IN CONFIDENCE

Wave 4

2010

P2LK10



The Longitudinal Study of Australian Children

Parent's name:

Study child's name:

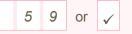
Thank you for your ongoing participation in *Growing Up in Australia*, the Longitudinal Study of Australian Children. The study is being conducted in partnership between the Department of Families, Housing, Community Services and Indigenous Affairs, the Australian Institute of Family Studies and the Australian Bureau of Statistics, with advice provided by a consortium of leading researchers.

It is very important for this study to have the perspective of both parents/ guardians. We really appreciate you finding the time to complete and return this form.

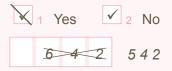
All information collected will be kept strictly confidential. Participation in this study is voluntary.

Instructions

- This questionnaire is to be completed by the parent/guardian named above with regard to the child named above
- Use black pen
- Keep each number or tick within the response box provided, for example



· If a mistake is made, please correct it this way



- Where appropriate, you can record '0' in the response box. However, do not use 'nil', 'n/a' or '-'
- When you have completed this form, return it in the reply paid envelope (Reply Paid 76746, Sydney NSW 2000)

If you have any questions or want more information, please call on **1800 005 508** freecall (excluding mobile phones).

1	Please tick one box for each of the following statements to best describe the study child's behaviour over the <u>past six months</u> :	Not true	Somewhat true	Certainly true
(a)	Considerate of other people's feelings	1	2	3
(b)	Restless, overactive, cannot stay still for long	1	2	3
(C)	Often complains of headaches, stomach aches or sickness	1	2	3
(d)	Shares readily with other children (treats, toys, pencils, etc.)	1	2	3
(e)	Often loses temper	1	2	3
(f)	Rather solitary, tends to play alone	1	2	3
(g)	Generally well behaved, usually does what adults request	1	2	3
(h)	Many worries, often seems worried	1	2	3
(i)	Helpful if someone is hurt, upset or feeling ill	1	2	3
(j)	Constantly fidgeting or squirming	1	2	3
(k)	Has at least one good friend	1	2	3
()	Often fights with other children or bullies them	1	2	3
(m)	Often unhappy, depressed or tearful	1	2	3
(n)	Generally liked by other children	1	2	3
(0)	Easily distracted, concentration wanders	1	2	3
(p)	Nervous or clingy in new situations, easily loses confidence	1	2	3
(q)	Kind to younger children	1	2	3
(r)	Often lies or cheats	1	2	3
(s)	Picked on or bullied by other children	1	2	3
(t)	Often volunteers to help others (parents, teachers, other children)	1	2	3
(u)	Thinks things out before acting	1	2	3
(V)	Steals from home, school or elsewhere	1	2	3
(W)	Gets on better with adults than with other children	1	2	3
(x)	Many fears, easily scared	1	2	3
(y) © SE	Good attention span, sees chores or homework through to the end	1	2	3

Pa	arenting						
2	Thinking about the study child over the last six months, how often did you	Never/ almost never	Rarely	Sometimes	Often	Always/ almost always	
(a)	Hug or hold this child for no particular reason	1	2	3	4	5	
(b)	Talk it over and reason with this child when he/she misbehaved	1	2	3	4	5	
(C)	Tell this child how happy he/she makes you	1	2	3	4	5	
(d)	Give this child reasons why rules should be obeyed	1	2	3	4	5	
(e)	Explain to this child why he/she was being corrected	1	2	3	4	5	
(f)	Have warm, close times together with this child	1	2	3	4	5	
(g)	Enjoy listening to this child and doing things with him/her	1	2	3	4	5	
(h)	Feel close to this child both when he/she was happy and when he/she was upset	1	2	3	4	5	
(i)	Express affection by hugging, kissing and holding this child	1	2	3	4	5	
(j)	Explain to this child the consequences of his/her behaviour	1	2	3	4	5	
(k)	Emphasise to this child the reasons for rules	1	2	3	4	5	
3	When parents spend time with their children,						
	sometimes things go well and sometimes they don't. How often does the following happen?	Never/ almost never	Less than half the time	About half the time	More than half the time	All the time	
(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	
(d)	If you tell this child he/she will get punished if he/she doesn't stop doing something, but he/she keeps doing it, how often will you punish him/her	1	2	3	4	5	
(e)	How often does this child get away with things that you feel should have been punished	1	2	3	4	5	
(f)	How often are you angry when you punish this child	1	2	3	4	5	
(g)	How often do you feel you are having problems managing this child in general	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	

4	In the <u>past month</u> , how often did you	Daily	A few times a week	A few times a month	Rarely	Not at all
(a)	Eat an evening meal with this child	1	2	3	4	5
(b)	Talk to this child about his/her school activities	1	2	3	4	5
(C)	Help this child with his/her homework	1	2	3	4	5

5	How often	Never/ almost never	Rarely	Sometimes	Often	Always/ almost always
(a)	Does this child behave in a manner different from the way you want him/her to	1	2	3	4	5
(b)	Do you think that this child's behaviour is more than you can handle	1	2	3	4	5
(C)	Do you feel that you are good at getting this child to do what you want him/her to do	1	2	3	4	5
(d)	Do you feel that you are in control and on top of things when you are caring for this child	1	2	3	4	5

6	How much do you agree or disagree with the following?	Strongly agree	Agree	Disagree	Strongly disagree
(a)	I know how to help this child do well at school	1	2	3	4
(b)	I think that I can make a difference in this child's success at school	1	2	3	4
(C)	I am able to help this child at home with school work that is difficult	1	2	3	4

7 Overall, as a parent, do you feel that you are...

- 1 Not very good at being a parent
- 2 A person who has some trouble being a parent
- 3 An average parent
- 4 A better than average parent
- 5 A very good parent

8	How many of this child's	None of them	Only a few	About half	Most of them	All of them
(a)	Close friends do you know by sight and first and last name?	1	2	3	4	5
(b)	Close friend's parents do you know by sight and by first and last name?	1	2	3	4	5

9	How strongly do you agree or disagree with the following?	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
(a)	It is important that parents know where their child is and what he/she is doing all the time	1	2	3	4	5
(b)	It is difficult to know where this child is and what he/she is doing now that he/she is getting older	1	2	3	4	5
10	How often	Always	Almost always	About half the time	Almost never	Never
(a)	In the course of a day, do you know where this child is?	1	2	3	4	5
(b)	Do you know who this child is with when he/she is away from home?	1	2	3	4	5
(C)	Do you talk to this child about what is going on in his/her life?	1	2	3	4	5
(d)	Does this child go out without telling you where he/she will be?	1	2	3	4	5
Yo	ur health and wellbeing					
11	In general, would you say your own health is	Excellent	Very good	Good	Fair	Poor
		1	2	3	4	5
12	How many serves of fruit do you usually eat each (A 'serve' = 1 medium piece or two small pieces of fru		of diced p	ieces)	serves	
13	How many serves of vegetables do you usually ea (A 'serve' = 1/2 cup of cooked vegetables or 1 cup of				serves	
14	About how many days each week do you do at lea moderate or vigorous physical activity? (e.g. walk gardening, tennis, swimming, running etc.)			ke,	days	
					-	
15	About how much do you weigh? (If you are pregnant, please record your					
	usual weight when not pregnant)	kg	or	stones		pounds
4.0						
16	About how tall are you, without shoes?	cm	or	feet	inche	S

5

P2LK10

-		6	P2LK10
17	Do you currently smoke cigarettes?	22	How often do you have 7 or more standard drinks on one occasion?
			1 Every day
	2 No Go to Question 19		2 4-6 times a week
18	How many cigarettes do you usually smoke in one day?		3 2-3 times a week
	1 Less than one a day		4 Once a week
	2 1 to 5 per day		5 2-3 times a month
	3 6 to 10 per day		6 Monthly or less
	4 11 to 20 per day		7 Never
	5 More than 20 per day		
19	How often do you have a drink containing alcohol?	23	Sometimes families may have difficulty getting along with one another. They do not always agree and they may get angry. In
	1 Never Go to Question 23		general, how would you rate your family's ability to get along with one another?
	2 Not in the last year		('Family' refers to the people you live with)
	3 Monthly or less		1 Excellent
	4 2 or 3 times a month		2 Very good
	5 Once a week		3 Good
	6 2 to 3 times a week		4 Fair
	7 4 to 6 times a week		5 Poor
	8 Every day		
20	How many standard drinks do you have on a typical day when you are drinking?	24	Thinking about how you and your spouse/ partner look after the family and house, do you think that you do your fair share of the
	1 1 or 2		(a) Domestic tasks (housework, home
	2 3 or 4		maintenance, shopping and cooking)
	3 5 or 6		1 I do much less than my fair share
	4 7 to 10		2 I do less than my fair share
	5 11 or more		3 I do my fair share
21	How often do you have 5 or more standard		4 I do more than my fair share
	drinks on one occasion?		5 I do much more than my fair share
	1 Every day		(b) Child-rearing tasks (both physical and
	2 4-6 times a week		emotional care)
	3 2-3 times a week		1 I do much less than my fair share
	4 Once a week		2 I do less than my fair share
	5 2-3 times a month		3 I do my fair share
	6 Monthly or less		4 I do more than my fair share
	7 Never Go to Question 23		5 I do much more than my fair share

25	In the <u>past 4 weeks,</u> how often did you feel	All of the time	Most of the time	Some of the time	A little of the time	None of the time
(a)	Nervous	1	2	3	4	5
(b)	Hopeless (that is, without hope)	1	2	3	4	5
(C)	Restless or fidgety	1	2	3	4	5
(d)	That everything was an effort	1	2	3	4	5
(e)	So sad that nothing would cheer you up	1	2	3	4	5
(f)	Worthless	1	2	3	4	5

26	How difficult do you feel your life is at present?	
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1 No problems or stresses

2 Few problems or stresses

³ Some problems and stresses

4 Many problems and stresses

27 How well do you think you are coping?

1 Not at all

3 Fairly well

4 Very well

5 Extremely well

2 A little

5 Very many problems and stresses

29 How often do you feel rushed or pressed for time?

L 1	Always
2	Often
3	Sometimes
4	Rarely

- 5 Never
- **30** How often do you feel that you need support or help but can't get it from anyone?



28 In the past year, have you had two weeks or more during which you felt sad, blue or depressed or lost pleasure in things that

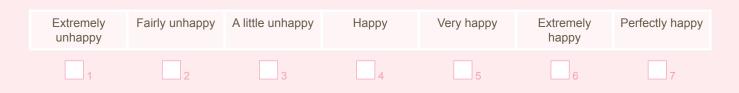
you usually cared about or enjoyed?



31	How often	Never	Rarely	Sometimes	Often	Always	
(a)	Is your partner a resource or support to you in raising your child(ren)	1	2	3	4	5	
(b)	Are you a resource or support to your partner in raising your child(ren)	1	2	3	4	5	
(C)	Do you feel your partner understands and is supportive of your needs as a parent	1	2	3	4	5	
(d)	Do you and your partner disagree about basic child-rearing issues	1	2	3	4	5	
(e)	Is your conversation with your partner awkward or stressful	1	2	3	4	5	
(f)	Do you and your partner argue	1	2	3	4	5	
(g)	Is there anger or hostility between you and your partner	1	2	3	4	5	
(h)	Do you have arguments with your partner that end up with people pushing, hitting, kicking or shoving	1	2	3	4	5	
32	 Have you ever been afraid of your spouse/partner? 1 Yes 2 No Please answer the next questions without thinking too long about your responses – your first response is usually the best. Select which best describes your answer from the scale 						
	provided for each question.	1 = Poorly -			Extreme	ly well = 5	
33	How well does your spouse/partner meet your needs?	1	2	3	4	5	
		1 = Unsatisf	ied ——			tisfied = 5	

- 34 In general, how satisfied are you with your relationship?
- 35 How good is your relationship compared to most?
- 36 How often do you feel you wish you hadn't married or lived together?
- 37 To what extent has your marriage or relationship met your original expectations?
- 38 How much do you love your spouse/partner?
- **39** How many problems are there in your relationship?

1	2	3	4	5
1 = Unsatisfied	d b		→ Very satis	fied = 5
1	2	3	4	5
1 = Poor			> Exce	ellent = 5
1	2	3	4	5
1 = Never			Very	often = 5
1	2	3	4	5
1 = Hardly at a	all ———		Comple	etely = 5
1	2	3	4	5
1 = Not much			Very, very m	uch = 5
1	2	3	4	5
1 = Very few			Very r	many = 5
1	2	3	4	5



Family and community

41 People sometimes look to others for companionship, assistance, or other types of support. How often are each of the following kinds of support available to you if you need it?

		None of the time	A little of the time	Some of the time	Most of the time	All of the time
(a)	Someone you can count on to listen to you when you need to talk	1	2	3	4	5
(b)	Someone to confide in or talk to about yourself or your problems	1	2	3	4	5
(C)	Someone to share your most private worries and fears with	1	2	3	4	5
(d)	Someone to turn to for suggestions about how to deal with a personal problem	1	2	3	4	5
(e)	Someone to help you if you were confined to bed	1	2	3	4	5
(f)	Someone to take you to the doctor if you needed it	1	2	3	4	5
(g)	Someone to prepare your meals if you were unable to do it yourself	1	2	3	4	5
(h)	Someone to help with daily chores if you were sick	1	2	3	4	5
(i)	Someone who shows you love and affection	1	2	3	4	5
(j)	Someone to love and make you feel wanted	1	2	3	4	5
(k)	Someone who hugs you	1	2	3	4	5
(I)	Someone to have a good time with	1	2	3	4	5
(m)	Someone to get together with for relaxation	1	2	3	4	5
(n)	Someone to do something enjoyable with	1	2	3	4	5
(0)	Someone to do things with to help you get your mind off things	1	2	3	4	5

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40 Which best describes the degree of happiness, all things considered, in your relationship?

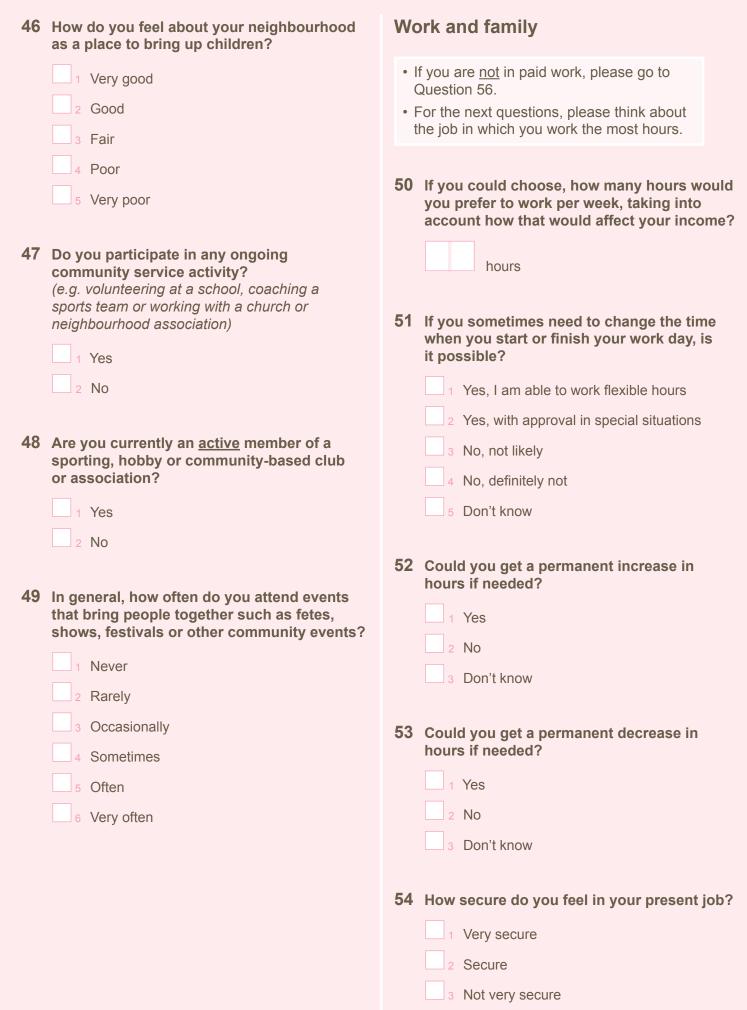
42 How often do you see, talk to or email the following people? (Answer for the most frequent contact e.g. if you talk to your mother every day and your father once a week, record 'Every day')

		No contact	Rarely	A few times a year	At least every month	At least every week	Every day	Don't have
(a)	Your parents	1	2	3	4	5	6	7
(b)	Your spouse/partner's parents	1	2	3	4	5	6	7
(C)	Other family members	1	2	3	4	5	6	7
(d)	Your friends	1	2	3	4	5	6	7
(e)	Your neighbours	1	2	3	4	5	6	7

43	How often do the following people support you in raising your child(ren)?	Always	Often	Sometimes	Rarely	Never	Don't have
(a)	Your parents	1	2	3	4	5	6
(b)	Your spouse/partner's parents	1	2	3	4	5	6
(C)	Other family members	1	2	3	4	5	6
(d)	Your friends	1	2	3	4	5	6
(e)	Your neighbours	1	2	3	4	5	6

44	How strongly do you agree or disagree with these statements about your neighbourhood?	Strongly agree	Agree	Disagree	Strongly disagree
(a)	It is safe for children to play outside during the day	1	2	3	4
(b)	This is a safe neighbourhood	1	2	3	4
(C)	People around here are willing to help their neighbours	1	2	3	4
(d)	Most people in your neighbourhood can be trusted	1	2	3	4

45	How strongly do you agree or disagree that	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
(a)	If you need information about local services, you know where to find that information	1	2	3	4	5
(b)	You are well informed about local affairs	1	2	3	4	5
(C)	You feel a strong sense of identity with your neighbourhood	1	2	3	4	5



11

4 Very insecure

55	How strongly do you agree or disagree with these statements?	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
(a)	I have a lot of freedom to decide how I do my own work	1	2	3	4	5
(b)	My working has a positive effect on my child(ren)	1	2	3	4	5
(C)	Working helps me to better appreciate the time that I spend with my child(ren)	1	2	3	4	5
(d)	The fact that I work makes me a better parent	1	2	3	4	5
(e)	I never have enough time to get everything done in my job	1	2	3	4	5
(f)	Having both work and family responsibilities makes me a more rounded person	1	2	3	4	5
(g)	Having both work and family responsibilities gives my life more variety	1	2	3	4	5
(h)	Having both work and family responsibilities makes me feel competent	1	2	3	4	5
(i)	Because of my work responsibilities I have missed out on home or family activities that I would like to have taken part in	1	2	3	4	5
(j)	Because of my work responsibilities my family time is less enjoyable and more pressured	1	2	3	4	5
(k)	Because of my family responsibilities I have had to turn down work activities or opportunities that I would prefer to take on	1	2	3	4	5
(I)	Because of my family responsibilities the time I spend working is less enjoyable and more pressured	1	2	3	4	5
Со	ntact details					
56	What is your relationship to the study child?					
	1 Mother / female guardian 2 Father / male	e guardian	3 0	Other <i>(pleas</i> e	e specify)	
	Name: (please print)					
	Work phone: Mob	ile:				
	Work phone: Mob					
	Signature:			Date:	/ /	

Thank you for taking the time to fill in this form. Please return in reply paid envelope supplied.