

SPOR – Children’s development and wellbeing throughout life

Questionnaire: 9 months

BlokA	Co-parenting - SBO inspired by BørnUngeliv.dk, toddlers		FILTER
IntroA_0	<p>Welcome to the questionnaire for the study SPOR – Children’s development and wellbeing throughout life. This questionnaire is for parents with 9-month-old children.</p> <p>The questionnaire is about [name of the baby] and your family.</p> <p>It is important to answer all the questions even if you do not feel that all questions apply to your situation.</p> <p>Therefore, please answer all questions as well as possible and state the answer that immediately comes to mind.</p> <p>There are no right or wrong answers.</p> <p>Thank you for participating in the study. Your answers will be saved every time you move on to the next page.</p>		
IntroA	The first questions are about who [name of the child] lives with.		
housing_1	Do you and [name of the child]’s other parent live together?	<ol style="list-style-type: none"> 1. Yes 2. No 3. The child has no other parent 	

housing_2	Where does [name of the child] currently live?	<ol style="list-style-type: none"> 1. The child takes turns living with each parent – time is split equally 2. The child takes turns living with each parent – most of the time with me 3. The child takes turns living with each parent – most of the time with the other parent 4. Only with me 5. Only with the other parent 6. Other 	housing_1=2
housing_3	Does [name of the child] spend time with his/her other parent?	<ol style="list-style-type: none"> 1. Yes, and sometimes stays the night 2. Yes, but doesn't stay the night (5) No, the child does not spend time with its other parent. 	housing_2=4
housing_4	Does [name of the child] spend time with you?	<ol style="list-style-type: none"> 1. Yes, and sometimes stays the night 2. Yes, but doesn't stay the night (5) No, the child does not spend time with me. 	housing_2=5,6
housing_5	If yes, how many days a month?		housing_3=1 OR housing_4=1
housing_6	If yes, how many days a month?		housing_3=2

BlokN2	Disabilities/Long-term illness - BUD		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN2	The next questions are about the birth and the health of the child.		
handicap_0	Was [name of the child] born on time?	<p>1. Yes, from the 37th week of pregnancy to two weeks after the due date.</p> <p>2. No, in the 32nd to 36th week of pregnancy.</p> <p>3. No, in the 28th to 31st week of pregnancy.</p> <p>4. No, in the 27th week of pregnancy or earlier.</p> <p>5. No, more than two weeks after the due date.</p> <p>9. I don't know/don't remember</p>	
handicap_1	Does [name of the child] have a long-term illness or disability?	<p>1. Yes</p> <p>2. No</p> <p>(9) I don't know</p>	

handicap_2	Is [name of child] limited by the disease or disability on a daily basis? (e.g. the child is not able to play or participate in everyday activities in the same way as his/her peers.)	<ol style="list-style-type: none"> 1. Yes, a lot 2. Yes, to some extent 3. Yes, a little 4. No 	handicap_1=1
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BlokB	Socio-emotional development – ASQ:SE-2		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
	The 29 questions in this section are not shown, as they come from ASQ:SE-2, which is a licensed tool for assessing socio-emotional development.		

BlokC	Stimulating activities. Items from the Irish Study 'Preparing for Life'		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroC	The next questions are about the things you do with [name of the child].		

	You have to think about how often you have done these activities with [name of the child] in the past month.		
IntroC1	In the past month how often did you...		
stimact_9mdr_1	Play peek-a-boo with [name of the child]?	<ol style="list-style-type: none"> 1. More than once a day 2. About once a day 3. A few times a week 4. A few of times a month 5. Rarely 6. Not at all 	
stimact_9mdr_2	Sing nursery rhymes like “Jack and Jill” with him/her?		
stimact_9mdr_3	Sing songs with him/her?		
stimact_9mdr_4	Read stories to [name of the child]?		

BlokD	Temperament – FIV		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroD	The next question is about [name of the child]’s temperament.		
temper	How do you generally asses [name of the child]’s temperament?	<ol style="list-style-type: none"> 1. Has a bad temperament (choose this, if your child more often and/or more intensely than other children 	

		<p>reacts to situation with frustration, anger, anxiety or withdrawal)</p> <p>2. Has an average temperament (Choose this, if your child appears to have a temperament like that of most other children)</p> <p>3. Doesn't have much of a temperament (choose this, if your child rarely and/or less intensely than other children reacts to situations with frustration, anger, anxiety or withdrawal)</p>	
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Being a parent

BlokE	Parent-child relationship – MABISC		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroE_0	The next questions are about being the parent of a small child and some of the emotions and conflicts you may experience as a parent.		
IntroE	Assess each of the following statements based on how often you experience them.		
mabisc_1	I find playing with my child an easy activity.	1. Always	

		2. Often 3. Sometimes 4. Seldom 5. Never	
mabisc_2	My child can easily cheer me up.		
mabisc_3	I find looking after my child a strain at times.		
mabisc_4	I know when my child needs me.		
mabisc_5	I can interpret my child's different cries, such as hunger, tiredness etc.		
mabisc_6	I find my child easy to feed.		
mabisc_7	I find that my child's sleeping habits pose problems.		
mabisc_8	I find it easy to keep my child in a routine.		
mabisc_9	I find that outings with my child cause me some difficulty.		
mabisc_10	When I need to go out, I feel comfortable leaving my child with someone else.		

BlokF	Experience of parenthood – PSS		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroF	The next questions are about being the parent of a small child and some of the emotions and conflicts you may experience as a parent.		

	<p>Below are a number of statements that describe different feelings and experiences connected to being a parent. Assess each of the statements based on how your relationship to your child(ren) generally is.</p> <p>State how much you agree or disagree with each of the following statements:</p>		
pss_1	I am happy in my role as a parent.	1. Strongly disagree 2. Disagree 3. Neither agree nor disagree 4. Agree 5. Strongly agree	
pss_2	There is little or nothing I wouldn't do for my child(ren) if it was necessary.		
pss_3	Caring for my child(ren) sometimes takes more energy than I have to give.		
pss_4	I sometimes worry whether I am doing enough for my child(ren).		
pss_5	I feel close to my child(ren)..		
pss_6	I enjoy spending time with my child(ren).		
pss_7	My child(ren) is (are) an important source of affection for me.		
pss_8	Having children gives me a more certain and optimistic view of the future.		
pss_9	The major source of stress in my life is my child(ren).		
pss_10	Having children leaves little time and flexibility in my life.		
pss_11	Having children has been a financial burden.		

pss_12	It is difficult to balance different responsibilities because of my child(ren).		
pss_13	The behavior of my child(ren) is often embarrassing or stressful to me.		
pss_14	If I had it to do over again, I might decide not to have children.		
pss_15	I feel overwhelmed by the responsibility of being a parent.		
pss_16	Having children has meant having too few choices and too little control over my life.		
pss_17	I am satisfied as a parent.		
pss_18	I find my child(ren) enjoyable.		

BlokG	Parenting style/family profile – SEAM family profile questionnaire I		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroG	The 14 questions in this section are not shown as they come from SEAM family profile, which is a licensed tool to assesses parent and caregiver strengths and helps identify areas in which they need more supports and resources to foster their child's social-emotional skills. The questionnaire used here is the version for infants (2-18 months).		

BlokH	Parent-child conflicts – FIV		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroH_0	The next couple of questions are about you and your child.		
IntroH	<p>All children misbehave at times or do something that is wrong, “dangerous” or that the parents do not like.</p> <p>Parents have many ways of handling these kinds of problems. Below are a number of statements that describe ways to discipline your child.</p> <p>You are asked to consider every statement and choose the number on a scale from 1 to 7 that best describes your way of disciplining your child in the past two months.</p> <p>When my child misbehaves, I...</p>		
conflict_1	... grab his/her arm firmly.	1 Never 2 3 4 5 6 7 Always	
conflict_2	... slap him/her lightly		
conflict_3	... shake him/her.		
conflict_4	... spank him/her.		

conflict_5	...hit him/her.		
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BlokH1	Relationship		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroH1	The next questions are about your relationship, if you have a partner.		
partner	Do you have a partner?	1. Yes 2. No	housing_1=3 OR housing_2=1,2,3,4 OR housing_4=1

Blok J	Satisfaction in the relationship – CSI, DAS		housing_1=1 OR partner=1
IntroJ			
IntroJ1	Please state how well the following statements describe how you see your relationship.		
relsat_1	My relationship with my partner makes me happy.	1. Not at all true 2. A little true	housing_1=1 OR

		<ul style="list-style-type: none"> 3. Somewhat true 4. Mostly true 5. Almost completely true 6. Completely true 	partner=1
relsat_2	I have a warm and comfortable relationship with my partner		housing_1=1 OR partner=1
IntroJ3	Please choose the answer that you feel best describes you and your partner's relationship.		housing_1=1 OR partner=1
relsat_3	How rewarding is your relationship with your partner?	<ul style="list-style-type: none"> 1. Not at all 2. A little 3. Somewhat 4. Mostly 5. Almost completely 6. Completely 	housing_1=1 OR partner=1
relsat_4	In general, how satisfied are you with your relationship?		housing_1=1 OR partner=1
relsat_5	How often do you and your partner argue?	<ul style="list-style-type: none"> 1. All the time 2. Most of the time 3. Occasionally 4. Rarely 5. Never 	housing_1=1 OR partner=1

BlokK	Relationship/conflicts between divorced parents – inspired by item from Center for Familieudvikling		housing_2=1,2,3,4 OR housing_4=1
IntroK	The following statement is about how you and the child's other parent co-parent. How much do you agree or disagree with the statement?		housing_2=1,2,3 OR housing_3=1,2 OR housing_4=1
Coop	We co-parent about [name of the child]'s daily life.	<ol style="list-style-type: none"> 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree (9) Don't know 	housing_2=1,2,3 OR housing_3=1,2 OR housing_4=1

BlokL	Mental health – WHO – 5 Well-being Index (1999 version)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroL_0	How have you been feeling?		
IntroL	The next questions are about how you have been feeling lately.		

	<p>Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks. Notice that higher numbers mean better well-being.</p> <p>Over the past two weeks:</p>		
who5_1	I have felt cheerful and in good spirits	(5) All the time (4) Most of the time (3) More than half of the time (2) Less than half of the time (1) Some of the time (0) At no time	
who5_2	I have felt calm and relaxed.		
who5_3	I have felt active and vigorous.		
who5_4	I woke up feeling fresh and rested.		
who5_5	My daily life has been filled with things that interest me.		

BlokM	Parents' social relations – CSRQ (Copenhagen Social Relations Questionnaire)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroM_0	The following questions are about you and your network		
IntroM			

csrq_1	Would anyone in your network (e.g. family or friends) help you with daily practical matters if necessary?	1. Always 2. Often 3. Sometimes 4. Seldom 5. Never	
csrq_2	Do you have at least one other adult you can talk to if you need support?		

Home

BlokN	The child's use of screen activities – Items based on article by Cheung (2016)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN_0	Home The next questions are about everyday life in [name of the child]'s home.		
IntroN	First, a couple of questions about screen activities in [name of the child]'s home.		
childact_1	On a normal weekday, how much time does [name of the child] spend on an iPad, tablet or smartphone (e.g. playing games or watching a movie)?	1. No time at all	

		2. Less than ½ an hour a day 3. ½-1 hour a day 4. 1-2 hours a day 5. More than 2 hours a day	
childact_2	On a normal weekday, how much time does [name of the child] spend watching TV or movies on the TV or on a computer?		

BlokN1	Breastfeeding – BUD/FIV		
IntroN1	The next couple of questions are about breastfeeding of [name of the child].		Filter: only ask the child's mother.
breastf_9mdr_1	Did you start breastfeeding after giving birth?	1. Yes 2. No	
breastf_9mdr_2	Do you still breastfeed?		breastf_9mdr_1=1
breastf_9mdr_3a	How long was [name of the child] breastfeed exclusively, receiving no formula or other kinds of food? Please state the age (in number of months and, where relevant, weeks) at which [name of the child] stopped being mainly breastfed. 4½ months is to be written as 4 months and 2 weeks. The child's age in months.		breastf_9mdr_1=1
breastf_9mdr_3b	The child's age in weeks.		breastf_9mdr_1=1
breastf_9mdr_4a	When did you stop breastfeeding entirely?		breastf_9mdr_2=2

	<p>Please state [name of the child]'s age in number of months and, where relevant, weeks. 6½ months is to be written as 6 months and 2 weeks.</p> <p>The child's age in months.</p>		
breastf_9mdr_4b	The child's age in weeks.		breastf_9mdr_2=2

BlokN3	Language at home – Based on BørnUngeliv.dk – toddlers		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN3	Next is a question about what languages are spoken at home.		
language_1	What languages do you speak in [name of the child]'s home?	<ol style="list-style-type: none"> 1. Always Danish 2. Equal amounts of Danish and one or more other languages. 3. Mostly one or more languages other than Danish 4. Always one or more languages other than Danish 	

<p>language_201_elm_1- language_201_elm_31</p>	<p>What other languages? (You can provide more than one answer)</p>	<ol style="list-style-type: none"> 1. Arabic 2. Bengali 3. Bosnian/Serbian/Croatian 4. Bulgarian 5. English 6. Farsi 7. French 8. Faroese 9. Hindi 10. Italian 11. Japanese 12. Kurdish 13. Lithuanian 14. Mandarin Chinese 15. Norwegian 16. Pashto 17. Polish 18. Portuguese 19. Rumanian 20. Russian 21. Sinhala 22. Somali 23. Spanish 24. Swedish 25. Tagalog 26. Turkish 27. German 	<p>language_1=2,3,4</p>
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		28. Ukrainian 29. Urdu 30. Vietnamese 31. One or more other languages	
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Blok N4	Employment and finances – FIV, BUD		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN4	The next couple of questions are about your current status in the labour market and your work routines.		
employm_101_elm_1- employm_101_elm_10	What is your current employment status? You may choose more than one. For instance, if you are both on parental leave and working part time, you should choose two. If you are on parental leave full time, you should only choose one.	1. Self-employed (have your own company) 2. Employment, wage earner 3. Student, apprentice 4. Co-employed spouse/employed in my spouse's company 5. Retired	

		6. Stay-at-Home mum/dad 7. Unemployed or in job training 8. On parental leave 9. On sick leave 10. Other	
employm_2	How many hours (including overtime) do you work in a normal week in your current occupation/education?		employm_101_elm_1=1 OR employm_101_elm_2=1 OR employm_101_elm_3=1 OR employm_101_elm_4=1
employm_3	Overall, how would you describe your/your family's financial situation?	1. Very good 2. Good 3. Alright 4. Not so good 5. Bad (9) Don't know	

BloKS	Parents' phone use – Based on SAS (Kwon et al., 2013)		housing_1=1,3 OR housing_2=1,2,3,4 OR
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			housing_4=1
IntroS_0	The next couple of questions are about you and your habits.		
IntroS	First, some statements about how you use your mobile phone. In each case, evaluate whether the statement is a fitting description of you.		
parmobi_1	I think about my mobile phone, also when I am not using it.	<ol style="list-style-type: none"> 1. Not true at all. 2. A little bit true 3. Somewhat true 4. True to a large extent 5. Very true 6. Completely true 	
parmobi_2	I often check my mobile phone so as not to miss out on what is going on (e.g. on Twitter, Facebook, Instagram or news media)		

Blok T	Smoking – WHO		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroT	Next are some questions on smoking and drinking habits.		
smoking_1	Do you smoke?	<ol style="list-style-type: none"> 1. No 2. Yes, on a daily basis 3. Yes, every now and then 	
smoking_2	Is tobacco smoked indoors in [name of the child]’s home?	<ol style="list-style-type: none"> 1. Yes, on a daily basis 2. Yes, once or several times a week 3. Yes, on a monthly basis 4. Yes, but more rarely 5. No, never 	

Blok U	Alcohol – AUDIT, DSAM,		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroU			
drinking_1	How often do you have a drink containing alcohol?	<ol style="list-style-type: none"> 1. Never 2. Monthly or less 	

		<ol style="list-style-type: none"> 3. 2-4 times a month 4. 2-3 times a week 5. 4 or more times a week 	
drinking_2	How many standard drinks containing alcohol do you have on a typical day when drinking?	<ol style="list-style-type: none"> 1. 1 or 2 2. 3 or 4 3. 5 or 6 4. 7 to 9 5. 10 or more 	drinking_1=2,3,4,5
drinking_3	How often do you have five or more drinks on one occasion?	<ol style="list-style-type: none"> 1. Never 2. Less than monthly 3. Monthly 4. Weekly 5. Daily or almost daily 	drinking_1=2,3,4,5

Blok V	Time spent with adults under the influence. BørnUngeliv.dk toddlers		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroV			
drinking_v_1	Does it occur that [name of the child] spends time with adults who are <u>under the influence</u> of alcohol or other intoxicating agents?	<ol style="list-style-type: none"> 1. No, never 2. No, seldom 3. Yes, sometimes 4. Yes, most of the time 5. Yes, always (9) Don't know 	

Day care/ child care

Blok W	Day care/ child care – questions build on BUD items by MPO and MS		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroW_0	Day care/child care		
IntroW	The last questions are about how [name of the child] is looked after.		
daycare_9mdr_1	How is [name of the child] currently looked after during the day?	<ol style="list-style-type: none"> 1. Municipal Age-integrated day care for 0 to 6-year-olds 2. Municipal Day care institution for 0 to 2-year-olds (e.g. nursery) 3. Private day care 4. Special needs day care (due to limited physical or mental abilities.) 5. Other (e.g. in a private care facility with support from the 	

		municipality or taken care of by mother/father/others)	
daycare_9mdr_2	Is the day care institution ...	<ol style="list-style-type: none"> 1. Run by the municipality 2. Self-owned 3. Outsourced 4. Private (9) Don't know 	daycare_9mdr_1=1,2
daycare_9mdr_3	Is the day care institution ...	<ol style="list-style-type: none"> 1. Municipal 2. Private (9) Don't know 	daycare_9mdr_1=3
daycare_9_mdr_4	How is the [name of the child] looked after on workdays?	<ol style="list-style-type: none"> 1. Private care arrangement similar to daycare 2. Institution-like private care arrangement 3. Looked after at home by his/her mother 4. Looked after at home by his/her father 5. Looked after at home by another person (e.g. a maid or an au pair) 6. Looked after at someone else's house (e.g. relatives) 7. Private daycare ("Puljeordning"), where the daycare receives support 	daycare_9mdr_1=5

		from a specific government fund	
		8. Other type of care	
daycare_9mdr_5	How many hours a day does [name of the child] spend in daycare/the care arrangement?	<ol style="list-style-type: none"> 1. Less than 4 hours 2. 4 hours 3. 4½ hours 4. 5 hours 5. 5½ hours 6. 6 hours 7. 6½ hours 8. 7 hours 9. 7½ hours 10. 8 hours 11. 8½ hours 12. 9 hours 13. 9½ hours 14. 10 hours 	daycare_9mdr_2=1,2,3,4,9 OR daycare_9mdr_3=1,2,9 OR daycare_9mdr_4=1,2,5,6,7,8
daycare_9mdr_6	How old was [name of the child] when he/she started day care/the care arrangement? Please state the answer in months.		daycare_9mdr_2=1,2,3,4,9 OR daycare_9mdr_3=1,2,9 OR daycare_9mdr_4=1,2,5,6,7,8
Outtro	Thank you for filling out the survey. All parents participating this month will be entered into a lottery for 5 x 1000 DKK.		

	<p>When the first round of the survey is over, there will be another lottery for 3 x 10,000 DKK for all parents who filled out the questionnaire.</p> <p>If your family needs help, we encourage you to reach out to a health care professional or, for instance, a pedagogue at your child's day care.</p> <p>The next round of the SPOR survey takes place in two years. We very much hope that you will participate again.</p> <p>The first results will be published in the first half of 2019.</p> <p>You can read more and ask questions about SPOR – Children's Development and Wellbeing throughout life at www.vive.dk/spor</p>		
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SPOR – Children's development and wellbeing throughout life

Questionnaire: 2 years

BlokA	Co-parenting - SBO inspired by BørnUngeliv.dk, toddlers		FILTER
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IntroA_0	<p>Welcome to the questionnaire for the study SPOR – Children’s development and wellbeing throughout life. This questionnaire is for parents with two-year-old children.</p> <p>The questionnaire is about [name of the baby] and your family.</p> <p>It is important to answer all the questions even if you do not feel that all questions apply to your situation.</p> <p>Therefore, please answer all questions as well as possible and state the answer that immediately comes to mind.</p> <p>There are no right or wrong answers.</p> <p>Thank you for participating in the study. Your answers will be saved every time you move on to the next page.</p>		
IntroA	The first questions are about who [name of the child] lives with.		
housing_1	Do you and [name of the child]’s other parent live together?	<ol style="list-style-type: none"> 1. Yes 2. No 3. The child has no other parent 	
housing_2	Where does [name of the child] currently live?	<ol style="list-style-type: none"> 1. The child takes turns living with each parent – time is split equally 2. The child takes turns living with each parent – most of the time with me 3. The child takes turns living with each parent – most of the time with the other parent 4. Only with me 	housing_1=2

		5. Only with the other parent 6. Other	
housing_3	Does [name of the child] spend time with his/her other parent?	1. Yes, and sometimes stays the night 2. Yes, but doesn't stay the night (5) No, the child does not spend time with its other parent.	housing_2=4
housing_4	Does [name of the child] spend time with you?	1. Yes, and sometimes stays the night 2. Yes, but doesn't stay the night (5) No, the child does not spend time with me.	housing_2=5,6
housing_5	If yes, how many days a month?		housing_3=1 OR housing_4=1
housing_6	If yes, how many days a month?		housing_3=2

BlokN2	Disabilities/Long-term illness – BUD		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN2	The next questions are about the birth and the health of the child.		
handicap_0	Was [name of the child] born on time?	1. Yes, from the 37 th week of pregnancy to two weeks after the due date.	

		<p>2. No, in the 32nd to 36th week of pregnancy.</p> <p>3. No, in the 28th to 31st week of pregnancy.</p> <p>4. No, in the 27th week of pregnancy or earlier.</p> <p>5. No, more than two weeks after the due date.</p> <p>9. I don't know/don't remember</p>	
handicap_1	Does [name of the child] have a long-term illness or disability?	<p>1. Yes</p> <p>2. No</p> <p>(9) I don't know</p>	
handicap_2	Is [name of child] limited by the disease or disability on a daily basis? (e.g. the child is not able to play or participate in everyday activities in the same way as his/her peers.)	<p>1. Yes, a lot</p> <p>2. Yes, to some extent</p> <p>3. Yes, a little</p> <p>4. No</p>	handicap_1=1

Blok B	Socio-emotional development – ASQ:SE-2		<p>housing_1=1,3 OR</p> <p>housing_2=1,2,3,4</p> <p>OR</p> <p>housing_4=1</p>
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	The 33 questions in this section are not shown, as they come from ASQ:SE-2, which is a licensed tool for assessing socio-emotional development.		
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BlokC	Language development: 2-5 Language comprehension – The child’s ability to understand spoken language		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroC	The next couple of questions are about your child’s ability to understand spoken language and remember instructions.		
langdeva_2aar_1	Has difficulty understanding words	1. Does not apply 2. Applies sometimes/to some extent 3. Applies	
langdeva_2aar_2	Has difficulty understanding simple instructions		
langdeva_2aar_3	Has difficulty with opposite words like yes/no, happy/sad		
langdeva_2aar_4	Has difficulty with terms like big/small, in/on		
langdeva_2aar_5	Has difficulty remembering two instructions (e.g. put on your pyjamas and go to the bed)		
langdeva_2aar_6	Has difficulty understanding a story he/she hears read aloud		
langdeva_2aar_7	Has difficulty with the meaning of if – later (e.g. if you eat food now you will get ice cream later)		

BlokD	Language development: 2-5 Spoken language – The child’s ability to speak, pronounce words or express him/herself		housing_1=1,3 OR housing_2=1,2,3,4 OR
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			housing_4=1
IntroD	The following questions are about the child's ability to speak, pronounce words and express him/herself.		
langdevb_2aar_1	Has difficulty saying single words and short sentences.	<ol style="list-style-type: none"> 1. Does not apply 2. Applies sometimes/to some extent 3. Applies 	
langdevb_2aar_2	Has difficulty speaking so that his/her parents understand him		
langdevb_2aar_3	Has difficulty speaking so that strange people understand him/her		
langdevb_2aar_4	Makes language sound mistakes (e.g. says t instead of f, like tota instead of sofa)		
langdevb_2aar_5	Has difficulty finding words or uses alternate words (e.g. says food instead of spoon)		
langdevb_2aar_6	Has a hoarse voice		
langdevb_2aar_7	Has a shrill voice		
langdevb_2aar_8	Stutters, or repeats words or parts of words over and over		
langdevb_2aar_9	Speaks so quickly that it is hard to comprehend what he/she is saying		
langdevb_2aar_10	Speaks very unclearly/mumbles		

BlokE	Stimulating activities. Items from the Irish Study 'Preparing for Life'		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
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IntroE	The next questions are about the things you do with [name of the child]. You have to think about how often you have done these activities with [name of the child] in the past month.		
IntroE1	In the past month how often did you...		
stimact_2aar_1	Sing nursery rhymes like “Jack and Jill” with him/her?	<ol style="list-style-type: none"> 1. More than once a day 2. About once a day 3. A few times a week 4. A few of times a month 5. Rarely 6. Not at all 	
stimact_2aar_2	Sing songs with him/her?		
stimact_2aar_3	Read stories to [name of the child]?		

BlokF	Temperament – FIV		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroD	The next question is about [name of the child]’s temperament.		
temper	How do you generally asses [name of the child]’s temperament?	<ol style="list-style-type: none"> 1. Has a bad temperament (choose this, if your child more often and/or more intensely than 	

		<p>other children reacts to situation with frustration, anger, anxiety or withdrawal)</p> <p>2. Has an average temperament (Choose this, if your child appears to have a temperament like that of most other children)</p> <p>3. Doesn't have much of a temperament (choose this, if your child rarely and/or less intensely than other children reacts to situations with frustration, anger, anxiety or withdrawal)</p>	
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Being a parent

BlokG	Experience of parenthood – PSS		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroF	The next questions are about being the parent of a small child and some of the emotions and conflicts you may experience as a parent.		

	<p>Below are a number of statements that describe different feelings and experiences connected to being a parent. Assess each of the statements based on how your relationship to your child(ren) generally is.</p> <p>State how much you agree or disagree with each of the following statements:</p>		
pss_1	I am happy in my role as a parent.	1. Strongly disagree 2. Disagree 3. Neither agree nor disagree 4. Agree 5. Strongly agree	
pss_2	There is little or nothing I wouldn't do for my child(ren) if it was necessary.		
pss_3	Caring for my child(ren) sometimes takes more energy than I have to give.		
pss_4	I sometimes worry whether I am doing enough for my child(ren).		
pss_5	I feel close to my child(ren)..		
pss_6	I enjoy spending time with my child(ren).		
pss_7	My child(ren) is (are) an important source of affection for me.		
pss_8	Having children gives me a more certain and optimistic view of the future.		
pss_9	The major source of stress in my life is my child(ren).		
pss_10	Having children leaves little time and flexibility in my life.		
pss_11	Having children has been a financial burden.		

pss_12	It is difficult to balance different responsibilities because of my child(ren).		
pss_13	The behavior of my child(ren) is often embarrassing or stressful to me.		
pss_14	If I had it to do over again, I might decide not to have children.		
pss_15	I feel overwhelmed by the responsibility of being a parent.		
pss_16	Having children has meant having too few choices and too little control over my life.		
pss_17	I am satisfied as a parent.		
pss_18	I find my child(ren) enjoyable.		

BlokH	Parenting style/family profile - SEAM family profile questionnaire II		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroH	The 17 questions in this section are not shown as they come from the SEAM family profile, which is a licensed tool to assesses parent and caregiver strengths and helps identify areas in which they need more supports and resources to foster their child's social-emotional skills.. The questionnaire used here is the version for toddlers (18-36 months).		

BlokH1	Parent-child conflicts - FIV		housing_1=1,3 OR
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			housing_2=1,2,3,4 OR housing_4=1
IntroH_0	The next couple of questions are about you and your child.		
IntroH	<p>All children misbehave at times or do something that is wrong, “dangerous” or that the parents do not like.</p> <p>Parents have many ways of handling these kinds of problems. Below are a number of statements that describe ways to discipline your child.</p> <p>You are asked to consider every statement and choose the number on a scale from 1 to 7 that best describes your way of disciplining your child in the past two months.</p> <p>When my child will not calm down or is hard to handle...</p>		
conflict_1	... I grab his/her arm firmly.	1 Never 2 3 4 5 6 7 Always	
conflict_2	...Slap him/her lightly		
conflict_3	... I shake him/her.		
conflict_4	... I smack him/her.		
conflict_5	... I hit him/her.		

BlokJ	Relationship		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroH1	The next questions are about your relationship, if you have a partner.		
partner	Do you have a partner?	1. Yes 2. No	housing_1=3 OR housing_2=1,2,3,4 OR housing_4=1

BlokK	Satisfaction in the relationship – CSI, DAS		housing_1=1 OR partner=1
IntroJ			
IntroK1	Please state how well the following statements describe how you see your relationship.		
relsat_1	My relationship with my partner makes me happy.	1. Not at all true 2. A little true 3. Somewhat true	housing_1=1 OR partner=1

		<ul style="list-style-type: none"> 4. Mostly true 5. Almost completely true 6. Completely true 	
relnsat_2	I have a warm and comfortable relationship with my partner		housing_1=1 OR partner=1
IntroK3	Please choose the answer that you feel best describes you and your partner's relationship.		housing_1=1 OR partner=1
relnsat_3	How rewarding is your relationship with your partner?	<ul style="list-style-type: none"> 1. Not at all 2. A little 3. Somewhat 4. Mostly 5. Almost completely 6. Completely 	housing_1=1 OR partner=1
relnsat_4	In general, how satisfied are you with your relationship?		housing_1=1 OR partner=1
relnsat_5	How often do you and your partner argue?	<ul style="list-style-type: none"> 1. All the time 2. Most of the time 3. Occasionally 4. Rarely 5. Never 	housing_1=1 OR partner=1

BlokL	Relationship/conflicts between divorced parents – inspired by Aron 1994		housing_2=1,2,3,4 OR housing_4=1
IntroL	The following statement is about how you and the child's other parent co-parent. How much do you agree or disagree with the statement?		housing_2=1,2,3 OR housing_3=1,2 OR housing_4=1
Coop	We co-parent about [name of the child]'s daily life.	<ol style="list-style-type: none"> 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree (9) Don't know 	housing_2=1,2,3 OR housing_3=1,2 OR housing_4=1

BlokM	Mental health – WHO – 5 Well-being Index (1999 version)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroM_0	How have you been feeling?		
IntroM	The next questions are about how you have been feeling lately. Please indicate for each of the five statements which is closest to how you have been feeling over the last two		

	weeks. Notice that higher numbers mean better well-being. Over the past two weeks:		
who5_1	I have felt cheerful and in good spirits	(5) All the time (4) Most of the time (3) More than half of the time (2) Less than half of the time (1) Some of the time (0) At no time	
who5_2	I have felt calm and relaxed.		
who5_3	I have felt active and vigorous.		
who5_4	I woke up feeling fresh and rested.		
who5_5	My daily life has been filled with things that interest me.		

BlokN	Parents' social relations – CSRQ (Copenhagen Social Relations Questionnaire)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN_0	The following questions are about you and your network		
IntroN			
csr_q_1	Would anyone in your network (e.g. family or friends) help you with daily practical matters if necessary?	1. Always 2. Often 3. Sometimes 4. Seldom	

		5. Never	
csrq_2	Do you have at least one other adult you can talk to if you need support?		

Home

BlokN1	The child's use of screen activities – Items based on article by Cheung (2016)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN1_0	Home The next questions are about everyday life in [name of the child]'s home.		
IntroN1	First, a couple of questions about screen activities in [name of the child]'s home.		
childact_1	On a normal weekday, how much time does [name of the child] spend on an iPad, tablet or smartphone (e.g. playing games or watching a movie)?	<ol style="list-style-type: none"> 1. No time at all 2. Less than ½ an hour a day 3. ½-1 hour a day 4. 1-2 hours a day 5. More than 2 hours a day 	
childact_2	On a normal weekday, how much time does [name of the child] spend watching TV or movies on the TV or on a computer?		

Blok N3	Language at home – Based on skolesundhed.dk – småbørn		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN3	Next is a question about what languages are spoken at home.		
language_1	What languages do you speak in [name of the child]’s home?	<ol style="list-style-type: none"> 1. Always Danish 2. Equal amounts of Danish and one or more other languages. 3. Mostly one or more languages other than Danish 4. Always one or more languages other than Danish 	
language_201_elm_1- language_201_elm_31	What other languages? (You can provide more than one answer)	<ol style="list-style-type: none"> 1. Arabic 2. Bengali 3. Bosnian/Serbian/Croatian 4. Bulgarian 5. English 6. Farsi 7. French 8. Faroese 9. Hindi 10. Italian 	language_1=2,3,4

		11. Japanese 12. Kurdish 13. Lithuanian 14. Mandarin Chinese 15. Norwegian 16. Pashto 17. Polish 18. Portuguese 19. Rumanian 20. Russian 21. Sinhala 22. Somali 23. Spanish 24. Swedish 25. Tagalog 26. Turkish 27. German 28. Ukrainian 29. Urdu 30. Vietnamese 31. One or more other languages	
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BlokN4	Employment and finances – FIV, BUD		housing_1=1,3 OR housing_2=1,2,3,4
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			OR housing_4=1
IntroN4	The next couple of questions are about your current status in the labour market and your work routines.		
employm_101_elm_1- employm_101_elm_10	What is your current employment status? You may choose more than one. For instance, if you are both on parental leave and working part time, you should choose two. If you are on parental leave full time, you should only choose one.	<ol style="list-style-type: none"> 1. Self-employed (have your own company) 2. Employment, wage earner 3. Student, apprentice 4. Co-employed spouse/employed in my spouse's company 5. Retired 6. Stay-at-Home mum/dad 7. Unemployed or in job training 8. On parental leave 9. On sick leave 10. Other 	
employm_2	How many hours (including overtime) do you work in a normal week in your current occupation/education?		employm_101_elm_1=1 OR employm_101_elm_2=1 OR employm_101_elm_3=1 OR employm_101_elm_4=1
employm_3	Overall, how would you describe your/your family's financial situation?	<ol style="list-style-type: none"> 1. Very good 2. Good 	

		3. Alright 4. Not so good 5. Bad (9) Don't know	
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BlokS	Parents' phone use – Based on SAS Kwon et al. (2013)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroS_0	The next couple of questions are about you and your habits.		
IntroS	First, some statements about how you use your mobile phone. In each case, evaluate whether the statement is a fitting description of you.		
parmobi_1	I think about my mobile phone, also when I am not using it.	1. Not true at all. 2. A little bit true 3. Somewhat true 4. True to a large extent 5. Very true 6. Completely true	
parmobi_2	I often check my mobile phone so as not to miss out on what is going on (e.g. on Twitter, Facebook, Instagram or news media)		

BlokT	Smoking – WHO		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroT	Next are some questions on smoking and drinking habits.		
smoking_1	Do you smoke?	<ol style="list-style-type: none"> 1. No 2. Yes, on a daily basis 3. Yes, every now and then 	
smoking_2	Is tobacco smoked indoors in [name of the child]’s home?	<ol style="list-style-type: none"> 1. Yes, on a daily basis 2. Yes, once or several times a week 3. Yes, on a monthly basis 4. Yes, but more rarely 5. No, never 	

BlokU	Alcohol – AUDIT, DSAM,		housing_1=1,3 OR housing_2=1,2,3,4 OR
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			housing_4=1
IntroU			
drinking_1	How often do you have a drink containing alcohol?	<ol style="list-style-type: none"> 1. Never 2. Monthly or less 3. 2-4 times a month 4. 2-3 times a week 5. 4 or more times a week 	
drinking_2	How many standard drinks containing alcohol do you have on a typical day when drinking?	<ol style="list-style-type: none"> 1. 1 or 2 2. 3 or 4 3. 5 or 6 4. 7 to 9 5. 10 or more 	drinking_1=2,3,4,5
drinking_3	How often do you have five or more drinks on one occasion?	<ol style="list-style-type: none"> 1. Never 2. Less than monthly 3. Monthly 4. Weekly 5. Daily or almost daily 	drinking_1=2,3,4,5

Blok V	Time spent with adults under the influence. BørnUngeliv, toddlers		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroV			

drinking_v_1	Does it occur that [name of the child] spends time with adults who are <u>under the influence</u> of alcohol or other intoxicating agents?	1. No, never 2. No, seldom 3. Yes, sometimes 4. Yes, most of the time 5. Yes, always (9) Don't know	
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Day care/child care

Blok W	Day care/ child care – questions build on BUD by MPO and MS		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroW_0	Day care/child care		
IntroW	The last questions are about how [name of the child] is looked after.		
daycare_2aar_1	How is [name of the child] currently looked after during the day?	1. Municipal Age-integrated day care for 0 to 6-year-olds 2. Municipal Day care institution for approx. 0 to 2-year-olds (e.g. nursery)	

		<ul style="list-style-type: none"> 3. Municipal Day care institution for approx. 3 to 5-year-olds (e.g. kindergarten) 4. Private day care 5. Special needs day care (due to limited physical or mental abilities.) 6. Other (e.g. in a private care facility with support from the municipality or taken care of by mother/father/others) 	
daycare_2aar_2	Is the day care institution ...	<ul style="list-style-type: none"> 1. Run by the municipality 2. Self-owned 3. Outsourced 4. Private (9) Don't know 	daycare_2aar_1=1,2,3
daycare_2aar_3	Is the day care institution ...	<ul style="list-style-type: none"> 1. Municipal 2. Private (9) Don't know 	daycare_2aar_1=4
daycare_2aar_4	How is the [name of the child] looked after on workdays?	<ul style="list-style-type: none"> 1. Private care arrangement similar to daycare 2. Institution-like private care arrangement 3. Looked after at home by his/her mother 4. Looked after at home by his/her father 	daycare_2aar_1=6

		<p>5. Looked after at home by another person (e.g. a maid or an au pair)</p> <p>6. Looked after at someone else's house (e.g. relatives)</p> <p>7. Private daycare ("Puljeordning"), where the daycare received support from a specific government fund</p> <p>8. Other type of care</p>	
daycare_2aar_5	How many hours a day does [name of the child] spend in daycare/the care arrangement?	<p>1. Less than 4 hours</p> <p>2. 4 hours</p> <p>3. 4½ hours</p> <p>4. 5 hours</p> <p>5. 5½ hours</p> <p>6. 6 hours</p> <p>7. 6½ hours</p> <p>8. 7 hours</p> <p>9. 7½ hours</p> <p>10. 8 hours</p> <p>11. 8½ hours</p> <p>12. 9 hours</p> <p>13. 9½ hours</p> <p>14. 10 hours</p>	<p>daycare_2aar_2=1,2,3,4,9</p> <p>OR</p> <p>daycare_2aar_3=1,2,9</p> <p>OR</p> <p>daycare_2aar_4=1,2,5,6,7,8</p>
daycare_2aar_6	How old was [name of the child] when he/she started day care/the care arrangement? Please state the answer in months.		<p>daycare_2aar_2=1,2,3,4,9</p> <p>OR</p> <p>daycare_2aar_3=1,2,9</p> <p>OR</p>

			daycare_2aar_4=1,2,5,6,7,8
Outtro	<p>Thank you for filling out the survey.</p> <p>All parents participating this month will be entered into a lottery for 5 x 1000 DKK.</p> <p>When the first round of the survey is over, there will be another lottery for 3 x 10,000 DKK for all parents who filled out the questionnaire.</p> <p>If your family needs help, we encourage you to reach out to a health care professional or, for instance, a pedagogue at your child's day care.</p> <p>The next round of the SPOR survey takes place in two years. We very much hope that you will participate again.</p> <p>The first results will be published tin the first half of 2019.</p> <p>You can read more and ask questions about SPOR – Children's Development and Wellbeing throughout life at www.vive.dk/spor</p>		

SPOR – Children’s development and wellbeing throughout life

Questionnaire: 3 years

BlokA	Co-parenting - SBO inspired by BørnUngeliv.dk, toddlers		FILTER
IntroA_0	<p>Welcome to the questionnaire for the study SPOR – Children’s development and wellbeing throughout life. This questionnaire is for parents with 3-year-old children.</p> <p>The questionnaire is about [name of the baby] and your family.</p> <p>It is important to answer all the questions even if you do not feel that all questions apply to your situation.</p> <p>Therefore, please answer all questions as well as possible and state the answer that immediately comes to mind.</p> <p>There are no right or wrong answers.</p> <p>Thank you for participating in the study. Your answers will be saved every time you move on to the next page.</p>		
IntroA	<p>The first questions are about who [name of the child] lives with.</p>		
housing_1	<p>Do you and [name of the child]’s other parent live together?</p>	<ol style="list-style-type: none"> 1. Yes 2. No 3. The child has no other parent 	

housing_2	Where does [name of the child] currently live?	<ol style="list-style-type: none"> 1. The child takes turns living with each parent – time is split equally 2. The child takes turns living with each parent – most of the time with me 3. The child takes turns living with each parent – most of the time with the other parent 4. Only with me 5. Only with the other parent 6. Other 	housing_1=2
housing_3	Does [name of the child] spend time with his/her other parent?	<ol style="list-style-type: none"> 1. Yes, and sometimes stays the night 2. Yes, but doesn't stay the night (5) No, the child does not spend time with its other parent. 	housing_2=4
housing_4	Does [name of the child] spend time with you?	<ol style="list-style-type: none"> 1. Yes, and sometimes stays the night 2. Yes, but doesn't stay the night (5) No, the child does not spend time with me. 	housing_2=5,6
housing_5	If yes, how many days a month?		housing_3=1 OR

			housing_4=1
housing_6	If yes, how many days a month?		housing_3=2

BlokN2	Disabilities/Long-term illness – BUD		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN2	The next questions are about the birth and the health of the child.		
handicap_0	Was [name of the child] born on time?	<p>1. Yes, from the 37th week of pregnancy to two weeks after the due date.</p> <p>2. No, in the 32nd to 36th week of pregnancy.</p> <p>3. No, in the 28th to 31st week of pregnancy.</p> <p>4. No, in the 27th week of pregnancy or earlier.</p> <p>5. No, more than two weeks after the due date.</p> <p>9. I don't know/don't remember</p>	
handicap_1	Does [name of the child] have a long-term illness or disability?	<p>1. Yes</p> <p>2. No</p> <p>(9) I don't know</p>	

handicap_2	Is [name of child] limited by the disease or disability on a daily basis? (e.g. the child is not able to play or participate in everyday activities in the same way as his/her peers.)	<ol style="list-style-type: none"> 1. Yes, a lot 2. Yes, to some extent 3. Yes, a little 4. No 	handicap_1=1
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BlokB	Socio-emotional development – ASQ:SE-2		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
	The 37 questions in this section are not shown, as they come from ASQ:SE-2, which is a licensed tool for assessing socio-emotional development.		

BlokC	Language development: 2-5 Language comprehension – The child’s ability to understand spoken language		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroC	The next couple of questions are about your child’s ability to understand spoken language and remember instructions.		
langdeva_3aar_1	Has difficulty understanding words	<ol style="list-style-type: none"> 1. Does not apply 	

		2. Applies sometimes/to some extent 3. Applies	
langdeva_3aar_2	Has difficulty understanding simple instructions		
langdeva_3aar_3	Has difficulty with opposite words like yes/no, happy/sad		
langdeva_3aar_4	Has difficulty with terms like big/small, in/on		
langdeva_3aar_5	Has difficulty remembering two instructions (e.g. put on your pyjamas and go to the bed)		
langdeva_3aar_6	Has difficulty understanding a story he/she hears read aloud		
langdeva_3aar_7	Has difficulty with the meaning of if – later (e.g. if you eat food now you will get ice cream later)		

BlokD	Language development: 2-5 Spoken language – The child’s ability to speak, pronounce words or express him/herself		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroD	The following questions are about the child’s ability to speak, pronounce words and express him/herself.		
langdevb_3aar_1	Has difficulty saying single words and short sentences.	1. Does not apply 2. Applies sometimes/to some extent 3. Applies	
langdevb_3aar_2	Has difficulty speaking so that his/her parents understand him		
langdevb_3aar_3	Has difficulty speaking so that strange people understand him/her		

langdevb_3aar_4	Makes language sound mistakes (e.g. says t instead of f, like tota instead of sofa)		
langdevb_3aar_5	Has difficulty finding words or uses alternate words (e.g. says food instead of spoon)		
langdevb_3aar_6	Has a hoarse voice		
langdevb_3aar_7	Has a shrill voice		
langdevb_3aar_8	Stutters, or repeats words or parts of words over and over		
langdevb_3aar_9	Speaks so quickly that it is hard to comprehend what he/she is saying		
langdevb_3aar_10	Speaks very unclearly/mumbles		

BlokE	Stimulating activities. Items from the Irish study 'Preparing for Life'		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroE	The next questions are about the things you do with [name of the child]. You have to think about how often you have done these activities with [name of the child] in the past month.		
IntroE1	In the past month how often did you...		
stimact_3aar_1	Sing nursery rhymes like "Jack and Jill" with him/her?	<ol style="list-style-type: none"> 1. More than once a day 2. About once a day 3. A few times a week 4. A few of times a month 5. Rarely 6. Not at all 	

stimact_3aar_2	Sing songs with him/her?		
stimact_3aar_3	Read stories to [name of the child]?		

BlokF	Temperament – FIV		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroF	The next question is about [name of the child]’s temperament.		
temper	How do you generally asses [name of the child]’s temperament?	<ol style="list-style-type: none"> 1. Has a bad temperament (choose this, if your child more often and/or more intensely than other children reacts to situation with frustration, anger, anxiety or withdrawal) 2. Has an average temperament (Choose this, if your child appears to have a temperament like that of most other children) 3. Doesn’t have much of a temperament (choose this, if your child rarely and/or less intensely than other children reacts to situations with frustration, anger, anxiety or withdrawal) 	

Being a parent

BlokG	Experience of parenthood – PSS		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroG_0	The next questions are about being the parent of a small child and some of the emotions and conflicts you may experience as a parent.		
IntroG	Below are a number of statements that describe different feelings and experiences connected to being a parent. Assess each of the statements based on how your relationship to your child(ren) generally is. State how much you agree or disagree with each of the following statements:		
pss_1	I am happy in my role as a parent.	1. Strongly disagree 2. Disagree 3. Neither agree nor disagree 4. Agree 5. Strongly agree	
pss_2	There is little or nothing I wouldn't do for my child(ren) if it was necessary.		
pss_3	Caring for my child(ren) sometimes takes more energy than I have to give.		
pss_4	I sometimes worry whether I am doing enough for my child(ren).		

pss_5	I feel close to my child(ren)..		
pss_6	I enjoy spending time with my child(ren).		
pss_7	My child(ren) is (are) an important source of affection for me.		
pss_8	Having children gives me a more certain and optimistic view of the future.		
pss_9	The major source of stress in my life is my child(ren).		
pss_10	Having children leaves little time and flexibility in my life.		
pss_11	Having children has been a financial burden.		
pss_12	It is difficult to balance different responsibilities because of my child(ren).		
pss_13	The behavior of my child(ren) is often embarrassing or stressful to me.		
pss_14	If I had it to do over again, I might decide not to have children.		
pss_15	I feel overwhelmed by the responsibility of being a parent.		
pss_16	Having children has meant having too few choices and too little control over my life.		
pss_17	I am satisfied as a parent.		
pss_18	I find my child(ren) enjoyable.		

BlokH	Parenting style/family profile - SEAM family profile questionnaire III		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroH	The 17 questions in this section are not shown as they come from the SEAM family profile which is a licensed tool to assesses parent and caregiver strengths and helps identify areas in which they need more supports and resources to		

	foster their child's social-emotional skills.. The questionnaire used here is the version for preschool (36-66 months).		
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BlokH1	Parent-child conflicts- FIV		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroH1_0	The next couple of questions are about you and your child.		
IntroH1	<p>All children misbehave at times or do something that is wrong, “dangerous” or that the parents do not like.</p> <p>Parents have many ways of handling these kinds of problems. Below are a number of statements that describe ways to discipline your child.</p> <p>You are asked to consider every statement and choose the number on a scale from 1 to 7 that best describes your way of disciplining your child in the past two months.</p> <p>When my child misbehaves, I...</p>		
conflict_1	... grab his/her arm firmly.	1 Never 2 3 4 5 6 7 Always	

conflict_2	... slap him/her lightly		
conflict_3	... shake him/her.		
conflict_4	... spank him/her.		
conflict_5	...hit him/her.		

BlokJ	Relationship		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroJ	The next questions are about your relationship, if you have a partner.		
Partner	Do you have a partner?	1. Yes 2. No	housing_1=3 OR housing_2=1,2,3,4 OR housing_4=1

BlokK	Satisfaction in the relationship – CSI, DAS		housing_1=1 OR partner=1
IntroK			
IntroK1	Please state how well the following statements describe how you see your relationship.		

relnsat_1	My relationship with my partner makes me happy.	<ol style="list-style-type: none"> 1. Not at all true 2. A little true 3. Somewhat true 4. Mostly true 5. Almost completely true 6. Completely true 	housing_1=1 OR partner=1
relnsat_2	I have a warm and comfortable relationship with my partner		housing_1=1 OR partner=1
IntroJ3	Please choose the answer that you feel best describes you and your partner's relationship.		housing_1=1 OR partner=1
relnsat_3	How rewarding is your relationship with your partner?	<ol style="list-style-type: none"> 1. Not at all 2. A little 3. Somewhat 4. Mostly 5. Almost completely 6. Completely 	housing_1=1 OR partner=1
relnsat_4	In general, how satisfied are you with your relationship?		housing_1=1 OR partner=1
relnsat_5	How often do you and your partner argue?	<ol style="list-style-type: none"> 1. All the time 2. Most of the time 3. Occasionally 	housing_1=1 OR partner=1

		4. Rarely 5. Never	
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BlokL	Relationship/conflicts between divorced parents – inspired by Aron 1994		housing_2=1,2,3,4 OR housing_4=1
IntroL	The following statement is about how you and the child’s other parent co-parent. How much do you agree or disagree with the statement?		housing_2=1,2,3 OR housing_3=1,2 OR housing_4=1
Coop	We co-parent about [name of the child]’s daily life.	1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree (9) Don’t know	housing_2=1,2,3 OR housing_3=1,2 OR housing_4=1

BlokM	Mental health – WHO – 5 Well-being Index (1999 version)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroM_0	How have you been feeling?		

IntroM	The next questions are about how you have been feeling lately. Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks. Notice that higher numbers mean better well-being.		
	Over the past two weeks:		
who5_1	I have felt cheerful and in good spirits	(5) All the time (4) Most of the time (3) More than half of the time (2) Less than half of the time (1) Some of the time (0) At no time	
who5_2	I have felt calm and relaxed.		
who5_3	I have felt active and vigorous.		
who5_4	I woke up feeling fresh and rested.		
who5_5	My daily life has been filled with things that interest me.		

BlokN	Parents' social relations – CSRQ (Copenhagen Social Relations Questionnaire)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN_0	The following questions are about you and your network		
IntroN			
csrq_1	Would anyone in your network (e.g. family or friends) help you with daily practical matters if necessary?	1. Always 2. Often 3. Sometimes	

		4. Seldom 5. Never	
csrq_2	Do you have at least one other adult you can talk to if you need support?		

BlokN1	The child's use of screen activities – Items based on article by Cheung (2016)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN1_0	Home The next questions are about everyday life in [name of the child]'s home.		
IntroN1	First, a couple of questions about screen activities in [name of the child]'s home.		
childact_1	On a <u>normal weekday</u>, how much time does [name of the child] spend on an iPad, tablet or smartphone (e.g. playing games are watching a movie)?	1. No time at all 2. Less than ½ an hour a day 3. ½-1 hour a day 4. 1-2 hours a day 5. More than 2 hours a day	
childact_2	On a <u>normal weekday</u>, how much time does [name of the child] spend watching TV or movies on the TV or on a computer?		

BlokN3	Language at home – Based on BørnUngeliv.dk – småbørn		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroN3	Next is a question about what languages are spoken at home.		
language_1	What languages do you speak in [name of the child]'s home?	<ol style="list-style-type: none"> 1. Always Danish 2. Equal amounts of Danish and one or more other languages. 3. Mostly one or more languages other than Danish 4. Always one or more languages other than Danish 	
language_201_elm_1- language_201_elm_31	What other languages? (You can provide more than one answer)	<ol style="list-style-type: none"> 1. Arabic 2. Bengali 3. Bosnian/Serbian/Croatian 4. Bulgarian 5. English 6. Farsi 7. French 8. Faroese 9. Hindi 10. Italian 11. Japanese 	language_1=2,3,4

		12. Kurdish 13. Lithuanian 14. Mandarin Chinese 15. Norwegian 16. Pashto 17. Polish 18. Portuguese 19. Rumanian 20. Russian 21. Sinhala 22. Somali 23. Spanish 24. Swedish 25. Tagalog 26. Turkish 27. German 28. Ukrainian 29. Urdu 30. Vietnamese 31. One or more other languages	
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Blok N4	Employment and finances – FIV, BUD		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1

IntroN4	The next couple of questions are about your current status in the labour market and your work routines.		
employm_101_elm_1- employm_101_elm_10	<p>What is your current employment status?</p> <p>You may choose more than one.</p> <p>For instance, if you are both on parental leave and working part time, you should choose two.</p> <p>If you are on parental leave full time, you should only choose one.</p>	<ol style="list-style-type: none"> 1. Self-employed (have your own company) 2. Employment, wage earner 3. Student, apprentice 4. Co-employed spouse/employed in my spouse's company 5. Retired 6. Stay-at-Home mum/dad 7. Unemployed or in job training 8. On parental leave 9. On sick leave 10. Other 	
employm_2	How many hours (including overtime) do you work in a normal week in your current occupation/education?		employm_101_elm_1=1 OR employm_101_elm_2=1 OR employm_101_elm_3=1 OR employm_101_elm_4=1
employm_3	Overall, how would you describe your/your family's financial situation?	<ol style="list-style-type: none"> 1. Very good 2. Good 3. Alright 4. Not so good 	

		5. Bad (9) Don't know	
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BlokS	Parents' phone use – Based on SAS Kwon et al. (2013)		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroS_0	The next couple of questions are about you and your habits.		
IntroS	First, some statements about how you use your mobile phone. In each case, evaluate whether the statement is a fitting description of you.		
parmobi_1	I think about my mobile phone, also when I am not using it.	1. Not true at all. 2. A little bit true 3. Somewhat true 4. True to a large extent 5. Very true 6. Completely true	
parmobi_2	I often check my mobile phone so as not to miss out on what is going on (e.g. on Twitter, Facebook, Instagram or news media)		

Blok T	Smoking – WHO		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroT	Next are some questions on smoking and drinking habits.		
smoking_1	Do you smoke?	<ol style="list-style-type: none"> 1. No 2. Yes, on a daily basis 3. Yes, every now and then 	
smoking_2	Is tobacco smoked indoors in [name of the child]’s home?	<ol style="list-style-type: none"> 1. Yes, on a daily basis 2. Yes, once or several times a week 3. Yes, on a monthly basis 4. Yes, but more rarely 5. No, never 	

BlokU	Alcohol – AUDIT, DSAM,		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroU			
drinking_1	How often do you have a drink containing alcohol?	<ol style="list-style-type: none"> 1. Never 2. Monthly or less 	

		<ul style="list-style-type: none"> 3. 2-4 times a month 4. 2-3 times a week 5. 4 or more times a week 	
drinking_2	How many standard drinks containing alcohol do you have on a typical day when drinking?	<ul style="list-style-type: none"> 1. 1 or 2 2. 3 or 4 3. 5 or 6 4. 7 to 9 5. 10 or more 	drinking_1=2,3,4,5
drinking_3	How often do you have five or more drinks on one occasion?	<ul style="list-style-type: none"> 1. Never 2. Less than monthly 3. Monthly 4. Weekly 5. Daily or almost daily 	drinking_1=2,3,4,5

Blok V	Time spent with adults under the influence. BørnUngeliv.dk, toddlers		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroV			
drinking_v_1	Does it occur that [name of the child] spends time with adults who are <u>under the influence</u> of alcohol or other intoxicating agents?	<ul style="list-style-type: none"> 1. No, never 2. No, seldom 3. Yes, sometimes 4. Yes, most of the time 5. Yes, always (9) Don't know 	

Day care/child care

BlokW	Day care/ child care – questions build on BUD by MPO and MS		housing_1=1,3 OR housing_2=1,2,3,4 OR housing_4=1
IntroW_0	Day care/child care		
IntroW	The last questions are about how [name of the child] is looked after.		
daycare_3aar_1	How is [name of the child] currently looked after during the day?	<ol style="list-style-type: none"> 1. Municipal Age-integrated day care for 0 to 6-year-olds 2. Municipal Day care institution for approx. 0 to 2-year-olds (e.g. nursery) 3. Municipal Day care institution for approx. 3 to 5-year-olds (e.g. kindergarten) 4. Private day care 5. Special needs day care (due to limited physical or mental abilities.) 6. Other (e.g. in a private care facility with support from the municipality or taken care of by mother/father/others) 	
daycare_3aar_2	Is the day care institution ...	<ol style="list-style-type: none"> 1. Run by the municipality 	daycare_3aar_1=1,2,3

		<ul style="list-style-type: none"> 2. Self-owned 3. Outsourced 4. Private (9) Don't know 	
daycare_3aar_3	Is the day care institution ...	<ul style="list-style-type: none"> 1. Municipal 2. Private (9) Don't know 	daycare_3aar_1=4
daycare_3aar_4	How is the [name of the child] looked after on workdays?	<ul style="list-style-type: none"> 1. Private care arrangement similar to daycare 2. Institution-like private care arrangement 3. Looked after at home by his/her mother 4. Looked after at home by his/her father 5. Looked after at home by another person (e.g. a maid or an au pair) 6. Looked after at someone else's house (e.g. relatives) 7. Private daycare ("Puljeordning"), where the daycare received support from a specific government fund 8. Other type of care 	daycare_3aar_1=6
daycare_3aar_5	How many hours a day does [name of the child] spend in daycare/the care arrangement?	<ul style="list-style-type: none"> 1. Less than 4 hours 2. 4 hours 3. 4½ hours 4. 5 hours 5. 5½ hours 6. 6 hours 7. 6½ hours 	daycare_3aar_2=1,2,3,4,9 OR daycare_3aar_3=1,2,9 OR daycare_3aar_4=1,2,5,6,7,8

		8. 7 hours 9. 7½ hours 10. 8 hours 11. 8½ hours 12. 9 hours 13. 9½ hours 14. 10 hours	
daycare_3aar_6	How old was [name of the child] when he/she started day care/the care arrangement? Please state the answer in months.		daycare_3aar_2=1,2,3,4,9 OR daycare_3aar_3=1,2,9 OR daycare_3aar_4=1,2,5,6,7,8
Outtro	<p>Thank you for filling out the survey.</p> <p>All parents participating this month will be entered into a lottery for 5 x 1000 DKK.</p> <p>When the first round of the survey is over, there will be another lottery for 3 x 10,000 DKK for all parents who filled out the questionnaire.</p> <p>If your family needs help, we encourage you to reach out to a health care professional or, for instance, a pedagogue at your child's day care.</p> <p>The next round of the SPOR survey takes place in two years. We very much hope that you will participate again.</p>		

	<p>The first results will be published in the first half of 2019.</p> <p>You can read more and ask questions about SPOR – Children’s Development and Wellbeing throughout life at www.vive.dk/spor</p>		
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