



SANTÉ QUÉBEC

In
2002...
I'll be 5 years old !

SELF-ADMINISTERED QUESTIONNAIRE FOR MOTHER (SAQM)

Interview language:

2

File no:

2

-

9

8

-

-

-

-

-

1

2

3

4

5

6

7

8

9

10

11

12

13

14

Questionnaire status:

Completed

1

Partially completed

2

Not completed

3

Interviewer no.:

--	--

« IN THE YEAR 2002... I'LL BE FIVE YEARS OLD! »

**Longitudinal Study of the Development of Children in Québec
(ÉLDEQ) - VOLET 1998**

This questionnaire must be filled out by the baby's mother (aged about 5 months).

Thank you for your cooperation which is so essential to the success of this study. It is important to answer all questions to the best of your knowledge. There are no right or wrong answers.

If you have any questions or require additional information concerning this survey, please contact Santé Québec (514) 873-1769. Please call collect if you live outside of the greater Montréal area. This questionnaire will remain strictly anonymous and confidential.

Please fill out the questionnaire as soon as possible. Then place it in the enclosed pre-paid envelope and seal it before sending by mail.

Date received:

--	--

(day)

--	--

(month)

--	--

(year)

SANTÉ QUÉBEC

1200, avenue McGill College
Suite 1620
Montréal (Québec)
H3B 4J8
Tel. : (514) 873-4749

BIP Bureau d'intervieweurs professionnels

630, West Sherbrooke Street
Suite 210
Montréal (Québec)
H3A 1E4
Tel. : (514) 288-1980

For consultation only

You will find that there are several possible answers to the questions. Unless otherwise indicated, we ask that you choose only one answer for each question. As there are no right or wrong answers, the idea is to choose the answer best suited to your personal situation.

EXAMPLE 1 12- When you put YOUR BABY/TWIN to bed, most often you... [Circle only one answer, namely 1 or 2 or 3]

EXAMPLE 2 14- Does YOUR BABY/TWIN have one or more object(s) in particular that help him/her to fall asleep when he/she is in bed? *[Circle all applicable answers]*

EXAMPLE 3 21- I get the impression that my BABY/TWIN is particularly curious compared with other children his/her age.

0 1 2 3 4 5 6 7 8 9 10

Not at all Exactly
what I think what I think

For consultation only

First name - Baby/twin

SINGLETONS/TWINS AGED ABOUT 5 MONTHS

1- What is your relationship with the baby/twin (of about 5 months)?

You are his/her biological mother

1

You are the current spouse or partner of the baby/twin's father

but **not** his/her biological mother

2

You are someone else (e.g. grandmother, aunt, babysitter, etc.)

3

SECTION I - ABOUT YOUR PREGNANCIES...

THE FOLLOWING QUESTIONS CONCERN THE DIFFERENT TIMES IN YOUR LIFE WHEN YOU WERE PREGNANT. THEY WILL PROVIDE US WITH INFORMATION ABOUT EXPERIENCES DURING PREGNANCY OF QUEBEC WOMEN WHO HAVE GIVEN BIRTH IN THE PAST YEAR.

2- How old were you when you had your first period?

Age: _____ years

3a- How many times throughout your life have you been pregnant including any pregnancies which did not go full term? *[Enter the number of times]*

_____ times

3b- How old were you when you were pregnant for the first time?

Age: _____ years

4- At what age did you have your first baby?

Age: _____ years

5- During your lifetime, how many abortions have you had? *[Circle the answer that applies to you]*

I have never had an abortion

1 ☐ (Go to Q.7)

1 abortion

2 ☐

2 or more abortions

3 ☐

6- How old were you when you had your first or only abortion?

Age: _____ years

First name - Baby/twin

SECTION II - ABOUT SLEEPING HABITS...

THIS SECTION REFERS TO THE SLEEPING HABITS OF YOUR BABY/TWIN AGED ABOUT 5 MONTHS.

- 7- In your opinion, does YOUR BABY/TWIN sleep undisturbed (straight) through the night? *[Circle "1" for yes or "2" for no]*

Yes 1
No 2 ♦ (Go to Q.8)

- 7a- If yes, since what age? *[Circle only one answer]*

From birth to less than 2 weeks old	01
From 2 weeks old to less than 1 month	02
From 1 month old to less than 1½ months	03
From 1½ months old to less than 2 months	04
From 2 months old to less than 2½ months	05
From 2½ months old to less than 3 months	06
From 3 months old to less than 3½ months	07
From 3½ months old to less than 4 months	08
From 4 months old to less than 4½ months	09
From 4½ months old to less than 5 months	10
From 5 months old to less than 5½ months	11
From 5½ months old to less than 6 months	12
Since the age of 6 months	13
If older than 6 months:	
♦ specify how old: _____ months	

First name - Baby/twin

- 8- In general, how long does it take YOUR BABY/TWIN to go to sleep? *[Circle one answer, namely 1 or 2 or 4 or 5]*

Less than 15 minutes	1
From 15 minutes to less than 30 minutes	2
From 30 minutes to less than 45 minutes	3
From 45 minutes to less than 60 minutes	4
60 minutes and more	5

- 9- When putting YOUR BABY/TWIN down for the night, how often does he/she have difficulty falling asleep? *[Circle one answer, namely 1 or 2 or 4 or 5]*

Never	1
Sometimes	2
Often	3
Always	4

- 10- In general, how many hours in a row does YOUR BABY/TWIN sleep AT NIGHT? *[Circle one answer only]*

Less than 4 hours	1
From 4 hours to less than 5 hours	2
From 5 hours to less than 6 hours	3
From 6 hours to less than 7 hours	4
From 7 hours to less than 8 hours	5
8 hours and more	6

First name - Baby/twin

- 11- In general, what is the longest time YOUR BABY/TWIN naps during THE DAY? [*Circle one answer only*]

- | | |
|-----------------------------------|---|
| Less than 1 hour | 1 |
| From 1 hour to less than 2 hours | 2 |
| From 2 hours to less than 3 hours | 3 |
| From 3 hours to less than 4 hours | 4 |
| 4 hours and more | 5 |

- 12- When you put YOUR BABY/TWIN, to bed, most often you... [*Circle only one answer, namely 1 or 2 or 3*]

- | | DAYTIME | NIGHT-TIME |
|--|---------|------------|
| ...lull him/her to sleep before putting him/her down | 1 | 1 |
| ...put him/her to bed awake and stay with him/her until he/she falls sleep | 2 | 2 |
| ...put him/her to bed awake and let him/her fall asleep on his/her own | 3 | 3 |

- 13- In general, where does YOUR BABY/TWIN sleep? [*Circle all applicable answers*]

- | | | |
|--|---|---|
| Alone in a bedroom | 1 | |
| In his/her parents' bedroom BUT not in their bed | | 2 |
| In his/her parents' bedroom AND in their bed | 3 | |
| Shares his/her bedroom with another family member (brother, sister, grand-parents, etc...) | 4 | |

FOR TWINS ONLY:

- | | |
|---|---|
| Shares his/her bedroom with his/her twin brother/sister | 5 |
| Shares his/her bed with his/her twin brother/sister | 6 |

First name - Baby/twin

- 14- Does YOUR BABY/TWIN have one or more object(s) in particular that help him/her to fall asleep when he/she is in bed? **[Circle all applicable answers]**

None	1
Soothen (pacifier)	2
Bottle	4
Any other object (teddy bear, blanket, mobile, etc.)	8

- 15- When YOUR BABY/TWIN is healthy, what do you **currently** do when he/she wakes up at night? **[Circle only one answer, namely 1 or 2 or 3 or 4 or 5]**

You let him/her cry	1
You comfort him/her but leave him/her in his/her bed	2
You pick him/her up and/or rock him/her	3
You feed him/her (breast or bottle)	4
You bring him/her into your bed	5
You do something else	6
Your baby/twin does not wake up	7

- 16- On average, how many times a night was your sleep interrupted by YOUR BABY/TWIN this past month? **[Circle one answer, namely 1 or 2 or 3 or 4]**

Never	1
1-2 times	2
3-4 times	3
5 times or more	4

First name - Baby/twin

- 17- What is the average temperature in the room where YOUR BABY/TWIN sleeps? *[Circle only one answer, namely 1 or 2 or 3 or 4]*

Less than 17°C (63°F)	1
Between 18°C and 21°C (64°F to 70°F)	2
Between 22°C and 25°C (71°F to 77°F)	3
26°C or more (78°F)	4

- 18- Does YOUR BABY/TWIN sleep in the dark (with the light off) at night? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

- 19- Does YOUR BABY/TWIN breathe **NOISILY** during his/her sleep? *[Circle only one answer, namely 1 or 2 or 3 or 4]*

Never	1
Sometimes	2
Often	3
Always	4

- 20- Does either parent, or another person smoke in the house? *[Circle all applicable answers]*

Neither parent smokes	1
One parent smokes	2
Both parents smoke	4
Another person living in the house smokes	8

First name - Baby/twin

SECTION III - ABOUT RELATIONSHIPS BETWEEN MOTHER AND BABY/TWIN...

GENERALLY SPEAKING, THE BEHAVIOURS AND ATTITUDES DEMONSTRATED BY MOTHERS TOWARDS THEIR CHILDREN VARY CONSIDERABLY FROM ONE MOTHER TO ANOTHER AND FROM ONE CHILD TO ANOTHER. WE WOULD LIKE TO GET AN OVERVIEW OF YOUR INTERACTIONS WITH _____ (OF ABOUT 5 MONTHS).

First name of baby/twin

PLEASE INDICATE TO WHAT EXTENT EACH STATEMENT ACCURATELY DESCRIBES YOUR ACTIONS, YOUR THOUGHTS OR YOUR FEELINGS TOWARDS YOUR BABY/TWIN.

USE THE FOLLOWING SCALE TO RATE EACH ANSWER:

0	1	2	3	4	5	6	7	8	9	10
Not at all what you do, what you think, how you feel										Exactly what you do what you think, how you feel

21- I get the impression that my baby/twin is particularly curious compared with other children his/her age.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

22- My behaviour has little effect on the personal development of my baby/twin.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

First name - Baby/twin

22a- I take really great pleasure in “talking” (babbling, using baby-talk) with my baby/twin.

0	1	2	3	4	5	6	7	8	9	10
Not at all how I feel										Exactly how I feel

22b- I often play with my baby/twin. For example, I regularly take the time to amuse him/her or make him/her laugh when I change his/her diaper.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I do										Exactly what I do

23- I feel that I am very good at keeping my baby/twin amused.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

24- I get the impression that my baby/twin is particularly endearing compared with other children his/her age.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

25- I feel that I am very good at calming my baby/twin down when he/she is upset, fussy or crying.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

26- I have been angry with my baby/twin when he/she was particularly fussy.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I did										Exactly what I did

First name - Baby/twin

27- I feel that I am very good at keeping my baby/twin busy while I am doing other things.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

28- When my baby/twin cries, he/she gets on my nerves.

0	1	2	3	4	5	6	7	8	9	10
Not at all how I feel										Exactly how I feel

29- I feel that I am very good at attracting the attention of my baby/twin.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

30- I have raised my voice with or shouted at my baby/twin when he/she was particularly fussy.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I did										Exactly what I did

31- Regardless of what I do, my baby/twin will develop on his/her own.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

32- I feel that I am very good at feeding my baby/twin changing his/her diapers and giving his/her bath.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

First name - Baby/twin

33- I have spanked my baby/twin when he/she was particularly fussy.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I did what I did

34- I insist upon keeping my baby/twin close to me at all times, within my eyesight and in the same room as I am.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I think what I think

35- I get the impression that my baby/twin is particularly cute compared with other children his/her age.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I think what I think

36 I have lost my temper when my baby/twin was particularly fussy.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I did what I did

37- My behaviour has little effect on the intellectual development of my baby/twin.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I think what I think

38- I consider myself a “real mother hen”.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I think what I think

First name - Baby/twin

39- I prefer that my baby/twin sleeps in the same room as me at night.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

40- I have left my baby/twin alone in his/her bedroom when he/she was particularly fussy.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I did										Exactly what I did

41- When I leave my baby/twin with a baby-sitter, I miss him/her so much that I cannot enjoy myself.

0	1	2	3	4	5	6	7	8	9	10
Not at all how I feel										Exactly how I feel

42- My behaviour has little effect on the development of emotions (for example, happiness, fear, anger) in my baby /twin.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I think										Exactly what I think

43- I have shaken my baby/twin when he/she was particularly fussy.

0	1	2	3	4	5	6	7	8	9	10
Not at all what I did										Exactly what I did

44- I can never bring myself to leave my baby/twin with a baby-sitter.

0	1	2	3	4	5	6	7	8	9	10
Not at all how I feel										Exactly how I feel

First name - Baby/twin

45- My behaviour has little effect on how my baby/twin will interact with others in the future.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I think what I think

46- I get the impression that my baby/twin is particularly intelligent compared with other children his/her age.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
what I think what I think

46a- I often feel the urge to kiss my baby/twin.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
how I feel what I feel

46b- I usually feel very great pleasure when holding my baby/twin in my arms.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
how I feel how I feel

46c- I feel a very intense joy and I sort of “melt down” whenever my baby/twin smiles at me.

0 1 2 3 4 5 6 7 8 9 10
Not at all Exactly
how I feel how I feel

47- In general, do you think you are a “good mother”?

0 1 2 3 4 5 6 7 8 9 10
I'm very I'm very
bad mother good mother

First name - Baby/twin

**SECTION IV- ABOUT THE SUPPORT PROVIDED
BY YOUR CURRENT SPOUSE...**

**PLEASE INDICATE THE EXTENT TO WHICH EACH STATEMENT DESCRIBES HOW
YOU FEEL WITH RESPECT TO THE SUPPORT YOU RECEIVE FROM YOUR CURRENT
SPOUSE.**

USE THE FOLLOWING SCALE TO RATE EACH ANSWER:

0	1	2	3	4	5	6	7	8	9	10
Not at all how you feel										Totally how you feel

48- How is your current spouse related to your baby/twin? He/she is...

...biological father	1
...adoptive or stepfather	2
...biological mother	3
...adoptive or stepmother	4
Other (specify) _____	5
You do not have a spouse	6 ♦ (<i>Go to Q.54</i>)

49- To what extent do you feel supported by your current spouse (partner) in the baby/twin caretaking?

0	1	2	3	4	5	6	7	8	9	10
Not at all										Totally

50- To what extent do you feel supported by your current spouse (partner) in the household chores?

0	1	2	3	4	5	6	7	8	9	10
Not at all										Totally

51- To what extent do you feel supported by your current spouse (partner) when you feel overwhelmed?

0	1	2	3	4	5	6	7	8	9	10
Not at all										Totally

52- To what extent do you feel supported by your current spouse (partner) when you feel sad?

0 1 2 3 4 5 6 7 8 9 10
Not at all Totally

53- Overall, to what extent do you feel supported by your current spouse (partner)?

0 1 2 3 4 5 6 7 8 9 10
Not at all Totally

For consultation only

SECTION V- ABOUT YOUR CHILDHOOD, YOUR ADOLESCENCE AND YOUR ADULT LIFE...

THIS YEAR, WE ARE ADDRESSING CERTAIN PERIODS OF YOUR LIFE.

- 54- **Before the end of high school**, were you involved in any clubs, groups or community programs organized by adults, like Guides, choir, etc? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

- 55- **Before the end of high school**, did you more than once swipe things from stores or from other children, or steal from your parents or from anyone else? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

- 56- **Before the end of high school**, did you more than once get into fights that you had started? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

- 57- **Before the end of high school**, were you ever involved with Social Services (Department of Youth Protection), in trouble with the police or arrested BECAUSE OF YOUR MISBEHAVIOUR? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

58- **Before the end of high school**, were you involved in an organized sports team (e.g. local volleyball or baseball or soccer team, etc.)? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

59- **Before the end of high school**, did you ever skip school at least twice in one year? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

59a- **Before the end of high school**, did you ever run away from home overnight? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

Now about your ADULT LIFE...

60- **Since leaving or finishing school**, have you joined any community associations, groups or programs like a Business Women's Association, or taken part in municipal recreation activities like relaxation sessions, ceramics courses, etc.? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

61- **Since leaving or finishing school**, have you been FIRED from your job (do not take into account layoffs resulting from lack of work)? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

62- **Since leaving or finishing school**, have you ever been arrested for anything OTHER than traffic violations? *[Circle “1” for yes or “2” for no]*

Yes	1
No	2

63- **Since leaving or finishing school**, did you ever hit or throw things at your spouse (or partner that you were living with)? *[Circle “1” for yes or “2” for no]*

Yes	1
No	2

64- **Since leaving or finishing school**, have you ever been in trouble at work, with the police or with your family, or had a car accident BECAUSE OF DRUGS OR ALCOHOL? *[Circle “1” for yes or “2” for no]*

Yes	1
No	2

65- **Since leaving or finishing school**, have you been involved in an organized sports team (e.g. local baseball or soccer team, etc.)? *[Circle “1” for yes or “2” for no]*

Yes	1
No	2

DEAR RESPONDENT...

IF YOUR CURRENT SPOUSE IS **NOT** THE BIOLOGICAL FATHER OF YOUR BABY/TWIN AGED 4 TO 9 MONTHS AND HIS/HER *BIOLOGICAL FATHER DOES NOT LIVE WITH YOU*, PLEASE FILL OUT THE FOLLOWING SECTION ACCORDING TO WHAT YOU KNOW ABOUT HIS CHILDHOOD, ADOLESCENCE AND ADULT LIFE (QUESTIONS 66, 67, ETC.).

IF HOWEVER, YOUR CURRENT SPOUSE **IS THE BIOLOGICAL FATHER** OF YOUR BABY/TWIN AGED 4 TO 9 MONTHS AND THEREFORE LIVES WITH YOU AND YOUR BABY/TWIN, PLEASE GO TO SECTION VII, QUESTION 76.

For consultation only

SECTION VI- ABOUT YOUR BABY/TWIN'S BIOLOGICAL FATHER...

- 66- How much contact does the biological father have with HIS BABY/TWIN (e.g.: visits, phone calls)?
[Circle only one answer]

Never	0
Every day	1
Several times a week	2
Several times a month	3
Once since his/her birth	4

- 67- Does the biological father provide any financial support for HIS BABY/TWIN? *[Circle "1" for yes or "2" for no]*

Yes	1
No	2

Now, here are some questions about the childhood and adolescence of the baby/twin's biological father WHO DOES NOT LIVE WITH YOU...

- 68- **Before the end of high school**, did the biological father of YOUR BABY/TWIN more than once swipe things from store or from other children, or steal from his parents or from anyone else? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

- 69- **Before the end of high school**, did the biological father of YOUR BABY/TWIN often get into fights that he had started? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

- 70- **Before the end of high school**, has the biological father of YOUR BABY/TWIN ever been involved with Social Services (Department of youth Protection), in trouble with the police or arrested BECAUSE OF HIS MISBEHAVIOUR? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

- 71- **Before the end of high school**, has the biological father of YOUR BABY/TWIN ever been expelled or suspended from school? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

Now, some questions about the adult life of the biological father of your BABY/TWIN aged 4 to 9 months who DOES NOT LIVE with you...

- 72- **Since leaving or finishing school**, has the biological father of YOUR BABY/TWIN been FIRED from MORE THAN ONE job (do not take into account layoffs resulting from lack of work)? *[Circle 1 or 2 or 7 or 8]*

Yes	1
No	2
He has never worked	7
Do not know	8

- 73- **Since leaving or finishing school**, has the biological father of YOUR BABY/TWIN ever been arrested for anything OTHER than traffic violations? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

- 74- **Since leaving or finishing school**, has the biological father of YOUR BABY/TWIN more than once gotten into fights, or assaulted or physically hurt anyone, including yourself? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

- 75- **Since leaving or finishing school**, has he ever been in trouble at work, with the police or with his family, or had a car accident BECAUSE OF DRUGS OR ALCOHOL? *[Circle "1" for yes or "2" for no or "8" for do not know]*

Yes	1
No	2
Do not know	8

SECTION VII- ABOUT YORU LEISURE TIME...

76- **Last week**, approximately how many hours did you devote in total to each of the following leisure activities? *[Circle only one answer]*

	NONE	LESS THAN 3 HOURS	3 HOURS OR MORE, BUT LESS THAN 6	6 HOURS OR MORE, BUT LESS THAN 11	11 HOURS OR MORE BUT LESS THAN 21	21 HOURS OR MORE
a. Television and videos	0	1	2	3	4	5
b. Reading	0	1	2	3	4	5
c. Physical activities or sports	0	1	2	3	4	5
d. Computer (electronic games, internet, etc.)	0	1	2	3	4	5
e. Other leisure activities	0	1	2	3	4	5

YOUR COMMENTS...

Kindly indicate your comments in the space below. Your feedback is appreciate.

Our most sincere thanks for your cooperation!

KINDLY PLACE THE COMPLETED QUESTIONNAIRE IN THE PRE-PAID RETURN ENVELOPE AND SEAL IT TO GUARANTEE CONFIDENTIALITY. FORWARD BY MAIL AS SOON AS POSSIBLE.