



WAVE 1 Infant's diary FIRST DAY

STUDY CHILD'S NAME:

B1D1

1 Please complete your diary on / / 04

Z2

OFFICE USE ONLY

B1D2

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
2 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>

Please answer these questions after completing the diary.

3 Who filled in this diary?

Name:

7 What kind of day is described in this diary?

(please fill in ALL OVALS which apply)

B1D7a
to
B1D7l

a
b
c
d
e
f
g
h
i
j
k
l

4 Relationship to child:

- 1 Mother
- 2 Father
- 3 Grandmother
- 4 Other Relative
- 5 Carer / Babysitter
- 6 Other (please specify)

- 1 An ordinary day
- 2 A holiday or a family celebration
- 3 A school holiday for brother / sister
- 4 A parent took time off work
- 5 Our family dealt with a crisis
- 6 We had guests staying with us
- 7 A family member was away
- 8 I was ill
- 9 This child was ill
- 10 This child was a great deal more stressed than normal

11 An unusual day for another reason
(please give details)

5 When did you fill in this diary?

- 1 More than 3 times a day
- 2 2 to 3 times during the day
- 3 Once, when the child went to bed
- 4 Once, the next morning
- 5 At a later time

B1D5

6 Diary completed on

/ / 04

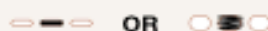
D1D6

PLEASE DO NOT FOLD OR BEND THIS DIARY

GROWING UP IN AUSTRALIA

Instructions:

Please MARK LIKE THIS ONLY:



- ❖ Use the pencil provided or another pencil (preferably 2B).
- ❖ Only use pencil, do **NOT** use ballpoint or felt tip pens.
- ❖ If you make a mistake in pencil, please erase fully.



This diary covers what **your child has been doing** over the 24 hours that started at 4 AM today and ends at 4 AM tomorrow.

Each oval in the diary grid represents 15 minutes. For each 15 minutes, please draw a line across the ovals that show:

- * what your child was doing (white rows)
- * where she or he was (light shaded section)
- * who else was present (medium shaded section)
- * whether you paid for the child to do an activity (dark shaded section)

Mark at least one row in each of the white, light shaded and medium shaded sections for each quarter hour.

The **WHITE ROWS** show what your child was doing. Most parents mark only 1 or 2 activities per time slot, but you can mark other rows if your child did more than one thing during the 15 minutes. Please do not mark more than 4 categories for any one quarter hour.

For example:

- * Swimming lessons are both "other exercise" and an "organised lesson".
- * Sleeping in the car is both sleeping and travel in a car.
- *** **Please mark a travel section when your child moved from one place to another.**

The **LIGHT SHADED SECTION** towards the bottom of the page shows where your child was. If your child moved from one place to another during the 15 minutes, please mark both locations.

The **MEDIUM SHADED SECTION** at the bottom of the page shows who was in the same room, or who was near the child if the child was outside.

The **DARK SHADED SECTION** at the bottom of the page shows if you or someone else paid for the child to do an activity or to be in care.

You can choose to fill in the diary:

- * 2 or 3 times during the day;
- * all at once when your child goes to bed; OR
- * in the morning after the diary day.

Thank you for participating in this study.

Below is how the diary is filled in, for the following example of an infant's morning.

This child slept alone, then woke up crying at 5:15 am. After a cuddle from father and a feed from mother, the child slept in the parents' bed. The family dog also slept in the parents' bedroom. The family got up at 7:30 am and the child had a nappy change and was dressed. The mother told the child a story while breastfeeding. The father stopped being nearby when he left for work. The mother then let the child play with a toy while watching a video. The child then crawled around for half an hour before being breastfed and having another nappy change, while the mother sang to the child. The nappy changes, which take only a few minutes, overlap other activities. The child rested, then napped while listening to music for an hour in the mid-morning. After the time in the cot, the child was comforted while being breastfed, then had a nappy change before being placed in the bouncinette and playing with the mobiles. While being driven to a day care centre in the afternoon, this child looked around, then took a nap. The parents paid for the time their child was in care.

DIARY for infants		Night			Morning							
		4 AM 0 15 30 45	5 AM 0 15 30 45	6 AM 0 15 30 45	7 AM 0 15 30 45	8 AM 0 15 30 45	9 AM 0 15 30 45	10 AM 0 15 30 45	11 AM 0 15 30 45	12 PM 0 15 30 45		
what was the child doing	not sure what child was doing											
	sleeping, napping	—										
	awake in bed / cot											
	looking around, doing nothing											
	bathe / nappy change, dress / hair care											
	breastfeeding											
	other eating, drinking, being fed											
	crying, upset											
	destroy things, create mess											
	held, cuddled, comforted, soothed											
	watching TV, a video or a DVD											
	listening to tapes, CDs, radio, music											
	read a story, talked / sung to, sing / talk											
	colour / draw, look at book, puzzles											
	organised activities / playgroup											
	crawl, climb, swing arms or legs											
	other play, other activities											
	visiting people, special event, party											
	taken places with adult (e.g. shopping)											
	travel	taken out in pram or bicycle seat										
travel in car / other household vehicle												
travel on public transport, ferry, plane												
		Night			Morning							
		4 AM 0 15 30 45	5 AM 0 15 30 45	6 AM 0 15 30 45	7 AM 0 15 30 45	8 AM 0 15 30 45	9 AM 0 15 30 45	10 AM 0 15 30 45	11 AM 0 15 30 45	12 PM 0 15 30 45		
where was the child	own home (indoors)											
	other person's home (indoors)											
	day care centre, playgroup											
	other indoors											
	other outdoors											
in the same room, nearby if outside	alone											
	mother, step-mother											
	father, step-father											
	grandparent(s) / other adult relative(s)											
	brother(s), sister(s), other children											
	other adult(s)											
paid	dog, cat or other pet (not fish)											
	someone paid for this activity											

B1DA?!

!=01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24

DIARY for infants		Night					Morning										
		4 AM		5 AM		6 AM		7 AM		8 AM		9 AM					
		0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45
what was the child doing	not sure what child was doing	?=A01															
	sleeping, napping	A02															
	awake in bed / cot	A03															
	looking around, doing nothing	A04															
	bathe / nappy change, dress / hair care	A05															
	breastfeeding	A06															
	other eating, drinking, being fed	A07															
	crying, upset	A08															
	destroy things, create mess	A09															
	held, cuddled, comforted, soothed	A10															
	watching TV, a video or a DVD	A11															
	listening to tapes, CDs, radio, music	A12															
	read a story, talked / sung to, sing / talk	A13															
	colour / draw, look at book, puzzles	A14															
	organised activities / playgroup	A15															
	crawl, climb, swing arms or legs	A16															
	other play, other activities	A17															
	visiting people, special event, party	A18															
	taken places with adult (e.g. shopping)	A19															
travel	taken out in pram or bicycle seat	B01															
	travel in car / other household vehicle	B02															
	travel on public transport, ferry, plane	B03															
		Night					Morning										
		4 AM		5 AM		6 AM		7 AM		8 AM		9 AM					
		0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45
where was the child	own home (indoors)	C01															
	other person's home (indoors)	C02															
	day care centre, playgroup	C03															
	other indoors	C04															
	other outdoors	C05															
in the same room, nearby if outside	alone	D01															
	mother, step-mother	D02															
	father, step-father	D03															
	grandparent(s) / other adult relative(s)	D04															
	brother(s), sister(s), other children	D05															
	other adult(s)	D06															
	dog, cat or other pet (not fish)	D07															
paid	someone paid for this activity	E01															

B1DA?!

!=25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48

Afternoon						DIARY for infants		
10 AM 0 15 30 45	11 AM 0 15 30 45	12 PM 0 15 30 45	1 PM 0 15 30 45	2 PM 0 15 30 45	3 PM 0 15 30 45			
						?=A01	not sure what child was doing	what was the child doing
						A02	sleeping, napping	
						A03	awake in bed / cot	
						A04	looking around, doing nothing	
						A05	bathe / nappy change, dress / hair care	
						A06	breastfeeding	
						A07	other eating, drinking, being fed	
						A08	crying, upset	
						A09	destroy things, create mess	
						A10	held, cuddled, comforted, soothed	
						A11	watching TV, a video or a DVD	
						A12	listening to tapes, CDs, radio, music	
						A13	read a story, talked / sung to, sing / talk	
						A14	colour / draw, look at book, puzzles	
						A15	organised activities / playgroup	
						A16	crawl, climb, swing arms or legs	
						A17	other play, other activities	
						A18	visiting people, special event, party	
						A19	taken places with adult (e.g. shopping)	
						B01	taken out in pram or bicycle seat	travel
						B02	travel in car / other household vehicle	
						B03	travel on public transport, ferry, plane	
Afternoon								
10 AM 0 15 30 45	11 AM 0 15 30 45	12 PM 0 15 30 45	1 PM 0 15 30 45	2 PM 0 15 30 45	3 PM 0 15 30 45			
						C01	own home (indoors)	where was the child
						C02	other person's home (indoors)	
						C03	day care centre, playgroup	
						C04	other indoors	
						C05	other outdoors	
						D01	alone	in the same room, nearby if outside
						D02	mother, step-mother	
						D03	father, step-father	
						D04	grandparent(s) / other adult relative(s)	
						D05	brother(s), sister(s), other children	
						D06	other adult(s)	
						D07	dog, cat or other pet (not fish)	
						E01	someone paid for this activity	paid

B1DA?!

!=37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

DIARY for infants		Evening					
		4 PM 0 15 30 45	5 PM 0 15 30 45	6 PM 0 15 30 45	7 PM 0 15 30 45	8 PM 0 15 30 45	9 PM 0 15 30 45
what was the child doing	not sure what child was doing	=?=A01					
	sleeping, napping	A02					
	awake in bed / cot	A03					
	looking around, doing nothing	A04					
	bathe / nappy change, dress / hair care	A05					
	breastfeeding	A06					
	other eating, drinking, being fed	A07					
	crying, upset	A08					
	destroy things, create mess	A09					
	held, cuddled, comforted, soothed	A10					
	watching TV, a video or a DVD	A11					
	listening to tapes, CDs, radio, music	A12					
	read a story, talked / sung to, sing / talk	A13					
	colour / draw, look at book, puzzles	A14					
	organised activities / playgroup	A15					
	crawl, climb, swing arms or legs	A16					
	other play, other activities	A17					
	visiting people, special event, party	A18					
	taken places with adult (e.g. shopping)	A19					
travel	taken out in pram or bicycle seat	B01					
	travel in car / other household vehicle	B02					
	travel on public transport, ferry, plane	B03					
		Evening					
		4 PM 0 15 30 45	5 PM 0 15 30 45	6 PM 0 15 30 45	7 PM 0 15 30 45	8 PM 0 15 30 45	9 PM 0 15 30 45
where was the child	own home (indoors)	C01					
	other person's home (indoors)	C02					
	day care centre, playgroup	C03					
	other indoors	C04					
	other outdoors	C05					
in the same room, nearby if outside	alone	D01					
	mother, step-mother	D02					
	father, step-father	D03					
	grandparent(s) / other adult relative(s)	D04					
	brother(s), sister(s), other children	D05					
	other adult(s)	D06					
	dog, cat or other pet (not fish)	D07					
paid	someone paid for this activity	E01					

!=73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96

Night						DIARY for infants																			
10 PM		11 PM		12 AM		1 AM		2 AM		3 AM															
0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45		
																						=?=A01	not sure what child was doing	what was the child doing	
																						A02	sleeping, napping		
																						A03	awake in bed / cot		
																						A04	looking around, doing nothing		
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																						A14	colour / draw, look at book, puzzles		
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																						A16	crawl, climb, swing arms or legs		
																						A17	other play, other activities		
																						A18	visiting people, special event, party		
																						A19	taken places with adult (e.g. shopping)		
																						B01	taken out in pram or bicycle seat	travel	
																						B02	travel in car / other household vehicle		
																						B03	travel on public transport, ferry, plane		
Night																									
10 PM		11 PM		12 AM		1 AM		2 AM		3 AM															
0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45	0	15	30	45						
																						C01	own home (indoors)	where was the child	
																						C02	other person's home (indoors)		
																						C03	day care centre, playgroup		
																						C04	other indoors		
																						C05	other outdoors		
																						D01	alone	in the same room, nearby if outside	
																						D02	mother, step-mother		
																						D03	father, step-father		
																						D04	grandparent(s) / other adult relative(s)		
																						D05	brother(s), sister(s), other children		
																						D06	other adult(s)		
																						D07	dog, cat or other pet (not fish)		
																						E01	someone paid for this activity	paid	

D1DZ1

Z1 If you have any comments on filling in this diary, please write them in the space provided below.

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Thank you for completing this diary

Once both diaries are completed, please place in the envelope provided and either:

1. Mail back to our office (*Growing Up in Australia*, Reply Paid 1215, EASTERN MC VIC 3110).

OR

2. If arranged, the interviewer will collect.

PLEASE DO NOT FOLD OR BEND THIS DIARY

If you have any questions, you can contact *I-view* on **1800 005 508** and mention **Growing Up in Australia.**

