

SECTION F. PARENTS AND HELP TO PARENTS

START TIME: _____:_____:_____

MOTHER		FATHER	
<p>F.1 What was the final level of school your mother completed?</p> <p>None 1 Some elementary 2 Completed elementary 3 More than elementary 4</p> <p>RF 8 DK 9</p>	<input type="checkbox"/>	<p>F.8 What was the final level of school your father completed?</p> <p>None 1 Some elementary 2 Completed elementary 3 More than elementary 4</p> <p>RF 8 DK 9</p>	<input type="checkbox"/>
<p>F.2 Has your mother ever worked or lived in the U.S.?</p> <p>YES 1 NO 2</p> <p>RF 8 DK 9</p>	<input type="checkbox"/>	<p>F.9 Has your father ever worked or lived in the U.S.?</p> <p>YES 1 NO 2</p> <p>RF 8 DK 9</p>	<input type="checkbox"/>
<p>F.3 Is your mother alive now?</p> <p>YES 1 → Pass to F.4 NO 2 → Go to F.7</p> <p>RF 8 DK 9] → Go to F.8</p>	<input type="checkbox"/>	<p>F.10 Is your father alive now?</p> <p>YES 1 → Pass to F.11 NO 2 → Go to F.14</p> <p>RF 8 DK 9] → Go to F.15</p>	<input type="checkbox"/>
MOTHER ALIVE		FATHER ALIVE	
<p>F.4 How old is your mother</p> <p>AGE _____ </p> <p>RF 888 DK 999</p>	<input type="checkbox"/>	<p>F.11 How old is your father</p> <p>AGE _____ </p> <p>RF 888 DK 999</p>	<input type="checkbox"/>
<p>F.5 Because of a health problem does your mother need any help with basic personal needs like dressing, eating or bathing?</p> <p>YES 1 NO 2</p> <p>RF 8 DK 9</p>	<input type="checkbox"/>	<p>F.12 Because of a health problem does your father need any help with basic personal needs like dressing, eating or bathing?</p> <p>YES 1 NO 2</p> <p>RF 8 DK 9</p>	<input type="checkbox"/>
<p>F.6 Can your mother be left alone for an hour or more?</p> <p>YES 1 NO 2] → Go to F.8</p> <p>RF 8 DK 9]</p>	<input type="checkbox"/>	<p>F.13 Can your father be left alone for an hour or more?</p> <p>YES 1 NO 2] → Go to F.15</p> <p>RF 8 DK 9]</p>	<input type="checkbox"/>
DECEASED MOTHER		DECEASED FATHER	
<p>F.7 How old was your mother when she died?</p> <p>AGE _____ </p> <p>RF 888 DK 999</p>	<input type="checkbox"/>	<p>F.14 How old was your father when he died?</p> <p>EDAD _____ </p> <p>RF 888 DK 999</p>	<input type="checkbox"/>

F.15 INTERVIEWER - LOOK AT F.3 Y F.10 AND MARK WITHOUT ASKING

- BOTH PARENTS LIVING** 1 → Go to F.18
- ONLY MOTHER LIVING** 2 → Pass to F.16
- ONLY FATHER LIVING** 3 → Go to F.17
- BOTH PARENTS REPORTED DEAD OR IT IS NOT KNOWN IF THEY ARE ALIVE** 4 → Go to F.30

BOTH PARENTS LIVING

F.18 Are your parents married to each other?

- YES 1 → Pass to F.19
- NO 2 → Go to F.20
- RF 8] → Pass to F.19
- DK 9]

F.19 Do your parents live together?

- YES 1] → Go to F.22
- NO 2]
- RF 8]
- DK 9]

ONLY MOTHER LIVING

F.16 Is your mother currently married or in a union?

- YES 1] → Go to F.22
- NO 2]
- RF 8]
- DK 9]

BOTH PARENTS ALIVE BUT NOT LIVING TOGETHER

F.20 Is your mother currently married or in a union?

- YES 1
- NO 2
- RF 8
- DK 9

ONLY FATHER LIVING

F.17 Is your father currently married or in a union?

- YES 1] → Go to F.22
- NO 2]
- RF 8]
- DK 9]

F.21 Is your father currently married or in a union?

- YES 1
- NO 2
- RF 8
- DK 9

F.22 INTERVIEWER:

- IF ONLY MOTHER IS LIVING, CIRCLE THE OPTION "MOTHER", AND ASK IN THAT COLUMN OF F.23** 1
- IF ONLY FATHER IS LIVING, CIRCLE THE OPTION "FATHER", AND ASK IN THAT COLUMN OF F.23** 2
- IF PARENTS LIVE TOGETHER (F.19=1), CIRCLE THE OPTION "PARENTS", AND ASK IN THAT COLUMN OF F.23** 3
- IF PARENTS DO NOT LIVE TOGETHER (F.18=2 Ó F.19=2), CIRCLE THE OPTIONS "MOTHER" AND "FATHER", AND ASK IN THOSE COLUMNS OF F.23** 4
- IF DOES NOT KNOW IF PARENTS LIVE TOGETHER (F.19 =8 , 9), GO TO F.30** 5

F. 23 With whom do (does) your (mother/father/parents) live?	MOTHER	FATHER	PARENTS
<p>with respondent 1 → Pass to F.24 alone/with current spouse 2 with other child 3 with other relatives 4 in retirement home, care facility 5</p> <p>part of year with respondent, part of year with other siblings of respondent 6 → Go to F.27</p> <p>part of year alone, part of year with respondent or siblings of respondent 7 other 8</p>	_	_	_
<p>F. 24 Have you always lived together with (her/him/them)?</p> <p>YES 1 → Go to F.30 NO 2</p> <p>RF 8 → Pass to F.25 DK 9</p>	_	_	_
<p>F. 25 Did they move in with you, or did you move in with (her/him/them)?</p> <p>↓</p> <p>They moved in 1 Respondent moved in 2</p> <p>RF 8 DK 9</p>	_	_	_
<p>F. 26 About how many years have you lived together with (her/him/them)?</p> <p style="text-align: center;"> _ _ </p> <p>RF 88 DK 99] → Go to F.30</p>	_ _	_ _	_ _
<p>F. 27 Where does (do) your (mother/father/parents) live?</p> <p>↓</p> <p>Same house or building 1 Same locality or neighborhood 2 Different locality or neighborhood, but same city 3 Other city in the Mexican Republic 4 Other country 5</p> <p>RF 8 DK 9</p>	_	_	_
<p>F. 28 In the last 2 years, how often have you been in contact – either in person, by telephone, or mail – with your .. ?</p> <p>NUMBER OF TIMES</p> <p>PER: Week 1 Month 2 Year 3 Less than once a year 4] → Pass to F.29</p> <p>NEVER 5 → Go to F.30</p> <p>RF 8 DK 9] → Pass to F.29</p>	_ TIMES	_ TIMES	_ TIMES
<p>F. 29 About the financial situation of your... Would you say that it is...?</p> <p>↓</p> <p>Excellent 1 Very Good 2 Good 3 Fair 4 Poor 5</p> <p>RF 8 DK 9</p>	_	_	_

IF RESPONDENT DID NOT HELP (F.34=2), GO TO F.44

F.43 **Between you and your siblings, who gave the most support?**

↓

You 1
 Other sibling 2
 All equal 3

RF 8
 DK 9

NON-FINANCIAL HELP OF SIBLINGS

F.44 **In the last 2 years, did any of your siblings (or their spouses) help your parents with basic personal activities such as dressing, eating or bathing because of a health problem? Exclude help with household chores, errands, and transportation.**

YES 1 → Pass to F.45
 NO 2 }
 RF 8 → Go to F.48
 DK 9

F.45 **Was this help for at least 1 hour a week, or about 100 hours in the last 2 years?**

YES 1 → Pass to F.46
 NO 2 }
 RF 8 → Go to F.48
 DK 9

F.46 **Who received this help?**

↓

MOTHER 1
 FATHER 2
 BOTH 3

RF 8
 DK 9

IF RESPONDENT DID NOT HELP (F.37=2), GO TO F.48

F.47 **Between you and your siblings, who gave the most support?**

↓

You 1
 Other sibling 2
 All equal 3

RF 8
 DK 9

AGREEMENT WITH SIBLINGS

F.48 **Have you and one or more of your siblings agreed to share only the responsibilities of personal care for your parents?**

YES 1 → Pass to F.49
 NO 2 }
 RF 8 → Go to F.50
 DK 9

F.49 **Excluding yourself, how many siblings have agreed to share these responsibilities?**

↓

NUMBER | | | |

RF 88
 DK 99

F.50 **Have you and one or more of your siblings agreed to share the financial responsibilities for your parents?**

YES 1 → Pass to F.51
 NO 2 }
 RF 8 → Go to F.52
 DK 9

F.51 **Excluding yourself, how many siblings have agreed to share these responsibilities?**

↓

NUMBER | | | |

RF 88
 DK 99

F.52 **INTERVIEWER:
 WITH WHAT FREQUENCY DID THE RESPONDENT NEED HELP TO ANSWER SECTION F. PARENTS AND HELP TO PARENTS?**

NEVER 1
 A FEW TIMES 2
 MOST OF THE TIME 3

FINISH TIME: | | | | : | | | |

PASS TO SECTION G