

STRUCTURED INTERVIEWING (OVERVIEW)

1. Domain Definition & Item Generation
2. Structured Interviewing
 - A. **General Information Questions**
 - B. **Knowledge Tests**
 - C. **Attitudinal Scales & Tests**
 - D. Classification studies
 - E. Beliefs

STRUCTURED INTERVIEWING (OVERVIEW)

1. Domain definition/item generation
 - A. Previous study and/ or standardized scales
 - B. New or additional items (free-listing or group)
2. Structured interviewing
 - A. “Questionnaire” items/General Information
 1. Sociodemographic questions (and general info)
 2. Wording, ordering of items
 - B. Assessment of knowledge
“Correct” answer is known; responses are scored or graded correct/incorrect
 - C. Exploration of attitudes
A priori definition of “dimensions”
 - D. Exploration of classification/categorization of items
No a priori definition of dimensions
nor criteria for making comparisons
 - E. Exploration of beliefs

Phase II: Structured Interviewing

A. "Questionnaire" items

1. Sociodemographic and general information questions

(Comparability with other studies)

2. Wording, ordering of items and subject recall, bias

(Meaning and interpretation of items)

3. Formats:

1. Open-ended

2. Close-ended, multiple choice

3. Rating scales (ordered)

4. Interval estimates

Sociology: survey construction

Research on wording & ordering

General or “informational” items.
(Birth date, gender)

SURVEY =

selection of informants

(sampling)

method of interview

(face-to-face, phone, mail)

questionnaire design

Psychology: errors & bias

1. Pretest: Think out-loud and describe interpretation of question and process of answering. List possible answers.
2. Recall of event: Mark beginning of time period with widely recognized event. (Loftus).

Fowler, FJ, Jr: Improving Survey Questions: Design and Evaluation. Applied Social Research Methods Series, Vol. 38. Sage Pub Inc., 1995.

What is a good question?

-One that produces reliable and valid answers

Of something we want to describe

Consistency

1. All respondents understand the question in the same way
(Consistent meaning)

And that understanding is consistent with the intended meaning

2. All respondents understand the kind(s) of answers being requested

And answers are consistent with intent of research

3. All questions are administered in the same way to all respondents

Toward Consistency in Interpretation

1. define terms, avoid ambiguity
(p 19 burglary vs. robbery)
2. Multiple, related questions
(Simpler, clearer, more complete)
(p 17 healthcare & income)

Evaluation of Questions

1. Assess clarity or interpretation of questions
 - a. pre-test of materials
 - b. sample of people describe their thoughts/ interpretation and possible responses (one-on-one or focus group)
2. Reliability/Validity
 - a. consistency in responses when questions given to same people at two different times
 - b. alternatively worded questions in same interview, or to two comparable samples
 - c. check responses against records

Writing Good Questions

1. Clear research goals: Translate purpose into specific questions.
2. Ensure respondents have shared understanding of question and appropriate responses, and that understanding is congruent with the intended meaning.
3. Have clear plan about how responses will be used to address research goal(s) in #1.

Clarity (Examples)

- What's your age?
(Age at last birthday; birth date)
- 2. Income?
(Monthly income; last year; household; all sources)
- 3. Use medical care?
(Doctor, type, location, time interval)
- 4. Student Examples
(or at end of this section)

Limitations of Responses

1. Knowing and remembering

A. Does the R know the info.?

- Is the person asked directly, or is another asked to report (proxy)
- Patient & healthcare provider may not agree because they classify an event differently
- Health insur: R may not know or understand

B. Recall (forgetting)

1. Recent= greater recall

- 6 mo. Window in National Crime Survey
- 2 wk. in National Health Interview Surv
- Most accurate info from a short period, a day or by using a diary
- When asked about behavior in last 1-2 wks, responses= average or typical behavior (not actual)

Limitations of Responses – cont.

2. Improve recall

- Multiple questions (cues “try again” “this is important”) related questions
- Clearly designate time period
(Since X-Mas, or since last visit)
(In last 30 days; Then ask, In last 2 weeks)

C. Bias (over-& under-reporting)

1. Social desirability (sensitive answers)

- confidential & anonymous
(no personal id info)
- clarify goals of study
(& importance of accuracy)
- self-administered/computer

2. “Interaction” between interviewer & respondent

- question/instructions should communicate either yes/ no response is acceptable
- there are no right or wrong answers
- *match I to R in terms of socio-demog characteristics*
- I’ s can read instruction to Rs

3. Actual Q' s & Answers

- Ask question only for relevant sub-sample

- Careful with pre-coding of responses
(too few=minimal info;
open-ended=harder for R)

- Tricks to improve accuracy
(clearly marked time window)
(30 d; then in last 2 wk)
(multiple related questions)

Challenges to Validity

1. Questions interpreted differently by different informants

(clear, complete wording)

2. Memory inaccuracies

Telescoping= longer time period

(mark time period with major event)

“Typical” event rather than actual event

3. Mismatch of interviewer + informant

(match gender, ethnicity, SES)

4. Unusual, misunderstood context

5. Deliberately misleading

Conclusion (Fowler, p 45)

1. Avoid ambiguous words; define the key terms in questions
2. Minimize the difficulty of the recall and reporting tasks given to respondents.
3. For objectives that pose definitional or recall challenges, use multiple questions
4. Give respondents help with recall and placing events in time by encouraging the use of association and other memory aids.
5. Make sure the form of the answer to be given fits the reality to be described.
6. Design all aspects of the data collection to minimize the possibility that respondents feel their interests will be best served by giving an inaccurate answer to a question.

Response formats

1. Open-ended fill-in the blank
(Recall vs recognition bias)
2. Categorical: multiple choice, pre-coded responses (Including yes/no, true/false)
 - Ordinal ‘categories’, rating scales, ranking

EXAMPLES OF QUESTIONS

Class examples

COMBINING RESPONSES TO CREATE SCALES AND INDICES

- As required information becomes more complex or abstract, more questions are needed to obtain an accurate answer.
- Cannot measure concept directly
(height, weight vs. SES, intelligence)
proxy items associated with concept are asked and responses combined across questions
- SES: educational level
income
occupation

VALIDITY

Content= choice of reasonable questions
should insure a reasonable result

Construct= result should be concordant with
other measures of the same
concept.
(internal & external consistency)

The “Financial Resources” Data consists of 279 observations on 30 variables (FINANCE.DAT). A variety of sociodemographic variables were collected on each household as well as the last source where they sought medical care. Which is more strongly associated with the choice of medical care, financial resources or educational level?

The focus of the exercise is the creation of the financial resources index. Be sure to justify your procedure. Use only a publicly available program: SPSS, BMDP, or SAS.

Variables (IN FORMAT 30F3.0)

Adults (number in household)

Children (number in household)

Wall (1=poles, plastic, wood 2=adobe, brick, block)

Floor (1= dirt 2=non-dirt)

Radio (number of)

TV (number of)

Sewing machine (number of)

Refrigerator (number of)

Beds (number of)

Rooms (number of)

House ownership (0=no 1= yes)

Land ownership (0=no 1=yes)

Bike

Motorcycle

Car

Pickup

Truck

Cattle (number of)

Horses (number of)

Pigs (number of)

Goats (number of)

Ducks (number of)

Turkeys (number of)

Head of household' s sex (0=female 1=male)

Head of household' s age

Head of household' s read (0=no 1=yes)

Head of household' s write (0=no 1=yes)

<u>RUBRO</u>	<u>LABEL</u>	<u>CODIGOS</u>
Municipio	MUNI	01, 03
Localidad	LOCAL	102, 114, 121, 122, 206,208
No. De case segun SNEM	HOUSEID	001A-999Z
No. De ninos en la familia	ADULTS	00-99
Techo de la casa	CHILDREN	00-99
	ROOF 1,2	1=manaque 2=lamina 3=teja 4=terraza 5=canaleta
Paredes de la casa	WALL 1,2	1=palos 2=lamina 3=adobe 4=ladrillo 5=bloque 6=lamina 7=piedra 8= 9=nylon
Piso de la casa	FLOOR 1,2	1=tierra 2=Madera 3=cemento 4=ladr de cemento 5=ladrillo
Tienen ustedes _____?	RADIO	00-99 (No. De cada uno)
Radio	TV	
Television	SEWMACH	
Maquina de coser	REFRIG	
Regrigeradora	BED	
Camas	ROOMS	01-09
No. De cuartos en la casa	HOUSE	0=NO; 1=Si
Son duenos de la casa		

Son duenos de este terreno?	LAND1	0=No 1=Menos que 1 tarea 2= De 1 a 3 tareas
Tienen otros terrenos?	LAND2	3= 4 tareas (1 manzana) a 5 manzanas 4=Mas de 5 manzanas
Tienen ustedes _____?	BIKE	0= No; Si
Bicicleta	MOTOCY	
Motocicleta	CARRO	
Carro	PICKUP	
Pickup	TRUCK	
Camion		
Tienen animales domesticos?		
Ganado	CATTLE	00-99
Caballos	CABALLOS	(No. De cada uno)
Cedos	CERDOS	
Cabros	POLLOS	
Pollos	PATOS	
Patos	CHOMPIPE	
Chompipes	OTHER1	
_____	OTHER2	
Tiene algun negocio?	NEGOCIO	0=No; 1=Si
Que clase de negocio?	CUAL	01=Venta productos Colas (maiz, frijol, Fruta, etc.)
Distancia entre la casa y:	TIENDA	02=Venta animales o productos (leche, huevos, etc.)
Tienda mas cerca	FARMACIA	03= Venta productos hechos en casa (queso, tortillas, etc.)
El CV/MV	CV	04= Venta de pescado
Puesto (Centro) de Salud	PUESTO	05=Trabajo motosierra 06= Motor de masa 07= Tienda 00000-99999 (metros)

FINANCIAL RESOURCES

QUESTIONNAIRE DATA: Data were collected on a variety of household variables: house construction, ownership of animals, appliances, etc. (29 variables)

VALIDATION: To identify items which correlated with community perceptions, three informants in each of six localities ranked ten families according to their perception of the ten families' economic resource score for each family.

Averaged scores were then correlated (for the 60 families) with each family's responses to questionnaire items. Items that correlated greater than .20 with community rankings were: number of adults in household, number of children, number of chickens, wall construction (adobe, brick or cinder block vs. bamboo, wood, or plastic), floor composition (dirt vs. other), land (ownership), number of rooms in the house, number of appliances, ownership of a bicycle, and monthly household income. (10 VARS)

A principal components analysis on these 10 variables showed that household educational level (and number of adults and children in the household) were different from the other financial resource variables.

FINANCIAL RESOURCES

AN OVERALL SCALE OF FINANCIAL RESOURCES WAS CREATED by dichotomizing and summing across eight variables, creating a 9-point (0-8) scale of financial resource scale was constructed by giving each of the following categories:

1. Monthly income greater than Q100.00 (median);
2. Ownership of any appliance (radio, sewing machine, refrigerator);
3. More than two rooms in the house;
4. Non-dirt floor;
5. More than three chickens;
6. Adobe, brick, or block (as opposed to bamboo, wood, or plastic) walls;
7. Land ownership;
8. And ownership of a bicycle.

Reliability Coefficient = .66 (8 items)

Other Examples

GUTTMAN SCALING= a procedure for combining yes/no indicator variables to create a scale that is cumulative.

If someone has an item on the ordered list, then they tend to have objects that *precede* it. If they lack an item, they tend to lack *subsequent* items

Kay: Order of acquisition of goods, Polynesia

DeWalt: Material-lifestyle scale, Mexico

Analysis of 54 households and 8 vars. (9 pt. cum. Scale)

- (1) iron
- (2) radio
- (3) bed
- (4) cooking facilities off the floor
- (5) sewing machine
- (6) wardrobe
- (7) stove
- (8) television

Validity= correlated final scale with 3 informants' wealth rankings ($r=.80$)

KEY = COMBINING RESPONSES TO ACHIEVE A MORE RELIABLE ANSWER

Handwerker – Familial violence

Combined responses to 3 related questions
To estimate exposure

Concrete items combined
social class index

Abstract items combined
knowledge, attitude scales

2. STRUCTURED INTERVIEWING

A. General Questions

B. Assessment of Knowledge

1. Definition of area/ topic of “ability”

2. Answers are known

3. Responses are “scored” or “graded” as correct/ incorrect

C. Attitudinal Questions/Scales

D. Classification Studies

E. Beliefs

RELIABILITY

Degree to which something obtains the same result when administered to the same individuals under the same conditions.

1. Test-retest= Give the same test/ interview twice.

(-Scores may improve from practice, learning)

(-Change can occur in interval)

2. Two parallel, but equivalent interview protocols

(-difficult)

Split-half=Divide test into even/ odd subsets

3. Reliability coefficient (alpha) subsumes previous kinds of reliability = all possible split halves

(Also, sq. rt. of coefficient estimates correlation of obtained scores with the true scores)

$$Rel = \frac{k \bar{r}}{1 + (k - 1) \bar{r}}$$

k = number of items;

\bar{r} = average Pearson correlation between items

Knowledge Tests

1. Formats: open-ended
multiple choice
(dichotomous)
2. Responses are scored as correct/
incorrect
3. Examples: Malaria, diabetes, AIDS;
GRE
4. Omission of items that do not
contribute to total score can increase
reliability.
Shorter test with better discriminatory
ability.
5. Corrections for guessing (GRE)

Ruebush, T.K., S.C. Weller, & R.E. Klein: Knowledge and Beliefs about Malaria on The Pacific Coastal Plain of Guatemala.

To assess knowledge among rural residents concerning malaria transmission, symptoms, therapy, and control.

Open-ended interviews with 25 people gathered locally relevant descriptive information.

Questionnaire was drafted with 65 yes/ no questions. (Initial pre-testing eliminated or modified questions)

Administration of knowledge test

30 residents, at random, in each of 3 villages
27 "Volunteer Collaborators" (malaria workers)

30 National Malaria Service Employees

60 residents in one village

(balanced by gender, literacy)

Am. J. Trop. Med. Hyg. 1992, 46 (4): 451-459.

Correct
response

Question

- | Correct response | Question |
|------------------|--|
| T | *1. Malaria can cause a lack of energy. |
| T | *2. Malaria is caused by the bite of a mosquito that has bitten a person who is sick with malaria. |
| T | *3. To cure malaria, you need to take Aralen pills for at least three days. |
| F | 4. Taking antimalarial drugs dries up the breast milk in a women who is breast feeding. |
| F | 5. Malaria causes sneezing. |
| T | *6. Malaria causes aches and pains in the muscles and joints. |
| F | 7. Malaria is more severe in adults than in young children. |
| F | 8. Malaria can be caused by drinking un-boiled water. |
| T | *9. With malaria, fever may occur on alternate days. |
| F | 10. Malaria can be avoided by taking vitamins. |
| T | *11. By using bed nets correctly, you can avoid getting malaria. |
| T | 12. The pills given out by the National Malaria Service are better than injections for curing malaria. |
| T | *13. Malaria causes a loss of appetite. |

Knowledge and Beliefs about Malaria

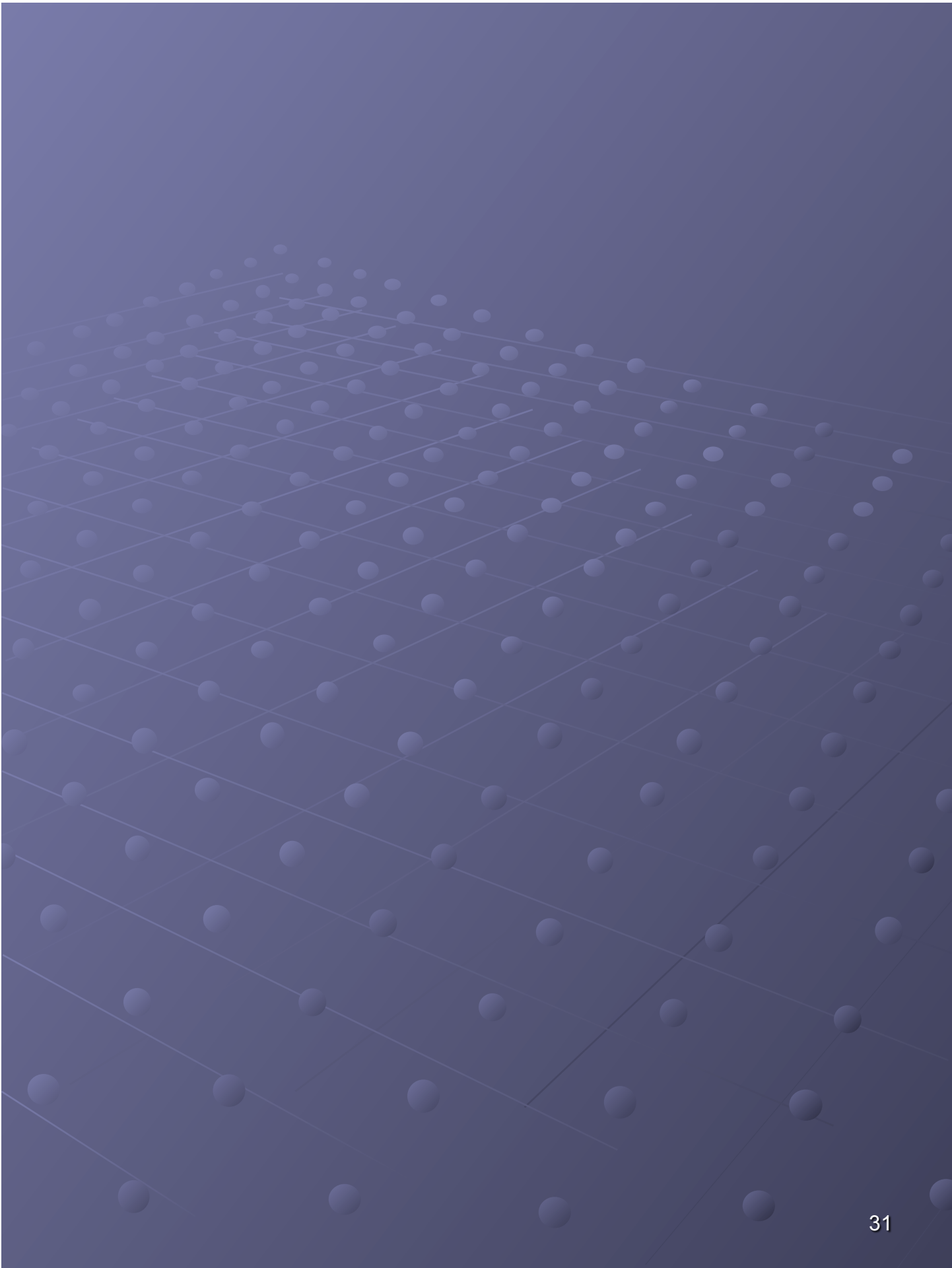
Analysis

- Responses of 1=true 0=false
recoded 1=correct 0=incorrect
- Reliability = .82
(65 items & 207 people)
- 25 questions showed a weak or negative correlation with the total score
- Omission of those 25 items=(40 items)
increased reliability to .91

6. Results (% correct)

- 94% NMS
77% VC
56% (44%-77%) Villages
- 45% Illiterate
61% Literate

AIDS knowledge or attitude	Total	Age		
		18-29 years	30-49 years	50 years and over
5f. A pregnant women who has the AIDS virus can give it to her baby.				
True	94	96	96	91
False	1	1	1	1
Don't know	5	3	4	9
5g. A person who has the AIDS virus can look and feel well and healthy.				
True	86	91	91	77
False	5	4	4	7
Don't know	9	5	5	16
5h. There are drugs available which can lengthen the life of a person infected with the AIDS virus.				
True	71	71	75	65
False	7	9	7	6
Don't know	22	20	18	29
5i. Early treatment of the AIDS virus infection can reduce symptoms in an infected person.				
True	60	61	65	53
False	10	12	10	8
Don't know	30	27	25	39
5j. There is a vaccine available to the public that protects a person from getting the AIDS virus.				
True	3	4	2	4
False	83	85	88	75
Don't know	14	11	9	21
5k. There is no cure for AIDS at present.				
True	93	93	95	90
False	2	3	2	3
Don't know	5	4	3	7
6. How likely do you think it is that a person will get AIDS or the AIDS virus infection from—				
6a. Working near someone with the AIDS virus?				
Very likely	2	2	2	3
Somewhat likely	5	4	5	5
Somewhat unlikely	7	7	7	7
Very unlikely	44	45	44	44
Definitely not possible	36	39	39	31
Don't know	6	3	3	11
6b. Eating in a restaurant where the cook has the AIDS virus?				



STRUCTURED INTERVIEWING (CONT' D)

C. Exploration of attitudes

1. A priori definition of “dimensions”
2. Statements on a single topic, summed into scales
3. Responses “recoded” to sum in the right direction (like scoring)
4. Format:
 1. Dichotomous
 2. Ordered: rating scales

CREATION OF A SUMMED ATTITUDE SCORE

(Nunnally 1978: 604-609)

1. An item pool is created by writing about 40 items on a single topic. Half should be moderately positive and half moderately negative (neutral statements are not helpful and neither apparently are strong statements).
2. Collect data from individuals similar to those you eventually hope to apply the scale. The number of respondents should be ten times the number of items ($10 \times n_{\text{items}} = n_{\text{subj}}$).
3. Individual item scales must be reflected for negative items prior to analysis. If items were rated on 7 point scales, where 1=agree... 7=disagree for positive statements, then responses for negative items need to be subtracted from 8, so that 1=disagree...7=agree. Similarly, if the responses were dichotomous and 0=dislike 1=like, coding for negative items should be reversed prior to analysis.

CREATION OF A SUMMED ATTITUDE SCORE (Nunnally 1978: 604-609) cont.

4. An individual's score is the sum of his/her responses (after appropriate relection) across items.* Reliability of the total score is calculated from the average correlation among items and number of items (alpha or KR-20). Reliability of individual items is determined by each item's correlation with the total score (item-to-total correlation. (Items with a negative correlation need to be reflected; see step 3)
 5. Select final items with high item-to-total correlations, say 10 positive and 10 negative statements from the original 40. A 20 item summative scale should have a reliability greater than .80.
- * A simple summated score is an un-weighed score. Weighed vs. Un-weighed scores usually correlate around .99.

Lewis CE, JM Siegel, MA Lewis: Feeling Bad: Exploring Sources of Distress Among Pre-Adolescent Children. *AJPH* 1984, 74:117-122.

- Previous studies of *stress* contained items relevant to adults or items thought to be relevant for children. (Stress and health service utilization)
- Individual and small group interviews with 50 to 60 5th and 6th graders. (Most were white, middle class)
- Children generated items:
“What happens that makes you feel bad, nervous or worry?”
- List of 22 items agreed *upon by the group*.
- 22 items administered by questionnaire to second group: (30 6th graders of similar background) How bad each would make them feel (5 pt. scale) and how often each occurs (5 pt. scale).
- Final list of 20 items
(2 items almost always rated ‘not bad’)
- Final 20 items administered to 2, 400 5th graders.

Lonner WJ, JW Berry (eds)
Field Methods in Cross-cultural Research
Vol 8, Cross- Cultural Research and
Methodology Series Beverly Hills: Sage
Pub, 1986

RW Brislin: The Wording and Translation
of Research Instruments

- Advantages of using existing scales considerable:
 - Large body of work (develop, pre-test, etc.)
 - Previously published data for comparison
 - Communication with larger group of researchers
- Disadvantages (validity):
 - Can miss important concepts
 - Can erroneously base conclusions on concepts from one's own group to another group
- To improve validity
 - add new additional items
 - Back-translation (2 loops: S → T → S)

Rating Scales

1. # points or categories on scale (2 to 10)
2. Odd vs. even number of categories
(Even can be dichotomized)
3. Numeric vs. adjective anchor points
(adjectives can aid a more shared interpretation)
(responses change when 0 to 10 vs. 5 to +5)
(Responses change from poor to excellent vs. excellent to poor)
4. Can control the distribution with a Q-sort, or “pick the 3 best” and “pick the 3 worst”
5. Limitation= different interpretation by different Rs
(level “good” health = “poor” by another)
6. Limitation= do not lend themselves to oral/phone administration
(oral branching: agree vs. disagree; strongly vs. somewhat)
7. Limitation= response bias= agreement with statement
8. Statements need to be clear with same meaning across Rs. single concept in question, single concept in rating scale, Avoid negatives (“not”)
9. Can also use full Ranking , pair comparisons; magnitude est. (P 61)

Rating Scale Formats

1. Dichotomous: Checklist, true/false, yes/no, agree/disagree
2. Multiple steps:



Anchor points

Odd/even # steps

Oral admin of 4pt. Scale

Q-sorting to control the distribution

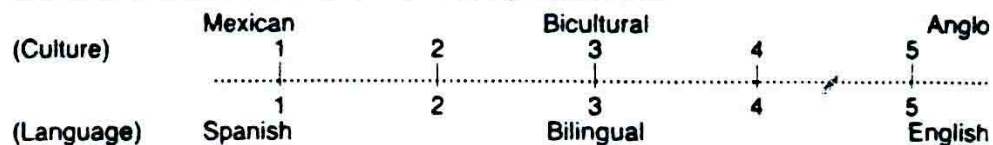
3. Point distribution
4. Full-rank procedures

	Rarely or none of the time (Less than 1 day)	Some or a little of the time (1-2 days)	Occasionally or a moderate amount of the time (3-4 days)	Most or all of the time (5-7 days)
a. I was bothered by things that usually don't bother me. <u>FDEPRO1</u>	1	2	3	4
b. I did not feel like eating; my appetite was poor.	1	2	3	4
c. I felt that I could not shake off the blues even with help from my family or friends.	1	2	3	4
<u>d</u> . I felt that I was just as good as other people.	1	2	3	4
e. I had trouble keeping my mind on what I was doing.	1	2	3	4
f. I felt depressed.	1	2	3	4
g. I felt that everything I did was an effort.	1	2	3	4
<u>h</u> . I felt hopeful about the future.	1	2	3	4
i. I thought my life had been a failure.	1	2	3	4
j. I felt fearful.	1	2	3	4
k. My sleep was restless.	1	2	3	4
<u>l</u> . I was happy.	1	2	3	4
m. I talked less than usual.	1	2	3	4
n. I felt lonely.	1	2	3	4
o. People were unfriendly.	1	2	3	4
<u>p</u> . I enjoyed life.	1	2	3	4
q. I had crying spells.	1	2	3	4
r. I felt sad.	1	2	3	4
s. I felt that people disliked me. <u>FDEPRI9</u>	1	2	3	4

Appendix A
Acculturation Rating Scale for Mexican Americans

Name	Nombre
Sex	Sexo
Age	Edad
Marital Status	Estado Civil
What is your religious preference?	¿Cuál es su religión predilecta?
Last grade completed in school:	¿Hasta que grado asistió usted en la escuela?
1. Elementary 0-5 2. 6-8 3. 9-12 4. 1-2 years of college 5. 2 years of college or more	1. Primaria-6 2. Secundaria 7-9 3. Preparatoria 10-12 4. Universidad 1-2 años 5. Universidad 2 años y más

This questionnaire is designed to yield a measure of acculturation in Mexican Americans. With normal adults, it may be self-administered or given in groups. However, with certain clinical populations, individual administration is required, often incorporating the use of an informant and additional observational data. In such cases, the rater is required to make a judgmental rating for the subject. (For a complete set of instructions, please refer to the instructional material that accompanies this scale.) Items are presented in English, Spanish, or in both languages depending on the subject's preference. All items are scored in relation to one or the other of the following continuums:



Where more than one answer seems appropriate, the subject or rater should base their choice, as best possible, on what would be most correct under normal circumstances or under most conditions.

Circle the number next to the answer that best fits the question.

Indique con un círculo la respuesta que considere mas adecuada.

1. What language do you speak?
 1. Spanish only
 2. Mostly Spanish, some English
 3. Spanish and English about equally (bilingual)
 4. Mostly English, some Spanish
 5. English only
2. What language do you prefer?
 1. Spanish only
 2. Mostly Spanish, some English
 3. Spanish and English about equally (bilingual)
 4. Mostly English, some Spanish
 5. English only
3. How do you identify yourself?
 1. Mexican
 2. Chicano

1. ¿Qué idioma habla usted?
 1. Solamente Español
 2. Mas Español, menos Inglés
 3. Igual en Español y en Inglés (bilingüe)
 4. Mas Inglés, menos Español
 5. Solamente Inglés
2. ¿En qué idioma prefiere hablar?
 1. Solamente Español
 2. Mas Español, menos Inglés
 3. Igual en Español que en Inglés (bilingüe)
 4. Mas Inglés, menos Español
 5. Solamente Inglés
3. ¿Cómo se identifica usted?
 1. Mexicano
 2. Chicano

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| <p>3. Mexican American</p> <p>4. Spanish American, Latin American, Hispanic American, American</p> <p>5. Anglo American or other</p> <p>4. Which ethnic identification does (did) your mother use?</p> <ol style="list-style-type: none"> 1. Mexican 2. Chicano 3. Mexican American 4. Spanish, Hispanic, Latin American, American 5. Anglo American or other <p>5. Which ethnic identification does (did) your father use?</p> <ol style="list-style-type: none"> 1. Mexican 2. Chicano 3. Mexican American 4. Spanish, Hispanic, Latin American, American 5. Anglo American or other <p>6-7. What was the ethnic origin of the friends and peers you had, as a child up to age 6? ____ (use codes 1-5 below)</p> <p>from 6 to 18? ____ (use codes 1-5 below)</p> <ol style="list-style-type: none"> 1. Almost exclusively Mexicans, Chicanos, Mexican Americans (LA RAZA) 2. Mostly Mexicans, Chicanos, Mexican Americans 3. About equally Raza (Mexicans, Chicanos, or Mexican Americans) and Anglos or other ethnic groups 4. Mostly Anglos, Blacks, or other ethnic groups 5. Almost exclusively Anglos, Blacks, or other ethnic groups <p>8. Whom do you now associate with in the outside community?</p> <ol style="list-style-type: none"> 1. Almost exclusively Mexicans, Chicanos, Mexican Americans (La Raza) 2. Mostly Mexicans, Chicanos, Mexican Americans 3. About equally Raza (Mexicans, Chicanos, or Mexican Americans) and Anglos or other ethnic groups 4. Mostly Anglos, Blacks, or other ethnic groups 5. Almost exclusively Anglos, Blacks, or other ethnic groups <p>9. What is your music preference?</p> <ol style="list-style-type: none"> 1. Only Spanish 2. Mostly Spanish 3. Equally Spanish and English 4. Mostly English 5. English only <p>10. What is your TV viewing preference?</p> <ol style="list-style-type: none"> 1. Only programs in Spanish 2. Mostly programs in Spanish 3. Equally Spanish and English programs | <p>3. México Americano</p> <p>4. Español Americano, Latino Americano, Hispánico Americano, Americano</p> <p>5. Anglo Americano u otro</p> <p>4. ¿Cuál identificación étnica tiene (tenía) su madre?</p> <ol style="list-style-type: none"> 1. Mexicana 2. Chicana 3. México Americana 4. Española, Latina Americana, Hispánica, Americana 5. Anglo Americana u otro <p>5. ¿Cuál identificación étnica tiene (tenía) su padre?</p> <ol style="list-style-type: none"> 1. Mexicano 2. Chicano 3. México Americano 4. Español, Hispánico, Latino Americano, Americano 5. Anglo Americano u otro <p>6-7. ¿Cuál era el origen étnico de sus amigos y compañeros hasta la edad de seis (6) años? ____ (use codes 1-5 below)</p> <p>de 6 a 18? ____ (use codes 1-5 below)</p> <ol style="list-style-type: none"> 1. Exclusivamente Mexicanos, Chicanos, México Americanos (LA RAZA) 2. En su mayoría Mexicanos, Chicanos, México Americanos (LA RAZA) 3. Casi igual (Mexicanos, Chicanos, México Americanos o RAZA) y otros grupos étnicos 4. En su mayoría Anglo Americanos, Negros u otros grupos étnicos 5. Exclusivamente Anglo Americanos, Negros u otros grupos étnicos <p>8. ¿Con quién se asocia ahora en la comunidad?</p> <ol style="list-style-type: none"> 1. Exclusivamente Mexicanos, Chicanos, México Americanos (Raza) 2. En su mayoría Mexicanos, Chicanos, México Americanos (Raza) 3. Casi igual (Mexicanos, Chicanos, México Americanos o Raza) y otros grupos étnicos 4. En su mayoría Anglo Americanos, Negros u otros grupos étnicos 5. Exclusivamente Anglo Americanos, Negros u otros grupos étnicos <p>9. ¿Cuál música prefiere?</p> <ol style="list-style-type: none"> 1. Solamente música en Español 2. Por la mayor parte en Español 3. Casi igual en español como Inglés 4. Por la mayor parte en Inglés 5. Solamente Inglés <p>10. ¿Qué tipo de programas de televisión prefiere?</p> <ol style="list-style-type: none"> 1. Solamente programas en Español 2. Por la mayor parte programas en Español |
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