in a telephone interview. The interviewer will ask you questions about your center's facilities and practices. Your part of the interview will take about 5 minutes. We would also like your permission to ask [PRIMARY CAREGIVER] questions about him- or herself, such as his or her background, marital status, and income level, and his or her beliefs about children. We will also ask [PRIMARY CAREGIVER] questions about [CHILD]'s development and about [PRIMARY CAREGIVER]'s relationship with [CHILD]. The entire interview should take about 30 minutes. We hope that you decide to participate in this exciting study. After completing the interview, we will send you \$20 in appreciation for your participation in the study.

Your participation is very important to the success of the ECLS-B. The information you give us can improve the quality of education and child care programs for all children. However, your participation is completely voluntary and you may decline to participate in the study. If you choose to participate you are free to leave the study at any time or to decline to answer any question. No information that you provide will be revealed to [CHILD'S] parents or to [PRIMARY CAREGIVER].

ALL INFORMATION COLLECTED DURING THE STUDY IS CONFIDENTIAL. No information about an individual child care provider or child care center will be reported in any way. No names will be released to anyone. No information that identifies (you/your center) will be released to the public in any form. Because all information is confidential, there are no legal consequences that can result from your decision to participate or to decline participation and your licensure will not be affected if you decide to participate or to decline participation.

Thank you for your time. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

ECLS-B information is collected under Authority of the following: Section 308(d) of the Public Health Service Act (42 USC 242m) and the Privacy Act of 1974 (5 USC 552a), which state that we are forbidden to release any information that identifies you or your family to anyone, for any purpose, without your consent. Under Section 404(a), of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382, NCES is authorized to collect information about infants and children. No information collected under this Act may be used for any purpose other than the purpose for which it was supplied. This Act, which expands upon the Privacy Act of 1974, requires strict procedures to protect the privacy of individual respondents. Public response burden: time for this collection of information is estimated to average 5 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Education, Washington, DC 20202-4651. The valid OMB control number for this information is xxxx-xxxx.

CHILD CARE PROVIDER'S LETTER

Dear [CAREGIVER'S NAME]:

I am pleased to invite you to participate in a new and exciting study of children's early learning experiences. This study is called the Early Childhood Longitudinal Study, Birth Cohort 2000 (ECLS-B) and is the first national study that looks at the early learning experiences of infants and toddlers. It is sponsored by the National Center for Education Statistics (NCES) of the U.S. Department of Education, the National Center for Health Statistics of the Centers for Disease Control and Prevention and many other Federal agencies with responsibility for the health, education, and well-being of the Nation's children. The goal of the study is to provide information to help understand how children's early experiences affect their learning and development.

[CHILD'S NAME] was selected at random to join 14,000 other babies from all over the country to take part in this important national study. These children were selected to represent the experiences of the more than 4 million children born in the United States this year. It is important that we collect information on each and every child selected so that the study accurately describes the early experiences of all babies in the United States.

Because child care plays a big part in children's early growth, we want to ask you some questions about the care you provide to [CHILD]. (As [CHILD'S Parent] explained to you on the telephone) [CHILD'S PARENT] has agreed to [CHILD'S] participation and has given us written consent to contact you and ask you to participate in this study. A trained ECLS-B staff member from Westat will be calling you soon to collect this information in a telephone interview. The interviewer will ask you questions about your center's facilities and practices, [CHILD'S] development, your relationship with [CHILD], and the child care services you provide. We will also ask you questions about yourself, such as your background, marital status, and income level, and your beliefs about children. The entire interview should take about 30 minutes. We hope that you decide to participate in this exciting study. After completing the interview, we will send you \$20 in appreciation for your participation in the study.

Your participation is very important to the success of the ECLS-B. The information you give us can improve the quality of education and child care programs for all children. However, your participation is completely voluntary and you may decline to participate in the study. If you choose to participate you are free to leave the study at any time or to decline to answer any question. No information that you provide will be revealed to [CHILD'S] parents (or to your Center Director).

ALL INFORMATION COLLECTED DURING THE STUDY IS CONFIDENTIAL. No information about an individual child care provider or child care center will be reported in any way. No names will be released to anyone. No information that identifies (you/your center) will be released to the public in any form. Because all information is confidential, there are no legal consequences that can result from your decision to participate or to decline participation and your licensure will not be affected if you decide to participate or to decline participation.

Thank you for your time. If you have any questions about the study, please call Brad Edwards at 1-800-937-8281. If you have any questions or concerns about your rights as a survey participant, call Sam Peng at 1-800-672-2289.

Sincerely yours,

Brad Edwards
Project Director

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