



## 3-9 Month Old Example Data Dictionary of ProPHDS Survey Dataset

VARIABLE NAME	Question in the Practice Level PHDS	Response Codes
STUDY ID	Study, unique identifier	
SURVDISP	Survey disposition	<ol> <li>Survey received</li> <li>Survey not received</li> <li>Survey returned due to bad address</li> <li>Survey returned but parent refused to answer the survey. Survey completely blank.</li> <li>Survey returned-Child not in age range and parent thought it was for too young a child.</li> </ol>
SURVDATE	Date survey was received	YYYY-MM-DD
SURVRAGE	Age of the child, in months, at the time the survey was received.	Age of child in months.
SURVSTEP	Stage of survey administration during which survey was received.	<ol> <li>After the 1st Mailing</li> <li>After the Post Card Reminder</li> <li>After the 2nd Mailing</li> <li>After the Phone Call Reminder</li> <li>After the 2nd Post Card</li> <li>Survey was not returned</li> <li>Survey not applicable</li> </ol>
AGPE3_1A	Q1a. In the last 12 months, did your child's doctors or other health providers talk with you about things you can do to help your CHILD grow and learn?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>

AGPE3_1B	Q1b. In the last 12 months, did your child's doctors or other health providers talk with you about the kinds of behaviors you can expect to see as your CHILD gets older?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_1C	Q1c. In the last 12 months, did your child's doctors or other health providers talk with you about breastfeeding?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_1D	Q1d.In the last 12 months, did your child's doctors or other health providers talk with you such as introduction of solid foods?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_1E	Q1e. In the last 12 months, did your child's doctors or other health providers talk with you about the importance of placing your CHILD on his/her back when going to sleep?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>

AGPE3_1F	Q1f. In the last 12 months, did your child's doctors or other health providers talk with you about where your child sleeps (such as the location and type of crib your child may sleep in)?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_1G	Q1g.In the last 12 months, did your child's doctors or other health providers talk with you about night waking and fussing?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_1H	Q1h. In the last 12 months, did your child's doctors or other health provider's talk with you about how your child communicates his/her needs?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2A	Q2a. In the last 12 months, did your child's doctors or other health providers talk with you about what your child is able to understand?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>

AGPE3_2B	Q2b. In the last 12 months, did your child's doctors or other health providers talk with you about how your child responds to you, other adults, and caregivers?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2C	Q2c. In the last 12 months, did your child's doctors or other health providers talk with you about how to avoid burns to your child such as changing the hot water temperature in your home?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2D	Q2d. In the last 12 months, did your child's doctors or other health providers talk with you about using a car seat?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2E	Q2e. In the last 12 months, did your child's doctors or other health providers talk with you about how to make your house safe?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>

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AGPE3_2F	Q2f. In the last 12 months, did your child's doctors or other health providers talk with you about the importance of showing a picture book and reading with your child?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2G	Q2g. In the last 12 months, did your child's doctors or other health providers talk with you about whether you child watches TV?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2H	Q2h. In the last 12 months, did your child's doctors or other health providers talk with you about issues related to childcare?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>
AGPE3_2I	Q2i. In the last 12 months, did your child's doctors or other health providers talk with you about resources for parents and families in your community?	<ol> <li>Yes, and my questions were answered</li> <li>Yes, but my questions were not answered completely</li> <li>No, but I wish we had talked about that</li> <li>No, but I already had information about this topic and did not need to talk about it anymore.</li> <li>Multiple response; Yes/No</li> <li>Missing</li> </ol>

FC3A	Q3a. In the last 12 months how often did your child's doctors or other health providers take time to understand the specific needs of CHILD?	<ol> <li>Never</li> <li>Sometimes</li> <li>Usually</li> <li>Always</li> <li>Missing</li> </ol>
FC3B	Q3b. In the last 12 months how often did your child's doctors or other health providers respect you as an expert about CHILD?	<ol> <li>Never</li> <li>Sometimes</li> <li>Usually</li> <li>Always</li> <li>Missing</li> </ol>
FC3C	Q3c. In the last 12 months how often did your child's doctors or other health providers help you feel like a partner in your child's care?	<ol> <li>Never</li> <li>Sometimes</li> <li>Usually</li> <li>Always</li> <li>Missing</li> </ol>
FC3D	Q3d. In the last 12 months how often did your child's doctors or other health providers explain things in a way that you can understand?	<ol> <li>Never</li> <li>Sometimes</li> <li>Usually</li> <li>Always</li> <li>Missing</li> </ol>
FC3E	Q3e. In the last 12 months how often did your child's doctors or other health providers show respect for your family's values, customs and how you prefer to raise your child?	<ol> <li>Never</li> <li>Sometimes</li> <li>Usually</li> <li>Always</li> <li>Missing</li> </ol>
PEDS4A	Q4a. Do you have any concerns about your child's learning, development, or behavior?	<ol> <li>Yes</li> <li>A little</li> <li>Not at All</li> <li>Missing</li> </ol>
PEDS4B	Q4bhow your child talks and make speech sounds?	<ol> <li>Yes</li> <li>A little</li> <li>Not at All</li> <li>Missing</li> </ol>
PEDS4C	Q4c how your child understands what you say?	1. Yes 2. A little 3. Not at All 99. Missing
PEDS4D	Q4d how your child uses his/her arms and legs?	1. Yes 2. A little 3. Not at All 99. Missing
PEDS4E	Q4e how your child behaves?	1. Yes 2. A little 3. Not at All 99. Missing
PEDS4F	Q4f how your child gets along with others?	1. Yes 2. A little 3. Not at All 99. Missing
DEV5	Q5. In the last 12 months, did your child's doctors or other health providers ask if you have concerns about CHILD'S learning, development, or behavior?	1. Yes 2. No 3. I don't remember 99. Missing
DEV6	Q6. In the last 12 months, did your child's doctors or other health providers give you specific information to address your concerns?	<ol> <li>Yes</li> <li>No</li> <li>I don't remember</li> <li>I did not have any concerns</li> <li>Missing</li> </ol>

FU7A	Q7a. In the last 12 months did your child's doctors or other health providers refer your CHILD to	1. Yes 2. No
	another doctor or other health provider?	99. Missing
FU7B	Q7b. In the last 12 months did your child's doctors	1. Yes
	or other health providers test child's learning and	<b>2.</b> No
	behavior?	99. Missing
FU7C	Q7c. In the last 12 months did your child's doctors	1. Yes
	or other health providers note a concern about your	<b>2.</b> No
	CHILD that should be watched carefully?	
FUZD		99. Missing
FU7D	Q7d. In the last 12 months did your child's doctors	1. Yes
	or other health providers refer your CHILD to	<b>2.</b> No
	speech-language or hearing testing?	99. Missing
DA8	Q8. In the last 12 months did your child's doctors or	1. Yes
	other health providers have your child pick up small	<b>2.</b> No
	objects, stack blocks, throw a ball or recog. Different	<b>3.</b> I don't remember
	colors?	<b>4.</b> My child is too young
		to do these kind of
		activities
		99. Missing
	On In the last 12 menths did your shild's destants	
DA9	Q9. In the <b>last 12 months</b> , did your child's doctor or	1. Yes
	other health care provider have you fill out a	2. No
	questionnaire about specific concerns or	99. Missing
	observations you may have about your child's	
	physical ability, communication or social behaviors?	
DA9A	Q9a. Did this questionnaire ask about your	1. Yes
	concerns or observations about how your child talks	<b>2</b> . No
	or makes speech sounds?	99. Missing
		<b>ee</b> : meenig
DA9B	Q9b. Did this questionnaire ask about your	1. Yes
DAJD	concerns or observations about how your child	<b>2.</b> No
	interacts with you and others?	99. Missing
AF10A	Q10a. In the last 12 months did your child's doctors	1. Yes
AFIUA		
	or other health providers ask you if you or someone	2. No
	in your household drinks alcohol or uses other	99. Missing
	substances?	
AF10B	Q10b. In the last 12 months did your child's doctors	1. Yes
	or other health providers ask you if you ever feel	<b>2.</b> No
	depressed, sad, or have crying spells?	99. Missing
AF10C	Q10c. In the last 12 months did your child's doctors	1. Yes
	or other health providers ask if you have someone	<b>2.</b> No
	to turn to for emotional support?	99. Missing
AF10D	Q10d. In the last 12 months did your child's doctors	1. Yes
	or other health providers ask you to talk about any	<b>2.</b> No
	changes or stressors in your family or home?	99. Missing
AF10E	Q10e. In the last 12 months did your child's doctors	1. Yes
	or other health providers ask you if you have any	<b>2.</b> No
	fine ennese in the second	
PD11	firearms in your home?	99. Missing
PUII	Q11. Do you have one or more person(s) that you	1. Yes
PDIT		
FUTT	Q11. Do you have one or more person(s) that you	1. Yes 2. No
	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse?	1. Yes 2. No 99. Missing
PD11A	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse? Q11A. Which of these people do you think of as your	1. Yes 2. No
PD11A	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse? Q11A. Which of these people do you think of as your child's personal doctor or nurse?	1. Yes 2. No 99. Missing Provider name(s)
	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse? Q11A. Which of these people do you think of as your child's personal doctor or nurse? Q12. Is the child named in the survey your first	1. Yes 2. No 99. Missing Provider name(s) 1. Yes
PD11A	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse? Q11A. Which of these people do you think of as your child's personal doctor or nurse?	1. Yes 2. No 99. Missing Provider name(s) 1. Yes 2. No
PD11A	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse? Q11A. Which of these people do you think of as your child's personal doctor or nurse? Q12. Is the child named in the survey your first	1. Yes 2. No 99. Missing Provider name(s) 1. Yes
PD11A	Q11. Do you have one or more person(s) that you think of as your child's personal doctor or nurse? Q11A. Which of these people do you think of as your child's personal doctor or nurse? Q12. Is the child named in the survey your first	1. Yes 2. No 99. Missing Provider name(s) 1. Yes 2. No

HISLAT13	Q13. Is your child of Hispanic or Latino origin?	<ol> <li>Hispanic or Latino</li> <li>Not Hispanic or Latino</li> <li>99. Missing</li> </ol>
white _14	Q14. What is your child's race. Please mark one or more	1=Name Checked
black _14	Q14. What is your child's race. Please mark one or more	1=Name Checked
asian _14	Q14. What is your child's race. Please mark one or more	1=Name Checked
amind _14	Q14. What is your child's race. Please mark one or more	1=Name Checked
nathi _14	Q14. What is your child's race. Please mark one or more	1=Name Checked
other _14	Q14. What is your child's race. Please mark one or more	1=Name Checked
PB_BF	Q15.How long did you breastfeed your child	<ol> <li>My child was not breastfed</li> <li>Less than a month</li> <li>A month or more</li> <li>I am still breastfeeding</li> <li>Missing</li> </ol>
PB_READ	Q16. How many days in a typical week do you or other family members read a book with your child?	<ol> <li>No days ( 0 days)</li> <li>1-2 days</li> <li>3-4 days</li> <li>5-6 days</li> <li>Everyday (7 days)</li> <li>Missing</li> </ol>
PB_TV	Q17. How many hours in a typical day does your child watch TV or watch videos?	<ol> <li>0 hours</li> <li>Less than 1 hour</li> <li>1-2 hours</li> <li>More than 2 hours</li> <li>We don't own a tv</li> <li>99. Missing</li> </ol>
RESPED	Q18. What is the highest grade or level of school that you have completed?	<ol> <li>8<sup>th</sup> grade or less</li> <li>Some high school, but did not graduate</li> <li>High school graduate or GED</li> <li>Some college or 2 year degree</li> <li>4 year college graduate</li> <li>More than a 4 year college graduate</li> <li>99. Missing</li> </ol>
DEP_1	Q19. How many days in the last week have you felt depressed?	<ol> <li>1. 0 days</li> <li>2. 1 day</li> <li>3. 2 days</li> <li>4. 3 days</li> <li>4. 4 days</li> <li>5. 5 days</li> <li>6. 6 days</li> <li>7. All 7 days</li> <li>99. Missing</li> </ol>

DEP_2	Q20. In the last 12 months, have you had two weeks or more during which you felt sad, blue, depressed, or lost pleasure in things that you usually cared about or enjoyed?	1. Yes 2. No 99. Missing
PTRB_A	Q21a. How much trouble have you had paying forCHILD'S health and medical expenses?	<ol> <li>A lot of Trouble</li> <li>Some Trouble</li> <li>No Trouble</li> <li>No Sing</li> </ol>
PTRB_B	Q21b. How much trouble have you had paying forSupplies like formula, food, diapers, clothes and shoes?	<ol> <li>A lot of Trouble</li> <li>Some Trouble</li> <li>No Trouble</li> <li>99. Missing</li> </ol>
PTRB_C	Q21c. How much trouble have you had paying forHealthcare for yourself?	<ol> <li>A lot of Trouble</li> <li>Some Trouble</li> <li>No Trouble</li> <li>No Sing</li> </ol>