



ELFE National 2 Year Survey Father Questionnaire

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Change previously underlined in yellow (with no explanation between brackets) = change made following the CAPI tests and before the start of the national survey OR change made following the start of Wave 1 mothers and before the start of fathers.

Change previously highlighted in yellow (with an explanation if the change was made at the start of Wave 1 OR during Wave 1) = change made after listening to Wave 1 telephone interviews).

Change previously highlighted in green (Wave 2 change) = change made starting from Wave 2.

Sections to be duplicated or taken into account for twins: Placed child, Maintaining of relations with father if separated, Type of care, The child's health, Extended family, Play, Food and The child's development.

Repeat variables in green.

A distinction is made between 3 types of variables:

1. Repeat variables requiring confirmation or change. Consequently, these are worded: "Are you still...? "Are you currently...?": **NOMVARIABLE**
2. Repeat variables that, for those present from one survey to the next, are documented solely for the management of filters or the consistency of the database. They are not displayed and thus not "confirmed" or "changed" where they have already been documented. However, they are asked to new "entrants" in the household or where the variable has not been documented previously: **NOMVARIABLE**
3. Non-repeat variables: **NOMVARIABLE**

1. Contact form

Carry over 1 yr or previous surveys if 1 year not done

WAVE

Wave number:

- 1 Wave 1
- 2 Wave 2
- 3 Wave 3
- 4 Wave 4

NAISGEM

Twin birth:

- 1 Yes
- 2 No

PRENF

ELFE child first name:

If NAISGEM=1

PRENF1

ELFE first-born child first name:

If NAISGEM=1

PRENF2

ELFE second-born child first name:

SEXE

ELFE child sex:

- 1 Boy
- 2 Girl

If NAISGEM=1

SEXE1

ELFE first-born child sex:

- 1 Boy
- 2 Girl

If NAISGEM=1

SEXE2

ELFE second-born child sex:

- 1 Boy
- 2 Girl

Parent contact details

NOMM

Mother's name

NOMJFM

Mother's maiden name

PRENM

Mother's first name

NOMP

Father's name

PRENP

Father's first name

TYPPERE1

Type of father

(Mother interview)

- 1 Referent father
- 2 Cohabiting father
- 3 Non-cohabiting father
- 4 Cohabiting father of placed child
- 5 Non-cohabiting father of placed child
- 6 Cohabiting father (same-sex parenting)
- 7 Father Q to be carried out ⇨ type of father to be determined in father Q
- 8 No father Q=father refusal
- 9 No father Q=unknown, deceased father
- 10 BASCUL father Q to be carried out ⇨ type of father to be determined in father Q
- 11 BASCUL No father Q= refusal
- 12 BASCUL No father Q=unknown, deceased father
- 13 Definitive refusal of mother and father ⇨ no father Q
- 14 Definitive refusal of mother and father unknown, deceased ⇨ no father Q
- 15 Mother and father deceased ⇨ no father Q
- 16 Mother deceased and father refuses to continue ⇨ no father Q

TYPPERE2

If TYPPERE1=1 then TYPPERE2=1

If TYPPERE1=(2,6) then TYPPERE2=2

If TYPPERE1=3 then TYPPERE2=3

If TYPPERE1=4 then TYPPERE2=4

If TYPPERE1=5 then TYPPERE2=5

Type of questionnaire to be asked to father:

- 1 Referent Father
- 2 Cohabiting Father
- 3 Non-cohabiting Father
- 4 Cohabiting Father of Placed Child
- 5 Non-cohabiting Father of Placed Child

Most recent contact details of mother

TELM1

Tel no.

TELM2

Tel no.

TELM3

Tel no.

EMAILMON

Email address

1 Yes

2 No

EMAILM

Email address

INTDOM

Home Internet access

1 Yes

2 No

ADR1M

At..., building, staircase, floor, apartment no.

ADR2M

Residence, Villa, etc.

ADR3M

Street and street number

ADR4M

Locality

ADRCPM

Postcode

ADRCOMM

Municipality

Field start date 29/05/2013 – 09/10/2020 version

Additional information on recipient
Additional information on geographical location
Street and street number
Locality

CODGEOM

Mother's municipality (INSEE code)

REGM

Mother's region (INSEE code)

DEPM

Mother's department (INSEE code)

Most recent contact details of father

TELP1

Tel no.

TELP2

Tel no.

TELP3

Tel no.

TELP10

Number used for interview

TYPTLP

Type of phone used

- 1 Landline
- 2 Mobile

EMAILPON

Email address different to mother's

- 1 Yes
- 2 No

EMAILP

Email address

ADRIDP

Address different to mother's

- 1 Yes
- 2 No

ADR1P

At..., building, staircase, floor, apartment no.

ADR2P

Residence, Villa, etc.

ADR3P

Street and street number

ADR4P

Locality

ADRCPP

Postcode

ADRCOMP

Municipality

CODGEOP

Father's municipality (INSEE code)

REGP

Father's region (INSEE code)

DEPP

Father's department (INSEE code)

Most recent contact details of relay person 1

NOMR

[Last name of relay person]

PRENR

[First name of relay person]

TEL1

[Tel no. 1 of relay person]

TEL2

[Tel no. 2 of relay person]

TEL3

[Tel no. 3 of relay person]

ADR1R

[Address of relay person 1]

ADR2R

[Address of relay person 2]

ADR3R

[Address of relay person 3]

ADR4R

[Address of relay person 4]

ADRCPR

[Postcode of relay person]

ADRCOMR

[Municipality of relay person]

REGMUDA

Mother's region (UDA code)

- 1 Paris region
- 2 North
- 3 East
- 4 Paris basin east
- 5 Paris basin west
- 6 West
- 7 South-west
- 8 South-east
- 9 Mediterranean

REGPUDA

Father's region

- 1 Paris region
- 2 North
- 3 East
- 4 Paris basin east
- 5 Paris basin west
- 6 West
- 7 South-west
- 8 South-east
- 9 Mediterranean

2. Contact with father if we had or found his telephone information

MANAGEMENT OF CONTACT WITH FATHER POSSIBLE IF E2AM_VALIDCP1=(1, 2)

CONTACTP

Initial telephone contact:

- 1 The father has been contacted and has agreed to take part
- 2 Appointment organized
- 3 The father has been contacted and has definitively left ELFE (specify reason)
- 4 The father has been contacted but refuses to take part in the 2-year survey without making a definitive refusal (doesn't have the time, is bedridden, etc.) (specify reason) ⇨ End of interview "We will contact you in one year for the third birthday of [ELFE child]"
- 5 The father has not been contacted because the person reached refuses to put the father on the line (specify reason)
- 6 The father has not been contacted because he is hospitalized, bedridden or absent during the survey ⇨ End of interview "We will contact him in one year for the third birthday of [ELFE child]"
- 7 The father wants the mother to respond to the 2-year questionnaire in his place
- 8 The father has died
- 9 The father is not able to respond (physical/mental/linguistic/dialogue impossibility)
- 10 The ELFE child has died
- 11 The ELFE twin child has died [make sure they are twins (see first names on top right of screen)]
- 12 [Rejection hidden number]
- 13 [Wrong number]
- 14 [Entry of another telephone number]
- 15 [The two children have died]

If CONTACTP=(3, 4, 5)

REFUS (not available as empty)

"Can you tell us the reasons why you don't want to participate in the ELFE survey?"

Situation 1: AFTER QUESTIONNAIRE WITH MOTHER DONE

If CONTACTP=1 and MERBIL=17 and VALIDCP1=(1, 2)

If EFVIT=1	PEREB= Cohabiting Father questionnaire
If EFVIT=2 and INFPER=(1, 5)	PEREB= Non-cohabiting Father questionnaire
If EFVIT=3	PEREB= Referent Father questionnaire
If EFVIT=4	PEREB= Non-cohabiting Father questionnaire
If EFVIT=5 and PLAPER=1	PEREB= Cohabiting Father of Placed Child questionnaire
If EFVIT=5 and PLAPER=2	PEREB= Non-cohabiting Father of Placed Child questionnaire
If EFVIT=2 and LIENTYP_(1à20)=7 and SEXE=2 in the	Referent Mother Questionnaire: same-sex parenting ⇨
	PEREB= Cohabiting "Father" questionnaire (replace male partner by female partner)

Situation 2: MANAGING INITIAL CONTACT WITH THE FATHER WHEN THE MOTHER QUESTIONNAIRE HAS NOT BEEN DONE (refusal, not reachable or missed appointment) OR INCOMPLETE (abandoned halfway through, second interview appointment missed).

If CONTACTP=9

PL1

Why doesn't the father want to answer?

- 1 Doesn't understand French well
- 2 Hard of hearing/deaf

3 Other (specify)

If PL1=1

PL2

Is the father willing to do the interview in another language?

- 1 Yes
- 2 No

If PL2=1

PL3

In which language could the interview be carried out?

- 1 French
- 2 English
- 3 Arabic
- 4 Turkish/Kurdish
- 5 Soninke
- 6 Bambara
- 7 Wolof
- 8 [Other]

The questionnaire should take about an hour.

Would you like to do it in two goes? If so, it will take 30 minutes and at the end we will set up a time to do the second part in the next few days. Or do you want to do the survey in one go?

ENTRETIEN1 *(not available as empty)*

- 1 Set a date and time for doing the second part later (interview in 2 goes)
 - 2 Wants to continue now (interview in 1 go)
- (Valid only for Wave 1)*

I would like to confirm some of the information you gave us during the interview when [ELFE child] was one. But before we begin I would like to remind you that you can always refuse to answer certain questions.

If (E2AM_CONTPART=1 AND E2AM_MERBIL NOT 17) OR CONTACTP=1

Does/do [ELFE child]/([twin child]) live?

EFVIT

- 1 With you and the mother => Q Father Referent Parent
- 2 With you and not the mother => Q Father Referent Parent
- 3 With the mother and not you => EFVOI
- 4 Alternating between you and the father => Q Father Referent Parent
- 5 Neither with you nor the father, but with someone else or in a non-hospital institution => EFVITPP

INT:

- SAY ONLY "WITH YOU AND THE MOTHER AND CHOOSE FROM THE OTHER WORDINGS IF THE INTERVIEWEE SAYS "NO"
- IF WHEN ASKING EFVIT THE INTERVIEWER LEARNS OF THE DEATH OF THE ELFE CHILD AND/OR THEIR TWIN, RETURN TO CONTACTM AND CODE IN APPROPRIATE MANNER

If EFVIT=3

EFVOI

Since our last interview you have seen the child:

- 1 Every day => Q Non-Cohabiting Father
- 2 More than once a week => Q Non-Cohabiting Father

- | | |
|------------------------|----------------------------|
| 3 Once a week | => Q Non-Cohabiting Father |
| 4 2 to 3 times a month | => Q Non-Cohabiting Father |
| 5 Once a month or less | => Q Non-Cohabiting Father |
| 6 Not for a year | => End of interview |

If EFVIT=5

EFVITP (not available as empty)

Your child lives:

- 1 With a member of the family
- 2 In a nursery
- 3 In a boarding school-home
- 4 In a host family
- 5 In a children's village
- 6 Other

If EFVITP=1

EFVITPP (not available as empty)

With which member of the family?

Specify

INT: NOTE FAMILY RELATION RATHER THAN NAME

If EFVITP=6

EFVITPP (not available as empty)

Who does your child live with exactly?

Specify

INT: NOTE THE ANSWER PRECISELY

If EFVIT=5

EFLIEU (not available as empty)

Do you see you child:

- 1 Where he/she lives
- 2 At your house
- 3 It depends
- 4 You haven't seen your child for a year End of interview: "We will contact you in a year for the third birthday of [ELFE child]"

If EFLIEU not 4

EFVOI2 (not available as empty)

Have you seen your child:

- 1 Every day
- 2 More than once a week
- 3 Once a week
- 4 2 to 3 times a month
- 5 "Once a month or less" ⇒ End of interview: "We will contact you in a year for the third birthday of [ELFE child]"

If EFVOI2=(1, 2, 3, 4)

PLAPER (not available as empty)

Do you live with the mother of the [ELFE child] in the same house?

- 1 Yes
- 2 No, the mother lives elsewhere (separation or have never lived together)
- 3 Mother deceased ⇒ Q Father of Placed Child

INT: DO NOT LIST

IF THE MOTHER SAYS UNPROMPTED THAT THE FATHER DOES NOT WANT TO RECOGNIZE THE CHILD, CODE 1 THEN ANSWER "NO" TO FOLLOWING QUESTION

If PRECON in previous surveys=1 do not ask PRECON

If VR_PRECON not 1 and PLAPER=(1, 2)

PRECON *(not available as empty)*

Have you recognized [ELFE child]?

1 Yes

2 No

TYPPERE

Type of father

1 Referent Father

2 Cohabiting Father

3 Non-cohabiting Father

4 Cohabiting Father of Placed Child

5 Non-cohabiting Father of Placed Child

3. Information on interview

***DATINTJ**

Day of interview

|_|_|

DATINTM

Month of interview

|_|_|

DATINTA

Year of interview

|_|_|

AGE2A

Age of child in months at 2-year telephone interview

|_|_|

Q3P

Number of call attempts to contact the father

|_|_|

QUALIT

Quality of interview

- 1 Very easy
- 2 Quite easy
- 3 Neither easy nor difficult
- 4 Quite difficult
- 5 Very difficult

LANG

Interview language

- 1 French
- 2 English
- 3 Arabic
- 4 Turkish/Kurdish
- 5 Soninke
- 6 Bambara
- 7 Wolof

QP

Father Questionnaire

- 0 Absent
- 1 Complete
- 2 Incomplete

4. List and civil status of residents of dwelling

IF A02X_QPECFCOMP2a in (1, 2) and A02X_TYPQPECF2a in (1, 2, 6, 7, 8)

Questionnaires concerned:

- "Referent Father"
- "Non-Cohabiting Father"
- "Father of Placed Child" (with or without placed child questions)

If the 1 year father questionnaire has been completed ⇒ repeat where necessary the answers given in this interview with confirmation or correction for some of them only and management of those arriving or leaving

If 1 year father questionnaire not done ⇒ repeat where necessary the answers given in the 2-month interview

"To begin with, I am going to say the first name of all the people who lived with [ELFE child] when we completed the survey with you when [ELFE child] was one year old. For each of these individuals, please tell me if they are still living in the dwelling and then inform me of other people that I have not mentioned who currently live in the dwelling."

INT: IF NECESSARY, SAY "THE PARENTS, GRANDPARENTS, AND ALL THOSE WHO LIVE IN THE HOUSEHOLD WITH THE CHILD HAVE VALUES, CULTURES AND LANGUAGES THAT, DEPENDING ON THE AGE OF EACH PERSON IN THE HOUSEHOLD, MAKE UP THE CHILD'S EVERYDAY LIFE. SO IT IS VERY IMPORTANT THAT WE LEARN ABOUT, FOR EXAMPLE, THE COUNTRY OF BIRTH AND THE NATIONALITY AND LANGUAGES SPOKEN IN THE CHILD'S HOME."

The list of the first names of all the household members present at the last survey, with the relationship to the child provided for each one.

INT: FOR EACH PERSON IN THE LIST, READ THE FIRST NAME ONLY
CONFIRM THE SPELLING OF THE FIRST NAME OF [ELFE CHILD]

If PLAPER (previous surveys)=3 OR if INFPER (previous surveys)=(2) and LIENTYP_(1à20)=1 in household at last survey automatically code CONFIG(1to20)=2

CONFIG_(1à20)

Does [first name] still live with you?

- 1 Yes, he/she still lives with me
- 2 No, he/she does not live here anymore (exit)
- 3 Entrant

CONFIGENTRANT

In addition to the people I have just mentioned, are there any NEW residents in this dwelling?

- 1 Yes
- 2 No

If CONFIGENTRANT=1 and for each one

If CONFIGENTRANT=1

NOI_(1à20)

Individual rank order

|_|_|

PRENOM_(1à20)

What is his/her first name?

SEXE_(1à20)

He/she is...

- 1 Male
- 2 Female

What is his/her date of birth?

***JNAIS_(1à20)**

Day

|_|_|

(1 to 31, NA=88, DK=99)

***MNAIS_(1à20)**

Month

|_|_|

(1 to 12, NA=88, DK=99)

ANAIS_(1à20)

Year

|_|_|_|_|

(1900 to 2011, NA=8888, DK=9999)

AGE_(1à20)

Age in number of years passed

|_|_|

DIFFAGE_(1à20)

Age difference with ELFE child in days

|_|_|_|_|

LIENTYP_(1à20)

How are they related to [ELFE child]?

(IT consistency test, e.g. a single father, a single partner)

- 1 Father
- 2 Mother
- 3 Brother, sister
- 4 Half-brother, half-sister on mother's side
- 5 Half-brother, half-sister on father's side
- 6 Another child with no family connection to [ELFE], child of partner, child-in-law of a family member
- 7 Partner of the mother or father
- 8 Maternal grandfather, grandmother
- 9 Paternal grandfather, grandmother
- 10 Other family connection
- 11 Other non-family connection
- 12 [ELFE child]

LIENTYP is a non-modifiable repeat variable displayed with the list of the first names of the people making up the household at the last survey, so as to make a distinction between two people with the same first name.

If CONFIG (1à20)=2

If PLAPER (previous surveys)=3 OR if INFPER (previous surveys)=(2) and LIENTYP (1à20)=1 in household at last survey automatically code CONFIG(1to20)=2

ADATDEPART_(1à20)

In which year did [first name] stop living regularly in the same household as [ELFE child]?

|_|_|_|_|

Year (2011 to 2013), NA=8888, DK=9999

If CONTACTM=8 (mother deceased) code CAUSEDEPART_(1à20)=3 automatically

CAUSEDEPART_(1à20)

Is it because [first name]:

- 1 Definitively lives in another dwelling
- 2 Temporarily lives in another dwelling
- 3 Has died
- 8 Refuses
- 9 Doesn't know

If CAUSEDEPART (1à20)=(1, 2) and LIENTYP (1à20)=(2, 7)

SEPAR_(1à20)

Was it because of a separation of your couple?

- 1 Yes
- 2 No

If CONFIGENTRANT=1

LNAIS_(1à20)

He/she was born in:

- 1 France (mainland or FODT)
- 2 Outside France

If LNAIS (1à20)=1

(If France)

***DEPNAIS_(1à20)**

In which department or territory?

Department code

|_|_|_|_|

If LNAIS (1à20)=2

(If outside France)

***PAYSNAIS_(1à20)**

Country code

|_|_|_|_|

If LNAIS (1à20)=2

If outside France

PAYS25NAIS_(1à20)

In which country?

- 1 European Union
- 2 Turkey
- 3 Morocco
- 4 Algeria
- 5 Tunisia

- 6 French-speaking Sub-Saharan Africa
- 7 Other Sub-Saharan Africa
- 8 Central/Eastern Europe
- 9 Asia
- 10 South/Central America
- 11 Other
- 12 Not stated

In which country?

***PAYSNAISP_(1à20)**

(If not in list)

(Validate only if previous NATIO1N=(3 or 4))

NATIO1N_(1à20)

Are you (is he/she):

- 1 French by birth, including by reintegration
- 2 French by naturalization, marriage, declaration or option on majority
- 3 Not French
- 4 Stateless

If CONFIG_(1à20)=3 and NATIO1N_(1à20)=(1, 2, 3)

***NATIO2N_(1à20)**

What is his/her nationality?

Nationality code

|_|_|_|_|_|

If CONFIG_(1à20)=3 and NATIO1N_(1à20)=(1, 2, 3)

NATIO25N_(1à20)

What is your (his/her) nationality?

- 1 European Union
- 2 Turkey
- 3 Morocco
- 4 Algeria
- 5 Tunisia
- 6 French-speaking Sub-Saharan Africa
- 7 Other Sub-Saharan Africa
- 8 Central/Eastern Europe
- 9 Asia
- 10 South/Central America
- 11 Other
- 12 Not stated

If NATIO1N_(1à20)=(1, 2, 3)

***NATIO2N2_(1à20)**

(not available as empty)

Does he/she have dual nationality? If yes, which?

Nationality code

|_|_|_|_|_|

***NATIO2NP_(1à20)**

(If not in list)

ANARRIV_ (1à20)

In which year did he/she move to mainland France?

|_|_|_|_|

(NA=8888, DK=9999)

INT: IF BORN OUTSIDE FRANCE OR IN FODT, AND IF RETURN TO ORIGINAL COUNTRY, THE YEAR OF THEIR FIRST MOVE TO FRANCE MUST BE NOTED

If LIENTYP_ (1à20)=8 and SEXE_ (1à20)=1

MEREPLAN

What language or patois does [first name of maternal GF] use the most often at home?

If LIENTYP_ (1à20)=8 and SEXE_ (1à20)=2

MEREMLAN

What language or patois does [first name of maternal GM] use the most often at home?

If LIENTYP_ (1à20)=9 and SEXE_ (1à20)=1

PEREPLAN

What language or patois does [first name of paternal GF] use the most often at home?

If LIENTYP_ (1à20)=9 and SEXE_ (1à20)=2

PEREMLAN

What language or patois does [first name of paternal GM] use the most often at home?

Do not ask for LIENTYP_ (1à20)=12 if Non-Cohabiting Father or Father Placed Child questionnaire and the child lives on an alternating basis with father and mother

TYPOLOG_ (1à20)

Do you (does he/she) live in your residence:

- 1 All year or almost
- 2 Mainly weekends or holidays
- 3 Mainly in the week
- 4 A few months a year (including cases of alternating custody)
- 5 Less often
- 9 [DK]

INT: IF SOMEONE HAS BEEN IN THE HOUSEHOLD FOR UNDER A YEAR, ASK WHAT THEIR INTENTIONS ARE.

If TYPOLOG_ (1à20)=2

JOURAN_ (1à20)

How many days a year?

|_|_|_|_|

(1 to 366, NA=888, DK=999)

If TYPOLOG_ (1à20)=3

JOURSEM_ (1à20)

How many days a week?

|_|
(1 to 7, NA=8, DK=9)

If TYPLOG (1à20)=4

MOISAN (1à20)

How many months in this last year?

|_|_|
(1 to 12, NA=88, DK=99)

If TYPLOG (1à20)=5

JOUR2AN (1à20)

Around how many days in this last year?

|_|_|_|
(1 to 366, NA=888, DK=999)

Do not ask for LIENTYP=12 if Father of Placed Child questionnaire

AUTLOG (1à20)

Do you also live (does he/she live) somewhere else sometimes?

(For LIENTYP (1à20)=12: if ELFE child does not live with mother and father)

- 1 Yes
- 2 No

If AUTLOG (1à20)=1

If the person also lives in another dwelling:

TYPLOGCO (1à20)

Where?

- 1 Barracks, camp
- 2 Boarding school
- 3 University housing or student house
- 4 Home for young workers
- 5 Penitentiary facility
- 6 Sanatorium, care centre or hospital
- 7 Retirement home
- 8 Temporary public works construction site
- 9 With a family member
- 10 With their other parent (of the child)
- 11 In a nursery, host family, children's home, other socio-educational centre
- 12 Individual housing
- 13 Other

INT: DO NOT LIST

If TYPLOGCO (1à20)=13

***TYPLOGCOP (1à20)**

In what other place do you live (he/she live)?

REGUDANAIS (1à20)

In which region or territory?

(UDA code)

AGE18ARRIV_(1à20)

Age on arrival in France before 18?

- 0 No
- 1 Yes

DURARRIV_(1à20)

Time since arrival in France when [ELFE child] born?

- 0 <2
- 2 2-4
- 5 5-9
- 10 10-14
- 15 15-19
- 20 20-24
- 25 25 and over

REGNAIS_(1à20)

From which region or territory?

- 00 Other territory/territories of French Republic?
- 01 Guadeloupe
- 02 Martinique
- 03 French Guiana
- 04 La Réunion
- 06 Mayotte
- 11 Île-de-France
- 21 Champagne-Ardenne
- 22 Picardie
- 23 Haute-Normandie
- 24 Centre
- 25 Basse-Normandie
- 26 Bourgogne
- 31 Nord-Pas-de-Calais
- 41 Lorraine
- 42 Alsace
- 43 Franche-Comté
- 52 Pays de la Loire
- 53 Bretagne
- 54 Poitou-Charentes
- 72 Aquitaine
- 73 Midi-Pyrénées
- 74 Limousin
- 82 Rhône-Alpes
- 83 Auvergne
- 91 Languedoc-Roussillon
- 93 Provence-Alpes-Côte d'Azur
- 94 Corse

If TYPPE1=6

If LIENTYP_(1à20)=7 AND SEXE_(1à20)=2 then ANAISH=ANAIS_(1à20)

ANAISH *(not available as empty)*

Same-sex parenting – year of birth

|_|_|_|_|

If TYPPE1=6

If LIENTYP_(1à20)=7 AND SEXE_(1à20)=2 then SQH not.

SQH *(not available as empty)*

Same-sex parenting – no. individual in couple with mother

|_|

If TYPPE1=6 then ANAISP=ANAISH

If TYPPE1 not 6 AND LIENTYP_(1à20)=1 then IF LIENTYP_(1à20)=1 then ANAISP=ANAIS_(1à20)

IF (TYPPE1=6 then ANAISP=ANAISH) OR (TYPPE1 not 6 AND LIENTYP_(1à20)=1) then ANAISP=ANAIS_(1à20)

ANAISP

ANAIS – Homosexual partner or father

|_|_|_|_|

5. Placed child

IF A02X_QPEFCOMP2a in (1, 2) and A02X_TYPQPECF2a=8

- "Non-Cohabiting Father of Placed Child"

Part to be repeated for twins

Now let's talk about [ELFE child]/[twin child]. [ELFE child]/[twin child] doesn't/don't live with you.

PLACEM (not available as empty)

Is that (still) because they have been placed?

1 Yes

2 No ⇒ PRESPROF

If PLACEM=1

PLAC1 (not available as empty)

I would like to ask you a few questions on the placement of [ELFE child]/[twin child]: its length, the place, and the type of measure. Is that OK with you?

1 Yes

2 No ⇒ Ch. FAMILY SITUATION

On which date was [ELFE child]/[twin child] placed?

If PLAC1=1

***PLAC2M** (not available as empty)

Month

|_|_| (1 to 12) (NA=88, DK=99)

PLAC2A (not available as empty)

Year

|_|_|_| (2011 to 2030) (NA=8888, DK=9999)

(Validate only if PLAC3 in 1 year = 2 or if at 1 year = 1 but the placement date given at 2 years has changed)

PLAC3 (not available as empty)

As part of the placement of [ELFE child]/[twin child], have you met with a juvenile court judge?

1 Yes

2 No

PLAC4 (not available as empty)

Do you know how long the placement of [ELFE child]/[twin child] is planned for?

1 Yes

2 No

On which date will your child's placement end?

If PLAC4=1

If date (month and year)

***PLAC4M** (not available as empty)

Month

|_|_|

(1 to 12) (NA=88, DK=99)

PLAC5A *(not available as empty)*

Year

|_|_|_|_|

(2011 to 2030) (NA=8888, DK=9999)

Or duration:

PLAC5J *(not available as empty)*

No. of days

|_|_|

PLAC5S *(not available as empty)*

No. of weeks

|_|_|

(NA=888, DK=999) min 1 max 99 or

PLAC5M *(not available as empty)*

No. of months

|_|_|

When you see ([ELFE child]/[twin child]):

PRESPROF *(not available as empty)*

Is a professional present at these meetings?

- 1 Always
- 2 Sometimes
- 3 Rarely
- 4 Never

PRESPROC *(not available as empty)*

Is a loved one present at these meetings?

- 1 Always
- 2 Sometimes
- 3 Rarely
- 4 Never

PRESAUTR *(not available as empty)*

Is someone else present at these meetings?

- 1 Always
- 2 Sometimes
- 3 Rarely
- 4 Never

HABFR *(not available as empty)*

Where [ELFE child]/[twin child] lives, do they live with brothers or sisters?

1 Yes

2 No

If HABFR=1

HABFRC *(not available as empty)*

How many (brothers or sisters live with [ELFE child]/[twin child])?

|_|_|

***PLACDEP** *(not available as empty)*

At which address is [ELFE child] placed?

Department code

|_|_|_|

***PLACCOM** *(not available as empty)*

At which address is [ELFE child] placed?

Municipality code

|_|_|_|_|_|

6. Family situation

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 6, 7, 8)

Questionnaires concerned:

- “Referent Father”
- “Non-Cohabiting Father”
- “Non-Cohabiting Father of Placed Child”

Only the family situations of the father and arrivals are described. The family situation of the other household members aged 15 and over will be documented at 3 years.

The variables carried over from the 1 year father survey on the family situation at 2 years are to be confirmed/changed only if the father said he was in a couple with the father or a partner at the 1 year survey. In all other cases, the repeat question is asked.

If LIENTYP_(1à20)=2 or LIENTYP_(1à20)=7 in household

If LIENTYP_(1à20)=(2, 7) and CONFIG_(1à20)=(1, 3)

Are you currently in a couple with [mother first name]/[partner first name]?

If LIENTYP_(1à20)=2

Are you currently in a couple with [mother first name]?

If LIENTYP_(1à20)=7

Are you currently in a couple with [partner first name]?

COUPLE1

1 Yes ⇨ ETAMATRI

2 No ⇨ COUPLE2

INT:

- IF LIENTYP=2 AND LIENTYP=7 THE MOTHER COUNTS IN THIS CASE, SO THE LIENTYP IS CONSIDERED AS LIENTYP=2
- IF IN THE LAST SURVEY THERE WAS A LIENTYP=1 AND NO LIENTYP=7 AND AT 1 YEAR THERE WAS A LIENTYP=7 AND NO LIENTYP=2 AND VICE-VERSA, DO NOT CARRY OVER BUT ADAPT NAME OF NEW ARRIVAL.

(But) are you in a couple with a person even if you don't live with them?

If COUPLE1=2

(But) are you in a couple with a person even if you don't live with them?

If no LIENTYP_(1à20)=2 or LIENTYP_(1à20)=7

Are you in a couple with a person even if you don't live with them?

COUPLE2

1 Yes

2 No

If COUPLE2=1 AND (LIENTYP_(1à20)=2 and CONFIG_(1à20)=2 and E2AM_CONTACTM not 8)

And if no LIENTYP_(1à20)=2 in the household (and the mother has not died CONTACTM not 8)

Do not ask this question if SEPAR_(1à20)=1 and person leaving at 2 years CONFIG=2 with LIENTYP_(1à20)=2=> ⇨ precode=2

Do not ask this question if LIENTYP_(1à20)=2 and COUPLE1=2 and COUPLE2=1 ⇨ precode=2

PERENF

Is this person the mother of the child?

1 Yes

2 No

8 Refuses

ETAMATRI

What is your legal marital status?

- 1 Married or remarried including legally separated
- 2 Civil partnership
- 3 Divorced
- 4 Single
- 5 Widowed

INT:

- A CIVIL PARTNERSHIP IS CONSIDERED AS A MARITAL STATUS. IF AFTER READING THE LIST THE PERSON INTERVIEWED SAYS THEY ARE IN COHABITATION, FOLLOW UP WITH "OK, BUT WHAT IS YOUR LEGAL MARITAL STATUS?" IF THE PERSON DOES NOT UNDERSTAND, CODE "SINGLE".
- IF THE RESPONDENT IS SURPRISED TO BE ASKED ONCE AGAIN ABOUT THEIR MARITAL STATUS, TELL THEM: "WE KNOW THAT SOME QUESTIONS MAY SEEM REDUNDANT GIVEN WHAT YOU TOLD US IN THE LAST SURVEY. WE ARE SORRY, BUT IT OFTEN HAPPENS THAT MARITAL STATUS CHANGES BETWEEN TWO SURVEYS."

MATRICOUP

Is it with [mother first name]/[partner first name]/the person you are in a couple with that you are married or have a civil partnership with?

If ETAMATRI=(1, 2) et COUPLE1=1

Is it with [mother first name]/[partner first name] that you are married or have a civil partnership with (display ETAMATRI procedure)?

If ETAMATRI=(1, 2) et COUPLE2=1

Is it with the person you are in a couple with that you are married or have a civil partnership with (display ETAMATRI procedure)?

- 1 Yes
- 2 No

INT: IF THE RESPONDENT IS SURPRISED TO BE ASKED ONCE AGAIN ABOUT THEIR MARITAL STATUS, TELL THEM: "WE KNOW THAT SOME QUESTIONS MAY SEEM REDUNDANT GIVEN WHAT YOU TOLD US IN THE LAST SURVEY. WE ARE SORRY, BUT IT OFTEN HAPPENS THAT MARITAL STATUS CHANGES BETWEEN TWO SURVEYS."

If ETAMATRI=(1, 2)

MARI

Can you tell us in which year you were married/formed a civil partnership?

(display ETAMATRI procedure)

If repeat variable complete

"You were married/formed a civil partnership (display ETAMATRI procedure) in:"

|_|_|_|_| (1960 to 2013) (NA=8888, DK=9999)

Consistency: if PACSÉE MARI must be >= 1999

If (COUPLE1=1 or COUPLE2=1) AND (MATRICOUP=2 or ETAMATRI=(3, 4, 5))

Automatically code ETAMATRI2=(1, 2) according to ETAMATRI=(1, 2) if MATRICOUP=1

ETAMATRI2

What is the legal marital status of [mother first name]/[partner first name]/the person you are in a couple with?

INT: A CIVIL PARTNERSHIP IS CONSIDERED AS A MARITAL STATUS.

IF AFTER READING THE LIST THE PERSON INTERVIEWED SAYS THEY ARE IN COHABITATION, FOLLOW UP WITH "OK, BUT WHAT IS YOUR LEGAL MARITAL STATUS?" IF THE PERSON DOES NOT UNDERSTAND, CODE "SINGLE".

- 1 Married or remarried including legally separated
- 2 Civil partnership
- 3 Divorced

- 4 Single
- 5 Widowed

NB: Modification end of Wave 1

“Cohabiting Father”

ETAMATRIBIS

What is your legal marital status?

- 1 Married or remarried including legally separated
- 2 Civil partnership
- 3 Divorced
- 4 Single
- 5 Widowed

NB: Added end of Wave 1

Generation of **SITUAFAMP**

SITUAFAMP

Family situation

- 1 The father is in a couple and cohabits on a permanent basis with the mother of the child ⇐ If SITUAFAMM=1 (If COUPLE1=1 and [for the NOI(CONJOINT)*: LIENTYP_(1à20)=2 and TYPOLOG_(1à20)=1])
- 2 The father is in a couple with the mother of the child but on a non-permanent basis ⇐ If SUTUAFAMM=2 (If COUPLE1=1 and [for the NOI(CONJOINT)* LIENTYP_(1à20)=2 and TYPOLOG_(1à20) not 1])
- 3 The father says he is in a couple with a person living in the household on a permanent basis and this person is not the mother of [ELFE child] ⇐ If COUPLE1=1 and [for the NOI(CONJOINT)*: TYPOLOG_(1à20)=1 and LIENTYP_(1à20)=7
- 4 The father says he is in a couple with a person living in the household on a non-permanent basis and this person is not the mother of [ELFE child] ⇐ If COUPLE1=1 and [for the NOI(CONJOINT)*: TYPOLOG_(1à20) not 1 and LIENTYP_(1à20)=7
- 5 The father is in a couple with the mother of the child and he does not live with her ⇐ SITUAFAMM=5 (If COUPLE2=1 and PERENF=1)
- 6 The father says he is in a couple with a person living in the household and this person is not the mother of the child (or Doesn't know) ⇐ If COUPLE2=1 and PERENF=(2, 9)
- 7 The father is not in a couple ⇐ If COUPLE2=2

If father=cohabiting in same-sex parenting then SITUAFAMP=1

If father=placed child in same-sex parenting then SITUAFAMP=3

If father=cohabiting without twin questions in same-sex parenting then SITUAFAMP=3

If SITUAFAMP=(3, 4) AND (LIENTYP_(1à20)=7 AND SEXE=2)

ROLEPAR

Does your partner play a parental role for [ELFE child]?

- 1 Yes
- 2 No
- 9 Doesn't know

7. Situation of non-cohabitation or non-permanent cohabitation between the father and mother

IF A02X_QPEFCOMP2a=1 and SITUAFAMP in (2, 5)

- “Referent Father”
- (Non-permanent) “Cohabiting Father”
- “Non-Cohabiting Father of Placed Child” (but in couple with the mother)
- “Non-Cohabiting Father” (but in couple with the mother)

For what reasons do you not live with the mother of [ELFE child] on a permanent basis?

If SITUAFAMM=2

For what reasons do you not live (“still” if at 1 year SITUAFAMM=2) with the mother of [ELFE child] on a permanent basis?

If SITUAFAMM=5

For what reasons do you not live (“still” if at 1 year SITUAFAMM=5)?

RAISNVP1

Owing to reasons of occupation, education, health

- 1 Yes
- 2 No

RAISNVP2

You and/or your partner want to keep your independence

- 1 Yes
- 2 No

RAISNVP3

You are with [first name] and in the midst of a separation

- 1 Yes
- 2 No

RAISNVP4

She is in a couple

- 1 Yes
- 2 No

RAISNVP5

She is in the midst of a separation with another person

- 1 Yes
- 2 No

RAISNVP6

You yourself are in the midst of a separation with a former partner

Field start date 29/05/2013 – 09/10/2020 version

- 1 Yes
- 2 No

RAISNVP7

Owing to other reasons

- 1 Yes
- 2 No

If RAISNVP7=1

RAISNVP7

Specify

8. Separation and relationship with mother

IF A02X_QPEFCOMP2a=1 and SITUAFAMP in (3, 4, 6, 7) and (E2AM_CONTACTM not 8 or (CONFIG_(1à20) not 2 LIENTYP_(1à20)=2))

Questionnaires concerned:

- “Referent Father”
- “Non-Cohabiting Father of Placed Child” (only greyed-out questions)
- “Non-Cohabiting Father” (only greyed-out questions)

This module is not asked when we know the mother is deceased: CONTACTM=8 (mother deceased) or (CONFIG=2 LIENTYP=2 and CAUSEDEPART=3)

If SITUAFAMP=(3, 4, 6, 7)

“As you no longer live with the mother of [ELFE child], I am now going to ask you about your situation relative to her”

SEPADIV

You are separated or are in the midst of separating from her and...

- 1 You were never married with her
- 2 You are still married and you haven't asked for a divorce
- 3 You have asked for a divorce
- 4 You have divorced from the mother

If the father already responded to the “Separation” section in the 1-year survey:

If SEPADIV=1

- Ask JUGSEP if at 1 year JUGSEP =2 then ask the questions following JUGSEP with the related filters
- If JUGSEP 1 year=1 and JUGJUG 1 year=1 go to DESAC2 AND QDESAC1 to 3 if DESAC2=1
- If JUGSEP 1 year=1 and JUGJUG 1 year=2 ask JUGJUG then ask the questions following JUGJUG with the related filters

Then for all EXTYPREL and EXQDESAC if EXTYPREL=(3 or 4)

Then PENSALI if ((JPENSALI at 1 year or 2 years=1) OR (if at 2 years EXPENS=1 or if EXPENS2=1) then VERSPENS if PENSALI=(1,2)

If SEPADIV=2

- Ask JUGSEP if at 1 year JUGSEP =2 then ask the questions following JUGSEP with the related filters
- If JUGSEP 1 year=1 and JUGJUG 1 year=1 go to EXHEBAC
- If JUGSEP 1 year=1 and JUGJUG 1 year=2 ask JUGJUG then ask the questions following JUGJUG with the related filters

Then for all EXTYPREL and EXQDESAC if EXTYPREL=(3 or 4)

Then PENSALI if ((JPENSALI at 1 year or 2 years=1) OR (if at 2 years EXPENS=1 or if EXPENS2=1) then VERSPENS if PENSALI=(1,2)

If SEPADIV=3

- If at 1 year SEPADIV=(1,2,3) ask all the questions related to this new separation SEPADIV=3
- If at 1 year SEPADIV=3 and JUGJUG at 1 year =2, ask JUGJUG and all the variables relating to JUGJUG
- If at 1 year SEPADIV=3 and JUGJUG at 1 year =1, ask DESAC2 AND QDESAC1 to 3 if DESAC2=1

Then for all EXTYPREL and the related variable according to the filters, PENSALI if JPENSALI at 1 year or 2 years=1 OR if at 2 years EXPENS=1 or if EXPENS2=1 and the related variable according to the filters.

If SEPADIV=4

- If at 1 year SEPADIV=(1,2,3) ask all the questions related to this new separation SEPADIV=4
- If at 1 year SEPADIV=4 confirm JHEBMOD to QDESACP

Then for all EXTYPREL and the related variable according to the filters, PENSALI if JPENSALI at 1 year or 2 years=1 OR if at 2 years EXPENS=1 or if EXPENS2=1 and the related variable according to the filters.

If SEPADIV=(1, 2)

JUGSEP

You are now separated from the mother of [ELFE child] but have begun proceedings with a family court judge to sort out the terms of the separation?

- 1 Yes
- 2 No ⇒ EXHEBAC

If SEPADIV=(3,4) or JUGSEP=1

On which date did you begin the divorce/separation proceedings?

If SEPADIV=(3, 4)

On which date did you begin the divorce proceedings?

Si JUGSEP=1

On which date did you begin the separation proceedings?

DATPROM

Month

|_|_|
(1 to 12) + DK

DATPROA

Year

|_|_|_|_|
(1970 to 2013) + DK

MEDFAM

Did you have recourse to family mediation to reach an agreement?

- 1 Yes
- 2 No
- 9 Doesn't know

If SEPADIV=4

TYPDIV *(not available as empty)*

What type of divorce did the judge rule on?

- 1 Divorce by consent
- 2 Divorce by acceptance of the principle of breakdown
- 3 Divorce for irretrievable breakdown of the marriage
- 4 At-fault divorce
- 9 Doesn't know

INT: LIST

If SEPADIV=3 or (SEPADIV=(1, 2) and JUGSEP=1)

JUGJUG

Has the family court judge handed down their ruling?

- 1 Yes
- 2 No
- 9 Doesn't know

Date of ruling

If SEPADIV=4 or JUGJUG=1

DATJUGM

Month

|_|_|

(1 to 12) + DK

DATJUGA

Year

|_|_|_|_|

(1970 to 2013) + DK

(Consistency: the date of ruling (month-year) > the date of the proceedings (month-year))

If SEPADIV=4 or JUGJUG=1

JHEBMOD

Which place of residence has the judge decided on for [ELFE child]?

- 1 Primary residence at your home
- 2 Primary residence at the mother's
- 3 Alternating residence
- 4 Other

If JHEBMOD=4

JHEBMODP

Specify

If SEPADIV=4 or JUGJUG=1

JPENSALI

Has the judge set child support for [ELFE child] that must be paid to you?

- 1 Yes
- 2 No ⇔ DESAC1 (or DESAC2)

If JPENSALI=1

PENSAL

What is the monthly sum of the child support decided on by the judge for [ELFE child]?

|_|_|_|_| €

(0 to 99999) (NA=88888, DK=99999)

INT: IF NONE, CODE NA

If JPENSALI=1

PENSALP

If you have several children, does this child support sum concern:

- 1 All your children
- 2 Several children
- 3 Only [ELFE child]
- 9 Doesn't know

INT: IF NONE, CODE NA. WE ARE TALKING ABOUT ALL THE CHILDREN LIVING IN THE HOUSEHOLD OR NOT

If PENSALP=(1, 2)

Display the first name of the children in the household (LIENTYP_(1à20)=3,4, 5) and the coding of those concerned

PENSALPEC_(1à20)

Apart from [ELFE child], which other children are concerned by this child support?

(multiple)

- 1 Yes
- 2 No

PENSALPHM (not available as empty)

Are there any children not living with you who are also concerned by this child support?

- 1 Yes
- 2 No

If PENSALPHM=1

NBPENSALPHM (not available as empty)

How many?

—

If SEPADIV=4

DESAC1

Do any disagreements remain between you and the mother of [ELFE child] about the decisions handed down in the divorce proceedings?

- 1 Yes
- 2 No

What do the disagreement(s) concern?

If DESAC1=1

QDDESAC1

The amount of child support

- 1 Yes
- 2 No

QDDESAC2

The residence of [ELFE child]

- 1 Yes
- 2 No

QDDESAC3

Visiting rights and housing arrangements

- 1 Yes
- 2 No

QDDESAC4

The sharing of the couple's wealth

- 1 Yes
- 2 No

QDDESAC5

The amount of compensatory allowance

- 1 Yes
- 2 No

QDDESAC6

Another point of disagreement

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

If QDDESAC6=1

QDDESACP

Which?

If SEPADIV not 4 and JUGJUG=1

DESAC2

Do any disagreements remain between you and the mother of [ELFE child] about the decisions handed down in the divorce proceedings?

- 1 Yes
- 2 No ⇒ EXTYPREL

Do these points of disagreement concern:

If DESAC2=1

QDESAC1

The amount of child support

- 1 Yes
- 2 No

QDESAC2

The residence of [ELFE child]

- 1 Yes
- 2 No

QDESAC3

Another point of disagreement

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

If QDESAC3=1

QDESACP

Specify

If SEPADIV=(1, 2) AND JUGSEP=2

EXHEBAC

Have you come to an agreement with mother of [ELFE child] on their home?

- 1 Yes
- 2 No, because you don't agree
- 3 It's too early to say
- 4 You are not in contact with her

If EXHEBAC=1

EXHEBMOD

Where does the child live?

- 1 Primary residence at your home
- 2 Primary residence at the mother's
- 3 Alternating residence
- 4 Other

If EXHEBMOD=4

EXHEBMODP *(not available as empty)*

Which?

If SEPADIV=(1, 2) AND JUGSEP=2

EXPENS

Have you come to an agreement with the mother of [ELFE child] on what she will provide you with for meeting the needs of this last or the amount of child support?

- 1 Yes
- 2 No, because you don't agree
- 3 It's too early to say
- 4 [Not applicable]

If EXPENS=(2, 3)

EXPENS2

Although you haven't really reached an agreement, does the mother of [ELFE child] provide you with a payment to meet the needs of the child?

- 1 Yes
- 2 No

If EXPENS=1 or EXPENS2=1

EXPENSMON

What is the monthly amount?

|_|_|_|_| €

(0 to 99999) (NA=88888, DK=99999)

If EXPENS=1 or EXPENS2=1

EXPENSMONP

If you have several children, does this amount concern all your children or only [ELFE child]?

- 1 All your children
- 2 Several children
- 3 Only [ELFE child]
- 9 Doesn't know

INT: IF NONE, CODE NA. WE ARE TALKING ABOUT ALL THE CHILDREN LIVING IN THE HOUSEHOLD OR NOT

If EXPENSMONP=(1, 2)

Display the first name of the children in the household (LIENTYP (1à20)=3,4, 5) and the coding of those concerned

EXPENSMONPEC_(1à20)

Apart from [ELFE child], which other children are concerned by this child support?

(multiple)

- 0 No
- 1 Yes

EXPENSMONPHM (not available as empty)

Are there any children not living with you who are also concerned by this child support?

- 1 Yes
- 2 No

If PENSALPHM=1

NBEXPENSMONPHM (not available as empty)

How many?

—

If JUGJUG=2

HEBAC

Pending the ruling of the family court judge, have you come to an agreement with the mother of [ELFE child] on where the child lives?

- 1 Yes
- 2 No

Fill in HEBMOD starting from EFVIT or EFVITPERE and don't ask the question

If JUGJUG=2

HEBMOD

Where does the child currently live?

- 1 At your house
- 2 At the mother's house
- 3 Alternating between your house and the mother's house
- 4 Other

HEBMODP starting from EFVITP/EFVIPP/EFVITPPP

If HEBMOD=4

***HEBMODP** (not available as empty)

Which?

If JUGJUG=2

EXPENS3

Pending the ruling of the family court judge, does the mother of [ELFE child] provide you with payments to meet the needs of this last?

- 1 Yes
- 2 No

If EXPENS3=1

EXPENS3MON (not available as empty)

How much does she pay you each month?

|_|_|_|_| €

(0 to 99,999) + DK=99999

If EXPENS3=1

PENS (not available as empty)

Are the payments made:

- 1 Very regularly
- 2 Fairly regularly
- 3 Irregularly

EXTYPREL

How would you describe the relations today between you and the mother of [ELFE child]?

- 1 Friendly
- 2 Indifferent
- 3 Tense
- 4 Very tense
- 5 No relations with mother

If EXTYPREL=(3, 4)

EXQDESAC

Are your relations difficult because of [ELFE child]?

- 1 Yes, mostly
- 2 Often
- 3 Rarely
- 4 Never

If JPENSALI=1 or EXPENS=1 or EXPENS2=1

PENSALI

Does the mother pay the monthly child support set by the judge or decided on by the two of you for [ELFE child]?

- 1 Regularly
- 2 Irregularly
- 3 Never

If PENSALI=(1, 2)

VERSPENS

Is the monthly support set by the judge or decided on by the two of you paid:

- 1 In its entirety
- 2 In part
- 3 It depends

INT: "IT DEPENDS" = CHILD SUPPORT PAID IRREGULARLY IN TERMS OF TIME AND AMOUNT

9. Maintaining relations with the mother of [ELFE child] when the mother does not live in the household

IF A02X_QPEFCOMP2a=1 and A02x_TYPQPECF2a in (1, 2) and A02X_TYPQMERE2a=(0, 4)

This module is not asked when we know the mother is deceased CONTACTM=8

Questionnaire concerned:

- *“Referent Father” (when the mother is non-cohabiting mother)*

if NAISGEM=1

JENFVOI *(not available as empty)*

Do [ELFE child] and [twin child] see their mother?

- 1 Yes, together ⇒ FQVOI1
- 2 Yes, but separately ⇒ FQVOI1
- 3 One does, the other doesn't ⇒ QENFVOI
- 4 No ⇒ See Education

if JENFVOI=3

QENFVOI *(not available as empty)*

Which child does she see?

- 1 [ELFE child] ⇒ FQVOI1
- 2 [Twin child] ⇒ FQVOI2

Precode if EFVIT=4 ENFVOI=1 because the child lives on an alternating basis with mother and father

if NAISGEM=2

ENFVOI

Does [ELFE child] see his/her mother?

- 1 Yes ⇒ FQVOI1
- 2 No

FQVOI1

How often does she see [ELFE child]/[ELFE child/twin child]?

If ENFVOI=1 or JENFVOI=2 or (JENFVOI=3 or QENFVOI=1) or EFVIT not 4

How often does she see [ELFE child]?

If JENFVOI=1 and EFVIT not 4

How often does she see them?

- 1 Several times a week
- 2 Once a week
- 3 At least once every two weeks
- 4 Once a month
- 5 Irregularly

if FQVOI1=5

FQVOIP1

Specify

OUVOI1

Where does she see him/her/them?

- 1 Mainly at your house
- 2 Mainly at her house
- 3 Elsewhere

If OUVOI1=3

OUVOIP1

Specify

If JENFVOI=2 or (JENFVOI=3 and QENFVOI=2) AND EFVIT not 4

If JENFVOI=1 code FQVOI2=FQVOI1 AND EFVIT not 4

FQVOI2 *(not available as empty)*

How often does she see [twin child]?

- 1 Several times a week
- 2 Once a week
- 3 At least once every two weeks
- 4 Once a month
- 5 Irregularly

If FQVOI2=5

FQVOIP2 *(not available as empty)*

Specify

OUVOI2 *(not available as empty)*

Where does she see him/her/them?

- 1 Mainly at your house
- 2 Mainly at her house
- 3 Elsewhere

If OUVOI2=3

***OUVOIP2** *(not available as empty)*

Specify

If ENFVOI=1 AND EFVIT=4

ORGAGAL *(not available as empty)*

[ELFE child]/[twin child] lives/live on an alternating basis with you and their mother. How is it organized?

10. Education

IF A02X_QPECFCOMP2a=1 and (A02x_TYPQPECF2a in (1, 2, 6, 7, 8) or (A02x_TYPQPECF2a in (3, 4, 5) and SITUAFAMP=1))

Questionnaires concerned:

- Referent Father

- Cohabiting Father or Cohabiting Father of Placed Child: (SITUAFAMM=1 OR (SITUAFAMM=3 at 1 year LIENTYP=7 SEXE=2)) carry over answers given by mother concerning her then questions for him alone (or update)

- Non-Cohabiting Father

- Non-Cohabiting Father of Placed Child

In this module, enter information only on the education of the father and new arrivals in household

“We are now going to talk about ‘education’”.

Are you (is he/she) currently in school/a student, i.e. enrolled at an educational establishment (including correspondence courses or apprenticeship, special education, medical-educational institute, medical-occupational institute)?

If age > 2 and <16

Is he/she currently in school/a student, i.e. enrolled at an educational establishment (including correspondence courses or apprenticeship, special education, medical-educational institute, medical-occupational institute)?

If age >=16 and <21

Are you (is he/she) currently in school/a student, i.e. enrolled at an educational establishment (including correspondence courses or apprenticeship, special education, medical-educational institute, medical-occupational institute)?

If age >=21

Are you (is he/she) currently in school/a student, i.e. enrolled at an educational establishment (including correspondence courses or apprenticeship, special education, medical-educational institute, medical-occupational institute)?

ETUDES (1à20)

1 Yes

2 No ⇨ ANFINETU_(1à20)

If at 1 year ETUDES (1à20)=2 and ETUDES at 2 months=2 go to the next module

If (E1A ETUDES (1à20) not 2 and E2M ETUDES(1à20) not 2)

If ETUDES (1à20)=1 AND (AGE (1à20)>=16 OR ANAIS (1à20)=(8888, 9999))

FORMINIT_(1à20)

Is it part of your (his/her) initial training?

1 Yes ⇨ DIPLOME

2 No

INT: MEANING WITH NO SIGNIFICANT PERIOD OF INTERRUPTION SINCE THE PERSON STARTED THEIR EDUCATION EITHER IN TERMS OF DISCIPLINE OR LENGTH.

If ETUDES (1à20)=2 or FORMINIT (1à20)=2

ANFINETU_(1à20)

In which year did you (he/she) finish/stop your (his/her) initial studies?

If age >=16

In which year did you (he/she) finish your (his/her) initial studies?

If age > 2 and <16

In which year did you (he/she) stop your (his/her) initial studies?

|_|_|_|_|

(NA=8888, DK=9999)

INT: CODE 0000 IF NO SCHOOL! (AND PRECODE DIPLOME_(1à20)=1 and SCOLARITE_(1à20)=1)

If ANFINETU_(1à20)=9999

AGFINETU_(1à20)

At which age?

|_|_|

(NA=88, DK=99)

If AGE (1à20)>=13

Ask if 13 or over if not code DIPLOME (1à20)=1

DIPLOME_(1à20)

What is your (his/her) highest level diploma?

- 1 No diploma
- 2 Primary studies certificate or overseas equivalent
- 3 Certificate of general education, elementary education or overseas equivalent
- 4 Certificate of professional competence, diploma of occupational studies or diploma of this level (nursing auxiliary, personal carer)
- 5 Technical or occupational high school diploma (or occupational, or technician or master craftsperson certificate)
- 6 General high school diploma (series A B C D E ES L S), advanced diploma, legal studies diploma, university access degree or overseas equivalent
- 7 Diploma of two years' higher education
- 8 Diploma of over two years' higher education

INT: IF EDUCATION COMPLETED OVERSEAS, PROPERLY ESTABLISH CORRESPONDENCE OF CLASSES

Which class are you (is he/she) in?/At which age did you (he/she) finish school?

If ETUDES_(1à20)=1 and DIPLOME_(1à20)=1

Which class are you (is he/she) in?

If ETUDES_(1à20)=2 and DIPLOME_(1à20)=1

At which age did you (he/she) finish school?

SCOLARITE_(1à20)

- 1 No school
- 2 Nursery school
- 3 First year of elementary school
- 4 Second year of elementary school
- 5 Third year of elementary school
- 6 Fourth year of elementary school
- 7 Fifth year of elementary school
- 8 First year of high school
- 9 Second year of high school
- 10 Third year of high school
- 11 Fourth year of high school
- 12 After fourth year of high school (including certificate of professional competence, diploma of occupational studies)

99 DK

INT: DO NOT LIST

If DIPLOME (1à20)=4

DIPLOM1E_(1à20)

[Specify type of certificate of professional competence/diploma of occupational studies]

- 1 Certificate of professional competence, specialist qualification
- 2 Diploma of occupational studies, specialist qualification
- 3 Other diploma and titles at certificate of professional competence or diploma of occupational studies level
- 9 Doesn't know

INT: DO NOT LIST

If DIPLOME (1à20)=5

DIPLOM2E_(1à20)

[What type of high school diploma?]

- 1 Technical high school diploma (series F G H SMS STI STL STT STG)
- 2 Occupational high school diploma
- 3 Occupational, or technician or master craftsperson certificate
- 9 Doesn't know

INT: DO NOT LIST

If DIPLOME (1à20)=7

DIPLOM3E_(1à20)

[What type of two years' higher education?]

- 1 Two-year university degree
- 2 Vocational training certificate or equivalent
- 3 Two-year social and medical occupations diploma (nurse before 2012)
- 9 Doesn't know

INT: DO NOT LIST

If DIPLOME (1à20)=8

DIPLOM4E_(1à20)

[What type of more than two years' higher education?]

- 1 Undergraduate or postgraduate degree (bachelor's, master's or nursing degree after 2012)
- 2 Degree from prestigious school (*grande école*)
- 3 Doctorate degree (DES, DEA, DESS, Master 2), doctorate degree (medicine, pharmacy, dental)
- 4 Other doctorate degree excluding medical professions
- 9 Doesn't know

INT: DO NOT LIST

If ETUDES (1à20)=1 and LIENTYP (1à20)=2

ETABEC1

At which establishment?

- 1 Middle school
- 2 High school
- 3 University or other institute of higher education
- 4 Apprentice training school
- 5 Correspondence course
- 6 Continuing education course
- 7 Other training centre

INT: DO NOT LIST

If ETUDES (1à20)=1 and LIENTYP (1à20)=1

ETABEC2

At which establishment?

- 1 Middle school
- 2 High school
- 3 University or other institute of higher education
- 4 Apprentice training school
- 5 Correspondence course
- 6 Continuing education course
- 7 Other training centre

If ETUDES (1à20)=1 and LIENTYP (1à20)=(1, 2)

DIPLEC(1à2)

To obtain which diploma?

- 1 Certificate of general education
- 2 Certificate of professional competence/diploma of occupational studies
- 3 Technical or occupational high school diploma
- 4 General high school diploma (series A, B, C, D, E, ES, L, S)
- 5 Diploma of two years' higher education
- 6 Diploma of over three years' higher education
- 7 Other diploma

INT: DO NOT LIST

If DIPLEC(1à2)=7 and LIENTYP (1à20)=(1, 2)

DIPLECAUT(1à2)

What is this other diploma?

INT: NOTE PRECISELY

Specify

If DIPLEC(1à2)=6 and LIENTYP (1à20)=2

DIPLSEC11

Undergraduate or postgraduate degree

- 1 Yes
- 2 No

DIPLSEC12

Undergraduate degree from prestigious school (*grande école*)

- 1 Yes
- 2 No

DIPLSEC13

Doctorate degree (including medicine, pharmacy, dental)

- 1 Yes
- 2 No

DIPLSEC19

Doesn't know

Field start date 29/05/2013 – 09/10/2020 version

1 Yes

2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

Specify

If DIPLSEC(1à2)=6 and LIENTYP (1à20)=1

DIPLSEC21

Undergraduate or postgraduate degree

1 Yes

2 No

DIPLSEC22

Undergraduate degree from prestigious school (*grande école*)

1 Yes

2 No

DIPLSEC23

Doctorate degree (including medicine, pharmacy, dental)

1 Yes

2 No

DIPLSEC29

Doesn't know

1 Yes

2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

11. Main situation regarding work

IF A02X_QPEFCOMP2a=1 and (A02x_TYPQPECF2a in (1, 2, 6, 7, 8) or (A02x_TYPQPECF2a in (3, 4, 5) and SITUAFAMP=1))

- “Referent Father”
- “Cohabiting Father” or “Cohabiting Father of Placed Child”: (SITUAFAMM=1 OR (SITUAFAMM=3 at 1 year LIENTYP=7 SEXE=2)) carry over answers given by mother concerning her then questions for him alone (or update)
- “Non-Cohabiting Father”
- “Non-Cohabiting Father of Placed Child”

In this module, enter information only on the occupational situation of the father and new arrivals in household

“I am now going to ask you a few questions about the work situation of each person.”

If LIENTYP (1à20)=(1, 2)

CONGMATPAR (1à20)

Are you [first name] currently:

- 1 [On maternity/paternity leave]
- 2 On parental child-rearing leave
- 3 On sick leave
- 4 On leave for training
- 5 Not on leave (including if on holiday)

INT: START WITH “PARENTAL CHILD-REARING LEAVE” AND PROPOSE “MATERNITY LEAVE” AFTER “LEAVE FOR TRAINING”

You told me [first name] is currently a student, but also...?

If household individual is a student

If LIENTYP_(1à20)=1

[First name] You told me that you were currently a student, but also...

If LIENTYP_(1à20)=2

[First name] is currently a student, but also...?

If LIENTYP_(1à20)<>(1, 2)

[First name] is currently a student, but also...?

SITUAE (1à20)

- 1 Has (have) a job
- 2 Are (is) an apprentice under contract or in a paid internship
- 3 Are (is) unemployed (registered or not with the national employment agency)
- 4 [None of these situations]

INT: LIST UNTIL THE PERSON STOPS YOU. DO NOT TAKE SUMMER HOLIDAYS INTO ACCOUNT. IF VOLUNTEER WORK, ENTER “OTHER SITUATION”. IF SEVERAL SITUATIONS, TAKE THE MAIN ONE, I.E. THE ONE THAT TAKES UP MOST TIME

What is your occupational situation?

If household member is not a student If CONGMATPAR_(1à20)=1 and LIENTYP_(1à20)=2

You are currently on maternity/paternity leave but what is your/his/her occupational situation?

If CONGMATPAR_(1à20)=2 and LIENTYP_(1à20)=2

You are currently on parental leave but what is your occupational situation?

If CONGMATPAR_(1à20)=(3,4) and LIENTYP_(1à20)=2

You are currently on leave but what is your occupational situation?

If CONGMATPAR_(1à20)=5 and LIENTYP_(1à20)=2

What is your current occupational situation?

If CONGMATPAR_(1à20)=1 and LIENTYP_(1à20)=1

[First name] is currently on maternity/paternity leave but what is his/her occupational situation?

If CONGMATPAR_(1à20)=2 and LIENTYP_(1à20)=1

[First name] is currently on parental leave but what is his/her occupational situation?

If CONGMATPAR_(1à20)=(3,4) and LIENTYP_(1à20)=1

[First name] is currently on leave but what is his/her occupational situation?

If CONGMATPAR_(1à20)=5 and LIENTYP_(1à20)=1

What is your his/her current occupational situation?

If LIENTYP_(1à20) not (1, 2)

[First name] What is his/her current occupational situation?

SITUA (1à20)

- 1 Has (have) a job
- 2 Are (is) an apprentice under contract or in a paid internship
- 3 Are (is) unemployed (registered or not with the national employment agency)
- 4 Are (is) a homemaker
- 5 Are (is) retired, retired from business or in pre-retirement
- 6 Are (is) inactive with a disability allowance
- 7 Are (is) in another situation

INT: LIST UNTIL THE PERSON STOPS YOU. DO NOT TAKE SUMMER HOLIDAYS INTO ACCOUNT. IF VOLUNTEER WORK, ENTER "OTHER SITUATION". IF SEVERAL SITUATIONS, TAKE THE MAIN ONE, I.E. THE ONE THAT TAKES UP MOST TIME

Ask ACTIVANTE (1à20) if (new member or 2 months and 1 year not done) AND if (SITUA (1à20) not (1 and 2) or SITUAE (1à20) not (1 and 2))

ACTIVANTE_(1à20)

Have you [first name] (has he/she) already worked, even if it was a long time ago?

- 1 Yes
- 2 No

On what date did [first name] you (he/she) stop your (his/her) activity the last time? JJ/MM/YYYY (from 01/01/1960 to 31/12/2013)

If ACTIVANTE (1à20)=1

***DATMDR_(1à20)**

Month

|_|_|

(1 to 12) + DK=99

DATADR_(1à20)

Year

|_|_|_|

If when last survey done (2 months or 1 year) (SITUA (1à20) not 1 and 2 OR SITUAE (1à20) not 1 and 2) AND at 2 years (SITUA (1à20) not 1 and 2 OR SITUAE (1à20) not 1 and 2) ask ACTIVPEND (1à20)

If (VR SITUA (1à20) not (1, 2) or VR SITUAE (1à20) not (1, 2)) and (SITUA (1à20) not (1, 2) OR SITUAE (1à20) not (1, 2))

ACTIVPEND_(1à20)

[First name] have you (has he/she) worked since our last telephone conversation on [date of last survey]?

- 1 Yes
- 2 No

On what date did [first name] you (he/she) stop your (his/her) activity the last time? JJ/MM/YYYY (from 1/1/2011 to 31/12/2013)

If ACTIVPEND (1à20)=1

***DATMPEND_(1à20)**

Month

|_|_|

(1 to 12) + DK=99

DATAPEND_(1à20)

Year

|_|_|_|_|

+ DK=99

Are you/is he/she still: self-employed, liberal profession, company head, partner/employee of a private business, self-employed craftsperson, organization/employee of a private individual/public sector employee, i.e. the state, local and regional authorities, public hospitals of the public sector but not in the civil service (EPIC, HLM, OPH, public company)/unpaid assistant to a family member in their work?

If STATU1_(1à20) to STATU4_(1à20) completed at 1 year AND at 2 years (SITUA_(1à20)=(1, 2) OR SITUAE_(1à20)=(1,2)

Are you still:

If STATUT1_(1à20)=2

An independent professional or head of business, CEO, minority manager, partner

If STATUT3_(1à20)=1

An employee of a private company in the crafts sector or an organization

If STATUT3_(1à20)=2

An employee of a private individual

If STATUT4_(1à20)=1

A civil servant, i.e. an employee of the state, local and regional authorities, public hospitals

If STATUT4_(1à20)=2

An employee in the public sector but not in the civil service (EPIC, HLM, OPH, public company)

If STATUT1_(1à20)=3

An unpaid assistant to a member of the family in their work

VALSTATU_(1à20)

1 Yes => leave carry-over variables (except SALARIES_(1à20) which may have changed)

2 No => STATUT1_(1à20)

If STATU1 to STATU4 completed at 1 year AND at 2 years (SITUA (1à20)=(1, 2) OR SITUAE (1à20)=(1,2)

OR at 2 years (VALSTATU (1à20)=2 OR ACTIVANTE (1à20)=1 OR ACTIVPEND (1à20)=1)

If (E1A_STATUT1 (1à20) not . and E1A_STATUT2 (1à20) not . and E1A_STATUT3 (1à20) not . and E1A_STATUT4 (1à20) not .) and (SITUA (1à20)=(1,2) OR SITUAE (1à20)=(1,2)) or (VALSTATU (1à20)=2 OR ACTIVANTE (1à20)=1 OR ACTIVPEND (1à20)=1))

STATUT1_(1à20)

In your current/last job, are/were you (is/was he/she)...

1 An employee (excluding salaried head of business or CEO)

2 An independent professional or head of business, CEO, minority manager, partner

3 An unpaid assistant to a member of the family in their work

If STATUT1 (1à20)=1

STATUT2_(1à20)

[First name] are/were you (is/was he/she) an employee in the private sector?

1 Yes

2 No

If STATUT2 (1à20)=1

STATUT3_(1à20)

[First name] are/were you (is/was he/she):

- 1 An employee of a private company, craftsperson or organization
- 2 An employee of a private individual

If STATUT2 (1à20)=2

STATUT4 (1à20)

[First name] are/were you (is/was he/she):

- 1 A civil servant, i.e. an employee of the state, local and regional authorities, public hospitals
- 2 An employee in the public sector but not in the civil service (EPIC, HLM, OPH, public company)

If STATUT1 (1à20)=2

SALARIES (1à20)

[First name] How many employees do/did you (does/did he/she) employ?

INT: if works alone code 0

|_|_|_|_|_|_|_|_|

(If DK=999999)

PROFI5 (1à20)

If 2 months or 1 year done and PROFIS documented:

Are you still:

If PROFIS never documented:

What is/was your/his/her (most recent) occupation? (LIST OF OCCUPATIONS)

If occupation not found in PROFIS

if PROFIS (1à20)=(., 1)

***PROFI6 (1à20)**

Meaning, what do/did you do, what does/did he/she do exactly? (What is/was your/his/her (most recent) occupation?)

If mother:

Meaning, what do/did you do exactly? (What is/was your (most recent) occupation?)

If other household member:

Meaning, what does/did he/she do exactly? (What is/was his/her (most recent) occupation?)

INT: DO NOT NOTE AGAIN THE TITLE OF THE OCCUPATION THAT YOU HAVE ALREADY WRITTEN. NOTE AS EXACTLY AS YOU CAN THE OCCUPATION GIVEN BY THE INTERVIEWEE. IF YOU HESITATED BETWEEN SEVERAL TITLES, WRITE WHY

If STATUT1 (1à20)=1

PROFI7 (1à20)

What is/was your/the qualification your/the status of [first name]?

If 2 months or 1 year done:

Display the list with the wording chosen previously and ask "Are you still...?"

- 1 Manager
- 2 Technician
- 3 Foreman, supervisor
- 4 Employee, service staff
- 5 Qualified worker
- 6 Unqualified worker
- 7 Category A of civil service/state
- 8 Category B of civil service/state
- 9 Category C of civil service/state
- 10 Other
- 11 [None]

If PROF17 (1à20)=10

***PROFI7B (1à20)**

Specify

P8CSP (1à20)

Occupation and socio-occupational category

If STATUT1 (1à20)=1

What is/was the type of your (his/her) current or most recent job?

If 2 months or 1 year done: Display the list with the wording chosen previously and ask “Are you still...?”

TYPEMPL01 (1à20)

- 1 Open-ended contract, job with no limit in time, civil servant
- 2 Fixed-term contract
- 3 Placed via temp agency
- 4 Replacement
- 5 Paid internship at company
- 6 Assisted employment (government employment scheme)
- 7 Apprenticeship or vocational training contract
- 8 Seasonal contract
- 9 Other type of fixed-term job
- 10 [No work contract (work without drafted contract)]

INT: IF NONE OF THESE WORDINGS IS SELECTED: “WHAT IS YOUR/HIS/HER TYPE OF EMPLOYMENT?”

If TYPEMPL01 (1à20)=(1, 2)

CDAID_(1à20)

[First name] is/was it an assisted job (government employment scheme)?

- 1 Yes
- 2 No

If TYPEMPL01 (1à20)=(2, 3, 4, 7, 8, 9)

INTERFIX_(1à20)

Was the duration of your (his/her) contact or temp job fixed?

- 1 Yes
- 2 No

If INTERFIX (1à20)=1

TPSCONTA_(1à20)

What is/was the duration of your (his/her) contract (or temp assignment) [first name]?

|_|_|

TPSCONT_(1à20)

What is/was the duration of your (his/her) contract (or temp assignment) [first name]?

- 1 [Period in days]
- 2 [Period in weeks]
- 3 [Period in months]
- 4 [Period in years]

5 [Doesn't know]

On what date did you [first name] (did he/she) sign this contract? MM/YYYY (consistency with date of birth of the person and the date of the 2012 interview)

***DATMSIR (1à20)**

Month

|_|_|

(1 to 12) + DK=99

DATASIR (1à20)

Year

|_|_|_|_| + DK=9999

People saying they are farmers

If SUPH (1à20) in last completed survey:

If P8CSP (1à20)=(10, 11, 12, 13) and VR_SUPH not .

CHANGAG_(1à20)

Since our last interview, has the surface area of your holding or the principal nature of your agricultural production changed?

(Display answers SUPH (1à20) and OPA (1à20))

1 Yes=> SUPH_(1à20)

2 No=> EMPL_(1à20)

If SUPH not completed in last survey OR CHANGAG (1à20)=1

If VR_SUPH=. or CHANGAG (1à20)=1

SUPH (1à20)

What is the surface area of your (his/her) holding (in UAA hectares)?

|_|_|_|_| Ha + DK=999

If SUPH not completed in last survey OR CHANGAG (1à20)=1

If area less than 5 ha

If VR_SUPH=. O CHANGAG (1à20)=1 and SUPH (1à20) < 5

SUPA (1à20)

What is the exact area in ares?

|_|_|_|_| + DK=99

OPA (1à20)

What is your principal agricultural production?

1 Polyculture (plough land crops)

2 Market gardening or horticulture

3 Vines or fruit trees

4 Herbivore livestock (bovines, ovines)

5 Grain-eating livestock (poultry, pigs, etc.)

6 Polyculture - livestock

7 Herbivore livestock and grain-eating livestock

8 Other

If SITUA (1à20)=(1,2) OR SITUAE (1à20)=(1,2)

EMPL (1à20)

In your (his/her) current or most recent job, do/did you (he/she) work:

- 1 Full time => RECHEMPLOI_(1à20)
- 2 Part time
- 3 [Not applicable (for non-salaried people who consider that this question doesn't apply)]

If EMPL (1à20)=2

EMPLTX_(1à20)

At what rate (?)

|_|_|%

(10 to 97)

If EMPL (1à20)=2

QQPART (1à20)

What was the main reason for working part time?

(Is it still mainly for the following reason)

If 2 months or 1 year done: Display the list with the wording chosen previously and ask,

"Is the main reason still..."

- 1 To carry out another professional activity, studies or training course
- 2 For health reasons
- 3 You didn't find full-time work
- 4 To take care of your child or children
- 5 To have free time or do housework
- 6 For another reason
- 7 It is more advantageous financially
- 9 Doesn't know

INT: DO NOT LIST

IF ANSWERS "DIDN'T HAVE A CHOICE": "WHY DIDN'T YOU HAVE A CHOICE?"

RECHEMPLOI_(1à20)

Are you (is he/she) looking for a (another) job?

- 1 Yes, for less than a year
- 2 Yes, for over a year
- 3 No

12. Housing

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 3, 4, 5, 6, 7)

Questionnaires concerned:

- Referent father (ask all greyed-out and non-greyed-out questions) IF NO SURVEY AT 2 MONTHS AND 1 YEAR ASK THE ENTIRE SECTION STARTING FROM TYPLOG
- Cohabiting Father: carry over answers given by mother then ask the rest of the module
- Cohabiting Father of Placed Child: carry over answers given by mother then ask the rest of the module (except from CHAMB to CHAMB52 and COTEORDI to PORTAENFA)
- Non-Cohabiting Father of Placed Child (ask all greyed-out and non-greyed-out questions) (except from CHAMB to CHAMB52 and COTEORDI to PORTAENFA) IF NOINTRVIEW AT 2 MONTHS AND 1 YEAR, ASK QUESTIONS STARTING FROM TYPLOG
- Non-Cohabiting Father (ask all greyed-out and non-greyed-out questions) IF NO SURVEY AT 2 MONTHS AND 1 YEAR ASK THE ENTIRE SECTION STARTING FROM TYPLOG

If the cohabiting father or cohabiting father of placed child is not participating, return later to the questionnaire with the mother, except for questions already documented.

a. Relocation

DEMENAG

Have you moved since our last interview?

1 Yes

2 No => NPIECES

NB: (Changed Wave 1)

On what date did you move?

If DEMENAG=1

***JDATDEM**

Day of move

|_|_|

(1 to 31) (NA=88, DK=99)

MDATDEM

Month of move

|_|_|

(1 to 12) (NA=88, DK=99)

ADATDEM

Year of move

|_|_|_|

(2011 to 2013) (NA=8888, DK=9999)

Why did you move? (Give at least two main reasons)

If DEMENAG=1

DEMREZ21

Occupational reasons

- 1 Yes
- 2 No

DEMREZ22

Divorce/separation, widowed

- 1 Yes
- 2 No

DEMREZ23

Leaving home of parents or parents-in-law and desire for independence

- 1 Yes
- 2 No

DEMREZ24

Change of environment (to go to the city, the country, the provinces, live in a house or the opposite, etc.)

- 1 Yes
- 2 No

DEMREZ25

To be closer to family or friends

- 1 Yes
- 2 No

DEMREZ26

To have a better-quality or larger home

- 1 Yes
- 2 No

DEMREZ27

To have a smaller home

- 1 Yes
- 2 No

DEMREZ28

For health reasons

- 1 Yes
- 2 No

DEMREZ29

For financial reasons

- 1 Yes
- 2 No

DEMREZ210

To buy a home

- 1 Yes
- 2 No

DEMREZ211

Other reasons

- 1 Yes
- 2 No

DEMREZ212

No, there are no other reasons

- 1 Yes
- 2 No

If DEMREZ211=1

DEMREZP

Which?

b. Dwelling

Now let's talk about where you live

TYPLOG

What type of dwelling?

- 1 An individual house?
- 2 Apartment or studio or one room with an independent entry
- 3 Hotel room
- 4 A home, accommodation centre, social residence
- 5 Another collective residence, a community (health centre, hospital, barracks, living community, religious congregation, boarding home, university residence, prison)
- 6 A caravan or mobile home => NPIECES
- 7 A home in a place not intended for habitation (street, vehicle, building lobby, makeshift shelter)
- 8 Another type of residence

INT: LIST UNTIL THE PERSON STOPS YOU. THIS IS THE MAIN RESIDENCE OF THE RESPONDENT.

If TYPLOG=4

TYPLOGP

Is it a:

- 1 Sheltered accommodation (living autonomy, common management) or social residence
- 2 Maternal centre
- 3 Another collective home (collective living) on a permanent basis, such as a home for people with disabilities, dependent person
- 4 Temporary accommodation centre open all year or seasonally

If TYPLOG=(5, 7, 8)

TYPLOGT

What type of dwelling is it exactly?

If TYPLOG=(1, 2, 3, 4, 5, 8)

ETAGE

How many floors?

|__|__| floors 0 to 99

If ETAGE > 0

QETAGE

What floor do you live on?

|__|__| floors 0 to 99

INT: IF DUPLEX, MARK THE LOWEST FLOOR. IF BASEMENT, CODE 100. IF LIVING IN INDIVIDUAL HOUSE OR SAYS OCCUPYING THE WHOLE HOUSE, CODE 200.

If TYPLOG not 7 or DEMENAG=(1, 2)

NPIECES

How many rooms in this dwelling?

If repeat NPIECES between 1 and 99 “Does your dwelling have...?”

|__|__| Number of rooms 0 to 99

INT: IF NECESSARY, SAY TO COUNT THE ROOMS SUCH AS THE DINING ROOM, LIVING ROOM, BEDROOM, ETC. REGARDLESS OF THEIR SURFACE AREA. A COMBINED KITCHEN AND LIVING ROOM COUNTS AS ONE ROOM, UNLESS SEPARATED BY A PARTITION. DO NOT COUNT ROOMS SUCH AS HALLWAYS, CORRIDORS, BATHROOMS, LAUNDRY ROOMS, TOILETS, VERANDAS, OR ROOMS USED FOR PURELY PROFESSIONAL PURPOSES (WORKSHOP, DOCTOR'S OFFICE, ETC.). COUNT THE KITCHEN ONLY IF LARGER THAN 12 M2.

c. The child's room

If change in number of rooms

NPIECESR

The number of rooms you say there are in your dwelling is different from the number we recorded in the previous survey. Is that because there was probably a data entry error in the last survey?

1 Yes

2 No

Do [ELFE child] and [twin child] each have their own room?

If NPIECES >1 and no twin and if CHAMB at 1 year=1

Does [ELFE child] still have his/her own room (alone in their room)?

If NPIECES >1 and no twin and if CHAMB at 1 year=2

Does [ELFE child] now have his/her own room (alone in their room)?

If NPIECES >2 and twin and if CHAMB at 1 year=1

Do [ELFE child] and [twin child] still each have their own room?

If NPIECES >2 and twin and if CHAMB at 1 year=2

Do [ELFE child] and [twin child] now each have their own room?

If NPIECES >1 and no twin and if 2 month and 1 year surveys not done

Does [ELFE child] now have his/her own room (alone in their room)?

Or if NPIECES >2 and twin and if 2 month and 1 year surveys not done

Do [ELFE child] and [twin child] each have their own room?

CHAMB

1 Yes

2 No

If CHAMB=2 and NAISGEM=1

CHAMB2

Do [ELFE child] and [twin child] share the same room just the two of them?

1 Yes

2 No

If CHAMB=2 or CHAMB2=2

CHAMB41

Does [ELFE child] sleep:

1 In parents' room

2 In a room with brother/sister

3 In another room (alone or with someone else)

If CHAMB41=3

CHAMB41P

Does he/she sleep:

1 In the living room

2 Or in another room

If CHAMB41P=2

CHAMB41PP

Specify which room

If CHAMB2=2

CHAMB42

Does [twin child] sleep:

1 In parents' room

2 In a room with brother/sister

3 In another room (alone or with someone else)

If CHAMB42=3

CHAMB42P

Does he/she sleep:

1 In the living room

2 Or in another room

If CHAMB42P=2

CHAMB42PP

Which one?

If NPIECES >1 and CHAMB41 not 1

CHAMB51

Does [ELFE child] sometimes sleep with you in your room?

- 1 Yes
- 2 No

If NPIECES >1 and CHAMB42 not 1

CHAMB52

Does [twin child] sometimes sleep with you in your room?

- 1 Yes
- 2 No

d. Dwelling, part two

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

If TYPLOG=(1, 2, 3, 4, 5, 8)

ESCAL

Is there a staircase inside your dwelling (to climb one or more floors, to go to the basement, etc.)?

- 1 Yes
- 2 No

If TYPLOG not 7

SURFACE

What is the surface area of your dwelling in m²?

|_|_|_|_|_|

INT:

TAKE ACCOUNT OF ALL ROOMS, INCLUDING CORRIDOR, KITCHEN, TOILET, BATHROOM.

DO NOT TAKE ACCOUNT OF BALCONIES, TERRACES, BASEMENTS, ATTICS OR PARKING SPACES, OR ROOMS FOR PURELY PROFESSIONAL USE (SURFACE AREA IN M2 AND DOES NOT KNOW IS AUTHORIZED)

If SURFACE=9999

SURFTR

What do you think it measures?

- 1 Less than 25 m²
- 2 From 25 to less than 40 m²
- 3 From 40 to less than 70 m²
- 4 From 70 to less than 100 m²
- 5 From 100 to less than 150 m²
- 6 150 m² or more
- 9 DK

INT: DO NOT LIST

e. Owned/rental

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

IF TYPLOG=(1, 2, 6, 8)

“Does your household (still) occupy this dwelling as:”

IF DEMENAG=1 OR if 2 month and 1 year not done

“Does your household (still) occupy this dwelling as:”

IF DEMENAG=2

“Does your household (still) occupy this dwelling as:”

IF TYPLOG=(3, 4, 5, 7) clear STOC if carry-over data

STOC

- 1 Renters or sub-letters, i.e. paying rent even if the rent is paid by someone outside the household => PROPART
 - 2 First-time buyers meaning you are paying a mortgage => EMPR
 - 3 Non-first-time buyers including undivided co-ownership => ANLOG
 - 4 Usufructuary (without bare ownership) including life tenant => ANLOG
 - 5 Lodged at no charge, possibly paying service charges => PROPART
 - 6 Occupies the dwelling without the authorization of the landlord or with no legal authorization => ANLOG
- NB: Change in Wave 1: the wording of the second answer: “meaning you are paying off a mortgage”.*

IF STOC=(1, 5)

PROPART

Is the dwelling owned by a private individual?

- 1 Yes
- 2 No

IF PROPART=1

PROPFAM

Is this person a member of the family?

- 1 Yes
- 2 No

IF PROPART=2

PROPHLM

Is the owner a social rental housing body (HLM or similar body such as OPAC)?

- 1 Yes
- 2 No

f. Owned/rental, part two

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

IF PROPHLM=2

PROPRI

Who is the owner of your dwelling?

- 1 The employer of a member of the household within the framework of company accommodation
- 2 An administration, a Social Security organization, or an association under the Employers’ funds for housing
- 3 A bank, an insurance company or another company in the public or private sectors
- 4 Another case

IF STOC=1

LOYER

What is your monthly rent (including charges and without your housing benefit entitlements)?

|_|_|_|_| (>1; if DK code 9999)

If STOC=2

EMPR

Are you currently paying off a monthly loan for the purchase of your dwelling?

- 1 Yes
- 2 No

If EMPR=1

QEMPR

What is the monthly amount (without your housing benefit entitlements)?

|_|_|_|_| (>1; if DK code 9999)

If TYPLOG=(1, 2, 3, 4, 5)

ANLOG

What year was your dwelling built in?

|_|_|_|_| (1750 to 2013; DK=9999)

If ANLOG=9999

EPOQ

From which period, do you think?

- 1 After 1989
 - 2 1980-1989
 - 3 1970-1979
 - 4 1950-1969
 - 5 1915-1949
 - 6 Before 1915
 - 9 Doesn't know
- INT: DO NOT LIST

If EPOQ=9

ANCIEN

Do you think it was built before 1949?

- 1 Yes
- 2 No
- 9 Doesn't know

g. Date moved in to dwelling

On which date did you move in to the dwelling?

If 2 month and 1 year not done:

If VR INT2M=1 AND VR INT1A=1

DATMAR

Month

|__|__|

(1 to 12; 88 Refuses; 99 Doesn't know)

DATAAR

Year

|__|__|__|__|

(1950 to 2010; 88 Refuses; 99 Doesn't know)

h. Dwelling environment

If A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

Do the following criticisms apply to your dwelling?

CRITIQ1

It is too small and doesn't have enough rooms

1 Yes

2 No

If ESCAL=1

CRITIQ2

There are too many stairs (for exiting or moving around in the dwelling)

1 Yes

2 No

CRITIQ3

It is difficult or costly to heat

1 Yes

2 No

CRITIQ4

It is too damp

1 Yes

2 No

CRITIQ5

There is mould on the walls

1 Yes

2 No

CRITIQ6

It is noisy (internal or external noise)

1 Yes

2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

The noise is due to:

If CRITIQ6=1

BRCIRC

Traffic (cars, trains, planes, etc.)

- 1 Yes
- 2 No

BRETA

Surrounding establishments (factories, shops, schools, etc.)

- 1 Yes
- 2 No

BRTEC

The technical equipment of the dwelling or building (lift, heating, ventilation, etc.)

- 1 Yes
- 2 No

BRVOIS

Neighbours (children, dogs, etc.)

- 1 Yes
- 2 No

BRAUT

Other things

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

i. Dwelling equipment

If A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

SDB

Is there a bathroom or shower room in your dwelling?

- 1 Yes
- 2 No

If TYPLOG=(3, 4, 5, 7)

CUISO

Do you have a kitchen?

- 1 Yes
- 2 No

Is there a kitchen separate from the living room?

If TYPLOG=(1, 2, 6, 8) or CUISO=1

CUIS

If TYPLOG=(1, 2, 6 or 8) "Is there a kitchen separate from the living room?"

If CUISO=1 "Is it separate from your living room?"

1 Yes

2 No

How many openings are there in your kitchen/bathroom/living room/the room where the child sleeps/your hotel room?

If CUIS=1

Your kitchen

If SDB=1

Your bathroom

Your living room

If CUIS=1

If TYPLOG=3 display "Your hotel room"

NB: Repeat these questions for the twin starting from Wave 2

How many openings are there in the room where the child sleeps?

Si NPIECES>1 The room where the child sleeps

(0 to 10; 88 Refuses; 99 Doesn't know)

CUIOUV

|_|_|

If SDB=1

SDBOUV

|_|_|

SEJOUV

|_|_|

If NPIECES >1

PIEOUV

|_|_|

Is there ventilation in:

If CUIS=1

CUIVEN

1 Yes

2 No

9 DK

If SDB=1

SDBVEN

1 Yes

2 No

9 DK

SEJVEN

- 1 Yes
- 2 No
- 9 DK

If NPIECES > 1

PIEVEN

- 1 Yes
- 2 No
- 9 DK

What is the floor covering in your kitchen?

If CUIS=1

CUISOL1

Tiling

- 1 Yes
- 2 No

CUISOL6

Wood

- 1 Yes
- 2 No

CUISOL8

Plastic (linoleum)

- 1 Yes
- 2 No

CUISOL10

Other

- 1 Yes
- 2 No

If CUISOL10=1

CUISOLP

Specify

What is the floor covering in your bathroom?

If SDB=1

SDBSOL1

Tiling

- 1 Yes
- 2 No

SDBSOL6

Wood

- 1 Yes
- 2 No

SDBSOL8

Plastic (linoleum)

- 1 Yes
- 2 No

SDBSOL10

Other

- 1 Yes
- 2 No

If SDBSOL10=1

SDBSOLP

Specify

What is the floor covering in your living room?

SEJSOL1

Tiling

- 1 Yes
- 2 No

SEJSOL5

Carpet

- 1 Yes
- 2 No

SEJSOL6

Wood

- 1 Yes
- 2 No

SEJSOL8

Plastic (linoleum)

- 1 Yes
- 2 No

SEJSOL10

Other

- 1 Yes
- 2 No

If SEJSOL10=1

SEJSOLP

Specify

What is the floor covering in your rooms?

If NPIECES >1

PIESOL1

Tiling

- 1 Yes
- 2 No

PIESOL5

Carpet

- 1 Yes
- 2 No

PIESOL6

Wood

- 1 Yes
- 2 No

PIESOL8

Plastic (linoleum)

- 1 Yes
- 2 No

PIESOL10

Other

- 1 Yes
- 2 No

If PIESOL10=1

PIESOLP

Specify

What is the wall covering in your kitchen?

If CUIS=1

CUIMUR1

Tiling

- 1 Yes
- 2 No

CUIMUR2

Roughcast

- 1 Yes
- 2 No

CUIMUR6

Wallpaper

- 1 Yes
- 2 No

CUIMUR7

Paint

- 1 Yes
- 2 No

CUIMUR8

Stone

- 1 Yes
- 2 No

CUIMUR9

Plaster

- 1 Yes
- 2 No

CUIMUR11

Plastic

- 1 Yes
- 2 No

CUIMUR12

Tapestry

- 1 Yes
- 2 No

CUIMUR13

Fibreglass material

- 1 Yes
- 2 No

CUIMUR14

Other

- 1 Yes
- 2 No

If CUIMUR14=1

CUIMURP

Specify

What is the wall covering in your bathroom?

If SDB=1

SDBMUR1

Tiling

- 1 Yes
- 2 No

SDBMUR2

Roughcast

- 1 Yes
- 2 No

SDBMUR6

Wallpaper

- 1 Yes
- 2 No

SDBMUR7

Paint

- 1 Yes
- 2 No

SDBMUR9

Plaster

- 1 Yes
- 2 No

SDBMUR11

Plastic

- 1 Yes
- 2 No

SDBMUR12

Tapestry

- 1 Yes
- 2 No

SDBMUR13

Fibreglass material

- 1 Yes
- 2 No

SDBMUR14

Other

- 1 Yes
- 2 No

If SDBMUR14=1

SDBMURP

Specify

What is the wall covering in your living room?

SEJMUR2

Roughcast

- 1 Yes
- 2 No

SEJMUR6

Wallpaper

- 1 Yes
- 2 No

SEJMUR7

Paint

- 1 Yes
- 2 No

SEJMUR8

Stone

- 1 Yes
- 2 No

SEJMUR9

Plaster

- 1 Yes
- 2 No

SEJMUR11

Plastic

- 1 Yes
- 2 No

SEJMUR12

Tapestry

- 1 Yes
- 2 No

SEJMUR13

Fibreglass material

- 1 Yes
- 2 No

SEJMUR14

Other

- 1 Yes
- 2 No

If SEJMUR14=1

SEJMURP

Specify

What is the wall covering in your rooms?

If NPIECES >1

PIEMUR2

Roughcast

- 1 Yes
- 2 No

PIEMUR6

Wallpaper

- 1 Yes
- 2 No

PIEMUR7

Paint

- 1 Yes
- 2 No

PIEMUR9

Plaster

- 1 Yes
- 2 No

PIEMUR11

Plastic

- 1 Yes
- 2 No

PIEMUR12

Tapestry

- 1 Yes
- 2 No

PIEMUR13

Fibreglass material

- 1 Yes
- 2 No

PIEMUR14

Other

- 1 Yes
- 2 No

If PIEMUR14=1

PIEMURP

Specify

“We are now going to ask you a few questions about your living habits in your home”

If TYPLOG=(1, 2, 3, 6)

CHAUFC

Do you have collective heating?

1 Yes => SEJSCH1

2 No => EAUCH1

To heat your home and boil water, you use:

If CHAUF=2

EAUCH1

Town or mains gas

1 Yes

2 No

EAUCH2

Gas from a bottle or tank

1 Yes

2 No

EAUCH3

Fuel oil

1 Yes

2 No

EAUCH4

Petrol

1 Yes

2 No

EAUCH5

Electricity

1 Yes

2 No

EAUCH6

Wood

1 Yes

2 No

EAUCH7

Another source of energy

1 Yes

2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If EAUCH7=1

EAUCHP

Which other source of energy?

j. Dwelling equipment, part two

What do you use to cook?

If TYPLOG=(1, 2, 6, 8) or CUIISO=1

SEJSCH1

Town or mains gas

- 1 Yes
- 2 No

SEJSCH2

Gas from a bottle or tank

- 1 Yes
- 2 No

SEJSCH3

Electricity

- 1 Yes
- 2 No

SEJSCH4

Wood

- 1 Yes
- 2 No

SEJSCH5

Microwave

- 1 Yes
- 2 No

SEJSCH6

Another source of energy

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If SEJSCH5=1

TMICRO

On average, how many minutes a day do you use your microwave?

|__|__|minutes

If SEJSCH6=1

SEJSCHP

Which other source of energy do you use?

Do you have a hob?

If SEJSCH3=1

ELEC1

Electric

- 1 Yes
- 2 No

ELEC2

Halogen

- 1 Yes
- 2 No

ELEC3

Induction

- 1 Yes
- 2 No

ELEC4

Electric

- 1 Yes
- 2 No

NB: Modification end of Wave 1

INT: LIST. SEVERAL ANSWERS POSSIBLE

If ELEC1=1

TELEC1

On average, how many minutes a day do you use your hob?

|__|__| minutes

If ELEC2=1

TELEC2

On average, how many minutes a day do you use your hob?

|__|__| minutes

If ELEC3=1

TELEC3

On average, how many minutes a day do you use your hob?

|__|__| minutes

HOTTE

Do you have an extractor hood and use it?

- 1 Yes, with a filter that sends air outside
- 2 Yes, with an outlet towards the exterior
- 3 Yes, but you never or hardly ever use it
- 4 No, you don't have an extractor hood

k. Garage

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

IF TYPLOG=1

GARAG

Do you have a garage attached directly to your house, either on the ground floor or on a lower level?

- 1 Yes
- 2 No

l. Renovations and repairs

"We are now going to talk about any work done recently inside your house."

IF TYPLOG=(1, 2, 6,)

Have you had any renovations or repairs done in the dwelling since our last telephone interview when [ELFE child] was 1 year old (or 2 months if 1 year not done) (including terraces) (and since you have lived in the dwelling)?

IF DEMENAG=2 Have you had any renovations or repairs done in the dwelling since our last telephone interview when [ELFE child] was 1 year old (or 2 months if 1 year not done) (including terraces)?

IF DEMENAG=1 OR if 2 month and 1 year not done

Have you had any renovations or repairs done in the dwelling since you have lived in it (including terraces)?

OPRENO

- 1 Yes
- 2 No

Which?

IF OPRENO=1

OPRENO1

Sanding of old paint

- 1 Yes
- 2 No

OPRENO2

Wall paint/new wallpaper

- 1 Yes
- 2 No

OPRENO3

Floor covering/polishing/varnish

- 1 Yes
- 2 No

OPRENO4

Plumbing

- 1 Yes
- 2 No

OPRENO5

Change or elimination of lead plumbing and/or lead water connections in street

- 1 Yes
- 2 No

OPRENO6

Repair or change of windows/doors

- 1 Yes
- 2 No

OPRENO7

Wall or ceiling insulation

- 1 Yes
- 2 No

OPRENO8

Construction/knocking out of walls

- 1 Yes
- 2 No

OPRENO9

Other repairs or renovations

- 1 Yes
- 2 No

If OPRENO8=1

AGRAND

Has the surface area of your dwelling been increased?

- 1 Yes
- 2 No

If AGRAND=1

AGRANDS

By how many m²?

|_|_|

Have you had any renovations or repairs done in the room where [ELFE child] currently sleeps since our last telephone interview at 1 year (or 2 months if 1 year not done)/since you have lived in the dwelling?

If OPRENO=1 and DEMENAG=2

Have you had any renovations or repairs done in the room where [ELFE child] currently sleeps since our last telephone interview at 1 year (or 2 months if 1 year not done)?

If DEMENAG=1 and OPRENO=1

Have you had any renovations or repairs done in the room where [ELFE child] currently sleeps since you have lived in the dwelling?

RENOCH

- 1 Yes
- 2 No
- 9 Doesn't know

Which? (renovations or repairs done in the room where [ELFE child] currently sleeps)

If RENOCH=1

QLRENO1

Installation of carpet

- 1 Yes
- 2 No

QLRENO2

Installation of panelling (or wood panels)

- 1 Yes
- 2 No

QLRENO3

Installation of wallpaper or tapestries

- 1 Yes
- 2 No

QLRENO4

Installation of fibreglass material

- 1 Yes
- 2 No

QLRENOS

Wall painting

- 1 Yes
- 2 No

QLRENO6

Installation of plastic coverings

- 1 Yes
- 2 No

QLRENO7

Installation of floor linoleum

- 1 Yes
- 2 No

QLRENO8

Sanding and varnishing of wooden floors

- 1 Yes
- 2 No

QLRENO9

Installation of PVC windows

- 1 Yes
- 2 No

QLRENO10

Installation of wooden floors

- 1 Yes
- 2 No

QLRENO11

Other renovations or repairs

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

If QLRENO11=1

QLRENOP

What are the OTHER renovations or repairs (in the room where [ELFE child] currently sleeps)?

Have you had any renovations or repairs done in the room where [twin child] currently sleeps since our last telephone interview at 1 year (or 2 months if 1 year not done) (and since you have lived in the dwelling)?

If twin child If OPRENO=1 and DEMENAG=2

Have you had any renovations or repairs done in the room where [twin child] currently sleeps since our last telephone interview at 1 year (or 2 months if 1 year not done)?

If DEMENAG=1 and OPRENO=1

Have you had any renovations or repairs done in the room where [twin child] currently sleeps since you have lived in the dwelling?

RENOCH2

- 1 Yes
- 2 No
- 9 Doesn't know

Which? (renovations or repairs done in the room where [twin child] currently sleeps)

If RENOCH2=1

QLRENO21

Installation of carpet

- 1 Yes

2 No

QLRENO22

Installation of panelling (or wood panels)

1 Yes

2 No

QLRENO23

Installation of wallpaper or tapestries

1 Yes

2 No

QLRENO24

Installation of fibreglass material

1 Yes

2 No

QLRENO25

Wall painting

1 Yes

2 No

QLRENO26

Installation of plastic coverings

1 Yes

2 No

QLRENO27

Installation of floor linoleum

1 Yes

2 No

QLRENO28

Sanding and varnishing of wooden floors

1 Yes

2 No

QLRENO29

Installation of PVC windows

1 Yes

2 No

QLRENO210

Installation of wooden floors

1 Yes

2 No

QLRENO211

Other renovations or repairs

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

If QLRENO211=1

QLRENOP2

What are the OTHER renovations or repairs (in the room where [twin child] currently sleeps)?

If OPRENO=1 or RENOCH=1

PRESTRENF

Was [ELFE child] present in the dwelling during the work?

- 1 Yes
- 2 No

If NAISGEM=1 and OPRENO=1 or RENOCH2=1

PRESTRENF2

Was [twin child] present in the dwelling during the work?

- 1 Yes
- 2 No

m. Electrical installations near the dwelling

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

If DEMENAG=1 OR if 2 month and 1 year not done

If DEMENAG=1 OR (VR_INT2M=1 AND VR_INT1A=1)

LOGHT

Is your dwelling close to a high-voltage overhead line (no more than 1 km)?

- 1 Yes
- 2 No
- 9 Doesn't know

If LOGHT=1

LOGHTD

How far in metres?

|_|_|_|_|

If DEMENAG=1 OR if 2 month and 1 year not done

If DEMENAG=1 OR (VR_INT2M=1 AND VR_INT1A=1)

TRANSH

Is there an electrical transformer close to your dwelling?

- 1 Yes, in the street in front of the dwelling
- 2 Yes, in the building

- 3 No
- 9 Doesn't know

INT: AN ELECTRICAL TRANSFORMER IS PART OF THE ELECTRICITY GRID THAT TRANSMITS AND DISTRIBUTES ELECTRICITY.

n. Telephony and IT devices

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

"I am now going to ask you a few questions about the telephony and IT devices used in your dwelling"

TELFIX

Is there a cordless landline telephone with a base (DECT) in your dwelling?

- 1 Yes
- 2 No
- 9 Doesn't know

IF TELFIX=1

TELFIX1

In the room where you work

- 1 Yes
- 2 No
- 9 Doesn't know

TELFIX2

In your room

- 1 Yes
- 2 No
- 9 Doesn't know

TELFIX3

In the living room

- 1 Yes
- 2 No
- 9 Doesn't know

TELFIX4

In another room

- 1 Yes
- 2 No
- 9 Doesn't know

INT: LIST. SEVERAL ANSWERS POSSIBLE

IF TELFIX4=1

TELFIX4P

Specify

IF TELFIX=1

TELFIXENF

Currently, do [ELFE child] and [twin child] use the landline?

- 1 Yes
- 2 No
- 9 DK

NB: "and [twin child]" added starting from Wave 2

If TELFIXENF=1

TELFIXENFT

Approximately how long does he/she (do they) each talk on the landline per day, week or month?

- 1 A few minutes per DAY
- 2 Less than an hour per DAY
- 3 More than an hour per DAY
- 4 A few minutes per WEEK
- 5 Less than an hour per WEEK
- 6 More than an hour per WEEK
- 7 A few minutes per MONTH
- 8 Less than an hour per MONTH
- 9 More than an hour per MONTH

NB: "each" added starting from Wave 2

If TELFIXENF=1

TELFIXENFA

Since what age?

|__|__| (min 1 max 30 months; + DK=99; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

INTER

Do you have an Internet connection in your home?

- 1 Yes
- 2 No

If at last survey (2 month or 1 year) WIFI1=(2)

If at last survey (2 month or 1 year) WIFI1 not (2) OR if no 2 month and 1 year survey

If VR WIFI1 not (1, 2) or (VR INT2M=1 and VR INT1A=1)

Do you have WiFi in your home (excluding public networks)?

WIFI1

- 1 Yes, connected on a permanent basis
- 2 Yes, connected sometimes
- 3 No
- 9 DK

If INTER not 2 and WIFI1 not (3, 9)

CPL

Have you installed or had installed a power-line telecommunications socket/adaptor?

- 1 Yes
- 2 No
- 9 DK

INT: PLT SOCKETS OR ADAPTERS ARE USED TO CONNECT SEVERAL COMPUTERS/DEVICES TO THE INTERNET BY BUILDING AN IT NETWORK ON THE HOME ELECTRICITY GRID. IT IS A BOX THAT PLUGS IN TO AN ELECTRIC SOCKET, OFTEN REFERRED TO AS "FREE PLUGS" OR "LIVE PLUGS".

If CPL=1

CPLT

Was it:

- 1 Before the birth of [ELFE child]
- 2 After the birth

Can you specify the month and year of the installation?

If CPLT=2

***CPLTPM**

The month of installation

|_|_| month (1 to 12, + DK=99)

CPLTPA

The year of installation

|_|_|_| (year) + DK=9999

ORDITOT

Do one or more people living in your dwelling use a computer?

- 1 Yes
- 2 No
- 9 DK

Where is the central unit of the computer(s)?

If ORDITOT=1

ORDIL1

It is a laptop

- 1 Yes
- 2 No

ORDIL2

On the floor

- 1 Yes
- 2 No

ORDIL3

On a desk

- 1 Yes
- 2 No

ORDIL4

Other

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

On average, how many hours a day is it (are they) used, all users combined? (HOURS and MINUTES + DK 99)

If *ORDITOT=1*

ORDITOTTH

Hours

|_|_| hours

ORDITOTTM

Minutes

|_|_| minutes

INT: IF FOR EXAMPLE TWO PEOPLE EACH USE A COMPUTER AT THE SAME TIME FOR 1 HOUR, ADD UP THE TWO AND NOTE 2 H.

TABTOT

Do one or more people living in your dwelling use a tablet at home?

1 Yes

2 No

9 DK

INT: A LAPTOP WITHOUT A TOUCH KEYBOARD AND EQUIPPED WITH A TOUCHSCREEN, WITH THE DIMENSION OF AN A4 SHEET OF PAPER OR SMALLER. CONSIDER USE OF TABLETS IN THE BROADEST SENSE (PLAYING, LOOKING AT PHOTOS, WATCHING FILMS, ETC.).

On average, how many hours a day is it (are they) used, all users combined? (HOURS and MINUTES + DK 99)

If *TABTOT=1*

TABTOTTH

Hours

|_|_| hours

TABTOTTM

Minutes

|_|_| minutes

INT: IF FOR EXAMPLE TWO PEOPLE EACH USE A TABLET AT THE SAME TIME FOR 1 HOUR, ADD UP THE TWO AND NOTE 2 H.

o. IT devices

IF A02x_TYPQPECF2a in (3, 4) and SITUAFAMP=1

If *ORDITOT=1* or *TABTOT=1*

Are [ELFE child] and [twin child] sometimes next to the people using a computer or tablet?

COTEORDI

1 Yes, most of the time

2 Yes, half the time

3 Yes, rarely

4 No

9 DK

NB: "and [twin child]" added starting from Wave 2

If ORDITOT=1 or TABTOT=1

OTAENF

Does [ELFE child] use a computer or tablet?

- 1 Yes
- 2 No

If NAISGEM=1

JOTAENF

Does [twin child] use a computer or tablet?

- 1 Yes
- 2 No

INT: TABLET = A LAPTOP WITHOUT A TOUCH KEYBOARD AND EQUIPPED WITH A TOUCHSCREEN, WITH THE DIMENSION OF AN A4 SHEET OF PAPER OR SMALLER. CONSIDER THEIR USE IN THE BROADEST SENSE (PLAYING, LOOKING AT PHOTOS, WATCHING FILMS, ETC.).

If OTAENF=1

OTAENFA

Since what age?

|__|__| months
(min 1 max 30 months; + DK=99; not allowed 0)

If JOTAENF=1

JOTAENFA

Since what age?

|__|__| months
(min 1 max 30 months; + DK=99; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

“On weekends, how much time in all does [ELFE child] spend using a computer or a tablet?” (In hours)

If OTAENF=1

OTAENFWH

|__|__| hours (Limits <49h, <61, + DK=99)
NB: “each” added starting from Wave 2

If JOTAENF=1

JOTAENFWH

|__|__| hours
(Limits <49h, <61, + DK =99)

“On weekends, how much time in all does [ELFE child] spend using a computer or a tablet?” (In minutes)

If OTAENF=1

OTAENFWM

|__|__| minutes
(Limits <49h, <61, + DK =99)
NB: “each” added starting from Wave 2

If JOTAENF=1

JOTAENFWM

|_|_| minutes (Limits<49h, <61, + DK=99)

“On a week day, how much time in all does/do [ELFE child]/children each spend using a computer or a tablet? (In hours)

If OTAENF=1

OTAENFSH

|_|_| hours

(Limits <25h, <61, + DK =99)

NB: “each” added starting from Wave 2

If JOTAENF=1

JOTAENFSH

|_|_| hours

(Limits <25h, <61, + DK =99)

“On a week day, how much time in all does/do [ELFE child]/children each spend using a computer or a tablet? (In minutes)

If OTAENF=1

OTAENFSM

|_|_| minutes

(Limits <25h, <61, + DK =99)

NB: “each” added starting from Wave 2

If JOTAENF=1

JOTAENFSM

|_|_| minutes

(Limits <25h, <61, + DK =99)

PORTAENF

Does [ELFE child] ever talk on a mobile phone?

1 Yes

2 No

NB: Changed at start of Wave 1 as question poorly understood by respondents.

If NAISGEM=1

JPORTAENF

Does [twin child] ever talk on a mobile phone?

1 Yes

2 No

NB: Changed at start of Wave 1 as question poorly understood by respondents “and [twin child]” added starting from Wave 2

If PORTAENF=1

PORTAENFT

Approximately how long does he/she (do they) each talk on a mobile phone per day, week or month?

1 A few minutes per DAY

2 Less than an hour per DAY

- 3 More than an hour per DAY
 - 4 A few minutes per WEEK
 - 5 Less than an hour per WEEK
 - 6 More than an hour per WEEK
 - 7 A few minutes per MONTH
 - 8 Less than an hour per MONTH
 - 9 More than an hour per MONTH
- NB: "each" added starting from Wave 2

If JPORAEF=1

JPORAEF

Approximately how long does he/she (do they) each talk on a mobile phone per day, week or month?

- 1 A few minutes per DAY
- 2 Less than an hour per DAY
- 3 More than an hour per DAY
- 4 A few minutes per WEEK
- 5 Less than an hour per WEEK
- 6 More than an hour per WEEK
- 7 A few minutes per MONTH
- 8 Less than an hour per MONTH
- 9 More than an hour per MONTH

NB: "each" added starting from Wave 2

If PORAEF=1

PORAEFA

Since what age?

|_|_| months

(min 1 max 30 months; + DK=99; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

If JPORAEF=1

JPORAEFA

Since what age?

|_|_| months

(min 1 max 30 months; + DK=99; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

13. Income

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 6, 7, 8)

Questionnaires concerned:

- “Referent Father”
- “Cohabiting Father” or “Cohabiting Father of Placed Child”: (SITUAFAMM=1 OR (SITUAFAMM=3 has a LIENTYP=7 SEXE=2))
carry over answers given by mother then ask the rest of the module + SALMON to ITOTREV asked to both parents
- Non-Cohabiting Father
- Non-Cohabiting Father of Placed Child

If the cohabiting father or cohabiting father of placed child is not participating, return later to the questionnaire with the mother, except for questions already documented.

“Now let's look at the financial resources of your household and your living conditions.”

“Let's start with work-related income.”

In your household, is/are there currently one or more individuals receiving the following income:

a. Financial resources

RSAL

Salary, wage or bonus (including the 13th month - a year-end bonus equal to one month's salary), paid vacations, overtime, daily subsistence allowance, remuneration for temporary employment, secondary activities, salaries of directors who are employees of their companies, profit sharing and holdings

- 1 Yes
- 2 No

RNSAL

Income from self-employed professional activity (freelance, liberal profession, etc.)?

- 1 Yes
- 2 No

RCHO

Unemployment benefits?

- 1 Yes
- 2 No

In your household, is/are there currently one or more individuals receiving:

RRSA

Active solidarity income (RSA)?

- 1 Yes
- 2 No

RBOU

One or more stipends?

- 1 Yes
- 2 No

In your household, is/are there currently one or more individuals receiving the following capital income:

RIMM

Rent and tenant farming? (If you rent out houses or land)

- 1 Yes
- 2 No

RFIN

Interest, savings account income, dividends (that your saving accounts or investments can generate, such as a Livret A savings passbook, a PEL savings account to buy property, a PEP tax-free savings account available to those not paying income tax, a sustainable development passbook)?

- 1 Yes
- 2 No

“Now let's move on to national health insurance benefits and child benefit.”

RMAL

Does your household receive illness- or disability-related benefits? (AAH allowance for disabled adults, disability allowance, allowance related to dependency, daily subsistence allowance not related to maternity)

- 1 Yes
- 2 No

RLOG

Housing benefit, housing allowance?

- 1 Yes
- 2 No

b. Allowances, financial services

CLCA

Does your household receive the CLCA free choice of activity allowance?

- 1 Yes
- 2 No
- 9 Doesn't know

INT: CLCA IS PAID BY THE CHILD BENEFIT AGENCY TO PARENTS HAVING STOPPED THEIR OCCUPATIONAL ACTIVITY OR WORKING PART TIME TO TAKE CARE OF THEIR CHILD AGED UNDER 3.

If SITUAFAMP not 7 and CLCA=1

CLCAPER

Who, through the reduction of their activity, allows your household to benefit from this allowance?

- 1 You
- 2 Your partner
- 3 You and your partner

If CLCA=1

ACLCA

What is the monthly amount of this allowance (without centimes)?

- 1 €144
- 2 €250
- 3 €329
- 4 €388
- 5 €435
- 6 €572
- 7 Other amount
- 8 Refuses
- 9 Doesn't know

INT: LIST, EACH TIME SAYING "IN THE REGION OF..."; NEW AMOUNTS SINCE APRIL 2013

If ACLCA=7

ACLCA7

Specify monthly amount

|_|_|_|_|_|_|_|

>0 to 99,999 + (DK) + (NA) + (REF)

CLCMG

Does your household receive the CLCMG free choice of child-minding allowance?

- 1 Yes
- 2 No
- 9 DK

INT: THE CMG IS PAID BY THE CHILD BENEFIT SCHEME TO PARENTS EMPLOYING AN APPROVED MATERNAL ASSISTANT OR AN EMPLOYEE AT HOME TO LOOK AFTER THEIR CHILD.

If CLCMG=1

ACLCMG

What is the monthly or annual amount of this allowance?

|_|_|_|_|_|_|_|

0 to 99,999 + (DK) + (NA) + (REF)

ACLCMGP

Specify

- 1 Monthly
- 2 Annual
- 8 Refuses
- 9 Doesn't know

RPED

Does your household receive the 184.62 euros basic PAJE allowance?

- 1 Yes
- 2 No
- 9 DK

INT: AJE = THE BASIC PAJE PRESTATION D'ACCUEIL DU JEUNE ENFANT (INFANT ACCOMMODATION) ALLOWANCE ((€184.62 SINCE APRIL 2013, BEFORE THAT €181). PAID BY THE CHILD BENEFIT SCHEME TO FAMILIES WITH A CHILD OF UNDER 3 BELOW A CERTAIN INCOME THRESHOLD.

RFAM

Any other child support? (for example, child support supplement, back-to-school allowance)?

- 1 Yes
- 2 No
- 9 DK

c. Financial resources, part two

RTRA

Not including the people in your household, do you have any parents, family or friends paying you alimony or regular financial aid, including for rent, directly or indirectly?

- 1 Yes
- 2 No

INT: If JPENSALI=1 REMINDER: FINANCIAL AID RULED ON BY THE FAMILY COURT JUDGE.

What types of aid?

If RTRA=1

If RTRA=1 ask TYPTRA1

TYPTRA1

Rent payment (direct or indirect)

- 1 Yes
- 2 No

TYPTRA2

Alimony

- 1 Yes
- 2 No

TYPTRA3

Other regular financial aid

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

d. Wages

IF A02x_ TYPQPECF2a in (3, 4, 5) and SITUAFAMP=1

“Lastly, let's look at your living conditions in terms of finances.”

(Even though you are on parental leave) what is the NET monthly or annual amount of your salary (or income from an independent activity)?

If SITUA=(1, 2) OR SITUAE=(1, 2) of respondent

What is the NET monthly or annual amount of your salary (or income from an independent activity)?

If CONGMATPAR_(1à20)=2

Even though you are on parental leave, what is the NET monthly or annual amount of your salary (or income from an independent activity)?

SALMON

|_|_|_|_|_|_|_| 0 to 99999 + (DK=99999) + (REF)

INT: SALARY AFTER TAX AND SOCIAL SECURITY AND DEDUCTIBLE CSG SOCIAL SECURITY CONTRIBUTIONS.

SALMONP

Specify:

- 1 Monthly
- 2 Annual
- 5 [Doesn't receive a salary]
- 8 [Refuses]
- 9 [Doesn't know]

If LIENTYP_(1à20)=(1, 7)

SALMONC

What is the NET monthly or annual amount of your partner's salary (or income from an independent activity)?

|_|_|_|_|_|_|_| 0 to 99999 + (DK=99999) + (REF)

INT: SALARY AFTER TAX AND SOCIAL SECURITY AND DEDUCTIBLE CSG SOCIAL SECURITY CONTRIBUTIONS.

SALMONCP

Specify:

- 1 Monthly
- 2 Annual
- 8 [Refuses]
- 9 [Doesn't know]

TOTREV

Taking account of all the types of income of your household, what is the current amount of your NET monthly resources?

- 1 Gives an amount
- 8 Refuses
- 9 Doesn't know

TOTREVEN

Taking account of all the types of income of your household, what is the current amount of your NET monthly resources?

|_|_|_|_|_|_|_| 1 to 99,9999 + (Refuses=888888; DK=999999)

INT: SALARY AFTER TAX AND SOCIAL SECURITY AND DEDUCTIBLE CSG SOCIAL SECURITY CONTRIBUTIONS. IF INCOME FLUCTUATES, TAKE AVERAGE

If TOTREV=(8, 9)

TOTREVENT

But can you tell me to which group belongs the current amount of your net monthly resources (taking into account all the types of income of your household)?

- 1 Less than €700 per month
- 2 €700 to €1000 per month
- 3 €1,000 to €1200 per month
- 4 €1,200 to €1,500 per month
- 5 €1,500 to €1800 per month
- 6 €1,800 to €2200 per month
- 7 €2,200 to €2,500 per month
- 8 €2,500 to €3,000 per month
- 9 €3,000 to €3,500 per month
- 10 €3,500 to €4,500 per month
- 11 €4,500€ and over per month
- 98 Refuses
- 99 DK

If TOTREVEN or TOTREVENT is reported

If TOTREV=1 OR TOTREVENT not (98, 99)

ITOTREV

Does this amount include the income from all the members of the household?

- 1 Yes
- 2 No
- 9 DK [no, because doesn't know total income]

14. Extended family

IF A02X_QPEFCOMP2a=1

Questionnaires concerned:

- Referent Father
- Cohabiting Father
- Non-Cohabiting Father
- Cohabiting Father of Placed Child
- Non-Cohabiting Father of Placed Child

“Now let’s talk about grandparents”

If 2 month and 1 year not done:

If in household 2 years a LIENTYP (1à20)=9 sexe=2 code **VIEMER=1**

If in household 2 years a LIENTYP (1à20)=9 sexe=1 code **VIEPER=1**

If no LIENTYP=8 ask **VIEMER and VIEPER**

If 2 month done and 1 year not done:

If in household 2 years a LIENTYP (1à20)=9 sexe=2 code **VIEMER=1**

If in household 2 years a LIENTYP (1à20)=9 sexe (1à20)=1 code **VIEPER=1**

If at 2 years CAUSEDEPAT (1à20)=3 LIENTYP (1à20)=9 sexe=2 present at 2 month code **VIEMER=2**

If at 2 years CAUSEDEPAT (1à20)=3 LIENTYP (1à20)=9 sexe=1 present at 2 month code **VIEPER=2**

If MBVIE=2 or MBVIEb=2 in 2 month code **VIEMER=2**

If PBVIE=2 or PBVIEb=2 in 2 month code **VIEPER=2**

If at 2 years LIENTYP (1à20)=9 sexe (1à20)=2 or (MBVIE not 2 and MBVIEb not 2) ask **VIEMER**

If at 2 years LIENTYP (1à20)=9 sexe (1à20)=1 or (PBVIE not 2 and PBVIEb not 2) ask **VIEPER**

If 1 year done:

If in household 2 years a LIENTYP (1à20)=9 sexe=2 code **VIEMER=1**

If in household 2 years a LIENTYP (1à20)=9 sexe (1à20)=1 code **VIEPER=1**

If at 2 years CAUSEDEPAT (1à20)=3 LIENTYP (1à20)=9 sexe=2 present at 1 year code **VIEMER=2**

If at 2 years CAUSEDEPAT (1à20)=3 LIENTYP (1à20)=9 sexe=1 present at 1 year code **VIEPER=2**

If 1-year VIEMER =2 or =. code **VIEMER=2**

If 1-year VIEPER =2 or =. code **VIEPER=2**

If 1-year VIEMER =1 AND (no CAUSEDEPAT=3 LIENTYP (1à20)=9 sexe (1à20)=2 present at 1 year or no LIENTYP (1à20)=9 sexe=2 in household at 2 years ask **VIEMER**

If 1-year VIEPER =1 AND (no CAUSEDEPAT=3 LIENTYP (1à20)=9 sexe (1à20)=1 present at 1 year or no LIENTYP (1à20)=9 sexe=1 in household at 2 years ask **VIEPER**

If LIENTYP (1à20)=9 sexe (1à20)=2 AND LIENTYP (1à20)=9 sexe (1à20)=2 in household at 2 years code **COUPAR=1**

VIEMER

Is your mother still alive?

- 1 Yes
- 2 No

If VIEMER=1

MSITUA

Currently your mother:

- 1 Has a job
- 2 Is retired, retired from business or in pre-retirement
- 3 Is in another situation (unemployed, in a home, etc.)
- 9 [Doesn't know]

INT: LIST UNTIL THE PERSON STOPS YOU. DO NOT TAKE SUMMER HOLIDAYS INTO ACCOUNT. IF VOLUNTEER WORK, ENTER "OTHER SITUATION". IF SEVERAL SITUATIONS, TAKE THE MAIN ONE, I.E. THE ONE THAT TAKES UP MOST TIME

VIEPER

Is your father still alive?

- 1 Yes
- 2 No

If VIEPER=1

PSITUA

Currently your father:

- 1 Has a job
- 2 Is retired, retired from business or in pre-retirement
- 3 Is in another situation (unemployed, in a home, etc.)
- 9 Doesn't know

INT: LIST UNTIL THE PERSON STOPS YOU. DO NOT TAKE SUMMER HOLIDAYS INTO ACCOUNT. IF VOLUNTEER WORK, ENTER "OTHER SITUATION". IF SEVERAL SITUATIONS, TAKE THE MAIN ONE, I.E. THE ONE THAT TAKES UP MOST TIME

If VIEMER=1 and VIEPER=1 and COUPAR not precoded

COUPAR

Do your mother and father live together?

- 1 Yes ⇒ LIEUPAR
- 2 No, they have been separated for over two years => COUMER
- 3 No, they separated less than two years ago => COUMER

If VIEMER=1 and VIEPER=2

PARDECP

When your father died, were your parents living together?

- 1 Yes
- 2 No, they had been separated for over two years
- 3 No, they had been separated for under two years

If COUPAR=(3) or (VIEMER=1 and VIEPER=2)

COUMER

Is your mother in a couple?

- 1 Yes, she is in a couple
- 2 No, she has always lived alone since she has no longer been with your father

3 No, she has already been in a couple since she has no longer been with your father and this is no longer the case

If VIEMER=2 and VIEPER=1

PARDECM

When your mother died, were your parents living together?

- 1 Yes
- 2 No, they had been separated for over two years
- 3 No, they had been separated for under two years

If COUPAR=(3) or (VIEMER=2 and VIEPER=1)

COUPER

Is your father in a couple?

- 1 Yes, he is in a couple
- 2 No, he has always lived alone since he has no longer been with your mother
- 3 No, he has already been in a couple since he has no longer been with your mother and this is no longer the case

If COUPAR=1 and (no LIENTYP (1à20)=8 SEXE (1à20)=2 AND LIENTYP (1à20)=8 SEXE (1à20)=1 in the household 2 years)

If COUPAR=1

LIEUPAR

Where do your parents currently live?

- 1 In France
- 2 Outside France

If LIEUPAR=1

***LIEUPARC**

In which town?

(Code using list of municipalities with INSEE code)

If LIEUPAR=1

LIEUPARCDIST

Distance between municipalities: grandparents and mother (km) (rounded)

If LIEUPAR=2

LIEUPARP

In which country?

(Code using list of countries used for country of birth)

If LIEUPARP=198

***LIEUPARPP**

Specify the other country:

What is the total length of the journey between their home and yours by the most frequently used transport mode?

If COUPAR=1 and (no LIENTYP (1à20)=9 SEXE (1à20)=2 AND LIENTYP (1à20)=9 SEXE (1à20)=1 in the household 2 years)

If COUPAR=1

TRAJPARH

Time in hours:

In |__|__| hours + DK (99)

TRAJPARM

Time in minutes:

In |__|__| minutes + DK (99)

If COUPAR=1 and (no LIENTYP (1à20)=9 SEXE (1à20)=2 AND LIENTYP (1à20)=9 SEXE (1à20)=1 in the household 2 years)

If COUPAR=1

RENCPAR

Who travels the most often when [ELFE child] [twin child] see/s your parents?

- 1 Your mother and father to the home of [ELFE child] [twin child]
- 2 Your mother to the home of [ELFE child] [twin child]
- 3 Your father to the home of [ELFE child] [twin child]
- 4 [ELFE child] and [twin child] to the home of your parents
- 5 Half and half
- 6 He/she doesn't see (or hardly ever see/s) his maternal grandparents

INT: DO NOT LIST THE LAST WORDING

If VIEPER=1 and COUPAR=(3) (AND no LIENTYP (1à20)=9 SEXE (1à20)=1 in the household 2 years)

If COUPAR not 1 AND VIEPER=1

LIEUPER

Where does your father currently live?

- 1 In France
- 2 Outside France

If LIEUPER=1

***LIEUPERC**

In which town?

(Code using list of municipalities with INSEE code)

If LIEUPER=2

LIEUPERCDIST

Distance between municipalities: grandfather and mother (km) (rounded)

If LIEUPER=2

LIEUPERP

In which country?

(Code using list of countries used for country of birth)

If LIEUPERP=198

***LIEUPERPP**

Specify the other country:

What is the total length of the journey between her home and yours by the most frequently used transport mode?

If VIEPER=1 and COUPAR=(3) (AND no LIENTYP (1à20)=9 SEXE (1à20)=1 in the household 2 years)

If COUPAR not 1 AND VIEPER=1

TRAJPERH

Time in hours:

In |__|__| hours
(DK=99)

TRAJPERM

Time in minutes:

In |__|__| minutes
(DK=99)

If VIEPER=1 and COUPAR=(3) (AND no LIENTYP (1à20)=9 SEXE (1à20)=1 in the household 2 years)
If COUPAR not 1 AND VIEPER=1

RENCPER

Who travels the most when [ELFE child] [twin child] sees your father?

- 1 Your father alone to the home of [ELFE child] [twin child]
- 2 Your father with his partner to the home of [ELFE child] [twin child]
- 3 [ELFE child] and [twin child] to the home of your father
- 4 Half and half
- 5 Your child/children doesn't/don't see (or hardly ever see/s) their paternal grandfather

INT: DO NOT LIST THE LAST WORDING

If VIEMER=1 and COUPAR=(3) (AND no LIENTYP (1à20)=9 SEXE (1à20)=1 in the household 2 years)
If COUPAR not 1 AND VIEMER=1

LIEUMER

Where does your mother currently live?

- 1 In France
- 2 Outside France

If LIEUMER=1

***LIEUMERC**

In which town?

(Code using list of municipalities with INSEE code)

If LIEUMER=2

LIEUMERCDIST

Distance between municipalities: grandmother and mother (km) (rounded)

If LIEUMER=2

LIEUMERP

In which country?

(Code using list of countries used for country of birth)

If LIEUMERP=198

***LIEUMERPP**

Specify the other country:

What is the total length of the journey between his home and yours by the most frequently used transport mode?

If VIEMER=1 and COUPAR=(3) (AND no LIENTYP_ (1à20)=9 SEXE_ (1à20)=1 in the household 2 years)

If COUPAR not 1 AND VIEMER=1

TRAJMERH

Time in hours:

In |__|__| hours +DK (99)

TRAJMERM

Time in minutes:

|__|__| minutes +DK (99)

If VIEMER=1 and COUPAR=(3) (AND no LIENTYP_ (1à20)=9 SEXE_ (1à20)=1 in the household 2 years)

If COUPAR not 1 AND VIEMER=1

RENCMER

Who travels the most often when [ELFE child] [twin child] sees your mother?

- 1 Your mother alone to the home of [ELFE child] [twin child]
- 2 Your mother (with her partner) to the home of [ELFE child] [twin child]
- 3 [ELFE child] and [twin child] to the home of your mother
- 4 Half and half
- 5 He/she doesn't see (or hardly ever see/s) his paternal grandmother

INT: DO NOT LIST THE LAST WORDING

If VIEMER=1

(If LIENTYP_ (1à20)=9 SEXE_ (1à20)=1 in the household 2 years code FQPER=1)

FQMER

How often has/have [ELFE child] and [twin child] seen your mother in the last 12 months?

- 1 Every day or almost
- 2 Several times a week
- 3 Several times a month
- 4 A few times in the last 12 months
- 5 Less often
- 6 Never

NB: "and [twin child]" and "has/have seen" added starting in Wave 2.

If FQMER=(2, 3, 4, 5)

FQMERJ

In all, how many days does that make in the last 12 months?

|_|_|_| + DK=999

NB: "in the last 12 months" added starting in Wave 2

Again in the last 12 months, has your mother:

If VIEMER=1 and FQMER not 6

MJOUE

Played with [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: "and [twin child]" added starting from Wave 2

MREPA

Given them a meal or taken care of them?

- 1 Yes
- 2 No

MGARDR

Minded them regularly?

- 1 Yes
- 2 No

If MGARDR=2

MGARD

Minded them occasionally (in your absence or that of your partner)?

- 1 Yes
- 2 No

If VIEMER=1

MSOUT

Advised or supported you?

- 1 Yes
- 2 No

MAIDM

Helped you with your housework?

- 1 Yes
- 2 No

MAIDF

Helped you financially?

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

IF GRANDMOTHER STILL ALIVE BUT NO CONTACT WITH FAMILY, CODE "NO"

RELMER

How would you describe the relationship your mother has with [ELFE child]?

- 1 Very satisfactory
- 2 Rather satisfactory
- 3 Rather unsatisfactory
- 4 Very unsatisfactory
- 8 Refuses

INT: DO NOT LIST THE LAST WORDING

JRELMER

How would you describe the relationship your mother has with [twin child]?

- 1 Very satisfactory
- 2 Rather satisfactory

- 3 Rather unsatisfactory
 - 4 Very unsatisfactory
 - 5 Does not want to answer
- INT:** DO NOT LIST THE LAST WORDING
NB: Added starting in Wave 2.

If VIEPER=1

(If LIENTYP_(1à20)=9 SEXE_(1à20)=1 in the household 2 years code FQPER=1)

FQPER

How often has/have [ELFE child] and [twin child] seen your father in the last 12 months?

- 1 Every day or almost
- 2 Several times a week
- 3 Several times a month
- 4 A few times in the last 12 months
- 5 Less often
- 6 Never

NB: “and [twin child]” and “has/have seen” added starting in Wave 2.

If FQPER=(2, 3, 4, 5)

FQPERJ

In all, how many days does that make in the last 12 months?

|_|_|_|_|

NB: “in the last 12 months” added starting in Wave 2

Again in the last 12 months, has your father:

NB: “in the last year” replaced by “in the last 12 months” starting in Wave 2.

If VIEPER=1 and FQPER not 6

PJOUE

Played with [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: “and [twin child]” added starting from Wave 2

PREPA

Given them a meal or taken care of them?

- 1 Yes
- 2 No

PGARDR

Minded them regularly?

- 1 Yes
- 2 No

If PGARDR=2

PGARD

Minded them occasionally (in your absence or that of your partner)?

- 1 Yes
- 2 No

If VIEPER=1

PSOUT

Advised or supported you?

- 1 Yes
- 2 No

PAIDM

Helped you with your housework?

- 1 Yes
- 2 No

PAIDF

Helped you financially?

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

IF GRANDFATHER STILL ALIVE BUT NO CONTACT WITH FAMILY, CODE "NO"

RELPER

How would you describe the relationship your father has with [ELFE child]?

- 1 Very satisfactory
- 2 Rather satisfactory
- 3 Rather unsatisfactory
- 4 Very unsatisfactory
- 8 Refuses

INT: DO NOT LIST THE LAST WORDING

JRELPER

How would you describe the relationship your father has with [twin child]?

- 1 Very satisfactory
- 2 Rather satisfactory
- 3 Rather unsatisfactory
- 4 Very unsatisfactory
- 8 Refuses

INT: DO NOT LIST THE LAST WORDING

NB: Variable added starting in Wave 2 with the agreement of the researchers.

15. Type of care

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 6, 7, 8)

Questionnaire concerned:

- “Referent Father”
- “Non-Cohabiting Father”

Since [ELFE child]/[twin child] lives/live on an alternating basis between your home and their father’s home, I am going to ask you how much they live at your home outside holiday periods.

If EFVIT=4

FQALTERNS

Days per week excluding weekends

|__|

OR

FQALTERNM

Weeks per month

|__|

AND

FQALTERNWE

How many weekends per month does he/she live with you outside holiday periods?

|__|

If EFVIT=4

“We are now going to talk about what type of care used for [ELFE child]/[twin child] when they are at your home.”

If EFVIT=(1, 2)

“We are now going to talk about the care of [ELFE child]/[twin child].”

If NAISGEM=1

MEMGARD

Do [ELFE child] and [twin child] currently have the same main type of care during the week, from Monday to Friday, 9 am to 6 pm?

1 Yes

2 No

If MEMGARD=1=> GARDENF and the questions are asked only once (ELFE child and twin child) are mentioned in the questions
If MEMGARD=2 => ask “Type of care” again later for the twin

NB: [ELFE child and twin child] are mentioned in questions” added to wording above starting in Wave 2.

What is the main type of child care used for [ELFE child] and [twin child] during the week from Monday to Friday from 9 am to 6 pm?

NB: “[Twin child]” added to wording above starting in Wave 2.

If 1 year done: When [ELFE child] and [twin child] was/were 1 year old, you told us that his/her/their main type of care during the week from Monday to Friday 9 am to 6 pm was (display wording from 1 year survey). Is this still the case [“When he/she lives at your home” if EFVIT=4] ?

NB: [twin child] and “their” (above) added starting in Wave 2.

If 1 year not done: What is currently the his/her/their main type of child care used during the week from Monday to Friday from 9 am to 6 pm? [“When he/she lives at your home” if EFVIT=4] ?

GARDENF

- 1 Yourself
- 2 Your partner
- 3 Yourself and your partner
- 4 “The child's grandparents or grandparent” <= If VIEMER=1 or VIEPER=1
- 5 “The child's paternal grandparents or grandparent” <= If VIEMER=2 or VIEPER=2
- 6 A childcare assistant
- 7 A crèche
- 8 Paid home help
- 9 Nursery school
- 10 Other type of care

INT: IF THE MOTHER UNPROMPTED MENTIONS SEVERAL TYPES OF CARE, **ASK** HER TO CHOOSE THE ONE SHE CONSIDERS AS THE MAIN TYPE. IF THE MOTHER SAYS HER PARTNER IS NOT THE FATHER, YOU SHOULD TELL HER THAT IT IS HER **CURRENT** PARTNER WE ARE TALKING ABOUT.

If EFVIT=4 display a recommendation

INT: IF THE FATHER SAYS THE MOTHER IS THE MAIN TYPE OF CARE, CODE “OTHER TYPE OF CARE” AND ENTER “MOTHER”

If GARDENF=10

GARDENFP

Specify

If GARDENF=6

AGREAM

Is she accredited?

- 1 Yes
- 2 No
- 9 DK

AGEDGARD

How old were [ELFE child] and [twin child] in months when you started to use child care?

How old were [ELFE child] and [twin child] in months when you started to use child care [“by display GARDENF=(1, 2, 3, 4)”/“by this childcare assistant” if GARDENF=5]/ “at this crèche” if GARDENF=6]/ “by this paid home help” if GARDENF=7/ “at this nursery school” if GARDENF=9/ “=this way” if GARDENF=8]?

|_|_| (0 to 30 months) + DK=99

INT: IF SEVERAL TYPES OF CARE HAVE BEEN USED, ENTER AGE OF CHILD AT START OF LAST TYPE OF CARE

NB: “and [twin child]” added to wordings above stating in wave 2.

If EFVIT=4

MEMEGARDJ

When [ELFE child]/[twin child] is/are with their mother, is the same type of child care used?

If GARDENF=4 By the same grandparents

If GARDENF=6 By the same childcare assistant

If GARDENF=7 At the same crèche

If GARDENF=8 By the same paid home help

If GARDENF=9 At the same nursery school

If GARDENF=10 By/in the same “display GARDENFP”

- 1 Yes
- 2 No
- 9 DK

GARDPREF

Ideally, what type of care do you prefer?

- 1 Yourself
- 2 Your partner
- 3 Yourself and your partner
- 4 “The child's grandparents or grandparent” <= If VIEMER=1 or VIEPER=1
- 5 “The child's maternal grandparents or grandparent” <= If VIEMER=2 or VIEPER=2
- 6 A childcare assistant
- 7 A crèche
- 8 Paid home help
- 9 Nursery school
- 10 Other type of care

If GARDENF=(1, 2, 3, 4, 5, 6, 8, 10)

LIEUGARD

And again concerning the main type of care, is/are [ELFE child]/[twin child] minded at your home?

And again concerning the main type of care, is/are [ELFE child]/[twin child] [“When he/she lives at your home” if EFVIT=4] minded at your home?

- 1 Yes, always or practically always
(Display wording 2 of GARDENF=(4, 5, 7, 8))
- 2 Yes, but on an alternating basis with another home
- 3 No

If E2A_GARDENF not E1A_GARDENF AND GARDENF not 9

PQGARD

What was the main reason you changed your type of care?

- 1 The other type of child care cost too much
- 2 You didn't have another solution
- 3 Your work hours were no longer compatible with the hours of the other child care solution
- 4 At his/her/their age, it is the best solution for him/her/them.
- 5 It was my preferred type of child care but not available before
- 6 For another reason

If PQGARD=6

***PQGARDP**

Specify

[ELFE child]/[twin child] is (are) now going to nursery school. Is this because:

If GARDENF=9

NB: “And [twin child]” and “are” added starting in Wave 2.

GARDTC

The previous type of care cost too much

- 1 Yes
- 2 No

GARDHI

The hours of the previous type of care were unadapted

- 1 Yes
- 2 No

GARDCE

It was an educational choice

- 1 Yes
- 2 No

GARDPC

Your occupational situation has changed

- 1 Yes
- 2 No

GARDFC

Your family situation has changed

- 1 Yes
- 2 No

GARDAU

Other

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

If GARDAU=1

GARDEMP

Specify

If GARDENF=(9, 7) OR LIEUGARD=(2, 3)

“How many hours a week do/does [ELFE child]/[twin child] spend at his/her/their main place of care/(when not kept at home)?”

NB: “and [twin child]” and “their” added starting in Wave 2.

If (GARDENF=9 or 6) OR (LIEUGARD=3) “How many hours a week do/does [ELFE child]/[twin child] spend at his/her/their main place of care?”

NB: “and [twin child]” and “their” added starting in Wave 2.

If LIEUGARD=2 “How many hours a week do/does [ELFE child]/[twin child] spend at his/her/their main place of care/(when not kept at home)?”

NB: “and [twin child]” and “their” added starting in Wave 2.

DURECO

|__|__| (1 to 50)

You said it was an educational choice. Is this because:

If GARDCE=1

EMCHEDUC1

You wanted him/her to begin their school learning

- 1 Yes
- 2 No

EMCHEDUC2

You wanted him/her to socialize with other children and adults

- 1 Yes
- 2 No

EMCHEDUC3

You don't share the same educational values as the previous type of child care

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

COMGARD

Do you use any other care type apart from the one we have just talked about?

- 1 Yes
- 2 No ⇒ RELREG

If COMGARD=1

QLCOMGARD

Which?

- 1 Yourself ⇐ If GARDENF not 1
- 2 Your partner ⇐ If GARDENF not 2
- 3 Yourself and your partner ⇐ If GARDENF not 3
- 4 “The child's grandparents or grandparent” ⇐ If VIEMER=1 or VIEPER=1
- 5 “The child's maternal grandparents or grandparent” ⇐ If GARDENF not 4 and VIEMER=2 and VIEPER=2
- 6 A childcare assistant (accredited or non-accredited except grandmother who is a childcare assistant) ⇐ If GARDENF not 5
- 7 A crèche ⇐ If GARDENF not 6
- 8 Paid home help ⇐ If GARDENF not 7
- 9 A daycare centre
- 10 Nursery school ⇐ If GARDENF not 9
- 11 Other type of care

If QLCOMGARD=11

***QLCOMGARDP**

Specify other type of care

If GARDENF=(6, 7, 8, 9, 10) or QLCOMGARD=(6, 7, 8, 9, 10, 11)

RELREG

Have you established a regular relationship with at least one of the professionals who looks after [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: "and [twin child]" added starting from Wave 2

If RELREG=2

PQAUCUN

For what main reason?

- 1 They are not available
- 2 You don't want to
- 3 You don't have the time
- 4 You don't feel competent
- 5 They are not competent

If RELREG=1 and (GARDENF not (6, 8) and COMGARD not 2)

***QLPRO**

With whom in particular?

CONED

Have you asked for advice on the education of [ELFE child] and [twin child] from professionals, people around you or on forums?

- 1 Yes
- 2 No

NB: "and [twin child]" added starting from Wave 2

From whom?

If CONED=1

CONEDPRO

Professionals that take care of the child

If GARDENF=(5, 6, 7, 8, 9) or QLCOMGARD=(5, 6, 7, 8, 9, 10)

- 1 Yes
- 2 No

CONEDFAM

Family

- 1 Yes
- 2 No

CONEDAMI

Friends

- 1 Yes
- 2 No

CONEDCOL

Work colleagues

- 1 Yes
- 2 No

CONEDMED

A doctor or a psychologist

- 1 Yes
- 2 No

NB: "or a" added starting in Wave 2.

CONEDREL

A parent venue

- 1 Yes
- 2 No

CONEDFOR

On a forum

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

PARENT VENUE = A PLACE WHERE PARENTS CAN GO WITH THEIR CHILDREN SO THAT THESE LAST CAN ENJOY A RANGE OF ACTIVITIES WITH CHILDCARE ASSISTANTS.

CONSO

Have you asked for advice about the sleep of [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: "and [twin child]" added starting from Wave 2

From whom?

If CONSO=1

CONSOPRO

Professionals that take care of the child

If GARDENF=(6, 7, 8, 9, 10) or QLCOMGARD=(6, 7, 8, 9, 10, 11)

- 1 Yes
- 2 No

CONSOFAM

Family

- 1 Yes
- 2 No

CONSOAMI

Friends

- 1 Yes
- 2 No

CONSOCOL

Work colleagues

- 1 Yes
- 2 No

CONSOMED

A doctor or a psychologist

- 1 Yes
- 2 No

NB: "or a" added starting in Wave 2.

CONSOREL

A parent venue

- 1 Yes
- 2 No

CONSOFOR

On a forum

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

PARENT VENUE = A PLACE WHERE PARENTS CAN GO WITH THEIR CHILDREN SO THAT THESE LAST CAN ENJOY A RANGE OF ACTIVITIES WITH CHILDCARE ASSISTANTS.

CONAL

Have you asked for advice about the diet of [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: "And [twin child]" added starting in Wave 2.

From whom?

If CONAL=1

CONALPRO

Professionals that take care of the child

If GARDENF=(6, 7, 8, 9, 10) or QLCOMGARD=(6, 7, 8, 9, 10, 11)

- 1 Yes
- 2 No

CONALFAM

Family

- 1 Yes
- 2 No

CONALAMI

Friends

- 1 Yes
- 2 No

CONALCOL

Work colleagues

- 1 Yes
- 2 No

CONALMED

A doctor or a psychologist

- 1 Yes
- 2 No

NB: "or a" added starting in Wave 2.

CONALREL

A parent venue

- 1 Yes
- 2 No

CONALFOR

On a forum

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

PARENT VENUE = A PLACE WHERE PARENTS CAN GO WITH THEIR CHILDREN SO THAT THESE LAST CAN ENJOY A RANGE OF ACTIVITIES WITH CHILDCARE ASSISTANTS.

CONHY

Have you asked for advice about the hygiene of [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: "And [twin child]" added starting in Wave 2.

From whom?

If CONHY=1

CONHYPRO

Professionals that take care of the child

If GARDENF=(6, 7, 8, 9, 10) or QLCOMGARD=(6, 7, 8, 9, 10, 11)

- 1 Yes
- 2 No

CONHYFAM

Family

- 1 Yes
- 2 No

CONHYAMI

Friends

- 1 Yes
- 2 No

CONHYCOL

Work colleagues

- 1 Yes
- 2 No

CONHYMED

A doctor or a psychologist

- 1 Yes
- 2 No

NB: "or a" added starting in Wave 2.

CONHYREL

A parent venue

- 1 Yes
- 2 No

CONHYFOR

On a forum

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

PARENT VENUE = A PLACE WHERE PARENTS CAN GO WITH THEIR CHILDREN SO THAT THESE LAST CAN ENJOY A RANGE OF ACTIVITIES WITH CHILDCARE ASSISTANTS.

CONSA

Have you asked for advice about the health of [ELFE child] and [twin child]?

- 1 Yes
- 2 No

NB: "And [twin child]" added starting in Wave 2.

From whom?

If CONSA=1

CONSAPRO

Professionals that take care of the child

If GARDENF=(6, 7, 8, 9, 10) or QLCOMGARD=(6, 7, 8, 9, 10, 11)

- 1 Yes
- 2 No

CONSAFAM

Family

- 1 Yes
- 2 No

CONSAAMI

Friends

- 1 Yes
- 2 No

CONSACOL

Work colleagues

- 1 Yes
- 2 No

CONSAMED

A doctor or a psychologist

- 1 Yes
- 2 No

NB: "or a" added starting in Wave 2.

CONSAREL

A parent venue

- 1 Yes
- 2 No

CONSAFOR

On a forum

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

PARENT VENUE = A PLACE WHERE PARENTS CAN GO WITH THEIR CHILDREN SO THAT THESE LAST CAN ENJOY A RANGE OF ACTIVITIES WITH CHILDCARE ASSISTANTS.

If GARDENF=(6, 7, 8, 9, 10) or QLCOMGARD=(6, 7, 8, 9, 10, 11)

RELATG

Regarding the people involved in the care of the child (or children if twin), how would you describe the relationship you have with them?

- 1 Friendly
- 2 Courteous
- 3 Strictly professional
- 4 Indifferent
- 5 Sometimes tense
- 6 Conflictual
- 7 You don't have a relationship with them
- 8 [It depends a lot on the people]

If GARDENF not 9 and QLCOMGARD not 10

SHEM

[ELFE child]/[twin child] doesn't/don't go to nursery school, but would you like them to?

- 1 Yes ⇨ SHEMA
- 2 No ⇨ SHEMN

NB: "and [twin child] and "don't" added starting in Wave 2.

If SHEM=1

SHEMO

He/she/they doesn't/don't go because:

- 1 There isn't a nursery school in your area
- 2 There is no room, they don't take two-year-olds?
- 3 Other (he/she/they is/are not toilet trained, still too young)

If SHEM=2

SHEMN

Is it because:

- 1 You think he/she/the is/are too young, not independent enough
- 2 You think there are too many children in school classrooms
- 3 You think they aren't sufficiently supervised at school, not enough adults
- 4 The hours don't match your schedule
- 5 You think the hours are too long for the child/children, too tiring
- 6 You think that the school premises are not adapted for very young children

If GARDENF not 9 and QLCOMGARD not 10

SHEMNP

But do you think he/she/they will go to nursery school next year?

- 1 Yes
- 2 No

NB: Change in Wave 2: wording 5 A doctor/a psychologist, was translated in the field by 5 A doctor/psychologist. For greater clarity, we changed it to 5 A doctor or a psychologist

If GARDENF=(7, 9) OR LIEUGARD=3

TYPTRAN(1à2)

For the journey from your house to the main care venue, what type of transport does/do the child/children use?

- 1 Car
- 2 Bus, coach
- 3 Train
- 4 Tramway
- 5 Metro, suburban train
- 6 On foot (possibly held in arms in baby-carrier or in a pram)
- 7 Bike (in baby-seat)
- 8 Motorized two-wheeler
- 9 [Not applicable]

INT: LIST. TWO ANSWERS POSSIBLE

If TYPTRAN(1à2)=(1, 2, 3, 4, 5, 6, 7, 8)

TYPTRAN(1à2)

How many times a week does he/she use it to go from your house to the care venue?

|__|__| (1 to 20) + DK=99

How long does the journey take? (hours/minutes)

If TYPTRAN1=(1, 2, 3, 4, 5, 6, 7, 8)

TPS1H

Hours

|__|__| hours + DK=9

If TYPTRAN1=(1, 2, 3, 4, 5, 6, 7, 8)

TPS1M

Minutes

|_|_| minutes + DK=99

If TYPTRAN2=(1, 2, 3, 4, 5, 6, 7, 8)

TPS2H

Hours

|_|_| hours + DK=9

If TYPTRAN2=(1, 2, 3, 4, 5, 6, 7, 8)

TPS2M

Minutes

|_|_| minutes + DK=99

If LIEUGARD=2

TYPTRAN(3à4)

For the journey from the other home to the main care venue, what type of transport does/do the child/children use?

- 1 Car
- 2 Bus, coach
- 3 Train
- 4 Tramway
- 5 Metro, suburban train
- 6 On foot (possibly held in arms in baby-carrier or in a pram)
- 7 Bike (in baby-seat)
- 8 Motorized two-wheeler
- 9 [Not applicable]

INT: LIST. TWO ANSWERS POSSIBLE

If TYPTRAN(3à4)=(1, 2, 3, 4, 5, 6, 7, 8)

TYPTRAN(3à4)

How many times a week do you use it to go from your house to the care venue?

|_|_| (1 to 20)

How long does the journey take? (hours/minutes)

If TYPTRAN3=(1, 2, 3, 4, 5, 6, 7, 8)

TPS3H

Hours

|_|_| hours

If TYPTRAN3=(1, 2, 3, 4, 5, 6, 7, 8)

TPS3M

Minutes

|_|_| minutes

If TYPTRAN4=(1, 2, 3, 4, 5, 6, 7, 8)

TPS4H

Hours

|_|_| hours

If TYPTRAN4=(1, 2, 3, 4, 5, 6, 7, 8)

TPS4M

Minutes

|_|_| minutes

“In the last six months, has [ELFE child] made regular journeys (and excluding from your house to the main care venue) every day or every week?”

DEPLACER

1 Yes

2 No

INT: If GARDENF=(7,9) OR LIEUGARD= 3 OR LIEUGARD= 2 then (and excluding from your house to the main care venue)

If DEPLACER=1

TYPTRAN(5à6)

For these regular journeys, what type of transport does/do the child/children use?

1 Car

2 Bus, coach

3 Tramway

4 Metro, suburban train

5 Motorized two-wheeler

6 Train

7 Bicycle

8 On foot or held in arms, in baby-carrier or in a pram)

INT: LIST. TWO ANSWERS POSSIBLE

If TYPTRAN(5à6)=(1, 2, 3, 4, 5, 6, 7, 8)

TYPTRAN(5à6)

How many times a week does he/she make these journeys by...?

|_|_| (1 to 20)

How long does the journey take? (hours/minutes)

If TYPTRAN5=(1, 2, 3, 4, 5, 6, 7, 8)

TPS5H

Hours

|_|_| hours

If TYPTRAN5=(1, 2, 3, 4, 5, 6, 7, 8)

TPS5M

Minutes

|_|_| minutes

If TYPTRAN6=(1, 2, 3, 4, 5, 6, 7, 8)

TPS6H

Hours

|_|_| hours

If TYPTRAN6=(1, 2, 3, 4, 5, 6, 7, 8)

TPS6M

Minutes

|_|_| minutes

16. The child's health

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 3, 4, 5)

Questionnaire concerned:

- Referent Father
- Cohabiting Father (SITUAFAMM=1 or SITUAFAMM=3 with a LIENTYP=7 SEXE=2): ask variables from SSA to COMPS4.

If the father or the cohabiting female partner is not participating, the questions are asked to the mother.

a. Social security cover

IF A02x_TYPQPECF2a in (3, 4, 5) and SITUAFAMP=1

If no twin:

"We are going to talk about the health of [ELFE child]."

If twin:

"We are now going to talk about the care of [ELFE child] and [twin child]. We will start with [ELFE child] and then talk about [twin child]."

"For the rest of the questionnaire, we will need the information contained in the health booklet of [ELFE child]. Would you mind going to get it?"

"I am going to start with a few questions about social security coverage."

SSA

Are part or all the healthcare costs of [ELFE child] reimbursed by social security?

- 1 Yes
- 2 No

INT: THE IDEA IS TO ASK IF IN ONE WAY OR ANOTHER THE HEALTHCARE COSTS OF THE CHILD ARE REIMBURSED BY SOCIAL SECURITY OR HEALTH INSURANCE (CHANGED AT START OF WAVE 1)

CARVIT

On which card is [ELFE child] registered? (to be adapted to the family situation)

- 1 His/her mother's card
- 2 His/her father's card
- 3 His/her parents' card
- 4 The card of his/her parents in law
- 5 He/she is not registered on any card

For those with supplementary healthcare coverage:

If E1A_COMPS1=1

COMPS1

Does he/she have supplementary healthcare coverage (including CMU universal healthcare coverage) that reimburses his/her healthcare in addition to social security?

- 1 Yes
- 2 No
- 9 Doesn't know

If COMPS1=1

COMPS2

Is it CMU universal healthcare coverage?

- 1 Yes
- 2 No

For those without supplementary healthcare coverage or not previously documented

If E1A COMPS1=(2, 9, .)

COMPS3

Currently, does he/she have supplementary healthcare coverage (including CMU universal healthcare coverage) that reimburses his/her healthcare in addition to social security?

- 1 Yes
- 2 No
- 9 Doesn't know

Since which date has he/she had this coverage?

If COMPS3=1

***MCOMPS3**

Month

If COMPS3=1

ACOMPS3

Year

If COMPS3=1

COMPS4

Is it CMU universal healthcare coverage?

- 1 Yes
- 2 No

b. Health booklet

For the rest of the questionnaire, we will need the information contained in the health booklet of [ELFE child]. Would you mind going to get it?

CARNET

- 1 [has the health booklet]
- 2 [doesn't have the health booklet, you continue]

INT: IF CARNET=2 TELL THE FATHER WE WILL CALL HIM BACK LATER FOR THE INFORMATION ON WEIGHT AND HEIGHT.

First of all, we would like to note the measurements made when [ELFE child] was one year old. They are generally found on pages 38-39 of the health booklet.

If CARNET=1

CARNETREMP916

Can you see the measurements of [ELFE child] when he/she was around one year old?

- 1 Yes => TAIENF916
- 2 No => CARNETREMP1724

INT: ACCEPT MEASUREMENTS MADE BETWEEN AGE OF 9 AND 16 MONTHS

Could you choose an examination that includes the height and weight, and tell me:

TAIENF916

His/her height

_____, ____ cm (55.0 to 120.0)

INT: IN CENTIMETRES

POIENF916

His/her weight

____ kg _____ gr (5.000 to 30.000)

INT: IN KILOGRAMS, EX: 8 KG AND 320 GRAMS, CODE "8.320"

CRAENF916

Cranial perimeter

____, ____ cm (38.0 to 60.0)

INT: IN CENTIMETRES

MDATEX916

Age at consultation from 9 to 16 months

MDATEX916JR

Age at consultation from 9 to 16 months (in days)

On which date were these measurements made?

***MDATEX916J**

The date

____|____| (1 to 31) (NA/DK=99)

***MDATEX916M**

The month

____|____| (1 to 12) (NA/DK=99)

MDATEX916A

The year

____|____|____|____| (2011 to 2013) (NA/DK=9999)

If CARNETREMP916=2

CARNETREMP1724

But do you have measurements from around 18 months? They are generally found on pages 40-41 of the health booklet.

1 Yes => POIENF1724

2 No => CARNETREMP24

Could you choose an examination that includes the height and weight, and tell me:

TAIENF1724

His/her height

_____, ____ cm (60.0 to 120.0)

INT: IN CENTIMETRES

POIENF1724

His/her weight

____ kg _____ gr

(6.000 to 30.000)

INT: IN KILOGRAMS, EX: 8 KG AND 320 GRAMS, CODE "8.320"

CRAENF1724

Cranial perimeter

____, ____ cm

(40.0 to 65.0)

INT: IN CENTIMETRES

MDATEX1724

Age at consultation from 17 to 24 months

MDATEX1724JR

Age at consultation from 17 to 24 months (in days)

On which date were these measurements made?

***MDATEX1724J**

The date

||_| (1 to 31) (NA/DK=99)

***MDATEX1724M**

The month

|| (1 to 12) (NA/DK=99)

MDATEX1724A

The year

||_|_| (2011 to 2013) (NA/DK=9999)

CARNETREMP24

Are pages 42-43 of the booklet filled in?

1 Yes => POIENF1724

2 No => (read INT remark) ENFSANT

INT: SO YOU HAVE YET TO DO [ELFE CHILD'S] 24 MONTH CONSULTATION. WE WOULD ASK YOU TO TAKE THE "ELFE 2 YEAR GENERAL PRACTITIONER QUESTIONNAIRE", WHICH YOU SHOULD HAVE RECEIVED BY POST, TO THE NEXT CONSULTATION. THE MEDICAL DATA (ON VACCINATIONS, FOR EXAMPLE) WILL BE EXTREMELY HELPFUL TO THE RESEARCHERS.

QMEDTRAIT

Did you send us the ELFE 2 Year General Practitioner questionnaire?

- 1 Yes => (read INT remark)
- 2 No, but I'm going to => (read INT remark)
- 3 No, I haven't filled in the questionnaire

INT: THANK YOU VERY MUCH. THE QUESTIONNAIRE CONTAINS INVALUABLE INFORMATION THAT WE CANNOT OBTAIN IN ANOTHER MANNER, INCLUDING ON VACCINATIONS.

c. The child's state of health

For children with a "poor" or "rather poor" state of health reported at 1 year, the relating health issue is displayed for the interviewer

If no serious problem reported at 1 year or 1 year not done

You told us at 1 year that your child's state of health was not good. How is he/she today?

According to you, your child is currently

ENFSANT

- 1 In good health
- 2 Mostly in good health
- 3 Mostly in poor health
- 4 In poor health
- 6 No answer
- 9 DK

For children for whom a serious illness was reported at 1 year, the related pathology is displayed for the interviewer, who brings it up by saying:

"You told us last year about [name of health problem indicated at 1 year]."

"Between the age of 1 and 2, has [ELFE child] seen a doctor several times for [display DIAGBPB]?"

DIAGPB1(1à4) *(not available as empty)*

- 1 Yes
- 2 No
- 9 Doesn't remember saying that in 1 year survey

If DIAGPB1(1à4)=1

The illness reported at 1 year is displayed and the interviewer re-enters it in the list below or in "Other"

Have you had a more precise diagnosis since? If so, can you tell us about it?

DIAGPB1TYP(1à4) *(not available as empty)*

- 1 Allergy
- 2 Asthma
- 3 Cystic fibrosis
- 4 Constipation
- 5 Celiac disease
- 6 Several cases of ear infection (more than 3)
- 7 Several cases of sore throat (more than 3)
- 8 Several cases of laryngitis (more than 3)
- 9 Consequences of an accident (burn, trauma)
- 10 Epilepsy, seizure
- 11 Other
- 12 [did not have precise diagnosis]

If DIAGPB1TYP(1à4)=11

***DIAGPB1TYPP(1à)** *(not available as empty)*

Specify

INT:

- DO NOT LIST. 2 ANSWERS POSSIBLE
- THE ILLNESS REPORTED AT 1 YEAR IS DISPLAYED AND THE INTERVIEWER RE-ENTERS IT IN THE LIST OR IN "OTHER"
- YOU CAN DESCRIBE THE ILLNESS IN MORE DETAIL BUT NOT ADD A NEW ONE

Has he/she been consulted by a doctor for an (OTHER) health problem or an illness requiring specialized care, excluding colds and sore throats?

If at 1 year serious illness AND DIAGPB=2

“But has he/she been consulted by a doctor for ANOTHER health problem or an illness also requiring specialized care, excluding colds and sore throats?”

If at 1 year serious illness AND DIAGPB=1

“Has he/she ALSO been consulted several times by a doctor for ANOTHER health problem or an illness requiring specialized care, excluding colds and sore throats?”

If no serious illness reported at 1 year or 1 year not done

“Between the ages of 1 and 2, was he/she consulted several times by a doctor for a health problem or an illness also requiring specialized care, excluding colds and sore throats?”

DIAGPB2

- 1 Yes
- 2 No

What was the illness?

If DIAGPB2=1

DIAGPB2TYP1

Allergy

- 1 Yes
- 2 No

DIAGPB2TYP2

Asthma

- 1 Yes
- 2 No

DIAGPB2TYP3

Cystic fibrosis

- 1 Yes
- 2 No

DIAGPB2TYP4

Constipation

- 1 Yes
- 2 No

DIAGPB2TYP5

Celiac disease

- 1 Yes
- 2 No

DIAGPB2TYP6

Several cases of ear infection (more than 3)

- 1 Yes
- 2 No

DIAGPB2TYP7

Several cases of sore throat (more than 3)

- 1 Yes
- 2 No

DIAGPB2TYP8

Several cases of laryngitis (more than 3)

- 1 Yes
- 2 No

DIAGPB2TYP9

Consequences of an accident (burn, trauma)

- 1 Yes
- 2 No

DIAGPB2TYP10

Epilepsy, seizure

- 1 Yes
- 2 No

DIAGPB2TYP11

Other

- 1 Yes
- 2 No

If DIAGPB2TYP11=1

DIAGPB2TYP1

Specify

INT: DO NOT LIST. 2 ANSWERS POSSIBLE

YOU CAN DESCRIBE THE ILLNESS IN MORE DETAIL BUT NOT ADD A NEW ONE

MEDENF(1à2)

Which doctor(s) have you seen the most often for your child's health treatment?

- 1 General practitioner (private)
- 2 Paediatrician (private)
- 3 Mother-and-infant-protection doctor
- 4 Hospital doctor (excluding emergency)
- 5 Doctor at municipal healthcare centre or dispensary
- 6 [None]

INT: LIST. TWO ANSWERS POSSIBLE

IF MORE THAN TWO ANSWERS GIVEN: "WHAT ARE THE TWO TYPES OF DOCTOR THAT YOU HAVE SEEN THE MOST?"

If MEDENF(1à2)=3

NRPMI

Since [date of last interview/if no interview at 2 months and 1 year since birth], how many times have you seen the mother-and-infant-protection doctor?

|__|__| + DK=99

INT: - PARENTS CAN CHECK THE HEALTH BOOKLET AND INCLUDE:

- THE CONSULTATIONS ON PAGES 38-39 (9-16 MONTHS), AFTER [DATE OF LAST INTERVIEW];
- THE CONSULTATIONS ON PAGES 40-41 (17-24 MONTHS);
- THE CONSULTATION AT THE 24TH MONTH ON PAGES 42-43 IF IT HAS ALREADY BEEN DONE;
- THE CONSULTATIONS ON PAGES 44-45 (25-36 MONTHS) IF THE DOUBLE PAGE HAS STARTED TO BE FILLED IN;
- THEY CAN ALSO TALK ABOUT OTHER DOCTOR'S VISITS THEY REMEMBER THAT ARE NOT MARKED IN THE HEALTH BOOKLET.

HOMEO

For [ELFE child], do you regularly consult a doctor practicing homeopathic medicine?

- 1 Yes
- 2 No

d. Visits with specialists

"I am now going to read out a list of healthcare professionals. Can you tell me if [ELFE child] has seen any such professionals since [date of last interview]?"

DENTISTE

Dentist

- 1 Yes
- 2 No

ORL

Ear, nose and throat specialist

- 1 Yes
- 2 No

PPSY

Child psychiatrist

- 1 Yes
- 2 No

ALLERG

Allergist

- 1 Yes
- 2 No

KINE

Physiotherapist

- 1 Yes
- 2 No

OSTH

Osteopath

- 1 Yes
- 2 No

PSYM

Psychomotor therapist

- 1 Yes
- 2 No

PSY

Psychologist

- 1 Yes
- 2 No

PUER

Paediatric nurse

- 1 Yes
- 2 No

PROAUTR

Other professional(s)

- 1 Yes
- 2 No

PROAUC

We haven't seen a professional

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

Which professional?

If PROAUTR=1

ORTHO

Orthopaedic surgeon

- 1 Yes
- 2 No

If ORTHO=1

ORTHOP *(not available as empty)*

For what reasons did you see the orthopaedic surgeon?

CHIRU

A surgeon other than an orthopaedic surgeon

- 1 Yes
- 2 No

If CHIRU=1

CHIRUP

For what reasons did you see this surgeon?

DERM

Dermatologist

- 1 Yes
- 2 No

PNEUMO

Pulmonologist

- 1 Yes
- 2 No

GASTRO

Gastroenterologist

- 1 Yes
- 2 No

ENDOCRINO

Endocrinologist

- 1 Yes
- 2 No

CARDIO

Cardiologist

- 1 Yes
- 2 No

OPHTAL

Ophthalmologist

- 1 Yes
- 2 No

INFI

Nurse

- 1 Yes
- 2 No

ORTHF

Orthophonist

- 1 Yes
- 2 No

ORTHP

Orthoptist

- 1 Yes
- 2 No

PROAUTRP

Other

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

If PROAUTRP=1

***PROAUTRPP**

Specify which other professionals

RELATM

Regarding the people involved in the medical care of the child , how would you describe the relationship you have with them?

- 1 Friendly
- 2 Courteous
- 3 Strictly professional
- 4 Indifferent
- 5 Sometimes tense
- 7 You don't have a relationship with them
- 8 [It depends a lot on the people]

Since XX month and XX year (date of last questionnaire) (since 1 year), has your family benefited from:

AIDPUER

The help of a paediatric nurse or midwife from a mother-and-infant protection centre

- 1 Yes
- 2 No

AIDTR

The help of a family worker

- 1 Yes
- 2 No

AIDASS

The support of a social assistant

- 1 Yes
- 2 No

If AIDPUER=1 or AIDTR=1 or AIDASS=1

If not, go to CONSURG

FQPRO

How often have you met with this/these professional/s?

- 1 More than once a week
- 2 Once a week
- 2 2 to 3 times a week
- 4 Once a month at most

AEMOD

Is [ELFE child] supported as part of non-institutional educational action as decided on by a juvenile judge or educational assistance at home decided on by the child welfare service?

- 1 Yes, non-institutional educational action (decided on by a juvenile judge)
- 2 Yes, educational assistance at home (decided on by the child welfare service)
- 3 No

e. Emergency consultations

CONSURG

Since [date of last interview], has your child seen an emergency doctor at a hospital (or clinic) without being admitted?

- 1 Yes
- 2 No => SOS
- 9 Doesn't know => SOS

INT: CONCERNS VISITS SINCE LEAVING THE MATERNITY WARD

CONSURGP

How many times?

|_|_| 1 to 99 (+ DK=99 + NA)

INT: FROM THE EARLIEST TO THE MOST RECENT. IF MORE THAN 10 EMERGENCY VISITS, DESCRIBE THE 10 MOST RECENT STARTING WITH THE EARLIEST.

For each emergency visit

If CONSURGP>1

"We are going to talk about these emergency visits from the earliest to the most recent"

TRAUCRAN(1à10)

Was it because of cranial trauma, i.e. a knock or fall on the head?

- 1 Yes
- 2 No => MOTCONS(1à10)(1à2)

If TRAUCRAN(1à10)=1

What was the date of the accident?

***DATACJ(1à10)** (suffixes 3 to 10 not available as empty)

Day

|_|_|
(1 to 31) (NA=88, DSK=99)

***DATACM(1à10)** (suffixes 3 to 10 not available as empty)

Month

|_|_|
(1 to 12) (NA=88, DSK=99)

DATACA(1à10) (suffixes 3 to 10 not available as empty)

Year

|_|_|_|_|

(2011 to 2013) (NA=8888, DK=9999)

PERTCON(1à10) *(suffixes 3 to 10 not available as empty)*

Did the trauma result in loss of consciousness?

- 1 Yes
- 2 No ⇨ TYPACC(1à10)

INT: IF THE PARENT IS NOT SURE IF THERE WAS LOSS OF CONSCIOUSNESS, ENTER “NO”

PERTCONP(1à10) *(not available as empty)*

How long did the loss of consciousness last?

- 1 Less than 5 minutes
- 2 5 to 20 minutes
- 3 More than 20 minutes

TYPACC(1à10) *(suffixes 3 to 10 not available as empty)*

Was it due to:

- 1 A road accident (as passenger or pedestrian)
- 2 Another type of accident

If TRAUCRAN(1à10)=2

MOTCONS(1à10)(1à2) *(suffixes 11, 21, 31, 41, 51, 61, 71, 81, 91, 101 not available as empty)*

What was the main reason for the emergency visit?

- 1 Cough
- 2 Respiratory problem
- 3 Skin problem
- 4 Diarrhoea, vomiting, dehydration
- 5 Suspected urinary infection, kidney infection
- 6 Faintness, dizziness
- 7 Convulsions
- 8 Fever
- 9 Earache
- 10 Stomach pains
- 11 Ingestion of medicine
- 12 Ingestion of cleaning products
- 13 Burns
- 14 Wound
- 15 Other trauma
- 16 Limping
- 17 Headaches
- 18 Crying for no reason
- 19 Other

INT: DO NOT LIST. MAXIMUM 2 REASONS PER VISIT

If MOTCONS(1à10)(1à2)=19

***MOTCONSP(1à10)** *(suffixes 7 to 9 not available as empty)*

Specify

SOS

Has he/she (also) seen another emergency doctor?

- 1 Yes
- 2 No
- 9 Doesn't know

f. Hospital visits

“We are now going to talk about hospital visits”

HOSP

Has [ELFE child] been hospitalized for surgery or any other reason since MONTH YEAR [date of last interview]?

- 1 Yes
- 2 No => SCAN
- 9 Doesn't know

INT:

- PARENTS' WORDS OR PAGES 84-85 OF HEALTH BOOKLET.
- NON-OVERNIGHT ADMISSIONS ARE ALSO INCLUDED (THE CHILD SPENDS ONLY A DAY AT THE HOSPITAL, ON APPOINTMENT, WHICH IS DIFFERENT FROM NON-OVERNIGHT EMERGENCY VISITS)

If HOSP=1

NBHOSP

How many times in all has he/she been hospitalized?

|_|_|

1 to 99 + DK=99 + refuses

INT: REPEAT FROM **HOSPJR_(1à10)** TO **ETATHPACC(1à10)** AS MANY TIMES AS THERE ARE HOSPITALIZATIONS AND PROVIDE FOR 10 HOSPITALIZATIONS

What was the date of the hospital admission?

If NBHOSP=1

“We are now going to talk about this hospital visit”

If NBHOSP>1

“We are going to detail each of these hospital visits starting with the earliest”

***HOSPJ(1à10)** *(suffixes 3 to 10 not available as empty)*

What was the date of the hospital admission? (Day of entry)

1 to 31 + DK=99

***HOSPM(1à10)** *(suffixes 3 to 10 not available as empty)*

What was the date of the hospital admission? (The month)

1 to 12 + DK=99

HOSPA(1à10) *(suffixes 3 to 10 not available as empty)*

What was the date of the hospital admission? (The year)

2011 to 2013 + DK=9999

HOSPJR(1à10) *(suffixes 3 to 10 not available as empty)*

Was it a non-overnight visit?

- 1 Yes

2 No

HOSPACC(1à10) (*suffixes 3 to 10 not available as empty*)

Was the hospitalization related to an accident (fall, intoxication, burn, fingers trapped, near-drowning, insect bite, etc.)?

1 Yes

2 No ⇨ CHIR(1à10)

INT: IT MAY BE AN EARLIER ACCIDENT THAT LEADS TO FURTHER HOSPITAL VISITS

If HOSPACC(1à10)=1

TYPACCC(1à10) (*suffixes 2 to 10 not available as empty*)

Was it a road accident?

1 Yes ⇨ ACC1J(1à10)

2 No

LIEUACC(1à10) (*suffixes 2 to 10 not available as empty*)

Where did the accident happen?

1 Inside the house

2 Outside the house: garden, courtyard, garage, other outbuilding

3 Where the child is minded or on the way

4 At a sport or leisure venue (swimming pool, toboggan run, etc.)

5 Outside: in a public garden, shop, pavement, museum

6 Outside in the countryside: campsite, forest, beach, sea, lake, etc.

What was the date of the accident?

***ACC1J(1à10)** (*suffixes 2 to 10 not available as empty*)

Day

INT: THE DAY

(1 to 31) + DK=99

***ACC1M(1à10)** (*suffixes 2 to 10 not available as empty*)

Month

INT: THE MONTH

(1 to 12) + DK=99

ACC1A(1à10) (*suffixes 2 to 10 not available as empty*)

Year

INT: THE YEAR

(2011 to 2013) + DK=9999

If TYPACCC(1à10)=2

ACC1TYP(1à10) (*suffixes 2 to 10 not available as empty*)

What type of accident?

1 He/she fell

2 He/she had a knock

3 He/she was burned

4 He/she was cut, stung, bitten

5 He/she suffered from an intoxication (by ingestion, inhalation or other)

6 He/she choked or nearly drowned

7 Other

INT: LIST

If ACC1TYP(1à10)=7

***ACC1TYPP(1à10)** *(not available as empty)*

Specify

If HOSP=1 AND HOSPACC(1à10)=1

What was the damage?

ACC1LES1(1à10)

Wound, cut

- 1 Yes
- 2 No

ACC1LES2(1à10) *(not available as empty)*

Burn

- 1 Yes
- 2 No

ACC1LES3(1à10) *(not available as empty)*

Fracture

- 1 Yes
- 2 No

ACC1LES4(1à10) *(not available as empty)*

Cranial trauma

- 1 Yes
- 2 No

ACC1LES5(1à10) *(not available as empty)*

Sprain, dislocation

- 1 Yes
- 2 No

ACC1LES6(1à10) *(not available as empty)*

Other

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If ACC1LES6(1à10)=1

***ACC1LESP(1à10)** *(not available as empty)*

Specify

If HOSP=1 AND HOSPACC(1à10)=1

What parts of the body were damaged?

ACC1PART1(1à10) *(not available as empty)*

Head, neck, face

- 1 Yes
- 2 No

ACC1PART2(1à10) *(not available as empty)*

Shoulder, arm

- 1 Yes
- 2 No

ACC1PART3(1à10) *(not available as empty)*

Hand

- 1 Yes
- 2 No

ACC1PART4(1à10) *(not available as empty)*

Knee, leg, foot

- 1 Yes
- 2 No

ACC1PART5(1à10) *(not available as empty)*

Other

- 1 Yes
- 2 No

If ACC1PART5(1à10)=1

***ACC1PARTP(1à10)** *(suffixes 2 to 10 not available as empty)*

Specify

ACC1PC(1à10) *(suffixes 2 to 10 not available as empty)*

Did [ELFE child] lose consciousness after the accident?

- 1 Yes
- 2 No

If ACC1PC(1à10)=1

PERTCOND(1à10) *(not available as empty)*

How long did the loss of consciousness last?

- 1 Less than 5 minutes
- 2 5 to 20 minutes
- 3 More than 20 minutes

CHIR(1à10) *(suffixes 3 to 10 not available as empty)*

Was the child operated on in hospital?

- 1 Yes

2 No => MOTHOSPJ1(1à10)

If CHIR(1à10)=1

What type of surgery?

TYPCHIR1(1à10) *(suffixes 2 to 10 not available as empty)*

Adenoidectomy

1 Yes

2 No

TYPCHIR2(1à10) *(suffixes 2 to 10 not available as empty)*

Insertion of grommets, ear aerator (often linked to adenoidectomy)

1 Yes

2 No

TYPCHIR3(1à10) *(suffixes 2 to 10 not available as empty)*

Removal of beauty spot

1 Yes

2 No

TYPCHIR4(1à10) *(suffixes 2 to 10 not available as empty)*

Removal of tonsils (tonsillectomy)

1 Yes

2 No

TYPCHIR5(1à10) *(suffixes 2 to 10 not available as empty)*

Inguinal hernia

1 Yes

2 No

TYPCHIR6(1à10) *(suffixes 2 to 10 not available as empty)*

Lowering of the testicles (ectopic testis)

1 Yes

2 No

TYPCHIR7(1à10) *(suffixes 2 to 10 not available as empty)*

Circumcision

1 Yes

2 No

TYPCHIR8(1à10) *(suffixes 2 to 10 not available as empty)*

Appendectomy

1 Yes

2 No

TYPCHIR9(1à10) *(suffixes 2 to 10 not available as empty)*

Fracture reduction

- 1 Yes
- 2 No

TYPCHIR10(1à10) *(suffixes 2 to 10 not available as empty)*

Other

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE. SEVERAL TYPES OF SURGERY POSSIBLE DURING SAME OPERATION

If TYPCHIR10(1à10)=1

***TYPCHIRP(1à10)** *(suffixes 2 to 10 not available as empty)*

Specify

If HOSPJR(1à10)=1 AND HOSPACC(1à10)=2 AND CHIR(1à10)=2

What was/were the reason/s for the hospital visits?

MOTHOSPJ1(1à10) *(suffixes 2 to 10 not available as empty)*

Asthma check-up

- 1 Yes
- 2 No

MOTHOSPJ2(1à10) *(suffixes 2 to 10 not available as empty)*

Allergy check-up or reintroduction of medicine or food

- 1 Yes
- 2 No

MOTHOSPJ3(1à10) *(suffixes 2 to 10 not available as empty)*

Check-up of insufficient height or weight increase

- 1 Yes
- 2 No

MOTHOSPJ4(1à10) *(suffixes 2 to 10 not available as empty)*

Other endocrine check-up (hairiness, puberty, overweight)

- 1 Yes
- 2 No

MOTHOSPJ5(1à10) *(suffixes 2 to 10 not available as empty)*

Check-up of psychomotor retardation (or development)

- 1 Yes
- 2 No

MOTHOSPJ6(1à10) *(suffixes 2 to 10 not available as empty)*

Care for a chronic illness (transfusion for sickle-cell anaemia, chemotherapy for cancer, immunoglobulin perfusion for idiopathic thrombocytopenic purpura, etc.)

- 1 Yes
- 2 No

MOTHOSPJ7(1à10) *(suffixes 2 to 10 not available as empty)*

Annual check-up of chronic pathology (GH, insulin treatment, sickle-cell anaemia, etc.)

1 Yes

2 No

MOTHOSPJ8(1à10) *(suffixes 2 to 10 not available as empty)*

Other

1 Yes

2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

If HOSPJR(1à10)=2 AND HOSPACC(1à10)=2 AND CHIR(1à10)=2

What was/were the reason/s for this hospital visit?

MOTHOSPN1(1à10) *(suffixes 3 to 10 not available as empty)*

Asthma attack

1 Yes

2 No

MOTHOSPN2(1à10) *(suffixes 3 to 10 not available as empty)*

Bronchiolitis

1 Yes

2 No

MOTHOSPN3(1à10) *(suffixes 3 to 10 not available as empty)*

Bronchitis

1 Yes

2 No

MOTHOSPN4(1à10) *(suffixes 3 to 10 not available as empty)*

Pneumopathy

1 Yes

2 No

MOTHOSPN5(1à10) *(suffixes 3 to 10 not available as empty)*

Gastroenteritis or dehydration

1 Yes

2 No

MOTHOSPN6(1à10) *(suffixes 3 to 10 not available as empty)*

Urinary infection, kidney infection

1 Yes

2 No

MOTHOSPN7(1à10) *(suffixes 3 to 10 not available as empty)*

Faintness, dizziness

1 Yes

2 No

MOTHOSPN8(1à10) *(suffixes 3 to 10 not available as empty)*

Convulsions

1 Yes

2 No

MOTHOSPN9(1à10) *(suffixes 3 to 10 not available as empty)*

Meningitis

1 Yes

2 No

MOTHOSPN10(1à10) *(suffixes 3 to 10 not available as empty)*

Fever

1 Yes

2 No

MOTHOSPN11(1à10) *(suffixes 3 to 10 not available as empty)*

Ear/nose/throat infection

1 Yes

2 No

MOTHOSPN12(1à10) *(suffixes 3 to 10 not available as empty)*

Skin disease

1 Yes

2 No

MOTHOSPN13(1à10) *(suffixes 3 to 10 not available as empty)*

Other reason

1 Yes

2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

If MOTHOSPN11(1à10)=1

***MOTHOSPN1P(1à10)** *(not available as empty)*

Specify

If MOTHOSPN13(1à10)=1

***MOTHOSPN2P(1à10)** *(suffixes 2 to 10 not available as empty)*

Specify

NB: Change. Before: "If MOT1HOSPN13=1."

If HOSPJR(1à10)=2

HOSPREA(1à10) *(suffixes 3 to 10 not available as empty)*

During the hospitalization, was [ELFE child] in an intensive care unit?

- 1 Yes
- 2 No

ETATO(1à10) (*suffixes 3 to 10 not available as empty*)

Following the hospitalization, today:

- 1 Everything is back to normal (everything is OK)
- 2 Your child's health has improved but remains fragile (things are better)
- 3 His/her state of health is unchanged (the same)
- 4 His/her state of health has deteriorated (it has got worse)

g. Physical consequences/disabilities

If HOSPACC(1à10)=1 AND ETATO(1à10)=(2,3,4)

ETATS(1à10) (*not available as empty*)

Does [ELFE child] suffer from any physical consequences of his/her health problems?

- 1 Yes
- 2 No => SCAN
- 9 DK => SCAN

If ETATS(1à10)=1

***ETATSP(1à10)** (*not available as empty*)

Which?

If ETATS(1à10)=1

ETATH(1à10) (*not available as empty*)

Have these consequences led to a disability?

- 1 Yes
- 2 No

If ETATH(1à10)=1

ETATHPACC(1à10) (*not available as empty*)

Can you tell me how you feel about this disability on a scale of 0 to 10?

|__|__|

INT: FROM 0, MEANING THAT [ELFE CHILD] DOESN'T HAVE A DISABILITY, TO 10, MEANING MAXIMUM DISABILITY. 0 A 10 + DK + REFUSES

If ETATH(1à10)=1

MDPH (*not available as empty*)

Have you contacted the MDPH departmental centre for people with disabilities for one of the health problems you have told us about?

- 1 Yes
- 2 No => SCAN

NB: Change: "(1à10) added".

If MDPH=1

ETATHI (*not available as empty*)

Does [ELFE child] have a disability recognized by the MDPH centre?

- 1 Yes
- 2 No => SCAN

If ETATHI=1

Can you tell us:

ETATHIP *(not available as empty)*

The disability rate:

% LIMITS 1 to 100

***ETATHIPC** *(not available as empty)*

The disability category:

Clearly stated

h. Examinations (scans, MRIs, etc.)

SCAN

Since our last interview in [month/year of last survey made is displayed], has [ELFE child] had any scans done?

Display information collected in last interview, SCAN = 1, NBSCAN, PASCAN1 9, and the date of the interview

- 1 Yes
- 2 No => RADIO
- 9 Doesn't know ⇨ RADIO

INT: CONCERNS SCANS SINCE THE LAST TELEPHONE INTERVIEW.

A SCAN IS A MEDICAL IMAGING TECHNIQUE USING X-RAYS TO PRODUCE 2D OR 3D IMAGES. FREQUENTLY USED IN CHILD MEDICINE. A HEAD SCAN AFTER MAJOR TRAUMA IS IMPORTANT FOR DETECTING A HAEMATOMA.

Of what part of the body?

If SCAN=1

PASCAN1

Entire body

- 1 Yes
- 2 No

PASCAN2

Head

- 1 Yes
- 2 No

PASCAN3

Chest (lung)

- 1 Yes
- 2 No

PASCAN4

Stomach (abdomen)

- 1 Yes
- 2 No

PASCAN5

Pelvis or hips

- 1 Yes
- 2 No

PASCAN6

Limb

- 1 Yes
- 2 No

PASCAN9

Doesn't know

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If PASCAN1=1

NBSCAN1

How many scans of the entire body?

|_|_| 0 to 10 + DK=99/Refuses

If PASCAN2=1

NBSCAN2

How many scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PASCAN3=1

NBSCAN3 *(not available as empty)*

How many scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PASCAN4=1

NBSCAN4

How many scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PASCAN5=1

NBSCAN5

How many scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PASCAN6=1

NBSCAN6

How many scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

RADIO

Since our last interview in [month/year of last survey made is displayed], has [ELFE child] had any x-rays done?

Display information collected in last interview, RADIO=1, NBRADIO, PARAD(1à9), and the date of the interview

1 Yes

2 No ⇨ IRM

9 Doesn't know ⇨ IRM

INT: CONCERNS X-RAYS SINCE LAST TELEPHONE INTERVIEW. WITH CHILDREN, THEY ARE MAINLY USED TO VISUALIZE THE BONES AND JOINTS (PHYSICAL TRAUMA) AND FOR LUNGS (INFECTION, ASTHMA).

Of what part of the body?

If RADIO=1

PARAD1

Entire body

1 Yes

2 No

PARAD2

Head

1 Yes

2 No

PARAD3

Chest (lung)

1 Yes

2 No

PARAD4

Stomach (abdomen)

1 Yes

2 No

PARAD5

Pelvis or hips

1 Yes

2 No

PARAD6

Limb

1 Yes

2 No

PARAD9

Doesn't know

1 Yes

2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If PARAD1=1

NBPARAD1

How many x-rays of the entire body?

|_|_| 0 to 10 + DK=99/Refuses

If PARAD2=1

NBPARAD2

How many x-rays of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARAD3=1

NBPARAD3

How many x-rays of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARAD4=1

NBPARAD4

How many x-rays of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARAD5=1

NBPARAD5

How many x-rays of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARAD6=1

NBPARAD6

How many x-rays of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

INT: IF THE MOTHER HAS A DOUBT ABOUT THE QUESTION, TELL HER THAT IT IS THE NUMBER OF EXAMINATIONS AND NOT THE NUMBER OF IMAGES

Since our last interview in [month/year of last survey made]/since birth, has [ELFE child] had any MRIs done?

If 1 year done

Since our last interview in [month/year of last survey made is displayed], has [ELFE child] had any MRIs done?

If 1 year not done

Since birth, has [ELFE child] had any MRIs done?

IRM

1 Yes

2 No ⇨ SCINTI

9 Doesn't know ⇨ SCINTI

INT: AN MRI IS AN EXAMINATION USING ELECTROMAGNETIC RESONANCE TO PRODUCE A 2D OR 3D IMAGE OF THE ORGANS.

Of what part of the body?

If IRM=1

PARIRM1 *(not available as empty)*

Head

- 1 Yes
- 2 No

PARIRM2 *(not available as empty)*

Other

- 1 Yes
- 2 No

PARIRM9 *(not available as empty)*

Doesn't know

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If PARIRM1=1

NBPARM1 *(not available as empty)*

How many MRIs of this part of the body?

|_| 0 to 10 + DK=99/Refuses

If PARIRM2=1

NBPARM2 *(not available as empty)*

How many MRIs of this part of the body?

|_| 0 to 10 + DK=99/Refuses

SCINTI

Since birth, has [ELFE child] had any gamma scans done?

- 1 Yes
- 2 No
- 9 Doesn't know

INT: GAMMA SCANS: RADIOACTIVE PRODUCTS ARE INTRODUCED INTO THE BODY SERVING TO CLEARLY VISUALIZE CERTAIN PARTS OF THE BODY SUCH AS BONES AND LUNGS.

Of what part of the body?

If SCINTI=1

PARSC1

Skeleton

- 1 Yes
- 2 No

PARSC2

Lungs

- 1 Yes
- 2 No

PARSC3

Thyroid

- 1 Yes
- 2 No

PARSC4

Kidneys, bladder

- 1 Yes
- 2 No

PARSC5

Other

- 1 Yes
- 2 No

PARSC9

Doesn't know

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If PARSC1=1

NBPARSC1 *(not available as empty)*

How many gamma scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARSC2=1

NBPARSC2 *(not available as empty)*

How many gamma scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARSC3=1

NBPARSC3 *(not available as empty)*

How many gamma scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARSC4=1

NBPARSC4

How many gamma scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARSC5=1

NBPARSC5 *(not available as empty)*

How many gamma scans of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

DATESCINTI(1à5) *(suffixes 1, 2, 3 and 5 not available as empty)*

Was it? (for each part of the body)

- 1 Before 1 year old
- 1 After 1 year old

ECHO

Since birth, has [ELFE child] had any ultrasounds done?

- 1 Yes
- 2 No
- 9 Doesn't know

INT: ULTRASOUND EXAMINATIONS ARE MADE BY MOVING A PROBE OVER THE SKIN WITH A GEL.

Of what part of the body?

If ECHO=1

PARECHO1

Stomach

- 1 Yes
- 2 No

PARECHO2

Thyroid

- 1 Yes
- 2 No

PARECHO3

Other

- 1 Yes
- 2 No

PARECHO9

Doesn't know

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If PARECHO1=1

NBPARECHO1

How many ultrasounds of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARECHO2=1

NBPARECHO2 *(not available as empty)*

How many ultrasounds of this part of the body?

|_|_| 0 to 10 + DK=99/Refuses

If PARECHO3=1

NBPARECHO3

How many ultrasounds of this part of the body?

1_1_1 0 to 10 + DK=99/Refuses

CASDEN

Has [ELFE child] ever broken a tooth/teeth by falling, taking a blow, or another means?

1 Yes

2 No

DENTABIM

Does [ELFE child] have any damaged teeth, i.e. decayed or in part destroyed, excluding a fall/blow?

1 Yes

2 No

i. Child illnesses or symptoms

“We are now going to talk about some of [ELFE child’s] illnesses or symptoms”

SYMPRESPI

Has [ELFE child] had a cough, respiratory problem or wheezing episode in the last 12 months?

1 Yes

2 No => NEZMAL

In which months did [ELFE child] have these respiratory symptoms?

If SYMPRESPI=1

RESP1

January

1 Yes

2 No

RESP2

February

1 Yes

2 No

RESP3

March

1 Yes

2 No

RESP4

April

1 Yes

2 No

RESP5

May

1 Yes

2 No

RESP6

June

- 1 Yes
- 2 No

RESP7

July

- 1 Yes
- 2 No

RESP8

August

- 1 Yes
- 2 No

RESP9

September

- 1 Yes
- 2 No

RESP10

October

- 1 Yes
- 2 No

RESP11

November

- 1 Yes
- 2 No

RESP12

December

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

If SYMPRESPI=1

FQTOUX

How often do the cough episodes occur?

- 1 Once a month at most
- 2 More than once a month but less than once a week
- 3 More than once a week
- 4 Never ⇨ SIFFP

If once a month response to RESP and FQTOUX question, go to SIFFP

NB: (Changed at end of wave 1 – respiratory health group)

If SYMPRESPI=1 and FQTOUX=(1, 2, 3) AND SOMME(DE RESP(1à12)=1 and FQTOUX=1)

DURETOUX

On average, the cough episodes have lasted:

- 1 Less than 5 days ⇨ If FQTOUX=(1, 2, 3)
- 2 Between 5 and 10 days ⇨ If FQTOUX=(1, 2)
- 3 More than 10 days ⇨ If FQTOUX=(1, 2)
- 4 Every day or almost ⇨ If FQTOUX=3

If SYMPRESPI=1

DECLTOUX

Is the cough generally triggered by:

- 1 A cold
- 2 Running, getting excited, laughing
- 3 Other things

If DECLTOUX=3

***DECLTOUXP**

Specify

TOUXNJ

Does [ELFE child] cough:

- 1 At night only
- 2 Night and day
- 3 In the day only and never at night

GUERTOUX

Between cough episodes, does [ELFE child] completely recover?

- 1 Yes
- 2 No

SIFFP

Has [ELFE child] had at least one episode of chest wheezing in the last 12 months?

- 1 Yes
- 2 No ⇒ BRONCHI

If SIFFP=1

FQSIFFP

Do these wheezing episodes occur:

- 1 Every day
- 2 More than once a week
- 3 More than once a month but less than once a week
- 4 Once a month at most

DECLSIFP

Are the wheezing episodes generally triggered by:

- 1 A cold
- 2 Running, getting excited, laughing
- 3 Other things

If DECLSIFP=3

***DECLSIFFP**

Specify

TOUSIFF

Does this wheezing always accompany cough episodes?

- 1 Yes
- 2 No

BRONCHI

Has [ELFE child] had bronchiolitis since the age of 12 months?

- 1 Yes
- 2 No

EBRONCHI

Since birth, has [ELFE child] had bronchiolitis at least 3 times?

- 1 Yes
- 2 No

ASTHME

Has [ELFE child] had any asthma attacks in the last 12 months?

- 1 Yes
- 2 No

NEZMAL

According to you; does [ELFE child] often have a stuffed-up nose or runny nose?

- 1 Yes
- 2 No => ECZEMA

In which months did [ELFE child] have these rhinitis episodes?

If NEZMAL=1

NEZ1

January

- 1 Yes
- 2 No

NEZ2

February

- 1 Yes
- 2 No

NEZ3

March

- 1 Yes
- 2 No

NEZ4

April

- 1 Yes

2 No

NEZ5

May

1 Yes

2 No

NEZ6

June

1 Yes

2 No

NEZ7

July

1 Yes

2 No

NEZ8

August

1 Yes

2 No

NEZ9

September

1 Yes

2 No

NEZ10

October

1 Yes

2 No

NEZ11

November

1 Yes

2 No

NEZ12

December

1 Yes

2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

ECZEMA

Has [ELFE child] had any eczema flare-ups in the last 12 months?

- 1 Yes
- 2 No

MEDRESP

Has [ELFE child] been treated at home or at hospital with inhaled medicines to improve his/her breathing, such as Ventoline, Bricanyl, Pulmicort, Flixotide or Becotide, at any moment, in the last 12 months?

- 1 Yes
- 2 No

MEDRESPB

Has [ELFE child] been treated at home or at hospital with orally administered or injected medicines (not inhaled medicines), such as Celestene, Solupred, Cortancyl, Solumedrol, Polaramine or Zyrtec, to improve his/her breathing, at any moment, in the last 12 months?

- 1 Yes
- 2 No

VITD

More broadly speaking, does your child currently take vitamin D (Zymad, Uvesterol, Sterogyl, Zymaduo, Fluosterol) on a daily basis (with a subscription of over 1 month)?

- 1 Yes
- 2 No

INT: CODE "YES" EVEN IF THE PARENT SAYS THEY SOMETIMES FORGET TO GIVE IT TO THEM

If VITD=2

VITDAMP

Has [ELFE child] taken an ampule of vitamin D in the last 6 months (Zymad, Vitamine D3 Bon, Uvedose)?

- 1 Yes
- 2 No

FER

And is [ELFE child] currently taking iron (Fumafer, Ferrostrane, Feromiel) on a daily basis (with a subscription of over 1 month)?

- 1 Yes
- 2 No

AUTMEDC

Is [ELFE child] currently taking any other type of medicine on an ongoing basis?

- 1 Yes
- 2 No ⇒ ANTIBIO

If AUTMEDC=1

FLUOR

Is it fluorine (Zymafluor, Fluorex, Fluor Crinex, Calcifluor, Zymaduo, Fluostero)?

- 1 Yes
- 2 No

ANTISEC

Anti-secretory drugs (Raniplex, Inexium, Mopral)?

- 1 Yes
- 2 No

ANTIAC

Anti-acids (Gaviscon, Polysilane, Maalox)?

- 1 Yes
- 2 No

PROKIN

Prokinetics (Motilium, Vogalene, Primperan)?

- 1 Yes
- 2 No

HOME

Homeopathic treatment?

- 1 Yes
- 2 No

ABCONT

An anti-biotic on an ongoing basis (Penicilline G, Amoxicilline, Clamoxyl, Agram, Hiconcil)?

- 1 Yes
- 2 No

DERMOCOR

Dermocorticoids for eczema (Tridesonit, Locapred, Desonide, Locoïd, Diprosone)?

- 1 Yes
- 2 No

LAXAT

Laxatives (Forlax, Lansoyl)?

- 1 Yes
- 2 No

AUTMEDCP

Other medicines

- 1 Yes
- 2 No

INT: LIST IF NECESSARY. SEVERAL ANSWERS POSSIBLE

IF THE DERMOCORTICOID TREATMENT FOR ECZEMA IS TAKEN ONCE EVERY 2 OR 3 DAYS OR HAS EVEN NOT BEEN TAKEN IN THE MONTH FOR SHORT PERIODS OF TIME (LESS THAN 2 WEEKS), CODE "YES" ALL THE SAME.

PAY CLOSE ATTENTION TO THE NAMES OF THE MEDICINES BETWEEN BRACKETS

If AUTMEDCP=1

***AUTMEDCPP**

Specify

ANTIBIO

“(Besides these ongoing courses of antibiotics), has [ELFE child] taken another course of antibiotics in the last 12 months (Clamoxyl, Hiconcil, Agram, Amoxicilline, Augmentin, Ciblor, Orelox, Penicilline G, Oroken, Bristopen, Bactrim, Rocephine, Josacine, Zythromax, Pediazole, Pyostacine)?”

NB: “(Besides these ongoing courses of antibiotics), has [ELFE child] taken another course of antibiotics in the last 12 months”: changed at stat of Wave 1.

If ABCONT=1

“Besides these ongoing courses of antibiotics, has [ELFE child] taken another course of antibiotics in the last 12 months (Clamoxyl, Hiconcil, Agram, Amoxicilline, Augmentin, Ciblor, Orelox, Penicilline G, Oroken, Bristopen, Bactrim, Rocephine, Josacine, Zythromax, Pediazole, Pyostacine)?”

NB: “If ABCONT=1” and “Besides these ongoing courses of antibiotics, has [ELFE child] taken another course of antibiotics in the last 12 months”: changed at start of Wave 1.

If ABCONT not 1

“Has [ELFE child] taken a course of antibiotics in the last 12 months (Clamoxyl, Hiconcil, Agram, Amoxicilline, Augmentin, Ciblor, Orelox, Penicilline G, Oroken, Bristopen, Bactrim, Rocephine, Josacine, Zythromax, Pediazole, Pyostacine)?”

1 Yes

2 No

NB: “If ABCONT not 1” and “Besides these ongoing courses of antibiotics, has [ELFE child] taken another course of antibiotics in the last 12 months”: changed at start of Wave 1.

If ANTIBIO=1

NBANTIBIO

How many times?

1 Once

2 2 or 3 times

3 More than 3 times

9 DK

If DIAGPB1TYP(1à4) ne 6

OTITE

Since birth, has [ELFE child] had an ear infection at least 3 times?

1 Yes

2 No

TRAUD

Is your child being treated for a hearing problem?

1 Yes

2 No ⇨ REFUSVACC

Ask TRAUDC only to those who did not respond to the ELFE 1 Year survey

If TRAUD=1 and VR_INT1A not 2

TRAUDC *(not available as empty)*

Is it a congenital hearing problem (i.e. present at birth) or an acquired problem (for example, through an illness)?

1 Congenital

2 Acquired

9 DK

At what age was the hearing problem diagnosed?

If TRAUD=1

TRAUDM *(not available as empty)*

The month

|__|__| month

(NA=88, DK=99) min 0 max 30

TRAUDS *(not available as empty)*

Weeks

|__| weeks

(NA=8, DK=9) min 0 max 4

DEGSUR *(not available as empty)*

What is the degree of deafness?

- 1 Slight
- 2 Average
- 3 Severe
- 4 Acute
- 5 Uncertain
- 9 DK

TRAUDO *(not available as empty)*

Does the hearing problem concern one ear or both?

- 1 One ear
- 2 Both
- 9 [DK]

If TRAUD=1 and DEGSUR=(3, 4)

APPAREILAUD *(not available as empty)*

Does [ELFE child] wear a hearing aid?

- 1 Yes
- 2 No

At which establishment(s) is [ELFE child] treated for his/her hearing problem?

If TRAUD=1 and DEGSUR=(3, 4)

SUILIE1 *(not available as empty)*

Private consultation

- 1 Yes
- 2 No

SUILIE2 *(not available as empty)*

Hospital

- 1 Yes
- 2 No

SUILIE3 *(not available as empty)*

Specialized centre for hearing deficiencies (specialist centre for early medico-social action, early family education support service)

- 1 Yes
- 2 No

SUILIE4 *(not available as empty)*

Multi-purpose centre (centre for early medico-social action, healthcare centre for children with multiple handicaps, etc.)

- 1 Yes
- 2 No

SUILIE5 *(not available as empty)*

Other

- 1 Yes
- 2 No

SUILIE6 *(not available as empty)*

No current place of treatment (exclusive item)

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If SUILIE5=1

SUILIEP *(not available as empty)*

Specify

REFUSVACC

For [ELFE child], have you ever refused a vaccination proposed by his/her GP?

- 1 Yes
- 2 No ⇒ VACCHB
- 9 [DK] => VACCHB

INT: ALSO ENTER "YES" IF A DOCTOR HAS ADVISED THE VACCINATION AND ANOTHER DOCTOR HAS ADVISED AGAINST IT.

QUELREFUVAC(1à5) *(suffixes 3 to 5 not available as empty)*

Which one/s?

- 1 Diphtheria, tetanus, polio (DTP, or Infanrix, or Pentavac, or Tetravac)
- 2 Whooping cough (only did DTP or Revaxis)
- 3 Measles (did neither DTP nor Revaxis)
- 4 Hepatitis B (Infanrix HEXA, GenHevac B, HBvax pro, Engerix B, Twinrix)
- 5 Mumps and rubella (only did rubella vaccine: Rouvax)
- 6 Tuberculosis (BCG)
- 7 Meningococcal meningitis C (Meningitec, Neisvac, Meninvact, Menjugate, Menveo)
- 8 Pneumococcus (Prévenar 13)
- 9 Chickenpox (Varilrix, Varivax)

- 10 Diarrhoea, rotavirus (Rotarix, Rotateq)
 - 11 Influenza
 - 12 Hepatitis A (for travel): Havrix 720, Twinrix
 - 13 Yellow fever (for travel): Stamaril
 - 14 Extended pneumococcus in the event of a particular pathology (PNEUMO 23)
 - 15 Typhoid (Typhim)
 - 16 [no other vaccination]
 - 99 [DK]
- INT: DO NOT LIST. 5 ANSWERS POSSIBLE

If QUELREFUVAC1 not (16, 99, ..)

***MOTIFREFUVAC1**

What was the main reason for refusing the vaccine mentioned in QUELREFUVAC1?

If QUELREFUVAC2 not (16, 99, ..)

***MOTIFREFUVAC2** *(not available as empty)*

What was the main reason for refusing the vaccine mentioned in QUELREFUVAC2?

If QUELREFUVAC(1à5)=4 code VACCHB=2, if not ask the question

VACCHB

Has your child been vaccinated against Hepatitis B?

- 1 Yes
- 2 No
- 9 DK

INT: A CHILD IS CONSIDERED TO HAVE BEEN VACCINATED AGAINST HEPATITIS B ONCE ONE INJECTION HAS BEEN MADE (VACCINATION INITIATED). IN THE HEALTH BOOKLET, THIS MAY BE: INFANRIX HEXA (P 90-91) OR HEXA/GENHEVAC B/ENGERIX B10/HBVAXPRO 5/TWINRIX (P 92).

If QUELREFUVAC(1à5)=7 code VACCMENINGO=1, if not ask the question

VACCMENINGO

Has your doctor advised the vaccination against meningococcal meningitis C?

- 1 Yes
- 2 No
- 9 DK

INT: VACCINE PROTECTING AGAINST MENINGITIS

COUVEUSE

Has [ELFE child] ever been placed in an incubator?

- 1 Yes
- 2 No

If COUVEUSE=1

COUVEUSEN

For how long?

COUVEUSEP

For how long? (unit)

- 1 [Period in hours]
- 2 [Period in days]
- 3 [Period in weeks]

17. The child's play activities

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 3, 4, 5, 6, 7, 8)

Questionnaires concerned:

- "Referent Father"
- "Cohabiting Father" ((SITUAFAMM=1 or (SITUAFAMM=3 with a LIENTYP=7 SEXE=2)) ask the non-greyed-out questions
- "Non-Cohabiting Father"

If the cohabiting father is not participating, return later to the questionnaire with the mother, except for questions already documented.

Ask this module twice for twins except CADOCHER

a. Games and leisure activities

"We are now going to talk about [ELFE child's] games and leisure activities."

Random question order

When [ELFE child] plays, how often does he/she imitate the following situations?

JOCBB

Taking care of a baby

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JCUIS

Cooking

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JCOND

Driving a car or a machine

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JBEAU

Dressing up

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

INT: AS A SUB-QUESTION ASK 1 EVERY DAY / 2 OFTEN BUT NOT EVERY DAY / 3 OCCASIONALLY / 4 NEVER

Whether at home or in another place how often does [ELFE child]:

Random question order

JBALLE

Play with a ball?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JDESS

Draw or paint?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JEMPIL

Play stacking games, for example with cubes, or wooden towers?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JEMBOIT

Play games involving fitting things together, such as lego, duplo, clipo?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JPUZZLE

Do jigsaw puzzles?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JPELUCH

Play with soft toys?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JPOUP

Play with dolls or baby dolls?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JVOIT

Play with toy cars?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JBAIN

Play in the bathtub or water games?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JPROM

Go on walks with you?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

JACTP

Play physical games (ball, pool, etc.) with you?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

INT: AS A SUB-QUESTION ASK 1 EVERY DAY / 2 OFTEN BUT NOT EVERY DAY / 3 OCCASIONALLY / 4 NEVER

JORDI

Does [ELFE child] play on a computer or tablet?

- 1 Every day or almost
- 2 Once or twice a week
- 3 Once or twice a month
- 4 Never or hardly ever

JSMART

Does [ELFE child] play with a smartphone?

- 1 Every day or almost
- 2 Once or twice a week
- 3 Once or twice a month
- 4 Never or hardly ever

INT: A SMARTPHONE IS A MOBILE PHONE WITH A TOUCHSCREEN OR KEYPAD. IT CAN BE USED FOR: BROWSING THE WEB, CHECKING EMAILS, GPS, DIGITAL PHOTOGRAPHY. EXAMPLES: IPHONE, ANDROID, GALAXY, BLACKBERRY, SOME NOKIA.

JVIDEO

Does [ELFE child] play video games (PSP, DS, etc.)?

- 1 Every day
- 2 Often but not every day
- 3 Occasionally
- 4 Never

If JVIDEO=(1, 2, 3)

VIDEOA

Since what age?

|__|__| months

(9<=age<=30; + DK=99)

INT: 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

If JVIDEO=(1, 2, 3)

VIDEOTH

Hours

|__|__| hours

(Limits <25h, <61, + DK =99)

If JVIDEO=(1, 2, 3)

VIDEOTM

Minutes

|__|__| minutes

(Limits <25h, <61, + DK =99)

Does [ELFE child] play with: (To be filtered with TCM and inter-generational relationships)

JPARREP

You?

- 1 Every day
- 2 Often
- 3 Occasionally

- 4 Never
- 5 [Not applicable]

JPARAUT

His/her mother or your partner

- 1 Every day
- 2 Often
- 3 Occasionally
- 4 Never
- 5 [Not applicable]

JFRERE

His/her brother(s) or half-brother(s) (if he/she has any)?

- 1 Every day
- 2 Often
- 3 Occasionally
- 4 Never
- 5 [Not applicable]

JAUTG

Others/boys (depending on whether he/she has brothers or not)

- 1 Every day
- 2 Often
- 3 Occasionally
- 4 Never
- 5 [Not applicable]

JSOEUR

His/her sister(s) or half-sister(s) (if he/she has any)?

- 1 Every day
- 2 Often
- 3 Occasionally
- 4 Never
- 5 [Not applicable]

JAUTF

Others/girls (depending on whether he/she has sisters or not)

- 1 Every day
- 2 Often
- 3 Occasionally
- 4 Never
- 5 [Not applicable]

INT: AS SUB-QUESTIONS, ASK: 1 EVERY DAY / 2 OFTEN / 3 OCCASIONALLY / 4 NEVER. IF NOT APPLICABLE, CODE NA

b. Other leisure activities

If A02x_TYPQPECF2a in (3, 4, 5) and SITUAFAMP=1

TELE

Does [ELFE child] watch television:

- 1 Every day or almost
- 2 Once or twice a week
- 3 Once or twice a month
- 4 Never or hardly ever

If TELE=(1, 2, 3)

TELEA

Since what age?

|__|__| months

(min 1 max 30 months; + DK=99 ; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

“On the weekend, how much time in all does he/she spend watching television?”

If TELE=(1, 2)

TELEWEH

Hours

|__|__| hours

(Limits <49h, <61, + DK =99)

If TELE=(1, 2)

TELEWEM

Minutes

|__|__| minutes

(Limits <49h, <61, + DK =99)

“On a week day, how much time on average does he/she spend watching television?”

If TELE=(1, 2)

TELESH

Hours

|__|__| hours

(Limits <25h, <61, + DK =99)

If TELE=(1, 2)

TELESM

Minutes

|__|__| minutes

(Limits <25h, <61, + DK =99)

PISCI

Does he/she go to the pool?

- 1 Never ⇒ AIDLOIS
- 2 Occasionally
- 3 Often
- 4 [Pool at home] ⇒ AIDLOIS

INT: DO NOT LIST THE LAST WORDING

How often?

If PISCI=(2, 3)

PISCREGN

Number of times

|__|__| 1 to 99 + DK + NA

PISCREGF

W (per week) M (per month) A (per year)

- 1 [times per week]
- 2 [times per month]
- 3 [times per year]
- 8 [Refuses]
- 9 [Doesn't know]

If PISCI=(2, 3)

PISCACC

Who mainly takes him/her to the pool?

- 1 You
- 2 His/her mother
- 3 Your partner
- 4 A grandmother
- 5 A grandfather
- 6 A sister
- 7 A brother
- 8 Another person
- 9 You go as a family
- 10 It depends

INT: DO NOT LIST

AIDLOIS

Do you benefit from financial aid for the leisure activities or holidays of [ELFE child], for example from a works council, or holiday coupons?

- 1 Yes
- 2 No

CADOCHER(1à4)

I am now going to describe a situation that parents could be confronted with. I will then ask you what you think about it.

Random choice

Situation 1: A ten-year-old boy insistently asks for a birthday present twice as expensive as the birthday present given two months earlier to his brother, also aged ten. To make her happy, the parents finally decide to give her the twice-as-expensive present. In your opinion, the parents' decision is:

Situation 2: A ten-year-old boy insistently asks for a birthday present twice as expensive as the birthday present given two months earlier to his sister, also aged ten. To make her happy, the parents finally decide to give her the twice-as-expensive present. In your opinion, the parents' decision is:

Situation 3: A ten-year-old girl insistently asks for a birthday present twice as expensive as the birthday present given two months earlier to her sister, also aged ten. To make her happy, the parents finally decide to give her the twice-as-expensive present. In your opinion, the parents' decision is:

Situation 4: A ten-year-old girl insistently asks for a birthday present twice as expensive as the birthday present given two months earlier to her brother, also aged ten. To make her happy, the parents finally decide to give her the twice-as-expensive present. In your opinion, the parents' decision is:

- 1 Entirely right
- 2 Somewhat right
- 3 Not really right
- 4 Not at all right
- 9 [Doesn't know]

INT: IF THE PERSON DOESN'T FULLY UNDERSTAND THE QUESTION, TELL THEM IT IS A HYPOTHETICAL SITUATION IN WHICH THE TWO CHILDREN, WITHOUT BEING TWINS, ARE ABOUT THE SAME AGE, I.E. 9, 10 OR 11

c. Interview

If interview done twice:

“We have reached the end of this interview. Would you like to continue now or would you prefer to make an appointment to continue in the coming days?”

(The INTERVIEW variable is displayed and may be changed)

ENTRETIEN2 *(not available as empty)*

- 1 [continue with the questionnaire=> go to part 2 of the questionnaire=> ask questions]
- 2 [make an appointment to administer the rest of the questionnaire at a later date]
- 3 [no, refuses to continue]

If VAGUE=1

NB: Valid only for Wave 1.

18. The father's health

IF A02X_QPEFCOMP2a=1

Questionnaires concerned:

- Referent Father
- Cohabiting Father
- Non-Cohabiting Father
- Cohabiting Father of Placed Child
- Non-Cohabiting Father of Placed Child

If the cohabiting father is not taking part, return to the mother for questions AGTRAVSOIN to GTRAVPERE

a. Work in a hospital environment

AGTRAVSOIN

"In the year preceding the pregnancy of the mother of [ELFE child], did you work in a healthcare environment (hospital, clinic, doctor's office, etc.)?"

- 1 Yes
- 2 No
- 9 DK

INT: IF SEVERAL JOBS DURING PERIOD, TAKE THE ONE HELD AT THE START OF THE MOTHER'S PREGNANCY (PERIOD OF CONCEPTION FOR THE FATHER)

If AGTRAVSOIN=1

AGTRAVSOINP

In which department/unit did you work?

- 1 Operating theatre
- 2 A&E (including paediatric)
- 3 Sterilization
- 4 Intensive care (including paediatric)
- 5 Oncology (including paediatric)
- 6 Haematology (including paediatric)
- 7 Radiology
- 8 Laboratory
- 9 Surgery
- 10 Paediatrics
- 11 Short-stay medical service
- 12 Medium- or long-stay medical service
- 13 Physical and rehabilitation medical service
- 14 Psychiatry
- 15 Private doctor's office
- 16 Work in home hospitalization as for the mother
- 17 Other

INT: IF SEVERAL JOBS DURING PERIOD, TAKE THE ONE HELD AT THE START OF THE MOTHER'S PREGNANCY (PERIOD OF CONCEPTION FOR THE FATHER)

If AGTRAVSOINP=17

***AGTRAVSOINPP**

Specify:

If AGTRAVSOIN=2

***GTRAVPERE**

What is the main activity of the company where you worked at the start of the pregnancy? (Be as precise as possible: supermarket, IT maintenance and repair, healthcare, the transport of equipment or perishable foodstuffs, hotel, etc.).

b. Leisure (physical or sports activity)

"Now let's talk about your life today"

SPORTME

As part of your current leisure pursuits, do you regularly practice a physical activity or sport ("regularly" meaning practically every week)?

1 Yes

2 No

If SPORTME=1

Which activities?

SPORTMEP1

Aerobics, fitness, zumba, etc.?

1 Yes

2 No

SPORTMEP2

Athletics

1 Yes

2 No

SPORTMEP3

Badminton?

1 Yes

2 No

SPORTMEP4

Basketball?

1 Yes

2 No

SPORTMEP5

Boxing?

1 Yes

2 No

SPORTMEP6

Horse riding?

1 Yes

2 No

SPORTMEP7

Cross-country running?

- 1 Yes
- 2 No

SPORTMEP8

Dancing?

- 1 Yes
- 2 No

SPORTMEP9

Climbing?

- 1 Yes
- 2 No

SPORTMEP10

Football?

- 1 Yes
- 2 No

SPORTMEP11

Golf?

- 1 Yes
- 2 No

SPORTMEP12

Gymnastics?

- 1 Yes
- 2 No

SPORTMEP13

Handball?

- 1 Yes
- 2 No

SPORTMEP14

Gardening?

- 1 Yes
- 2 No

SPORTMEP15

Jogging?

- 1 Yes
- 2 No

SPORTMEP16

Karate or judo?

- 1 Yes
- 2 No

SPORTMEP17

Bodybuilding?

- 1 Yes
- 2 No

SPORTMEP18

Swimming?

- 1 Yes
- 2 No

SPORTMEP19

Ice skating?

- 1 Yes
- 2 No

SPORTMEP20

Table tennis?

- 1 Yes
- 2 No

SPORTMEP21

Hiking?

- 1 Yes
- 2 No

SPORTMEP22

Rollerskating, rollerboarding, riding a scooter?

- 1 Yes
- 2 No

SPORTMEP23

Rugby?

- 1 Yes
- 2 No

SPORTMEP24

Squash?

- 1 Yes
- 2 No

SPORTMEP25

Tennis?

- 1 Yes
- 2 No

SPORTMEP26

Cycling?

- 1 Yes
- 2 No

SPORTMEP27

Volleyball?

- 1 Yes
- 2 No

SPORTMEP28

Other 1

- 1 Yes
- 2 No

SPORTMEP29

Other 2

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

If SPORTMEP28=1

***SPORTMEPP1**

Other activity, specify:

If SPORTMEP29=1

***SPORTMEPP2**

Other activity, specify:

If SPORTME=1

DSPORTME

In all, how many hours a week on average?

|__|__|hours

INT: ADD UP TIME OF ALL ACTIVITIES DURING THE WEEK

c. Mental state

“I am now going to ask you a few questions about yourself on the way you have been feeling over the last 30 days.” “How often have you felt:”

(All the wordings must be read out each time the interviewer repeats them when reading the question)

NERV

Nervous

- 1 All the time
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never
- 8 Refuses

DEESP

Desperate

- 1 All the time
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never
- 8 Refuses

AGITE

Agitated or unable to stay still

- 1 All the time
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never
- 8 Refuses

DEPRIM

So depressed that nothing can cheer you up

- 1 All the time
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never
- 8 Refuses

EFFORT

That everything requires an effort

- 1 All the time
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never
- 8 Refuses

RIEN

Good for nothing

- 1 All the time
- 2 Most of the time
- 3 Sometimes
- 4 Rarely
- 5 Never
- 8 Refuses

SENTIM

Are your answers for the last 30 days representative of your usual feelings or is this a special period of time for you?

- 1 Usual feelings
- 2 A special period of time for you

19. Diet

IF A02X_QPEFCOMP2a=1 AND A02X_TYPQPECF2a in (1, 2)

Questionnaire concerned:

- "Referent Father"

"We are now going to talk about what [ELFE child] eats"

If at 1 year TYPLAIT1=1

If 1 year not done (or neither 1 year nor 2 month), ask ALLAIT

If VR_TYPLAIT1=1 or (VR_INT2M=1 and VR_INT1A=1)

ALLAIT

Is [ELFE child] still breastfed by his/her mother, even partly?

- 1 Yes ⇒ LAITCROI
- 2 No

If ALLAIT=2

AGEDEF

Do you know how old was he/she, in months, when he/she stopped breastfeeding definitively?

IN MONTHS |__|__| 2 to 30 (+ DK=99 + NA=88)

INT: 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

LAITCROI

Since [ELFE child] was one, has he/she regularly consumed growing-up milk?

- 1 Yes => TPLAITCR
- 2 No => LAITVACH

If LAITCROI=1

TPLAITCR

For how long?

- 1 Less than 6 months
- 2 6 months or more

LAITVACH

Since [ELFE child] was one, has he/she regularly consumed ordinary cow's milk?

- 1 Yes ⇒ TPSLAITV
- 2 No ⇒ AUTLAIT

If LAITVACH=1

TPSLAITV

For how long?

- 1 Less than 6 months
- 2 6 months or more

What type(s) of milk?

If TPSLAITV=(1, 2)

TYPLAITV1

Whole milk

- 1 Yes
- 2 No

TYPLAITV2

Semi-skimmed

- 1 Yes
- 2 No

TYPLAITV3

Skimmed

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

AUTLAIT

Since [ELFE child] was one, has he/she regularly consumed another type of milk?

- 1 Yes
- 2 No => TYPLAIT

What type(s) of milk?

If AUTLAIT=1

TYPAUTL1

Special preparation for allergic child

- 1 Yes
- 2 No

TYPAUTL2

Soy milk

- 1 Yes
- 2 No

TYPAUTL3

Almond milk

- 1 Yes
- 2 No

TYPAUTL4

Rice milk

- 1 Yes
- 2 No

TYPAUTL5

Goat's milk

- 1 Yes
- 2 No

TYPAUTL6

Other plant-based drinks

- 1 Yes
- 2 No

TYPAUTL7

Other animal milk...

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

If AUTLAIT=1

TPSAUTL

For how long?

- 1 Less than 6 months
- 2 6 months or more

TYPLAIT

Currently, what type of milk does [ELFE child] mainly drink?

- 1 Growing-up milk
- 2 Whole cow's milk
- 3 Skimmed and/or semi-skimmed cow's milk
- 4 Other
- 5 Doesn't drink milk
- 6 Mother's milk

If TYPLAIT=(1, 2, 3, 4) or TYPLAIT=6 and ALLAIT=2

QTLAIT

On average, how many full bottles or large bowls of milk (250 ml) does [ELFE child] drink a day? (all milks combined)

- 1 Less than a full bottle or large bowl
- 2 Between 1 and 2 full bottles or large bowls
- 3 More than 2 full bottles or large bowls

ROBEAU

Does [ELFE child] drink tap water, including in the preparation of his/her bottle(s)?

- 1 Yes
- 2 No

If ROBEAU=1

AGROBEAU

How old was he/she when he/she started drinking tap water? (in months)

(min 1 max 30 months; + DK=99+NA=88; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

“I am going to read out a list of food. For each one, can you tell me how often [ELFE child] eats or drinks them at the moment? This includes meals at home and out of the home.”

At the moment, he/she eats or drinks...

FRUITJ

Fruit juice

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

NB: Change (“FRUITJ”) starting from Wave 2.

CEREAL

Breakfast cereals, Blédine, in a bowl or bottle

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

FROM

Cheese

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

PRODLAIT

Other dairy products: yogurts, petits suisses

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

PATES

Pasta, rice, semolina, boiled or mashed potatoes

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month

- 5 Less often
- 6 Never

LEGCUIT

Cooked vegetables including soup, excluding potatoes

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

VIANDE

Meat, ham

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

FRUITF

Fresh fruit

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

NB: Change ("FRUITF") starting from Wave 2.

COMPOT

Stewed fruit

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

PAIN

Bread

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

VIENN

Pastries, biscuits, cakes

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

INT: ASK AS SUB-QUESTIONS: 1 SEVERAL TIMES A DAY / 2 ONCE A DAY / 3 SEVERAL TIMES A WEEK / 4 SEVERAL TIMES A MONTH / 5 LESS OFTEN / 6 NEVER

At the moment, he/she eats or drinks...

BOISSUCR

Drinks containing sugar, including soda, syrups

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

FRITES

Chips, fried potatoes

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

QUICHE

Quiches, pizzas, savoury tarts

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

CRUDIT

Raw vegetables, salad

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

CHARCUT

Cold cuts excluding ham

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

FISH

Fish

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

OEUF

Eggs on their own or as a main ingredient of a meal, for example an omelette...

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

BONBON

Sweets, chocolate (Nutella, Kinder, etc.)

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

CHIPS

Crisps, appetizer biscuits

- 1 Several times a day
- 2 Once a day
- 3 Several times a week
- 4 Several times a month
- 5 Less often
- 6 Never

INT: ASK AS SUB-QUESTIONS: 1 SEVERAL TIMES A DAY / 2 ONCE A DAY / 3 SEVERAL TIMES A WEEK / 4 SEVERAL TIMES A MONTH / 5 LESS OFTEN / 6 NEVER

TELREP

Is the television generally on during [ELFE child's] meals?

- 1 Yes
- 2 No

For each of the following sentences, tell me if it corresponds to [ELFE child]

COMPAL1

Your child is happy about sitting down at the table

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL2

Your child likes only a limited range of foods

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL3

Your child doesn't eat much (regardless of what is on the plate, good or bad)

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL4

Your child makes a fuss when confronted with new foods

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL5

Your child has a good appetite

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL6

Your child eats a wide variety of vegetables

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL7

Your child rejects new foods merely on sight

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

COMPAL8

Your child enjoys eating

- 1 Very false
- 2 False
- 3 Somewhat true
- 4 True
- 5 Very true

INT: ASK AS SUB-QUESTIONS: 1 VERY FALSE / 2 FALSE / 3 SOMEWHAT TRUE / 4 TRUE / 5 VERY TRUE

SUCRE

When you want to give [ELFE child] a treat or reward him/her, do you give them sweets?

- 1 Yes, often
- 2 Yes, sometimes
- 3 Yes, but rarely
- 4 No, never

ALLERGSUP

On the advice of a doctor, have you stopped giving your child certain foods owing to a food allergy?

- 1 Yes
- 2 No

Which allergies? Allergic to:

If ALLERGSUP=1

ALLERGQ1

Milk proteins

- 1 Yes
- 2 No

ALLERGQ2

Gluten

- 1 Yes
- 2 No

ALLERGQ3

Peanuts

- 1 Yes
- 2 No

ALLERGQ4

Fish

- 1 Yes
- 2 No

ALLERGQ5

Eggs

- 1 Yes
- 2 No

ALLERGQ6

Exotic fruit

- 1 Yes
- 2 No

ALLERGQ7

Soy

- 1 Yes
- 2 No

ALLERGQ8

Other

- 1 Yes
- 2 No

If ALLERGQ8=1

***ALLERGQP**

Specify

INT: LIST. SEVERAL ANSWERS POSSIBLE

20. The parents' cultural practices

IF A02X_QPECFCOMP2a=1

Questionnaires concerned:

- Referent Father
- Cohabiting Father
- Non-Cohabiting Father
- Cohabiting Father of Placed Child
- Non-Cohabiting Father of Placed Child

"We are now going to talk about your leisure activities"

"I am going to read out a list of outings. Tell me those you have done in the last 12 months, with or without [ELFE child]."

In the last 12 months you have...

CINE

... been to the cinema

- 1 Yes
- 2 No

MATCH

... been to see a match, sports competition

- 1 Yes
- 2 No

DISCO

... been to a night club, disco

- 1 Yes
- 2 No

CONC

... been to a concert

- 1 Yes
- 2 No

SPEC

... been to see a show (dance, theatre)

- 1 Yes
- 2 No

BIBL

... been to a library, media library

- 1 Yes
- 2 No

MUSEE

... been to a museum, an exhibition, visited a historical monument

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

"I am going to read out a list of activities. Tell me those you have done in the last 12 months."

In the last 12 months, how often have you:

BRICO

Done DIY or gardening activities

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

BROD

Embroidered, knitted or sewn

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

DESSIN

Drawn, sung, danced, played a musical instrument, etc.

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

DSPORT

Practiced a sport, jogged

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

PROMENA

Gone on a hike or a walk

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

CHASSE

Been hunting or fishing

- 1 Every day or almost
- 2 1 to 2 times a week

- 3 1 to 2 times a month
- 4 Never or hardly ever

MOMTV

Have you watched TV shows or programmes, regardless of the medium, including on the web, and including recorded shows and programmes

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

INT: ASK AS SUB-QUESTIONS: 1 EVERY DAY OR ALMOST / 2 1 TO 2 TIMES A WEEK / 3 1 TO 2 TIMES A MONTH / 4 NEVER OR HARDLY EVER

“On the weekend, how much time in all do you spend watching TV shows or programmes, regardless of the medium, including on the web, and including recorded shows and programmes?”

If MOMTV=(2)

TPSTVWEH

Hours

|__|__| hours

(Limits <49h, <61, + DK =99)

If MOMTV=(2)

TPSTVWEM

Minutes

|__|__| minutes

(Limits <49h, <61, + DK =99)

“On weekdays, how much time on average do you spend watching TV shows or programmes, regardless of the medium, including on the web, and including recorded shows and programmes?”

If MOMTV=(2)

TPSTVSEMH

Hours

|__|__| hours

(Limits <25h, <61, + DK =99)

If MOMTV=(2)

TPSTVSEMM

Minutes

|__|__| minutes

(Limits <25h, <61, + DK =99)

INT: WE ARE TALKING ABOUT A TYPICAL WEEKDAY. IF THE TIME SPENT WATCHING TELEVISION VARIES FROM DAY TO DAY, HELP THE PERSON CALCULATE THE AVERAGE TIME PER DAY

Again in the last 12 months, how often:

MOMORDI

Have you used a computer or tablet or smartphone for leisure purposes?

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

INT: ASK AS SUB-QUESTIONS: 1 EVERY DAY OR ALMOST / 2 1 TO 2 TIMES A WEEK / 3 1 TO 2 TIMES A MONTH / 4 NEVER OR HARDLY EVER

“On the weekend, how much time in all do you spend using a computer, tablet or smartphone for leisure purposes?” (In hours)

If MOMORDI=(1, 2)

TPSORDIWEH

|_|_| hours

(Limits <49h, <61, + DK =99)

“On the weekend, how much time in all do you spend using a computer, tablet or smartphone for leisure purposes?” (In minutes)

If MOMORDI=(1, 2)

TPSORDIWEM

|_|_| minutes

(Limits <49h, <61, + DK =99)

“On weekdays, how much time do you spend using a computer, tablet or smartphone for leisure purposes?”

If MOMORDI=(1, 2)

TPSORDISEMH

Hours

|_|_| hours

(Limits <25h, <61, + DK =99)

If MOMORDI=(1, 2)

TPSORDISEMM

Minutes

|_|_| minutes

(Limits <25h, <61, + DK =99)

In the last 12 months, how often have you:

RADI

Listened to radio shows or programmes, regardless of the medium, including on the web

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

MUSI

Listened to music regardless of the medium, CD, DVD, web music sites, MP3

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

VIDEO

Played video games regardless of the medium, including on the web

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

INT: ASK AS SUB-QUESTIONS: 1 EVERY DAY OR ALMOST / 2 1 TO 2 TIMES A WEEK / 3 1 TO 2 TIMES A MONTH / 4 NEVER OR HARDLY EVER

In the last 12 months, how often have you:

JOURN

Read newspapers, magazines regardless of the medium, including on the web and the free press

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

BD

Read comics regardless of the medium, including on the web

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

LIVR

Read books, excluding comics, regardless of the medium, including on the web

- 1 Every day or almost
- 2 1 to 2 times a week
- 3 1 to 2 times a month
- 4 Never or hardly ever

INT: ASK AS SUB-QUESTIONS; EXCLUDING COMICS

1 EVERY DAY OR ALMOST / 2 1 TO 2 TIMES A WEEK / 3 1 TO 2 TIMES A MONTH / 4 NEVER OR HARDLY EVER

If LIVR=(1, 2, 3)

NBLIVR

And in the last 12 months, how many books have you read for pleasure, not including professional reading and books read to children, regardless of the medium, including on the web?

|_|_|_|_| (1 to 999 + DK=9999)

INT: NOT INCLUDING COMIC BOOKS

If NBLIVR=DK PROPOSE NUMBER SEGMENTS

If NBLIVR=9999

NBLIVRB

Number of books (segments)

- 1 [None]
- 2 1 or 2
- 3 3 to 5
- 4 6 to 10
- 5 11 to 20
- 6 More than 20

Do you have a subscription to:

ABJOUR

A daily newspaper regardless of the medium, including on the web

- 1 Yes
- 2 No

ABMAG

A magazine regardless of the medium, including on the web

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

MANQTL

Do you ever feel like you lack free time to do the things you would like to do?

- 1 Yes, often
- 2 Yes, occasionally
- 3 No, never

"I am now going to ask you 2 or 3 questions about your political opinions. Naturally, you may choose not to answer these questions."

PARTI

Are you a member of a political party?

- 1 Yes
- 2 No
- 8 Refuses

If PARTI=1

PARTIAR

Are you

- 1 Simply a member
- 2 Or do you have a position of responsibility
- 8 Refuses

***POLIT**

In politics, people talk about "right" and "left". On a scale of 1 to 10, 1 being most to the left and 10 most to the right, where would you put yourself?

INT: CODE A SINGLE NO.: 1 2 3 4 5 6 7 8 9 10 (+ NO OPINION=77 + DOES NOT WANT TO ANSWER=88)

21. District, neighbourhood

IF A02X_QPEFCOMP2a=1 and (E2AM_DEMENAG=1 or DEMENAG=1) and (E2MM_TYPLOG=. and E2MP_TYPLOG=. and E1AM_TYPLOG=. and E1AP_TYPLOG=.)

Questionnaires concerned:

- Referent Father
- Cohabiting Father
- Non-Cohabiting Father
- Cohabiting Father of Placed Child
- Non-Cohabiting Father of Placed Child

Module asked only if there has been a move since the last interview (DEMENAG=1) OR if 2 month and 1 year interviews not done

If the cohabiting father or cohabiting father of placed child is not participating, return later to the questionnaire with the mother.

“We are now going to talk about your neighbourhood and the services available there, as well as how you get around”

INT:

- THESE QUESTIONS ARE ASKED PURELY TO MEASURE THE DEGREE TO WHICH THE PARENTS ARE INTEGRATED IN THEIR DISTRICT OR NEIGHBOURHOOD, INDEPENDENTLY OF THE REASONS EXPLAINING THIS INTEGRATION (EXISTENCE OR LACK OF SERVICES, DELIBERATE CHOICE ON THE PART OF THE PARENTS, ETC.).
- FILL IN ONLY THE ACTIVITIES CARRIED OUT BY THE PERSON.

When you yourself do the following activities, where do you generally do them?

MEDEC

Going to the doctor, pharmacy, etc.

- 1 Mainly in the neighbourhood or village
- 2 Mainly outside the neighbourhood or village
- 3 Half and half
- 4 You don't

CAFE

Going to a café or restaurant

- 1 Mainly in the neighbourhood or village
- 2 Mainly outside the neighbourhood or village
- 3 Half and half
- 4 You don't

ESPVERT

Going for a walk, using green spaces, sports facilities, etc.

- 1 Mainly in the neighbourhood or village
- 2 Mainly outside the neighbourhood or village
- 3 Half and half
- 4 You don't

SPECT

Going to see a film, concert, etc.

- 1 Mainly in the neighbourhood or village
- 2 Mainly outside the neighbourhood or village
- 3 Half and half
- 4 You don't

RENCAMI

Meeting friends

- 1 Mainly in the neighbourhood or village
- 2 Mainly outside the neighbourhood or village
- 3 Half and half
- 4 You don't

If RENCAMI=(1, 2, 3)

FQAMI

How often do you see friends?

- 1 At least once a week
- 2 Once, twice or three times a month
- 3 Several times a year, but less than once a month
- 4 Only for special occasions

“We are now going to focus on your opinion of the environment of your dwelling and your neighbourhood.”

For the following criteria, tell us what you think about the situation of your neighbourhood or village:

QUALAIR

The air quality in your neighbourhood (dust, pollution, odours, etc.) is

- 1 Very satisfactory
- 2 Satisfactory
- 3 Moderately satisfactory
- 4 Not at all satisfactory

SECUQ

The security in your neighbourhood (the risk of being robbed, attacked, etc.) is

- 1 Very satisfactory
- 2 Satisfactory
- 3 Moderately satisfactory
- 4 Not at all satisfactory

ENTRUE

The maintenance of roads and highways and public spaces is

- 1 Very satisfactory
- 2 Satisfactory
- 3 Moderately satisfactory
- 4 Not at all satisfactory

RELATH

Your relations with the inhabitants are

- 1 Very satisfactory
- 2 Satisfactory

- 3 Moderately satisfactory
- 4 Not at all satisfactory

SERVI

The leisure and cultural services are

- 1 Very satisfactory
- 2 Satisfactory
- 3 Moderately satisfactory
- 4 Not at all satisfactory
- 5 [Not applicable]

TRANSQ

Is your neighbourhood or village accessible by public transport?

- 1 Yes
- 2 No => See PARENTS' SOCIAL NETWORK

UTILTR

Do you use public transport?

- 1 Yes
- 2 No => See PARENTS' SOCIAL NETWORK

PRATR

Do you find the public transport useful?

- 1 Yes, very
- 2 Yes, rather
- 3 No, not really
- 4 No, not at all

22. The parents' social network

IF A02X_QPEFCOMP2a=1

Questionnaires concerned:

- Referent Father
- Cohabiting Father
- Non-Cohabiting Father
- Cohabiting Father of Placed Child
- Non-Cohabiting Father of Placed Child

If the cohabiting father or cohabiting father of placed child is not participating, return later to the questionnaire with the mother.

"Now let's talk about the people that you ["and first name of LIENTYP =2 or LIENTYP=7 »] see ["together" if LIENTYP =2 or LIENTYP =7]."

Besides the grandparents of [ELFE child], do you see these people at your house or at their house or in another place (cinema, café, restaurant, etc.), in respect of the last 12 months?

FREQPAR1

Family members in the broadest sense on your partner's side

(if LIENTYP=2, 7)

- 1 Yes
- 2 No

FREQPAR2

Family members in the broadest sense on your side

- 1 Yes
- 2 No

FREQPAR3

Friends

- 1 Yes
- 2 No

FREQPAR4

Neighbours

- 1 Yes
- 2 No

FREQPAR5

Work colleagues

- 1 Yes
- 2 No

If COUPLE1=1 OR COUPLE2=1

FREQPAR6

Work colleagues of partner

- 1 Yes
- 2 No

FREQPAR7

Other

- 1 Yes
- 2 No

FREQPAR8

No-one

(exclusive) ⇨ FETANNIV

- 1 Yes
- 2 No

FREQPAR9

Refuses

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If LIENTYP (1à20)=1 We are interested in the family social network and thus in the people seen by both parents

If LIENTYP (1à20)=7 We are interested in the family social network and thus in the people seen by the father with his partner

If FREQPAR7=1

FREQPARP

Specify

If FREQPAR(1à7)=1

If FREQPAR not 8 and several answers

Display answer in FREQPAR/FREQPARP (apart from if one answer)

FREQPLU

Among these people, who do you see the most?

|_| Limit=1 à 7

- 1 Family members in the broadest sense on the father's side
- 2 Family members in the broadest sense on the mother's side
- 3 Friends
- 4 Neighbours
- 5 Work colleagues
- 6 Work colleagues of partner
- 7 Other

INT: ONE ANSWER ONLY

FREQPLU IS RECODED AUTOMATICALLY IF JUST ONE ANSWER IN FREQPAR

If LIENTYP (1à20)=1 We are interested in the family social network and thus in the people seen by both parents

If LIENTYP (1à20)=7 We are interested in the family social network and thus in the people seen by the father with his partner

FQFREQ

How often do you see them?

- 1 At least once a week
- 2 Once, twice or three times a month

- 3 Several times a year, but less than once a month
- 4 Only for special occasions
- 8 Refuses

CENTRINT

On the whole, do these people have the same interests or leisure pursuits as you?

- 1 Same as yours
- 2 Fairly similar
- 3 Fairly different
- 4 Very different
- 8 Refuses

NIVVIE

On the whole, the living standard of these people is

- 1 Lower than yours
- 2 The same
- 3 Higher than yours
- 8 Refuses

ORIGGEO

The country of origin of these people is

- 1 The same as yours
- 2 Different
- 8 Refuses
- 9 Doesn't know

FET2ANS

Did you organize a special party for the second birthday of [ELFE child]?

- 1 Yes
- 2 No => See UNDERSTANDING AND SHARING OF TASKS IN COUPLE
- 9 DK

If FET2ANS=1

FETINVIT

Did you invite other children?

- 1 Yes
- 2 No => See UNDERSTANDING AND SHARING OF TASKS IN COUPLE
- 9 DK

If FETINVIT=1

NBGAR

How many of the boys invited attended?

|_|_|_| 0 to 99 + DK=999 + NA

NBFILLE

How many of the girls invited attended?

|_|_|_| 0 to 99 + DK=999 + NA

23. Understanding and sharing of tasks in couple

IF A02X_QPEFCOMP2a=1 AND (E2AM_SITUAFAMM in (1, 3) or SITUAFAMP in (1, 3))

Questionnaires concerned:

- Referent Father
- Cohabiting Father
- Non-Cohabiting Father
- Cohabiting Father of Placed Child
- Non-Cohabiting Father of Placed Child

- This part is asked only if the father is in a couple and cohabits on a permanent basis with his partner (si SITUAFAMM=(1, 3) or SITUAFAMP=(1, 3)).

“Now let's look at the way you and your partner organize taking care of [ELFE child]”

Can you tell us who, you or your partner, takes care of the following tasks?

Questionnaire concerned: Referent Father of Cohabiting Father

a. Organization of taking care of child

if SITUAFAMM=(1, 3) ask MANGB to QCHERCH

if SITUAFAMP=(1, 3)

MANGB

Feeding the child

(If breastfeeding, fill in “Not applicable” box)

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

COUCHB

Putting them to bed

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

LAVB

Washing them or giving them a bath

- 1 Always you

- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

NUITPLEU

Waking up at night if they cry

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

If LIEUGARD not 1 or GARDENF=(7, 9) or JGARDENF=(7, 9)

QCHERCH

Taking them to and picking them up from child care

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable – child minded at home]

b. Sharing of tasks and the organization of everyday life in the week

If SITUAFAMP=(1, 3)

Questionnaires concerned: all types of Father

If SITUAFAMP=(1, 3) ask from VAISS to LINGE

And now, concerning the sharing of tasks and the organization of everyday life in the week, can you tell me:

VAISS

Who does the washing up or loads the dishwasher?

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

COURSES

Who does the food shopping?

- 1 Always you
- 2 Mostly you
- 3 You and your partner

- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

REPAS

Who cooks meals?

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

LINGE

Who does the clothes washing?

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

c. Clothes washing frequency

From FQCHGSVN to FQCHGVETP: Referent father or cohabiting father AND SITUAFAMP=(1, 3)

FQCHGSVN

How often is [ELFE child's] underwear (underpants, socks, etc.) changed to be washed?

|__|__| 1 to 99 + DK + REF

FQCHGSVP

[How often]

- 1 a day
- 2 a week
- 3 a month
- 8 [Refuses]
- 9 [DK]

FQCHGVETN

How often are [ELFE child's] other clothes (trousers, dress, shirt, etc.) changed to be washed?

|__|__| 1 to 99 + DK + REF

FQCHGVETP

[How often]

- 1 a day
- 2 a week

- 3 a month
- 8 [Refuses]
- 9 [DK]

d. Organization of everyday life and relationship of couple

From MENAGE to VIOLLEN: all types of father AND SITUAFAMP=(1, 3)

MENAGE

Who does the housework?

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

REPAR

Who fixes things inside and outside of the house? Or who does repairs?

- 1 Always you
- 2 Mostly you
- 3 You and your partner
- 4 Mostly your partner
- 5 Always your partner
- 6 Always or mostly someone else
- 7 [Not applicable]

TACHMEN

Concerning household tasks (shopping, housework, washing up, washing, cooking, etc.), do you consider in your couple that:

- 1 You take care of most of the tasks
- 2 The tasks are shared with your partner
- 3 Your partner takes care of most of the tasks
- 4 Another person living in the household takes care of all the housework
- 5 Another person not living in the household takes care of all the housework

SAFTACM

Regarding housework, are you satisfied with the sharing of tasks between you and your partner?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat dissatisfied
- 4 Very dissatisfied
- 8 [Refuses]

SAFTACE

Regarding taking care of children, are you satisfied with the sharing of tasks between you and your partner?

- 1 Very satisfied
- 2 Somewhat satisfied

- 3 Somewhat dissatisfied
- 4 Very dissatisfied
- 6 [Not applicable]
- 8 [Refuses]

Tensions often exist in couples. I am now going to ask you a few questions about this subject. But before I do, I would like to know if someone is listening to this conversation.

DISPECOUTE

Is someone listening?

- 1 Yes
- 2 No

In the last 12 months, have you yourself had an argument with your partner about:

DISPVIEQ

Everyday life: the sharing of tasks, outings, leisure activities

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

DISPENF

The children

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

DISPTRA

Your work or their work

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

DISPREL

Relations with family or friends

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

DISPTOU

About everything and nothing

- 1 Never
- 2 Rarely

- 3 Sometimes
- 4 Often
- 8 [Refuses]

If DISPVIEQ=(3, 4) or DISPENF=(3, 4) or DISPTRA=(3, 4) or DISPREL=(3, 4) or DISPTOU=(3, 4)

PRESENF

Have these arguments happened in front of [ELFE child]?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

If DISPVIEQ=4 or DISPENF=4 or DISPTRA=4 or DISPREL=4 or DISPTOU=4

INSULTC

During these arguments, has your partner ever insulted you or said hurtful things?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

If INSULTC=(3, 4)

VIOLENC

Has your partner ever resorted to violence or thrown or broken objects?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

If DISPVIEQ=4 or DISPENF=4 or DISPTRA=4 or DISPREL=4 or DISPTOU=4

INSULT

During these arguments, have you insulted your partner or said hurtful things?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

If INSULT=(3, 4)

VIOLEN

Have you ever resorted to violence or thrown or broken objects?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 8 [Refuses]

24. The child's development

IF A02X_QPEFCOMP2a=1 and A02X_TYPQPECF2a in (1, 2, 3, 4, 5, 6, 7, 8)

Questionnaires concerned:

- "Referent Father"
- "Cohabiting Father" or "Cohabiting Father of Placed Child": (SITUAFAMM=1 OR (SITUAFAMM=3 and a LIENTYP=7 SEXE=2)) ask non-greyed-out questions
- "Non-Cohabiting Father"

If the cohabiting father is not participating, return later to the questionnaire with the mother, except for questions already documented.

a. The child's activities

"We are now going to talk about some of [ELFE child's] activities, his/her language and sleep."

If cohabiting father: "We are now going to talk about some of [ELFE child's] activities"

GLOBE

Does [ELFE child] walk without being helped?

- 1 Yes
- 2 Not yet ⇒ AUTOE

If GLOBE=1

GLOBEAGE

Since what age, in months?

|_|_| months

8 to 30 + DK=99 + NA

INT: 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

GLOBG

Does [ELFE child] run?

- 1 Yes
- 2 Not yet

GLOBH

Does [ELFE child] ever kick a ball?

- 1 Yes
- 2 Not yet

GLOBI

Does [ELFE child] walk up the stairs one foot after another?

- 1 Yes
- 2 Not yet

PEDAL

Does [ELFE child] pedal on a tricycle or a bicycle with trainer wheels?

- 1 Yes
- 2 Not yet

AUTOE

Does [ELFE child] drink out of a glass or cup unassisted?

- 1 Yes
- 2 Not yet

AUTOG

Is [ELFE child] able to eat with a spoon unassisted?

- 1 Yes
- 2 Not yet

CHAUS

Does [ELFE child] put their slippers or socks on unassisted?

- 1 Yes
- 2 Not yet

SUSPOU

Does [ELFE child] suck their thumb or fingers?

- 1 Never
- 2 Sometimes
- 3 Often
- 4 All the time or almost
- 9 [DK]

TETINE

Does your child suck a dummy?

- 1 Never
- 2 Sometimes
- 3 Often
- 4 All the time or almost

SUSAUT

Does your child suck on anything else, such as a comforter or a piece of fabric?

- 1 Never
- 2 Sometimes
- 3 Often
- 4 All the time or almost
- 9 [Doesn't know]

If DEGSUR=(3, 4) AND APPAREILAUD=2

“You said that [ELFE child] had severe/acute deafness.”

“As I now have to ask you about the 100 words he/she can say unprompted, perhaps you would prefer me not to ask questions about this subject.”

If DEGSUR=3 AND APPAREILAUD=2

“You said that [ELFE child] had severe deafness.”

If DEGSUR=4 AND APPAREILAUD=2

“You said that [ELFE child] had acute deafness.”

“As I now have to ask you about the 100 words he/she can say unprompted, perhaps you would prefer me not to ask questions about this subject.”

SURMOT

- 1 Does not want to respond to these questions => OPPSUGG
- 2 Wants to respond to these questions

Question added from 28/05

b. The child's language

IF A02x_TYPQPECF2a in (1, 2, 6, 7, 8)

In the list of words I am going to read out, could you tell me as we go along which ones [ELFE child] says unprompted. If [ELFE child's] pronunciation is different from that of adults, please indicate the word all the same. I would like to warn you that the list is quite long. But it is essential for me to read out all the words and you will see that it won't take too long.

If SURMOT not 2

Does [ELFE child] say unprompted:

MAIE

OW

- 1 Yes
- 2 No

MCHEVEUX

HAIR

- 1 Yes
- 2 No

MMOI

ME

- 1 Yes
- 2 No

MBATEAU

BOAT

- 1 Yes
- 2 No

MCOUCHE

NAPPY

- 1 Yes
- 2 No

MOU

WHERE

- 1 Yes
- 2 No

MBONBONS

SWEETS

- 1 Yes
- 2 No

MECRIS

WRITE

- 1 Yes
- 2 No

MPATES

PASTA

- 1 Yes
- 2 No

MCADEAU

GIFT

- 1 Yes
- 2 No

MFROMAGE

CHEESE

- 1 Yes
- 2 No

MPOUBELLE

BIN

- 1 Yes
- 2 No

MCHAUSSURE

SHOE

- 1 Yes
- 2 No

MLUMIERE

LIGHT

- 1 Yes
- 2 No

MVERRE

A GLASS

- 1 Yes
- 2 No

MCOINCOIN

QUACK-QUACK

- 1 Yes
- 2 No

MMEUH

MOO

- 1 Yes
- 2 No

MAPEUR

IS/TO BE AFRAID

- 1 Yes
- 2 No

MEAU

SOME WATER

- 1 Yes
- 2 No

MPRENOM

[ELFE first name]

- 1 Yes
- 2 No

MBOIS

DRINK

- 1 Yes
- 2 No

MFLEUR

FLOWER

- 1 Yes
- 2 No

MPARS

LEAVE/LEFT

- 1 Yes
- 2 No

MCA

THAT

- 1 Yes
- 2 No

MLIT

BED

- 1 Yes
- 2 No

MPORTE

DOOR

- 1 Yes
- 2 No

MCHAT

CAT

- 1 Yes
- 2 No

MMANGER

EAT

- 1 Yes
- 2 No

MTELE

TV

- 1 Yes
- 2 No

MCHUT

SHUSH

- 1 Yes
- 2 No

MMUSIQUE

MUSIC

- 1 Yes
- 2 No

MATTENTION

CAREFUL

- 1 Yes
- 2 No

MDAME

LADY

- 1 Yes
- 2 No

MPANTALON

TROUSERS

- 1 Yes
- 2 No

MBEEBEE

BAA

- 1 Yes
- 2 No

MFAISBISOU

GIVE A KISS

- 1 Yes
- 2 No

MPOISSON

FISH

- 1 Yes
- 2 No

MBOUCHE

MOUTH

- 1 Yes
- 2 No

MLAIT

SOME MILK

- 1 Yes
- 2 No

MSALE

DIRTY

- 1 Yes
- 2 No

MCASSER

BREAK

- 1 Yes
- 2 No

MMAISON

HOUSE

- 1 Yes
- 2 No

MYAOURT

YOGURT

- 1 Yes
- 2 No

MCHIEN

DOG/DOGGIE

- 1 Yes
- 2 No

MMONSIEUR

MISTER

- 1 Yes
- 2 No

MALLO

HI

- 1 Yes
- 2 No

MCOUCOU

HEY

- 1 Yes
- 2 No

MOUAFOUAF

WOOF WOOF

- 1 Yes
- 2 No

MBEAU

BEAUTIFUL

- 1 Yes
- 2 No

MELEPHANT

ELEPHANT

- 1 Yes
- 2 No

MPLEURER

CRY

- 1 Yes
- 2 No

MBONJOUR

HELLO

- 1 Yes
- 2 No

MICI

HERE

- 1 Yes
- 2 No

MPYJAMA

PYJAMAS

- 1 Yes
- 2 No

MCAILLOU

STONE

- 1 Yes
- 2 No

MLUNE

MOON

- 1 Yes
- 2 No

MVOITURE

CAR

- 1 Yes
- 2 No

MCHEVAL

HORSE

- 1 Yes
- 2 No

MMIAOU

MIAOW

- 1 Yes
- 2 No

MBALLON

BALL

- 1 Yes
- 2 No

MCOMPOTE

JAM

- 1 Yes
- 2 No

MOREILLE

EAR

- 1 Yes
- 2 No

MBON

GOOD

- 1 Yes
- 2 No

MECOLE

SCHOOL/CRECHE

- 1 Yes
- 2 No

MPAS

NOT

- 1 Yes
- 2 No

MCACHER

HIDE

- 1 Yes
- 2 No

MFROID

COLD

- 1 Yes
- 2 No

MPOT

A POT

- 1 Yes
- 2 No

MCHAUD

HOT

- 1 Yes
- 2 No

MLIVRE

BOOK

- 1 Yes
- 2 No

MTOMBER

FALL

- 1 Yes
- 2 No

MCOCHON

PIG

- 1 Yes
- 2 No

MMERCI

THANK YOU

- 1 Yes
- 2 No

MAUREVOIR

GOOD BYE

- 1 Yes
- 2 No

MDEHORS

OUTSIDE

- 1 Yes
- 2 No

MNEZ

NOSE

- 1 Yes
- 2 No

MBIBERON

BOTTLE

- 1 Yes
- 2 No

MFERMER

CLOSE

- 1 Yes
- 2 No

MPAPA

DADDY

- 1 Yes
- 2 No

MBRAS

ARM

- 1 Yes
- 2 No

MLAPIN

RABBIT

- 1 Yes
- 2 No

MPOMME

APPLE

- 1 Yes
- 2 No

MCHAISE

CHAIR

- 1 Yes
- 2 No

MMAMAN

MUMMY

- 1 Yes
- 2 No

MSTP

PLEASE

- 1 Yes
- 2 No

MCHOCOLAT

CHOCOLATE

- 1 Yes
- 2 No

MMOTO

MOTORBIKE

- 1 Yes
- 2 No

MYEUX

EYES

- 1 Yes
- 2 No

MCUILLERE

SPOON

- 1 Yes
- 2 No

MPAIN

SOME BREAD

- 1 Yes
- 2 No

MASSIETTE

PLATE

- 1 Yes
- 2 No

MENCORE

MORE

- 1 Yes
- 2 No

MPLUIE

RAIN

- 1 Yes
- 2 No

MBEBE

BABY

- 1 Yes
- 2 No

MLA

THERE

- 1 Yes
- 2 No

MQUOI

WHAT

- 1 Yes
- 2 No

MBOTTES

BOOTS

- 1 Yes
- 2 No

MMAIN

HAND

- 1 Yes
- 2 No

MVROUM

VROOM

- 1 Yes
- 2 No

MCANARD

DUCK

- 1 Yes
- 2 No

INT:

- "UNPROMPTED MEANS THAT THE CHILD SAYS THE WORD WITHOUT IT HAVING JUST BEEN SAID - IT IS NOT SIMPLY THE REPETITION OF A WORD ALREADY HEARD"

- IF [ELFE CHILD] DOESN'T SAY VERY MANY WORDS, SAY ONLY THAT THE QUESTIONNAIRE IS DESIGNED FOR CHILDREN AGED BETWEEN 2 AND 4.

ENABLE THE INTERVIEWERS TO WRITE A SPECIAL REMARK ABOUT THIS PART OF THE QUESTIONNAIRE WHERE THE PARENTS SAY THAT THE CHILD SAYS ALL OR SOME OF THESE WORDS IN A LANGUAGE OTHER THAN FRENCH. AND DISPLAY THE FOLLOWING IN THE SPACE SO THAT THE INTERVIEWER CAN WRITE DOWN THE REMARK: "THE WORDS PRONOUNCED BY YOUR CHILD MUST BE IN FRENCH FOR REASONS OF CONSISTENCY RELATIVE TO LANGUAGE. NATURALLY, WE NOTE THAT YOUR CHILD OFTEN EXPRESSES HIMSELF OR HERSELF IN A LANGUAGE OTHER THAN FRENCH"

MOU DISPLAY AS IN THE SENTENCE "WHERE IS THE CAT?"

MLA DISPLAY AS IN THE SENTENCE "HE'S HERE!"

MPAS DISPLAY AS IN THE SENTENCE "I DON'T WANT ANY"

MPATES display EDIBLE PASTA

MVERRE display TO DRINK

MCA DISPLAY AS IN THE SENTENCE "I WANT THAT"

MCOINCOIN display LIKE a duck

MMEUH display LIKE a cow

MBEEBEE display LIKE a sheep

MMIAOU display LIKE a cat

MOUAFOUAF display LIKE a dog

NB: ENQ1=question not read added 27/05 following monitoring.

ENQ1

Did the father tell you that the child said all or some of these words in a language other than French?

- 1 Yes

2 No

If ENQ1=1

ENQ2

In which other language does he/she say these words?

PHRASE

Has [ELFE child] already begun making short two-word sentences, such as: “More cake”?

1 Not yet ⇒ OPPSUGG

2 Sometimes

3 Often

4 [He/she expresses himself/herself using longer sentences]

INT: DO NOT LIST THE LAST WORDING

What are the three longest sentences currently expressed by [ELFE child] unprompted (i.e. without repeating something that he/she has just heard)?

***PHRASE1**

[Sentence 1]

***PHRASE2**

[Sentence 2]

***PHRASE3**

[Sentence 3]

INT: IF NO OTHER SENTENCES, CODE NA

If SURMOT not 2

ORDIM

ORDI

1 Yes

2 No

c. The child's behaviour

The following types of behaviour are sometimes seen among two-year-olds. Could you tell us how often you see this behaviour with [ELFE child]?

OPPSUGG

Disagrees with your suggestions?

1 Never

2 Rarely

3 Sometimes

4 Often

5 Always

DEFI

Challenges you, stands up to you when they he/she is told off?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 Always

FRAPPE

Hits you or destroys things when he/she is angry with you?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 Always

d. The child's sleep

IF A02x_TYPQPECF2a in (3, 4, 5) AND A02X_MENAGEM2A=1 and SITUAFAMP=1

On weekdays in the evening, what time do you generally put [ELFE child] to bed?

“To conclude, I am going to ask you a few more questions. The questions mainly concern your child's sleep and toilet training.”

HEURCOUH

Hours

|__|__| 18 to 24 + DK=99 + REFUSES=88

HEURCOUM

Minutes

|__|__| 0 to 59 + DK=99 + REFUSES=88

INT: PUT 8 PM IF PARENT SAYS 8 IN THE EVENING

And on the weekend?

HEURCOUWEH

Hours

|__|__| 18 to 24 + DK=99 + REFUSES=88

HEURCOUWEM

Minutes

|__|__| 0 to 59 + DK=99 + REFUSES=88

LITDOR

When you put [ELFE child] to bed, does he/she have problems getting to sleep? For example, does he/she call for you or cry for a long time?

- 1 Often
- 2 Sometimes
- 3 Never
- 9 [DK]

DORAV

Does he/she need a bottle or a drink dummy to get to sleep (excluding regular dummies)?

- 1 Yes
- 2 No => DOUDOU
- 9 [Doesn't know]

Is it a:

If DORAV=1

DORAVQ1

Bottle or dummy filled with water?

- 1 Yes
- 2 No

DORAVQ2

Bottle or dummy filled with sugared water (syrup or other)?

- 1 Yes
- 2 No

DORAVQ3

Bottle or dummy filled with milk?

- 1 Yes
- 2 No

DORAVQ4

Doesn't know

- 1 Yes
- 2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

DOUDOU

Does he/she need an object such as a comforter or a regular dummy?

- 1 Yes
- 2 No
- 9 DK

LAMPE

Is there a lamp or night light in the room where he/she sleeps?

- 1 Yes
- 2 No
- 9 Doesn't know

If LAMPE=1

LAMPED

How far from the bed is the lamp or night light?

- 1 Less than 1 metre from the bed
- 1 More than 1 metre from the bed
- 9 [Doesn't know]

If LAMPE=1

LAMPEA

Since what age?

|_|_| (in months)

(min 1 max 30 months; + DK=99+NA=88; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

DODOLIT

Does [ELFE child] fall asleep in his/her own bed?

- 1 Yes
- 2 No
- 9 DK

REVNUIT

Does your child go through periods of waking up at night?

- 1 Yes
- 2 No ⇒ HEURLEVH
- 9 DK

If REVNUIT=1

TPSREVM

This week, how many times has your child woken up in the night (if the child has been ill this week, ask for the last week when not ill)?

- 1 Never
- 2 1 or 2 times
- 3 3 or 6 times
- 4 Every night
- 9 [Doesn't know]

If TPSREVM ne 1

NRREVM

How often did he/she wake up in the night on average?

- 1 Once a night
- 2 At least twice a night
- 9 [Doesn't know]

If REVNUIT=1

DODOLITV

Does he/she ever end the night in your bed?

- 1 Yes
- 2 No
- 9 DK

On weekdays, what time does he/she wake up?

HEURLEVH

|__|__| **1 to 12** + DK=99 + REFUSES=88

HEURLEVM

|__|__| **0 to 59** + DK=99 + REFUSES=88

And on the weekend?

HEURLEVWEH

|__|__| **1 to 12** + DK=99 + REFUSES=88

HEURLEWEM

|__|__| **0 to 59** + DK=99 + REFUSES=88

How much does he/she sleep in the DAY (on average)? Can you add up all these naps taken in the day?

TPSOMJH

|__|__| hours (min 0 max 23)

TPSOMJM

|__|__| minutes (min 0 max 59)

INT: CODE 0 IF NO NAPS

BABYPH

Since [ELFE child] was born, have you used a babyphone?

- 1 Yes
- 2 No
- 9 DK

If BABYPH=1

BABYPHU

Do you still use it?

- 1 Yes
- 2 No

On which date did you stop using it?

If BABYPHU=2

BABYPHUTM

The month

|__|__| (month)

BABYPHUTA

The year

|_|_|_|_| (year)

If BABYPH=1

BABYPHD

How far is (was) the babyphone from the bed?

If BABYPHU=1

How far is the babyphone from the bed?

If BABYPHU=2

How far was the babyphone from the bed?

1 Less than 1 metre from the bed

1 More than 1 metre from the bed

e. The child's usual behaviour

IF A02X_TYPQPECF2a in (3, 4, 5) AND A02X_MENAGEM2A=1 and SITUAFAMP=1

"To end, I am going to ask you a few questions about (ELFE child's) usual behaviour"

AUT1

Does [ELFE child] like being rocked in your lap?

1 Yes

2 No

AUT2

Is he/she interested in other children?

1 Yes

2 No

AUT3

Does he/she like to climb on furniture or stairs?

1 Yes

2 No

AUT4

Does [ELFE child] like to play hide and seek or peek-a-boo?

1 Yes

2 No

AUT5

Does he/she like to play "pretend" games, for example pretending to be on the telephone or playing with soft toys or dolls?

1 Yes

2 No

AUT6

Does [ELFE child] use his/her index finger to point when asking for something?

- 1 Yes
- 2 No

AUT7

Does he/she use his/her index finger to show you things they find interesting?

- 1 Yes
- 2 No

AUT8

Does he/she play correctly with small toys without putting them in his/her mouth, fiddling with them or knocking them down?

- 1 Yes
- 2 No

AUT9

Does he/she bring objects to you to show you?

- 1 Yes
- 2 No

AUT10

[ELFE child] look you in the eyes for more than a second or two?

- 1 Yes
- 2 No

AUT11

Does your child ever seem excessively sensitive to noises, to the point of putting his/her hands over his/her ears?

- 1 Yes
- 2 No

AUT12

Does [ELFE child] ever smile back at you?

- 1 Yes
- 2 No

AUT13

Does [ELFE child] imitate you, for example when you pull a face?

- 1 Yes
- 2 No

AUT14

Does he/she respond when called by his/her name?

- 1 Yes
- 2 No

AUT15

If you show [ELFE child] an object at the other side of the room, does he/she look in that direction?

- 1 Yes
- 2 No

AUT16

Does he/she look at the objects you are looking at?

- 1 Yes
- 2 No

AUT17

Does he/she make unusual gestures with his/her hands close to his/her face?

- 1 Yes
- 2 No

AUT18

Does [ELFE child] try to draw you attention to what he/she is doing?

- 1 Yes
- 2 No

AUT19

Have you ever wondered whether he/she was deaf?

- 1 Yes
- 2 No

If DEGSUR>0

“Did you ever wonder whether he/she was deaf?”

AUT20

Does he/she understand what people say to him/her?

- 1 Yes
- 2 No

AUT21

Does he/she ever stare into space or walk around with no purpose?

- 1 Yes
- 2 No

AUT22

Does [ELFE child] look at your face to check your reaction when he/she is confronted with an unusual situation?

- 1 Yes
- 2 No

INT: ASK AS SUB-QUESTIONS 1 YES / 2 NO

f. Toilet training

IF A02x_TYPQPECF2a in (3, 4, 5) AND A02X_MENAGEM2A=1 and SITUAFAMP=1

POT

Do you ever put your child on the potty?

- 1 Never
- 2 Occasionally
- 3 Often
- 4 All the time

COUCHNUI

Does [ELFE child] wear a nappy at night?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

COUCHJOU

And in the day?

- 1 Yes, always
- 2 Yes, sometimes
- 3 No

PROPRE

Have you received, or have you felt you needed, advice on toilet training, i.e. using a potty and stopping the use of nappies?

- 1 Yes
- 2 No ⇒ SECHEV

Concerning the potty and stopping the use of nappies, where do you find advice or from whom?

If PROPRE=1

CONSPROP1

A doctor

- 1 Yes
- 2 No

CONSPROP2

Your mother

- 1 Yes
- 2 No

CONSPROP3

The child's other grandmother

- 1 Yes
- 2 No

CONSPROP4

Another family member, a friend, other parents

- 1 Yes
- 2 No

CONSPROP5

Staff at the crèche, a childcare assistant, a nursery school assistant

- 1 Yes
- 2 No

CONSPROP6

Neighbours

- 1 Yes
- 2 No

CONSPROP7

In books, print media

- 1 Yes
- 2 No

CONSPROP8

In TV programmes, on the radio, the web

- 1 Yes
- 2 No

CONSPROP9

From your own experience with other children

- 1 Yes
- 2 No

CONSPROP10

Other

- 1 Yes
- 2 No

CONSPROP11

No-one (exclusive)

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

SECHEV

Do you ever dry [ELFE child's] hair with a hairdryer?

- 1 Yes
- 2 No

If SECHEV=1

SECHEVT

How often?

- 1 Less than once a week
- 2 Once a week
- 2 2 to 3 times a week
- 4 Almost every day

If SECHEV=1

SECHEVA

Since what age?

|__|__|

(min 1 max 30 months; + DK=99; not allowed 0)

INT: SINCE BIRTH=1 MONTH, 1 YEAR=12 MONTHS, 1 AND A HALF YEARS=18 MONTHS, 2 YEARS=24 MONTHS

TYPVET

Generally speaking, to dress [ELFE child]:

- 1 You prefer "little girl"/"little boy" clothes
- 2 You prefer clothes that suit girls and boys alike
- 3 You are indifferent to these considerations

25. Checking and correcting contact details

Checking and correcting the following contact details

Mother

(If no mobile number, ask him:

“Do you have a mobile phone?”

1 Yes

2 No

Father

(If no mobile number, ask him:

“Do you have a mobile phone?”

1 Yes

2 No

Relay person

Childcare number

If LIEUGARD=(2, 3) OR GARDENF=6

If GARDENF 2 Year= GARDENF 1 Year carry over 1 info and confirm by reading out the address and/or name of the crèche

Can you tell us the address of the childcare centre of your child?

INT: NOTE THE ADDRESS AS PRECISELY AS POSSIBLE

If LIEUGARD=(2, 3) OR GARDENF=(7, 9)

FINESS1

ID of childcare centre

***GARNOM**

Name of crèche

⇨ *GARCP

_____ (LIST)

***GARNUM**

Number

|__|__|__| (1 to 997) (+ DK=999 and NA=998)

***GARRUE**

Street

(50 characters maximum) (LIST?)

***GARCP**

Postcode

|__|__|__|__|__| (01000 to 97500) (LIST?)

***GARCOM**

Municipality

(30 characters maximum) (LIST, to enable geocoding)

GARBAT

Is the building where [ELFE child] is looked after:

- 1 An individual house?
- 2 A collective building?
- 3 Other

GARETA

How many floors?

|__|__|

+ DK=99

INT: COUNT THE MEZZANINE FLOOR AS A GROUND FLOOR, CODE 0 IF NO FLOORS AND AUTHORIZE DK=99

If 99>GARETA>0

GARETAQ

On which floor is the childcare centre of [ELFE child]?

|__|__|

INT: 0 FOR MEZZANINE FLOOR OR GROUND FLOOR, *IF THE CHILD IS KEPT ON SEVERAL FLOORS NOTE THE FLOOR WHERE THEY SPEND THE MOST TIME (Changed at start of Wave 1)*

GARCONST

Do you know if the building was built:

- 1 Before 1949
- 2 Or after 1949?
- 9 [DK]

If GARDENF=9

Can you tell us the address of the nursery school of your child?

FINESS2

ID of nursery school

***ECODEP**

First of all, in which department is the school located?

Can you tell us the address of the nursery school of your child?

***ECONOM** *(not available as empty)*

What is the name of his/her school?

What is the address of the school?

***ECONUM** *(not available as empty)*

Number

|__|__|__| (1 to 9997) + DK and NA

***ECONUMCP** *(not available as empty)*

Additional street address information

***ECORUE** *(not available as empty)*

Street name (50 characters maximum)

***ECOCP** *(not available as empty)*

Postcode

|__|__|__|__|__| (01000 to 97500) + DK and NA

***ECOCOM** *(not available as empty)*

Municipality (30 characters maximum)

ECOETAG

How many floors?

|__|__|

+ DK=99

INT: COUNT THE MEZZANINE FLOOR AS A GROUND FLOOR, CODE 0 IF NO FLOORS AND AUTHORIZE DK=99

If 99>ECOETAG>0

QECOETAG

On which floor is the classroom of [ELFE child]?

|__|__| (+ DK=999)

INT: 0 FOR MEZZANINE FLOOR OR GROUND FLOOR

DCONSEC

When was your child's nursery school built?

1 Before 1949

2 After 1949

3 [Doesn't know]

TYPECOLE

What kind of school is it?

1 Public (state)

2 Private

3 [Doesn't know]

- END -