We are seeking to interview the parents/guardians of <child>. The whole interview with the parents/guardians and child will take about ___ minutes to complete [INTERVIEWER: Adjust as appropriate for you in the field]. All the information you and your family provide will be treated in the strictest confidence and will not be released in any way which would allow the information you provide to be identified with you or your family. If however, we are told something which might suggest that a child or other vulnerable person is at risk we may have to act on it.

The Department of Children and Youth Affairs is funding the study in association with the Department of Social Protection and the Central Statistics Office. The Department of Education and Skills is represented on the Steering Group which oversees the Study. A group of researchers led by the Economic and Social Research Institute (ESRI) and The Children's Research Centre at Trinity College Dublin is carrying out the study.

Section A – Household Composition

A1a. [INTERVIEWER: Is <primary caregiver at time 2> still resident in the household?

Yes ...........................................[]
No ...........................................[]

A1b. Do you have a spouse/partner who lives here with you in the household?

Yes ...........................................[]
No ...........................................[]

A1c. At the time of the last interview in [MM/YYYY] you told us that [number of people resident at time 2] lived here in the household. I'd like to begin by asking you to check the information we collected the last time we visited.
A2. ***The name, sex, date of birth, and relationship of each person to the <primary respondent at time 2> and <child> will be checked and edited where necessary and their residency in the household at time 3 confirmed.***

<table>
<thead>
<tr>
<th>No.</th>
<th>First name</th>
<th>Sex</th>
<th>Date of Birth</th>
<th>Still resident?</th>
<th>Relationship of each member to mother and child</th>
<th>(E) Show Card A2F</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Show Card A2F</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td>M</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>F</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>M</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>F</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>M</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>F</td>
<td></td>
<td>2</td>
<td></td>
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</tr>
<tr>
<td>7</td>
<td></td>
<td>M</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>F</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Interviewer: Mother or lone father should be on line 1. Study Child should be on line 2. Father / Partner on line 3 (if relevant).

**[BLAISE CONDITION: IF ANY PERSON RESIDENT AT TIME 2 IS NO LONGER RESIDENT IN THE HOUSEHOLD AT TIME 3: ASK QUESTIONS AS1 – AS3 ON THE SENSITIVE QUESTIONNAIRE]**

**[INTERVIEWER: IF THE RESPONDENT INDICATES THAT A RESIDENT MEMBER OF THE HOUSEHOLD WAS ACCIDENTALLY OMITTED FROM THE HOUSEHOLD GRID AT TIME 2 - ADD THEM TO THE NEW GRID BELOW]**

**A3a. Has anyone else joined the household since we last spoke and is currently living with you?**

Yes ........................................  [ ]

No ........................................  [ ]  Go to A4

**A3b. How many people have joined the household since we last spoke?**

<table>
<thead>
<tr>
<th>No</th>
<th>First Name</th>
<th>Sex</th>
<th>Date of Birth</th>
<th>If DOB not available</th>
<th>Relationship of each member to mother and child</th>
<th>Since when have they been living with you</th>
<th>Resident</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>M</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>F</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
</tbody>
</table>

[Int: Record details of new persons on household grid at A3 above including when they started living with respondent]
A4. So that's a total of _____ people who live here in the household at present. Is that correct?

Yes .....................  No.....................  [INT: Check Household Grid]

A5. When we last spoke in [MM/YY], we interviewed you as the primary caregiver of <child>. We would like you to complete the primary carer questionnaire with us on this occasion as well. Can I just check, are you still the primary caregiver of <child>?

Yes .....................  No .....................  [INT: please establish who is the Primary Caregiver of <child> at this time]

A6a. Why is that?  

IF PRIMARY CAREGIVER FROM TIME 2 HAS A RESIDENT SPOUSE PARTNER [IDENTIFIED AT A2 ABOVE] THEN:
A6b. You mentioned that <spouse/partner> [identified at A1b above] lives here with you as part of the household. This means that we should interview him/her as the primary caregiver of <child> on this occasion. Is that correct?

Yes .....................  No .....................  [INT: please establish who is the Primary Caregiver of <child> at this time]

IF PRIMARY CAREGIVER AT TIME 2 IS NO LONGER RESIDENT IN THE HOUSEHOLD AT TIME 3 ASK A7a – A9.
A7a. Are you the legal parent / guardian of <child> who usually provides the most care to him/her?

Yes .....................  No .....................  [INT: Ask to speak to PCG]

A7b. [Card A7b] Can you please tell me which of the following best describes your relationship to <child>?

[Interviewer use codes only]

Biological mother/ father ...........................................  Grandparent ...........................................
Adoptive mother/ father ...........................................  Aunt/uncle .............................................
Step-mother / Step-father / Partner of child’s parent ....  Other relative/ in law ...................................
Foster mother / father .............................................  Unrelated guardian .....................................

A7c. Do you have a spouse/partner who lives here with you in the household?

Yes .....................  No .....................

A8a. How many people in total (including yourself and <child>) live here regularly as members of the household?  _________ persons

<table>
<thead>
<tr>
<th>No.</th>
<th>First name/Initial</th>
<th>Sex</th>
<th>Date of Birth</th>
<th>If DOB not available</th>
<th>Was this Person Resident at time 2?</th>
<th>Relationship of each member to mother and child</th>
<th>(E) Show Card A2F</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td></td>
<td>R’SHIP TO: CARD A2E1</td>
<td>R’SHIP TO: CARD A2E2</td>
<td>Not yet at school</td>
</tr>
<tr>
<td>51</td>
<td>1 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>52</td>
<td>1 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>53</td>
<td>1 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>54</td>
<td>1 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>55</td>
<td>1 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
A8b. Was that person born into the household or did they join for another reason?
Born into the household ........................................... ☐ 1
Joined for another reason (specify) ☐ 2

A8c. Since when has this person been living here in the household? ____ month ____ year

Go to A9a

A9a. Does <child> have any full, half or step brother(s) or sister(s) who live outside the household?
Yes ............ ☐ 1
No ............. ☐ 2

A9b. How many full/half/step brother(s)/sister(s) does <child> have who live outside the household? ____ n

A9c. For each full/half/step brother/sister who lives outside the household, can you tell me:
   1) their gender
   2) their Date of Birth (DOB)
   3) their relationship to <child>

   Male   Female   Date of Birth   Relationship to <child>
   1. ☐ 1    ☐ 2    ___ / ___ / ___      SHOW CARD A9c
   2. ☐ 1    ☐ 2    ___ / ___ / ___      SHOW CARD A9c
   3. ☐ 1    ☐ 2    ___ / ___ / ___      SHOW CARD A9c

Section B - Child’s Sleep and Relationships

I’d now like to ask you a few questions about <child’s> habits and routines.

B1a. On a normal day, what time in the evening does <child> usually go to bed? _______ (24 hour clock)

B1b. On a normal day, what time does <child> wake up at in the morning? _______ (24 hour clock)

B2. On a normal day how many hours would the <child> sleep during the day _____ hours _____ mins [INT: IF NONE THEN ENTER ‘0’ FOR BOTH HOURS AND MINUTES]

B3. How much is <child’s> sleeping pattern or habits a problem for you? Would you say… [INT: READ OUT]

   A large problem   A moderate problem   A small problem   No problem at all
   ☐ 1               ☐ 2               ☐ 3               ☐ 4

B4a. How often does <child> take comfort from a special blanket or toy during the daytime?
Most of the time ............ ☐ 1
Sometimes .................. ☐ 2
Never .................... ☐ 3

B4b. How often does <child> take comfort from a special blanket or toy during the nighttime?
Most of the time ............ ☐ 1
Sometimes .................. ☐ 2
Never .................... ☐ 3

B5a. How often does <child> suck a soother during the daytime?
Most of the time ............ ☐ 1
Sometimes .................. ☐ 2
Never .................... ☐ 3

B5b. How often does <child> suck a soother during the nighttime?
Most of the time ............ ☐ 1
Sometimes .................. ☐ 2
Never .................... ☐ 3
B6a. How often does <child> suck their thumb/finger(s) during the daytime?
Most of the time ..........☐1; Sometimes ................. ☐2; Never ................. ☐3

B6b. How often does <child> suck their thumb/finger(s) during the nighttime?
Most of the time ..........☐1; Sometimes ................. ☐2; Never ................. ☐3

B7. [CARD B7] I am going to read out some statements about the relationship between you and <child>. Please listen to each statement and describe the degree to which each of the following statements currently applies.

- **a.** I share an affectionate, warm relationship with my child. ....................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **b.** My child and I always seem to be struggling with each other ....................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **c.** If upset, my child will seek comfort from me ........................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **d.** My child is uncomfortable with physical affection or touch from me..........[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **e.** My child values his/her relationship with me ........................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **f.** When I praise my child he/she beams with pride ................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **g.** My child spontaneously shares information about his/herself ...............[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **h.** My child easily becomes angry at me ..................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **i.** It is easy to be in tune with what my child is feeling .............................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **j.** My child remains angry or is resistant after being disciplined ..............[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **k.** Dealing with my child drains my energy .............................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **l.** When my child is in a bad mood I know we’re in for a long and difficult day[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **m.** My child’s feelings toward me can be unpredictable or can change suddenly...............................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **n.** My child is sneaky or manipulative with me ........................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **o.** My child openly shares his/her feelings and experiences with me........[ ]1 [ ]2 [ ]3 [ ]4 [ ]5

B8. [CARD B8] How often do you do the following when <child> misbehaves?

- **a.** Discuss/Explain why behaviour was wrong...........................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **b.** Ignore him/her .......................................................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **c.** Smack him/her .......................................................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **d.** Shout or yell at him/her ...........................................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **e.** Send him/her out of the room or to his/her bedroom or naughty step....[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **f.** Take away treats ......................................................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **g.** Tell him/her off ........................................................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5
- **h.** Bribe him/her ..........................................................................................[ ]1 [ ]2 [ ]3 [ ]4 [ ]5

**Section C - Child’s physical health and development**

Now I’d like to ask you a few questions about <child’s> health

C1. [CARD C1] In general, how would you describe <child’s> current health?

- Very healthy, no problems .................[ ]1
- Healthy, but a few minor problems ..........[ ]2
- Sometimes quite ill..............................[ ]3
- Almost always unwell..........................[ ]4
C2. Does <child> have any longstanding illness, condition or disability? By longstanding I mean anything that has troubled him/her over a period of time or that is likely to affect him/her over a period of time?

Yes ................................................. □ ................................................. □  → Go to C5

No ................................................. □ ................................................. □

C3. [CARD C3] What longstanding illness, condition or disability does <child> have?
[INT – code for up to 3 illnesses]

a. Asthma ............................................................................................................................. □
b. Cystic Fibrosis .................................................................................................................. □
c. Heart abnormalities ........................................................................................................ □
d. Eczema or any kind of skin allergy ................................................................................ □
e. Any kind of respiratory allergy (including hayfever) ..................................................... □
f. Any kind of food or digestive allergy or food intolerance ............................................. □
g. Problem with non-food allergies, such as to dust, animals or medicine ....................... □
h. Bone, joint or muscle problems ..................................................................................... □
i. A problem using his/her arms or legs ............................................................................. □
j. A problem using his/her hands or fingers ....................................................................... □
k. Hyperactivity/Problems with attention ADD / ADHD .................................................. □
l. Severe behavioural problems ......................................................................................... □
m. Diabetes ......................................................................................................................... □
n. Kidney disease ................................................................................................................. □
o. Migrainous headaches ....................................................................................................... □
p. Epilepsy or seizures .......................................................................................................... □
q. Down syndrome .............................................................................................................. □
r. Spina bifida/hydrocephalis .............................................................................................. □
s. Cerebral palsy ................................................................................................................... □
t. Autism Spectrum Disorder .............................................................................................. □
u. Other (please specify) ______________________________________________________________ □

C3f. To which food or foods. Please specify all types of food to which <child> has a food or digestive allergy or food intolerance

Food 1: _____________________ Food 2: _____________________ Food 3: _____________________

C3_1. Has this illness, condition or disability been diagnosed by a medical professional?

Yes ................................................. □ ................................................. □

No ................................................. □ ................................................. □

C3_2. Since when has <child> had this illness, condition or disability? _____ year

C3_3. Since when has <child> had this illness, condition or disability? _____ month

C4. Do any of these illnesses hamper <child> in his/her daily activities?

Yes, severely ............................. □ ................................................. □

Yes, to some extent ..................... □

No ................................................. □

C3f_4. To which food or foods. Please specify all types of food to which <child> has a food or digestive allergy or food intolerance

Food 1: _____________________ Food 2: _____________________ Food 3: _____________________

6
C5a. In the past 12 months has <child> had any periods when there was wheezing with whistling on his/her chest when he/she breathed?

Yes ........................................ No ......................

C5b. How many separate episodes/bouts of wheezing with whistling on his/her chest has <child> had in the past 12 months? ______ N

C6. In the past 12 months has your child been prescribed the following specifically for this wheezing with whistling on his/her chest?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) An inhaler</td>
<td></td>
</tr>
<tr>
<td>b) Antibiotics</td>
<td></td>
</tr>
<tr>
<td>c) A nebuliser</td>
<td></td>
</tr>
</tbody>
</table>

C7. Can you tell me whether <child> has received the following vaccinations:

(a) the '4-in-1' vaccination (diphtheria, tetanus, pertussis and polio)

Yes ........................................ No ...................... Don't Know/Never heard of it ..............

(b) the 'MMR' vaccination (Measles/Mumps/Rubella) after he/she started school at 4-5 years

Yes ........................................ No ...................... Don't Know/Never heard of it ..............

C8. [CARD C8] In the past 12 months, how many times have you seen or talked on the telephone with any of the following about <child>'s physical or emotional health? [INT: IF NONE THEN ENTER 0 – DO NOT LEAVE BLANK]

a. A general practitioner (GP) .............................................  ____ N
b. A paediatrician / consultant / hospital doctor ........................ N
c. A public health nurse ...................................................... N
d. A practice nurse (i.e. a nurse in a GP’s surgery/clinic) ........ N
e. A psychiatrist/psychologist .............................................. N
f. Accident and Emergency .............................................. N
g. A social worker ........................................................... N
h. A speech therapist ........................................................ N
i. Other medical professional (please specify) ...................... N

C9a. Has <child> received a course of antibiotics in the past 12 months?

Yes ........................................ No ......................

C9b. In total, how many courses of antibiotics has <child> received in the past 12 months? ______ N

C10. Since the time of the last interview in MM/YY, approximately how many nights has <child> spent in hospital? ____ nights

[INT: NOT HOSPITAL OUTPATIENT OR EMERGENCY DEPARTMENT VISITS – IF NONE THEN CODE AS '0']

C11. Most children have accidents at some time. Has child ____ had an accident or injury for which <pronoun> has been taken to the doctor, health centre or hospital?

Yes ........................................ No ......................

C12. How many separate accidents has <child> ever had? ______ accidents
C13. [CARD C13] Thinking about the MOST RECENT (or only) accident or injury, what sort of accident or injury was it?

- Loss of consciousness / knocked out .................................................... 1
- Bang on the head / injury to head without being knocked out ............ 2
- Broken bone or fracture ........................................................................ 3
- Near drowning ........................................................................................ 4
- Swallowed household cleaner / other poison / pills ................................ 5
- Swallowed object .................................................................................... 6
- Cut needing stitches or glue.................................................................... 7
- Injury to mouth or tooth ........................................................................... 8
- Burn or scald ........................................................................................... 9
- Other (please specify) _____________________________________ 10

C14. What age was <child> when this MOST RECENT (or only) accident or injury happened?

_____________ Years     ___________ Months

C15a. Did <child> go to the hospital?  
Yes ............. [ ]  
No ............. [ ]

C15b. Was this to Casualty / Accident and Emergency only or was he/she admitted to a hospital ward?

Casualty / Accident and Emergency only .............................................. [ ]  
Admitted to a Hospital Ward ............................................................... [ ]

C16. Where did this accident happen?

- In your home ........................................................................................ [ ]
- A friend's, neighbour's or relative's house .......................................... [ ]
- In childcare – childminder's house or creche/preschool ....................... [ ]
- In school ............................................................................................... [ ]
- Outside in your local neighbourhood .................................................. [ ]
- Outside, somewhere else – not in your local neighbourhood ............... [ ]
- Other (please specify) ____________________________________ [ ]

C17. Does <child> currently have, or at any time in the past had, any sort of sight problem requiring correction?  
[INTERVIEWER: Explain that 'correction' includes being prescribed glasses]

Yes, currently............. [ ]  
Yes, in the past................ [ ]  
No .................. [ ]

C18a. Does <child> currently have, or at any time in the past had, any sort of hearing problem requiring correction?

Yes, currently............. [ ]  
Yes, in the past................ [ ]  
No .................. [ ]

C18b. Has <child> ever had grommets inserted in his / her eardrums?

Yes ............. [ ]  
No ............. [ ]

C18c. When? Month _____________ Year _______________

C19. [CARD C19] Was there any time in the last 12 months when, in your opinion, <child> needed medical care or treatment for a health problem but he/she did not receive it because:  
[INT: READ OUT]

- You couldn’t afford to pay ........................................................................ [ ]  
- The necessary medical care wasn’t available or accessible to you ........ [ ]  
- You could not take time off work to visit the doctor with <child> .......... [ ]  
- You wanted to wait and see if the problem got better ......................... [ ]  
- Child refused / fear of doctor ................................................................. [ ]  
- Child is still on the waiting list ............................................................... [ ]  
- Other (please specify) _____________________________________ [ ]
C20a. Is <child> currently on a waiting list for any type of medical assessment or treatment?

Yes [1] No [2]

C20b. Please specify ________________________________________________________________

C21. Do you have any concerns about how <child> talks and makes speech sounds? Would you say no, yes a little or yes a lot?


C22. [CARD C22] In which areas does child have difficulties? What speech problems does <child> have?

<table>
<thead>
<tr>
<th>Area</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Reluctant to speak</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Speech not clear to the family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Speech not clear to others</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Speech is developing slowly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Difficulty finding words</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Difficulty putting words together</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Voice sounds unusual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Stutters, stammers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Lisp or difficulty pronouncing certain letter combinations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Other (please specify)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

C23. Has <child> received any treatment for his/her speech or language problem?

Yes [1] No [2]

C24. Has <child> been to visit the dentist because of a problem with his/her teeth?

Yes [1] No [2]

C25a. Was there any time during the past 12 months when <child> really needed to consult a dentist but did not?

Yes [1] No [2]

C25b. Was this because you could not afford it, or some other reason?


C26. [CARD C26] I would like you to tell me about your child’s diet and the types of food <pronoun> does and doesn’t eat. Looking at the card, please tell me how often, on average, your child eats these foods.

<table>
<thead>
<tr>
<th>Food Type</th>
<th>Never</th>
<th>Less than once a month</th>
<th>At least once a month</th>
<th>At least once a week</th>
<th>Most days</th>
<th>Once a day</th>
<th>2-3 per day</th>
<th>4-5 per day</th>
<th>6+ per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Ready to eat breakfast cereals.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Other breakfast cereals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>e.g. porridge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c. White bread and rolls</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Wholemeal, brown bread and rolls</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Other breads e.g. scones,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>croissants.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>f. Savoury breads, e.g. pizza</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Rice, pasta, noodles</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Cakes, pastries, buns</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Biscuits - any</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>j. Chocolate or confectionery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>k. Other sweets</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>l. Ice cream or ice lollies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m. Puddings &amp; chilled desserts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>n. Yoghurt (flavoured or plain but not fromage frais)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>o. Fromage frais (e.g. Petit Filous)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>ax</td>
<td>Bacon, rashers, ham</td>
<td>11</td>
<td>aw</td>
<td>Pork, e.g. as a roast or chops in stews</td>
<td>12</td>
<td>au</td>
<td>Beef, e.g. minced, burgers</td>
<td>13</td>
</tr>
</tbody>
</table>
Section D - Parental Health

Now I’d like to ask you a few questions about your own health.

D1. [CARD D1] In general, how would you say your current health is?

Excellent...........□1 Very good .....□2 Good........□3 Fair........□4 Poor........□5
D2. Do you have any on-going chronic physical or mental health problem, illness or disability?

Yes ...........................................  □  
No ........................................... □  

D3. What is the nature of this problem, illness or disability? Please describe as fully as possible.

[Int. please record diagnosis – not symptoms of the problem.]

______________________________________________________________________________________

______________________________________________________________________________________

D4. Since when have you had this problem, illness or disability?   _______ (mth)   _______ (year)

D5. Are you hampered in your daily activities by this problem, illness or disability?

Yes, severely........... □  
Yes, to some extent........... □  
No ........... □  

D6. Is the family (you, your spouse/partner and child(ren)) covered by a medical card?

Yes, full card .................. □  
Yes, GP only .................. □  
Not covered ........... □  

D7. Is <child> covered by private medical insurance?

Yes ........................................... □  
No ........................................... □  

D8. Does that insurance include the cost of GP visits?

Yes, in full ........... □  
Yes, partially ........... □  
No ........... □  

D9. Does anyone in your household CURRENTLY have any chronic illness, disability or special need which adversely affects the Study Child in any way or the care you are able to give <pronoun>? 

Yes ........................................... □  
No ........................................... □  

D10. What is the relationship of that person/those people to the Study Child?

a. Parent ........................................... □  
b. Brother / Sister ........................................... □  
c. Other relative ........................................... □  
d. Non relative ........................................... □  

D11. Thinking about your free-time, in general would you say you are...

Very physically active ................... □  
Fairly physically active ................... □  
Not very physically active ................... □  
Not at all physically active ................... □  

D12. [CARD D12] Do you think that you are:

Very underweight .......................................................... □  
Moderate underweight .......................................................... □  
Slightly underweight .......................................................... □  
About the right weight .......................................................... □  
Slightly overweight .......................................................... □  
Moderate overweight .......................................................... □  
Very overweight .......................................................... □  
Don't know .......................................................... □  

D13. [CARD D13] How often do you try to lose weight through dieting? Would you say...

Very often  ................... □  
Often ........... □  
Sometimes .... □  
Rarely ........... □  
Never ........... □  

12
Section E - Child's play, activities and temperament

The next section is about activities you may carry out with <child>.
E1. [CARD E1] Look at the card, for each statement, please indicate the answer that best describes the <child’s> behaviour at the present time.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Almost Never</th>
<th>Not Often</th>
<th>Usually does not</th>
<th>Usually does</th>
<th>Frequently</th>
<th>Almost always</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. This child is shy with strange adults</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. When this child starts a project such as a puzzle or model, even if it takes a long time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. If this child wants a toy or sweet while shopping, he/she will easily accept something else instead</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. This child is shy when first meeting new children</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. This child likes to complete one task or activity before going onto the next</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. When this child is angry about something, it is difficult to sidetrack him/her</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. When in a park or visiting, this child will go up to strange children and join in their play</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. This child stays with an activity (e.g. puzzle, construction kit, reading) for a long time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. When shopping together, if I do not buy what this child wants (e.g. sweets, clothing), he/she cries and yells</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. When unknown adults visit our home, this child is immediately friendly and approaches them</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k. If this child is upset, it is hard to comfort him/her</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l. When a toy or game becomes difficult, this child quickly turns to another activity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

E2. Overall, compared to other children of the same age, do you think <child> is... [INT: READ OUT]

Easier than average .............................................
About average ....................................................... More difficult than average .................................

E3a. [CARD E3a] How often would you do any of the following with <child>?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Hardly ever</th>
<th>Occasionally</th>
<th>One or two times a week</th>
<th>Everyday</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Play with &lt;child&gt; using toys or games / puzzles</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>b. Play computer games with &lt;child&gt;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>c. Visit the library</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>d. Listen to &lt;child&gt; read</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>e. Read to &lt;child&gt;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>f. Use computer with &lt;child&gt; in educational ways</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>g. Sport or physical activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>h. Go on educational visits outside home such as museums, farms</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>i. Go shopping</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

13
E3b. [CARD E3b] Does <child> do any of the following at home?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Hardly ever</th>
<th>Occasionally</th>
<th>One or two times a week</th>
<th>Everyday</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Plays on computer, tablet device (e.g. iPad) or smartphone (e.g. iPhone) by themselves</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Plays “make believe” or pretend games</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Paints, draws or makes models</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Enjoys dance, music, movement</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

E4. [CARD E4] In the past month, has <child> done any of these things with you or another family member?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Gone to a movie</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Gone to a sporting event in which the child was not a player</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Gone to a concert, play, museum, art gallery, community or school event</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Attended a religious service, church, temple, synagogue or mosque</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Visited a library</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Swimming</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

E5. [CARD E5] Does <child> attend a sports club or sports group

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Regularly, two hours per week</th>
<th>Twice a month</th>
<th>Regularly, more than two hours per week</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>6</td>
</tr>
</tbody>
</table>

E6. Looking at Card E6, can you tell me how often <child>

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Less than once per week</th>
<th>1-2 times per week</th>
<th>3-6 times per week</th>
<th>Every day</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Climbs on trees, climbing frame, wall bars etc</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>b) Plays with a ball</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>c) Plays chasing</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>d) Rides a bike, tricycle or scooter</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>e) Skates</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

E7. About how many children’s books does <child> have access to in your home now, including any library books? Would you estimate… [INT: READ OUT]

<table>
<thead>
<tr>
<th>Books</th>
<th>None</th>
<th>1 less than 2 hours</th>
<th>2- less than 3 hours</th>
<th>3 or more hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

E8a. I would like you to think about all the time <child> spends on an average weekday looking at the TV, videos, dvds, computer, Ipad, smart phones, electronic games system. We are talking here about the amount of time <child> spends in front of any ‘screen’ (computer or TV or game) in an average weekday. How much time would <child> spend on this type of ‘screen time’ on an average weekday?

<table>
<thead>
<tr>
<th>Time</th>
<th>None</th>
<th>1 less than 2 hours</th>
<th>2- less than 3 hours</th>
<th>3 or more hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

E8b. What does <child> MOSTLY do on that ‘screen time’? Is s/he usually:

Playing educational games
Playing other games
Watching movies, videos, other TV
Doing a mixture of all types of activities

E9. Does your child ever access the internet using a computer, tablet, smartphone or game system (e.g. Xbox) at home?

<table>
<thead>
<tr>
<th>Access to Internet</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

E10. Is <child> supervised by you or another adult when he/she accesses the internet?

<table>
<thead>
<tr>
<th>Supervision Level</th>
<th>Always</th>
<th>Sometimes</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
Section F - Child’s Functioning and relationships

Now I’d like to ask you some questions about <child’s> emotional health and wellbeing.

F1. [CARD F1] Listed below is a set of statements which could be used to describe the Study Child’s behaviour. For each item, please indicate whether it is Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain. Please give answers on the basis of the Study Child’s behaviour over the last six months. Use answers 1, 2 or 3 as on the card if you like.

- Considerate of other people’s feelings .......................................................... 1 2 3
- Restless, overactive, cannot stay still for long .............................................. 1 2 3
- Often complains of headaches, stomach-aches or sickness ...................... 1 2 3
- Shares readily with other children (treats, toys, pencils etc.) ....................... 1 2 3
- Often has temper tantrums or hot tempers .................................................. 1 2 3
- Rather solitary, tends to play alone ............................................................... 1 2 3
- Helpful if someone is hurt, upset or feeling ill ............................................. 1 2 3
- Constantly fidgeting or squirming ............................................................... 1 2 3
- Has at least one good friend ...................................................................... 1 2 3
- Often fights with other children or bullies them ......................................... 1 2 3
- Often unhappy, down-hearted or tearful ..................................................... 1 2 3
- Generally liked by other children ............................................................... 1 2 3
- Easily distracted, concentration wanders .................................................. 1 2 3
- Nervous or clingy in new situations, easily loses confidence ..................... 1 2 3
- Kind to younger children ........................................................................... 1 2 3
- Often lies or cheats ..................................................................................... 1 2 3
- Picked on or bullied by other children ....................................................... 1 2 3
- Often volunteers to help others (parents, teachers, other children) .......... 1 2 3
- Thinks things out before acting .................................................................. 1 2 3
- Steals from home, school or elsewhere ....................................................... 1 2 3
- Gets on better with adults than with other children .................................... 1 2 3
- Many fears, easily scared .......................................................................... 1 2 3
- Sees tasks through to the end, good attention span ..................................... 1 2 3

F2. Overall, do you think that your child has difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?

<table>
<thead>
<tr>
<th>No</th>
<th>Yes, minor difficulties</th>
<th>Yes, definite difficulties</th>
<th>Yes, severe difficulties</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

F3. How long have these difficulties been present?

Less than a month ........... 1  1-5 months ...... 2  6-12 months ...... 3  Over a year ...... 4

F4. Do the difficulties upset or distress your child?

Not at all................. 1  Only a little ...... 2  Quite a lot ...... 3  A great deal ...... 4

F5. Do the difficulties interfere with your child’s everyday life in the following areas?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Only a little</th>
<th>Quite a lot</th>
<th>A great deal</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Home life</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>b. Friendships</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>c. Classroom learning</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>d. Leisure activities</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

F6. Do the difficulties put a burden on you or the family as a whole?

Not at all............ 1  Only a little ...... 2  Quite a lot ...... 3  A great deal ...... 4
Section G – School / Childcare / Preschool

G1. Has <child> started Junior Infants in primary school?
Note that the Early Start Programme is counted as preschool (not primary school). The Early Start Programme provides preschool places for 3 and 4 year olds in a small number of primary schools around the country.

Yes ............................................ [1] GO TO SECTION G1, QUESTION G2
No .................................................. [2] GO TO SECTION G2, QUESTION G35
Child is homeschooled ............... [2] GO TO SECTION G1, QUESTION G20

Section G1 – Child has started school

Subsection A – School details, school choice and transition to school

Now I'd like to ask you some questions on school details, school choice and transition to school

G2. When did he/she start Junior Infants in primary school? ________ month ________ year

G3. What school is <child> currently attending? Please give the full name and address as exactly as possible

Name of school: _______________________________________
Address 1: ____________________________________________
Address 2: ____________________________________________
Address 3: ____________________________________________
Address 4: ____________________________________________
County: _______________________________________________

G4. And (can I just check) is it a single sex or mixed school?


G5. What class (or year) is <child> currently in?

[INTERVIEWER: If interview is in July / August please enter the class <child> has just completed]

Junior Infants .................................................. [1]
Senior Infants .................................................. [2]
First class ........................................................ [3]
Other (please specify) ____________________________ [4]

G6. When did you register or enroll Study Child with the school?

________ month ________ year

G7a. Had you registered or enrolled <child> in other primary schools?

No .............. [2]

G8. Does <child> have any older brothers or sisters in the school they are attending?

Yes ............ [1]  No ............ [2]
The next few questions are about the time when you were deciding to enroll <child> at a primary school.

G9. [CARD G9] Before enrolling <child> at a primary school, did you look for advice or information about starting primary school from any of the following sources?

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Primary school staff</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>b. Preschool staff (e.g. nursery or playgroup staff)</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>c. Friends</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>d. Other parents</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>e. Your siblings</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>f. School website</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>g. Other (please specify)</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
</tbody>
</table>

G10. Did you have a choice about which school <child> would go to? Yes ☐ 1 No ☐ 2

[CARD G10] When thinking about schools that <child> might go to, how important were the following factors? If <child> was already attending a preschool class at this school, please give the reason you chose to send him/her to the preschool class at this school.

<table>
<thead>
<tr>
<th>Factor</th>
<th>Very important</th>
<th>Somewhat important</th>
<th>Not very important</th>
<th>Not at all important</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. It’s the local school or nearest to home</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. His/her friends go or were intending to go there</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. His/her brother/sister went/go there</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. General good impression of school/good reputation</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. The ethos of the school in terms of religion or beliefs</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. The gender mix of the school (co-educational/single sex)</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Language of instruction used in the school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Other reason (specify)</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

G11. [CARD G11] Did you do any of the things on this card to get <child> ready for starting school?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. You attended an information meeting arranged by the school</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>b. You decided to visit the school before the Study Child started</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>c. Sought advice from friends, neighbours and/or family</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>d. Practised reading, writing or numbers</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>e. Talked to the Study Child about school</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>f. Something else (Please specify)</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
</tbody>
</table>

G12. [CARD G12] I am going to read out a series of statements about how you felt about Study Child starting school, please tell me how much you agree or disagree with each statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Neither agree nor disagree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I felt that &lt;child&gt; was able to mix with other children well enough to get along at primary school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. I believe that &lt;child&gt; understood enough about taking turns and sharing to manage at primary school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. &lt;Child&gt; could go to the toilet on his/her own before starting primary school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. I felt that &lt;child&gt; had the pre-reading and writing skills necessary to start school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. I was worried that &lt;child&gt; would find being apart from me too difficult</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. I was concerned that &lt;child&gt; would be reluctant to go to primary school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. I was worried that &lt;child&gt; was not independent enough to cope with primary school</td>
<td>☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
G13. How often would you or your spouse / partner usually speak in person to <child’s> teacher?

Daily .................□1 Weekly .............□2 Monthly ...........□3 Less often .............□4

G14. [CARD G14] Children sometimes have problems adjusting to primary school. On average, since <child> has started primary school...

a. How often has <child> complained about school? .................□1  □2  □3  □4
b. How often has <child> said good things about school? .................□1  □2  □3  □4
c. How often has <child> found it hard to sit still and listen in class? .................□1  □2  □3  □4
d. How often has <child> been upset or reluctant to go to school? .................□1  □2  □3  □4

The next few questions are about how you think <child> is getting on at school.

G15a. How do you feel about the pace of learning at school for Study Child? Do you feel it is...
[INT: Read out]

Too fast for <child> ........................................................................□1
Just right for <child> ........................................................................□2
Too slow for <child> ........................................................................□3

G15b. And which of these statements best describes how <child> is finding his/her school work?
[INT: Read out]

<Child> usually finds school work hard ........................................□1
<Child> sometimes finds school work hard .......................................□2
<Child> never finds school work hard ................................................□3

G16. How confident are you that you know what your child is learning or doing in school?

Very confident ......□1 Somewhat confident □2 Not very confident □3 Not at all confident □4

G17. [CARD G17] How is information communicated to you from the school?

a. Chatting informally with teacher ...............................................□1  □2
b. Parent-teacher meeting / other formal meeting .........................□1  □2
c. Newsletter ................................................................................□1  □2
d. Written report ..........................................................................□1  □2
e. Phone call ................................................................................□1  □2
f. Text message ...........................................................................□1  □2
g. Letter or note with the child or in his / her journal ...................□1  □2
h. What child tells me .....................................................................□1  □2
i. School’s website or blog .............................................................□1  □2

G18. [CARD G18] Can you tell me how much you agree or disagree with these statements?

a. <Child> finds it hard to sit still and listen in class .....................□1  □2  □3  □4
b. <Child’s> teacher knows him/her well and gives him/her just the support he/she needs ..............................................................□1  □2  □3  □4  □5  □6
c. <Child> was happier with the way he/she learned things in preschool/nursery ......................................................□1  □2  □3  □4  □5  □6
d. <Child> has adjusted easily to the way they do things in school...□1  □2  □3  □4  □5  □6

G19. Who usually minds <child> if he/she is too sick to attend school?
[Interviewer: Read out answer categories]

Mother .................□1 Father .....................□2 Parents take turns □3 Grandparents □4
Other relative ........□5 Friend/ Neighbour □6 Childminder □7 Other (please specify) □8
Subsection B – Term-time out of school care for those who have started school

Now I’d like to ask you some questions about childcare arrangements for Study Child after school during the school term.

G20. Is <child> minded by someone other than you or your resident spouse / partner on a regular basis after school, during the school year (between September and June)?

Yes ................................................. 1
No .................................................. 2
Go to G28

G21. (a) [Card G21] Who minds <child> on a regular basis each week after school?
(b) number of days per week <child> spends in each type of childcare
(c) number of hours per week <child> spends in each type of childcare
(d) how much you pay for this childcare for <child> per week
(e) whether this is your main type of childcare

[Tick all that apply]  

<table>
<thead>
<tr>
<th>Number of days</th>
<th>Number of hours</th>
<th>Cost per week</th>
<th>Main type of care</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ N</td>
<td>___ N</td>
<td>€___</td>
<td></td>
</tr>
</tbody>
</table>

If more than one child in childcare arrangement, take the average cost per child

G22a. [CARD G22] Please specify how this person is related to <child>
1. Grandmother of <child> ............... 1
2. Grandfather of <child> ............... 2
3. Aunt /Uncle of <child> ............... 3
4. Brother / Sister of <child> .......... 4
5. Non-resident Parent ................... 5
6. Cousin of <child> ..................... 6
7. Other relative ............................. 7

G22b. [CARD G22] Please specify how this person is related to <child>
1. Grandmother of <child> ............... 1
2. Grandfather of <child> ............... 2
3. Aunt /Uncle of <child> ............... 3
4. Brother / Sister of <child> .......... 4
5. Non-resident Parent ................... 5
6. Cousin of <child> ..................... 6
7. Other relative ............................. 7

G23a. [CARD G23a] Which of the following best describes that person?
1. Au pair / Nanny (live in) ............. 1
2. Friend / Neighbour ..................... 2
3. Childminder .............................. 3
4. Other ...................................... 4

G23b. [CARD G23b] Which of the following best describes that person?
1. Friend / Neighbour ..................... 1
2. Childminder .............................. 2
3. Other ...................................... 3

G24. What age was <child> when you started to use the main childcare arrangement? ______ years ______ months

[INT: IF ANSWER AT G21 IS (A) OR (B) PLEASE GO TO G26]

G25a. Thinking now of the main type of childcare, in total, how many children (including <child>) are looked after in the room where <child> is cared for?

_____ number of children

G25b. Thinking now of the main type of childcare, in total, how many adults supervise the children in the room where <child> is cared for?

_____ number of adults
G26. [CARD G26] The next questions are about the place where <child> is cared for. Please read each statement and indicate how characteristic each statement is of the MAIN place where <child> is cared for. How often do the following statements describe your experience?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. There are lots of creative activities going on.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. It’s an interesting place for my child.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. There are plenty of toys, books, pictures, and music for my child.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. In care, my child has many natural learning experiences.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. The caregiver provides activities that are just right for my child.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. My child gets a lot of individual attention</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. My child likes the caregiver</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

G27. Given your family income, how easy or difficult do you find it to pay for the childcare you use? Is it...

<table>
<thead>
<tr>
<th>Level</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very easy</td>
<td>1</td>
</tr>
<tr>
<td>Easy</td>
<td>2</td>
</tr>
<tr>
<td>Neither easy nor difficult</td>
<td>3</td>
</tr>
<tr>
<td>Difficult</td>
<td>4</td>
</tr>
<tr>
<td>Or very difficult</td>
<td>5</td>
</tr>
<tr>
<td>Don’t pay</td>
<td>6</td>
</tr>
</tbody>
</table>

Subsection C – Attendance at Preschool prior to starting school

Now I’d like to ask you some questions about attendance at preschool prior to starting school

Children aged between 3 years 3 months and 4 years 6 months on the 1st of September each year are entitled to free part-time preschool places funded by the Government. For these questions, I would like you to think about only those preschool places funded by the free preschool year.

G28. Did you avail of the free preschool year for the Study Child?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Never heard of it</td>
<td>3</td>
</tr>
</tbody>
</table>

G28b. Why not?

<table>
<thead>
<tr>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

G28c. Would you have been able to send <child> to preschool had it not been for the free preschool year scheme?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, would have sent him/her anyway</td>
<td>1</td>
</tr>
<tr>
<td>No, wouldn’t have been able to send him / her</td>
<td>2</td>
</tr>
</tbody>
</table>

G29. How best would you describe the setting in which the free preschool year was made available:

<table>
<thead>
<tr>
<th>Setting</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschool</td>
<td>1</td>
</tr>
<tr>
<td>Naionra</td>
<td>2</td>
</tr>
<tr>
<td>Montessori</td>
<td>3</td>
</tr>
<tr>
<td>Creche</td>
<td>4</td>
</tr>
<tr>
<td>Playgroup</td>
<td>5</td>
</tr>
<tr>
<td>Other group care setting (please specify)</td>
<td>6</td>
</tr>
</tbody>
</table>

G30a. What age was <child> when he/she first attended Free Preschool Year? Age: _____ years _____ months

G30b. What age was <child> when he/she finished attending this Free Preschool Year? Age: _____ years _____ months

G31a. Did they attend only for the free 3 hours per day or did you top this up with more hours in the same preschool setting?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only 3 hours per day</td>
<td>1</td>
</tr>
<tr>
<td>Topped up with more hours</td>
<td>2</td>
</tr>
</tbody>
</table>

G31b. How many additional hours in this same preschool setting per week? ________ hours

G31c. How much did you pay per week in total for these additional hours? ________ euros
G32. [CARD G32] The next questions are about <child>’s preschool. Please read each statement and indicate how characteristic each statement was of the preschool.
How often did the following statements describe your experience

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. There were lots of creative activities going on.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. It was an interesting place for my child.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. There were plenty of toys, books, pictures, and music for my child.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. In care, my child had many natural learning experiences.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. The caregiver provided activities that are just right for my child.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. My child felt safe and secure in care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. The caregiver was warm and affectionate toward my child</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. It was a healthy place for my child</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. My child was treated with respect</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. My child was safe with this caregiver</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>k. My child got a lot of individual attention</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l. My caregiver and I shared information</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m. My caregiver was open to new information and learning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>n. My caregiver showed she (he) knew a lot about children and their needs.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>o. The caregiver handled discipline matters easily without being harsh</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>p. My child liked the caregiver</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>q. My caregiver was supportive of me as a parent</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>r. My caregiver was happy to see my child</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

G33. How confident were you that you knew what your child was learning or doing in preschool?

Very confident □ | Somewhat confident □ | Not very confident □ | Not at all confident □

G34. Who usually minded <child> if he/she was too sick to attend preschool?
[Interviewer: Read out answer categories]

G35. [CARD 35] When thinking about why you chose not to send <child> to primary school yet, how important were each of the following factors?

<table>
<thead>
<tr>
<th></th>
<th>Very important</th>
<th>Somewhat important</th>
<th>Not very important</th>
<th>Not at all important</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I thought &lt;child&gt; was too young</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>b. I didn’t think &lt;child&gt; was ready to start school</td>
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<tr>
<td>c. Not able to due to &lt;child&gt; health problem/disability</td>
<td></td>
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<tr>
<td>d. &lt;Child&gt; has problems with his/her speech or language development</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>e. Preschool/School advised deferring entry</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>f. Someone else advised deferring entry(Please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Something else (Please specify)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
G36. Have you decided yet which school <child> will attend?

Yes .........[1]  No .........[2]

As you know, we would like to approach the schools being attended by the children in Growing Up in Ireland from next September so someone from Head Office will be in touch with you in August when things should be clearer for you in terms of which school <child> will be attending.

G37. Please record full name and address of the school <child> will attend.

Name of school: _______________________________________
Address 1: ____________________________________________
Address 2: ____________________________________________
Address 3: ____________________________________________
Address 4: ____________________________________________
County: _______________________________________________

G38. When will <child> start school? Which month and year?

______ month _______ year  Haven’t decided yet ...[1]

G39. When did you register or enroll Study Child with the school?

______ month _______ year

G40. Does <child> have any older brothers or sisters in the school they will attend?

Yes ........[1]  No .............[2]

G41a. Have you registered or enrolled <child> in other primary schools?

Yes ...........[1]  No .............[2]

The next few questions are about the time when you were deciding to enroll <child> at a primary school.

G42. [CARD G42] Before enrolling <child> at a primary school, did you look for advice or information about starting primary school from any of the following sources? Please tick all that apply

a. Primary school staff .........................................................[1]
b. Preschool staff (e.g. nursery or playgroup staff) ..............[2]
c. Friends ...........................................................................[3]
d. Other parents ..................................................................[4]
e. Your siblings ..................................................................[5]
f. School Website .............................................................[6]
g. Other (specify) ________________________________________[7]

G43. Did you have a choice about which school <child> would go to? Yes ....[1]  No ..........[2]

G44. [CARD G44] When thinking about schools that <child> might go to, how important were the following factors? If <child> was already attending a preschool class at this school, please give the reason you chose to send him/her to the preschool class at this school

<table>
<thead>
<tr>
<th>Factor</th>
<th>Very important</th>
<th>Somewhat important</th>
<th>Not very important</th>
<th>Not at all important</th>
</tr>
</thead>
</table>
a. It’s the local school or nearest to home ..................................[1] |                |                    |                    |                     |
b. His/her friends go or were intending to go there                    [2] |                |                    |                    |                     |
c. His/her brother/sister went/go there ........................................[3]|                |                    |                    |                     |
d. General good impression of school/good reputation                    [4] |                |                    |                    |                     |
e. The ethos of the school in terms of religion or beliefs ..............[5] |                |                    |                    |                     |
f. The gender mix of the school (co-educational / single sex) ..........[6] |                |                    |                    |                     |
g. Language of instruction used in the school ................................[7] |                |                    |                    |                     |
h. Other reason (specify) ..........................................................[8] |                |                    |                    |                     |
G45. [CARD G45] Are you doing or do you plan to do any of the things on this card to get <child> ready for starting school?

- a. Attend an information meeting arranged by the school .................................................................
  - Yes [ ] No [ ]
- b. Visit the school before the Study Child starts ...........................................................................
  - Yes [ ] No [ ]
- c. Seek advice from friends, neighbours and/or family ...................................................................
  - Yes [ ] No [ ]
- d. Practice reading, writing or numbers ...........................................................................................
  - Yes [ ] No [ ]
- e. Talk to the Study Child about school ..........................................................................................
  - Yes [ ] No [ ]
- f. Something else (Please specify) ....................................................................................................
  - Yes [ ] No [ ]

G46. [CARD G46] I am going to read out a series of statements about how you feel about Study Child starting school, please tell me how much you agree or disagree with each statement.

- a. I feel that <child> will be able to mix with other children well enough to get along at primary school .................................................................
  - Strongly agree [ ] Agree [ ] Neither agree nor disagree [ ] Disagree [ ] Strongly disagree [ ]
- b. I believe that <child> understands enough about taking turns and sharing to manage at primary school .................................................................
  - Strongly agree [ ] Agree [ ] Neither agree nor disagree [ ] Disagree [ ] Strongly disagree [ ]
- c. <Child> can go to the toilet on his/her own before starting primary school...................................
  - Yes [ ] No [ ]
- d. I feel that <child> has the pre-reading and writing skills necessary to start school .................................................................
  - Yes [ ] No [ ]
- e. I am worried that <child> will find being apart from me too difficult ...........................................
  - Yes [ ] No [ ]
- f. I am concerned that <child> will be reluctant to go to primary school ...........................................
  - Yes [ ] No [ ]
- g. I am worried that <child> is not independent enough to cope with primary school .......................  
  - Yes [ ] No [ ]

Subsection B Attendance at Preschool – Child NOT at school

Children aged between 3 years 3 months and 4 years 6 months on the 1st of September each year are entitled to free part-time preschool places funded by the Government. For these questions, I would like you to think about only those preschool places funded by the free preschool year.

G47a. Have you availed of the Free Preschool Year for the Study Child?

- Yes [ ]
- No [ ]
- GO TO G55 Never heard of it .... [ ]

G47b. Why not? ________________________________________________________________

G47c. Would you have been able to send <child> to preschool had it not been for the free preschool year scheme?

- Yes, would have sent him/her anyway ...... [ ]
- No, wouldn’t have been able to send him / her ................ [ ]

G48. How best would you describe the setting in which the free preschool year was made available:

- Preschool ................................................................. [ ]
- Naionra ................................................................. [ ]
- Montessori ................................................................. [ ]
- Creche ................................................................. [ ]
- Playgroup ................................................................. [ ]
- Other group care setting (please specify) ________________________________ [ ]

G49a. What age was <child> when he/she first attended Free Preschool Year? Age: ________ years ________ months

G49b. What age was <child> when he/she finished attending this Free Preschool Year OR What age will <child> be when he/she finishes, if he/she has not yet finished? Age: ________ years ________ months
G50a. Did they attend only for the free 3 hours per day or did you top this up with more hours in the same preschool setting?

Only 3 hours per day ............................................. ☐ 1 .... Topped up with more hours .................................................. ☐ 2

G50b. How many additional hours in this same preschool setting? .................................................. □ ...........................

G50c. How much did you pay per week in total for these additional hours? .................................................. □ .......................... euros

G51. [CARD 51] Children sometimes have problems adjusting to preschool. On average, since child has started preschool...

<table>
<thead>
<tr>
<th>Statement</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. How often has &lt;child&gt; complained about preschool?</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>b. How often has &lt;child&gt; said good things about preschool?</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>c. How often has &lt;child&gt; looked forward to going to preschool?</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>d. How often has &lt;child&gt; been upset or reluctant to go to preschool?</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>e. My caregiver is/was happy to see my child</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>f. My caregiver is/was supp ortive of me as a parent</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>g. The caregiver handles/handled discipline matters easily without</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>h. My child feels/felt safe and secure in care</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>i. The caregiver provides/provided activities that are/were just right for</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>j. In care, my child has/had many natural learning experiences.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>k. The caregiver is/was warm and affectionate toward my child</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>l. My child is/was safe with this caregiver</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>m. My child is/was treated with respect</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>n. My caregiver is/was open to new information and learning</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>o. My caregiver shows/showed she (he) knows/knew a lot about children and</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>their needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>p. The caregiver handles/handled discipline matters easily without</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>being harsh</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>q. My caregiver is/was supportive of me as a parent</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>r. My caregiver is/was happy to see my child</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
</tbody>
</table>

G52. [CARD G52] The next questions are about <child>’s preschool. Please read each statement and indicate how characteristic each statement is/was of the preschool.

How often do/did the following statements describe your experience

<table>
<thead>
<tr>
<th>Statement</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. There are/were lots of creative activities going on.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>b. It is/was an interesting place for my child.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>c. There are/were plenty of toys, books, pictures, and music for my child.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>d. In care, my child has/had many natural learning experiences.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>e. The caregiver provided/provided activities that were just right for my</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>child</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>f. My child feels/felt safe and secure in care.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
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<td>☐ 5</td>
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<td>g. The caregiver is/was warm and affectionate toward my child</td>
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<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>h. It is/was a healthy place for my child</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
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<td>i. My child is/was treated with respect</td>
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<td>j. My child is/was safe with this caregiver</td>
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<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>k. My child got a lot of individual attention</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>l. My caregiver and I share/shared information</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>m. My caregiver is/was open to new information and learning</td>
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<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>being harsh</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>p. My child liked/liked the caregiver</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>q. My caregiver is/was supportive of me as a parent</td>
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<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
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<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
</tbody>
</table>

G53. How confident are/were you that you know/knew what your child was learning or doing in preschool?

Very confident ...... ☐ 1 ... Somewhat confident ☐ 2 ... Not very confident ...... ☐ 3 ... Not at all confident ☐ 4

G54. Who usually minds <child> if he/she is too sick to attend preschool?
[Interviewer: Read out answer categories]

Mother ☐ 1 ... Father ☐ 2 ... Parents take turns ☐ 3 ... Grandparents ☐ 4
Other relative ... ☐ 6 ... Friend/ Neighbour ☐ 8 ... Childminder ☐ 7 ... Other (please specify) ☐ 8
Subsection C. Term-time care arrangement:

Additional care arrangements for children attending preschool

Alternative care arrangement for children not attending preschool

Now I'd like to ask you some questions about term-time childcare arrangements.

G55. (Thinking of any care arrangements in addition to those provided by the Free PreSchool Year or additional hours availed of in this preschool setting) Thinking of the school year Sept 2012 to June 2013, was <child> minded by someone other than you or your resident spouse/partner for 8 hours or more per week during the day?

Yes ................................................. [ ]
No ................................................... [ ]
If no go to G64

G56. (a) [Card G56] Who minds <child> on a regular basis each week?
(b) number of days per week <child> spends in each type of childcare
(c) number of hours per week <child> spends in each type of childcare
(d) how much you pay for this childcare for <child> per week
(e) whether this is your main type of childcare

[Tick all that apply] Number of days Number of hours Cost per week Main type of care

a. A relative in your home ............................................. [ ]
   Go to G57a
   _______N _______N €_______
   [ ]

b. A non-relative in your home ........................................... [ ]
   Go to G58a
   _______N _______N €_______
   [ ]

c. A relative in their home ............................................. [ ]
   Go to G57b
   _______N _______N €_______
   [ ]

d. A non-relative in their home ........................................... [ ]
   Go to G58b
   _______N _______N €_______
   [ ]
e. Creche, Montessori, preschool, naíonra or other centre-based care setting, .......
   _______N _______N €_______
   [ ]
f. Other (please specify) ................................................ [ ]
   _______N _______N €_______
   [ ]

G57a. [Card G57] Please specify how this person is related to <child>

a. Grandmother of <child> ............................................. [ ]
   [ ]
b. Grandfather of <child> ............................................. [ ]
   [ ]
c. Aunt /Uncle of <child> ............................................. [ ]
   [ ]
d. Brother / Sister of <child> ......................................... [ ]
   [ ]
e. Non-resident Parent ................................................. [ ]
   [ ]
f. Cousin of <child> .................................................... [ ]
   [ ]
g. Other relative ...................................................... [ ]
   [ ]

G57b. [Card G57] Please specify how this person is related to <child>

a. Grandmother of <child> ............................................. [ ]
   [ ]
b. Grandfather of <child> ............................................. [ ]
   [ ]
c. Aunt /Uncle of <child> ............................................. [ ]
   [ ]
d. Brother / Sister of <child> ......................................... [ ]
   [ ]
e. Non-resident Parent ................................................. [ ]
   [ ]
f. Cousin of <child> .................................................... [ ]
   [ ]
g. Other relative ...................................................... [ ]
   [ ]

G58a. [Card G58a] Which of the following best describes that person?

a. Au pair / Nanny (live in) ............................................. [ ]
   [ ]
b. Friend / Neighbour ................................................ [ ]
   [ ]
c. Childminder .......................................................... [ ]
   [ ]
d. Other ................................................................. [ ]
   [ ]

G58b. [Card G58b] Which of the following best describes that person?

a. Friend / Neighbour ................................................ [ ]
   [ ]
b. Childminder .......................................................... [ ]
   [ ]
c. Other ................................................................. [ ]
   [ ]

G59. What age was <child> when you started to use the main childcare arrangement? _____years _____months

[INT: IF ANSWER AT G56 IS (A) OR (B) PLEASE GO TO G61]

G60a. Thinking now of the main type of childcare, in total, how many children (including <child>) are looked after in the room where <child> is cared for?

   _____ number of children

G60b. Thinking now of the main type of childcare, in total, how many adults supervise the children in the room where <child> is cared for?

   _____ number of adults

G61. [Card G61] What is the main reason the Study Child is using regular child care at present?

1. Parent’s work or study commitments ........................................... [ ]
2. Parent’s sport, shopping, social or community activities ................. [ ]
3. Give parent a break or time alone........................................... [ ]
4. Good for child’s social development/to mix with other children ........ [ ]
5. Good for child’s intellectual or language development .................... [ ]
6. Establish relationships with grandparents or non-resident parents .... [ ]
7. Other ........................................................................ [ ]
[Card G62] The next questions are about the place where <child> is cared for. Please read each statement and indicate how characteristic each statement is of the MAIN place where <child> is cared for.

How often do the following statements describe your experience

Never  Rarely  Sometimes  Often  Always

a. There are lots of creative activities going on. ...........................................□ 1 □ 2 □ 3 □ 4 □ 5

b. It’s an interesting place for my child. ...........................................................□ 1 □ 2 □ 3 □ 4 □ 5

c. There are plenty of toys, books, pictures, and music for my child. ...............□ 1 □ 2 □ 3 □ 4 □ 5

d. In care, my child has many natural learning experiences. .........................□ 1 □ 2 □ 3 □ 4 □ 5

e. The caregiver provides activities that are just right for my child ..................□ 1 □ 2 □ 3 □ 4 □ 5

f. My child gets a lot of individual attention ...................................................□ 1 □ 2 □ 3 □ 4 □ 5

g. My child likes the caregiver ...........................................................................□ 1 □ 2 □ 3 □ 4 □ 5

G63. Given your family income, how easy or difficult do you find it to pay for the childcare you use? Is it...

Very easy .. □ 1 Easy …□ 2 Neither easy nor difficult …□ 3 Difficult …□ 4 Or very difficult……□ 5 Don’t pay □ 6

Section G3 – NOT IN SCHOOL AND NOT IN CHILDCARE:

G64. What is the main reason the Study Child does not have any regular child care arrangements at present?

Parent is available, other care not needed .............................................□ 1
Problems with getting child care places around here ...............................□ 2
Childcare not available around here .....................................................□ 3
Transport problems to childcare ...........................................................□ 4
Can’t afford it - cost too high .................................................................□ 5
Concerned with quality of care ..............................................................□ 6
Child has disability or special needs .......................................................□ 7
Didn’t want child cared for by strangers ..................................................□ 8
Parent(s) is / are the best for the child at this age .....................................□ 9
Other (please specify) ________________________________________________□ 10

Section G4 – CHILDCARE ARRANGEMENT WHEN CHILD TURNED 3 YEARS OF AGE:

G65. Thinking back to when <child> turned 3 years of age, before he/she started the free preschool year (if relevant), was he/she minded on a regular basis by anyone other than you or your resident spouse/partner for 8 or more hours per week?

Yes …□ 1  No …□ 2

G66. What age was <child> when you started to use that childcare arrangement.
(If more than one type of childcare was used when <child> turned 3 years of age please answer in respect of the main type of care used)?

_________years _________months

Section H – Parenting and Family Context

I’d now like to ask you some general questions about parenting.

H1. How many times in the past week has the family sat down to eat an evening meal together? ____ (range 0 – 7)

The next questions are about being a parent. There are no right or wrong answers, we are just asking about what happens in your family.
H2. [Card H2] Thinking about <child> over the last six months, how often did you...? (Tick one box per row only)

a. Hug or hold this child for no particular reason .............................................................. □ 1 □ 2 □ 3 □ 4 □ 5
b. Tell this child how happy he/she makes you .............................................................. □ 1 □ 2 □ 3 □ 4 □ 5
c. Have warm, close times together with this child ........................................................ □ 1 □ 2 □ 3 □ 4 □ 5
d. Enjoy listening to this child and doing things with him/her ......................................... □ 1 □ 2 □ 3 □ 4 □ 5
e. Feel close to this child both when he/she was happy and when he/she was upset .... □ 1 □ 2 □ 3 □ 4 □ 5
f. Express affection by hugging, kissing and holding this child ....................................... □ 1 □ 2 □ 3 □ 4 □ 5

g. How often do you think that the level of punishment you feel should have been punished? □ 1 □ 2 □ 3 □ 4 □ 5
h. How often is this child able to get out of punishment when he/she really sets his/her mind to it? □ 1 □ 2 □ 3 □ 4 □ 5
i. When you discipline this child, how often does he/she ignore the punishment? .......... □ 1 □ 2 □ 3 □ 4 □ 5
j. How often do you tell this child that he/she is bad or not as good as others? ............... □ 1 □ 2 □ 3 □ 4 □ 5
k. How often do you think that the level of punishment you give this child depends on your mood? □ 1 □ 2 □ 3 □ 4 □ 5

H3. [Card H3] When parents spend time with their children, sometimes things go well and sometimes they don't. How often does the following happen...? (Tick one box per row only)

a. Of all the times you talk to this child about his/her behaviour, how often is this praise? .......................................................................................................................... □ 1 □ 2 □ 3 □ 4 □ 5
b. Of all the times you talk to this child about his/her behaviour, how often is this disapproval? .......................................................................................................................... □ 1 □ 2 □ 3 □ 4 □ 5

c. When you give this child an instruction or request to do something, how often do you make sure that he/she does it? .......................................................... □ 1 □ 2 □ 3 □ 4 □ 5

H4. [Card H4] If you are currently working outside the home, can I ask you the extent to which you agree or disagree with the following statements?

Because of your work responsibilities:

a. You have missed out on home or family activities that you would have liked to have taken part in.......................................................... □ 1 □ 2 □ 3 □ 4 □ 5 □ 6
b. Your family time is less enjoyable and more pressured.................................................. □ 1 □ 2 □ 3 □ 4 □ 5 □ 6

c. You have to turn down work activities or opportunities that you would prefer to take on.......................................................................................... □ 1 □ 2 □ 3 □ 4 □ 5 □ 6
d. The time you spend working is less enjoyable and more pressured.................................. □ 1 □ 2 □ 3 □ 4 □ 5 □ 6
H5. [Card H5] Overall, how do you feel about the amount of support or help you get from family or friends living outside your household?

I get enough help ...........................................  1
I don’t get enough help ...................................  2
I don’t get any help at all ..................................  3
I don’t need any help ........................................  4

H6. Are you in regular contact with <child’s> grandparents?

Yes ..........................................................  1
No .............................................................  2
All grandparents are deceased .................  3
All grandparents live abroad ....................  4

H7. How many of <child’s> grandparents are still alive? _______ N

H8. With how many of his/her grandparents would you say <child> has a close or very close relationship? ___ N

H9. [Card H9] For the following items could you indicate whether or not the Study Child has the item and, if not, if it is because you couldn’t afford it or for another reason?

a. Does the child have some new (not second hand) clothes? ...........................................  1
b. Does the child have two pairs of properly fitting shoes, including a pair of all-weather shoes? .................................................................  1
c. Does the child eat fresh fruit and/or vegetables at least once a day? ................................  1
d. Does the child eat three meals a day? ..........................................................  1
e. Does the child eat a meal with meat, chicken or fish (or vegetarian equivalent) at least once a day? ......................................  1
f. Does the child have books at home suitable for his/her age? ........................................  1
g. Does the child have outdoor leisure equipment (bicycle, roller skates, etc.)? .................  1
h. Does the child have indoor games (board games, computer games etc)? ....................  1
i. Does the child participate in a regular leisure activity (swimming, playing an instrument, youth organisations, etc.)? .............  1
j. Does the child have celebrations on special occasions (birthdays, religious events)? ........  1
k. Does the child invite/have friends to your house to play and/or eat from time to time? ...  1
l. Does the child participate in school trips and school events that cost money? ...............  1
m. Does the child have a suitable place to study or do homework? ................................  1

H10. [Card H10] Looking at Card H10, has the Study Child ever experienced any of the following:

[Int – CODES ONLY IF CHILD IS PRESENT AT TIME OF INTERVIEW]

A. Death of a parent ...........................................  1
B. Death of other close family member (please specify) ..................................................  1
C. Death of close friend ........................................  1
D. Divorce/separation of parents .................................................................  1
E. Moving house ..........................................................  1
F. Moving country .....................................................  1
G. Stay in foster home/residential care ..............................................................  1
H. Serious illness/injury ..................................................  1
I. Serious illness/injury of a family member ..................................................  1
J. Drug taking/alcoholism in the immediate family ...............................................  1
K. Mental disorder in immediate family ..................................................  1
L. Conflict between parents ..................................................  1
M. Parent in prison .....................................................  1
N. Other disturbing event (please specify) ..................................................  1

Yes ..........................................................  1
No, cannot afford ..........................................  2
No, other reason ............................................  3
Now some questions about the circumstances of your household.

J1. I would now like to ask you some questions about your accommodation: Is this accommodation a:
[Interviewer: Read out answer categories]

House ....................................................................................................... 1
Apartment / flat/ bedsit ........................................................................... 2
Duplex ....................................................................................................... 3
Other (specify) _____________________________________________________ 4

J2. Does your accommodation have access to a garden or common space (either private or shared) where you can let <child> out to play?

Yes ........................................ No ........................................

J3. Do you / someone else supervise <child> when <pronoun> is playing in this space?

Always .......... Most of the time .... Now and again ...... Never ................

J4a. [Card J4a] From this card, please tell me which best describes your (and your partner’s) occupancy of the accommodation?

[Interviewer: Note that where the PCG lives with the Study Child’s grandparent(s) in their house, occupancy should be recorded as ‘living with parents’ rather than owner occupier, i.e. the PCG’s nature of occupancy rather than the grandparents]

Owner occupied (with or without a mortgage) ................................................... 1
Being purchased from a Local Authority under a Tenant Purchase Scheme ................ 2
Rented from a Local Authority ........................................................................... 3
Rented from a Voluntary Body ........................................................................... 4
Rented from a Private Landlord ........................................................................... 5
Living with and paying rent to your (or your partner’s) parent(s) ................................ 6
Occupied free of rent with your (or your partner’s) parent(s) .............................. 7
Occupied free of rent from your (or your partner’s) job ....................................... 8

J4b. How many bedrooms do you have in your home? ____________ number of bedrooms

J5. Do you feel that your current accommodation (excluding location) is suitable for your family’s needs?

Yes ........................................ No ........................................

J6. [CARD J6] Why is that?

a. Too small .................................................................................................. 1
b. Not a child-friendly layout ...................................................................... 2
c. Too many steps ........................................................................................ 3
d. Poor conditions in the home (damp, drafts, leaks etc) ........................... 4
e. Problems with rats, mice, cockroaches etc ........................................... 5
f. Too noisy ................................................................................................... 6
g. Problems with neighbours ....................................................................... 7
h. Other (specify) ....................................................................................... 8
J7. [Card J7] Which of these descriptions BEST describes your usual situation in regard to work?
[Int: If respondent is on maternity leave and she has a job which she intends to return to, she should be coded as 0]

0. Currently on maternity leave,
   but have a job to return to..................................................... □ 0
1. Employee (incl. apprenticeship
   or Community Employment) ..................................................... □ 1
2. Self-employed outside farming ................................................. □ 2
3. Farmer.............................................................................. □ 3
4. Student full-time.................................................................. □ 4
5. On State training scheme (FAS, Failte Ireland etc.)...................... □ 5
6. Unemployed, actively looking for a job.................................... □ 6
7. Long-term sickness or disability............................................. □ 7
8. Home duties / looking after home or family............................ □ 8
9. Retired................................................................................ □ 9
10. Other (please specify) ___________________ □ 10

J8. How many hours do you normally work per week, including any regular overtime work?
If you work at more than one job, please include the hours in all jobs. ________________________ hours

J9. On a typical work day, how much time in minutes do you spend commuting to and from work
(outward and return journey combined)?__________________________ minutes
[Int. if respondent works at home enter '0' for minutes]

J10. [Card J10] What is your occupation in your main job?

In all cases please describe the occupation fully and precisely giving the full job title.

Use precise terms such as: Do not use general terms such as:
RETAIL STORE MANAGER  MANAGER
SECONDARY TEACHER  TEACHER
ELECTRICAL ENGINEER  ENGINEER

Civil servants and local government employees should state their grade e.g. SENIOR ADMINISTRATIVE OFFICER.
Members of the Gardai or Army should state their rank. Teachers should state the branch of teaching e.g. PRIMARY TEACHER.
Clergy and religious orders should give full description e.g. NUN, REGISTERED GENERAL NURSE.

Write in your main OCCUPATION

[Interviewer: Ask J11 if code 0 or 1 at J7]

J11. [CARD J11] Does your employer (a) provide any of the following types of family friendly
facilities and (b) if they are provided, have you used them in the last 12 months?

<table>
<thead>
<tr>
<th>Provide?</th>
<th>Used last 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>a. Subsidised child care ..........................................................</td>
<td>□ 1</td>
</tr>
<tr>
<td>b. A crèche or nursery at work ...............................................</td>
<td>□ 1</td>
</tr>
<tr>
<td>c. Childcare vouchers ................................................................</td>
<td>□ 1</td>
</tr>
<tr>
<td>d. Assistance with finding childcare ........................................</td>
<td>□ 1</td>
</tr>
</tbody>
</table>
| e. Flexible working hours (i.e. changing times you start and
   finish) .................................................................................. | □ 1 | □ 0 | □ 1 | □ 2 |
| f. Allow parents paid time off when a child is sick
   (in addition to normal holiday allowance) ............................. | □ 1 | □ 0 | □ 1 | □ 2 |
| g. Allow parents unpaid time off when a child is sick.................. | □ 1 | □ 0 | □ 1 | □ 2 |
| h. Allow parents unpaid time off during school holidays............. | □ 1 | □ 0 | □ 1 | □ 2 |
| i. Allow employees to work from home some or all of the time ....... | □ 1 | □ 0 | □ 1 | □ 2 |
| j. Allow employees option to job-share ..................................... | □ 1 | □ 0 | □ 1 | □ 2 |
| k. Other family friendly facilities (please specify) ______________ | □ 1 | □ 0 | □ 1 | □ 2 |

J12. In general, how would you rate your employer in terms of allowing 'family friendly'
working?

Very good.............................. □ 1
Fairly good............................ □ 2
Neither good nor poor ............ □ 3
Fairly poor............................ □ 4
Very poor............................. □ 5
J13a. Do you supervise or manage any personnel in your job?

   Yes □  No □

J13b. How many?

J14. How many employees (if any) do you have? __________ employees

   NA □

J15. How many acres do you farm? __________ acres __________ hectares

   Go to J28

J16. Apart from holiday or casual work, have you ever had a full-time job? Yes □ No □

   Go to J21

J17. In what year did you last work in that full-time job? _______ year

J18. When you last worked in that full-time job were you?

   Employee (incl. apprenticeship or Community Employment) □
   Self-employed outside farming □
   Farmer □

J19. What (was) your occupation in your main job?

   Write in your main OCCUPATION

   ____________________________________________________________________

J20. How many acres did you farm? __________ acres __________ hectares

J21. Do you currently have a part-time job outside the home? Yes □ No □

   Go to J24

J22. On average, how many hours per week do you work in that part-time job? ___________ hours

J23. What is your occupation in your main job?

   Write in your main OCCUPATION

   ____________________________________________________________________

J24. If a farmer or a farm worker, write in the SIZE of the farm __________ acres

   Go to J25
J24. [Card J24] From the reasons listed on this card could you tell me the most important reasons for you not working in a paid job outside the home? If more than one reason, please rank them in order of importance, where 1 is the most important reason, up to a maximum of 3.

- a. I can’t find a job .................................................... ___
- b. I chose not to work ............................................... ___
- c. I am caring for an elderly or ill relative or friend ... ___
- d. I prefer be at home to look after my children myself     ___
- e. I cannot earn enough to pay for childcare ........... ___
- f. I cannot find suitable childcare ......................... ___
- g. There are no suitable jobs available for me ... ___
- h. My family would lose Social Welfare or medical benefits if I was earning ............ ___
- i. Other reason ( please specify)___________________ ___

J25. [Card J25] What is the occupation of your spouse / partner?

In all cases describe the occupation fully and precisely giving the full job title. Use precise terms such as:
- RETAIL STORE MANAGER
- SECONDARY TEACHER
- ELECTRICAL ENGINEER

Civil servants and local government employees should state their grade e.g. SENIOR ADMINISTRATIVE OFFICER.

Members of the Gardai or Army should state their rank. Teachers should state the branch of teaching e.g. PRIMARY TEACHER. Clergy and religious orders should give full description e.g. NUN, REGISTERED GENERAL NURSE.

Write in main OCCUPATION (If a farmer or a farm worker, please specify how many acres)

______________________________

Now I would like to ask you a few questions about household income. Once again, I would like to assure you that all information will be treated in the strictest confidence.

J26. [Card J26] Looking at the card, which of the following sources of income does the HOUSEHOLD receive? Please consider the income of ALL household members, not just your own, your spouse/partner’s income.

[INT. Tick ‘Yes’ or ‘No’ for each in Col. A]

J27. And of these sources of income which is the largest source of income at present?

[Int Tick one box only in Col. B]

J28. [Card J28] If you added up all the income sources from ALL household members what would be the total HOUSEHOLD NET income, i.e. after deductions for tax and PRSI as well as the income levy and public sector pension levy [if applicable]? Include income from all sources and from all household members. [INT: IF RESPONDENT CANNOT GIVE EXACT FIGURE GO TO J29. IF EXACT FIGURE GIVEN GO TO J31]

<table>
<thead>
<tr>
<th>A</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

J29. [Card J29] I know that it is difficult to give an exact figure for household income but on Card J29 we have a scale of incomes, and we would like to know into which group your total HOUSEHOLD NET income falls, i.e. after deductions for tax and PRSI, the income levy and public sector pension levy [if applicable]. Include income from all sources and from all members of the household. Looking at the card could you tell me the letter of the group your household falls into, after these deductions have been applied.

[Int: Tick the letter of the group your household falls into]
### HOUSEHOLD NET INCOME AFTER DEDUCTIONS OF TAX AND PRSI

<table>
<thead>
<tr>
<th>Per Week</th>
<th>Per Month</th>
<th>Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category</strong></td>
<td><strong>A</strong></td>
<td><strong>B</strong></td>
</tr>
<tr>
<td>Under €230</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€231 to under €350</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€351 to under €460</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€461 to under €575</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€576 to under €800</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€801 to under €925</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€926 to under €1,150</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€1,151 to under €1,500</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€1,501 to under €1,850</td>
<td>...</td>
<td>...</td>
</tr>
<tr>
<td>€1,851 or more</td>
<td>...</td>
<td>...</td>
</tr>
</tbody>
</table>

**Refused:**... Don't Know...

### J30. [CARD J30] Would that be [Int: Show Card and tick 1, 2 or 3 in appropriate section under per wk, per mth or per yr]

<table>
<thead>
<tr>
<th>A</th>
<th>Per week</th>
<th>€75 to €100</th>
<th>€101 to €125</th>
<th>€126 to €150</th>
<th>€151 to €180</th>
<th>€181 to €200</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Per week</td>
<td>€271 to €300</td>
<td>€311 to €350</td>
<td>€351 to €400</td>
<td>€421 to €460</td>
<td>€491 to €530</td>
</tr>
<tr>
<td>C</td>
<td>Per week</td>
<td>€511 to €550</td>
<td>€536 to €575</td>
<td>€576 to €625</td>
<td>€626 to €675</td>
<td>€676 to €725</td>
</tr>
<tr>
<td>D</td>
<td>Per week</td>
<td>€811 to €850</td>
<td>€881 to €925</td>
<td>€926 to €975</td>
<td>€976 to €1,025</td>
<td>€1,026 to €1,075</td>
</tr>
<tr>
<td>E</td>
<td>Per week</td>
<td>€1,076 to €1,125</td>
<td>€1,051 to €1,100</td>
<td>€1,101 to €1,150</td>
<td>€1,151 to €1,200</td>
<td>€1,201 to €1,250</td>
</tr>
<tr>
<td>F</td>
<td>Per week</td>
<td>€1,251 to €1,300</td>
<td>€1,226 to €1,275</td>
<td>€1,276 to €1,325</td>
<td>€1,326 to €1,375</td>
<td>€1,376 to €1,425</td>
</tr>
<tr>
<td>G</td>
<td>Per week</td>
<td>€1,426 to €1,475</td>
<td>€1,401 to €1,450</td>
<td>€1,451 to €1,500</td>
<td>€1,501 to €1,550</td>
<td>€1,551 to €1,600</td>
</tr>
<tr>
<td>H</td>
<td>Per week</td>
<td>€1,601 to €1,650</td>
<td>€1,576 to €1,625</td>
<td>€1,626 to €1,675</td>
<td>€1,676 to €1,725</td>
<td>€1,726 to €1,775</td>
</tr>
<tr>
<td>I</td>
<td>Per week</td>
<td>€1,776 to €1,825</td>
<td>€1,751 to €1,800</td>
<td>€1,801 to €1,850</td>
<td>€1,851 to €1,900</td>
<td>€1,901 to €1,950</td>
</tr>
<tr>
<td>J</td>
<td>Per week</td>
<td>€1,951 to €2,000</td>
<td>€1,926 to €1,975</td>
<td>€1,976 to €2,025</td>
<td>€2,026 to €2,075</td>
<td>€2,076 to €2,125</td>
</tr>
</tbody>
</table>

### J31. Does anyone in your household currently receive any Social Welfare payments?

Yes [ ] No [ ]

### J32. [Card J32] Now I’d like to record information on any Social Welfare payments which are received by anyone in the household. Looking at Card J32, could you tell me whether or not anyone in the household currently receives any of these Social Welfare payments? [Int Tick payments received by any household member]

...
J33a. Does anyone in your household currently receive rent or mortgage supplement? Yes … □  No… □

J33b. How much does the household receive PER WEEK in rent or mortgage supplement? €---------------------

J34. Do you receive or have you received in the last 12 months, any of the following payments?
   a. Back to school clothing and footwear allowance ........................................................ □
   b. Exceptional and urgent needs payments (from Community Welfare Officer) ............ □
   c. Foster Care Allowance .............................................................................................. □

J35. Looking at Card J35 and thinking of your household’s total income from all sources and all household members, approximately what proportion of your total household income would you say comes from social welfare payments of any kind – including Children’s Allowance /Child Benefit? [INTERVIEWER: Note that Child Benefit rates are €130 per month for 1st, 2nd and 3rd child and €140 for 4th and subsequent children]

    None  Less than 5%  5% to less than 20%  20% to less than 50%  50% to less than 75%  75% to less than 100%  100%  
    □ 1          □ 2          □ 3          □ 4          □ 5          □ 6          □ 7
J36. [Card J36] For the following items could you indicate whether or not your household has the item and, if not, if it is because you couldn’t afford it or for another reason?

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No, cannot afford</th>
<th>No, other reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Does your household eat meals with meat, chicken, fish (or vegetarian equivalent) at least every second day?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>b. Does your household have a roast joint (or its equivalent) at least once a week?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>c. Do household members buy new rather than second-hand clothes?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>d. Does each household member possess a warm waterproof coat?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>e. Does each household member possess two pairs of strong shoes?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>f. Does the household replace any worn out furniture?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>g. Does the household keep the home adequately warm?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>h. Does the household have family or friends for a drink or meal once a month?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>i. Does the household buy presents for family or friends at least once a year?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

J37. [Card J37] A household may have different sources of income and more than one household member may contribute to it. Concerning your household’s total monthly or weekly income, with which degree of ease or difficulty is the household able to make ends meet? Would you say...

- With great difficulty
- With difficulty
- With some difficulty
- Fairly easily
- Easily
- Very easily

J38. Have you ever had to go without heating during the last 12 months through lack of money? (I mean have you had to go without a fire on a cold day, or go to bed to keep warm or light the fire late because of lack of coal/fuel?)

Yes  .................
No  ............................

J39a. Did you have a morning, afternoon or evening out in the last fortnight, for your entertainment (something that cost money)?

Yes  .................
No  ............................

J39b. [CARD J39b] Why was that?

- Didn’t want to
- Couldn’t leave the children
- Could have afforded but
- Other (specify)
- Illness
- Other (specify)
- Other (specify)
- Other (specify)

J40a. Does your family have a car?

Yes  .................
No  ............................

J40b. Would your family like to have a car but you cannot afford it?

Yes  .................
No  ............................

J41. Since our last interview in [MM/YYYY] we have had major changes in the economy with the recession, cutbacks and unemployment. Would you say that the recession has had… …[INT: READ OUT]

A very significant effect on your family
A significant effect on your family
A small effect on your family
No effect at all on your family

J42. [Card J42] How has it affected your family?

Yes  No

a. You were made redundant / lost your job
b. Your spouse/partner was made redundant / lost their job
c. You or your spouse/partner’s working hours were reduced
d. Your or your spouse/partner’s wages were reduced
e. You or your spouse/partner’s social welfare benefits were reduced
f. Your family can’t afford luxuries (holidays, meals out etc.)
g. Your family can’t afford / had to cut back on basics (food, clothes etc.)
h. You are behind with rent / mortgage payments
i. You are behind with utility bills (e.g. electricity, gas bills etc.)
j. Took out an extra loan or increased your debt
k. Other (please specify)
Section K – About You

Now some more questions about yourself

K1a. [Card K1a] What is the highest level of education (full-time or part-time) which you have completed to date?

1. No formal education .................................................................
2. Primary education ........................................................................
3. Lower Secondary .................................................................
4. Upper Secondary .................................................................
   (Leaving Certificate (including Applied and Vocational Programmes), ‘A’ Levels, NCVA Level 1 Certificate or equivalent)
5. Technical or Vocational qualification ...........................................
   (Completed Apprenticeship, NCVA Level 2/3 Certificate, Post-Leaving Certificate Course/FETAC Level 5, Teagasc Certificate/Diploma or equivalent).
6. National Certificate, Diploma NCEA/Institute of Technology or equivalent, Nursing Diploma ........................................
   (Non Degree)
7. Primary Degree ........................................................................
   (Third Level Bachelor Degree)
8. Professional qualification of Degree status at least (e.g. Chartered Accountant/Surveyor) ........................................
9. Both a Degree and a Professional qualification ...........................
10. Postgraduate Certificate or Diploma ...........................................
11. Postgraduate Degree (Masters) ................................................
12. Doctorate (Ph.D) ........................................................................

[INTERVIEWER: ASK K1B ONLY IF K1A IS CODE 3 OR HIGHER]

K1b. In what year did you get this qualification? ______________

[INTERVIEWER: ASK K1C ONLY IF K1A IS CODE 5 OR HIGHER]

K1c. What is the name of this qualification?

[INTERVIEWER: Please record as much detail as possible]

____________________________________________________________________________________
____________________________________________________________________________________

[INTERVIEWER: ASK K1D ONLY IF K1A IS CODE 5]

K1d. Did you complete your Upper Secondary education (Leaving Certificate/A’Levels or equivalent) before gaining this qualification?

Yes □ No □

K2. What is <child’s> first language?

English □ Irish □ Other (please specify) ________________ □

K3. What language is usually spoken to <child> in the home?

English □ Irish □ Other (please specify) ________________ □

[BLAISE CONDITION: ASK K4 –K6 OF THOSE WHO INDICATED LITERACY WAS A PROBLEM AT TIME 2, NON-RESPONDENT AT TIME 2 OR NEW RESPONDENT AT TIME 3]

K4. Many people have problems with reading. Can I just check, can you read aloud to a child from a children’s story book written in your native language?

Yes □ No □

K5. Can I just check, can you read aloud to a child from a children’s story book written in English?

Yes □ No □

K6. Can you usually read and fill out forms you might have to deal with in English?

Yes □ No □
K7. When you buy things in shops with a five or ten euro note, can you usually tell if you have the right change?
Yes .................. □  No .................. □

K8. Do you belong to any religion?
Yes .................. □  No .................. □

1. Christian – no denomination .................. □
2. Roman Catholic .................................. □
3. Anglican/Church of Ireland/Episcopalian ...... □
4. Other Protestant .................................. □
5. Jewish .............................................. □
6. Muslim .............................................. □
7. Other (please specify) __________________ □

K10. Are you a citizen of Ireland?  Yes ........ □  No ........ □

K11. What citizenship do you hold? ________________________________

K12. Were you born in Ireland?  Yes ........ □  No ........ □

K13. In which country were you born? ________________________________

K14. How long ago did you first come to live in Ireland?
Within the last year □  1-5 years ago □  6-10 years ago □  11-20 years ago □
More than 20 years ago □  Don’t know □

K15. [Card K15] Looking at card K15, can you tell me, what is your ethnic or cultural background?
Please choose ONE section from 1 to 4 then tick the appropriate box.
1. White
   Irish ............................................. □
   Irish Traveller .................................. □
   Any other White background ............... □
2. Black or Black Irish
   African ............................................. □
   Any other Black background ............... □
3. Asian or Asian Irish
   Chinese ............................................. □
   Any other Asian background ............... □
4. Other, including mixed background ........ □

L. Neighbourhood / Community

Time Section Started

Finally, we would like to ask you some questions about your local area.

L1. How long have you lived in your local area? _________ years OR _______ months
L2. [CARD L2] How strongly do you agree or disagree with these statements about your neighbourhood?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. This is a safe neighbourhood</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b. There are good parks, playgrounds and play spaces</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>c. The state of the footpaths, roads and street lighting is good</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>d. There is access to close, affordable, regular public transport</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>e. There is access to basic shopping facilities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>f. There is access to basic services such as banks, medical clinics, etc.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>g. There is heavy traffic on my street or road</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>h. It is safe for children to play outside during the day</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>i. People around here are willing to help their neighbours</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>j. Most people in your neighbourhood can be trusted</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>k. If you need information about local services, you know where to</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>find that information</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l. You are well informed about local affairs</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>m. You feel a strong sense of identity with your neighbourhood</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

L3. Do you participate in any ongoing community service activity? (e.g. volunteering at a school, coaching a sports team or working with a church or neighbourhood association)?

- Yes ................................................. 1
- No .................................................. 2

L4. [CARD L4] How common would you say that each of the things listed below is in your area? For each item listed please say whether or not you think it is very common; fairly common; not very common; or not at all common.

<table>
<thead>
<tr>
<th>Commonness</th>
<th>Very common</th>
<th>Fairly common</th>
<th>Not very common</th>
<th>Not at all common</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Rubbish and litter lying about</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b. Homes and gardens in bad condition</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>c. Vandalism and deliberate damage to property</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>d. People being drunk or taking drugs in public</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

L5. [CARD L5] How often do you and your neighbours do each of the following?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Do favours for each other</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>b. Share information on schools or children’s activities</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>c. Visit each other’s houses</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

L6. How do you feel about your neighbourhood as a place for bringing up children?

<table>
<thead>
<tr>
<th>Quality</th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very poor</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td></td>
</tr>
</tbody>
</table>

L7. [CARD L7] Would you describe the place where the household is situated as being.....?

- In open country ............................................. 1
- In a village (200-1,499) .................................. 2
- In a town (1,500-2,999) ................................... 3
- In a town (3,000-4,999) ................................... 4
- In a town (5,000-9,999) ................................... 5
- In a town (10,000 or more) ................................ 6
- Waterford city .............................................. 7
- Galway city .................................................. 8
- Limerick city ............................................... 9
- Cork city .................................................... 10
- Dublin city (incl. Dun Laoghaire) ........................ 11
- Dublin county (outside Dublin city) urban ............... 12
- Dublin county (outside Dublin city) rural ............... 13