



Institut de
la statistique
du Québec

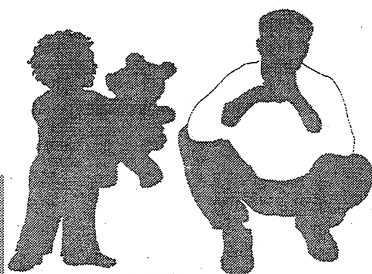
Direction Santé Québec

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

BFA Yes 1 No 2

File No.:

2	-	0	0	-		-		-			-				-				
1		2	3		4		5		6	7		8	9	10	11		12	13	14



Interview language:

2

Interviewer No.:

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Self-Administered Questionnaire for father (SAQF)

Longitudinal Study of Child Development in Québec (ÉLDEQ - E3) - VOLET 2000

This questionnaire must be filled out by the child's father (of ABOUT 29 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 *Direction Santé Québec* (514) 873-4749. Please call collect if you live outside of the greater Montréal area. This questionnaire will remain strictly anonymous and confidential.

It is important to fill out the questionnaire by yourself without consulting the mother of your child and if it is possible while the interviewer is present or else as soon as possible. Then place it in the enclosed envelope and seal it before giving it back to the interviewer or sending by mail.

Questionnaire status:	Completed	1
	Partially completed	2
	No completed	3

Date received (interviewer):

(Day)		(Month)		(Year)	

Date received (BIP):

(Day)		(Month)		(Year)	

Direction Santé Québec

Institut de la statistique du Québec
1200 McGill College Avenue
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 or (877) 843-7304

Instructions and examples

You will find that there are several possible answers to the following 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 and **circle the corresponding number**. Please consider the instructions following your choice (ex.: **Go to Q...**).

Example 1

23. Also, try to remember YOUR FATHER (adoptive or other) in your first 16 years, and circle the most appropriate number next to each question, showing whether your father's behaviour was more or less like the one described.
[Circle only one answer for each statement]

I've never known my father (adoptive or other) **97** → **Go to Q. 24**

My father...	Very like	Moderately like	Moderately unlike	Very unlike
a. ... spoke to me with a warm and friendly voice	1	2	3	4

Example 2

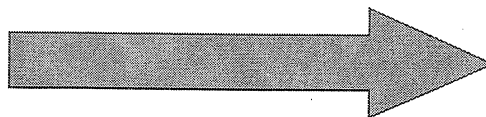
32. For each statement, please circle the number that best describes how you feel in general.
[Circle only one answer for each statement]

	Always	Often	Sometimes	Rarely	Never
a. I feel that I have to rush to get everything done each day	1	2	3	4	5

Example 3

47. I feel that I am very good at keeping my child amused (of ABOUT 29 MONTHS).

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



Let's begin...

First name - Child



SINGLETONS AGED ABOUT 29 MONTHS

1. What is your relationship with the child (of ABOUT 29 MONTHS)?

- You are his/her biological father 1
You are the current spouse or partner of the child's mother but not his/her biological father 2
You are someone else (e.g.: grandfather, uncle, babysitter, etc.) 3

Section 1

About your child's (of ABOUT 29 MONTHS) behaviour...

Now, we would like to ask you some questions about how your child (of ABOUT 29 MONTHS) seems to feel or act.

By circling the number corresponding to the following answers...

- 1 = Never or not true
2 = Sometimes or somewhat true
3 = Often or very true

Indicate which statement in your opinion best describes your child's behaviour.

How often would you say that your child (of ABOUT 29 MONTHS)...	Never or not true	Sometimes or somewhat true	Often or very true
2. ... is shy with children he/she does not know?	1	2	3
3. ... can't sit still, is restless, or hyperactive?	1	2	3
4. ... seems to be unhappy or sad?	1	2	3
5. ... gets into fights?	1	2	3
6. ... readily approaches children he/she does not know?	1	2	3

continued on the next page...



First name - Child

How often would you say that your child (of ABOUT 29 MONTHS)...	Never or not true	Sometimes or somewhat true	Often or very true
7. ... is not as happy as other children?	1	2	3
8. ... fidgets?	1	2	3
9. ... takes a long time getting used to being with children he/she does not know?	1	2	3
10. ... is too fearful or anxious?	1	2	3
11. ... physically attacks others?	1	2	3
12. ... didn't seem to feel guilty after misbehaving?	1	2	3
13. ... is worried?	1	2	3
14. ... is defiant or refuses to comply with adults' requests or rules?	1	2	3
15. ... reacts with anger and fighting when somebody accidentally hurts him (such as by bumping into him/her)?	1	2	3
16. ... cannot settle to anything for more than a few moments?	1	2	3
17. ... kicks, bites, hits other children?	1	2	3
18. ... is nervous, highstrung or tense?	1	2	3
19. ... doesn't want to sleep alone?	1	2	3
20. ... has trouble enjoying him/herself?	1	2	3
21. ... gets very upset when separated from parents?	1	2	3

Section 2

About relationship between you and your parents....

The following questions list various kinds of behaviours and attitudes of parents.

22. Try to remember YOUR MOTHER (adoptive or other) in your first 16 years, and circle the most appropriate number next to each question, showing whether your mother's behaviour was more or less like the one described.

[Circle only one answer for each statement]

My mother	Very like	Moderately like	Moderately unlike	Very unlike
a. ... spoke to me with a warm and friendly voice	1	2	3	4
b. ... let me do the things I liked doing	1	2	3	4
c. ... was affectionate to me	1	2	3	4
d. ... let me decide things for myself	1	2	3	4
e. ... could make me feel better when I was upset	1	2	3	4
f. ... gave me as much freedom as I wanted	1	2	3	4
g. ... let me go out as often as I wanted	1	2	3	4

23. Also, try to remember YOUR FATHER (adoptive or other) in your first 16 years, and circle the most appropriate number next to each question, showing whether your father's behaviour was more or less like the one described.

[Circle only one answer for each statement]

I've never known my father (adoptive or other) 97 → Go to Q. 24

My father...	Very like	Moderately like	Moderately unlike	Very unlike
a. ... spoke to me with a warm and friendly voice	1	2	3	4
b. ... let me do the things I liked doing	1	2	3	4
c. ... was affectionate to me	1	2	3	4
d. ... let me decide things for myself	1	2	3	4
e. ... could make me feel better when I was upset	1	2	3	4
f. ... gave me as much freedom as I wanted	1	2	3	4
g. ... let me go out as often as I wanted	1	2	3	4

Section 3

About your relationship with the spouse/partner with whom you are currently living...

These questions refer to your couple relationship.

24. The numbers below correspond to the different degrees of happiness in your couple relationship. Number 4, "happy", corresponds to the level of happiness found in most relationships. Circle the number that corresponds best to your relationship.

1	2	3	4	5	6	7
Extremely unhappy	Quite unhappy	A little unhappy	Happy	Very happy	Extremely happy	Perfectly happy

I don't have any spouse/partner 97 → Go to Q. 32

25. Most persons have disagreements in their relationships. Please indicate below the approximate extent of agreement or disagreement between you and your partner about demonstration of affection. **[Circle only one answer]**

Always agree	1
Almost always agree	2
Occasionally agree	3
Frequently disagree	4
Almost always disagree	5
Always disagree	6

26. How often do you discuss or have you considered divorce, separation, or terminating your relationship?
[Circle only one answer]

All the time	1
Most of the time	2
More often than not	3
Occasionally	4
Rarely	5
Never	6

27. In general, how often do you think that things between you and your partner are going well? **[Circle only one answer]**

- All the time 1
- Most of the time 2
- More often than not 3
- Occasionally 4
- Rarely 5
- Never 6

28. Do you confide in your mate? **[Circle only one answer]**

- All the time 1
- Most of the time 2
- More often than not 3
- Occasionally 4
- Rarely 5
- Never 6

29. Do you ever regret that you married (or lived together) or that you are in this relationship? **[Circle only one answer]**

- All the time 1
- Most of the time 2
- More often than not 3
- Occasionally 4
- Rarely 5
- Never 6

How often would you say the following events occur between you and your mate?

30. ... calmly discuss something with your spouse/partner? **[Circle only one answer]**

- Never 1
- Less than once a month 2
- Once or twice a month 3
- Once or twice a week 4
- Once a day 5
- More often 6

31. ...work with your spouse/partner on a project or common activity? **[Circle only one answer]**

- Never 1
- Less than once a month 2
- Once or twice a month 3
- Once or twice a week 4
- Once a day 5
- More often 6

Section 4

About the pace of your day-to-day life...

The following questions are about the pace of your day-to-day life.

32. For each statement, please circle the number that best describes how you feel in general.

[Circle only one answer for each statement]

	Always	Often	Sometimes	Rarely	Never
a. I feel that I have to rush to get everything done each day	1	2	3	4	5
b. By the time supper time arrives, I am physically exhausted	1	2	3	4	5
c. I feel that I have enough time for myself	1	2	3	4	5

Section 5

About your wellbeing...

The following questions are about your state of wellbeing.

33. During the past week, did you felt sad or depressed? **[Circle only one answer, "1" for Yes or "2" for No]**

Yes 1

No 2

34. In your lifetime, have you ever had **two weeks or more** during which you felt sad or depressed most of the time?

[Circle only one answer, "1" for Yes or "2" for No]

Yes 1

No 2 → Go to Q.43

35. How many spells of depressed or sad moods **that lasted two weeks or more** have you had?

Number _____

36. How old were you the **first** time you were ever depressed for **two weeks or more**?

Age _____ → If one spell, go to Q.38

37. How old were you the **last** time you were ever depressed for **two weeks or more**?

Age _____

38. During your **worst** spell of depression (or the only spell of depression), did you...
[Circle only one answer for each statement, namely "1" for Yes or "2" for No]

	Yes	No
a. ... experience a change in appetite, weight loss, or weight gain?	1	2
b. ... have trouble falling asleep, staying asleep, waking up too early, or sleeping too much? ...	1	2
c. ... feel tired out, fatigued, or without energy?	1	2
d. ... feel worthless, sinful, or guilty?	1	2
e. ... lose interest in things?	1	2
f. ... have trouble concentrating?	1	2
g. ... want to die or think about suicide?	1	2
h. ... attempt suicide?	1	2

39. Did you ever talk to a doctor, psychiatrist, psychologist, or other professional because you felt depressed?

[Circle only one answer, "1" for Yes or "2" for No]

Yes 1
No 2

40. Did being depressed ever **interfere** with work, school, taking care of children, or your relationship with other people?

[Circle only one answer, "1" for Yes or "2" for No]

Yes 1
No 2

41. Have you had a spell of depression lasting **two weeks or more** since the birth of your child (of ABOUT 29 MONTHS)?

[Circle only one answer, "1" for Yes or "2" for No]

Yes 1
No 2 → Go to Q.43

42. How old were your child when you had your **more recent** spell of depression lasting **two weeks or more**?

[Indicate the age in months]

_____ number of months

Section 6

About your current job...

43. Do you **currently** have a paying job (whether part-time, full-time, on salary, wages, or self-employed, even though you may be on vacation, parental or sick leave, leave due to a workplace accident, on strike or locked out)?

[Circle "1" for Yes or "2" for No]

Yes 1
No 2 → Go to Q.46

44. Currently, your principal paid job is... **[Circle only one answer. If you hold more than one job, circle the description that corresponds to your principal job]**

...a permanent job 1
...a temporary job with a set termination date 2
...a temporary job with no set termination date 3
...you are self-employed (your own business, consultant, freelance, etc.) 4
...on call, substitute 5
Other (specify) _____ 6



45. To what extent are you satisfied with...

a. ... the type of work you do? **[Circle only one answer]**

1	2	3	4	5
Very				Very
satisfied				unsatisfied

b. ... the number of hours you work? **[Circle only one answer]**

1	2	3	4	5
Very				Very
satisfied				unsatisfied

c. ... your pay? **[Circle only one answer]**

1	2	3	4	5
Very				Very
satisfied				unsatisfied

d. ... your job in general? **[Circle only one answer]**

1	2	3	4	5
Very				Very
satisfied				unsatisfied

e. ... your workplace's policies regarding children (examples: paternity leave, time off for family responsibilities, flexible working hours and place of work, etc.)? **[Circle only one answer]**

1	2	3	4	5
Very				Very
satisfied				unsatisfied



First name - Child

Section 7

About relationships between a father and his child (of ABOUT 29 MONTHS)...

Generally speaking, the behaviours and attitudes demonstrated by fathers towards their children vary considerably from one father to another and from one child to another. We would like to get an overview of your interactions with _____ (of ABOUT 29 MONTHS).

Please indicate to what extent each statement accurately describes your actions, your thoughts or your feelings towards your child.

Use the following scale to rate each answer:

0

Not at all
what you do,
what you think,
how you feel

1

2

3

4

5

6

7

8

9

10

Exactly
what you do,
what you think,
how you feel

46. My behaviour has little effect on the development of my child's (of ABOUT 29 MONTHS) personality.

0

Not at all
what I think

1

2

3

4

5

6

7

8

9

10

Exactly
what I think

47. I feel that I am very good at keeping my child amused.

0

Not at all
what I think

1

2

3

4

5

6

7

8

9

10

Exactly
what I think

48. I feel that I am very good at calming my child down when he/she is upset, fussy or crying.

0

Not at all
what I think

1

2

3

4

5

6

7

8

9

10

Exactly
what I think

49. I have been angry with my child when he/she was particularly fussy.

0

Not at all
what I did

1

2

3

4

5

6

7

8

9

10

Exactly
what I did

First name - Child



50. I feel that I am very good at keeping my child (of ABOUT 29 MONTHS) 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

51. I feel that I am very good at attracting and keeping the attention of my child.

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

52. I have raised my voice with or shouted at my child 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

53. Regardless of what I do as a parent, my child 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

54. I have spanked my child 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

55. I insist upon keeping my child 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 what I think										Exactly what I think

56. I have lost my temper when my child 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 - Child

57. My behaviour has little effect on the intellectual development of my child (of ABOUT 29 MONTHS).

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

58. I consider myself a "real mother hen".

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

59. When I leave my child 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 what I feel

60. My behaviour has little effect on the development of emotions (for example, happiness, fear, anger) in my child.

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

61. I can never bring myself to leave my child with a baby-sitter.

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

62. My behaviour has little effect on how my child will behave with others in the future.

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

Dear respondent...

If you are not living with **THE BIOLOGICAL MOTHER** of your child of **ABOUT 29 MONTHS**, Please **FILL OUT THE FOLLOWING SECTION** (beginning at question 63).

If, however, you are living with **THE BIOLOGICAL MOTHER** of your child (of **ABOUT 29 MONTHS**), please go directly to the **LAST PAGE** of the questionnaire to share your comments with us, if any.

- * **ATTENTION** → If the biological mother of your child (of **ABOUT 29 MONTHS**) is deceased, please go directly to the last page of the questionnaire to share your comments with us, if any.



First name - Child

Section 8

About your relationship with your child (of ABOUT 29 MONTHS) and his/her biological mother...

The following questions are about your relationship with you child (of ABOUT 29 MONTHS) and his/her biological mother.

63. If you have separated from the biological mother of your child (of ABOUT 29 MONTHS) **since our last visit a year ago**, how would you describe the emotional atmosphere surrounding this separation? **[Circle only one answer]**

Good 1
Fairly 2
Bad 3
Very bad 4
I have been separated for more than a year 5

64. Are you still in touch with the biological mother of your child? **[Circle "1" for Yes or "2" for No]**

Yes 1
No 2 → Go to Q.66

65. How would you describe the current situation between you and the biological mother of your child?
[Circle only one answer]

Good 1
Fairly good 2
Bad 3
Very bad 4

66. How satisfied/unsatisfied are you with the frequency of the contact you have (telephone calls, visits or custody arrangements) with your child? **[Circle only one answer]**

Very satisfied 1
Somewhat satisfied 2
Somewhat unsatisfied 3
Very unsatisfied 4

First name - Child



67. How satisfied/unsatisfied are you with the quality of your relationship with your child (of ABOUT 29 MONTHS)?
[Circle only one answer]

- Very satisfied 1
Somewhat satisfied 2
Somewhat unsatisfied 3
Very unsatisfied 4



Your comments...

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

Kindly place the completed questionnaire in the enclosed envelope and seal it to guarantee confidentiality.
Please, give it back to the interviewer or forward by mail as soon as possible.

Our most sincere thanks for your cooperation!