



Institut de
la statistique
du Québec

Direction Santé Québec

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

Paper Questionnaire Completed by the Interviewer (PQCI)

Longitudinal Study of Child Development in Québec
ÉLDEQ (E4) - Volet 2001

File No.:

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1		2	3		4		5		6	7		8	9	10	11

Interviewer No.:

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Interview language:

2

Questionnaire status:	Completed	1
	Partially completed	2
	Not completed	3

Starting time (*heure internationale*) of questionnaire:

Hour/s	

Minute/s	

Date of interview:

Day	

Month	

Year	

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Child AGED ABOUT 3½ YEARS OLD

Section 1

About the feeding profile of _____ (of ABOUT 3½ YEARS)...

This section will enable you to draw up a feeding profile for your child of ABOUT 3½ YEARS by determining his/her feeding habits and addressing the introduction of new foods.

1. Respondent status:

- Biological mother of the child 1
Current spouse or partner of the biological mother of the child (**not** the biological father) 2
Biological father of the child 3
Current spouse or partner of the biological father of the child (**not** the biological mother) 4
Other 5

2. When _____ is at home with you for the main meal of the day, how often does he/she eat a meal that is different from the other members of your family?

- Almost never 4
Sometimes 3
Almost always 2
Always 1
Refusal 9

3. In the past seven days, how many times has _____ (of ABOUT 3½ YEARS) had his/her main meals (NOT INCLUDING snacks)...

Number of meals eaten...	Breakfast	Lunch	Supper
a) ... at home			
b) ... outside the home, <u>in child care</u> (daycare, private baby-sitter, mother, mother-in-law, etc.)			
c) ... outside the home, <u>in situations other than child care</u> (restaurant, home of absent biological mother/father, visiting friends or family, etc.)			
[I → The total should add up to 7 if the child does not skip meals. However, the total cannot be more than 7]	7	7	7

4. In general, does _____ (of ABOUT 3½ YEARS)...
[I → Show Response Card "H"]

	Never	Rarely	Sometimes	Often	Refusal
a) ... eat enough?	1	2	3	4	9
b) ... refuse to eat the right food?	1	2	3	4	9
c) ... over-eat?	1	2	3	4	9
[I → In general...]					
d) ... eat too fast?	1	2	3	4	9
e) ... eat between meals so is not hungry at mealtime?	1	2	3	4	9
f) ... eat at regular hours?	1	2	3	4	9
[I → In general...]					
g) ... refuse to eat?	1	2	3	4	9

5aa. In general, do you know what he/she eats at the daycare or at the baby-sitter's place?

Yes 1
No 2

5. In the past week at home and in childcare (daycare, baby-sitter, etc.), on average, how many times during the week or how many times per day has _____ eaten the following foods?
[I → Show Response Card "B"]

[I → In the past week..]	None	Times (During the week)			Times (Per day)		DNK	R
		1-2	3-4	5-6	1	2 and +		
a) Milk	1	2	3	4	5	6	8	9
b) Cheese	1	2	3	4	5	6	8	9
c) Yoghurt, milk desserts (example : Laura Secord milk puddings) [Excluding ice-creams]	1	2	3	4	5	6	8	9
d) Fruits	1	2	3	4	5	6	8	9
e) Juice/Fruit drinks	1	2	3	4	5	6	8	9
f) Vegetables/Potatoes	1	2	3	4	5	6	8	9

Continued on the next page...

[I → In the past week..]	None	Times (During the week)			Times (Per day)		DNK	R
		1-2	3-4	5-6	1	2 and +		
g) Poultry	1	2	3	4	5	6	8	9
h) Meat (example : pork, beef, veal, etc.)	1	2	3	4	5	6	8	9
i) Fish/Seafood	1	2	3	4	5	6	8	9
j) Legumes, pulses (example : lentils, tofu)	1	2	3	4	5	6	8	9
k) Bread	1	2	3	4	5	6	8	9
l) Cereal (example : Corn Flakes, Froot Loops, baby cereal, etc.)	1	2	3	4	5	6	8	9
m) Pasta/Rice	1	2	3	4	5	6	8	9
n) Pastries/Candies/Cookies/Chips/Chewing gum containing sugar [I → Don't count sugar-free chewing gum]	1	2	3	4	5	6	8	9

6. Is _____ still drinking from a bottle?

Yes 1 → **Go to Q.6b**
 No 2 → **Go to Q.6a**
 Never drank from a bottle 3 → **Go to Q.7**
 Do not know 8 → **Go to Q.7**
 Refusal 9 → **Go to Q.7**

6a. At what age did he/she stop completely?

_____ months → **Go to Q.7**

6b. How often does he/she want a bottle...

[I → **Show Response Card "H"**]

	Never	Rarely	Sometimes	Often	Refusal
b1. ... to get to sleep during the day (naptime) and/or to get to sleep at night?	1	2	3	4	9
b2. ... during his/her nap and/or while he/she sleeps at night?	1	2	3	4	9
b3. ... when he/she is awake (example : when playing, watching television, walking around, etc.)?	1	2	3	4	9

6c. What do you put in the bottle **most often**?

[I → **Write just one response** → **Do not read the choices of answers**]

- Water 1
Breast milk 2
Commercial infant formula 3
Cow's milk 4
Juice 5
Juice with water added 6
☐ Other 7
 → specify _____

7. What type or brand of fluoride supplements (alone or in combination with vitamins and/or minerals) are you **currently** giving _____ (of ABOUT 3½ YEARS)?

[I → **Show Response Card "C"**]

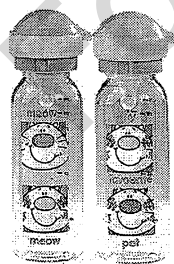
- Name on box 1
Currently, not taking any 2 → **Go to Q.8**

7a. How often is he/she taking them **now**?

- Twice a day 1
Once a day 2
Less than once a day 3
Less than once a week 4
Do not know 8
Refusal 9

7b. At what age did you start giving him/her **THESE** fluoride supplements?

- When he/she was born 1
_____ days 2
_____ week/s 3
_____ month/s 4
Do not know 8
Refusal 9



8. In the past three months (namely since...), how many times has _____ (of ABOUT 3½ YEARS) suffered from...

[I → Show Response Card "I"]

None	Once	Twice	3 times	4 times and +	DNK	Refusal
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a) gastro-intestinal infection (gastro-enteritis ("stomach flu") lasting one day or more, vomiting and/or diarrhoea)?

1 2 3 4 5 8 9

b) ear infection (otitis)?

1 2 3 4 5 8 9

[I → In the past three months...]

c) respiratory infection with fever (cold, flu, pneumonia)?

1 2 3 4 5 8 9

d) another infection (example : urinary tract infection)

1 2 3 4 5 8 9

specify _____

9. In the past six months (namely since last...), how many times has _____ taken antibiotics?

[I → Including the interview day - Show Response Card "N"]

[I → An antibiotic treatment generally lasts less than 15 days. Long-term treatments have a duration of more than a month without interruption. In cases where the child may have had more than one long-term antibiotic treatment in the past 6 months, circle 6 and enter the duration and number of treatments in the "Feuille de suivi informatique".]

None 1
Once 2
Twice 3
3 times 4
4 times and + 5
One or more long-term (more than a month) antibiotic 6
Continuous treatment 7
Do not know 8
Refusal 9

Section 2

About the teeth of _____ (of ABOUT 3½ YEARS)...

10. In the past week at home and in child care (daycare, baby-sitter, etc.), on average, how many times during the week or how many times per day has _____ (of ABOUT 3½ YEARS) eaten the following foods as a **snack**, in other words, between meals or immediately before bedtime?
[I → Show Response Card "L"]

	None	Times a week		Times a day				DNK	R
		1-3	4-6	1	2	3	4 and +		
a) Dried fruits (example : raisins, dates, apricots, etc.)	1	2	3	4	5	6	7	8	9
b) Ice cream, sherbet, frozen yoghurt, popsicle	1	2	3	4	5	6	7	8	9
c) Fruit drinks, soft drinks	1	2	3	4	5	6	7	8	9
d) Cookies, pastries, granola bars	1	2	3	4	5	6	7	8	9
e) Candies, jam, syrup, honey, chewing gum containing sugar [I → Don't count sugar-free chewing gum]	1	2	3	4	5	6	7	8	9

11. When _____ has one of THESE snacks just before going to bed, does he/she **usually** brush his/her teeth right after?

Yes 1
 No 2
 Does not eat any of these snacks just before going to bed 3
 Do not know 8
 Refusal 9

12. During a normal day (including the night), about how many times does your child _____ (of ABOUT 3½ YEARS) suck...

[I → Show Response Card " M "]

[I → Circle only one answer for each habit]

[I → A normal day means a complete 24-hour day where the parent is with the child and the child is not sick. Don't count days where he/she is in child care (daycare or with a baby-sitter)]

	Never	Less than 2 hours	2 to 6 hours	More than 6 hours
a) ... a pacifier	1	2	3	4
b) ... his/her thumb or one or more fingers	1	2	3	4
c) ... another object (specify) _____	1	2	3	4

13. Who usually brushes _____'s teeth?

He/she brushes them him/herself	1
He/she brushes them him/herself after an adult has reminded him/her	2
He/she brushes them under an adult's supervision (adult watches the child)	3
He/she brushes them with an adult's help (adult brushes with the child)	4
Adult brushes them	5
His/her teeth are never brushed (neither by himself/herself or an adult)	6
Do not know	8
Refusal	9

14. Yesterday, for instance, how many times were _____'s teeth brushed?

Teeth were not brushed	1
Once	2
Twice	3
3 times or more	4
Do not know	8
Refusal	9

15. In general, how much toothpaste is used when brushing _____'s teeth?

[I → Show Response Card "D"]

No toothpaste	1
A small amount , about the size of a small pea	2
A small amount, equivalent to a thin smear	3
More than the size of a small pea	4
The whole length of the toothbrush	5
Do not know	8
Refusal	9

16. At what age did _____ (of ABOUT 3½ YEARS) make his/her first visit to the dentist?

Has never seen a dentist 97 → **Go to Q.18**

_____ months

17. What was the **main** reason for _____'s first visit to the dentist?

[I → **Write just one response** → **Do not read the choices of answers**]

To have his/her teeth examined 1

For an accidental injury to the mouth or teeth 2

For a cavity 3

For a problem related to the gums or teeth growing in (teething) ... 4

☐ Other 5

→ specify _____

Do not know 8

Refusal 9

Section 3

About the perception of socio-economic situation...

The following questions focus upon your assessment of the financial situation of **your household** compared with that of your parents and peers in your age group.

[I → **Not his/her personal financial situation**]

18. Do you consider yourself better or worse off financially than your parents were at your age?

Better off 1

Neither better nor worse off 2

Worse off 3

Do not know 8

Refusal 9

19. How do you perceive your financial situation compared with that of people in your age group?

I feel comfortable financially 1

I feel that my income is sufficient to meet the basic needs
of my family and myself 2

I feel that my income is not sufficient to meet the basic
needs of my family and myself 5

I consider myself poor 3

I consider myself very poor 4

Do not know 8 → **Go to Q.21**

Refusal 9 → **Go to Q.21**

20. How long have you felt this way?

- Less than a year 1
- Between 1 and 4 years 2
- Between 5 and 9 years 3
- 10 years or more 4
- Do not know 8
- Refusal 9

21. Do you feel that your financial situation is likely to improve?

- Yes, in the near future 1
- Yes, I don't know when, but I am confident that it will improve 2
- No, I don't think it's likely to change 3
- No, I think it's likely to get worse 4
- Do not know 8
- Refusal 9

CP ➡ ☐ Yes ☐ No

Finishing time (heure internationale) of questionnaire

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Our most sincere thanks for your collaboration!