

Self-Complete Questionnaire for 9 year olds (D)

AREA HOUSEHOLD RESPONDENT

Interviewer Name: _____ Interviewer Number:

Date: ____ / ____ / ____

We would now like to ask you some questions about your dad!

1. Do you think your dad encourages you to do well at school?

Always Sometimes Never
₁ ₂ ₃

2. How well do you get on with your dad?

Very well Fairly well You and your dad do not get on
₁ ₂ ₃

3. Here are some things you might think about your dad. Please tick the answer that suits you best.

a. Does your dad really expect you to follow family rules?

Always Sometimes Never
₁ ₂ ₃

b. Does your dad like you to tell him when you are worried?

Always Sometimes Never
₁ ₂ ₃

c. Does your dad usually praise you for doing well?

Always Sometimes Never
₁ ₂ ₃

d. Does your dad really let you get away with things?

Always Sometimes Never
₁ ₂ ₃

e. Does your dad punish you if you do not behave yourself?

Always Sometimes Never
₁ ₂ ₃

f. Can you count on your dad to help you out if you have a problem?

Always Sometimes Never
₁ ₂ ₃

g. Does your dad point out ways you could do better?

Always Sometimes Never
₁ ₂ ₃

h. Does your dad spend time just talking to you?

Always Sometimes Never
₁ ₂ ₃

i. Does your dad let you know when you do something wrong?

Always Sometimes Never
₁ ₂ ₃

j. Do you and your dad do things together that are just for fun?

Always Sometimes Never
₁ ₂ ₃

4. When you are bold how often does your dad?

- | | Always | Sometimes | Never |
|--|---|---|---------------------------------------|
| a. Explain to you what you have done wrong | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| b. Ignore you | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| c. Smack you | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| d. Shout at you | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| e. Send you out of the room or to your bedroom | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| f. Stop your treats or pocket money | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| g. Give out to you | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| h. Offer you treats to be good..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| i. Ground you | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |