



## ELFE National 2 Year Survey

### Mother Questionnaire

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Change highlighted in yellow (with no explanation between brackets) = change made following the CAPI tests and before the start of the national survey.

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

Change 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**

*The lines with E2AM\_CONTACTMP=. AND E2AM\_EFVIT=. AND E2AM\_MERBIL=. Have been deleted from the 2-year base to be cleared. These lines concern families that were not contacted at 2 years.*

## 1. Contact form

*IF A02X\_QMERECOMP2a=1*

Repeat 1 yr or following 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

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Parent contact details

***NOMM***

**Mother's last name**

***NOMJFM***

**Mother's maiden name**

***PRENM***

**Mother's first name**

***NOMP***

**Father's last name**

***PRENP***

**Father's first name**

Most recent contact details for mother

**TELM1**

**Tel. no.**

**TELM2**

**Tel. no.**

**TELM3**

**Tel. no.**

**TELM10**

**Telephone number used for interview**

**TYPTLM**

**Type of phone used**

- 1 Land line
- 2 Mobile

**EMAILMON**

**Email address**

- 1 Yes
- 2 No

**EMAILM**

**Email address**

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**INTDOM**

**Home internet access**

- 1 Yes
- 2 No

**ADR1M**

**Building, staircase, floor, apartment no.**

**ADR2M**

**Residence, Villa, etc.**

**ADR3M**

**Street and street number**

**ADR4M**

**Locality**

**ADRCPM**

**Postcode**

**ADRCOMM**

**Municipality**

**CODGEOM**

**Mother's municipality (INSEE code)**

**REGM**

**Mother's region (INSEE code)**

**DEPM**

**Mother's department (INSEE code)**

*Additional information on recipient*

*Additional information on geographical location*

*Street and street number*

*Locality*

Most recent contact details for father

**TELP1**

**Tel. no.**

**TELP2**

**Tel. no.**

**TELP3**

**Tel. no.**

**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**

**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)**

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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



Start field 17/05/2013 – 12/10/2020 version

**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

**INED-ELFE ID**

***NIE***

**INED-ELFE TWIN ID**

***NIEBIS***

## 2. Contact with mother

IF A02X\_QMERECOMP2a=1

NB: For households in which the latest family situation given (at 1 yr or 2 months) was "SITUAFAMM=3 with LIENTYP (1à20)=7, SEXE=2" create a display for the interviewer saying that they have to say "your partner" and not "the child's father".

### CONTACTM

#### Initial telephone contact:

- 1 The mother has been contacted and has agreed to take part
- 2 Appointment organized
- 3 The mother has been contacted and has definitively left ELFE (specify reason)
- 4 The mother 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)
- 5 The mother has not been contacted because the person reached refuses to put the mother on the line (specify reason)
- 6 The mother has not been contacted because she is hospitalized, bedridden or absent during the survey
- 7 The mother wants the father to respond to the 2-year questionnaire in her place
- 8 The mother has died
- 9 The mother 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 [Reject hidden number]
- 13 [Wrong number]
- 14 [Enter another telephone number]
- 15 [The two children have died]

If CONTACTM=(1, 2) or (CONTACTM=(3, 4) and REFUS=2) or CONTACTM=(5, 6, 7) or (CONTACTM=8 and (CONTPART=1 or (VOIX=2 or VOIXP=2))) or CONTACTM=9 and PL3 < > 2e ->7) or CONTDEC=1 then ask

If in the last survey INPER=(2, 3, 4) OR PLAPER=(3, 4, 5) OR CAUSEDEPART (1à20)=3 with LIENTYP (1à20)=1 code directly VALIDCP1=4

*(Display the number on which the interview was made)*

**If the contact details (phone and/or email) of the father are available: "I would first like to determine with you the telephone number and email address of the father of [ELFE child] that I have in my possession to make sure I can contact him later"**

**If the contact details (phone and email) of the father are not available: "I would first like to ask you for the phone number and email address of the father of [ELFE child] so that I can contact him later"**

### VALIDCP1

- 1 The mother/person confirms the contact details ⇒ Q mother, Q father
- 2 The mother/person gives/changes the contact details
- 3 The mother/person does not know the father's contact details or does not confirm them but without being opposed to their participation ⇒ Q mother, search for father's contact details if not in possession, Q father
- 4 The mother/person refuses to give or confirm the contact details and/or says not to contact the father ⇒ Q mother and not Q father
- 5 Other (father dead, unknown) ⇒ Q mother, End.

**INT: IF THE MOTHER SAYS SHE IS AGAINST THE PARTICIPATION OF THE FATHER, EVEN IF THEY HAVE THE SAME CONTACT DETAILS, CODE "THE MOTHER REFUSES TO GIVE OR CONFIRM THE CONTACT DETAILS"**

If CONTACTM=(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?"**

\_\_\_\_\_ *(clear)*

If in the last survey INPER=(2, 3, 4) OR PLAPER=(3, 4, 5) OR CAUSEDEPART (1à20)=3 with LIENTYP (1à20)=1 code directly REFUSP=3

## REFUSP

**Does your refusal to take part in the ELFE survey also concern the participation of the father of the ELFE child?**

- 1 Yes ⇒ End, thank you (if CONTACTM=4 announce contact for the child's third birthday) (if CONTACTM=3 **definitive exit\***)
- 2 No
- 3 Other (father dead, unknown) ⇒ End

*\* To avoid having to remind yourself the next time, the best idea is to inform the ELFE team directly in writing since I do not have the possibility to record the survey exits of participants.*

*You can make the request by email at [communaute@elfe-france.fr](mailto:communaute@elfe-france.fr)/or by post here: Unité mixte Elfe - INED, 133 boulevard Davout - 75020 Paris/or by calling 01.56.06.21.01.*

*If CONTACTM=5*

**REFUSM** *(not available as empty)*

**"Can you tell us the reasons why you don't want us to contact the mother of [ELFE child]?"** \_\_\_\_\_ *(clear)*

*If CONTACTM=8*

**"We are very sorry to have bothered you in these circumstances"**

*If in the last survey INPER= (2, 3, 4) OR PLAPER= (3, 4, 5) OR CAUSEDEPART (1à20)=3 with LIENTYP (1à20)=1 ⇒ End*

**VOIX** *(not available as empty)*

**The interviewer ticks:**

- 1 Man's voice
- 2 Woman's voice

*If VOIX=1*

**VOIXP** *(not available as empty)*

**If voice of adult male: "Are you the father of [ELFE child]?"**

- 1 Yes
- 2 No

*If VOIXP=1*

**CONTPART** *(not available as empty)*

**"Would you nevertheless like to continue participating in the survey?"**

- 1 Yes
- 2 No ⇒ End, thank you (definitive exit)

*If CONTACTM=9*

**PL1** *(not available as empty)*

**Why doesn't the mother want to answer?**

- 1 Doesn't understand French well
- 2 Hard of hearing/deaf
- 3 Other (specify)

*If PL1=1*

**PL2** *(not available as empty)*

**Is the mother willing to do the interview in another language?**

- 1 Yes
- 2 No

*If PL2=1*

**PL3** (*not available as empty*)

**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]

**If CONTACTM=10**

The ELFE child has died ⇒ End “We are very sorry to have bothered you in these circumstances. The entire ELFE team and myself would like to extend our heartfelt condolences. Naturally, we will make sure that you are not disturbed in the future.”  
End

**If CONTACTM=11**

The twin child has died ⇒ End “We are very sorry to have bothered you in these circumstances.”

**CONTDEC** (*not available as empty*)

**Would you nevertheless like to continue participating in the survey?**

- 1 Yes
- 2 No

***If CONTACTM=(1, 2) or CONTDEC=1***

**VALIDDCM1**

**I would like to confirm your phone number and email address for future contact.**

**Here is the number I have for contacting you:**

- 1 The mother/person confirms their contact details
- 2 The mother/person gives/modifies their contact details

**INT:** IF YOU HAVE CONTACTED SOMEONE OTHER THAN THE MOTHER WHO IS UNABLE TO PROVIDE YOU WITH THE CONTACT DETAILS (SUCH AS A CHILD), CODE “THE MOTHER/PERSON CONFIRMS THEIR CONTACT DETAILS”. THE MOTHER WILL CONFIRM THEM WHEN TAKING PART.

**MANAGEMENT OF INITIAL CONTACT WITH THE MOTHER WHO AGREES TO TAKE PART TO DETERMINE THE KIND OF QUESTIONNAIRE TO BE USED**

**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**

- 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.

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

**If CONTACTM=1**

**Does [ELFE child] live?**

**If NAISGEM=1**

**Do [ELFE child] and [twin child] live?**

### **EFVIT**

- 1 With you and the father ⇒ Q Mother Referent Parent (if VALIDCP1=(2, 3) ask "Full Mother Referent questionnaire")
- 2 With you and not the father ⇒ Q Mother Referent Parent (INFPER)
- 3 With the father and not you ⇒ EFVOI
- 4 Alternating between you and the father ⇒ Q Mother Referent Parent
- 5 Neither with you nor the father, but with someone else or in a non-hospital institution ⇒ EFVITP

**INT:** 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 INFPER previous surveys=(2, 3, 4) do not ask INFPER but keep it documented in repeat file*

*If EFVIT=2*

#### **INFPER**

**Can I ask you why [ELFE child] lives with you only and not their father?**

- 1 The father lives elsewhere (separation or never lived together)
- 2 The father has died
- 3 Doesn't know who the father is (including insemination)
- 4 The mother considers that the biological father is not the child's father
- 8 [Refuses to answer] ⇒ Q Mother Referent Parent

**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 RECON in previous surveys = 1 do not ask RECON*

*If INFPER=1 AND (2 month and 1 year not done)*

#### **RECON**

**Does the child's father recognize [ELFE child]?**

- 1 Yes
- 2 No

*If EFVIT=3*

**EFVOI** (not available as empty)

**Since our last interview you have seen the child:**

- 1 Every day ⇒ Q Non-Cohabiting Mother
- 2 More than once a week ⇒ Q Non-Cohabiting Mother
- 3 Once a week ⇒ Q Non-Cohabiting Mother
- 4 2 to 3 times a month ⇒ Q Non-Cohabiting Mother
- 5 Once a month or less ⇒ Q Non-Cohabiting Mother
- 6 Not for a year ⇒ Q Mother Placed Child without placed child questions

*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

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If EFVITP=1

**EFVITPP** (not available as empty)

Specify \_\_\_\_\_

If EFVITP=6

**EFVITPPP** (not available as empty)

Specify \_\_\_\_\_

If EFVIT=5

**EFLIEU** (not available as empty)

**Do you see your 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 PLAPER in previous surveys=(3, 4, 5) do not ask PLAPER

If PLAPER in previous surveys not (3, 4, 5) AND EFVOI2=(1, 2, 3, 4) ask PLAPER

**PLAPER** (not available as empty)

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

- 1 Yes
- 2 No, the father lives elsewhere (separation or have never lived together)
- 3 The father has died
- 4 Doesn't know who the father is (including insemination)
- 5 The mother considers that the biological father is not the child's father ⇒ Q Mother 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 PLAPER=2

**PRECON** (not available as empty)

**Does the child's father recognize [ELFE child]?**

- 1 Yes
- 2 No

**PEREB**

**Type of father**

- 1 Referent father
- 2 Cohabiting father
- 3 Non-cohabiting father

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- 4 Cohabiting father of placed child
- 5 Non-cohabiting father of placed child
- 6 Cohabiting father (same-sex parenting)
- 7 The father has died
- 8 Father questionnaire to be administered ⇒ type of father to be determined in Q
- 9 No father questionnaire = father refuses
- 10 No father questionnaire = father unknown, deceased
- 11 BASCUL father questionnaire to be administered ⇒ type of father to be determined in Q
- 12 BASCUL no father questionnaire = father refuses
- 13 BASCUL no father questionnaire = father unknown, deceased
- 14 Definitive refusal of mother and father ⇒ no father questionnaire
- 15 Definitive refusal of mother and father unknown, deceased ⇒ no father questionnaire
- 16 Mother and father deceased ⇒ no father questionnaire
- 17 Mother deceased and father refuses to continue ⇒ no father questionnaire

If EFVIT=(1, 2, 4) code TYPPEM=1

If EFVIT=3 and EFVOI=(1, 2, 3, 4, 5) code TYPPEM=2

If EFVIT=3 and EFVOI=6 code TYPPEM=3

If EFVIT=5 and EFVOI2=(1, 2, 3, 4) code TYPPEM=4

#### **TYPPEM**

##### **Type of questionnaire to ask the mother:**

- 1 Referent mother: the mother lives with the child (all the time or on an alternating basis)
- 2 Non-cohabiting mother: the father has custody of the child
- 3 Mother of placed child WITHOUT placed child questions
- 4 Mother of placed child WITH placed child questions

*At end, confirm all contact details from the contact file apart from the data already confirmed concerning the father. Say goodbye to mother, thanking her and announcing contact with the father if VALIDCP1=1.*

*A simple thank you in all other cases.*

*Say that we will stay in touch with the mother this year by post or email.*

*Tell them about the survey when the child turns 3.*

**MANAGEMENT OF PARTIAL MOTHER QUESTIONNAIRES (NOT COMPLETED OR NOT RESTARTED FOR QUESTIONNAIRES IN SEVERAL GOES) OR CONTACT APPOINTMENTS NOT RESPECTED AT END OF MOTHER FIELD**

*1/ Not completed or not restarted for questionnaires in several goes ⇒ if VALIDCP1=1 or 2, administer father questionnaire starting from EFVITP*

*2/ Contact appointments not respected ⇒ administer father questionnaire starting from EFVITP*

#### **END of contact with mother**

*For the automatic coding of PEREB*

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

<i>If EFVIT=1</i>	<i>PEREB=Cohabiting Father Questionnaire</i>
<i>If EFVIT=2 and INFPER=(1, 8)</i>	<i>PEREB=Non-Cohabiting Father Questionnaire</i>
<i>If EFVIT=3</i>	<i>PEREB=Referent Father Questionnaire</i>
<i>If EFVIT=4</i>	<i>PEREB=Non-Cohabiting Father Questionnaire</i>
<i>If EFVIT=5 and PLAPER=1</i>	<i>PEREB=Cohabiting Father Placed Child Questionnaire</i>
<i>If EFVIT=5 and PLAPER=2</i>	<i>PEREB=Non-Cohabiting Father Placed Child Questionnaire</i>

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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")

If MERBIL not 17 AND OR CONTPAR=  
PEREB=Questionnaire type determined according to EFVITP when father is contacted

The Rest ⇒ no father questionnaire



### 3. Information on the interview

**\*DATINTJ**

Day of interview

|\_|\_|

**DATINTM**

Month of interview

|\_|\_|

**DATINTA**

Year of interview

|\_|\_|

**AGE2A**

Age of child in months at 2-year telephone interview

|\_|\_|

**Q3M**

Number of call attempts to contact the mother

|\_|\_|

**QUALIT**

Quality of the 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

**QM**

Mother questionnaire

- 0 Absent
- 1 Complete
- 2 Incomplete

## 4. List and civil status of residents of dwelling

IF A02X\_QMERECOMP2a in (1, 2)

### Questionnaires concerned:

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

If the 1 year 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 the 1 year questionnaire has not been completed ⇨ repeat where necessary the answers given in the 2-month interview and if this last has not been completed, the answers given in the maternity ward

### INTRODUCTION

“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 2 month and 1 year surveys not done

### INTRODUCTION

“To begin with, we are going to make a list of the people who usually live here and briefly describe them, starting with yourself.”

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

**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

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- 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 do not ask ADATDEPART (1à20)

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

**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)=(1, 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)**

**[In which country?]**

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)=3

**\*NATIO2N\_(1à20)**

**What is his/her nationality?**

Nationality code |\_|\_|\_|\_|\_|

If NATIO1N (1à20)=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

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If NATIO1N (1à20)=(1, 2, 3)

**\*NATIO2N2\_(1à20)**

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

Nationality code |\_|\_|\_|\_|

If NATIO1N (1à20)=(1, 2, 3)

**NATIO25N2\_(1à20)**

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

- 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
- 13 Does not have dual nationality

**\*NATIO2NP\_(1à20)**

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

*(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 Mother or Mother Placed Child questionnaire

**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 TYPOLOG\_(1à20)=4*

**MOISAN\_(1à20)**

**How many months in this last year?**

|\_|\_|

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

*If TYPOLOG\_(1à20)=5*

**JOUR2AN\_(1à20)**

**Around how many days in this last year?**

|\_|\_|\_|

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

**AUTLOG\_(1à20)**

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

- 1 Yes
- 2 No

**INT:** For all and do not ask for LIENTYP\_(1à20)=12 if Non-Cohabiting Mother or Mother Placed Child questionnaire. (For LIENTYP\_(1à20)=12: if ELFE child does not live with mother and father)

*If AUTLOG\_(1à20)=1*

*(If the person also lives in another dwelling):*

**TYPLOGCO\_(1à20)**

**Where?**

- 1 Barracks, camp

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- 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



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- 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

## 5. Placed child

IF A02X\_QMERECOMP2a in (1, 2) AND A02X\_TYPQMERE2a=3

Questionnaire concerned:

- Mother of Placed Child

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

If repeat variables completed "On which date did the most recent placement of [ELFE child]/[twin child] begin?"

**\*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**

|\_|\_| days or,

**PLAC5S** *(not available as empty)*

**No. of weeks:**

|\_|\_| weeks (NA=888, DK=999) min 1 max 99 or,

**PLAC5M** *(not available as empty)*

**No. of months:**

|\_|\_| 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

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**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\_QMERECOMP2a=1 AND A02X\_MENAGEM2A in (1, 2, 3)

### Questionnaires concerned:

- Referent Mother
- Non-Cohabiting Mother
- Mother of Placed Child

Only the family situations of the mother and arrivals are described. The family situation of the other household members aged 15 and over will be documented at 3 years, by the cohabiting father or mother if not cohabiting father.

The variables carried over from the 1 year survey on the family situation of the mother are to be confirmed/changed only if the mother 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 a LIENTYP (1à20)=1 or LIENTYP (1à20)=7 in household

If LIENTYP (1à20)=(1, 7) AND CONFIG (1à20)=(1, 3)

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

If LIENTYP (1à20)=1

Are you currently in a couple with [father 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 (1à20)=1 AND LIENTYP (1à20)=7 THE FATHER COUNTS IN THIS CASE, SO THE LIENTYP IS CONSIDERED AS (1à20)=1 IF IN THE LAST SURVEY THERE WAS A LIENTYP (1à20)=1 AND NO LIENTYP (1à20)=7 AT 1 YEAR THERE WAS A LIENTYP (1à20)=7 AND NO LIENTYP (1à20)=1 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)=1 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 if no LIENTYP (1à20)=1 in household and (INFPER=(1,8) (at 2 years) OR PLAPER=2 (at 2 years)

Do not ask this question if SEPAR (1à20)=1 and person leaving at 2 years CONFIG=2 with LIENTYP (1à20)=1 ⇒ pre-code=2

Do not ask this question if LIENTYP (1à20)=1 and COUPLE1=2 and COUPLE2=1 ⇒ pre-code=2

### **PERENF**

Is this person the father 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 "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."

Is it with the person you are in a couple with that you are married or have a civil partnership with?

**MATRICOUP**

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

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

If ETAMATRI=(1, 2) and 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, "Just to confirm, you were married/formed a civil partnership (display ETAMATRI procedure) in:"*

|\_\_|\_\_|\_\_|\_\_| (1960 to 2013) (NA=8888, NSP=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 [father 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

*(Changed at end of Wave 1)*

\*\*\*\*\*

If the questionnaire under way is “Non-Cohabiting Mother”, only SITUAFAMM=3 or 4 or 6 or 7 are possible. In the event of any inconsistency, correct the erroneous information.

**SITUAFAMM**

**Family situation**

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

\*\*\*\*\*

If SITUAFAMM=(3, 4) and LIENTYP\_(1à20)=7 AND SEXE\_(1à20)=1

**ROLEPAR**

**Does [partner first name] play a parental role for [ELFE child]?**

- 1 Yes
- 2 No
- 9 [DK]

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

IF A02X\_QMERECOMP2a=1 AND SITUAFAMM in (2, 5)

Questionnaires concerned:

- "Referent Mother"
- "Mother of Placed Child"
- "Non-Cohabiting Mother"

For what reasons do you not live with the father on a permanent basis?

If SITUAFAMM=2

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

If SITUAFAMM=5

For what reasons do you ("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**

He is in a couple

- 1 Yes
- 2 No

### **RAISNVP5**

He 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

- 1 Yes
- 2 No



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**RAISNVP7**

**Owing to other reasons**

- 1 Yes
- 2 No

If RAISNVP7=1

**RAISNVPP**

**Specify**

---

## 8. Separation and relationship with father

IF A02X\_QMERECOMP2a=1 AND ((PLAPER=2 OR INFPER=1) OR (COUPLE1=2 AND A02X\_MENAGEM2A=1))

### Questionnaires concerned:

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

This module is not asked when we know the father is deceased or the mother doesn't know who the father is or she considers that the biological father is not the child's father.

So, questionnaire asked if PLAPER=2 or INFPER=1 (the father is alive and the mother doesn't live with him)  
OR if COUPLE1=2 and LIENTYP=1 in the household (the father lives with the mother in the household but not as a couple).

For non-cohabiting mothers, only the greyed-out questions are asked.

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

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

### **SEPADIV**

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

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

If the mother 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 at 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, 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, 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 or 2)

If SEPADIV=3

If at 1 year SEPADIV=(1, 2) 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

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If at 1 year SEPADIV=3 and JUGJUG at 1 year =1, ask DESAC2 AND QDESAC1 at 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 QDDESACP

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 father 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?**

**If JUGSEP=1**

**On which date did you begin the separation proceedings?**

**DATPROM**

**Month**

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

**DATPROA**

**Year**

|\_|\_|\_|\_| (1970 to 2013 + DK=9999)

**MEDFAM**

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

- 1 Yes
- 2 No
- 9 [DK]

If SEPADIV=4

**TYPDIV**

**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

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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 [DK]

**Date of ruling**

If SEPADIV=4 or JUGJUG=1

**DATJUGM**

**Month**

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

**DATJUGA**

**Year**

|\_|\_|\_|\_| (1970 to 2013 + DK=9999)

(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 father'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

If JPENSALI=1, if not go to 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 + REFUSES=88888 + DK=99999

INT: IF NONE, CODE NA

If JPENSALI=1, if not go to DESAC1 or DESAC2

**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**

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

- 1 Yes
- 2 No

If PENSALPHM=1

**NBPENSALPHM**

**How many?**

\_\_\_\_\_

If SEPADIV=4

**DESAC1**

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

- 1 Yes
- 2 No

**Do these points of disagreement concern:**

If DESAC2=1

If not go to EXTYPREL

**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 father 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 him

If EXHEBAC=1

**EXHEBMOD**

**Where does the child live?**

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

If EXHEBMOD=4

**EXHEBMODP**

**Which?**

---

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

**EXPENS**

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

- 1 Yes
- 2 No, because we 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 father 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

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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 names of the children in the household (LIENTYP=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**

**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 father of [ELFE child] on where the child lives?**

- 1 Yes
- 2 No

INT: Fill in HEBMOD starting from EFVIT and don't ask the question

If JUGJUG=2

**HEBMOD**

**Where does the child currently live?**

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

INT: 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 father of [ELFE child] provide you with payments to meet the needs of this last?**

- 1 Yes
- 2 No

If EXPENS3=1

**EXPENS3MON**

**How much does he pay you each month?**

|\_|\_|\_|\_| € 0 to 99999 + DK=99999

If EXPENS3=1

**PENS**

**Are the payments made:**

- 1 Very regularly
- 2 Fairly regularly
- 3 Irregularly

**EXTYPREL**

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

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

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 father 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 father of [ELFE child] when the father does not live in the household

*IF A02X\_QMERECOMP2a=1 AND ((A02X\_TYPQMERE2a in (1, 3) AND EfvIT=2 AND INFPER in (1, 8)) OR (A02X\_TYPQMERE2A=3 AND PLAPER in (1, 2)))*

The module is not asked when we know that the father has died or that the mother doesn't know who the father is or considers that the biological father is not the father of the child

Questionnaires concerned:

- "Referent Mother"
- "Referent Mother of Placed Child"

Questionnaire asked:

If TYPem=1 and ((EFVIT=2 and INFPER=1, 8) OR EFVIT=4

If TYPem=4 and PLAPER=(1, 2)

If NAISGEM=1

**JENFVOI**

**Do [ELFE child] and [twin child] see their father?**

- 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 he 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 father?**

- 1 Yes ⇒ FQVOI1
- 2 No

**How often does he 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 he see [ELFE child]?**

**If JENFVOI=1 and EFVIT not 4**

**How often does he see them?**

**FQVOI1**

- 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 he see him/her/them?**

- 1 Mainly at your house
- 2 Mainly at his 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 he 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 he see him/her?**

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

If OUVOI2=3

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

**Specify** \_\_\_\_\_

If ENFVOI=1 AND EFVIT=4

**ORGAGAL**

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

---

## 10. Education

Questionnaires concerned:

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

Regardless of the questionnaire concerned, this module only concerns the mother (update) and new household members. The education level of the other household members will be updated at 3 years by the cohabiting father or by the mother if no cohabiting father.

If the education of the cohabiting father at 1 year and still cohabiting at 2 years was not documented at 1 year (the father did not participate and no feedback from the mother), they will be documented by the mother at 2 years (full Referent Mother questionnaire) and if the father participates we will ask him the questions again.

If VALIDCP1=2 or 3 AND EFVIT=1 full Referent Mother questionnaire.

“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 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 (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\_(1à20)

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

**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?”**

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**If age >2 and <16**

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

**ANFINETU\_(1à20)**

|\_|\_|\_|\_| (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

If not, code DIPLOME\_(1à20)=1

Ask if 13 or over

**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

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- 2 Diploma of occupational studies, specialist qualification
- 3 Other diploma and titles at certificate of professional competence or diploma of occupational studies level

9 [DK]

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 craftsman certificate

9 [DK]

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 [DK]

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)

4 Other doctorate degree excluding medical professions

9 [DK]

INT: DO NOT LIST

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

**ETABEC1**

**At which establishment?**

1 Middle school (only if under 18)

2 High school (only if under 20)

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 (only if under 18)

2 High school (only if under 20)

3 University or other institute of higher education

4 Apprentice training school

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- 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 (only if under 18)
- 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 Higher education diploma of over three years
- 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**

- 1 Yes
- 2 No

INT: DO NOT LIST SEVERAL ANSWERS POSSIBLE

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**Specify**

If DIPLEC(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

### Questionnaires concerned:

- "Referent Mother"
- "Mother of Placed Child"
- "Non-Cohabiting Mother"

Regardless of the questionnaire concerned, this mother only concerns the mother (update) and new household members aged 15 and over. The situation regarding work for the other household members will be updated at 3 years by the cohabiting father or the mother if no cohabiting father.

If the occupational situation of the cohabiting father at 1 year and still cohabiting at 2 years was not documented at 1 year (the father did not participate and no feedback from the mother), it will be documented by the mother at 2 years (full Referent Mother questionnaire) and if the father participates we will ask him the questions again.

If VALIDCP1=2 OR 3 AND EFVIT=1 full Referent Mother questionnaire.

**"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)=2**

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

**If LIENTYP\_(1à20)=1**

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

**If LIENTYP\_(1à20) not (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/his/her 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

|\_|\_|\_|\_|

+ DK=99

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

|\_|\_|\_|\_|

Are you 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 (1à20) to STATU4 (1à20) 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)**

**Are you still...?/What is/was your exact occupation?**

**If 2 months or 1 year done and PROFI5\_(1à20) documented, ask “Are you still...?”**

**If PROFI5\_(1à20) never documented, ask “Are you still...?/What is/was your exact occupation?” (LIST OF OCCUPATIONS)**

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

if occupation not found in PROFI5 (1à20)

if PROFI5 (1à20)=(, 1)

**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?)**

**\*PROFI6 (1à20)**

**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**

*For all those with jobs apart from family assistants*

*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...?”**

**TYPEMPLOI (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 TYPEMPLOI (1à20)=(1, 2)*

**CDAID\_(1à20)**

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

- 1 Yes
- 2 No

*If TYPEMPLOI (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]
- 9 [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 (1à20) 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) [first name]?

|\_|\_|\_|\_| + DK=999

If SUPH (1à20) 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 [first name]?

|\_|\_|\_|\_| + 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

Start field 17/05/2013 – 12/10/2020 version

*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*

**PQPART\_ (1à20)**

**What was the main reason for working part time?**

*(Is it still mainly for the following reason) (Changed at start of Wave 1)*

*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?"

Ask all

**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\_QMERECOMP2a=1

### Questionnaires concerned:

- "Referent Mother"
- "Mother of Placed Child" (apart from CHAMB to CHAMB52 and COTEORDI to PORTAENFA)
- "Non-Cohabiting Mother" (apart from CHAMB41 to CHAMB52 and COTEORDI to PORTAENFA)

If the mother is in a couple with the father of the child and cohabits on a permanent basis with him or she is in a couple with a woman on a permanent basis, ask only the greyed-out questions

If SITUAFAMM=1 OR (SITUAFAM=3 with LIENTYP (1à20)=7 SEXE=2)

In other cases, ask all of the module

If SITUAFAMM=(2, 4, 5, 6 or 7) OR (SITUAFAM=3 without LIENTYP (1à20)=7 SEXE=2)

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.

If the housing section of the cohabiting father at 1 year and still cohabiting at 2 years was not documented at 1 year (the father did not participate and no feedback from mother), it will be documented by the mother at 2 years (full mother questionnaire) and if the father is taking part, ask him only the cohabiting father questions.

If VALIDCP1=2 OR 3 AND EFVIT=1 full Referent Mother questionnaire.

### **a. Relocation**

IF A02X\_TYPQMERE2a in (1, 3, 4)

IF NO SURVEY AT 2 MONTHS AND 1 YEAR, ASK THE ENTIRE SECTION STARTING FROM TYPOLOG

#### **DEMENAG**

**Have you moved since our last interview?**

1 Yes

2 No ⇒ NPIECES

(Changed wave 1)

### **b. Relocation: date and reason**

IF DEMENAG=1 AND A02X\_TYPQMERE2a in (1, 3, 4)

**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?**

---

**c. Dwelling**

*IF A02X\_TYPQMER2a in (1, 3, 4)*

*Now let's talk about where you live*

**TYPLOG**

**What type of dwelling?**

- 1 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.

Start field 17/05/2013 – 12/10/2020 version

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.

How many rooms? Does your dwelling have...?

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

**NPIECES**

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

How many rooms in this dwelling?

|\_|\_| 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 M<sup>2</sup>.

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

#### **d. The child's room**

*IF A02X\_TYPQMERE2a in (1, 4)*

**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

#### **e. The child's room, part two**

*IF A02X\_TYPQMERE2a=1*

*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** (*not available as empty*)

**Does he/she sleep:**

- 1 In the living room
- 2 Or in another room

*If CHAMB42P=2*

**\*CHAMB42PP** (*not available as empty*)

**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

## f. Dwelling, part two

IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE4=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 m<sup>2</sup>?

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

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 M<sup>2</sup> AND DOES NOT KNOW IS AUTHORIZED).

If SURFACE=9999

### SURFTR

What do you think it measures?

- 1 Less than 25 m<sup>2</sup>
- 2 From 25 to less than 40 m<sup>2</sup>
- 3 From 40 to less than 70 m<sup>2</sup>
- 4 From 70 to less than 100 m<sup>2</sup>
- 5 From 100 to less than 150 m<sup>2</sup>
- 6 150 m<sup>2</sup> or more
- 9 [DK]

INT: DO NOT LIST

## g. Owned/rental

IF A02X\_TYPQMERE2a in (1, 3, 4)

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

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

If DEMENAG=1 OR if 2 month and 1 year surveys not done, “Does your household 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

(Changed Wave 1)

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

## h. Owned/rental, part two

*IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)*

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 [DK]
- INT: DO NOT LIST

If EPOQ=9

**ANCIEN**

**Do you think it was built before 1949?**

- 1 Yes
- 2 No
- 9 [DK]

**i. Date moved in to dwelling**

*IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2) AND DEMENAG=.*

**On which date did you move in to dwelling?**

*If 2 month and 1 year not done*

*If VR INT2M=1 AND VR INT1A=1*

**DATMAR** |\_\_|\_\_| **Month** MM (1 to 12; 88 Refuses; 99 Doesn't know)

**DATAAR** |\_\_|\_\_|\_\_|\_\_| **Year** YYYY (1950 to 2010; 88 Refuses; 99 Doesn't know)

**j. Dwelling environment and equipment**

*IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)*

**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

**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

OUV How many openings are there in:

If CUIS=1 "Your kitchen"

If SDB=1 "Your bathroom"

"Your living room"

If TYPLOG=3 display "Your hotel room"

Repeat these questions for the twin (Wave 2)

If NBPIECES > 1 "The room where the child sleeps"

If CUIS=1

**CUIOUV**

How many openings are there in your kitchen?

|\_|\_|

If SDB=1

**SDBOUV**

How many openings are there in your bathroom?

|\_|\_|

**SEJOUV**

How many openings are there in your living room?

|\_|\_|

If NPIECES > 1

**PIEQUV**

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

|\_|\_|

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

**Is there ventilation in:**

*If CUIS=1*

**CUIVEN**

**[Your kitchen]**

1 Yes

2 No

9 [DK]

*If SDB=1*

**SDBVEN**

**[Your bathroom]**

1 Yes

2 No

9 [DK]

**SEJVEN**

**[Your living room]**

1 Yes

2 No

9 [DK]

*If NPIECES >1*

**PIEVEN**

**[The room where the child sleeps]**

1 Yes

2 No

9 [DK]

*If CUIS=1*

**What is the floor covering in your kitchen?**

**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 the room where [ELFE child] sleeps?

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**

*If CUIS=1*

**What is the wall covering in your kitchen?**

**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**

If SDB=1

**What is the wall covering in your bathroom?**

**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 the room where [ELFE child] sleeps?

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 CHAUFC=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?**

\_\_\_\_\_

**k. Equipment in dwelling**

*IF A02X\_TYPQMERE2a in (1, 3, 4)*

**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

(Changed at 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

## I. Garage

*IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)*

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

## m. Renovations and repairs

*IF A02X\_TYPQMERE2a in (1, 3, 4)*

“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

INT: ASK AS SUB-QUESTIONS 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 m<sup>2</sup>?

|\_|\_|

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 [DK]

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

**QLRENO5**

**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 [DK]

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

**n. Electrical installations near the dwelling**

*If A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)*

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 [DK]

If LOGHT=1

**LOGHTD**

**How far in metres?**

|\_|\_|\_|\_|

Start field 17/05/2013 – 12/10/2020 version

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

If DEMENAG=1 or (VR INT2M=1 and VR INT1A=1)

**TRANSHT**

**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 [DK]

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

**o. Telephony and IT devices**

*IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)*

*“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 [DK]

**TELFIX2**

**In your room**

- 1 Yes
- 2 No
- 9 [DK]

**TELFIX3**

**In the living room**

- 1 Yes
- 2 No
- 9 [DK]

**TELFIX4**

**In another room**

- 1 Yes
- 2 No
- 9 [DK]

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

*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

*If TELFIXENF=1*

**TELFIXENFA**

**Since what age?**

**\_\_ Month** (min 1 max 30 months; + DK=99; not allowed 0)

**INT: SINCE BIRTH=CODE 1 MONTH**

**INTER**

**Do you have an Internet connection in your home?**

- 1 Yes
- 2 No

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

*If at last survey (2 month or 1 year) WIFI1 not (1, 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/adapter?**

- 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] and [twin child]
- 2 After the birth

**Can you specify...**

If CPLT=2

**\*CPLTPM**

**The month of installation**

\_\_ + DK=99

**CPLTPA**

**The year of installation**

\_\_ + 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

Start field 17/05/2013 – 12/10/2020 version

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

/\_\_\_/ h

**ORDITOTTM**

Minutes

/\_\_\_/ min

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

/\_\_\_/ h

**TABTOTTM**

Minutes

/\_\_\_/ min

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.

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

**COTEORDI**

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

1 Yes, most of the time

2 Yes, half the time

3 Yes, rarely

4 No

9 DK

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**

In hours

/\_\_\_/ h (Limits <49h, <61, + DK =99)

If JOTAENF=1

**JOTAENFWH**

In hours

/\_\_\_/ h (Limits <49h, <61, + DK =99)

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

If OTAENF=1

**OTAENFWM**

In minutes

/\_\_\_/ min (Limits <49h, <61, + DK =99)

If JOTAENF=1

**JOTAENFWM**

In minutes

/\_\_\_/ min (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**

In hours

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

*If JOTAENF=1*

**JOTAENFSH**

In hours

/\_\_\_/ h (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**

In minutes

/\_\_\_/ min (Limits <25h, <61, + DK =99)

*If JOTAENF=1*

**JOTAENFSM**

In minutes

/\_\_\_/ min (Limits <25h, <61, + DK =99)

**PORTAENF**

**Does [ELFE child] ever talk on a mobile phone? (Changed at start of Wave 1 as question poorly understood by respondents)**

- 1 Yes
- 2 No

**JPORTAENF**

**Does [twin child] ever talk on a mobile phone? (Changed at start of Wave 1 as question poorly understood by respondents)**

- 1 Yes
- 2 No

*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

**JPORTAENFT**

**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



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- 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

*If PORTAENF=1*

**PORTAENFA**

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 JPORTAENF=1*

**JPORTAENFA**

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\_QMERECOMP2a=1

Questionnaires concerned:

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

If the mother is in a couple with the father of the child and cohabits on a permanent basis with him or she is in a couple with a woman on a permanent basis, ask only the greyed-out questions

If SITUAFAMM=1 OR (SITUAFAM=3 with LIENTYP (1à20)=7 SEXE=2)

In other cases, ask all of the module

(SITUAFAMM=(2, 4, 5, 6 or 7) Or SITUAFAM=3 without LIENTYP (1à20)=7 SEXE=2)

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.

If the housing section of the cohabiting father at 1 year and still cohabiting at 2 years was not documented at 1 year (the father did not participate and no feedback from mother), it will be documented by the mother at 2 years (full mother questionnaire) and if the father is taking part, ask him only the cohabiting father questions.

If VALIDCP1=2 OR 3 AND EFVIT=1 full Referent Mother questionnaire.

### a. Financial resources

IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)

**“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:**

#### **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**

*IF A02X\_TYPQMERE2a in (1, 3, 4)*

**CLCA**

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

- 1 Yes
- 2 No
- 9 [DK]

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 SITUAFAMM 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

**ACLCAP**

**Specify monthly amount**

|\_|\_|\_|\_|\_| (> 0 to 99999 + (DK) + (NA) + (REF))

**CLCMG**

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

- 1 Yes
- 2 No
- 8 Refuses
- 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 99999 (DK+NA+REFUSES)

**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: PAJE = THE BASIC PAJE PRESTATION D'ACCUEIL DU JEUNE ENFANT (INFANT ACCOMMODATION) ALLOWANCE (€184.62 SINCE APRIL 2013, BEFORE THAT €181) IS PAID BY THE CHILD BENEFIT SCHEME TO FAMILIES WITH A CHILD OF UNDER 3 BELOW A CERTAIN INCOME THRESHOLD. (Changed at start of wave 1)

### **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**

*IF A02X\_TYPQMERE2a in (1, 3, 4) AND A02X\_ADOCUMERE1 in (1, 2)*

### **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

If JPENSALI=1

INT: 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\_TYPQMERE2a in (1, 3, 4)*

**“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\_(1à20)=1 or 2 OR SITUAE\_(1à20)=1 or 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 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 €1,000 per month
- 3 €1,000 to €1200 per month
- 4 €1,200 to €1,500 per month
- 5 €1,500 to €1,800 per month
- 6 €1,800 to €2,200 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
- 3 DK [no, because doesn't know total income]

\*\*\*\*\*

## 14. Extended family

IF A02X\_QMERECOMP2a=1

Questionnaires concerned:

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

“Now let’s talk about grandparents”

If 2 month and 1 year not done:

If in household 2 years a LIENTYP (1à20)=8 sexe=2 code **VIEMER=1**

If in household 2 years a LIENTYP (1à20)=8 sexe=1 code **VIEMER=1**

If no LIENTYP (1à20)=8 ask **VIEMER and VIEPER**

If 2 month done and 1 year not done:

If in household 2 years a LIENTYP (1à20)=8 sexe=2 code **VIEMER=1**

If in household 2 years a LIENTYP (1à20)=8 sexe=1 code **VIEMER=1**

If at 2 years CAUSEDEPAT=3 LIENTYP (1à20)=8 sexe=2 present at 2 month code **VIEMER=2**

If at 2 years CAUSEDEPAT=3 LIENTYP (1à20)=8 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)=8 sexe=2 or (MBVIE not 2 and MBVIEb not 2) ask **VIEMER**

If at 2 years LIENTYP (1à20)=8 sexe=1 or (PBVIE not 2 and PBVIEb not 2) ask **VIEPER**

If 1 year done:

If in household 2 years a LIENTYP (1à20)=8 sexe=2 code **VIEMER=1**

If in household 2 years a LIENTYP (1à20)=8 sexe=1 code **VIEMER=1**

If at 2 years CAUSEDEPAT=3 LIENTYP (1à20)=8 sexe=2 present at 1 year code **VIEMER=2**

If at 2 years CAUSEDEPAT=3 LIENTYP (1à20)=8 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)=8 sexe=2 present at 1 year or no LIENTYP (1à20)=8 sexe=2 in household at 2 years ask **VIEMER**

If 1-year VIEPER =1 AND (no CAUSEDEPAT=3 LIENTYP (1à20)=8 sexe=1 present at 1 year or no LIENTYP (1à20)=8 sexe=1 in household at 2 years ask **VIEPER**

If LIENTYP (1à20)=8 sexe=2 AND LIENTYP (1à20)=8 sexe=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



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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, CODE "OTHER SITUATION". IF SEVERAL SITUATIONS, TAKE THE MAIN ONE, I.E. THE ONE THAT TAKES UP THE 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, CODE "OTHER SITUATION". IF SEVERAL SITUATIONS, TAKE THE MAIN ONE, I.E. THE ONE THAT TAKES UP THE 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=(2, 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=(2, 3) or (VIEMER=2 and VIEPER=1)

### **COUPER**

**Is your father in a couple?**

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- 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)=8 SEXE (1à20)=2 AND LIENTYP (1à20)=8 SEXE (1à20)=1 in the household 2 years)  
If COUPAR=1

**TRAJPARH**

**Time in hours:**

In |\_\_|\_\_|h + DK (99)

**TRAJPARM**

**Time in minutes:**

In |\_\_|\_\_|min + DK (99)

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

**RENCPAR**

**Who travels the most often when [ELFE child] [twin child] sees 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]

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- 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=(2, 3) (AND no LIENTYP (1à20)=8 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 his home and yours by the most frequently used transport mode?**

If VIEPER=1 and COUPAR=(2, 3) (AND no LIENTYP (1à20)=8 SEXE (1à20)=1 in the household 2 years)  
If COUPAR not 1 AND VIEPER=1

**TRAJPERH**

**Time in hours:**

In |\_\_|\_\_|h + DK (99)

**TRAJPERM**

**Time in minutes:**

In |\_\_|\_\_|min + DK (99)

If VIEPER=1 and COUPAR=(2, 3) (AND no LIENTYP (1à20)=8 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]

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- 2 Your father (with his partner, if in couple) 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 maternal grandfather
- INT: DO NOT LIST THE LAST WORDING

If VIEMER=1 and COUPAR=(2, 3) (AND no LIENTYP (1à20)=8 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 her home and yours by the most frequently used transport mode?**

If VIEMER=1 and COUPAR=(2, 3) (AND no LIENTYP (1à20)=8 SEXE (1à20)=1 in the household 2 years)  
If COUPAR not 1 AND VIEMER=1

**TRAJMERH**

**Time in hours:**

In |\_\_|\_\_|h + DK (99)

**TRAJMERM**

**Time in minutes:**

In |\_\_|\_\_|min + DK (99)

If VIEMER=1 and COUPAR=(2, 3) (AND no LIENTYP (1à20)=8 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]

Start field 17/05/2013 – 12/10/2020 version

- 2 Your mother (with her partner, if in couple) 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 maternal grandmother

INT: DO NOT LIST THE LAST WORDING

\*\*\*\*\*

If VIEMER=1

*If VIEMER=1 (If LIENTYP\_(1à20)=8 SEXE\_(1à20)=2 in the household 2 years code FQMER=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

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

**FQMERJ**

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

|\_|\_|\_|\_| + DK=999

**Again in the last 12 months, has your mother:**

*If VIEMER=1 and FQMER not 6*

**MJOUÉ**

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

- 1 Yes
- 2 No

**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

Start field 17/05/2013 – 12/10/2020 version

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
- 8 Refuses

INT: DO NOT LIST THE LAST WORDING

If VIEPER=1

(If LIENTYP\_(1à20)=8 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

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

**FQPERJ**

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

|\_|\_|\_|

Start field 17/05/2013 – 12/10/2020 version

Again in **the last 12 months**, has your father:  
If VIEPER=1 and FQPER not 6

**PJOUE**

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

- 1 Yes
- 2 No

**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

Start field 17/05/2013 – 12/10/2020 version

8 Refuses

INT: DO NOT LIST THE LAST WORDING

**IRELPER**

**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

*Changes in green were made at the start of Wave 2 with the approval of the researchers*



## 15. Type of care

IF A02X\_QMERECOMP2a=1 AND A02X\_TYPQMERE2a=1

Questionnaire concerned:

- "Referent Mother"

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

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?

**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]?

**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 PARTNER WE ARE TALKING ABOUT.

**If EFVIT=4 display a recommendation**

**INT:** IF THE MOTHER SAYS THE FATHER IS THE MAIN TYPE OF CARE, CODE "OTHER TYPE OF CARE" AND ENTER "FATHER" (changed at start of wave 1)

**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

**(Changed at start of Wave 1)**

**If EFVIT=4**

**MEMEGARDJ**

**When [ELFE child]/[twin child] is/are with their father, 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

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**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 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

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 if GARDENF=(4, 5, 6, 8, 10)

- 2 Yes, but on an alternating basis with another home
- 3 No

If **E2A\_GARDENF not A01\_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**

(Changed at start of Wave 1)

**[ELFE child] and [twin child] is [are] now going to nursery school. Is this because:**

If GARDENF=9

**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)

**DURECO**

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

If (GARDENF=9 or 7) OR (LIEUGARD=3) “How many hours a week do/does [ELFE child] and [twin child] spend at his/her/their main place of care?”

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

|\_\_|\_\_| 1 to 50

(Changed at start of Wave 1)

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 paternal 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 A 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

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

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- 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

**From whom?**

If CONED=1

**CONEDPRO**

**Professionals that take care of the child**

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

- 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

**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

**From whom?**

If CONSO=1

**CONSOPRO**

**Professionals that take care of the child**

And 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

**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

**From whom?**

If CONAL=1

**CONALPRO**

**Professionals that take care of the child**

(And 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

**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

**From whom?**

If CONHY=1

**CONHYPRO**

**Professionals that take care of the child**

And 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

**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

**From whom?**

*If CONSA=1*

**CONSAPRO**

**Professionals that take care of the child**

And 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

**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] and [twin child] doesn't/don't go to nursery school, but would you like them to?**

- 1 Yes ⇒ SHEMO
- 2 No ⇒ SHEMN

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

**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

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- 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)

**NRTRAJ(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 every day or every week? (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

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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)

**NRTRAJ(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\_QMERECOMP2a=1

Questionnaire concerned:

- "Referent Mother"

If the mother is in a couple with the father of the child and cohabits on a permanent basis with him or she is in a couple with a woman on a permanent basis (SITUAFAMM=1 or SITUAFAM=3 with LIENTYP=7 SEXE=2), do not ask variables from SSA to COMPS4. If the father or the cohabiting female partner is not participating, the questions are asked to the mother.

If VALIDCP1=2 OR 3 AND EFVIT=1 full Referent Mother questionnaire

Part to be repeated for twins

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."

### a. Social security cover

IF A02X\_TYPQMERE2A=1 AND A02X\_ADOCUMERE2 in (1, 2)

#### 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

(Changed at start of Wave 1)

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

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- 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**

**Months**

|\_|\_|

**ACOMPS3**

**Year**

|\_|\_|\_|\_|

If COMPS3=1

**COMPS4**

**Is it CMU universal healthcare coverage?**

- 1 Yes
- 2 No

## **b. Health booklet**

*IF A02X\_TYPQMERE2a=1*

**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 MOTHER WE WILL CALL HER 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.**



Start field 17/05/2013 – 12/10/2020 version

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.

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- 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

*IF A02X\_TYPQMERE2a=1*

For children with a "poor" or "rather poor" state of health reported at 1 year, the relating health issue is displayed for the interviewer

**You told us at 1 year that your child's state of health was not good. How is he/she today?**

If no serious problem reported at 1 year or 1 year not done

**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:

**"Last year you told us about [name of health problem reported at 1 year]" "Did [ELFE child] visit a doctor several times between 1 and 2 years for [display DIAGPBP]?"**

**DIAGPB1(1à4)** *(not available since empty)*

- 1 Yes
- 2 No
- 3 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 since 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(1à4)** *(not available since empty)*

**Specify**

---

INT: DO NOT LIST. TWO 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. TWO 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**

*IF A02X\_TYPQMERE2a=1*

"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**

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
- 3 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

IF A02X\_TYPQMERE2a=1

### 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)

What was the date of the accident?

If TRAUCRAN(1à10)=1

**\*DATA CJ(1à10)** *(suffix 8 to 10 not available as empty)*

Day

|\_|\_|

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

**\*DATA CM(1à10)** *(suffix 8 to 10 not available as empty)*

Months

|\_|\_|

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

**DATA CA(1à10)** *(suffix 8 to 10 not available as empty)*

Year

|\_|\_|\_|\_|

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

**PERTCON(1à10)** *(suffix 8 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)** *(suffix 4 to 10 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)** *(suffix 8 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(1 à 10)=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)**

**Specify**

---

**SOS**

**Has he/she (also) seen another emergency doctor?**

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

## f. Hospital visits

IF A02X\_TYPQMERE2a=1

“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

Repeat from HOSPJR to ETATHPACC 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) (suffix 10 not available as empty)

What was the date of the hospital admission? (Day of entry)

1 to 31 + DK=99

\*HOSPM(1à10) (suffix 10 not available as empty)

What was the date of the hospital admission? (The month)

1 to 12 + DK=99

HOSPA(1à10) (suffix 10 not available as empty)

What was the date of the hospital admission? (The year)

2011 à 2013 + DK=9999

HOSPJR(1à10) (suffix 10 not available as empty)

Was it a non-overnight visit?

- 1 Yes
- 2 No

HOSPACC(1à10) (suffix 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)** (suffix 10 not available as empty)

**Was it a road accident?**

- 1 Yes ⇨ ACC1J(1à10)
- 2 No

**LIEUACC(1à10)** (suffix 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)** (suffix 10 not available as empty)

**Day**

INT: THE DAY

(1 to 31) + DK=99

**\*ACC1M(1à10)** (suffix 10 not available as empty)

**Month**

INT: THE MONTH

(1 to 12) + DK=99

**ACC1A(1à10)** (suffix 10 not available as empty)

**Year**

INT: THE YEAR

(2011 to 2013) + DK=9999

If TYPACCC(1à10)=2

**ACC1TYP(1à10)** (suffix 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, specify
- INT: LIST

If ACC1TYP(1à10)=7

**\*ACC1TYP(1à10)** (suffix 2 to 10 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)**

**Burn**

1 Yes

2 No

**ACC1LES3(1à10)**

**Fracture**

1 Yes

2 No

**ACC1LES4(1à10)**

**Cranial trauma**

1 Yes

2 No

**ACC1LES5(1à10)**

**Sprain, dislocation**

1 Yes

2 No

**ACC1LES6(1à10)**

**Other**

1 Yes

2 No

INT: LIST. SEVERAL ANSWERS POSSIBLE

If ACC1LES6(1à10)=1

**\*ACC1LESP(1à10)** (suffix 3 to 10 not available as empty)

**Specify**

\_\_\_\_\_

If HOSP=1 AND HOSPACC(1à10)=1

**What parts of the body were damaged?**

**ACC1PART1(1à10)**

**Head, neck, face**

1 Yes

2 No

**ACC1PART2(1à10)**

**Shoulder, arm**

1 Yes

2 No

**ACC1PART3(1à10)**

**Hand**

- 1 Yes
- 2 No

**ACC1PART4(1à10)**

**Knee, leg, foot**

- 1 Yes
- 2 No

**ACC1PART5(1à10)**

**Other**

- 1 Yes
- 2 No

If ACC1PART5(1à10)=1

**\*ACC1PARTP(1à10)** *(suffix 4 to 10 not available as empty)*

**Specify**

---

**ACC1PC(1à10)** *(suffix 10 not available as empty)*

**Did [ELFE child] lose consciousness after the accident?**

- 1 Yes
- 2 No

If ACC1PC(1à10)=1

**PERTCOND(1à10)** *(suffix 3 to 10 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)** *(suffix 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)** *(suffix 110 not available as empty)*

**Adenoidectomy**

- 1 Yes
- 2 No

**TYPCHIR2(1à10)** *(suffix 210 not available as empty)*

**Insertion of grommets, ear aerator (often linked to adenoidectomy)**

- 1 Yes
- 2 No

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**TYPCHIR3(1à10)** *(suffix 310 not available as empty)*

**Removal of beauty spot**

1 Yes

2 No

**TYPCHIR4(1à10)** *(suffix 410 not available as empty)*

**Removal of tonsils (tonsillectomy)**

1 Yes

2 No

**TYPCHIR5(1à10)** *(suffix 510 not available as empty)*

**Inguinal hernia**

1 Yes

2 No

**TYPCHIR6(1à10)** *(suffix 610 not available as empty)*

**Lowering of the testicles (ectopic testis)**

1 Yes

2 No

**TYPCHIR7(1à10)** *(suffix 710 not available as empty)*

**Circumcision**

1 Yes

2 No

**TYPCHIR8(1à10)** *(suffix 810 not available as empty)*

**Appendectomy**

1 Yes

2 No

**TYPCHIR9(1à10)** *(suffix 910 not available as empty)*

**Fracture reduction**

1 Yes

2 No

**TYPCHIR10(1à10)** *(suffix 1010 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)** *(suffix 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 17, 18, 19, 110 not available as empty)*

**Asthma check-up**

- 1 Yes
- 2 No

**MOTHOSPJ2(1à10)** *(suffixes 27, 28, 29, 210 not available as empty)*

**Allergy check-up or reintroduction of medicine or food**

- 1 Yes
- 2 No

**MOTHOSPJ3(1à10)** *(suffixes 37, 38, 39, 310 not available as empty)*

**Check-up of insufficient height or weight increase**

- 1 Yes
- 2 No

**MOTHOSPJ4(1à10)** *(suffixes 47, 48, 49, 410 not available as empty)*

**Other endocrine check-up (hairiness, puberty, overweight)**

- 1 Yes
- 2 No

**MOTHOSPJ5(1à 10)** *(suffixes 57, 58, 59, 510 not available as empty)*

**Check-up of psychomotor retardation (or development)**

- 1 Yes
- 2 No

**MOTHOSPJ6(1à10)** *(suffixes 67, 68, 69, 610 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 77, 78, 79, 710 not available as empty)*

**Annual check-up of chronic pathology (GH, insulin treatment, sickle-cell anaemia, etc.)**

- 1 Yes
- 2 No

**MOTHOSPJ8(1à10)** *(suffixes 87, 88, 89, 810 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 17, 18, 19, 110 not available as empty)*

**Asthma attack**

- 1 Yes
- 2 No

**MOTHOSPN2(1à10)** *(suffixes 27, 28, 29, 210 not available as empty)*

**Bronchiolitis**

- 1 Yes
- 2 No

**MOTHOSPN3(1à10)** *(suffixes 37, 38, 39, 310 not available as empty)*

**Bronchitis**

- 1 Yes
- 2 No

**MOTHOSPN4(1à10)** *(suffixes 47, 48, 49, 410 not available as empty)*

**Pneumopathy**

- 1 Yes
- 2 No

**MOTHOSPN5(1à10)** *(suffixes 57, 58, 59, 510 not available as empty)*

**Gastroenteritis or dehydration**

- 1 Yes
- 2 No

**MOTHOSPN6(1à10)** *(suffixes 67, 68, 69, 610 not available as empty)*

**Urinary infection, kidney infection**

- 1 Yes
- 2 No

**MOTHOSPN7(1à10)** *(suffixes 77, 78, 79, 710 not available as empty)*

**Faintness, dizziness**

- 1 Yes
- 2 No

**MOTHOSPN8(1à10)** *(suffixes 87, 88, 89, 810 not available as empty)*

**Convulsions**

- 1 Yes
- 2 No

**MOTHOSPN9(1à10)** *(suffixes 97, 98, 99, 910 not available as empty)*

**Meningitis**

- 1 Yes
- 2 No

**MOTHOSPN10(1à 10)** *(suffixes 107, 108, 109, 1010 not available as empty)*

**Fever**

- 1 Yes
- 2 No

**MOTHOSPN11(1à10)** *(suffixes 117, 118, 119, 1110 not available as empty)*

**Ear/nose/throat infection**

- 1 Yes
- 2 No

**MOTHOSPN12(1à10)** *(suffixes 127, 128, 129, 1210 not available as empty)*

**Skin disease**

- 1 Yes
- 2 No

**MOTHOSPN13(1à10)** *(suffixes 137, 138, 139, 1310 not available as empty)*

**Other reason**

- 1 Yes
- 2 No

INT: DO NOT LIST. SEVERAL ANSWERS POSSIBLE

*If MOTHOSPN11(1à10)=1*

**\*MOTHOSPN1P(1à10)** *(suffixes 3 to 10 not available as empty)*

**Specify**

\_\_\_\_\_

*If MOTHOSPN13(1à10)=1*

**\*MOTHOSPN2P(1à10)** *(suffixes 5, 7, 8, 9, 10 not available as empty)*

**Specify**

\_\_\_\_\_

*If HOSPJR(1à10)=2*

**HOSPREA(1à10)** *(suffixes 8 to 10 not available as empty)*

**During the hospitalization, was [ELFE child] in an intensive care unit?**

- 1 Yes
- 2 No

**ETATO(1à10)** *(suffix 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 A02X\_TYPQMERE2a=1*

*If HOSPACC(1à10)=1 AND ETATO(1à10)=(2, 3, 4)*

**ETATS(1à10)** *(suffix 10 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)** *(suffix 10 not available as empty)*

Which?

---

*If ETATS(1à10)=1*

**ETATH(1à10)** *(suffix 10 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. L\_L\_L 0 TO 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

*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: % 1 to 100

**\*ETATHIPC** (*not available as empty*)

The disability category: Clear

## h. Examinations (scans, MRIs, etc.)

IF A02X\_TYPQMERE2a=1

### 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?**

I\_\_I 0 to 10 + DK=99/Refuses

If PASCAN2=1

**NBSCAN2**

**How many scans of this part of the body?**

I\_\_I 0 to 10 + DK=99/Refuses

If PASCAN3=1

**NBSCAN3**

**How many scans of this part of the body?**

I\_\_I 0 to 10 + DK=99/Refuses

If PASCAN4=1

**NBSCAN4**

**How many scans of this part of the body?**

I\_\_I 0 to 10 + DK=99/Refuses

If PASCAN5=1

**NBSCAN5**

**How many scans of this part of the body?**

I\_\_I 0 to 10 + DK=99/Refuses

If PASCAN6=1

**NBSCAN6**

**How many scans of this part of the body?**

I\_\_I 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, PARAD1-9, and the date of the interview

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

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*

**NBPARED1**

**How many x-rays of the entire body?**

I\_I\_I 0 to 10 + DK=99/Refuses

*If PARAD2=1*

**NBPARED2**

**How many x-rays of this part of the body?**

I\_I\_I 0 to 10 + DK=99/Refuses

If PARAD3=1

**NBPARAD3**

**How many x-rays of this part of the body?**

I\_I\_I 0 to 10 + DK=99/Refuses

If PARAD4=1

**NBPARAD4**

**How many x-rays of this part of the body?**

I\_I\_I 0 to 10 + DK=99/Refuses

If PARAD5=1

**NBPARAD5**

**How many x-rays of this part of the body?**

I\_I\_I 0 to 10 + DK=99/Refuses

If PARAD6=1

**NBPARAD6**

**How many x-rays of this part of the body?**

I\_I\_I 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**

**Head**

1 Yes

2 No

**PARIRM2**

**Other**

1 Yes

2 No

**PARIRM9**

**Doesn't know**

1 Yes

2 No



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INT: LIST. SEVERAL ANSWERS POSSIBLE

If PARIRM1=1

**NBPARIRM1**

**How many MRIs of this part of the body?**

I\_\_I 0 to 10 + DK=99/Refuses

If PARIRM2=1

**NBPARIRM2**

**How many MRIs of this part of the body?**

I\_\_I 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**

**How many gamma scans of this part of the body?**

I \_ I 0 to 10 + DK=99/Refuses

If PARSC2=1

**NBPARSC2**

**How many gamma scans of this part of the body?**

I \_ I 0 to 10 + DK=99/Refuses

If PARSC3=1

**NBPARSC3**

**How many gamma scans of this part of the body?**

I \_ I 0 to 10 + DK=99/Refuses

If PARSC4=1

**NBPARSC4**

**How many gamma scans of this part of the body?**

I \_ I 0 to 10 + DK=99/Refuses

If PARSC5=1

**NBPARSC5**

**How many gamma scans of this part of the body?**

I \_ I 0 to 10 + DK=99/Refuses

**DATESCINTI(1à5)**

**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?**

I\_\_I 0 to 10 + DK=99/Refuses

*If PARECHO2=1*

**NBPARECHO2**

**How many ultrasounds of this part of the body?**

I\_\_I 0 to 10 + DK=99/Refuses

*If PARECHO3=1*

**NBPARECHO3**

**How many ultrasounds of this part of the body?**

I\_\_I 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**

*IF A02X\_TYPQMERE2a=1*

*“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**

**Has he/she had any cough episodes?**

- 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  
(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

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- 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

**DECLSIFF**

**Are the wheezing episodes generally triggered by:**

- 1 A cold
- 2 Running, getting excited, laughing
- 3 Other things

If DECLSIFF=3

**\*DECLSIFFP**

**Specify**

---

**TOUXSIFF**

**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**

**A 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)?"**

**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)?"**

**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

**(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) not 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**

**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**

**Months**

|\_|\_|

(NA=88, DK=99) min 0 max 30

**TRAUDS**

**Weeks**

|\_|

(NA=8, DK=9) min 0 max 4

**DEGSUR**

**What is the degree of deafness?**

1 Slight

2 Average

3 Severe

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- 4 Acute
- 5 Uncertain
- 9 DK

#### **TRAUDO**

**Does the hearing problem concern one ear or both?**

- 1 One ear
- 2 Both
- 9 [DK]

*If TRAUD=1 and DEGSUR=(3, 4)*

#### **APPAREILAUD**

**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**

**Private consultation**

- 1 Yes
- 2 No

#### **SUILIE2**

**Hospital**

- 1 Yes
- 2 No

#### **SUILIE3**

**Specialized centre for hearing deficiencies (specialist centre for early medico-social action, early family education support service)**

- 1 Yes
- 2 No

#### **SUILIE4**

**Multi-purpose centre (centre for early medico-social action, healthcare centre for children with multiple handicaps, etc.)**

- 1 Yes
- 2 No

#### **SUILIE5**

**Other**

- 1 Yes
- 2 No

#### **SUILIE6**

**No current place of treatment (exclusive item)**

- 1 Yes
- 2 No

**INT: LIST. SEVERAL ANSWERS POSSIBLE**

*If SUIILIE5=1*

**SUIILIEP** *(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)**

**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, ..)*

**MOTIFREFUVAC1C**

**What was the main reason for refusing the vaccine mentioned in QUELREFUVAC1?**

.....

*If QUELREFUVAC2 not (16, 99, ..)*

**MOTIFREFUVAC2C**

**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 (Changed at start of Wave 1)

**COUVEUSE**

**Has [ELFE child] ever been placed in an incubator?**

1 Yes

2 No

*If COUVEUSE=1*

**COUVEUSEN**

**For how long?**

1\_\_1\_1

**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\_QMERECOMP2a=1

### Questionnaires concerned:

- "Referent Mother"
- "Non-Cohabiting Mother"

If the mother is in a couple with the father of the child and cohabits on a permanent basis with him or she is in a couple with a woman on a permanent basis, ask only the greyed-out questions (SITUAFAMM=1 or SITUAFAM=3 with LIENTYP\_(1à20)=7 SEXE=2)

In other cases where the father did not participate in the 1 Year survey, ask him the entire module (SITUAFAMM=(2, 4, 5, 6 or 7) or SITUAFAM=3 without LIENTYP\_(1à20)=7 SEXE=2)

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

If VALIDCP1=2 OR 3 AND EFVIT=1 full Referent Mother questionnaire

Ask this module twice for twins except CADOCHER

### **a. Games and leisure activities**

IF A02X\_TYPQMERE2a in (1, 4)

**"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 HANDSETS.

**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

How much time a day on average?

If JVIDEO=(1, 2, 3)

**VIDEOTH**

Hours

/\_\_\_/ h

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

**VIDEOTM**

Minutes

/\_\_\_/ min

(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 father or your partner

(depending on LIENTYP (1à20)=(1, 7))

- 1 Every day

Start field 17/05/2013 – 12/10/2020 version

- 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\_TYPQMER2a in (1, 4) AND A02X\_ADOCUMERE4 in (1, 2)*

#### **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

Start field 17/05/2013 – 12/10/2020 version

*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

/\_\_\_/ h

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

**TELEWEM**

Minutes

/\_\_\_/ min

(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

/\_\_\_/ h

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

**TELESM**

Minutes

/\_\_\_/ min

(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**

[Times per week, month of 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 father
- 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 him happy, the parents finally decide to give him the twice-as-expensive present. In your opinion, the parents are:

**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 him happy, the parents finally decide to give him the twice-as-expensive present. In your opinion, the parents are:

**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 are:

**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]

Start field 17/05/2013 – 12/10/2020 version

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

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**

- 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

(Valid only for Wave 1)

## 18. The mother's health

IF A02X\_QMERECOMP2a=1AND A02X\_TYPQMERE2a in (1, 3, 4)

Questionnaire concerned:

- "Referent Mother"
- "Mother of Placed Child"
- "Non-Cohabiting Mother"

The questions **from AGTRAVSOIN to GTRAVPERE** are asked to the mother only if she didn't participate in the 2 year  
If MERBIL not 17

**If VALIDCP1=(2 OR 3) AND EFVIT=1 full Referent Mother questionnaire**

### a. Work in a hospital environment

**If occupational activity sector variable recorded at 2 months= "Healthcare" ask GTRAVSOIN**

*"We would like to ask you for more information about your occupational activity when you were pregnant with [ELFE child]"*

**INT:** THIS **INFORMATION** WILL ENABLE US TO SPECIFY WHICH TYPE OF PRODUCTS AND RADIATION THE MOTHER WAS EXPOSED TO DURING HER PREGNANCY, SO AS TO PRECISELY ANALYZE WHETHER THIS EXPOSURE HAD CONSEQUENCES ON THE PREGNANCY AND THE FUTURE HEALTH OF HER CHILD

**"During your pregnancy, you worked in a healthcare environment (hospital, clinic, doctor's office, etc.)."**

**GTRAVSOIN(1à2)** (suffix 2 not available as empty)

**Can you tell us in which department/unit you worked in?**

- 1 [Did not work in a healthcare environment]
- 2 Operating theatre
- 3 A&E (including paediatric)
- 4 Sterilization
- 5 Intensive care (including paediatric)
- 6 Oncology (including paediatric)
- 7 Haematology (including paediatric)
- 8 Radiology
- 9 Laboratory
- 10 Surgery
- 11 Paediatrics
- 12 Short-stay medical service
- 13 Medium- or long-stay medical service
- 14 Physical and rehabilitation medical service
- 15 Psychiatry
- 16 Private doctor's office
- 17 Home hospitalization
- 18 Other

**INT:** DO NOT LIST

**IF SEVERAL DEPARTMENTS/UNITS, NOTE THE TWO WHERE THE MOTHER SPENT THE MOST TIME DURING HER PREGNANCY**

**If GTRAVSOIN(1à2)=18**

**\*GTRAVSOINP**

**Specify**

---

**b. Work in a hospital environment (father)**

(From AGTRAVSOIN to GTRAVPERE - questions asked to father. If the father is not participating, return to the mother)

**AGTRAVSOIN**

**"During the year preceding your pregnancy with [ELFE child], did the father 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 he 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 the father of [ELFE child] worked at the start of your pregnancy? (Be as precise as possible: supermarket, IT maintenance and repair, healthcare, the transport of equipment or perishable foodstuffs, hotel, etc.).**

\_\_\_\_\_

*"Now let's talk about your life today"*



**c. Leisure (physical or sports activity)**

**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

**d. 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\_QMERECOMP2a=1 AND A02X\_TYPQMERE2a=1

Questionnaire concerned:

- “Referent Mother”

**“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**

**Did you breastfeed [ELFE child], even partly?**

- 1 Yes ⇨ LAITCROI
- 2 No

If ALLAIT=2

**AGEDEF**

**How old was he/she, in months, when you 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**

For all mothers

**LAITCROI**

**Since [ELFE child] was one, have you regularly given him/her 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, have you regularly given him/her 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 TPLAITV=(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, have you regularly given him/her 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...**

### **FRUIT**

#### **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

### **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**

## **FRUIT**

### **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**

## **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**

### **POISSON**

#### **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\_QMERECOMP2a=1

Questionnaires concerned:

- "Referent Mother"
- "Mother of Placed Child"
- "Non-Cohabiting Mother"

*"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



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- 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=(1, 2)

### **TPSTVWEH**

**Hours**

/\_\_\_/ h

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

### **TPSTVWEM**

**Minutes**

/\_\_\_/ min

(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**

/\_\_\_/ h

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

### **TPSTVSEMM**

**Minutes**

/\_\_\_/ min

(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

### **MOMORDI**

**Again in the last 12 months, how often 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?”**

*If MOMORDI=(1, 2)*

**In hours**

**TPSORDIWEH**

/\_\_\_/ h

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

**In minutes**

**TPSORDIWEM**

/\_\_\_/ min

(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**

/\_\_\_/ h

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

**TPSORDISEMM**

**Minutes**

/\_\_\_/ min

(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

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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\_QMERECOMP2a=1 AND A02X\_ADOCUMERE5 in (1, 2)

Questionnaires concerned:

- "Referent Mother" if father non-cohabiting
- "Mother of Placed Child" if father non-cohabiting
- "Non-Cohabiting Mother"

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.

If the district, neighbourhood section of the cohabiting father at 1 year and still cohabiting at 2 years was not documented at 1 year (the father did not participate and no feedback from mother), it will be documented by the mother at 2 years (full mother questionnaire) and if the father is taking part, ask him only the cohabiting father questions.

If VALIDCP1=2 OR 3 AND EFVIT=1 full Referent Mother questionnaire

**"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

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- 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. Parents' social network

IF A02X\_QMERECOMP2a=1 AND A02X\_ADOCUMERE3 in (1, 2)

Questionnaires concerned:

- "Referent Mother" if father non-cohabiting
- "Mother of Placed Child" if father non-cohabiting
- "Non-Cohabiting Mother"

If the cohabiting father or cohabiting father of placed child is not participating, return later to the questionnaire with the mother.

**If VALIDCP1=(2 OR 3) AND EFVIT=1 full Referent Mother questionnaire**

"Now let's talk about the people that you [**and first name of LIENTYP\_(1à20)=1 or LIENTYP=7 »**] see [**"together" if LIENTYP\_(1à20)=1 or LIENTYP\_(1à20)=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\_(1à20)=(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

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*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 mother and her partner*

*If FREQPAR7=1*

**FREQPARP**

**Specify**

---

*If FREQPAR not 8 and several answers*

*If FREQPAR(1à7)=1*

*Display answer in FREQPAR/FREQPARP (apart from if one answer)*

**FREQPLU**

**Among these people, who do you see the most? |\_ |**

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 mother and her 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 à 99 + DK=999 + NA

**NBFILLE**

**How many of the girls invited attended?**

\_\_\_\_\_ 0 à 99 + DK=999 + NA

## 23. Understanding and sharing of tasks in couple

IF A02X\_QMERECOMP2a=1 AND SITUAFAMM in (1, 3)

Questionnaires concerned:

- "Referent Mother"
- "Mother of Placed Child"
- "Non-Cohabiting Mother"

Asked only if the mother is in a couple and cohabits on a permanent basis with her partner (if SITUAFAMM=(1 or 3)).

If "Mother of Placed Child" or "Non-Cohabiting Mother" questionnaire and SITUAFAMM=(1 or 3): ask questions VAISS to LINGE and MENAGE to VIOLEN only

**"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 Mother

IF A02X\_TYPQMERE2a=1

If SITUAFAMM=(1, 3)

If SITUAFAMM=(1, 3) ask MANGB to QCHERCH

### **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]

*IF A02X\_TYPQMERE2a in (1, 3, 4)*

*If SITUAFAMM=(1, 3)*

*Questionnaires concerned: "Referent Mother", "Mother of Placed Child", "Non-Cohabiting Mother"*

*If SITUAFAMM=(1, 3) ask 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]

## a. Sharing of tasks and understanding

IF A02X\_TYPQMERE2a=1

From FQCHGSVN to FQCHGVETP: referent mother AND SITUAFAMM=(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]

How often are [ELFE child's] other clothes (trousers, dress, shirt, etc.) changed to be washed?

### FQCHGVETN

|\_\_|\_\_| 1 to 99 + DK + REF

### FQCHGVETP

[How often]

- 1 a day

- 2 a week
- 3 a month
- 8 [Refuses]
- 9 [DK]

***From MENAGE to VIOLEN: all types of mother AND SITUAFAMM=(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\_QMERECOMP2a=1 AND A02X\_TYPQMERE2a=1

### Questionnaire concerned

- "Referent Mother"

If the mother is in a couple with the father of the child and cohabits on a permanent basis with him or she is in a couple with a woman on a permanent basis, ask only the greyed-out questions (SITUAFAMM=1 or SITUAFAM=3 with LIENTYP\_(1à20)=7 SEXE=2)

In other cases where the father did not participate in the 1 Year survey, ask him the entire module (SITUAFAMM=2, 4, 5, 6,7) or SITUAFAM=3 without LIENTYP\_(1à20)=7 SEXE=2)

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

If VALIDCP1=(2 OR 3) AND EFVIT=1 full Referent Mother questionnaire

IF A02X\_ADOCUMERE2=1

**"We are now going to talk about some of [ELFE child's] activities, his/her language and sleep."**

### **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 + NA 99 DK

**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

(Changed at start of Wave 1)

Question added from 28/05

## **a. The child's pronunciation**

IF A02X\_TYPQMERE2a=1

*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=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**

**OR**

- 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/TO 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/TO 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/TO 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/TO 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"

M\_OU DISPLAY AS IN THE SENTENCE "WHERE IS THE CAT?"

M\_OU DISPLAY AS IN THE SENTENCE "HE'S HERE!"

M\_PAS DISPLAY AS IN THE SENTENCE "I DON'T WANT ANY"

M\_PATES display EDIBLE PASTA

M\_VERRE display TO DRINK

M\_CA DISPLAY AS IN THE SENTENCE "I WANT THAT"

M\_COINCOIN display LIKE a duck

M\_MEUH display LIKE a cow

M\_BEEBEE display LIKE a sheep

M\_MIAOU display LIKE a cat

M\_OUAFOUAF display LIKE a dog

**ENQ1**

Did the mother 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=2

**ORDIM**

**ORDI**

- 1 Yes
- 2 No

**b. 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

### **c. The child's sleep**

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**

Hours

|\_|\_| 1 to 12 + DK=99 + REFUSES=88

**HEURLEVM**

Minutes

|\_|\_| 0 to 59 + DK=99 + REFUSES=88

And on the weekend?

**HEURLEVWEH**

Hours

|\_|\_| 1 to 12 + DK=99 + REFUSES=88

**HEURLEWEM**

Minutes

|\_|\_| 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

|\_|\_| H (min 0 max 23)

**TPSOMJM**

Minutes

|\_|\_| Min (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 Doesn't know

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

—

**BABYPHUTA**

The year

—

If BABYPH=1

**How far is (was) the babyphone from the bed?**

**BABYPHD**

**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
- 2 More than 1 metre from the bed

#### **d. The child's usual behaviour**

"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

**e. Toilet training**

**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 the following contact details

### Mother

*(If no mobile number, ask her:*

*“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=7

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)

### **FINES1**

ID of childcare centre

### **\*GARNOM**

Name of crèche

(LIST) ⇒ GARCP

\_\_\_\_\_

### **\*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 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?

\_\_\_\_\_

**\*ECONOM**

What is the name of his/her school?

\_\_\_\_\_

What is the address of the school?

**\*ECONUM**

Number

|\_\_|\_\_|\_\_| (1 to 9997) + DK and NA

**\*ECONUMCP**

Additional street address information

**\*ECORUE**

Street name (50 characters maximum)

**\*ECOCP**

Postcode

|\_|\_|\_|\_|\_| (01000 to 97500) + DK and NA

**\*ECOCOM**

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 -