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National Longitudinal Survey of Children and Youth Understanding the Early Years - Field Test



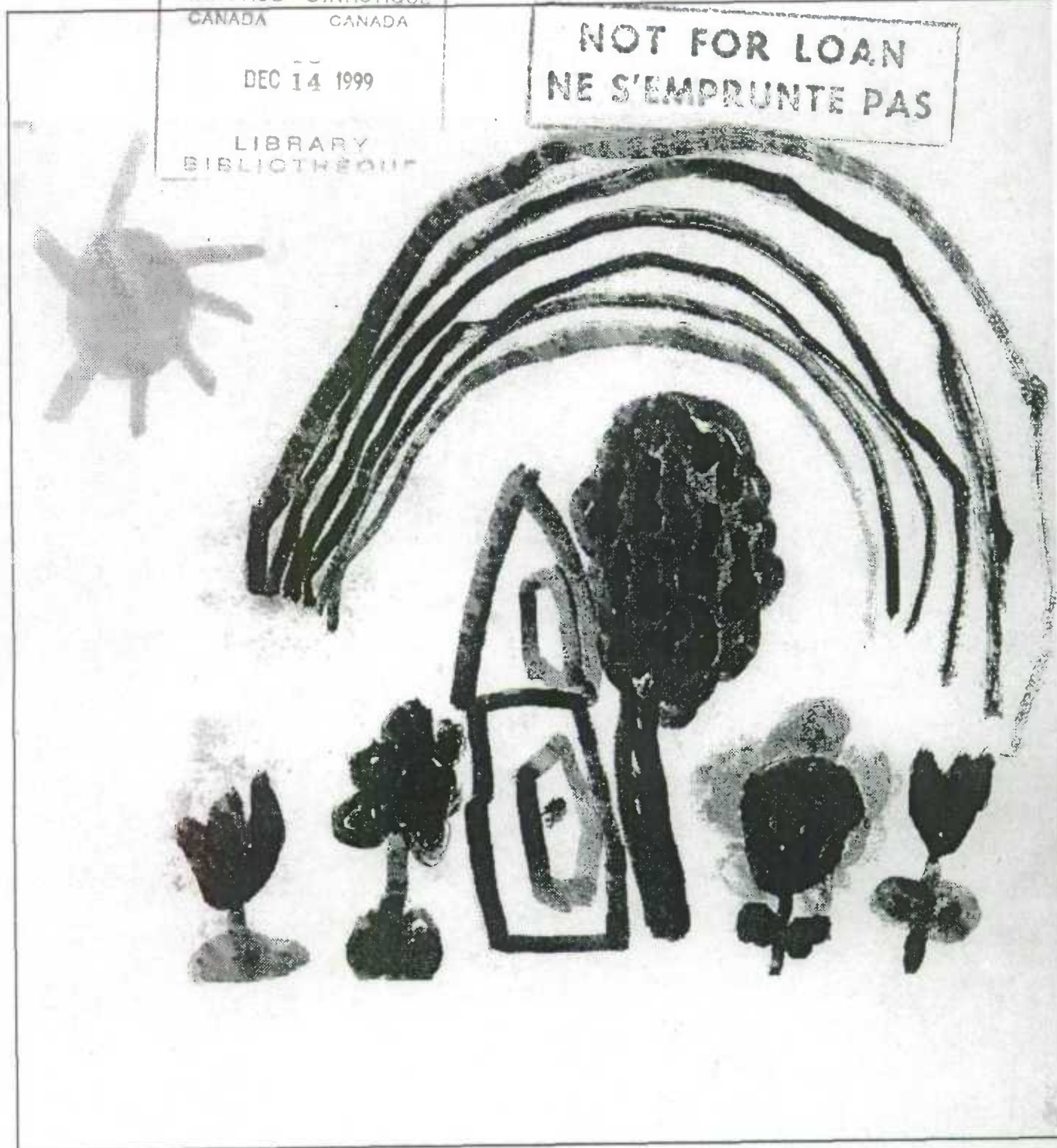
Interviewer's Manual

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CHAPTER 1

OVERVIEW OF THE SURVEY

1.1 Introduction

The goal of this field test is to evaluate the administration of instruments which may be added to the National Longitudinal Survey of Children and Youth (NLSCY) to provide improved data on development and learning for children under the age of six. This is in response to the federal government's increased recognition of the importance of early childhood as a foundation for human development. The federal ***Speech from the Throne*** in September 1997 committed the government to monitor children's readiness to learn over time. The instruments which are being evaluated will complement the data from the Peabody Picture Vocabulary Test - Revised (PPVT-R) and data on the child provided by the Person Most Knowledgeable (PMK) about the selected child and the teacher (for children in school).

The NLSCY is a long term survey designed to measure children's development and well-being. The survey is conducted in partnership by Human Resources Development Canada (HRDC) and Statistics Canada. Statistics Canada is responsible for data collection, while HRDC, the major funding partner, directs and disseminates research. The survey looks at development in a holistic way. Data is collected on children's physical and emotional health, behaviour, activities, and school achievement. The impact of environmental factors such as family structure, socio-economic status, parenting style and peer interactions are also examined. The survey collections take place every two years. Cycle 1 took place in 1994-95, Cycle 2 in 1996-97, Cycle 3 in 1998-99. Cycle 4 will take place in 2000-01 and will include enhancements to better measure development and learning for children under the age of six.

The NLSCY is the first national longitudinal study of children in Canada. The research using the survey data will expand our understanding of the developmental pathways that Canadian children follow as they grow to adulthood, including the impact of their life experiences. The longitudinal data will allow for the study of factors affecting children's development over time, which will strengthen conclusions for use in policy and programs for children and their families. A series of research papers using Cycle 1 data has been released by HRDC, with plans for a second set of research papers to be done using the Cycle 2 data. Many individuals and organizations, such as governments, researchers, educators and community-based professionals in fields such as health and social services, are beginning to use the data or the research in their work.

Objectives

The NLSCY is being enhanced to collect improved data on the development and learning of children under six.

The NLSCY enhancements will provide data to:

- monitor the level and change in children's readiness to learn;
- improve our ability to examine learning in a multi-dimensional child development context. The focus will be on children's development of language skills, cognitive skills and abilities, and learning processes, such as problem solving. The child's physical and motor development, emotional health and social knowledge and competence are important factors in enhancing our understanding of children's pathways to learning. The child's experiences in his or her family, with peers, and in other settings, such as preschool, are also important;
- improve our understanding of what encourages and what hinders children's development and learning; and to
- study the aspects of "learning outcomes" (such as cognition and learning processes) that may lead to a person's future success in learning, in work and in their private life.

The direct measures, which are being evaluated in this field test, will provide objective data on children's development and learning that are not available in the survey at the present time.

1.2 Objectives of the Field Test

- To assess the administration of five direct measures of children's development and abilities and to determine the feasibility of using each of them in the NLSCY. As well, to determine the time for administration of each questionnaire.
- To evaluate the training procedures and materials.
- To obtain feedback from parents and interviewers regarding the administration of these questionnaires.
- To produce reliability data for a shortened, translated version of the MacArthur Communicative Development Inventory which is found in the MacArthur Short Form Vocabulary Checklist (Booklet 9).

- To assess the appropriateness of a mail-out Ages and Stages Questionnaire (Booklet 8) for parents.
- To assess respondent relations materials such as introductory letters, brochure, poster, etc.

1.3 Collection Period

From **September 10 to October 6, 1999** (17 regular collection days*).

** regular collection days do not include Sundays, statutory holidays and LFS week.*

1.4 Sample

A total of 636 households have been selected to participate in the Understanding the Early Years Component. Children aged 8 to 16 months have been selected from provincial birth registry files. The remaining sample of older children, aged 17 months to 5 years, was chosen from Labour Force Survey rotates out. The distribution of households is presented in the following table:

Sample Distribution by Regional Office

<i>Regional Office</i>	<i>Total households selected</i>
<i>Montréal</i>	<i>323</i>
<i>Vancouver</i>	<i>313</i>
<i>TOTAL</i>	<i>636</i>

Only one child per household has been selected.

1.5 Collection Methodology

Each selected household will receive an introductory package two weeks prior to the beginning of data collection. Packages will include an introductory letter, a brochure, and in certain cases, an Ages and Stages Questionnaire (Booklet 8).

All the components of the survey will be completed on paper. Initial contact will be made by telephone and at this time household membership will be confirmed by a knowledgeable household member. You will then schedule an appointment with the Person Most Knowledgeable (PMK) about the selected child to complete the interview.

Given that most questionnaires must be administered directly to the selected child

aged 3 to 5 years, it is important that appointments be scheduled for a time when the child is most likely to concentrate. For example, appointments should not be scheduled during usual feeding, nap times, or too late in the evening.

Once in the household, you will first complete a questionnaire with the parent (Parent Questionnaire - Booklet 7). This questionnaire includes questions on the child's health, activities, child care, and other subjects.

If the respondent has a selected child between the ages of 3 and 5 years, you will administer 2 or 3 (pre-selected) of the 5 direct measures (questionnaires). Which of the questionnaires to administer will be indicated on your Control Form. **You must always administer each booklet in the order shown on the Control Form.**

Parents will be asked to give verbal consent before you administer any direct measures (Booklets 1 to 5) to the child. You must also check a box on the **Parent Questionnaire (Booklet 7)** confirming that verbal permission has been granted.

Direct measures for children aged 3 to 5 years old include :

- **Who Am I? Questionnaire (Booklet 1)**
- **Number Knowledge Questionnaire (Booklet 2)**
- **WPPSI-R Block Design Questionnaire (Booklet 3)**
- **ESI-R Questionnaire (Booklet 4)**
- **Raven's CPM Questionnaire (Booklet 5)**

After the administration of the direct measures, you will then complete the debriefing questions which are a part of the Parent Questionnaire (Booklet 7). Once the interview is completed, as soon as you leave the household, the **Interviewer's Observation Questionnaire (Booklet 10)**, which is an evaluation of the direct measures Booklets 1 to 5, must be completed by you. Also, for most of the questionnaires, the materials used will have to be disinfected (disinfection procedures are included in Chapter 15).

If the respondent has received with the Introductory Package, the **Ages and Stages Questionnaire (Booklet 8)**, you will then pick up the completed Ages and Stages Questionnaire after having completed the Parent Questionnaire (Booklet 7). This questionnaire is sent to the respondent two weeks before data collection and must be self-completed by the Person Most Knowledgeable about the selected child, before the interview in the household. If the respondent has not completed the Ages and Stages Questionnaire (Booklet 8), you will administer this questionnaire as well. If the respondent has a selected child aged 30 months or less, the **MacArthur Short Form Vocabulary Checklist (Booklet 9)** is to be **self-completed** by the Person Most Knowledgeable about the selected child, during the time of the interview.

The interview in the household is expected to last no more than **1 hour 15 minutes**.

1.6 Parliamentary Acts

Statistics Act

The National Longitudinal Survey of Children and Youth is subject to the **confidentiality** provisions of the Statistics Act.

To obtain honest and accurate data, you must stress to respondents that the information collected is strictly confidential. For respondents, confidentiality means that no one will identify them or their family.

The NLSCY is conducted under the **voluntary** provisions of the Statistics Act. In order to maintain a high response rate you must become familiar with its objectives and uses, because your ability to convey the importance of the survey affects respondent cooperation.

Official Languages Act

Remember that as a representative of Statistics Canada you have specific responsibilities under the provisions of the Official Languages Act.

Respondents have the right to be interviewed in the official language of their choice and this right must always be respected.

Bilingual interviewers must be prepared at all times to communicate and to interview in either official language. Uni-lingual interviewers who cannot communicate or interview in the other official language must inform the respondent that another interviewer will call back to conduct the interview and then report the situation to their Senior Interviewer.

1.7 Project Code

The project code for the Understanding the Early Years Component is **8088-8**.

Notes

CHAPTER 2

PRE-COLLECTION

2.1 Supplies

Supplies Provided by the Regional Office:

- 1 Interviewer's Manual
- 20 Copies of each kind of introductory letter (with and without Ages and Stages Questionnaire- Booklet 8)
- 20 Bilingual brochures "Canadian Children at a Glance"
- 1 Notice of visit pad
- 1 Control Form
- 1 Polaroid camera
- 3 Polaroid films
- 25 Posters
- 1 Roll of scotch tape
- 1 Assessment Supplies Box containing:
 - ✓ **1 Miscellaneous Kit**
 - 1 screen (file folder)
 - 1 pencil sharpener
 - 2 erasers
 - 6 pencils without erasers
 - ✓ **1 Parent Questionnaire reference card**
 - ✓ **1 WPPSI-R Block Design Kit**
 - 6 flat blocks, red on one side and white on the other
 - 8 flat blocks, red on one side and half red and half white on the other
 - 1 stimulus booklet
 - 1 stopwatch
 - ✓ **1 Number Knowledge Kit**
 - 25 white chips
 - 4 blue chips
 - 3 red chips
 - 7 triangles
 - 8 circles

- 1 triangle with the numbers 7, 4 and 9
- 1 triangle with the numbers 5, 6 and 2
- 1 triangle with the numbers 21, 25 and 18
- 1 triangle with the numbers 28, 31, 24
- 1 card with the numbers 4, 9, 2 and 7
- 1 card with the numbers 8, 5, 2 and 6
- 1 card with the numbers 12 and 54
- 1 card with the numbers 47 and 21

- ✓ **1 ESI-R Questionnaire Kit**
 - 10 one-inch wooden cubes
 - 2 pieces of 8 1/2" X 11" laminated construction paper (for building surface)
 - 4 3"X5" cards showing each of 4 figures (circle, cross, square, triangle)
 - 6 picture cards, numbered on the back, 2 each of a duck, a cup, and a house
 - 6 foot long, 1-inch wide tape

- ✓ **1 Raven's CPM test booklet**

- ✓ **1 Disinfection kit**
 - 1 750ml bottle of Pinosan
 - 1 spray bottle
 - 1 bottle with cap
 - 1 measuring spoon
 - Ziplock bags
 - Dish towels

In your package, in addition to the number of questionnaires given according to the totals indicated at the top right corner of your Control Form, you will have an **additional 5 copies** of each of the following questionnaires:

- Who Am I? Questionnaire- French version (**Booklet 1**)
For Vancouver only, interviewers will get 3 extra copies instead of 5.
- Who Am I? Questionnaire- English version (**Booklet 1**)
- Number Knowledge Questionnaire (**Booklet 2**)
- WPPSI-R Block Design Questionnaire (**Booklet 3**)
- ESI-R Questionnaire (**Booklet 4**)
- Parent Questionnaire (**Booklet 7**)
- MacArthur Short Form Vocabulary Checklist Questionnaire (**Booklet 9**)
- Interviewer's Observation Questionnaire (**Booklet 10**)

- 3 additional copies of the Raven's CPM Questionnaire (**Booklet 5**).
- 10 additional copies of the Ages and Stages Questionnaire (**Booklet 8**).

Very Important

Do an inventory of your materials when you receive them from the Regional Office, according to the supplies list outlined in this chapter. If any supplies are missing, contact your Senior Interviewer immediately.

Using the information on the Control Form verify that you have received all the questionnaires needed for the selected children in your sample, if there are some missing, contact your Senior Interviewer immediately.

Supplies provided by the interviewer:

The following should be carried with you for each interview:

- STC Identification Card
- Watch

2.2 Training

There will be two identical training sessions held. One session will be held on **September 7, 8, and 9th, 1999** and the other will be held on **September 13, 14, and 15th, 1999**. Your Senior Interviewer will inform you which session you have been assigned to.

The following materials are to be brought with you to your designated training session:

- ✓ **Assessment Supplies Box**
- ✓ **Interviewer's Manual**
- ✓ **Polaroid**
- ✓ **1 Film**

IT IS VERY IMPORTANT to read the Interviewer's Manual before training. You should allocate approximately 5 hours to do this. This survey has many requirements that differ from regular interviewing.

Before the training session, you should have received all Questionnaires used in

this field test. Pay close attention to Chapter 4 on interviewing young children.

2.3 Control Form

You will receive a Control Form (Appendix A) in your interviewer supplies package. This form contains the cases assigned to you for this collection period.

There are 5 main sections to this form. The first part of the form contains the **office ID number** and your **interviewer ID number**, the next section (top-right) is a listing of each questionnaire/booklet with a record of the number of booklets that you require, and should have received as a minimum amount of questionnaires, to conduct your assigned cases. Use this list to ensure that you have the correct number of booklets, in addition to any extra copies received.

The next four sections are repeated for **each case**. The first section contains the following **respondent demographic information**:

- the person identification number (selected child's ID)
- the parent's name (mother or Person Most Knowledgeable- PMK)
- the listing address
- the respondent's telephone number
- the selected child's name
- the child's date of birth
- the child's age in months

The next section, the **Booklet Order**, is the interview administration sequence which indicates which questionnaires must be conducted at each interview along with the sequential order in which they are to be administered.

Just below, there is a **Status Code** section where you are to check the final status code for each case. This section is to be completed once you have completed each case: Included beside the status code section is a place for **comments** where you can explain the cases which are not coded as complete.

Notes

CHAPTER 3

GENERAL INSTRUCTIONS

3.1 Paper Survey

Remember that all of the components of the survey will be completed on paper.

3.2 Introductory Packages

The household should have received, 2 weeks prior to the collection period, an introductory letter and a bilingual brochure ("Canadian Children at a Glance") from the Regional Office. Some households will also have received the Ages and Stages Questionnaire (Booklet 8) to be completed by the respondent prior to the interview and picked up during the home interview. Always remember to **carry extra copies of the respondent letter and the brochure** with you when you are interviewing.

3.3 Contacting the Household

Plan your work to ensure maximum results for the time spent making calls. Try to contact all your assigned households in the first couple of days - this will make your schedule planning much easier.

Your first contact with the household will be by telephone.

- You will then arrange an appointment, with the Person Most Knowledgeable about the selected child (PMK), for a home interview when the selected child is home and available.
- The information that you need for that first contact (telephone number, name of PMK, name of selected child) is on your Control Form. Refer to Chapter 2 for a description of the Control Form.
- If you were unable to establish contact over the phone after several attempts at different times, go directly to the house. If the respondent is not there then leave a Notice of Visit.
- If the PMK refuses to make an appointment, visit the household in person.
- Contacting the household will be explained in further detail in chapters to follow.

3.4 Preparation of Questionnaires and Materials Before the Interview

- Look on your Control Form in order to know which booklets you will need for each specific interview (refer to Chapter 2 for description of Control Form).
- Take booklets and write the following information on the cover page of each booklet needed for the interview: the **child's first and last name**, the **child's date of birth and age in months**, your **interviewer assignment number**, **person ID** (selected child).
- Ensure that you carry with you at least one or two extra booklets of each type of questionnaire (booklets 1(english), 1(french), 2, 3, 4, 5, 7, 8, 9, and 10), whether or not it is indicated on the Control Form.
- All questionnaires should be administered in the sequence indicated in the Booklet Order section of your Control Form. Remember to look at the Booklet Order section for all of your cases. The sequence of administration is different for each case.
- As mentioned earlier, ensure that you carry with you extra copies of the bilingual brochures and of the introductory letters.
- Check that your Polaroid is ready to take a picture (film inside) and that you carry at least four posters with you.
- Check that you have the material required to administer each questionnaire (as mentioned in each chapter about questionnaires).
- Ensure that the material has been disinfected according to the procedures in Chapter 15.

3.5 Questionnaires and Materials After the Interview

- Ensure that all of the required information about the household is on the front cover of each questionnaire even if the questionnaires were not completed (e.g. refusal, out of scope, other non-response).
- Indicate the status of each questionnaire (Booklet Final Status Code) on the corresponding cover pages. Write the explanation and any comments for incomplete questionnaires in the comments section on the front cover page.
RETURN ALL QUESTIONNAIRES even if they are not completed.

- For the Ages and Stages Questionnaire and the MacArthur Short Form Vocabulary Checklist, indicate on the front cover who completed the questionnaires (you or the respondent) and for the Ages and Stages Questionnaire indicate when the questionnaire was completed (prior to the interview or during the interview).
- Ensure that all information written in each questionnaire is clear and legible, and, that no sections or questionnaires were forgotten.
- Fill out the status of the overall interview on the Control Form and complete your Interviewer's Observations Questionnaire.
- Disinfect all of your materials in preparation for the next interview.

3.6 Description of Final Status Codes

Complete: When the respondent has completed or answered all activities required in the questionnaire. When the parent has fully completed the questionnaires. If you stop because the child has failed too many items to meet the criteria for continuing, code the booklet as complete. On the Control Form, the interview is complete if all the questionnaires/booklets required for this specific interview are completed.

Partial: When the parent has not completed all parts of their questionnaire or when the activities with the child are interrupted due to, an emergency, nap time, or other (not if the child has failed). On the Control Form, the interview is partial if at least one of the required questionnaires/booklets is partial or not completed.

No Contact: When no contact with the person most knowledgeable about the child is made.

Refusal by the child: When the child refuses to participate in the activities before you start a questionnaire.

Refusal by the Parent: When the parent refuses to allow the child to participate in the activities or refuses to complete the questionnaires.

Out of Scope: When the child or family has moved from the residence, when a home has been demolished or any circumstance which denies access to the child.

Other NR: Any other form of non-response (e.g. Language barrier)

3.7 Follow-up Procedures

Ideally, all sampled households should be interviewed, but this may not always be possible. While keeping the expenditure of time and travel to a minimum, try to obtain interviews with the largest possible number of households in your assignment.

There is no one method of keeping these non-interviews to a minimum but the ability to gain co-operation from all types of persons, and planning visits when people are most likely to be home, are important factors.

Use your best judgement when dealing with non-interviews.

3.8 Refusals

It is vital that we achieve a high response rate to maintain the accuracy and representativeness of the survey results. For this test, the expected response rate is 85%.

Some ways to prevent refusals are:

- Actively listen for the reasons why the respondent does not want to participate and respond to those reasons.
- Ensure that you are knowledgeable about the survey and prepared to give reasons as to the importance of participating in the survey (you can find possibilities of questions and answers in Chapter 16).
- Always end your conversation graciously, but keep the door open (e.g., "I'll give you some time to think over what I've said and I'll call back in a few days").

If you encounter a respondent who adamantly refuses to participate, try to obtain as much information about the household as you can. Refer the case to your Senior Interviewer, giving him/her all the details about the case. Your Senior Interviewer will contact the household and try to convert the refusal.

3.9 Language Difficulties

With children

For this test, we are examining 3 to 5 year old children's ability to do specific tasks in English or French. If a **child** does not understand either official language, terminate the activities with the **child**, however, you can complete the remaining portions of the interview with the parent. Do not translate the questionnaires yourself

or ask another member of the family to do so. The wording of the questionnaires is standardized and informal translation can affect results. Note on the Interviewer's Observation Questionnaire that you had to terminate the activities with the child because of language barriers and select the status code "other" on the questionnaires required for the activities and indicate the problem in the comments section. Continue the interview with the parent debriefing questions.

With adults

If the respondent speaks French (English) and you are not able to conduct the interview in French (English), contact your Senior Interviewer, he/she will find an interviewer who is able to conduct the interview in French (English) or in another language (if available).

3.10 Return of Assignment

Send your completed work to the Regional Office at the end of the collection period on October 7. You should return **all** survey materials in one shipment.

3.11 Sensitive Nature of the Survey

Sensitivity of Questions

There are a number of questions throughout the Parent Questionnaire that may be sensitive to the respondent. The respondent may be uncomfortable answering these questions in the presence of someone else (spouse, partner, children, etc.) You may want to mention to the parent at the beginning of the interview, that it may be easier to complete the interview if no one else is present in the room.

3.12 Interviewing Young Children

Interviewing young children is fairly different from interviewing adults. In order to help you with this task, please refer to Chapter 4 of this manual.

3.13 Respondent's Disposition

Some of the questions throughout the Parent Questionnaire refer to the respondent's state of mind. If the respondent is having problems answering the questions, **do not probe**. Use your best judgement. If the respondent does not want to answer certain questions, do not persist, simply skip to the next question.

3.14 Request for Help

If the respondent requests help (after you have asked sensitive questions), provide him/her with the following possibilities:

- the telephone number of the nearest community centre or social services office in the neighbourhood; they usually have the phone numbers of organizations that can help. If in Quebec, give the telephone number of the nearest CLSC. Try to find these numbers in advance, for the areas where you will work, and write them down on a card.
- the numbers are on the inside front cover of the White or Yellow Pages under Crisis line centres or Help lines.

As a last resort, tell the respondent to call the nearest hospital.

3.15 Interviewer's Sensitivity

It may happen that you become upset because of an interview situation. In this case, call your Senior Interviewer. It is sometimes good to share difficult moments with someone else.

Notes

Lined area for notes.

CHAPTER 4

INTERVIEWING YOUNG CHILDREN

4.1 Introduction

Direct examination of what children can do themselves will provide valuable data in addition to what the NLSCY already collects. Collecting this data, however, is quite different from interviewing an adult. To have data that can be added together for all children, each child must be questioned in the same way. Normally these questionnaires are used in controlled situations such as an office or a special room in a preschool. Within reason, the home situation has to be as close to these more controlled situations as possible.

The young children you will be interviewing will each be very different. Some will have had experience with day care or school and will be fairly comfortable sitting at a table doing a task with an adult. Others will not know how to do this. Some will be shy, others very active, others not able to understand French or English.

This chapter provides information to help you with these situations.

4.2 Testing Environment

Assessments should be administered in a quiet area free from external distractions, preferably in a separate room. Whatever the location, external distractions must be minimized so that the child's attention is focused on the tasks presented and not on outside sounds or sights, physical discomfort, or assessment materials or toys that are not in use at the moment. If possible, the child should face away from windows that overlook a busy scene. Also, the room should have adequate lighting. Described above are the ideal conditions for administering the questionnaires. As you are in the respondent's home, you will have to accept the space that they offer you.

For most of the questionnaires, you should sit directly across from the child. When it is not possible to sit where specified for particular activities, you should be positioned so that full observation of the child's behavior is possible and immediate scoring of the child's responses is facilitated.

The Person Most Knowledgeable (PMK) may be present but should sit **behind the child**. This will minimize distractions for the child. Politely explain to the PMK that

the activities are standardized and you would appreciate it if s/he did not talk during the administration, even if the child obviously does not understand or is not doing something s/he knows he or she can do. Indicate that you would appreciate it if s/he made sure that you and the child are not interrupted. Leave it up to the PMK to decide whether to stay or to leave the child with you.

Explain the nature of the task to the child in **terms that the child can understand**. For example:

"I would like you to do some writing for me in this little book."

"I would like you to show me how you can write and draw."

The activity should be presented as a '**fun**' activity that the child will enjoy, and the child should be encouraged to do the best they can. Whatever response the child gives should be praised. If the child is unable or unwilling to do the task, or shows any sign of stress, try to encourage the child as discussed under "troubleshooting" below. Terminate the questionnaire if a reasonable effort does not succeed in engaging the child in the activity. You could try a second questionnaire and then return to the previous one if needed. This should be noted on the Comments Section on the front cover of the questionnaire.

4.3 Establishing Rapport

Your manner and attitude towards the child is very important. Good rapport with the child will help to ensure that the child is interested in cooperating and will try to do his or her best on the tasks. You should **show enthusiasm and interest** in what the child is doing.

There is no special formula for establishing an effective testing environment. It depends considerably on your personality, but you will have little difficulty establishing a good testing relationship with most children. Best results are obtained when both you and the child are in a relaxed frame of mind. *Do not begin the activities unless the child seems relatively at ease.* Also, do not appear to be rushed or hurried and do not go too fast through the activity. You might start by chatting with the child about a favorite toy or activity.

Remember that although you have administered the questions often and are thoroughly familiar with them, to the child they are completely new. **Talk slowly and clearly to the child**, and keep the questions "fresh" by using natural emphasis and avoiding a repetitive monotone.

During the interview, give the impression that administering the questionnaire to the

child is an **enjoyable experience**. **Smiling frequently** helps to maintain a pleasant testing environment and **calling the child by his/her name helps a lot** to maintain the child's attention. Before you start the questionnaires, you may wish to have a short chat with the child. Do not give a lengthy explanation of the assessment or apologize for giving it.

Generally, don't ask the child if he or she would like to move on to the next section or wants to answer a question. Given the option, most children would say "No, I don't want to". Then you would be faced with having to say, "Well let's try it anyway." Instead of *asking* the child, *tell* him/her in a pleasant and enthusiastic way: "Now we're going to do something different. Here are some pictures for you to look at..." or "Here is a pencil. I want you to draw..."

It is desirable that the **child is at his/her best** for the questionnaires. When setting up the interview, ask the PMK about the best time during the day for doing the questionnaires with the child. For example, it is not ideal to conduct the questionnaires just before meal or naptime.

4.4 Encouragement During the Interview

There is a natural tendency to praise only correct answers, but throughout the questionnaires it is important ***not to reveal whether the child's answers are correct or incorrect***. Be careful that your pattern of comments does not indicate whether answers are correct or incorrect. It's easy, especially after a hesitation by the child, to praise a correct answer. Be on the lookout for this tendency, because it will start telling the child when the answers are correct. Habits to avoid include saying "good" after correct responses, or pausing longer after incorrect responses as if expecting the child to change the first response. Be careful also not to give clues, such as looking at the correct illustration or facial expression that the probable choice is correct or incorrect. Also, children should not be able to see the scoring section of your questionnaire.

Enhance rapport throughout the session by letting the child know that he or she is doing a good job. **Praise should be given frequently**, even when an incorrect response is made, to keep the child's spirit up and make him/her feel his/her effort is appreciated. Use neutral phrases such as "You're doing a really good job!", "That's fine", "You're working hard". Encourage the child to respond even when items are difficult, use phrases such as "just try it" or "I bet you can do it, try again". Children will be working hard and meeting with frustration when reaching the limits of their abilities. Encouragement, however, should not be overdone; many children know when they are beyond their depth and are not deceived by unearned praise. Try to learn the amount of encouragement needed to elicit the child's best response. It is not necessary to react after each response.

To coach or otherwise help a child on an item can invalidate the results. Remember that individual results are not reported to the parents. Therefore, there is no benefit to the child if you coach or help her/him.

If the child is becoming frustrated, restless, or inattentive, you may encourage the child by mentioning to them that he/she will be receiving the poster (provided in the assessment kit) when the interview is finished.

4.5 Engaging Cooperation

When interviewing young children it is sometimes difficult to accomplish the task at hand. A cooperative child will not only make interviewing easier, but will provide results that better reflect his/her potential. There are many things that can be done to engage a child's cooperation, such as, **using simple phrases and statements** when speaking with the child. Describe what you see or the problem at hand, and give only pertinent information. Speak slowly. A child cannot fully cooperate, through no fault of his/her own, if he/she does not understand adult speech patterns. Furthermore, as important as what you say, is how you say it. Be attentive to the child's perception of you because what may seem to be an "approachable persona" to you, may be perceived (and believed) differently by a child. A threatening tone or attitude creates distrust and may make a child uneasy. **Remain calm** and collected when administering questionnaires to children and **don't forget to smile. Be friendly.**

4.6 Answering Children's Questions

Most children are curious and at some point will ask or try to find out whether their answers are correct or incorrect. When asked by a child whether an answer is correct or incorrect, respond by explaining that you can't give the answer and that **you are interested in his or her own answer.** Assure the child that all he or she needs to do is to **give his/her best try.** If the child persists, say that you are glad to give the correct answers when you are all finished. Once finished, if the child remembers and asks you, go ahead and give the answers to the specific question(s) the child is curious about. The majority of children, however, will not remember at the end and will be ready to move on to the next task or complete the interview.

You may re-read general test directions or any questions on the test if the child asks for the information to be repeated. Whenever the child requests information that should not be supplied, respond with a comment such as "I'm not able to help you with that but just try your best with what I have told you."

The child may ask other questions, such as what certain images are on the Who Am I Assessment. It is important to establish that you will be asking the questions and that right now you are really interested in what *their* answers are. Again, if they persist, you may say, "I'll tell you afterwards, but let's keep going for now."

4.7 Trouble-Shooting

Handling Problems

When you work with young children, it is important to keep in mind that you are a **"visitor" to their world**; they are the "native" and you want to find out as much as possible about their world. Do not assume that their world operates the same as yours; do not assume the meaning of actions and thoughts or that there is an "adult" logic that they apply. Be respectful and follow their conventions, while maintaining control of the situation.

Behaviour problems can be minimized if you follow certain techniques in line with the developmental stage of the children with whom you will be working. You **should not attempt to shift from one topic to another or from one section to another without introducing the change directly to the child**. At the end of a section, you can say "Now we're done with that section," or "Now we're going to try something different." Keep the focus of questions and statements simple and break things up so that the child only has to focus on one aspect. **Avoid distractions**; take away the pencil, shapes, and counting chips when not needed. If the child is distracted by a toy, try to take it away, saying "Let's play with this later."

Initially, some young children may be shy and may refuse to speak to a stranger. If, after several rapport-building activities the child still refuses to speak, discontinue testing and try again later, if possible. If not, note the situation on the cover page of the booklet, as well as in the Interviewer's Observation Questionnaire. A makeup visit may be necessary.

To keep a child focused on the tasks, tell him/her, "You're doing a really good job paying attention." If he/she seems distracted, before doing the next question, say, "Now listen (name of the child); the next one is..." If the child complains that he/she is bored or is beginning to get restless, you can say, "I really appreciate you doing this with me" or "I know this is long, but we have to go through all of them." Above all, it is important that you respond.

Taking Short Breaks

If the child needs to use the bathroom, let him or her go.

Engage the child in a short conversation if the child feels like talking, but try to get back to the activities as soon as possible. Let the child get up and stretch or do exercises, if necessary. Try not to let the child leave the room/area.

Some young children may need to take short breaks, especially if their attention spans are short. During the breaks, a child may enjoy stretching exercises. Although breaks may be a helpful asset for some children, **be sure to keep track of your time** so that you do not go over the estimated time told to the parent. The important consideration in testing preschool children is to maintain an **interesting enthusiastic session** to obtain a representative sample of what the child has learned in several different tasks.

Child Refuses Assessment/Becomes Upset

If the child is upset or seems very unhappy during the interview, take a break and engage them in conversation until you determine they are comfortable. You may encounter a child who will not respond to your questions or otherwise refuses to be interviewed. Do your best to interest the child, and skip to other questionnaires if you think that they might be interested in them first. Take short breaks, if necessary, to **maintain the child's motivation**. Try to complete all sections of the interview, but if a child is uncooperative, unhappy or upset, you may have to terminate the interview with the child. We are attempting to complete all the questionnaires, but we do not wish to traumatize the child. Note on the Interviewer's Observation Questionnaire in the comments section why the interview was terminated, as well as on the cover of the questionnaire.

Be sensitive to the limitations, varying types of impairments may impose on a child's abilities and behaviour.

1. *Hearing Impairments:* If a child wears a hearing aid, be certain that the aid is being worn and *is functional* before the interview begins.
2. *Visual Impairments:* Similarly, if the child wears eyeglasses, be sure that the child has them and that they are worn during the interview. In preparing the setting, it may also be necessary to position a lamp to provide additional or dimmed illumination. Because some children may need to hold materials very close to their eyes, allow them to pick up the booklets and alter their positions if necessary.
3. *Physical Impairments:* If the child is not able to do the questionnaire due to a physical impairment of some sort, end the questionnaire and be sure to make a note of the situation on the Interviewer's Observation Questionnaire.

* Make a note of any limiting conditions in the Interviewer's Observation Questionnaire and on the cover of the questionnaires.

4.8 Administering the Child Questionnaires

Become familiar enough with the questionnaires that you can present the tasks, observe the child and score responses smoothly and without pauses that might disrupt the child's concentration. All questions to the child should be asked **naturally** without too much reading.

After you have completed the Parent Questionnaire, **chat a bit with the child** (e.g., about a toy or activity) and ask him/her to sit across from you at the table. Once the child is seated comfortably, explain simply what you will be doing with him/her. **Do not call the questionnaire a "test"**. You might say: "I'd like you to try some activities with me. It's a bit like a game. Some things will be easy, some will be harder. Just do your best."

Following the order of the questionnaires on the Control Form, present the first one. Follow all instructions and wording exactly. These are standardized questionnaires and must be administered the same way every time. You may not use your own words but must use the script as written in the questionnaire. This may be frustrating, especially if the child does not understand. **It is important that the child understand the demonstration items**. If after reasonable repeats, the child still does not understand a demonstration item, try your own words. Note that you have done this on the questionnaire. Do not use your own words once you are finished the demonstration. **Make sure to speak and demonstrate slowly.**

If you are using toys, cards, etc., **put them away as soon as you are finished with them**. You could put them on a chair beside you or on the floor, out of sight of the child. This reduces distractions for the child.

Notes

CHAPTER 5

OVERVIEW OF THE INTERVIEW

5.1 Telephone Contact

Introduction

- This involves introducing yourself and the survey, and completing the household roster information. Refer to page 2 of the Parent Questionnaire (Booklet 7).

Demographic Information

- There are 8 demographic questions that are to be asked during the telephone contact. These questions are part of the Parent Questionnaire. Refer to Section A (page 3) of the Parent Questionnaire.

Socio-Demographic Information

- There are 6 socio-demographic questions that are to be asked during the telephone contact. These questions are part of the Parent Questionnaire. Refer to Section B (page 4) of the Parent Questionnaire.

Appointment

- The home interview is to be arranged during this telephone contact. **If the child is 3 to 5 years old**, explain to the PMK that 2 or 3 questionnaires will be administered directly to the selected child and therefore you would like to arrange a time when the child will be at his/her best for completing the questionnaires. As well, mention to **all parents that you will be asking for the height and weight of their child** during the interview and that it would be helpful if they could have this information available. Refer to page 5 of the Parent Questionnaire.

5.2 Control Form

- Refer to your Control Form for information about preparing the materials that you need for each interview (see Chapter 2 of your Interviewer's Manual). The materials that you require for each case will vary depending on the selected child's age and the block grouping of questionnaires assigned.

5.3 Disinfection of Materials

- Ensure that all materials needed are disinfected in preparation for each interview. This is to be done in your home before your next interview. If you have two interviews within a short period of time of each other then ask the respondent if you could disinfect the material at their home. Refer to Chapter 15 of this manual for disinfection procedures.

5.4 In the Household

Parent Questionnaire

- Every interview will begin with the administration of the Parent Questionnaire. Having this questionnaire administered first will give children 3 to 5 years old a chance to warm up to the interviewer before the direct measures are administered to them.

Ages and Stages Questionnaire

- Check your Control Form to see if the household received the Ages and Stages Questionnaire (Booklet 8). If the respondent received this questionnaire, pick it up if it has been completed. If it has not been completed in advance, complete the questionnaire with the PMK and indicate on your Control Form that the questionnaire was filled out during the interview, with your assistance. Do not ask the child to try the activities rather have the PMK complete it by memory. If the questionnaire is administered orally during the interview, record the time it takes to complete it in the Comments section on the front cover. If the respondent has not completed the questionnaire, it is preferable to have him/her complete it themselves, otherwise, you should administer the questionnaire with the respondent.

Verbal Consent (3 to 5 years only)

- Before conducting any questionnaires, be sure to obtain verbal consent from the parent to interview their child (page 27 of the Parent Questionnaire).

Direct Measures (3 to 5 years) or MacArthur Short Form Vocabulary Checklist (0 to 2 years old)

- The assigned questionnaires for each case and the order that they are to be administered in is indicated on your Control Form. The administration of the questionnaires depends on the age of the child. There are no direct measures

for children 0 to 2 years old. For this age group the MacArthur Short Form Vocabulary Checklist is completed by the PMK (Booklet 9). For children 3 to 5 years old, 2 or 3 of the 5 direct measures are to be administered to the child as specified on your Control Form (Booklets 1 to 5).

Thank the child

- Thank the child for taking part in the interview.

Poster

- Using your Polaroid, take a picture of the child and tape the picture to the poster. Give the child the poster and say that it is a thank you for helping us. Ask the child their age, and write this information along with their name, on the poster. Let the child write this information themselves on the poster if they would prefer to.

Parent Debriefing Questions

- Ask the parent the questions on pages 28 to 40 of the Parent Questionnaire. Be sure to note all of the parent's comments, as these will help us improve the interview and questionnaires.

5.5 Wrapping Up

- Thank the parent for their participation.

Interviewer's Observations

- Once you have left the household, complete the interviewer's assessment questionnaire about the child and the interview. Remember to record any further observations or comments about the interview that you may have on the blank page, titled "comments", in the middle of this questionnaire.

Notes

CHAPTER 6

PARENT QUESTIONNAIRE

6.1 General Information

The Parent Questionnaire (Booklet 7, Appendix G) is to be asked of the Person Most Knowledgeable (PMK) about the selected child. There are three main parts to this questionnaire. The **first part** of the Parent Questionnaire is comprised of an introduction about who you are, where you're from, the survey, household roster information, demographic and socio-demographic questions, and setting up an appointment. The **second part** of the Parent Questionnaire is comprised of the following sections: Child Health, Child Development, Activities, Literacy and Learning Activities, Education, Behaviour, Child Care, Parenting, Parent's Education, Labour Force, and Income. The **third part** of this questionnaire is a debriefing section to gather information on the parent's opinion about different aspects of the survey.

All instructions for you to follow will be marked in capitals and italics on the questionnaire. For all questions, it will be indicated to you when you are to read a list of answers to the respondent, otherwise, do not read answer categories. Furthermore, all responses are to be recorded on the questionnaire and only one answer may be chosen for each question unless otherwise indicated. A reference card can be used in order to help you and the respondent with questions containing multiple repetitive answer categories.

6.2 Supplies

The following is a list of materials required for the administration of the Parent Questionnaire. If you are missing items from this list, please contact your Senior Interviewer.

- 1 Parent Questionnaire (Booklet 7, Appendix G)
- 1 Reference card

6.3 Procedures

- Before you administer the questionnaire to the parent, ensure that all the information mentioned in Chapter 3 is completed on the cover page of the questionnaire.

- The Parent Questionnaire is to be administered orally to the parent.

First Section

- The first section (pages 2 to 5) of the questionnaire is to be completed during the **telephone contact** and includes an introduction, questions about household roster, demographic and socio-demographic questions, and arranging the home interview. Be sure to record the start time at the beginning of the telephone contact on the questionnaire and the end time upon completion of the telephone contact.
- During the telephone contact you will: introduce yourself and the survey, confirm the address, and make sure that the address on the Control Form is the correct mailing address. If there are any changes, enter them in the space provided on the front cover of the questionnaire. Also confirm that the mailing address is the same as the listing address. You will need the listing address for the home interview. Complete the household roster information, Section A- Demographics and Section B- Socio-Demographics of the questionnaire. The information required to complete the above mentioned is on the questionnaire.
- When **setting up an appointment** for the home interview, if the child is 3 to 5 years old, explain to the PMK that 2 or 3 activities (questionnaires) will be done with their child and therefore the appointment must be made at a time of day when the child is awake and likely to be co-operative. Consult the PMK on when this would be. If the respondent needs more information about the activities, check the Control Form to determine which questionnaires will be administered. See Chapters 9 to 13 for information about these questionnaires.
- Mention to all parents that you will be asking for the height and weight of their child during the interview and that it would be helpful if they could have this information available.

Second Section

- The second section (pages 6 to 27) of the Parent Questionnaire is to be administered to the parent at the beginning of the home interview. Again, be sure to record the start and end time of the administration of this section in the questionnaire.
- Complete Sections C (Child Health) to M (Income) of the Parent Questionnaire. The information you need to complete these sections is on the questionnaire. A few definitions pertaining to certain questions are included at the end of this chapter if you need more details.

- On page 27, at the end of the second section, you will find instructions about what to do/say. Whether the MacArthur Short Form Vocabulary Checklist has to be administered (children 0 to 2 years old) or verbal consent has to be given by the parent if there are activities to do with the selected child (for children 3 to 5 years old).

Third Section

- The third section (pages 28 to 40) of the Parent Questionnaire, the Debriefing Section, is to be administered to the PMK at the end of the home interview. This section is to be completed at the very end of the interview after all of the questionnaires have been administered and the poster has been given to the child.

Content

Telephone Contact

3. Does _____ (selected child) live in this household most of the time?

Living in the household *most of the time* includes living there half of the time or more.

Section A. Demographics

2. What is your/_____’s relationship to _____ (selected child)?

If there is no spouse in this household do not ask this question?

Section B. Socio-Demographics

Questions 1 to 6

Read the questions horizontally from left to right. For example, read question 1 about the PMK, the spouse/partner (if one exists), and the selected child, then move on to question 2.

5. What language do you/does _____ speak most often at home?

When asking about the selected child, if the child does not speak yet then select the “other” option and indicate the reason for this choice in the space provided.

7. We will be doing some activities with _____ (selected child). Would you like these activities done in English or French?

Be sure to ask this question before you end the first telephone contact if the selected child is 3 to 5 years old.

Section C. Child Health

1. Over the past few months, how often has _____ been in good health?

If the respondent requests an explanation, explain that health means both physical and mental well-being. Accept the respondent's perception of the child's state of health.

2. What is _____'s height in feet and inches or in metres/centimetres (without shoes on)?

3. What is _____'s weight in kilograms (and grams) or in pounds (and ounces)?

These questions are intended to obtain a general sense of the child's height and weight. It is not necessary for the respondent to physically measure the child.

9. Does _____ have any long term conditions or health problems that prevent or limit his/her participation in school, at play, sports or in any other activity for a child of his/her age?

Prevents or limits means that the child either cannot do or is restricted in doing certain activities such as participating in school, play, or any other activity normal for a child his/her age.

13. Since his/her birth, has _____ had an ear infection (otitis)?

The ear infection must have been diagnosed by a health professional.

19. Is _____ presently on any medications?

Medication refers to any prescribed medication (medications prescribed by a health professional) that the child is presently taking. Exclude over the counter medication, if it was not prescribed by a health professional.

Section E. Activities

1. Does _____ attend any of the following programs or activities?
 - a. Nursery school, preschool

Nursery school and/or preschool is a group program offered on a part-time basis generally for young children by community centres, parent cooperatives, churches, non-profit organizations, and sometimes by school boards. Age ranges vary between two and six years from province to province.

Section G. Education

4. In what language is _____ mainly taught in?

Select "Both" if the child is taught in English and French an equal percentage of the time.

Section I. Child Care

1. Do you currently use child care such as daycare, babysitting, care by a relative or other caregiver, nursery school or a before and after school program while you (and your spouse/partner) are at work or studying?

Child care refers to any arrangements where the child is left in the care of someone other than the respondent or his/her spouse/partner.

Child care includes PAID and UNPAID care.

This section refers only to child care arrangements while the respondent and his/her spouse/partner are working, studying or going to school.

EXCLUDE

- care obtained by parent/guardian for any reason other than working, studying or going to school (e.g., out to dinner or a movie, shopping, on vacation).

1. Which of the following methods of child care do you currently use while you (and your spouse/partner) are at work or studying?

This refers to care provided by a person who is not related to the child such as a neighbour, friend or paid babysitter, as well as a licensed care-giver who operates out of his/her home.

2. For about how many hours per week is that?

For irregular childcare, where the number of hours can vary each week, calculate an average by first adding the number of hours worked in the last 4 weeks and then dividing this amount by 4.

Section K. Parent's Education

1. Excluding kindergarten, how many years of elementary and high school have you/has _____ successfully completed?

Do not report years of attendance in trade schools, institutes of technology, community colleges or CEGEPs (Quebec).

Information relating to education other than at the elementary or secondary level should be reported in EDA-Q3(A).

2. Have you/ has _____ graduated from high school?

Graduated means the respondent received a high school (secondary school) diploma or equivalent.

High school graduation varies from province to province and can mean anything from Grade 11 to Grade 13. It may vary, as well, according to the year the respondent graduated. For example, 20 years ago, high school graduation in Quebec was Grade 12.

Currently, the highest grades of secondary school by province are as follows:

Quebec	grade 11 (secondary V)
All other provinces	grade 12

3. Have you/has _____ ever attended any post secondary institution or school such as a university, community college, business school, trade or vocational school or CEGEP?

Mark "Yes" if the respondent took credit courses which are part of a program that can be counted towards a degree, diploma or certificate. Credit courses are offered by community colleges, universities and trade schools.

INCLUDE:

- Trade school and correspondence course taken from an educational institution towards a degree, diploma, or certificate.

EXCLUDE:

- Any courses taken at a place of work for “personal development” or for learning the skills required in a job. These courses do not provide a credit towards a degree, diploma or certificate. Examples of these would be “Time Management” or “Effective Supervision”.
- Courses taken for personal interest, leisure or recreation such as night courses in pottery or woodworking at a local high school. Such courses are not credit courses and do not count towards a degree, diploma or certificate.
- Credit courses taken “for interest only”. For example, some people take university courses because they are interested in the subject matter, but they have no intention of counting them as credits towards a degree.

4. What is the highest level of education that you have/has _____ ever attained?

It is important to determine if the respondent actually received a degree, diploma or certificate, or simply completed some of the required courses.

If the respondent attended a post-secondary institution and completed a few courses but has never obtained a certificate, diploma or degree, select an appropriate category of “Some...”

Note: In order to select a category “Some...”, the respondent must have received credit for at least one course. If the respondent began a course (or a year) but did not complete it, do not select this category.

In most cases, a respondent will be able to identify the highest level of education attained, however, in some cases, they may be unsure of what to consider as the highest level.

The answer categories are ordered from the lowest to the highest. If there is any confusion on the part of the respondent, select the lowest category, based on the information the respondent is able to provide.

Example: Mrs. Marshall has completed one year of community college and one year of university, but, after some probing, is still unable to decide on the appropriate category. Select **“Some community college”**.

Include apprenticeship programs not offered at a college, such as carpentry and real estate courses, in the **other** category.

6. Which of the following material do you currently have in your home?

This question is to be asked only to the PMK. Remember to mark all answers that apply.

Section L. Labour Force

1. What do you/does ... consider to be your/his/her main activity currently?

Main activity refers to the principal way in which the respondent spends most of his/her time. Accept the respondent's perception of their current main activity.

3. Have you/has _____ worked for pay or profit at any time in the past 12 months?

The **past twelve months** refers to the period of time from the date of the current interview until 12 months prior to the date of the interview.

4. During the past 12 months, how many weeks did you/did _____ do any work at a job or business? Include weeks on paid vacation leave, paid maternity or parental leave, paid sick leave.

Include, as weeks worked, the number of weeks in which a person:

- worked, either full-time or part-time;
- had a job but was not at work due to a paid vacation, maternity leave or illness;
- had a job but was absent with pay (e.g. job-related classroom training, etc.)
- was an unpaid family worker; or
- was self-employed.

5. About how many hours a week did you/did _____ usually work?

For an irregular work week, calculate an average by adding the number of hours worked in the last 4 weeks and dividing the amount by 4.

Section M. Income

The questions in this section are to be asked only to the PMK.

1. During the past 12 months did your household receive income from the following sources:

- wages and salaries?
- self-employment income (including business, professional, commission, child care)?
- employment insurance benefits?
- child Tax Benefit/National Child Benefit and provincial child benefits?
- social assistance (welfare) and provincial income supplements?
- child and spousal support?
- other sources, including dividends, interest, capital gains, tips?
- refusal

EXCLUDE from all categories:

- income tax refunds;
- money received from gambling, lotteries, the sale of property, loan repayments, rebates or refunds;
- **lump-sum** inheritance or insurance policy settlements; and
- capital gains or losses.

INCLUDE in the **Wages and Salaries** category:

- tips and cash bonuses received during the past 12 months, as well as all types of casual earnings, whether or not T4 slips for income tax have been issued.

INCLUDE in the **Self-employment Net Income** category:

- persons who owned and operated an unincorporated business or professional practice during the past 12 months, either alone or in partnership.
- self-employed fisherman, trappers and hunters, for persons who babysit in their own home, operate a direct distributorship such as selling and delivering cosmetics, newspapers, or obtain contracts or agreements to do odd jobs.

INCLUDE in the **Employment Insurance Benefits** category:

- Benefits for sickness, maternity, work sharing, fishing, retraining and retirement received under the Federal Unemployment Insurance program.

INCLUDE in the **Child Tax Benefit/National Child Benefit and Provincial Child Benefits** category:

- B.C. Family Bonus (previously part of social assistance)
- Quebec Family Allowances
- Quebec Allowance for Newborn Children
- Alberta Family Employment Tax Credit
- New Brunswick Child Tax Credit

INCLUDE **Social Assistance (Welfare) and Provincial Income Supplements** category:

- Payments from provincial or municipal programs for persons in need, including mothers with dependent children, persons temporarily or permanently unable to work, elderly individuals, the blind and the disabled. Include benefits covering basic needs (e.g. food, fuel, shelter, clothing), benefits for special needs and payments from work incentive programs.

Some of the readily identifiable benefits to be included are:

Quebec

- Income Security
 - Financial Support Program
 - Work and Employment Incentives Program
 - Parental Wage

British Columbia

- Income Assistance
 - Income Assurance
 - Temporary Assistance

INCLUDE in the **Child and Spousal Support** category:

- Payments made towards the respondent by a spouse/partner during separation, or by an ex-spouse following a divorce.
- Payments made by a spouse during separation or by an ex-spouse following a divorce.
- All regular maintenance and occasional contributions towards the child's

maintenance.

INCLUDE in the **all other sources** category:

Benefits from Canada or Quebec Pension Plan

INCLUDE

- Benefits received under the Canada or Quebec Pension Plan such as retirement pensions, survivors' benefits and disability pensions.

EXCLUDE

- Benefits received for pensions of civil servants, RCMP and military personnel. These should be reported in **Retirement pensions, superannuation and annuities**.
- Lump-sum death benefits.

Investment Income

INCLUDE

- Dividends on Canadian corporate stocks, and mutual funds
- Dividends on foreign stocks
- Interest from deposits in banks, trust companies, co-operatives, credit unions, caisses populaires, as well as interest on savings certificates, bonds and debentures
- Investment income received from abroad.

Retirement Pension and Annuities

INCLUDE

- Benefits received from all annuities, including a matured registered retirement savings plan in the form of a life annuity, a fixed term annuity, a registered retirement income fund or an income-averaging annuity contract.
- Survivors benefits.
- Pensions of retired civil servants, armed forces personnel and R.C.M.P. officers.
- Annuity payments received from Canadian Government Annuities Fund, an insurance company, etc.

EXCLUDE

- Withdrawals of contributions and accumulated interest from a pension plan or RRSP, or refunds of contributions, lump sum death benefits or other lump sum benefits.

Old Age Security and Guaranteed Income Supplement

INCLUDE

- Payments from federal government:
(1) to persons aged 65 years and over; and
(2) to eligible persons 60-64 years of age.

All Else

INCLUDE

- Rental income
- Scholarships
- GST rebate and other federal tax benefits.
- Real Estate Tax Refund (Quebec)
- Income from roomers and boarders.
- Non-refundable scholarship and bursaries.
- Strike pay.

2. **Thinking about the sources of income you just told me about, what was the total household income before taxes and other deductions for the last 12 months. Your best guess would be fine.**

Include income from all sources and **from all household members**. Include grandparents, children and any other household members who have an income.

Notes

CHAPTER 7

AGES AND STAGES QUESTIONNAIRE

7.1 General Information

The Ages and Stages Questionnaire (Booklet 8, Appendix H) is a self-completed questionnaire to be completed by the parents in the home before the interview. This questionnaire was included in the introductory mail-out for those respondents selected to complete it. There are six sections in the Ages and Stages Questionnaire. Each of the six sections are designed for a different age group (i.e. 10 to 14, 16 to 20, 22 to 26, 34 to 38, 46 to 50, and 58 to 62 months). All of the sections feature 30 developmental items that are written in simple, straightforward language. Five areas are measured in this questionnaire: Communication, Gross Motor, Fine Motor, Problem Solving, and Personal-Social. The questionnaires take 10-30 minutes to complete. Instructions and information about completing the questionnaire for each age group are written on the cover of the questionnaire.

7.2 Supplies

The following is a list of materials required for the administration of the Ages and Stages Questionnaire. If you are missing items from this list, please contact your Senior Interviewer.

- 1 Ages and Stages Questionnaire (Booklet 8, Appendix H)
- 1 pencil without an eraser
- 1 eraser

7.3 Procedures

- If the household is selected to complete a section of the Ages and Stages Questionnaire, the Person Most Knowledgeable (PMK) will have received this questionnaire in the mail with the introductory letter, 2 weeks prior to the beginning of the collection. The respondent is to find the appropriate section to complete for his/her child's age in months according to instructions on the front cover of the questionnaire (you may determine the child's age in months using the chart on the inside back cover of your interviewer's manual).
- Once in the household, you will collect the completed questionnaire if the Control Form indicates that this household was selected to complete the Ages

and Stages Questionnaire (Booklet 8)

- If the respondent has lost or has not completed the Ages and Stages Questionnaire, it is preferable that during the home interview, the parent complete the questionnaire themselves. If this is not possible, you may assist the parent in completing the questionnaire. There will not be time to watch the child do the activities therefore the parent is to respond from their experience.
- If the questionnaire is administered during the home interview, record the start and end time taken to complete it in the Comments section on the front cover of the questionnaire.
- Remember to indicate on the front cover in the comments section, check the appropriate box for whether the questionnaire was filled out prior to or during the interview. Also, ensure that all the information mentioned in Chapter 3 is completed on the cover page of the questionnaire.

Notes

CHAPTER 8

MacARTHUR SHORT FORM VOCABULARY CHECKLIST

8.1 General Information

The MacArthur Short Form Vocabulary Checklist (Booklet 9, Appendix I) is designed for 8 to 16 month old infants (Level I) and also for toddlers between 17 and 30 months of age (Level II). The purpose of this parent-completed inventory is to yield reliable information on the course of language development from a child's first sounds to the beginnings of grammar. The **Infant Form** is interested in the words UNDERSTOOD and SAID by the child whereas the **Toddler Form** is interested only in the words SAID by the child. The questionnaire takes approximately 5-10 minutes to complete.

8.2 Supplies

The following is a list of materials required for the administration of the MacArthur Short Form Vocabulary Checklist. If you are missing items from this list, please contact your Senior Interviewer.

- 1 MacArthur Short Form Vocabulary Checklist (Booklet 9, Appendix I)
- 1 pencil without an eraser
- 1 eraser

8.3 Procedures

- Before you give the questionnaire to the parent for him/her to complete on their own, ensure that all of the information mentioned in Chapter 3 is completed on the front cover of the questionnaire.
- The MacArthur Short Form Vocabulary Checklist is to be completed by the Person Most Knowledgeable (PMK) about the child during the home interview. It is preferable that the PMK complete the questionnaire on their own. If he or she is unable to do so, you may administer the questionnaire to the respondent.
- Ensure that the parent chooses the appropriate level to complete the questionnaire. If their child is aged between 8 to 16 months, they should complete page 3 (Level I). If their child is aged between 17 and 30 months, they should complete page 4 (Level II).

- To complete the MacArthur Short Form Vocabulary Checklist, parents must check the appropriate answers on the answer sheet using a pencil.

Notes

CHAPTER 9

WPPSI - R BLOCK DESIGN QUESTIONNAIRE

9.1 General Information

The Weschler Preschool and Primary Scales of Intelligence - Revised Block Design Questionnaire (Booklet 3, Appendix D) examines children's logical reasoning. Children are asked to reproduce simple designs using colored blocks (red and white). The child works directly from block models constructed by you for the first 8 designs and from models presented in the Stimulus Booklet for the remaining 6 designs.

This questionnaire will be administered to 3 to 5 year olds only. You can expect to complete this activity in approximately 15 minutes, including practices. All tasks of this activity are timed with a stopwatch and take no longer than 30 seconds to 1 minute 15 seconds each, depending on the activity.

9.2 Supplies

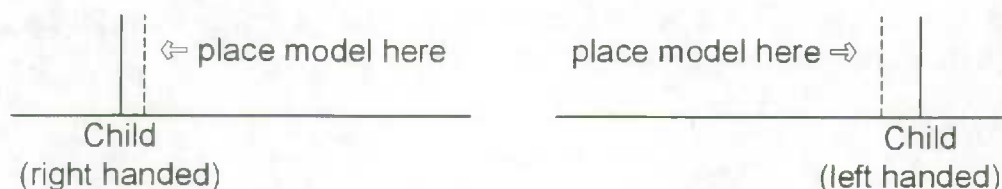
The following is a list of materials required for the administration of the WPPSI-R Block Design. If you are missing items from this list, please contact your Senior Interviewer.

- WPPSI-R Block Design Questionnaire (Booklet 3, Appendix D)
- 6 flat blocks, red on one side and white on the other
- 8 flat blocks, red on one side and half red and half white on the other
- 1 Stimulus Booklet (6 pictures are used)
- 1 stopwatch
- 1 screen (file folder)
- 1 pencil without an eraser
- 1 eraser

9.3 Procedures

- Before you administer the questionnaire to the selected child, ensure that all the information mentioned in Chapter 3 is completed on the front cover of the questionnaire.

- For Designs 1-8 the child works directly from block models that you construct. The patterns used in setting up models for Design 1-8 are shown directly on the questionnaire, **where shaded areas represent red**. The patterns for Designs 9 to 14 are presented to the child using the Stimulus Booklet (block design section, pages 9-14) when they have reached that point in the questionnaire.
- In setting up the models (always behind the screen), make sure that the designs are **oriented properly**. For Designs 1-8, construct each model so that the top edge of the design (as printed in the questionnaire) faces the child and the lower edge faces you. Note that the diagram of Design 1 in the questionnaire is labeled at the top and bottom to show which side of the design is to face the child and which is to face you. After you have given the directions to the child, move the block model to a distance of approximately 7 inches from the child's edge of the table. Place the model a little to the left of a line perpendicular to the child's body if the child is right-handed and to the child's right if the child is left-handed. Ensure that the child is seated parallel to the edge of the table.



- Two trials are permitted on every design. If the child succeeds on the first trial, proceed to the next design. If the child fails Trial 1, demonstrate the design and then present Trial 2 of that design.

Careful attention must be given to the instructions for demonstrating trials. For some designs both trials are demonstrated, and for others only Trial 2 is demonstrated. The following table summarizes trials for each design.

Design	Trial Demonstrated
1-7	1 and 2
8	2
9	1 and 2
10-14	2

A special column (label D/ND) on the Scoring Sheet indicates whether a trial should be demonstrated or not demonstrated and can be used as a quick

reference.

In explaining a demonstration, follow the text in the questionnaire exactly. For the results to be valid and comparable, you must follow the text word for word.

I put a red block here ... and another red one here ... here I have to use a red and white block.

Do not do any teaching of models other than what is indicated the questionnaire.

- Begin timing for each trial when the last word of the directions is given. Stop timing when the child is obviously through, even if the child continues to look at the blocks and neglects to tell you that he or she is finished. It is essential to accurately record the child's performance time for each trial attempted. Use the stopwatch as unobtrusively as possible so it doesn't distract the child. Record the time as displayed on your stopwatch, in minutes and seconds (e.g. 1.08, 0.46) . If the child correctly completes the design *after the time limit*, score the trial as failed but still record the measured time. Time used to repeat a question or clarify general directions is included in the recorded performance time for that item. If a child has nearly completed work on an item when the time limit expires, allow the child to finish the item in the interest of maintaining rapport. The time taken is noted as the maximum time.

For young children, the most difficult part of this activity may be to understand the task. Follow the instructions in the questionnaire to present each model. Make sure you explain and demonstrate at a suitable pace for the child. All instructions for you to follow when administering the activity is written in italics in the questionnaire. All instructions that are to be said to the child are written in bold.

- Discontinue once 3 consecutive failures have occurred. An item is considered failed only if *both* trials are failed.
- It is very important that the child understands what has to be done. Demonstrate the models slowly and speak slowly and clearly.
- As explained below, special attention must be given to gaps between blocks, rotation and reversal of designs.

- Remember to disinfect the following materials (refer to Chapter 15 for disinfection procedures):
 - 6 flat blocks, red on one side and white on the other
 - 8 flat blocks, red on one side and half red and half white on the other
 - 1 screen (file folder)

Gaps between blocks:

If the child positions the blocks correctly, but leaves definite gaps (1/16 inch or larger) between them, ask:

Is that right?

Score the design as correct whether the child closes the gap or not. However, if the child does not close the gap, demonstrate the proper closure before proceeding to the next design.

Example of a gap (1/16 of an inch):



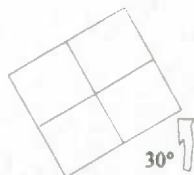
Rotation of Designs:

The rotation of a design is not penalized. However, if the rotation is pronounced (30 degrees or more), you should rotate the blocks to the correct position and say:

See, it goes this way.

You should correct only the first two rotations that occur and ignore any that follow.

Example of a rotation (30 degrees):



Reversal of Designs:

If a child's design is a complete reversal of the model or picture, it is scored as a failure.

Example of a reversal:

Design 4



Reversal of Design 4



Starting point for ages 36 months through 71 months:

Designs 1-8

For Designs 1-5, use the blocks that are red on one side and white on the other.

For Designs 6-8, use the eight blocks that are red on one side and half red and half white on the other.

Position the screen (file folder) 8-10 inches from the child with the blank side toward him/her. Behind the screen, arrange the appropriate block design as shown on the questionnaire when the child reaches each of the designs. Remove the screen and show the model to the child. Leaving the model in place, take similar blocks in hand and say, for example:

You see the blocks? They are red on one side and white on the other.

Show both sides of the blocks. Then place them in front of the child. Be sure that the blocks are not in a straight line, and that one red side and one white side show. Then say:

I'm going to put them together like this (*point to the model*). Watch me.

SLOWLY copy the model, explaining each step by saying, for example:

First, I put a white one here and then another one next to it. See? Now they look the same (*point to both constructions*).

After a brief pause, scramble the second arrangement, leaving the model in place.

Say:

Now you make one just like this. Stop when you have one that looks just like this (*point to the model*). **Tell me when you finish. Go ahead.**

Start time and allow 30 seconds for Designs 1-6, 45 seconds for Design 7 and 1 minute 15 seconds for Design 8.

If the child completes the design correctly within the time limit, go to the next design.

If the child fails to complete the design within the time limit, or arranges the blocks incorrectly, say:

No, it should look like this,

and illustrate by correctly arranging the blocks, explaining each step. Then, leaving the model in place, scramble the second arrangement, and say:

Now do it by yourself. Go ahead.

Start time and allow 30 seconds for Designs 1-6, 45 seconds for Design 7 and 1 minute 15 seconds for Design 8.

Whether the child passes or fails Design 1, using two of the blocks, construct the model for Design 2 behind the Layout Shield. Continue administering the questionnaire until the child fails three consecutive designs.

Always put away blocks that are not being used for the design at hand.

Put away all but four blocks used in question 8 before beginning question 9.

Design 9-14

For Designs 9-14, use the Stimulus Booklet and four of the blocks used in Designs 6-8.

Present Design 9 to 14 one at a time (place the unbound edge of the Stimulus Booklet 8-10 inches from the child) and say:

Now I want to see if you can put the blocks together so that they will look like the picture on this card. Watch me.

For Design 9, put the blocks together, indicating by gestures and with words that

you are being guided by the designs on the card. After completing the demonstration, scramble the blocks in front of the child and say:

Make one like this. Tell me when you are finished. Go ahead.

Start timing and allow 1 minute 15 seconds for Design 9.

If the child fails, repeat the demonstration and allow a second trial.

For Designs 10-14, present the model in the Stimulus Booklet and the blocks **without demonstration** and say:

Put these together to make them look like this (*point to the model*). Tell me when you are finished. Go ahead.

Start timing and allow 1 minute 15 seconds for Designs 9-14.

If the child fails, demonstrate and explain, and allow a second trial.

The procedures described for the WPPSI-R are general administration procedures. Refer to Booklet 3 for specific administration instructions for each design.

9.4 How to Use the Stop Watch

The Marathon stopwatch displays time (hour, minutes, seconds) and calendar (date and month). The stopwatch (1/100s) displays the elapse time for 1 second up to 24 hours.

Stopwatch mode

Press the "Mode" button to activate this mode.

Press the "Start/Stop" button to start the stopwatch.

Press the same button to stop the stopwatch.

Press the "Split/Reset" button to reset the stopwatch to 0:00.

Make sure you practice a few times with the stopwatch so that you are comfortable with its use.

Notes

CHAPTER 10

WHO AM I? QUESTIONNAIRE

10.1 General Information

The Who Am I? Questionnaire (Booklet 1, Appendix B) provides a measure of developmental level and some skills a child may have already learned. This questionnaire, will be administered to 3 to 5 year olds only.

The activity is comprised of a booklet with a different task on each page. Children are asked to write their name, copy some simple geometrical figures (a circle, a cross, a square, a triangle, and a diamond), and write some numbers, letters, words, and a sentence. Finally they are asked to draw a picture of themselves.

10.2 Supplies

The following is a list of materials that you have been provided with to administer the Who Am I? Questionnaire. If you are missing items from this list, please contact your Senior Interviewer.

- Who Am I? Questionnaire (Booklet 1, Appendix B)
- 1 pencil without an eraser
- 1 eraser

The eraser should not be used unless the child makes a specific error that he/she wishes to correct.

10.3 Procedures

- Before you administer the questionnaire to the selected child, ensure that all the information mentioned in Chapter 3 is completed on the back cover of the questionnaire.
- The following information describes how to administer the Who Am I? Questionnaire. While reading the following instructions you should follow along using the Who Am I? Questionnaire.

The child should be seated at a table and chair that enables him/her to write comfortably. You should be seated next to the child, or at right angles, so that

you can turn the pages and point as required. The Who Am I? Questionnaire should be administered in a place that is free of noise and distraction, either in a separate room or in a quiet corner.

Explain the nature of the task to the child in terms that the child can understand, by saying something like:

I would like you to do some writing and drawing for me in this little book. I would like you to show me how well you can write and draw.

The task should be presented as a fun activity that the child will enjoy, and the child should be encouraged to do his/her best. Any response the child gives should be praised. If the child is unable or unwilling to do the task, or shows any sign of stress, the task should be terminated.

My name is...

Once the child is seated comfortably and has been put at ease by the initial explanatory comments on the purpose of the session, the child should be shown the front cover of the *Who Am I* booklet and asked if they can write their (first) name in the box provided.

If the child is hesitant or has difficulty, they should be given some encouragement, for example, by asking them their name, asking them if they know what letter their name starts with, and then if they can write that letter. If they can only write one letter they can be asked if they can write any other letters. However, no help should be given in terms of telling them what letter to write, or showing them how to write the letters, or writing any letters for them.

If the child is clearly unable to write their name, you should turn over the page and go straight to the next task.

If the child makes a response, even if it is only a scribble or 'pretend writing', the response should be praised (good, that's fine, that's very good), and the page turned over to start the next task.

I can draw a circle...

The child should then be shown the circle on page 2 of the booklet, and asked if they can draw another shape just like it, in the space next to the circle, pointing first to the circle and then to the space next to it.

Note that it is fairly common for young children to attempt to draw a circle around

the given circle, rather than a circle next to the given circle. If the child does this, try to encourage them to draw another circle next to the given circle (pointing again to the space next to the circle). However, do not erase or allow the child to erase their first attempt because this is important in interpreting their response. If the child is unable to draw a circle, or simply draws an outline around the given circle, go on to the next task.

When the child has completed the task, his or her response should be praised (good, that's fine, that's very good, etc.) and the child should then be asked to look at the next page (the cross).

And a cross ... and a square ... and a triangle ... and a diamond.

The same procedure as described above should be followed for each of the succeeding geometrical shapes (on pages 3 to 6 of the booklet). In each case the child should be shown the shape and then asked to draw another shape just like it in the space next to it, pointing to each in turn. If the child attempts to draw around the given shape rather than next to it, they should be encouraged to draw the shape again in the appropriate space. If they say they can't do it, they should be encouraged to try. No help should be given in terms of showing the child how to draw the figure, but they should be given every encouragement to try and all attempts should be praised.

In the case of children who are clearly unable to write their name or to copy the geometrical shapes, the next section of the booklet should be skipped (i.e. pages 7 to 10), and you should turn straight to page 11, and ask the child to draw a picture of him or herself (see section below for further instructions on administration of this task).

In the case of children who are responding to the task, even if their efforts are not very accurate, the children should be asked to continue with the next section of the booklet (pages 7 to 10).

I can write numbers...

When the child has completed copying the geometrical shapes, he/she should be shown page 7 of the booklet and asked if they can write 'some numbers' on this page. If the child seems hesitant or seems uncertain as to what is required, they can be asked if they can write the number '1'. If they can do this successfully, they can be asked what number comes after number one, and if they respond correctly they can be asked to write the number '2' on the page. The children should be encouraged to respond further (can you write some more numbers, do you know what number comes next, etc.) However, no further

specific help in terms of suggesting what number to write should be given after the initial prompts with numbers 1 and 2.

In the case of children who write all the numbers from 1 to 10 consecutively, and then stop, they can be asked what number comes next and encouraged to write more numbers (and after that number?, and after that?).

If the child gets up to 20 and stops, they can be asked if they know the number that comes next. If they can carry on the sequence (21, 22, 23, etc.), they can be asked if they can write the numbers in 10's (what comes after 29, what comes after 39, etc.), and if they seem to have grasped the number sequence up to 100, they can be asked to write 'a big number' or 'the biggest number you can think of', to see if they can write numbers in hundreds and thousands.

Whatever response is given to the task should be praised, before turning over to the next page of the booklet.

And letters...

When children have completed the writing numbers task, they should be shown page 8 of the booklet and asked if they can write 'some letters' on this page.

As in the case of the previous task, children who are hesitant or uncertain should be given some encouragement. For example, they could be asked what letter their name begins with and encouraged to write that letter, then they can be asked what other letters they have in their name and write those letters. However, no specific letters should be suggested to them (e.g. a, b, c). If children spontaneously start to write letters in alphabetical order, then stop, they can be asked 'do you know what letter comes next', or 'can you write any more'. Children should be encouraged to write as many letters as they can think of, but should not be given further help in terms of suggesting specific letters to write. If they ask if they should write with 'big letters' or 'little letters', they can be told to do whatever they prefer. Some children may spontaneously write both capitals and lower case for each letter. If children misunderstand the task (for example, draw a picture of a letter in an envelope), the task should be explained again in terms that the child can understand, for instance by referring to the 'letters that make up words, like when you spell your name'. Whatever response is given to this task should be praised, before turning to the next page of the booklet.

and words...

When the child has completed the writing letters task, he or she should be

shown page 9 of the booklet and asked if they can write 'some words' on this page.

As in the case of the previous tasks, children who are uncertain or hesitant should be given some encouragement. For example, they could be asked what their name is and to write that down as a word. They can then be asked if they have brothers and sisters, or if they have any pets, and told that these are words they can write. Other words relating to school or home could also be suggested. However, children should not be given any specific help in terms of spelling words, or be told what letters to write down. After this initial encouragement, children should be given the opportunity to write down as many words as they can, and if necessary, given further encouragement to think of other words to write down. No further specific suggestions as to words to write should be given and no help in terms of spelling. If children ask for help with spelling, tell them to 'write it the way you think it should be', or 'just do the best you can'.

There is no limit to the number of words the child may write other than that imposed by the size of the page. If, however, children are very slow and seem unable to think up some more words, you should move on to the next page after a few minutes or when it is clear that the child cannot think of any more words to write.

and a sentence.

When the child has completed the writing words task, he/she should be shown page 10 of the booklet and asked to write a sentence. If the child is hesitant or uncertain, they can be encouraged by asking them to 'write something about yourself', 'write something about the things you like doing', or 'write something about your school'. Children should not be given any help in framing a specific sentence but may be encouraged to write down any verbal sequence they give to this initial encouragement.

If the child has difficulty with this task or if you feel they need a bit of a break from 'writing', the final task on page 11 of the booklet can be administered before the 'write a sentence task'. That is, the child can go straight on to page 11 of the booklet (to draw a picture of themselves) and when this has been completed they can go back to the task of writing a sentence, which can then be related to the picture that they have just drawn (tell me something about your drawing; what does your drawing show?).

This is a picture of me.

The final task for the child is to draw a picture of himself or herself. When the

other tasks have been completed (or in some cases where the child has skipped some of the previous tasks), the child is shown page 11 of the booklet and asked to draw a picture of himself or herself. Children should be given every encouragement to respond and their efforts should be praised.

When the child has completed the booklet, take it off of the table and thank the child for the working so hard.

Time started and time finished should be recorded so that the total time taken to complete the tasks can be entered at the end of the session. Children should be given sufficient time on each page to make a reasonable effort, but not so long as to make the administration time for the task too lengthy for them. Some of the tasks will take no more than a few seconds but no task should take more than a few minutes. Children are encouraged to work at their own pace. A child spending too much time on one task, or getting discouraged, should be allowed to leave it and move on to the next task. If no breaks are required, most children should complete the booklet in ten to fifteen minutes; younger children are likely to take even less time. Total administration time should not exceed about 20 minutes.

Notes

CHAPTER 11

NUMBER KNOWLEDGE QUESTIONNAIRE

11.1 General Information

The Number Knowledge Questionnaire (Booklet 2, Appendix C) is designed to measure children's understanding of quantities and of the system of whole numbers. It starts with easy questions and moves gradually to harder ones. The child must be able to answer correctly at least half of the questions at a given level before moving on to the next. The administration of the Number Knowledge Questionnaire should take about 10-15 minutes.

11.2 Supplies

The following is a list of materials required for the administration of the Number Knowledge Questionnaire. If you are missing items from this list, please contact your Senior Interviewer.

- Number Knowledge Questionnaire (Booklet 2, Appendix C)
- 25 white chips
- 4 blue chips
- 3 red chips
- 7 triangles
- 8 circles
- 1 triangle with numbers 5, 6, and 2
- 1 triangle with numbers 7, 4, and 9
- 1 card with the numbers 4, 9, 2, and 7
- 1 card with the numbers 8, 5, 2, and 6
- 1 card with the numbers 21, 25, and 18
- 1 card with the numbers 28, 31, and 24
- 1 card with the numbers 12 and 54
- 1 card with the numbers 47 and 21

11.3 Procedures

- Before you administer the questionnaire to the selected child, ensure that all the information mentioned in Chapter 3 is completed on the front cover of the questionnaire.

- The Number Knowledge Questionnaire is administered orally to each selected child and requires oral responses from the child. For some questions the child is permitted to point to indicate his/her answer.
- The use of paper and/or pencils is **NOT PERMITTED** to help the child figure out the answers. To measure intuitive knowledge, it is important that children figure things out in their heads. Children are permitted to use their fingers.
- All instructions for you to follow will be marked in italics on the questionnaire and anything that you are to say to the child will be written in bold print.
- The Number Knowledge Questionnaire is divided into three levels as described below.

- **Level 0**

The first question of Level 0 (counting from one to ten) is included in the questionnaire as a warm-up question, to orient children to the nature of the questionnaire and to give them a successful experience at the start. This item is usually mastered at some time during the age of three years.

The remaining questions assess children's ability to count and to quantify small sets when concrete objects are available and can be touched and manipulated. This knowledge provides an important building block for success at the next level, which requires children to deal with quantities and changes in quantity that cannot be touched or seen and that have to be imagined.

- **Level 1**

The first question of this section assesses children's ability to handle simple arithmetic problems. The remainder of the section assesses children's understanding of the number sequence. Concrete objects are not available for any of these items although a few are accompanied by a visual display so children can make sense of the problem. To solve problems at this level, children need to rely on something like a "mental counting line" inside their heads. Keep in mind that Level 1 was designed for more advanced children and that few children are expected to complete or even reach this section.

- **Level 2**

There are two classes of questions at this level; those that assess knowledge of the number sequence and those that assess knowledge of arithmetic. The

primary distinction between questions at Levels 1 and 2 is that questions at Level 2 require children to deal with double digit numbers and/or depend on the use of two mental number lines for a successful solution. Do not be surprised if none of the children reach this level.

- For each question, including the warm-up question (0.1), give one point for the correct answer by checking the box in the right hand column, and zero for the incorrect (do not check box). Correct answers are identified by a "1" in upper case text next to the check box and points are awarded in the far right column. **Note:** For two part questions, children must answer both a) and b) correctly to get a point. For example:

Correct Answer

			Check box to award points
<div>Place 25 white chips on a table in front of yourself.</div>			
0.2a	Do I have a lot or a little?	¹ ● A lot ⁰ ○ A little ² ○ Don't Know	
<div>Place one white chip on the table in front of the child.</div>			
0.2b	Do you have a lot or a little?	⁰ ○ A lot ¹ ● A little ² ○ Don't Know	⁸ ●

Incorrect Answer

		Check box to award points
0.2a	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <i>Place 25 white chips on a table in front of yourself.</i> </div> <p>Do I have a lot or a little?</p> <div style="display: flex; justify-content: flex-end; align-items: flex-start; gap: 10px;"> <div> ¹ <input checked="" type="radio"/> A lot ⁰ <input type="radio"/> A little ² <input type="radio"/> Don't Know </div> </div>	<input type="radio"/>
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <i>Place one white chip on the table in front of the child.</i> </div> <p>Do you have a lot or a little?</p> <div style="display: flex; justify-content: flex-end; align-items: flex-start; gap: 10px;"> <div> ⁰ <input checked="" type="radio"/> A lot ¹ <input type="radio"/> A little ² <input type="radio"/> Don't Know </div> </div>		

- Once a level is completed, count the number of points by counting the checks in the right hand column. Transcribe this total in the space provided at the end of each level.
- Follow the instructions in the questionnaire to determine whether to go on to the next level. The child must be able to answer correctly at least half of the questions at a given level before moving on to the next.
- When the questionnaire is complete or the child fails a level, indicate the end time in the space provided on the last page of the booklet.
- Remember to indicate the **Booklet Final Status Code**. Make comments in the space provided on the cover page of the questionnaire.

- Remember to disinfect the following materials (refer to chapter 15 for disinfection procedures):

- 25 white chips
- 4 blue chips
- 3 red chips
- 7 triangles
- 8 circles
- 1 triangle with numbers 5, 6, and 2
- 1 triangle with numbers 7, 4, and 9
- 1 card with the numbers 4, 9, 2, and 7
- 1 card with the numbers 8, 5, 2, and 6
- 1 card with the numbers 21, 25, and 18
- 1 card with the numbers 28, 31, and 24
- 1 card with the numbers 12 and 54
- 1 card with the numbers 47 and 21

Notes

CHAPTER 12

ESI-R QUESTIONNAIRE

12.1 General Information

The Early Screening Inventory- Revised (ESI-R) Questionnaire (Booklet 4, Appendix E) is a tool developed to measure the physical and motor development of children beginning at age three. The need for such a questionnaire has stemmed from research indicating that a child's motor and physical development are relevant predictors of a child's cognitive and socio-emotional development. The ESI-R Questionnaire consists of **2 parts**: the **visual motor/ adaptive** part and the **gross motor** part.

Two separate sub-questionnaires have been created both involving these two parts. The first sub-questionnaire has been created specifically for **preschoolers age 36 to 53 months old** and the second sub-questionnaire has been created specifically for **kindergarten age children age 54 to 71 months old**. Both sub-questionnaires are contained in the ESI-R questionnaire booklet. Each sub-questionnaire takes approximately 10-15 minutes to administer.

12.2 Supplies

The following is a list of materials required for the administration of the ESI-R Questionnaire. If you are missing items from this list, please contact your Senior Interviewer.

- 1 ESI-R Questionnaire (Booklet 4, Appendix E)
- 10 one-inch wooden cubes
- 1 file folder (to use as a screen)
- 2 pieces of 8 1/2" X 11" laminated construction paper (for building surface)
- 4 3"X5" cards, each showing one of the following figures: circle, cross, square, triangle
- 1 pencil without an eraser
- 6 picture cards, numbered on the back, 2 each of a duck, a cup, and a house.
- 6 foot long, 1-inch wide tape
- 1 sheet of paper without lines

12.3 Procedures

- Before you administer the questionnaire to the selected child, ensure that all the information mentioned in Chapter 3 is completed on the cover page of the questionnaire.
- Look on your Control Form to determine the age in months of the selected child and therefore which of the 2 sub-questionnaires to administer to the child, either the ESI-R - Preschoolers or the ESI-R - Kindergarten. If the child's age is in the range of 36 and 53 months then administer the ESI-R - Preschoolers. If the child's age is in the range of 54 and 71 months then administer the ESI-R - Kindergarten.
- The ESI-R - Preschoolers is sub-questionnaire 1 of the ESI-R (Booklet 4) and is located on page 3 The ESI-R - Kindertgartens is sub-questionnaire 2 of the booklet and is located on page 19.
- In part 1, Visual-Motor/Adaptive, the child sits at a table across from you. For part 2, Gross Motor, you will need a clear space in the room to allow the child to move around. The positioning is the same for both sub-questionnaire 1 (Preschoolers) and sub-questionnaire 2 (Kindergarten).
- All instructions for you to follow will be marked in italics on the questionnaire and anything that you are to say to the child will be written in bold print.
- Remember to mark your start and end time on the questionnaire.
- Remember to disinfect the following materials (refer to Chapter 15 for disinfection procedures):
 - 10 one-inch wooden cubes
 - 2 pieces of laminated construction paper
 - 6 picture cards, numbered on the back, 2 each of a duck, a cup, and a house.
 - 4 3"X5" cards, each showing one of the following figures: circle, cross, square, triangle

SUB-QUESTIONNAIRE 1 - FOR PRESCHOOLERS

- This sub-questionnaire is administered to children between the ages of **36 to 53 months old**.
- **Part I** of this sub-questionnaire, the **Visual-Motor/Adaptive**, consists of the following activities:

Section A **1 - Tower** - Block Building with 9 blocks/warm-up
Materials: 9 blocks, file folder, 2 pieces of construction paper
2 - Bridge from a Model - build behind a screen
3 - Gate by Imitation- build without a screen
*(only for 48 to 53 months old, don't administer if a child fails both bridge tasks)

Materials: 10 blocks

Section B **Copy Forms**
1 - Vertical line
2 - Horizontal line
3 - Circle
4 - Cross

Materials: four 3"X 5" cards showing each of 2 figures (circle, cross), a pencil without an eraser

Section C **Draw a Person (DAP)**
*(administered only to children 48 to 53 months old)
Materials: pencil without an eraser.

Section D **Visual Sequential Memory**
1 - Two-card Sequence
2 - Three-card Sequence
Materials: 6 picture cards numbered on the back, 2 each of a duck, a cup, and a house.

- **Part II** of this sub-questionnaire, the **Gross Motor**, consists of the following activities:

Section A **Jump**
Materials: 6 foot long one-inch wide tape

Section B **Walk On The Line**
Materials: 6 foot long one-inch wide tape

Section C **Balance**
Materials: none

Section D **Hop**
*(administered only to children 48 to 53 months old)
Materials: none

SUB-QUESTIONNAIRE 2 - KINDERGARTEN

- This sub-questionnaire is administered to children between the ages of **54 to 71 months old**.
- **Part I** of this sub-questionnaire, the **Visual-Motor/Adaptive**, consists of the following activities:

- Section A** **1 - Tower** - Block Building with 10 blocks/ warm-up
Materials: 10 blocks, file folder, 2 pieces of construction paper
- Section B** **2 - Gate from Model** (build gate behind a screen)
Copy Forms
1 - Circle
2 - Cross
3 - Square
4 - Triangle
Materials: four 3"X 5" cards showing 1 of 4 figures (circle, cross, square, triangle), a pencil without an eraser
- Section C** **Draw a Person (DAP)**
Materials: pencil without an eraser.
- Section D** **Visual Sequential Memory**
1 - Two-card Sequence
2 - Three-card Sequence
Materials: 6 picture cards numbered on the back, 2 each of a duck, a cup, and a horse.

- **Part II** of this sub-questionnaire, the **Gross Motor**, consists of the following activities:

- Section A** **Balance**
Materials: none
- Section B** **Hop**
Materials: none
- Section G** **Skip**
Materials: none

Scoring and Administration Tips for SUB-QUESTIONNAIRE 1 - PRESCHOOLERS

Part I

Section A

A1 - Tower - Block building with a blocks/ warm-up

Give the child credit for this item if (s)he builds a 9-block tower. Do not penalize for imprecise alignment of the blocks, as long as the tower is stable enough to remain standing when the child has completely removed his/her hands from the blocks. If the child builds a 9-block tower with all nine blocks standing unassisted, mark the answer circle "has done it".

A2 - Bridge from a Model- Build behind screen

The structure built by the child must look like the model. There should be a gap between the 2 bottom blocks that is wide enough for a pencil to slide through. Mark the answer circle "has done it (without) help"

OR

If the child cannot construct the bridge from a model then remove the child's blocks and construct the bridge without the screen so that the child can watch easily (see diagram in Booklet 4). Leave the model standing and place 3 blocks on a piece of construction paper in front of the child and ask the child to make one like the model. When the child seems satisfied then score their structure as follows:

The structure built by the child must look like the model with enough space between the bottom blocks for a pencil to slide through. Mark the answer circle "has done it (interviewer had to show without screen)".

A3 - Gate by Imitation- Build without a screen

* (only for 48 to 53 months old, don't administer if a 48 month old fails both bridge tasks)

The structure built by the child must look like the model. Mark the answer circle "has done it" if the child correctly imitates the gate (The bottom edge of the angled block should not touch the building surface).

Section B - Copy Forms

Although you will demonstrate a drawing of the horizontal and vertical line, do not demonstrate or name the circle and the cross. If the child names the form, (for example, "that's a circle"), you may agree with the child. *Lay the cards flat on the work surface rather than holding them up.* One trial for each form is all that is required, but if the child asks to do a second drawing, allow a second trial.

This task will be scored centrally.

Section C - Draw a Person (DAP)

This task will be scored centrally.

Section D - Visual Sequential Memory

Mark the answer circle "has done it (first trial)" for a correct identification of both cards on the first 2-card trial and the answer circle "has done it (second trial)" for a correct identification of both cards on the second 2-card trial. Mark the answer circle "has done it (first trial)" for correct identification of all 3 pictures in the first 3-card trial and the answer circle "has done it (second trial)" for correct identification of all 3 pictures on the second 3-card trial.

Part II

Section A - Jump

Mark the answer circle "able to jump over the line" for a two-footed jump clearing the line. Both feet must leave the ground simultaneously and land on the other side of the tape together. Credit is earned for the quality of the jump as well as for clearing the line. A gallop over the line does not count, nor does a take off or landing that involves one foot hitting the floor before the other. To receive a score, the child's feet must take off and land together.

Section B - Walk on the Line

Mark the answer circle "all steps are on the line" if this is the case and mark the answer circle "only 1 or 2 steps are off the line" if only 1 or 2 steps are off the line. "On the line" means that at least part of the foot is on the line for each step.

Section C - Balance

If necessary, demonstrate briefly, but do not demonstrate the full 5 seconds. As soon as the child lifts his/her foot, begin to count out loud slowly and clearly at the rate of one count per second (count "1- and, 2-and, 3-and" or 1-Mississippi, 2-Mississippi, 3-Mississippi" to aid in counting out seconds). Begin with one foot and record in the booklet the number of seconds that the child can balance. The child may have up to three trials to balance 5 seconds. Then ask them to try on the other foot.

To earn 2 points the child must be able to balance a full 5 seconds on each foot. The child may have up to three trials on each foot to reach the 5 seconds; score the best performance on each foot. Do not count false starts or a one- to two-second balance as a trial unless that is the best the child can do. If the child is having significant difficulty with this task, do not continue with the full number of trials. Mark the answer circle "able to stand on each foot for seconds" if the child can balance for 5 seconds on *each* foot. If the child can balance at least 3 or 4 seconds on *either* foot, mark the answer circle "able to stand on either foot for 3-4 seconds".

Section D - Hop

Mark either answer circle "can hop at least 5 times on *each* foot" or "can hop at least 3 or 4 times on *either* foot".

Scoring and Administration Tips for SUB-QUESTIONNAIRE 2 - KINDERGARTEN

Part I

Section A

A1 - Tower - Block building with 10 blocks/ warm-up

There is no score for this task, it is a warm-up item.

A2 - Gate from Model - Build gate behind a screen

The structure built by the child must look like the model. Mark the answer circle "has done it (from a model)" if the child correctly imitates the gate (The bottom edge of the angled block should not touch the building surface).

OR

If the child *cannot* construct the gate from a model, remove the child's blocks and construct the gate without using the screen so that the child can watch easily (see diagram in booklet 4). Do not describe the gate as you build it. Leave the model standing and place 5 blocks on the construction paper in front of the child and ask them to make one just like the model. Do not touch the child's block structure or help by holding the blocks in place. When the child seems finished then score their structure.

The structure built by the child must look like the model. Mark the answer circle "has done it (by imitation)" if the child correctly imitates the gate (The bottom edge of the angled block should not touch the building surface).

Section B - Copy Forms

Do not name the figures on the card. If the child names the form, (for example, "that's a circle"), you may agree with the child. *Lay the cards flat on the work surface rather than holding them up.* One trial for each form is all that is required, but if the child asks to do a second drawing, allow a second trial.

This task will be scored centrally.

Section C - Draw a Person (DAP)

This task will be scored centrally.

Section D - Visual Sequential Memory

There is no score given for the 2-card presentation because this is a warm-up item. Mark answer circle "pointed correctly to all three pictures (first trial)" if the child correctly identified all 3 pictures in the first trial and mark answer circle "pointed correctly to all three pictures (second trial)" if the child correctly identified all 3 pictures in the second trial.

Part II

Section A - Balance

If necessary, demonstrate briefly, but do not demonstrate the full 10 seconds. As soon as the child lifts his/her foot, begin to count out loud slowly and clearly at the rate of one count per second (count "1- and, 2-and, 3-and" or 1-Mississippi, 2-Mississippi, 3-Mississippi" to aid in counting out seconds). Begin with one foot and record in the booklet the number of seconds that the child can balance. The child may have up to three trials to balance 10 seconds. Then ask them to try on the other foot. Score the best performance on each foot.

Mark either answer circle "able to stand on each foot for 10 seconds" or "able to stand on either foot for 5-9 seconds". Do not count false starts or a 1 to 2 second balance as a trial unless that is the best the child can do. If the child is having significant difficulty with this task, do not continue with the full number of trials.

Section B - Hop

Mark either answer circle "can hop at least 5 times on each foot" or "can hop at least 3 or 4 times on *either* foot".

Section C - Skip

Mark answer circle "skips using alternating feet" if the child can skip using alternating feet.

Notes

CHAPTER 13

RAVEN'S CPM QUESTIONNAIRE

13.1 General Information

The Raven's Coloured Progressive Matrices (Booklet 5, Appendix F) is a questionnaire about children's reasoning ability. It is an un-timed, nonverbal activity consisting of 2 subscales with 12 questions in each. Each item consists of a coloured abstract design (matrix) with a missing piece to be completed by selecting the best of six choices. This questionnaire will be administered to 5 year old children and it takes approximately 15 minutes to complete.

13.2 Supplies

The following is a list of materials required for the administration of the Raven's CPM Questionnaire. If you are missing items from this list, please contact your Senior Interviewer.

- 1 Raven's CPM test booklet
- 1 Raven's CPM Questionnaire (Booklet 5, Appendix F)

13.3 Procedures

- Before you administer the questionnaire to the selected child, ensure that all the information mentioned in Chapter 3 is completed on the cover page of the questionnaire.
- Position yourself so that you are sitting beside or at a right angle to the child at the table. Put the Raven's CPM test booklet in front of the child.
- Administer the Raven's CPM Questionnaire to the child. At the beginning, read a brief description of the activity to the child.
- Next, administer all of part A (A1 to A12) and part Ab (Ab1 to Ab 12) to the child. To begin, use question A1 as an example and explanation of how to answer each question. Continue to explain until the nature of how to do the problem is clearly grasped by the child. Refer back to question A1 if the child is having trouble with question A2.

- Be sure to follow the script that is written in the Raven's CPM Questionnaire booklet because there are certain questions and reminders that are to be said either before and/or after different questions. All instructions for you to follow will be marked in italics on the questionnaire and anything that you are to say to the child will be written in bold print.
- It is important to ensure that during the administration the child looks carefully at the pattern and is satisfied that the piece pointed to is the one, and the only one, required to complete the matrix.
- The scoring of this test is to be conducted on the fold out scoring sheet in the middle of the Raven's CPM Questionnaire booklet. Record the final choice on the answer sheet by checking the number of the piece chosen next to the problem number. If a mistake has been made, or the child wants to change his or her answer, put a cross through the incorrect answer, and then write the number of the final choice. Do not try to rub out the incorrect answer.
- Note that all of the correct answers for part A and Ab are located at the bottom right of the back of the cover page. It is not necessary that you look at the answers although they are provided for your own information.
- **Remember to record your start time on the questionnaire when you start and your end time when you finish.**

Notes

CHAPTER 14

INTERVIEWER'S OBSERVATION QUESTIONNAIRE

14.1 General Information

The Interviewer's Observation Questionnaire (Booklet 10, Appendix J) is to be filled out right **after each interview, once you have left the home.** The purpose of this questionnaire is for you to record your observations about the child's behaviour, attitude, the environment that the interview was conducted in, and the rapport between the parent and the child. The questionnaire consists of 5 questions in total.

14.2 Procedure

- Ensure that all required information is completed on the front cover of the questionnaire.
- Answer all the questions. Questions 1 to 4 are about the child and the environment during the interview and the last question pertains to the rapport between the parent and the child. For the last question, there is a further explanation to follow in order to help you to choose the correct response.
- Write all your comments on the last page of this questionnaire. This page is a section for you to write any general comments or observations that you had about the interview (i.e. how many times the child did not understand the instructions, a description of any special situations with the parent or the child, the behaviour of the child in general, any difficult encounters with specific material, if you had to disinfect material in the household because you had another interview right after, procedures that you did not understand or were difficult to follow, etc.)

Notes

Lined area for notes.

CHAPTER 15

DISINFECTION PROCEDURES

15.1 General Note

All materials that are handled by the child and the interviewer must be disinfected before each interview. Refer to individual chapters for information on what specific materials must be disinfected.

15.2 Supplies

- One 750 ml bottle of Pinosan
- One empty spray bottle with misting nozzle
- One empty replacement bottle with cap
- One measuring spoon (5ml)
- Ziplock bags
- Dish towels

15.3 Directions

1. Using the spoon provided, pour 5 ml of Pinosan in the spray bottle.
2. Fill the rest of the bottle with water leaving an air bubble.
3. Replace and tighten the spray top and close the nozzle.
4. For transportation, seal the bottle in the *Ziplock*.

NOTE: *Pinosan* is effective only **48 hours** once diluted, therefore, if your solution is more than 48 hours old, discard it. Also, the preparation of the solution should be always done at your home. **WHEN POSSIBLE, DISINFECTING MATERIALS SHOULD NOT BE DONE IN THE RESPONDENT'S HOUSEHOLD.**

At the end of the present chapter, you will find the Material Safety Data Sheet about the Pinosan. If the respondent wants to have more information about the Pinosan, you can use this sheet.

15.4 Disinfecting materials

1. Spray the diluted Pinosan on the objects.
2. Allow a contact time of 10 minutes.
3. Rinse objects **WELL** under water.

4. Dry the objects with a clean dish cloth (dispose of dish cloth after it has been used once.)

NOTE: In the case that a child or another person should bleed, rest assured that Pinosan is adequate for disinfecting the materials (This product is presently used in hospitals).



MATERIAL SAFETY DATA SHEET

PINOSAN

SECTION I PRODUCT IDENTIFICATION

PRODUCT NAME: PINOSAN

PRODUCT TYPE: GENERAL PURPOSE GERMICIDAL CLEANER - 5TH GENERATION

WHMIS CLASSIFICATION: EXEMPT

SECTION II HAZARDOUS INGREDIENTS

CAS REGISTRY NO.	% W	CHEMICAL NAME(S)	TOXICITY
68424-85-1	0.1-1.0	ALKYL DIMETHYL BENZYL AMMONIUM CHLORIDE	LD ₅₀ ORAL (RAT) 400 mg/kg
7173-51-5	1-5	DIDECYL DIMETHYL AMMONIUM CHLORIDE	NOT AVAILABLE

SECTION III PHYSICAL DATA

APPEARANCE: CLEAR GREEN LIQUID

ODOUR: SCENTED

pH (CONCENTRATE): 7.2

BOILING POINT (°C): 100

SPECIFIC GRAVITY: 1.0

SOLUBILITY IN WATER (%): 100

SECTION IV FIRE AND EXPLOSION HAZARD DATA

FLASH POINT (Method used) (°C): NONE

EXTINGUISHING MEDIA: NOT APPLICABLE

SPECIAL FIRE FIGHTING PROCEDURES: NONE

UNUSUAL FIRE AND EXPLOSION HAZARDS: NONE

SECTION V TOXICOLOGICAL PROPERTIES

EFFECTS OF OVEREXPOSURE	HAZARD RATING	RATING SYSTEM
SWALLOWING: SLIGHTLY TOXIC	HEALTH: 2	0 = INSIGNIFICANT
INHALATION: SLIGHT IRRITANT	FLAMMABILITY: 0	1 = SLIGHT
SKIN ABSORPTION: UNKNOWN	REACTIVITY: 0	2 = MODERATE
SKIN CONTACT: SLIGHT TO MODERATE IRRITANT		3 = HIGH
EYE CONTACT: IRRITANT		4 = EXTREME
		SPECIAL WARNING: NONE

SECTION VI FIRST AID MEASURES

INGESTION: PROMPTLY DRINK LARGE QUANTITIES OF MILK, EGG WHITES, GELATIN OR WATER. AVOID ALCOHOL. CALL A PHYSICIAN IMMEDIATELY.

INHALATION: REMOVE TO FRESH AIR. CALL A PHYSICIAN.

SKIN: FLUSH WITH WATER FOR AT LEAST 15 MINUTES. REMOVE AND WASH CONTAMINATED CLOTHING. CALL A PHYSICIAN.

EYES: FLUSH WITH WATER FOR AT LEAST 15 MINUTES. CALL A PHYSICIAN.

SECTION VII REACTIVITY DATA

STABLE: ☒ UNSTABLE: ☐

CONDITIONS TO AVOID: NONE

INCOMPATIBILITY (Materials to avoid): NONE

HAZARDOUS DECOMPOSITION PRODUCTS: NONE

HAZARDOUS POLYMERIZATION: MAY OCCUR: ☐ WILL NOT OCCUR: ☒

SECTION VIII PREVENTIVE MEASURES

PROTECTIVE GLOVES: YES

EYE PROTECTION: YES

VENTILATION: LOCAL EXHAUST: ☐ GENERAL: ☒

RESPIRATORY PROTECTION (Specify type): NO

OTHER PROTECTIVE EQUIPMENT: IN CASE OF SPILLS, WEAR CHEMICAL RESISTANT APRON AND BOOTS.

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED: MOP UP SPILLAGE. RINSE SPILL AREA WITH WATER AND ALLOW TO DRY.

WASTE DISPOSAL METHOD: FLUSH WITH WATER INTO WASTE SYSTEMS IN ACCORDANCE WITH MUNICIPAL, PROVINCIAL AND FEDERAL REGULATIONS.

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE: NORMAL HANDLING PROCESSES. INSIDE STORAGE AT 4-40°C RECOMMENDED.

OTHER PRECAUTIONS: FOLLOW LABEL USE INSTRUCTIONS

PIN: 1903

TDG CLASS: 8

TDG EMERGENCY TELEPHONE #: (613) 996-6666 (COLLECT)

SECTION IX PREPARATION DATA

PREPARED BY: D.R. CUNLOP

PHONE: (613) 745-6861

DATE: JANUARY 1, 1998

MSDS.026

DUSTBANE PRODUCTS LIMITED, 25 PICKERING PLACE, OTTAWA, ONTARIO K1G 5P4

PINOSAN

General Purpose Germicidal Cleaner - 5th generation

"One step cleaner, germicide and deodorant (*Pseudomonacidal*, *Staphylocidal*, *Salmonellacidal*, *Fungicidal*, *Virucidal*)."

FEATURES AND BENEFITS

neutral quat - preserves the floor finish appearance

excellent cleaning abilities - handles heavy duty cleaning on hard non-porous surfaces

multiple claims - effectively destroys a broad range of bacteria, fungi and viruses including: *Pseudomonas aeruginosa*, *Staphylococcus aureus*, *Salmonella choleraesuis*, *Trichophyton mentagrophyte*, Influenza A/Hong Kong, *Vaccinia*

pine fragrance - leaves the area smelling fresh and clean

WHERE TO USE

For use on hard non-porous surfaces such as floors, walls, furniture, sinks, tubs, toilets, garbage pails, counter tops, metal and plastic surfaces.

PINOSAN is intended for use in veterinary clinics, laboratories, hospitals, dental clinics, nursing homes, food processing facilities and federally inspected meat, poultry and fish establishments. Surfaces subject to direct food contact should be adequately rinsed with potable water.

HOW TO USE

RECOMMENDED DILUTION RATES:

GENERAL CLEANING	1:40 - 1:80
HEAVY DUTY CLEANING	1:20 - 1:40
DISINFECTION	1:40

Note: Adjust dilution rates to suit your cleaning needs.

Apply with a mop, sponge or cloth.

MOLD AND MILDEW: When mixed at a rate of 1:40, PINOSAN effectively inhibits the growth of odour-causing mold and mildew. Apply the solution and allow it to dry on the treated surface. Repeat treatment when mold or mildew returns.

DISINFECTING: Allow a minimum contact time of 10 minutes in a single application. Surfaces subject to direct food contact should be adequately rinsed with potable water. Heavily soiled surfaces may require a precleaning step.

HIV-1 When mixed at a rate of 1:40, PINOSAN may be used to clean and decontaminate hard surfaces exposed to blood or other body fluids that contain the HIV-1 virus. Thoroughly clean all hard surfaces removing blood and body fluids prior to disinfection. Allow surfaces to remain wet for a minimum of 4 minutes. Wear protective clothing including latex gloves, gown, mask and eye goggles. Blood, body fluids, cleaning materials and clothing should be autoclaved and disposed of according to local regulations. [Note: efficacy testing was done in the presence of hard water (400 ppm as CaCO_3) and a soil load (5% blood serum)].

INGREDIENTS

Didecyl dimethyl ammonium chloride	1.44%
n-Alkyl (50% C_{14} , 40% C_{12} , 10% C_{16}); dimethyl benzyl ammonium chloride	0.96%
Inert Ingredients	97.6%
pH, concentrate @ 25°C	7.2 - 7.7 (neutral)
pH, at 1:80 @ 25°C	7.0 - 7.5
Colour	green
Odour	pine
DIN#	02213133
Agri-Food Approval	oui

Notes

CHAPTER 16

QUESTIONS AND ANSWERS

To maintain a high response rate, you must be prepared to answer any questions a respondent may ask. The following questions and answers are designed to provide you with accurate answers to some of the questions commonly asked by respondents. Become familiar with all of the answers, so you can reply comfortably to similar questions you are asked while conducting an interview.

Am I obligated to take part in the survey?

While your participation is voluntary, you have been selected to represent a number of other individuals. To ensure that all children and youth in Canada are represented, it is necessary that we interview all those who have been selected. Your participation is very important for the accuracy of the survey results because your answers represent those of many other people.

How was I selected to take part in the survey?

A total of 636 households were selected to participate in the Understanding the Early Years component of the National Longitudinal Survey of Children and Youth. Children aged 8 to 16 months have been selected from provincial birth registry files. The remaining sample of older children was from the Labour Force Survey.

What is Understanding the Early Years?

This is a test to evaluate the administration of instruments which may be added to the National Longitudinal Survey of Children and Youth (NLSCY) to provide improved data on development and learning for children under the age of six. This component has been developed in response to the federal government's increased recognition of the importance of early childhood as a foundation for human development.

What is a longitudinal survey?

A longitudinal survey follows the same people over time. In the context of the National Longitudinal Survey of Children and Youth, we plan to interview those children who make up the longitudinal survey approximately every two years. This will not be the case for this test.

What happens if I refuse?

You represent hundreds of other households similar to yours. If you refuse to participate, the information will not accurately represent Canadian households, which means that our picture will not be complete. This is a voluntary survey and there is no penalty for refusing. However, your household was scientifically chosen for our sample and your information makes our data more accurate and realistic. We cannot substitute your family for another one who might be interested in taking part in the survey.

What steps does Statistics Canada take to ensure that the survey data will remain confidential?

By law, Statistics Canada must protect the confidentiality of your information. The confidentiality of individuals is given the highest priority at all stages of the survey process.

Once hired, employees are sworn to secrecy under the Statistics Act. There are severe penalties for any employee who releases personal information. In the 75 year history of Statistics Canada, no Agency employee has been charged with a breach of confidentiality.

The Statistics Act guarantees that information identifying individuals will not be released to anyone outside of Statistics Canada without their consent. Revenue Canada, the police, the courts, even the Canadian Security Intelligence Service are all denied access to this information.

The same laws are applicable to this survey even though collection of the data is now computerized. There are measures in place that protect the data on the computer, so that no one can access the information once it is entered into the computer.

To protect your data against intrusion by an outside party, your data will be scrambled before it is transmitted to the Statistics Canada head office. If anyone tries reading the data during transmission, they would be unable to do so.

How do I know you are who you say you are?

You can call Statistics Canada at () - (Numbers to be provided by the regional offices) to confirm that this is a legitimate survey and that I am an employee of Statistics Canada.

Why do you need this information? Could it not be found from other sources?

The NLSCY is providing the first comprehensive national data on the lives of children in Canada as they grow up. Other studies have focused on specific topics or specific regions of Canada and have not followed children over time. Many people concerned about our children are beginning to use the data. They look forward to the long term data which may help to provide explanations for how children are doing.

Why are you doing direct assessments?

Although parents' answers about their children are very important, they provide their impression of how their children are doing. By asking the child to do certain tasks, direct assessments try to provide information on some aspects of what the child is able to do.

Notes

CHAPTER 17

RETURNING COLLECTION MATERIALS

Materials are to be shipped to the regional offices on October 7. Materials to be sent include the following:

1. Control Form
2. All materials that were used to administer each of the questionnaires
3. The questionnaire/booklets **(even if they are not completed)**:
 - Ages and Stages Questionnaires
 - Parent Questionnaires
 - MacArthur Short Form Vocabulary Checklists
 - WPPSI-R Block Design Questionnaires
 - Who Am I? Questionnaires
 - Number Knowledge Questionnaires
 - ESI-R Questionnaires
 - Raven's CPM Questionnaires
 - Interviewer's Observation Questionnaires

The questionnaire/booklets must first be batched before sending to the regional office. All of the booklets are to be grouped by household. Make sure that the number of booklets being sent for each questionnaire is equal to the number of booklets that were originally given to you, these numbers are recorded on your Control Form. The Interviewer's Manual may be disposed of.

Notes

APPENDIX A

Control Form

National Longitudinal Survey of Children and Youth
Enquête Longitudinale Nationale sur les enfants et les jeunes
Understanding early years/Comprendre la petite enfance

Office ID/Bureau Régional: 18
Interviewer:
Page: 4/16

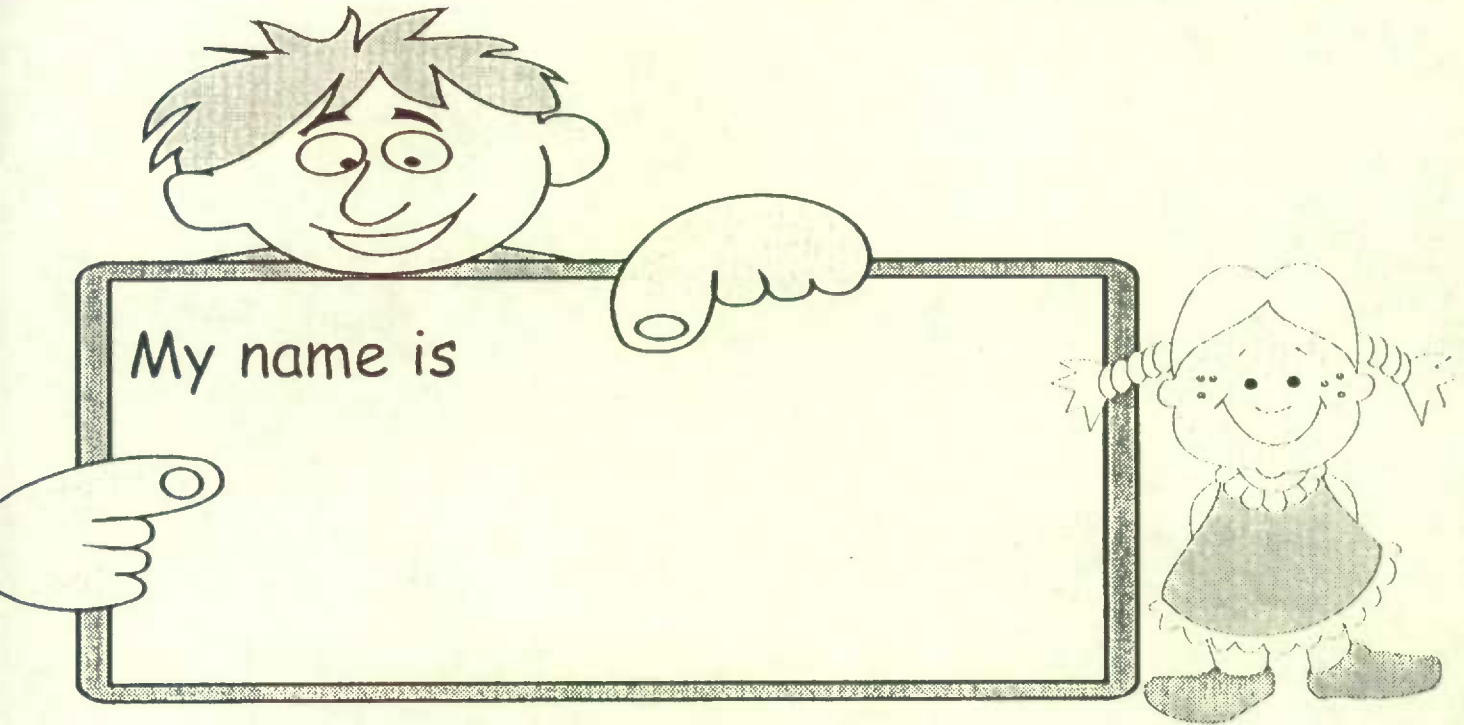
Booklet/	1: 8	Booklet/	6: 0
Livret	2: 7	Livret	7: 16
	3: 8		8: 6
	4: 7		9: 1
	5: 3		10: 15

PERSONID:	Block/bloc: 5	Booklet Order/ Ordre des livrets 7,1,3,10	Comments/Commentaires
Parent:		Status Code État	
		<input type="radio"/> 000 Comp. <input type="radio"/> 001 Part. <input type="radio"/> 030 Ref. <input type="radio"/> 034 No/pas de contact <input type="radio"/> 018 Void <input type="radio"/> 000 Other/autre NR	
Selected child/Enfant choisi:			
DOB (dd/mm/yyyy)/Date de naissance(jj/mm/aaaa):			
Age in months/Âge en mois:			

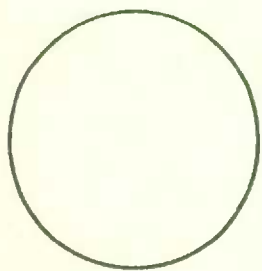
APPENDIX B

Who Am I? Questionnaire - Booklet 1

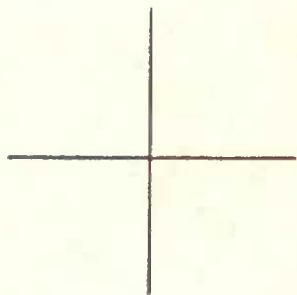
Who am I?



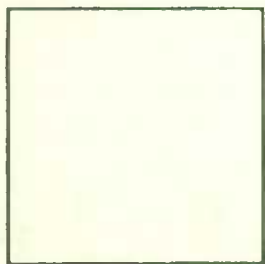
I can draw a circle . . .



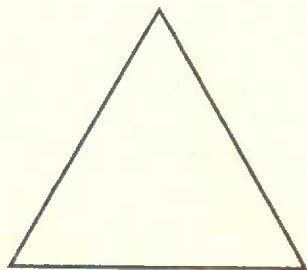
and a cross . . .



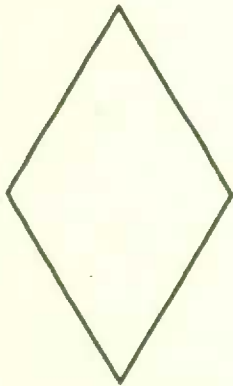
and a square . . .



and a triangle . . .



and a diamond.



I can write numbers . . .



and letters . . .



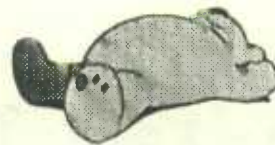
and words . . .



and a sentence.



This is a picture of me.



NATIONAL LONGITUDINAL SURVEY OF CHILDREN AND YOUTH CANADA

Understanding the Early Years

Child's First Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Assignment ID:

--	--	--	--	--

Sample ID:

					-		-		-		-		
--	--	--	--	--	---	--	---	--	---	--	---	--	--

Start time:

		:		
--	--	---	--	--

End time

		:		
--	--	---	--	--



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APPENDIX C

Number Knowledge Questionnaire - Booklet 2



National Longitudinal Survey of Children and Youth

Understanding the Early Years

Booklet 2



Number Knowledge Questionnaire



Interviewer Assignment #

Person ID

Child's Last Name

Child's First Name

Child's Date of Birth

YYYY --- MM --- DD

Child's Age in Months

Confidential when completed

Version française au verso.

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

FOR OFFICE USE ONLY

Total Points Awarded to the Child

BOOKLET FINAL STATUS CODE

- 000 ☐ Complete
- 001 ☐ Partial
- 034 ☐ No Contact
- 030 ☐ Refusal by Parent
- 031 ☐ Refusal by the Child
- 018 ☐ Out of Scope
- 099 ☐ Other NR (specify)

Comments:



READ TO THE SELECTED CHILD

I am going to ask you about numbers and what you know about numbers. The questions will be easy at first but they will get harder and harder. You may not know all the answers. Take your time when you answer the questions and tell me what you really think.

PLEASE INDICATE START TIME (24 HOUR CLOCK)

Example: 6:15 p.m. = 18:15

		:		
--	--	---	--	--

LEVEL 0

Check
circle
to
award
point

0.1 Count from one to ten for me if you can.

- ¹ ☐ Yes
⁰ ☐ No
² ☐ Don't Know

⁸ ☐

*Place **25** white chips on a table in front of yourself.*

0.2a Do I have a lot or a little?

- ¹ ☐ A lot
⁰ ☐ A little
² ☐ Don't Know

*Place **one** white chip on the table in front of the child.*

0.2b Do you have a lot or a little?

- ⁰ ☐ A lot
¹ ☐ A little
² ☐ Don't Know

⁸ ☐

LEVEL 0

Place the remaining **24** chips on the table in front of the child.

0.3a Do you have a lot or a little?

- ¹ ☐ A lot
⁰ ☐ A little
² ☐ Don't Know

Remove all the chips but **one**.

0.3b Do you have a lot or a little?

- ⁰ ☐ A lot
¹ ☐ A little
² ☐ Don't Know

⁸ ☐

Place two piles of white chips in front of the child, **five** on the **left** and **two** on the **right**. The child may point to a pile or answer verbally.

0.4a Which pile has more?

- ¹ ☐ The pile with five chips
⁰ ☐ The pile with two chips
² ☐ Don't Know

Place two piles of white chips in front of the child, **three** on the **left** and **seven** on the **right**. The child may point to a pile or answer verbally.

0.4b Which pile has more?

- ⁰ ☐ The pile with three chips
¹ ☐ The pile with seven chips
² ☐ Don't Know

⁸ ☐

LEVEL 0

Place two piles of white chips in front of the child, **two** on the **left** and **six** on the **right**. The child may point to a pile or answer verbally.

0.5a This time I'm going to ask you which one is less. Which pile has less?

- ¹ ☐ The pile with two chips
⁰ ☐ The pile with six chips
² ☐ Don't Know

Place two groups of white chips in front of the child, **eight** on the **left** and **three** on the **right**. The child may point to a pile or answer verbally.

0.5b Which pile has less?

- ⁰ ☐ The pile with eight chips
¹ ☐ The pile with three chips
² ☐ Don't Know

⁸ ☐

0.6 I'm going to show you some red and blue chips.

Place **three red** chips and **four blue** chips mixed together on the table in front of the child.

Count just the blue chips and tell me how many blue chips there are.

- ¹ ☐ Child counted four blue chips
⁰ ☐ Child did not count four blue chips

⁸ ☐

Here are some circles and triangles.

Place **eight circles** and **seven triangles** mixed together on the table in front of the child.

0.7 Count just the triangles and tell me how many triangles there are.

- ¹ ☐ Child counted seven triangles
⁰ ☐ Child did not count seven triangles

⁸ ☐

LEVEL 0

0.8 I'm going to give you two chips.

Place **two** white chips on the table in front of the child.

Now I'm going to give you one more.

Place **one more** white chip on the table in front of the child.

How many chips do you have now?

- ¹ ☐ Child counted three chips
⁰ ☐ Child did not count three chips

⁸ ☐

Count the total points in Level 0 and indicate in the space provided below. Correct answers are identified by a "1" in superscript next to the check box (¹ ☐). Reminder: two part questions are scored as a pass only if both parts (a and b) are answered correctly.

- ☐ If "Total Points for Level 0" = 4 or more, go to Level 1.
☐ If "Total Points for Level 0" = 3 or less, indicate the end time on page 9.

Total points for Level 0:

LEVEL 1

Check
circle
to
award
point

1.1	If you had four toys and someone gave you three more, how many toys would you have altogether?	¹ <input type="radio"/> Child answered seven toys ⁰ <input type="radio"/> Child did not answer seven toys	⁸ <input type="radio"/>
1.2a	What number comes right after seven?	¹ <input type="radio"/> Child answered eight ⁰ <input type="radio"/> Child did not answer eight	⁸ <input type="radio"/>
1.2b	What number comes two numbers after seven?	¹ <input type="radio"/> Child answered nine ⁰ <input type="radio"/> Child did not answer nine	
1.3a	Which is bigger: five or four?	¹ <input type="radio"/> Child answered five ⁰ <input type="radio"/> Child did not answer five	⁸ <input type="radio"/>
1.3b	Which is bigger: seven or nine?	¹ <input type="radio"/> Child answered nine ⁰ <input type="radio"/> Child did not answer nine	
1.4a	This time, I'm going to ask you about smaller numbers. Which is smaller: eight or six?	¹ <input type="radio"/> Child answered six ⁰ <input type="radio"/> Child did not answer six	⁸ <input type="radio"/>
1.4b	Which is smaller: five or seven?	¹ <input type="radio"/> Child answered five ⁰ <input type="radio"/> Child did not answer five	

LEVEL 1

<p><i>To the child, present the triangle with a number in each corner (5,6,2). Put the five at the top.</i></p>	<p>1 <input type="radio"/> Child answered six 0 <input type="radio"/> Child did not answer six</p>	<p>8 <input type="radio"/></p>
<p>1.5a Which number is closer to five: six or two or are they the same?</p> <p><i>If the child focuses on physical distance and after a hesitation says he can't be sure, say "closer in number not in distance."</i></p>		
<p><i>To the child, present the triangle with a number in each corner (7,4,9). Put the seven at the top.</i></p>	<p>1 <input type="radio"/> Child answered nine 0 <input type="radio"/> Child did not answer nine</p>	<p>8 <input type="radio"/></p>
<p>1.5b Which number is closer to seven: four or nine or are they the same?</p>		
<p>1.6 What number comes four numbers after two?</p>	<p>1 <input type="radio"/> Child answered six 0 <input type="radio"/> Child did not answer six</p>	<p>8 <input type="radio"/></p>
<p>1.7 What number comes three numbers before five?</p>	<p>1 <input type="radio"/> Child answered two 0 <input type="radio"/> Child did not answer two</p>	<p>8 <input type="radio"/></p>

LEVEL 1

<p>1.8a See the numbers?</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <i>Present visual array - 8, 5, 2, 6 to the child for parts a) and b).</i> </div> <p>When you start counting from one, which of these numbers do you come to first?</p>	<p> <input type="radio"/> Child answered two <input type="radio"/> Child did not answer two </p>
<p>1.8b When you start counting from one, which of these numbers comes last?</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <i>Use the same array as above.</i> </div>	<p> <input type="radio"/> Child answered eight <input type="radio"/> Child did not answer eight </p> <p style="text-align: right;">8 <input type="radio"/></p>
<p>1.9a Now look at these numbers.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <i>Show visual array - 4, 9, 2, 7 to the child.</i> </div> <p>When you count backwards, which of these numbers comes first?</p>	<p> <input type="radio"/> Child answered nine <input type="radio"/> Child did not answer nine </p>
<p>1.9b When you count backwards, which of these numbers comes last?</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <i>Use the same array as above.</i> </div>	<p> <input type="radio"/> Child answered two <input type="radio"/> Child did not answer two </p> <p style="text-align: right;">8 <input type="radio"/></p>
<p>Count the total points in Level 1 and indicate in the space provided below. Correct answers are identified by a "1" in superscript next to the check box (¹ <input type="radio"/>). Reminder: two part questions are scored as a pass only if both parts (a and b) are answered correctly.</p> <p> <input type="radio"/> If "Total Points for Level 1" = 5 or more, go to Level 2. <input type="radio"/> If "Total Points for Level 1" = 4 or less, indicate the end time on page 9. </p> <p style="text-align: center;">Total points for Level 1:</p> <p style="text-align: center;">_____</p>	

LEVEL 2

Check
circle
to
award
point

2.1	What number comes five numbers after 49?	¹ <input type="radio"/> Child answered 54 (also accept 55) ⁰ <input type="radio"/> Child did not answer 54 or 55	⁸ <input type="radio"/>
2.2	What number comes four numbers before 60?	¹ <input type="radio"/> Child answered 56 (also accept 55) ⁰ <input type="radio"/> Child did not answer 56 or 55	⁸ <input type="radio"/>
2.3a	Which is bigger: 69 or 71?	¹ <input type="radio"/> Child answered 71 ⁰ <input type="radio"/> Child did not answer 71	⁸ <input type="radio"/>
2.3b	Which is bigger: 32 or 28?	¹ <input type="radio"/> Child answered 32 ⁰ <input type="radio"/> Child did not answer 32	
2.4a	This time I'm going to ask you about smaller numbers. Which is smaller: 27 or 32?	¹ <input type="radio"/> Child answered 27 ⁰ <input type="radio"/> Child did not answer 27	⁸ <input type="radio"/>
2.4b	Which is smaller: 51 or 39?	¹ <input type="radio"/> Child answered 39 ⁰ <input type="radio"/> Child did not answer 39	

LEVEL 2

2.5a	Which number is closer to 21: 25 or 18? <div>Present triangle with numbers 21, 25 and 18 after asking the question.</div>	<div><div><input type="radio"/> Child answered 18</div><div><input type="radio"/> Child did not answer 18</div></div>	
2.5b	Which is closer to 28: 31 or 24? <div>Present triangle with numbers 28, 31 and 24 after asking the question.</div>	<div><div><input type="radio"/> Child answered 31</div><div><input type="radio"/> Child did not answer 31</div></div>	<div><div>8</div><div><input type="radio"/></div></div>
2.6	How many numbers are there between two and six?	<div><div><input type="radio"/> Child answered 3 (also accept 4)</div><div><input type="radio"/> Child did not answer 3 or 4</div></div>	<div><div>8</div><div><input type="radio"/></div></div>
2.7	How many numbers are there between seven and nine?	<div><div><input type="radio"/> Child answered 1 (also accept 2)</div><div><input type="radio"/> Child did not answer 1 or 2</div></div>	<div><div>8</div><div><input type="radio"/></div></div>
	<div>Present card - 12 54.</div>		
2.8	How much is 12 plus 54?	<div><div><input type="radio"/> Child answered 66</div><div><input type="radio"/> Child did not answer 66</div></div>	<div><div>8</div><div><input type="radio"/></div></div>
	<div>Present card - 47 21</div>		
2.9	How much is 47 take away 21?	<div><div><input type="radio"/> Child answered 26</div><div><input type="radio"/> Child did not answer 26</div></div>	<div><div>8</div><div><input type="radio"/></div></div>

LEVEL 2

Count the total points in Level 2 and indicate in the space provided below. Correct answers are identified by a "1" in superscript next to the check box (¹ ○). Reminder: two part questions are scored as a pass only if both parts (a and b) are answered correctly.

☐ Indicate the end time below.

Total points for Level 2:

PLEASE INDICATE END TIME (24 HOUR CLOCK)

Example: 6:25 p.m. = 18:25

		:		
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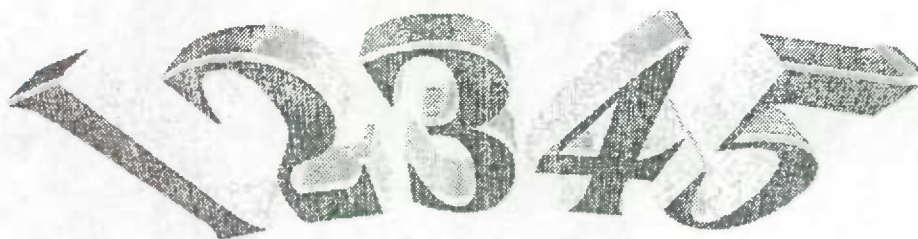
Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Livret 2



Questionnaire sur la connaissance des nombres



N° de tâche

N° de la personne

Nom de famille de l'enfant

Prénom de l'enfant

Date de naissance de l'enfant

Âge de l'enfant en mois

AAAA --- MM --- JJ

Confidentiel lorsque rempli.

English on the other side.

Renseignements recueillis en vertu de la Loi sur la statistique, Lois révisées du Canada, 1985, chapitre S19.

RÉSERVÉ À L'USAGE DU BUREAU

Nombre total de points obtenus par l'enfant

CODE D'ÉTAT FINAL DU LIVRET

- 000 ☐ Complet
001 ☐ Partiel
034 ☐ Pas de contact
030 ☐ Refus du parent
031 ☐ Refus de l'enfant
018 ☐ Hors cible
099 ☐ Autre NR (précisez)

Commentaires: _____

À LIRE À L'ENFANT

Je vais te poser des questions sur les nombres/chiffres et les quantités pour voir ce que tu en connais. Au début, les questions seront faciles mais elles deviendront de plus en plus difficiles. Je ne m'attends pas à ce que tu connaisses toutes les réponses, alors prends ton temps lorsque tu réponds aux questions et dis-moi ce que tu penses vraiment.

VEUILLEZ INSCRIRE L'HEURE DU DÉBUT (HORAIRE DE 24 HEURES)

Exemple : 6 h 15 p.m. = 18 h 15

		h		
--	--	---	--	--

NIVEAU 0

Cocher
le cercle
pour
allouer
le point

0.1 Peux-tu compter de un à dix pour moi?

- 1 ☐ Oui
0 ☐ Non
2 ☐ Ne sait pas

8 ☐

Placez **25** jetons blancs devant vous sur une table.

0.2a Est-ce que j'ai beaucoup ou peu de jetons?

- 1 ☐ Beaucoup
0 ☐ Peu
2 ☐ Ne sait pas

Placez **un** jeton blanc sur la table devant l'enfant.

0.2b As-tu beaucoup ou peu de jetons?

- 0 ☐ Beaucoup
1 ☐ Peu
2 ☐ Ne sait pas

8 ☐

NIVEAU 0

Placez les **24** autres jetons blancs sur la table devant l'enfant.

0.3a En as-tu beaucoup ou peu?

- ¹ ☐ Beaucoup
⁰ ☐ Peu
² ☐ Ne sait pas

Enlevez tous les jetons sauf **un**.

0.3b En as-tu beaucoup ou peu?

- ⁰ ☐ Beaucoup
¹ ☐ Peu
² ☐ Ne sait pas

⁸ ☐

Placez deux piles de jetons blancs devant l'enfant; une pile de **cinq** jetons à **gauche** et une pile de **deux** jetons à **droite**. L'enfant peut pointer du doigt une des piles ou répondre verbalement.

0.4a Quelle pile a le plus de jetons?

- ¹ ☐ La pile de cinq jetons
⁰ ☐ La pile de deux jetons
² ☐ Ne sait pas

Placez deux piles de jetons blancs devant l'enfant; une pile de **trois** jetons à **gauche** et une pile de **sept** jetons à **droite**. L'enfant peut pointer du doigt une des piles ou répondre verbalement.

0.4b Quelle pile a le plus de jetons?

- ⁰ ☐ La pile de trois jetons
¹ ☐ La pile de sept jetons
² ☐ Ne sait pas

⁸ ☐

NIVEAU 0

0.5a	<p>Placez deux piles de jetons blancs devant l'enfant; une pile de deux jetons à gauche et une pile de six jetons à droite. L'enfant peut pointer du doigt une des piles ou répondre verbalement.</p> <p>Je vais maintenant te demander de m'indiquer les piles qui ont le moins de jetons. Ici, quelle pile en a le moins?</p>	<p>¹ <input type="radio"/> La pile de deux jetons</p> <p>⁰ <input type="radio"/> La pile de six jetons</p> <p>² <input type="radio"/> Ne sait pas</p>	
0.5b	<p>Placez deux piles de jetons blancs devant l'enfant; une pile de huit jetons à gauche et une pile de trois jetons à droite. L'enfant peut pointer du doigt une des piles ou répondre verbalement.</p> <p>Quelle pile a le moins de jetons?</p>	<p>⁰ <input type="radio"/> La pile de huit jetons</p> <p>¹ <input type="radio"/> La pile de trois jetons</p> <p>² <input type="radio"/> Ne sait pas</p>	<p>⁸ <input type="radio"/></p>
0.6	<p>Je vais te montrer des jetons rouges et bleus.</p> <p>Placez et mélangez ensemble trois jetons rouges et quatre jetons bleus sur la table devant l'enfant.</p> <p>Compte seulement les jetons bleus et dis-moi combien il y en a.</p>	<p>¹ <input type="radio"/> L'enfant a compté quatre jetons bleus</p> <p>⁰ <input type="radio"/> L'enfant n'a pas compté quatre jetons bleus</p>	<p>⁸ <input type="radio"/></p>
0.7	<p>Voici des cercles et des triangles.</p> <p>Placez et mélangez ensemble huit cercles et sept triangles sur la table devant l'enfant.</p> <p>Compte seulement les triangles et dis-moi combien il y en a.</p>	<p>¹ <input type="radio"/> L'enfant a compté sept triangles</p> <p>⁰ <input type="radio"/> L'enfant n'a pas compté sept triangles</p>	<p>⁸ <input type="radio"/></p>

NIVEAU 0

0.8 Je vais te donner deux jetons.

Placez **deux** jetons blancs sur la table devant l'enfant.

Maintenant, je t'en donne un de plus.

Placez **un autre** jeton blanc sur la table devant l'enfant.

Combien as-tu de jetons maintenant?

- ¹ ☐ L'enfant a
compté trois
jetons
- ⁰ ☐ L'enfant n'a pas
compté trois
jetons

8 ☐

Comptez le nombre total de points du niveau 0 et indiquez-le dans l'espace prévu à cette fin. Les réponses exactes sont identifiées par le chiffre "1" à côté du cercle à cocher (¹ ☐). Rappel: les questions à deux parties sont enregistrées comme réussies seulement si les deux parties (a et b) ont été répondues correctement.

- ☐ Si le total des points de *niveau 0* = 4 ou plus, allez au niveau 1.
- ☐ Si le total des points de *niveau 0* = 3 ou moins, indiquez l'heure à la fin de l'interview à la page 10.

Total des points pour le niveau 0

NIVEAU 1

**Cocher
le
cercle
pour
allouer
le
point**

1.1	Si tu avais quatre jouets et que quelqu'un t'en offrait trois autres, combien aurais-tu de jouets en tout?	<p>¹ <input type="radio"/> L'enfant a répondu sept jouets</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu sept jouets</p>	8 <input type="radio"/>
1.2a	Quel nombre vient immédiatement après sept?	<p>¹ <input type="radio"/> L'enfant a répondu huit</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu huit</p>	8 <input type="radio"/>
1.2b	Quel est le deuxième nombre qui vient après sept?	<p>¹ <input type="radio"/> L'enfant a répondu neuf</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu neuf</p>	
1.3a	Quel est le nombre le plus grand : cinq ou quatre?	<p>¹ <input type="radio"/> L'enfant a répondu cinq</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu cinq</p>	8 <input type="radio"/>
1.3b	Quel est le nombre le plus grand : sept ou neuf?	<p>¹ <input type="radio"/> L'enfant a répondu neuf</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu neuf</p>	
1.4a	Je vais maintenant te demander quels sont les nombres les plus petits. Quel est le nombre le plus petit : huit ou six?	<p>¹ <input type="radio"/> L'enfant a répondu six</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu six</p>	8 <input type="radio"/>
1.4b	Quel est le nombre le plus petit : cinq ou sept?	<p>¹ <input type="radio"/> L'enfant a répondu cinq</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu cinq</p>	

NIVEAU 1

	<p>Présentez face à l'enfant le triangle avec les chiffres 5, 6 et 2, en plaçant le chiffre 5 dans le coin supérieur.</p>		
<p>1.5a</p>	<p>Quel nombre est le plus près du nombre cinq : six ou deux ou sont-ils tous les deux aussi près?</p> <p><i>Si l'enfant se concentre sur la distance physique et qu'après quelques hésitations, il dit ne pas être certain, dites-lui : « Le plus près en nombre, pas en distance ».</i></p>	<p>¹ <input type="radio"/> L'enfant a répondu six</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu six</p>	
	<p>Présentez face à l'enfant le triangle avec les chiffres 7, 4 et 9 en plaçant le chiffre 7 dans le coin supérieur.</p>		
<p>1.5b</p>	<p>Quel nombre est le plus près du nombre sept : quatre ou neuf ou sont-ils les deux aussi près?</p>	<p>¹ <input type="radio"/> L'enfant a répondu neuf</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu neuf</p>	<p>⁸ <input type="radio"/></p>
<p>1.6</p>	<p>Quel est le quatrième nombre qui vient après deux?</p>	<p>¹ <input type="radio"/> L'enfant a répondu six</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu six</p>	<p>⁸ <input type="radio"/></p>
<p>1.7</p>	<p>Quel est le troisième nombre qui vient avant cinq?</p>	<p>¹ <input type="radio"/> L'enfant a répondu deux</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu deux</p>	<p>⁸ <input type="radio"/></p>

NIVEAU 1

1.8a Regarde bien ces chiffres.

Présentez à l'enfant la carte avec les chiffres - 5, 8, 2, 6.

Lorsque tu commences à compter à partir de un, lequel de ces nombres vient en premier?

- ¹ ☐ L'enfant a répondu deux
⁰ ☐ L'enfant n'a pas répondu deux

1.8b Lorsque tu commences à compter à partir de un, lequel de ces nombres vient en dernier?

Utilisez la même carte que ci-haut.

- ¹ ☐ L'enfant a répondu huit
⁰ ☐ L'enfant n'a pas répondu huit

8 ☐

1.9a Maintenant, regarde bien ces chiffres.

Présentez à l'enfant la carte avec les chiffres - 4, 9, 2, 7.

Lorsque tu comptes à l'envers, quel nombre vient en premier?

- ¹ ☐ L'enfant a répondu neuf
⁰ ☐ L'enfant n'a pas répondu neuf

1.9b Lorsque tu comptes à l'envers, quel nombre vient en dernier?

Utilisez la même carte que ci-haut.

- ¹ ☐ L'enfant a répondu deux
⁰ ☐ L'enfant n'a pas répondu deux

8 ☐

Comptez le nombre total de points du niveau 1 et indiquez-le dans l'espace prévu à cette fin. Les réponses exactes sont identifiées par le chiffre "1" à côté du cercle à cocher (¹ ☐). Rappel : les questions à deux sections sont enregistrées comme réussies seulement si les deux parties (a et b) ont été répondues correctement.

- ☐ Si le total des points de *niveau 1* = 5 ou plus, allez au niveau 2.
☐ Si le total des points de *niveau 1* = 4 ou moins, indiquez l'heure à la fin de l'interview à la page 10.

Total des points pour le niveau 1

NIVEAU 2

Coche
le cercle
pour
allo
le p

2.1	Quel est le cinquième nombre qui vient après 49?	<p>¹ <input type="radio"/> L'enfant a répondu 54 (acceptez aussi 55)</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 54 ou 55</p>	⁸ <input type="radio"/>
2.2	Quel est le quatrième nombre avant 60?	<p>¹ <input type="radio"/> L'enfant a répondu 56 (acceptez aussi 55)</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 56 ou 55</p>	⁸ <input type="radio"/>
2.3a	Quel est le nombre le plus grand : 69 ou 71?	<p>¹ <input type="radio"/> L'enfant a répondu 71</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 71</p>	⁸ <input type="radio"/>
2.3b	Quel est le nombre le plus grand : 32 ou 28?	<p>¹ <input type="radio"/> L'enfant a répondu 32</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 32</p>	
2.4a	Maintenant, je vais te demander quel est le nombre le plus petit. Quel est le nombre le plus petit : 27 ou 32?	<p>¹ <input type="radio"/> L'enfant a répondu 27</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 27</p>	⁸ <input type="radio"/>
2.4b	Quel est le nombre le plus petit : 51 ou 39?	<p>¹ <input type="radio"/> L'enfant a répondu 39</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 39</p>	

NIVEAU 2

2.5a	<p>Quel nombre est le plus près de 21 : 25 ou 18?</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <i>Présentez le triangle avec les chiffres 21, 25, 18 à l'enfant après lui avoir posé la question.</i> </div>	<p>¹ <input type="radio"/> L'enfant a répondu 18</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 18</p>	
2.5b	<p>Quel nombre est le plus près de 28 : 31 ou 24?</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <i>Présentez le triangle avec les chiffres 28, 31, 34 à l'enfant après lui avoir posé la question.</i> </div>	<p>¹ <input type="radio"/> L'enfant a répondu 31</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 31</p>	<p>⁸ <input type="radio"/></p>
2.6	<p>Combien de nombres y a-t-il entre deux et six?</p>	<p>¹ <input type="radio"/> L'enfant a répondu 3 (acceptez aussi 4)</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 3 ou 4</p>	<p>⁸ <input type="radio"/></p>
2.7	<p>Combien de nombres y a-t-il entre sept et neuf?</p>	<p>¹ <input type="radio"/> L'enfant a répondu 1 (acceptez aussi 2)</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 1 ou 2</p>	<p>⁸ <input type="radio"/></p>
2.8	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <i>Présentez à l'enfant la carte 12 54.</i> </div> <p>Combien font 12 plus 54?</p>	<p>¹ <input type="radio"/> L'enfant a répondu 66</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 66</p>	<p>⁸ <input type="radio"/></p>
2.9	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <i>Présentez à l'enfant la carte 47 21</i> </div> <p>Combien font 47 moins 21?</p>	<p>¹ <input type="radio"/> L'enfant a répondu 26</p> <p>⁰ <input type="radio"/> L'enfant n'a pas répondu 26</p>	<p>⁸ <input type="radio"/></p>

NIVEAU 2

Comptez le nombre total de points du niveau 2 et indiquez-le dans l'espace prévu à cette fin.
Les réponses exactes sont identifiées par le chiffre "1" à côté du cercle à cocher (1 ○).
Rappel : les questions à deux parties sont enregistrées comme réussies seulement si les deux parties (a et b) ont été répondues correctement.

- Indiquez l'heure à laquelle s'est terminé le questionnaire.

Total des points pour le niveau 2

VEUILLEZ INDIQUER L'HEURE DE LA FIN (HORAIRE DE 24 HEURES)

Exemple : 6 h 25 p.m. = 18 h 25

		h		
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APPENDIX D

WPPSI-R Bloc Design Questionnaire - Booklet 3



National Longitudinal Survey of Children and Youth

Understanding the Early Years

Booklet 4



ESI-R Questionnaire

Interviewer Assignment #	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Person ID	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/>	
Child's Last Name	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Child's First Name	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Child's Date of Birth	Age in Months
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
YYYY	-- MM -- DD

Confidential when completed.

Version française au verso.

Collected under the authority of the Statistics Act,
Revised Statutes of Canada, 1985, Chapter S19.

Total Score

<input type="text"/>	<input type="text"/>
----------------------	----------------------

BOOKLET FINAL STATUS CODE

- 000 ☐ Complete
- 001 ☐ Partial
- 034 ☐ No Contact
- 030 ☐ Refusal by Parent
- 031 ☐ Refusal by the Child
- 018 ☐ Out of Scope
- 099 ☐ Other NR (Specify)

Comments: _____

8-5300-339: 1999-08-17 STC/HLD-040-75020

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Statistics
Canada

Statistique
Canada

Canada

NOTE TO INTERVIEWER

Instructions for you are in italics. The text you will say to the child is printed in bold-face.

Some questions you will score as the child answers. Others will be scored in Head Office. When this is the case, the answer categories will be shaded and marked "For Office Use Only".

You will see numbers in square brackets next to the answer categories. These numbers are for use in Head Office.

*If child is between **36 and 53 months**, go to sub-questionnaire 1 – Pre-school on **page 3**.*

*If child is between **54 and 71 months**, go to sub-questionnaire 2 – Kindergarten on **page 19**.*

APPENDIX E

ESI-R Questionnaire - Booklet 4



Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Livret 3



Questionnaire WPPSI-R Modèles de blocs

Numéro de tâche	
<input type="text"/>	
Numéro de la personne	
<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>	
Nom de famille de l'enfant	
<input type="text"/>	
Prénom de l'enfant	
<input type="text"/>	
Date de naissance de l'enfant	Âge en mois
<input type="text"/>	<input type="text"/>
AAAA -- MM -- JJ	

Confidentiel une fois rempli.

English on reverse.

Renseignements recueillis en vertu de la Loi sur la
statistique, Lois revisées du Canada, 1985,
chapitre S19.

CODE D'ÉTAT FINAL DU LIVRET

- 000 ☐ Complet
001 ☐ Partiel
034 ☐ Pas de contact
030 ☐ Refus du parent
031 ☐ Refus de l'enfant
018 ☐ Hors cible
099 ☐ Autre NR (Précisez)

Commentaires:

8-5300-340: 10-08-1999 STC/HLD-040-75020

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Statistique
Canada

Statistics
Canada

Canada

VEUILLEZ INDIQUER L'HEURE DE DÉBUT (SELON LE FORMAT DE 24 HEURES)

Exemple: 6h15 p.m. = 18h15

		h		
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Modèles de blocs

Lorsque les deux tentatives de 3 modèles consécutifs sont échouées, mettre fin au test.

Pour les modèles 1 à 8, l'enfant travaille directement à partir de modèles que vous avez construit vous-mêmes. Les exemples utilisés pour présenter les modèles 1 à 8 se trouvent dans le questionnaire où les parties ombragées représentent les parties rouges des blocs. Les exemples pour les modèles 9 à 14 sont présentés à l'enfant en utilisant le livret "de stimulation".

Commencez à chronométrer chaque essai une fois que le dernier mot des instructions a été donné. Arrêtez de chronométrer lorsqu'il est évident que l'enfant a complété l'essai. Si l'enfant complète correctement le modèle après le temps permis, enregistrez l'essai comme échoué. Il est essentiel d'enregistrer précisément le temps utilisé par l'enfant après chaque essai sur la feuille de pointage.

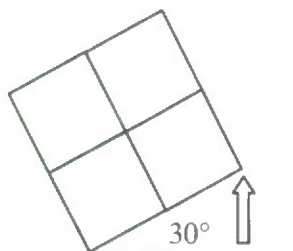
Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai et notez si l'enfant a réussi ou échoué chaque essai en encrant la lettre appropriée dans la colonne "Réussi - Échec".

Espaces vides

Si l'enfant positionne les blocs correctement, mais laisse des espaces (1/16" ou plus larges) entre les blocs, demandez-lui: "Est-ce correct?". Enregistrez le modèle comme réussi même si l'enfant corrige ou non les espaces et montrez-lui comment corriger les espaces vides avant de passer au modèle suivant.

Rotation et renversement de modèles

La rotation d'un modèle n'est pas pénalisée à moins que ce soit de 30° ou plus. Montrez-lui la position adéquate pour les deux premières rotations seulement. Si le modèle de l'enfant est complètement inversé, enregistrez le résultat comme un échec.



Pour les modèles 1 à 5, utilisez les blocs avec du rouge d'un côté et du blanc de l'autre côté.

Maintenant je vais te montrer quelques modèles faits avec des blocs. Ensuite, je veux que tu fasses la même chose. C'est un peu comme un casse-tête.

Modèle 1

Placez l'écran à 8 à 10 pouces de l'enfant. Derrière l'écran, agencez un groupe de deux blocs comme sur l'illustration ci-après :

Enfant



Vous

Enlevez l'écran et montrez le modèle à l'enfant. En laissant le modèle en place, prenez deux blocs semblables dans vos mains et dites-lui :

Tu vois les blocs? Ils sont rouges d'un côté et blancs de l'autre.

Montrez les deux côtés des blocs puis placez-les devant l'enfant. Assurez-vous que les blocs ne sont pas en ligne droite et qu'un côté rouge et un côté blanc sont visibles. Puis dites :

Je vais les mettre ensemble comme ceci. Regarde-moi.

Copiez LENTEMENT le modèle en expliquant chaque étape et en disant :

Premièrement, je mets un bloc blanc ici puis un autre identique juste à côté. Tu vois? Maintenant ils se ressemblent (pointez vers les deux constructions).

Après avoir fait une petite pause, défaites le deuxième agencement, en laissant le modèle en place. Assurez-vous que les blocs utilisés dans le deuxième agencement sont présentés avec un côté rouge et un côté blanc.

Dites :

Maintenant tu vas construire un modèle comme celui-ci. Arrêtes-toi quand tu en auras un qui ressemblera exactement à celui-ci (*pointez vers le modèle*). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 30 secondes.

Si l'enfant réussit à compléter le modèle correctement dans les délais, passez au modèle 2.

Si l'enfant échoue à réaliser le modèle dans les délais, ou s'il ne place pas les blocs de la bonne façon, dites-lui :

Non, il devrait plutôt ressembler à ceci,

et montrez-lui en agencant correctement les blocs et en lui expliquant chaque étape. Puis, en laissant le modèle en place, disposez les blocs utilisés dans le deuxième agencement avec un côté rouge et un côté blanc, et dites :

Maintenant, fais-le toi-même, vas-y.

Commencez à chronométrer et laissez 30 secondes pour ce deuxième essai.

➤ **LE DÉLAI D'EXÉCUTION EST DE 30 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèle 2

Que l'enfant réussisse ou échoue à reproduire le premier modèle, à l'aide de deux des blocs, construisez le modèle derrière l'écran comme ceci :

Enfant



Vous

Enlevez l'écran, pour exposer le modèle à l'enfant. Placez les deux blocs qui restent devant l'enfant (les blocs ne devraient pas être en ligne droite, il faudrait que l'enfant puisse voir deux côtés rouges). En laissant le modèle en place, prenez deux blocs semblables dans vos mains et dites-lui :

Tu vois les blocs? Ils sont rouges d'un côté et blancs de l'autre.

Montrez les deux côtés des blocs puis placez-les devant l'enfant. Assurez-vous que les blocs ne sont pas en ligne droite et qu'un côté rouge et un côté blanc sont visibles. Puis dites :

Je vais les mettre ensemble comme ceci (pointez vers le modèle). Regarde-moi.

Copiez LENTEMENT le modèle en expliquant chaque étape et en disant :

**Premièrement, je mets un bloc rouge ici, puis un blanc juste à côté. Tu vois?
Maintenant ils se ressemblent (pointez vers les deux constructions).**

Après avoir fait une petite pause, défaites le deuxième agencement, en laissant le modèle en place. Assurez-vous que les blocs utilisés dans le deuxième agencement sont présentés avec un côté rouge et un côté blanc. Dites :

Maintenant tu vas construire un modèle comme celui-ci. Arrêtes-toi lorsque tu en auras un qui ressemblera exactement à celui-ci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 30 secondes.

Si l'enfant réussit à compléter le modèle correctement dans les délais, passez au modèle 3.

Si l'enfant échoue à réaliser le modèle dans les délais, ou s'il ne place pas les blocs de la bonne façon, dites-lui :

Non, il devrait plutôt ressembler à ceci,

et montrez-lui en agençant correctement les blocs et en lui expliquant chaque étape. Puis, en laissant le modèle en place, disposez les blocs utilisés dans le deuxième agencement avec un côté rouge et un côté blanc, et dites:

Maintenant, fais-le toi-même, vas-y.

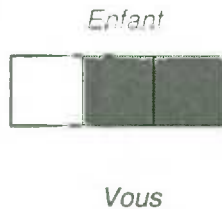
Commencez à chronométrer et laissez 30 secondes pour ce deuxième essai.

➤ **LE DÉLAI D'EXÉCUTION EST DE 30 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèle 3

Que l'enfant réussisse ou échoue à reproduire le modèle numéro 2, à l'aide de trois des blocs, montez le modèle derrière l'écran comme ceci.



Placez ici et là les trois blocs qui restent en face de l'enfant de manière à ce qu'un côté rouge et deux côté blanc soient visibles. En laissant le modèle en place, prenez deux blocs semblables dans vos mains et dites-lui :

Tu vois les blocs? Ils sont rouges d'un côté et blancs de l'autre.

Montrez les deux côtés des blocs puis placez-les devant l'enfant. Assurez-vous que les blocs ne sont pas en ligne droite et qu'un côté rouge et un côté blanc sont visibles. Puis dites :

Je vais les mettre ensemble comme ceci (pointez vers le modèle). Regarde-moi.

Copiez LENTEMENT le modèle en expliquant chaque étape et en disant :

D'abord, je place un bloc blanc ici, puis un rouge juste à côté, puis un autre rouge juste à côté de celui-ci. Tu vois? Maintenant ils se ressemblent (pointez vers les deux constructions).

Après avoir fait une petite pause, défaites le deuxième agencement, en laissant le modèle en place. Assurez-vous que les blocs utilisés dans le deuxième agencement sont présentés avec un côté rouge et un côté blanc. Dites :

Maintenant tu vas construire un modèle comme celui-ci. Arrêtes-toi lorsque tu en auras un qui ressemblera exactement à celui-ci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 30 secondes.

Si l'enfant réussit à compléter le modèle correctement dans les délais, passez au modèle 4.

Si l'enfant échoue à réaliser le modèle dans les délais, ou s'il ne place pas les blocs de la bonne façon, dites-lui :

Non, il devrait plutôt ressembler à ceci,

et montrez-lui en agencant correctement les blocs et en lui expliquant chaque étape. Puis, en laissant le modèle en place, disposez les blocs utilisés dans le deuxième agencement avec un côté rouge et un côté blanc, et dites :

Maintenant, fais-le toi-même, vas-y.

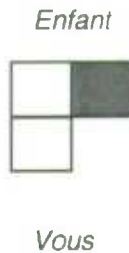
Commencez à chronométrer et laissez 30 secondes pour ce deuxième essai.

➤ **LE DÉLAI D'EXÉCUTION EST DE 30 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèle 4

Sans que l'enfant puisse voir, construisez le modèle illustré ci-après :



Montrez-le à l'enfant. Prenez les trois blocs qui restent, et dites-lui :

Cette fois-ci, certains blocs doivent aller en haut et d'autres en bas. (pointez vers le modèle). Regarde-moi bien.

Assemblez les blocs, puis dites :

Tu vois, ils se ressemblent tous les deux (pointez le modèle puis l'agencement que vous venez de réaliser).

En laissant le modèle en place, réarrangez les blocs de démonstration selon l'ordre de présentation (assurez-vous que les blocs ne sont pas en ligne droite; deux côtés rouges et un côté blanc doivent être visibles). Dites :

Maintenant, construis celui qui ressemble à celui-ci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 30 secondes.

Si l'enfant réussit à construire le modèle correctement dans les délais, passez au modèle 5.

Si l'enfant échoue, donnez-lui une deuxième chance en lui faisant d'abord une démonstration.

➤ **LE DÉLAI D'EXÉCUTION EST DE 30 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèle 5

Sans que l'enfant puisse voir, construisez le modèle illustré ci-après :



Montrez-le à l'enfant. Prenez les trois blocs qui restent, et dites-lui :

Cette fois-ci, certains blocs doivent aller en haut et d'autres en bas. (pointez vers le modèle). Regarde-moi bien.

Assemblez les blocs, puis dites :

Tu vois, ils se ressemblent tous les deux (pointez vers le modèle puis l'agencement que vous venez de réaliser).

En laissant le modèle en place, réarrangez les blocs de démonstration selon l'ordre de présentation (assurez-vous que les blocs ne sont pas en ligne droite; deux côtés rouges et un côté blanc doivent être visibles). Dites :

Et maintenant, construis celui qui ressemble à celui-ci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 30 secondes.

Si l'enfant réussit à construire le modèle correctement dans les délais, passez au modèle 6.

Si l'enfant échoue, donnez-lui une deuxième chance en lui faisant d'abord une démonstration.

➤ LE DÉLAI D'EXÉCUTION EST DE 30 SECONDES POUR CHAQUE ESSAI.

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Mettez de côté les blocs d'une seule couleur.

Pour les modèles 6 à 14, utilisez les huit blocs qui sont rouges d'un côté et moitié rouge et moitié blanc de l'autre.

Modèle 6

Prenez deux des blocs et, derrière l'écran, construisez le modèle illustré :

Enfant



Vous

Enlevez l'écran et montrez le modèle à l'enfant. Puis, à l'aide des deux autres blocs, montrez les deux faces des blocs en disant :

Voici deux blocs; chacun est rouge d'un côté (faites une pause et insistez) et rouge et blanc de l'autre côté. Je vais mettre ces blocs ensemble pour faire un modèle qui ressemble juste à celui-ci (pointez vers le modèle). Regarde-moi bien.

Assemblez les blocs, en expliquant chaque étape et en disant :

D'abord, je place un rouge et blanc ici, puis un autre rouge et blanc juste à côté. Tu vois, ils se ressemblent (pointez vers le modèle, puis vers celui que vous venez de réaliser).

En laissant le modèle en place, réarrangez les blocs de démonstration dans l'ordre de présentation (assurez-vous que les blocs ne sont pas en ligne droite, un côté rouge et un côté moitié rouge et moitié blanc doivent être visibles). Dites :

Maintenant tu peux construire ceci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 30 secondes.

Si l'enfant réussit cet essai, passez au modèle numéro 7.

Si l'enfant échoue à compléter le modèle dans les délais, ou s'il ne réussit pas à placer les blocs correctement, dites :

Regarde-moi encore une fois.

Faites une démonstration pour la deuxième fois en expliquant chaque étape. Puis, en laissant le modèle en place, réarrangez les blocs de démonstration dans leur ordre de présentation (assurez-vous que les blocs ne sont pas en ligne droite, un côté rouge et un côté moitié rouge et moitié blanc doivent être visibles). Dites :

Maintenant tu vas en construire un comme celui-ci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer.

➤ **LE DÉLAI D'EXÉCUTION EST DE 30 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèle 7

Utilisez quatre blocs. Sans permettre à l'enfant de regarder, construisez ce modèle :

Enfant



Vous

Montrez le modèle à l'enfant. Prenez les quatre blocs qui restent et éparpillez-les devant l'enfant. Aucun arrangement particulier n'est nécessaire, mais prenez soin de faire en sorte que tous les blocs montrent le même côté lorsqu'ils sont présentés. Dites :

Maintenant nous avons plus de blocs qui sont rouges d'un côté et rouges et blancs de l'autre côté. Je vais mettre les blocs ensemble pour qu'ils ressemblent à ceci (pointez vers le modèle). Regarde-moi.

Après avoir complété la démonstration, laissez le modèle en place, puis éparpillez les blocs à partir du modèle que vous venez de réaliser, placez-les en désordre devant l'enfant et dites :

Maintenant tu peux construire ceci (pointez vers le modèle). Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer.

Si l'enfant réussit cet essai, passez au modèle 8.

Si l'enfant échoue, répétez la démonstration et laissez-lui faire un deuxième essai en disant :

Maintenant, essaie-le à nouveau. Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

➤ **LE DÉLAI D'EXÉCUTION EST DE 45 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèle 8

Derrière l'écran, construisez un modèle de ce dessin :

Enfant



Vous

Montrez-le à l'enfant. Placez les blocs qui restent en désordre devant l'enfant. Cette fois, sans faire de démonstration, dites :

**Maintenant tu vas en construire un comme celui-ci (pointez vers le modèle).
Construis-le tout seul. Dis-le moi lorsque tu as terminé. Vas-y, tu peux y aller.**

Commencez à chronométrer et laissez-lui 1 minute et 15 secondes.

Si l'enfant échoue, faites une démonstration en donnant des explications. Puis, laissez le modèle en place, éparpillez les blocs de démonstration devant l'enfant et dites :

Maintenant, essaie-le à nouveau. Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer.

➤ **LE DÉLAI D'EXÉCUTION EST DE 1 MINUTE ET 15 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Pour les modèles 9 à 14, utilisez le livret "de stimulation" et quatre des blocs qui ont servi pour les modèles 6 à 8 (rouge d'un côté et moitié rouge et moitié blanc de l'autre).

Modèle 9

Présentez le modèle numéro 9 (placez le côté non-relié du livret "de stimulation" à 8 à 10 pouces de l'enfant) et dites :

Maintenant, j'aimerais voir si tu peux placer les blocs pour qu'ils ressemblent à l'image sur cette carte. Regarde-moi bien.

Placez les blocs ensemble, en indiquant par des gestes et par des paroles que vous suivez les modèles qui apparaissent sur la carte.

D'abord, je place un rouge ici, puis un autre rouge juste à côté. Ils ressemblent à cette partie de l'image (pointez vers la partie supérieure de l'image). Maintenant, je place un rouge et blanc ici, puis un autre rouge et blanc juste à côté. Maintenant, mon dessin est identique à l'image sur la carte (pointez vers l'image).

Après avoir complété la démonstration, éparpillez les blocs devant l'enfant et dites :

Est-ce que tu peux construire ceci? Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 1 minute et 15 secondes.

Si l'enfant échoue, faites une démonstration et laissez-lui faire un deuxième essai.

➤ **LE DÉLAI D'EXÉCUTION EST DE 1 MINUTE ET 15 SECONDES POUR CHAQUE ESSAI.**

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Modèles 10 à 14

Présentez les modèles dans le livret "de stimulation" et les blocs sans faire de démonstration et dites :

Place les blocs ensemble pour qu'ils ressemblent à ceci (pointez vers le modèle).
Dis-le moi lorsque tu as terminé. Vas-y, tu peux commencer.

Commencez à chronométrer et laissez-lui 1 minute et 15 secondes.

Si l'enfant échoue, faites une démonstration et laissez-lui faire un deuxième essai.

➤ LE DÉLAI D'EXÉCUTION EST DE 1 MINUTE ET 15 SECONDES POUR CHAQUE ESSAI.

Sur la feuille de pointage, notez le temps utilisé pour compléter chaque essai du modèle et notez si l'enfant a réussi ou échoué chaque essai en encerclant la lettre appropriée dans la colonne "Réussi - Échec".

Après le modèle 14, rangez le livret "de stimulation" et les blocs.

Merci. Tu as travaillé fort.

VEUILLEZ INDiquer L'HEURE DE FIN (SELON L'HORAIRE DE 24 HEURES)

Exemple: 6h30 p.m. = 18h30

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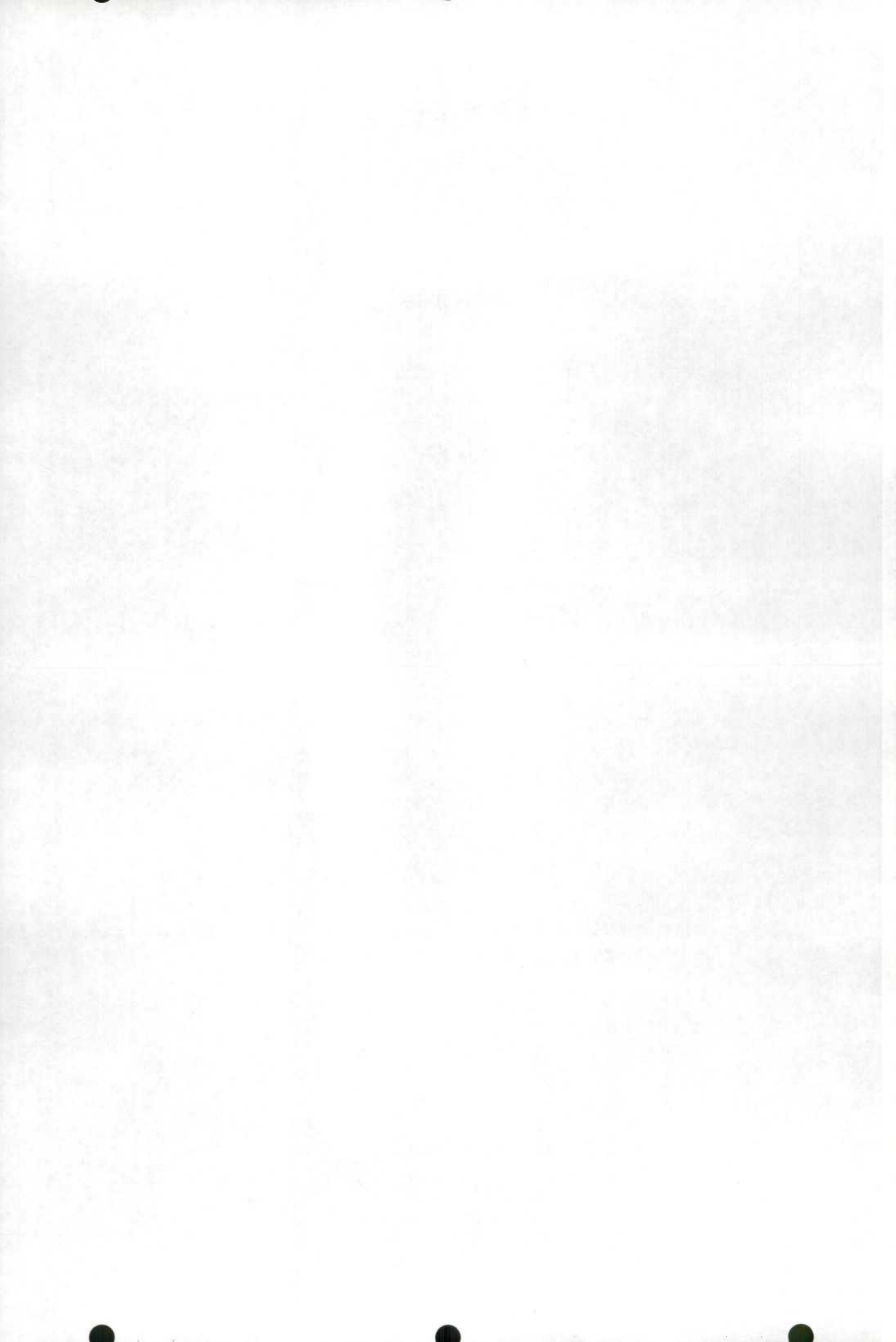
Note: N'oubliez pas d'indiquer le code d'état final sur la page couverture.

FEUILLE DE POINTAGE

À l'usage du bureau seulement.

Modèle	Essai	Temps limite	D / AD*	Temps	Réussi - Échec (Encerclez)		Pointage	
1	1	0:30	D		R	E	2	
	2	0:30	D		R	E	0	1
2	1	0:30	D		R	E	2	
	2	0:30	D		R	E	0	1
3	1	0:30	D		R	E	2	
	2	0:30	D		R	E	0	1
4	1	0:30	D		R	E	2	
	2	0:30	D		R	E	0	1
5	1	0:30	D		R	E	2	
	2	0:30	D		R	E	0	1
6	1	0:30	D		R	E	2	
	2	0:30	D		R	E	0	1
7	1	0:45	D		R	E	2	
	2	0:45	D		R	E	0	1
8	1	1:15	AD		R	E	2	3 4
	2	1:15	D		R	E	0	1
9	1	1:15	D		R	E	2	3 4
	2	1:15	D		R	E	0	1
10	1	1:15	AD		R	E	2	3 4
	2	1:15	D		R	E	0	1
11	1	1:15	AD		R	E	2	3 4
	2	1:15	D		R	E	0	1
12	1	1:15	AD		R	E	2	3 4
	2	1:15	D		R	E	0	1
13	1	1:15	AD		R	E	2	3 4
	2	1:15	D		R	E	0	1
14	1	1:15	AD		R	E	2	3 4
	2	1:15	D		R	E	0	1

* "D" signifie qu'il y a démonstration des essais; "AD" signifie qu'il n'y a aucune démonstration des essais.



Designs 10 to 14

Present the design in the Stimulus Booklet and the blocks without demonstration and say:

Put these together to make them look like this. (Point to the card.) Tell me when you are finished. Go ahead.

Start timing and allow 1 minute 15 seconds .

If the child fails, demonstrate and explain, and allow a second trial.

➤ TIME LIMIT: 1 MINUTE 15 SECONDS FOR EACH TRIAL.

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

After Design 14, put away the Stimulus Booklet and blocks.

Thank you. You have worked hard.

PLEASE INDICATE END TIME (24 HOURS CLOCK)

Example: 6:30 p.m. = 18:30 :

Note: Don't forget to indicate the final status code on the cover page.

SCORING SHEET

For office use only.

Design		Trial	Time limit	D / ND*	Time	Pass - Fail (Circle one)		Score		
1		1	0:30	D		P	F	2		
		2	0:30	D		P	F	0	1	
2		1	0:30	D		P	F	2		
		2	0:30	D		P	F	0	1	
3		1	0:30	D		P	F	2		
		2	0:30	D		P	F	0	1	
4		1	0:30	D		P	F	2		
		2	0:30	D		P	F	0	1	
5		1	0:30	D		P	F	2		
		2	0:30	D		P	F	0	1	
6		1	0:30	D		P	F	2		
		2	0:30	D		P	F	0	1	
7		1	0:45	D		P	F	2		
		2	0:45	D		P	F	0	1	
8		1	1:15	ND		P	F	2	3	4
		2	1:15	D		P	F	0	1	
9		1	1:15	D		P	F	2	3	4
		2	1:15	D		P	F	0	1	
10		1	1:15	ND		P	F	2	3	4
		2	1:15	D		P	F	0	1	
11		1	1:15	ND		P	F	2	3	4
		2	1:15	D		P	F	0	1	
12		1	1:15	ND		P	F	2	3	4
		2	1:15	D		P	F	0	1	
13		1	1:15	ND		P	F	2	3	4
		2	1:15	D		P	F	0	1	
14		1	1:15	ND		P	F	2	3	4
		2	1:15	D		P	F	0	1	

* "D" means demonstration of trial; "ND" means no demonstration of trial.



WPPSI-R Block Design Questionnaire

Interviewer Assignment #										
Person ID										
Child's Last Name										
Child's First Name										
Child's Date of Birth					Age in Months					
YYYY					--		MM		-- DD	

Confidential when completed.

Version française au verso.

Collected under the authority of the Statistics Act,
Revised Statutes of Canada, 1985, Chapter S19.

BOOKLET FINAL STATUS CODE

- 000 ☐ Complete
- 001 ☐ Partial
- 034 ☐ No Contact
- 030 ☐ Refusal by Parent
- 031 ☐ Refusal by the Child
- 018 ☐ Out of Scope
- 099 ☐ Other NR (Specify)

Comments:

8-5300-340 1999-08-10 STC/HLD-040-75020

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PLEASE INDICATE START TIME (24 HOURS CLOCK)

Example: 6:15 p.m. = 18:15

		:		
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Block Design

Discontinue after failure of both trials of 3 consecutive designs.

On Designs 1 to 8, the child works directly from block models that you construct. The patterns used in setting up models for Design 1-8 are shown on the Questionnaire, where shaded areas represent red. The patterns for Designs 9-14 are presented to the child using the Stimulus Booklet.

Begin timing for each trial when the last word of the directions is given. Stop timing when the child is obviously through. If the child correctly completes the design after the time limit, score the trial as failed. It is essential to accurately record the child's performance time after each trial on the scoring sheet.

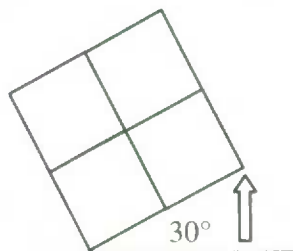
On the scoring sheet, note the time taken to complete each trial and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Gaps

If the child positions the blocks correctly, but leaves definite gaps (1/16" or larger) between them ask: "Is that right?". Score the design as correct whether the child closes the gap or not and demonstrate the proper closure before proceeding to the next design.

Rotation and Reversal of Designs

Rotation of a design is not penalized unless it is 30 degrees or more. Demonstrate the correct position for the first two rotations only. If a child's design is a complete reversal of the model or picture, it is scored as a failure.



For designs 1 to 5, use blocks with red on one side and white on the other side.

Now I am going to show you some designs made with blocks. Then I want you to make some the same. It is a bit like a puzzle.

Design 1

Position the screen 8-10 inches from the child. Behind the screen, arrange a set of two blocks as shown here:

Child



You

Remove the screen and show the model to the child. Leaving the model in place, take two similar blocks in hand and say:

You see the blocks? They are red on one side and white on the other.

Show both sides of the blocks. Then place them in front of the child. Be sure that the blocks are not in a straight line, and that one red side and one white side show. Then say:

I'm going to put them together like this. Watch me.

SLOWLY copy the model, explaining each step by saying:

First, I put a white one here and then another white one next to it. See? Now they look the same. (Point to both constructions.)

After a brief pause, scramble this second arrangement, leaving the model in place. Make sure that the blocks used in the second arrangement are presented with one red side and one white side showing.

Say:

Now you make one just like this. Stop when you have one that looks just like this.
(Point to the model.) Tell me when you finish. Go ahead.

Start timing and allow 30 seconds.

If the child completes the design correctly within the time limit, go to Design 2.

If the child fails to complete the design within the time limit, or arranges the blocks incorrectly, say:

No, it should look like this.

and illustrate by correctly arranging the blocks, explaining each step. Then, leaving the model in place, scramble the blocks used in the second arrangement with one red side and one white side showing, and say:

Now do it by yourself. Go ahead.

Start timing and allow 30 seconds for the second trial.

➤ **TIME LIMIT: 30 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Design 2

Whether the child passes or fails Design 1, using two of the blocks, construct the model as shown here behind the screen:



Remove the screen, exposing the model to the child. Place two of the remaining blocks in front of the child (The blocks should not be in a straight line; two red sides should show.) Leaving the model in place, take two similar blocks in hand and say:

You see the blocks? They are red on one side and white on the other.

Show both sides of the blocks. Then place them in front of the child. Be sure that the blocks are not in a straight line, and that one red side and one white side show. Then say:

I'm going to put them together like this. (Point to the model.) Watch me.

SLOWLY copy the model, explaining each step by saying:

First, I put a red one here and then a white one next to it. See? Now they look the same. (Point to both constructions.)

After a brief pause, scramble this second arrangement, leaving the model in place. Make sure that the blocks used in the second arrangement are presented with one red side and one white side showing. Say:

Now you make one just like this. Stop when you have one that looks just like this. (Point to the model.) Tell me when you finish. Go ahead.

Start timing and allow 30 seconds.

If the child completes the design correctly within the time limit, go to Design 3.

If the child fails to complete the design within the time limit, or arranges the blocks incorrectly, say:

No, it should look like this,

and illustrate by correctly arranging the blocks, explaining each step. Then, leaving the model in place, scramble the blocks used in the second arrangement with one red side and one white side showing, and say:

Now do it by yourself. Go ahead.

Start timing and allow 30 seconds for the second trial.

➤ **TIME LIMIT: 30 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Design 3

Whether the child passes or fails Design 2, using three of the blocks, set up the model as shown here behind the screen.

Child



You

Casually place the remaining three blocks in front of the child so that one red side and two white sides show. Leaving the model in place, take two similar blocks in hand and say:

You see the blocks? They are red on one side and white on the other.

Show both sides of the blocks. Then place them in front of the child. Be sure that the blocks are not in a straight line, and that one red side and one white side show. Then say:

I'm going to put them together like this. (Point to the model.) Watch me.

SLOWLY copy the model, explaining each step by saying:

First, I put a white one here and then a red one next to it, and then another red one next to that one. See? Now they look the same. (Point to both constructions.)

After a brief pause, scramble this second arrangement, leaving the model in place. Make sure that the blocks used in the second arrangement are presented with one red side and two white sides showing. Say:

Now you make one just like this. Stop when you have one that looks just like this. (Point to the model.) Tell me when you finish. Go ahead.

Start timing and allow 30 seconds.

If the child completes the design correctly within the time limit, go to Design 4.

If the child fails to complete the design within the time limit, or arranges the blocks incorrectly, say:

No, it should look like this,

and illustrate by correctly arranging the blocks, explaining each step. Then, leaving the model in place, scramble the blocks used in the second arrangement with one red side and one white side showing, and say:

Now do it by yourself. Go ahead.

Start timing and allow 30 seconds for the second trial.

➤ **TIME LIMIT: 30 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Design 4

Out of the child's sight, construct the model shown here:



Show it to the child. Taking the three remaining blocks, say:

This time some of the blocks go up and down. (Point to the model.) Watch me.

Assemble the blocks, then say:

You see, they both look the same. (Point to the model and to your arrangement.)

Leaving the model in place, rearrange the demonstration blocks into their presentation order. (Be sure that the blocks are not in a straight line; two red sides and one white side should show.) Say:

Now you make one that looks like this. (Point to the model.) Tell me when you are through. Go ahead.

Start timing and allow 30 seconds.

If the child completes the design correctly within the time limit, go to Design 5.

If the child fails the design, give the second trial, with a demonstration.

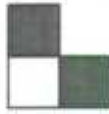
➤ **TIME LIMIT: 30 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Design 5

Out of the child's sight, construct the model shown here:

Child



You

Show it to the child. Taking the three remaining blocks, say:

This time some of the blocks go up and down. (Point to the model.) Watch me.

Assemble the blocks, then say:

You see, they both look the same. (Point to the model and to your arrangement.)

Leaving the model in place, rearrange the demonstration blocks into their presentation order. (Be sure that the blocks are not in a straight line; two red sides and one white side should show.) Say:

Now you make one that looks like this. (Point to the model.) Tell me when you are through. Go ahead.

Start timing and allow 30 seconds.

If the child completes the design correctly within the time limit, go to Design 6.

If the child fails the design, give the second trial, with a demonstration.

➤ **TIME LIMIT: 30 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Put away the solid colored blocks.

For Designs 6-14, use the eight blocks that are red on one side and half red and half white on the other.

Design 6

Take two of the blocks and behind the screen, construct the model shown:

Child



You

Remove the screen and show the model to the child. Then using the two other blocks, demonstrate both faces of the blocks, saying:

Here are two blocks; each is red on one side and (pause and stress) red and white on the other side. I am going to put the blocks together to make a design that looks just like this. (Point to the model.) Watch me.

Assemble the blocks, explaining each step by saying:

First I put a red and white one here and then I put another red and white one beside it. You see, they look the same now. (Point to the model and then to your own performance.)

Leaving the model in place, rearrange the demonstration blocks into their presentation order. (Be sure that the blocks are not in a straight line; one red side and one half red and half white side should show.) Say:

Now you make one just like this. (Point to the model.) Tell me when you are through. Go ahead.

Start timing and allow 30 seconds.

If the child passes this trial, go to Design 7.

If the child fails to complete the design within the time limit, or arranges the blocks incorrectly, say:

Watch me again.

Demonstrate a second time, explaining each step. Then, leaving the model in place, rearrange the demonstration blocks into the presentation order. (Be sure that the blocks are not in a straight line; one red side and one half red and half white side should show.) Say:

Now you make one that looks like this. (Point to the model.) Tell me when you are finished. Go ahead.

Start timing.

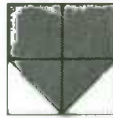
➤ **TIME LIMIT: 30 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Design 7

Use four blocks. Out of the child's sight, construct a model of the design as shown here:

Child



You

Show the model to the child. Take the remaining four blocks and scatter them randomly before the child. No special arrangement is required, but be careful that the blocks do not all show the same side when presented. Say:

Now we have more blocks that are red on one side and red and white on the other side. I am going to put the blocks together to make them look like this. (Point to the model.) Watch me.

After completing the demonstration, leave the model in place, scramble the blocks from the design you have just made, put the blocks in front of the child in mixed order, and say:

Now you make one just like this. (Point to the model.) Tell me when you are finished. Go ahead.

Start timing.

If the child passes this trial, go to Design 8.

If the child fails, repeat the demonstration and allow a second trial, saying:

Now you try it again. Tell me when you are finished. Go ahead.

➤ **TIME LIMIT: 45 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

Design 8

Behind the screen, construct a model from this design:



Show it to the child. Place the remaining blocks in mixed order in front of the child. This time, without demonstration, say:

Now you make one like this. (Point to the model.) Make it all by yourself. Tell me when you are finished. Go ahead.

Start timing and allow 1 minute 15 seconds.

If the child fails, demonstrate with explanation. Then, leaving the model in place, scramble the demonstration blocks in front of the child, and say:

Now you try it again. Tell me when you are finished. Go ahead.

Start timing.

➤ **TIME LIMIT: 1:15 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

For Designs 9-14, use the Stimulus Booklet and four of the blocks used in Designs 6-8 (red on one side and half red and half white on the other).

Design 9

Present Design 9 (place the unbound edge of the Stimulus Booklet 8-10 inches from the child) and say:

Now I want to see if you can put the blocks together so that they will look like the picture in this card. Watch me.

Put the blocks together, indicating by gestures and with words that you are being guided by the design on the card.

First I put a red one here and another red one here. They match this part of the picture. (Point to the top part of the picture.) Now I put a red and white one here and another red and white one here. Now my design looks the same as the picture on the card. (Point to the picture.)

After completing the demonstration, scramble the blocks in front of the child and say:

Make one like this. Tell me when you are finished. Go ahead.

Start timing and allow 1 minute 15 seconds.

If the child fails, repeat the demonstration and allow a second trial.

➤ **TIME LIMIT: 1 MINUTE 15 SECONDS FOR EACH TRIAL.**

On the scoring sheet, note the time taken to complete each trial of the design and whether the child passed or failed each trial by circling the appropriate letter in the "Pass - Fail" column.

**SUB-QUESTIONNAIRE 1 – PRESCHOOL
(FOR CHILDREN AGED 36 TO 53 MONTHS)**

PLEASE INDICATE START TIME (24 HOUR CLOCK)

Example: 6:15 p.m. = 18:15

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READ TO THE SELECTED CHILD

We are going to play some games with blocks and do some drawing.

I. VISUAL-MOTOR/ADAPTIVE

A. BLOCK BUILDING

1. TOWER

Put 9 blocks on a piece of construction paper in front of the child.

Here are some blocks for us to play with. Let's build a tower. See how high you can make it go. Use all the blocks.

If the child is hesitant, demonstrate with 2 or 3 blocks. If the tower falls, give the child one more opportunity, saying:

Try again.



Precise alignment of the blocks is not required as long as it is stable enough to remain standing after the child removes his/her hands.

- ☐ ¹ Has done it (with 9 blocks) [1]
- ☐ ² Could not do it
- ☐ ⁹ Refused

I. VISUAL-MOTOR/ADAPTIVE, continued

2. BRIDGE FROM MODEL (build bridge behind a screen)

Build on construction paper.

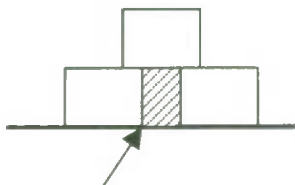
Now I'm going to build a bridge.

Make the bridge behind the screen, remove the screen.

Take a good look at this one. Now you make one just like mine.

Give child three blocks. When child is finished, ask:

Is it just like the one I made?



The gap must be wide enough for a pencil to pass through.

If the child is not able to do it or if the gap is not wide enough, do it without the screen and say:

Watch how I make this one.

Construct the bridge without the screen so that the child can watch easily (see diagram above). Leave the model standing and place three blocks on a piece of construction paper in front of the child. Say:

Now you make one just like this one.

When the child is finished, ask:

Is it just like the one I made?

Score when the child seems satisfied.

- | | | |
|------------------------------------|--|-----|
| <input type="radio"/> ⁴ | Has done it (without help) | [2] |
| <input type="radio"/> ⁵ | Has done it (interviewer had to show without screen) | [1] |
| <input type="radio"/> ⁶ | Could not do it | |
| <input type="radio"/> ⁹ | Refused | |

If child could not do either question 1 or 2, go to Copy Forms (part B).

I. VISUAL-MOTOR/ADAPTIVE, continued

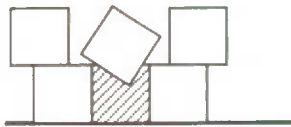
3. **FOR 48 MONTHS AND OVER ONLY – GATE BY IMITATION** (*build gate without a screen*)

Build on construction paper.

Now I'm going to build a gate. Watch how I make this one.

Construct gate without using the screen so the child can watch easily (see diagram below). Do not describe the gate as you build it. Leave the model standing and place five blocks on the construction paper in front of the child. Say:

Now you make one just like mine.



Do not touch the child's block structure or help by holding the blocks in place. When the child is finished, ask:

Is it just like the one I made?

Score when child seems satisfied.

☐ ¹ Has done it [1]

☐ ² Could not do it

☐ ⁹ Refused

B. COPY FORMS

Now let's play some drawing games.

Take a pencil and give a pencil to the child. Take out a blank piece of paper and the cards with the circle and the cross.

One trial for each form is all that is required, but if the child asks to do a second drawing, allow a second trial.

I. VISUAL-MOTOR/ADAPTIVE, continued

1. IMITATE VERTICAL LINE I

Draw a vertical line (|) drawing line toward child on a separate piece of paper. Say:

Now draw one just like this on this paper.

Give the booklet to the child.

For office use only

☐ ⁴ Has done it [1]

☐ ⁵ Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

2. IMITATE HORIZONTAL LINE —

Draw a horizontal line (—) on a separate piece of paper. Say:

Now draw one just like this on this paper.

Give the booklet to the child.

For Office use only

☐ ¹ Has done it [1]

☐ ² Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

3. COPY CIRCLE

Present the card with the circle (○) for the child to copy. Say:

Draw one just like this on this paper.

Do not demonstrate or name the circle. If the child names the form, (for example, "that's a circle"), you may agree with the child. Lay the card flat on the work surface rather than holding it up. Give the booklet to the child.

For Office use only

☐ ⁴ Has done it [1]

☐ ⁵ Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

4. COPY CROSS

Present the card with the cross (+) for the child to copy. Say:

Draw one just like this on this paper.

Do not demonstrate or name the cross. If the child names the form, (for example, "that's a cross"), you may agree with the child. Lay the card flat on the work surface rather than holding it up. Give the booklet to the child.

If child is less than 48 months old, go to section D.

For Office use only

☐ ¹ Has done it [1]

☐ ² Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

C. 48 MONTHS AND OVER ONLY – DRAW A PERSON

Draw a picture of a person – a boy or a girl.

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☐ ⁴ Has done it with 5 or more body parts [2]

☐ ⁵ Has done it with 3 or 4 body parts [1]

☐ ⁶ Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

D. VISUAL SEQUENTIAL MEMORY

1. *Take out the cards with the cup, duck and house. Say:*

Now we're going to play a pointing game with these pictures. I'm going to put this one here (put the cup to your right) and this one here (put the duck to your left).

The cards should look as follows :

Child



Interviewer

Look at them carefully and remember where they are -- this one is here (point to cup) and this one is here (point to duck).

Now I'll turn them over.

Turn the cards face down one at a time in the same order as they were laid out. Now put the #1 card (with the duck) flat on the table just above the overturned cards. The card should be placed several inches above the middle of the row of overturned cards. Saying:

Child



Interviewer

Point to the card that has a picture just like this.

Be prepared to keep the child from turning over the cards and looking at the pictures. If the child attempts to turn over the cards, cover the cards with your hand and say:

This is a pointing game, point with your finger.

Repeat for the #2 card (cup).

I. VISUAL-MOTOR/ADAPTIVE, continued

If the child does not correctly identify where both the duck and the cup are, redo the exercise, but this time reversing the order in which the pictures are put in front of the child. Say:

Now we'll try it a different way. I am going to put this one (duck) here [your right] and this one (cup) here [your left].

As you talk, lay the cards out horizontally for the child, from the child's left to right.



Then say:

Look at them carefully and remember where they are – this one is here (pointing to the duck) and this one is here (pointing to the cup). Now I'll turn them over.

Turn the cards face down one at a time in the same order as they were laid out. Now put the #1 card (with the duck) flat on the table just above the overturned cards. The card should be placed several inches above the middle of the row of overturned cards. Saying:



Point to the card that has a picture just like this.

I. VISUAL-MOTOR/ADAPTIVE, continued

Be prepared to keep the child from turning over the cards and looking at the pictures. If the child attempts to turn over the cards, cover the cards with your hand and say:

This is a pointing game, point with your finger.

Repeat for the #2 card (cup).

- | | | |
|------------------------------------|--|-----|
| <input type="radio"/> ¹ | Has done it (first trial) | [1] |
| <input type="radio"/> ² | Has done it (second trial) | [1] |
| <input type="radio"/> ³ | Could not do it (go to Section II – Gross Motor) | |
| <input type="radio"/> ⁹ | Refused (go to Section II – Gross Motor) | |

I. VISUAL-MOTOR/ADAPTIVE, continued

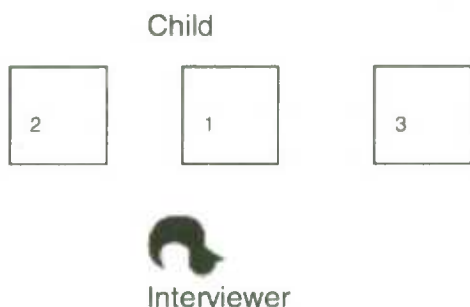
2. **Now we'll try it a different way. I am going to put this one here** (*house on your right*), **this one here** (*duck in the middle*) **and this one here** (*cup on your left*).

As you talk, lay the cards out horizontally for the child.



Look at them carefully and remember where they are – this one is here (*pointing to the house*) **this one is here** (*pointing to the duck*) **and this one is here** (*pointing to the cup*). **Now I'll turn them over.**

Turn the cards face down one at a time in the same order as they were laid out from your right to your left. For the pointing part, show the cards in the numerical order : 1 : duck, 2 : cup, 3 : house, laying them flat on the table above the over-turned cards (closer to you). Saying:



Point to the card that has a picture just like this

for each card that you lay down. Even if the child makes an error on the first or the second card that is shown, lay down the three cards. If the child has all three, enter the score on the next page and go to the Section II, Gross Motor.

I. VISUAL-MOTOR ADAPTIVE, concluded

If the child does not identify all three cards correctly, redo the exercise saying:

Now we'll try it a different way. I am going to put this one here (*cup on your right*), **this one here** (*house in the middle*) **and this one here** (*duck on your left*). *As you talk lay the cards out horizontally for the child.*



Look at them carefully and remember where they are – this one is here (*pointing to the cup*) **this one is here** (*pointing to the house*) **and this one is here** (*pointing to the duck*). **Now I'll turn them over.**

Turn the cards face down one at a time in the same order as they were laid out from your right to your left. For the pointing part, show the cards in the numerical order : 1 : duck, 2 : cup, 3 : house, laying each one flat on the table above the over-turned cards. Saying:



Point to the card that has a picture just like this

for each card that you lay down. Even if the child makes an error on the first or the second card that is shown, lay down the three cards.

- ☐ ⁴ Pointed correctly to all three pictures (first trial) [2]
- ☐ ⁵ Pointed correctly to all three pictures (second trial) [2]
- ☐ ⁶ Could not do it
- ☐ ⁹ Refused

II. GROSS MOTOR

A. JUMP

Ask the child to stand up and go to an open space in the room.

Ask the parent's permission to attach the tape to the floor. Secure the tape to the floor. Say:

Now we're going to play some standing up games. Let's see you jump over the line like this.

Demonstrate jumping over the line. You may jump over the line a second time if the child does not respond to the first demonstration.

To receive a score, the child's feet must take off and land together. A gallop over the line does not count, nor does a taking off or landing that involves one foot hitting the floor.

☐¹ Able to jump over the line [1]

☐² Unable to jump over the line

☐⁹ Refused

B. WALK ON THE LINE

Now let's see you walk on this line. Walk from this end to that end.

Point to one end of the line and then the other. Demonstrate walking the line. On the line means that at least part of the foot is on the line for each step.

Try to keep both feet on the line.

☐⁴ All steps are on the line [2]

☐⁵ Only 1 or 2 steps are off the line [1]

☐⁶ Could not do it

☐⁹ Refused

II. GROSS MOTOR, continued

C. BALANCE

You and the child should stand so that the child has room to balance and will not be tempted to hold onto or lean against anything. Say:

I want to see if you can stand on one foot, like this, while I count to 5.

Demonstrate briefly. As soon as the child lifts his/her foot, begin to count out loud to 5 slowly at 1-second intervals.

Now stand on the other foot while I count to 5.

Child may have up to three trials on each foot. Do not count false starts or a one to two-second balance as a trial unless that is the best the child can do. If the child is having significant difficulty with this task, do not continue with the full number of trials.

- ☐ ¹ Able to stand on each foot for 5 seconds [2]
- ☐ ² Able to stand on either foot for 3-4 seconds [1]
- ☐ ³ Could not do it
- ☐ ⁹ Refused

II. GROSS MOTOR, concluded

D. 48 MONTHS AND OVER ONLY – HOP

I want to see you hop 5 times on one foot.

If child hesitates, demonstrate hopping. Count the number of hops out loud as the child hops.

Now hop 5 times on the other foot.

Count the number of hops out loud as the child hops. Child may have up to 3 trials on each foot

- ☐ ⁴ Can hop at least 5 times on each foot [2]
- ☐ ⁵ Can hop at least 3-4 times on either foot [1]
- ☐ ⁶ Could not do it
- ☐ ⁹ Refused

PLEASE INDICATE END TIME (24 HOUR CLOCK)

Example: 6:25 p.m. = 18:25

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REMINDER: Enter the final status code on the cover page.

**SUB-QUESTIONNAIRE 2 – KINDERGARTEN
(FOR CHILDREN AGED 54 TO 71 MONTHS)**

PLEASE INDICATE START TIME (24 HOUR CLOCK)

Example: 6:15 p.m. = 18:15

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READ TO THE SELECTED CHILD

We are going to play some games with blocks and do some drawing.

I. VISUAL – MOTOR/ADAPTIVE

A. BLOCK BUILDING

1. TOWER

Put 10 blocks on a piece of construction paper in front of the child.

Here are some blocks for us to play with. Let's build a tower. See how high you can make it go. Use all the blocks.

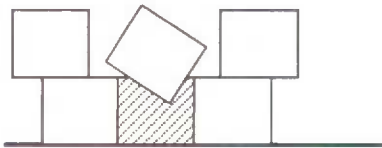
If the child is hesitant, demonstrate with 2 or 3 blocks. If the child chooses to build something else, this is acceptable. Do not insist on building a tower.

There is no score for this task, it is a warm-up item.

2. GATE FROM MODEL (build gate behind a screen)

Build on construction paper.

Now I'm going to build a gate (see diagram below). When I finish I want you to make one just like mine. Take a good look at this one.



Leave the model in plain view. Place the five blocks on a piece of construction paper in front of the child and say:

Now you make one just like mine.

I. VISUAL-MOTOR/ADAPTIVE, continued

Do not touch the child's block structure or help hold the blocks in place. When the child seems finished, ask:

Is that just like the one I made?

Score when the child seems satisfied.

Or, if fails : Imitate Gate – build without a screen

Remove child's blocks as you say:

Watch how I make this one.

Construct gate without using the screen so the child can watch easily (see diagram above). Leave the model standing and place five blocks on the construction paper in front of the child. Say:

Now you make one just like mine.

Do not touch the child's block structure or help by holding the blocks in place. When the child is finished, ask:

Is it just like the one I made ?

Score when the child seems satisfied.

- ☐ ¹ Has done it (from a model) [2]
- ☐ ² Has done it (by imitation) [1]
- ☐ ³ Could not do it
- ☐ ⁹ Refused

B. COPY FORMS

Now let's play some drawing games.

Give a pencil to the child.

One trial for each form is all that is required, but if the child asks to do a second drawing, allow a second trial.

I. VISUAL-MOTOR/ADAPTIVE, continued

1. COPY CIRCLE

Present the card with the circle (●) for the child to copy. Say:

Draw one just like this on this paper.

Do not demonstrate or name the circle. If the child names the form, (for example, "that's a circle"), you may agree with the child. Lay the card flat on the work surface rather than holding it up. Give the booklet to the child.

For Office use only

☐ ⁴ Has done it [1]

☐ ⁵ Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

2. COPY CROSS

Present the card with the cross (+) for the child to copy. Say:

Draw one just like this on this paper.

Do not demonstrate or name the cross. If the child names the form, (for example, "that's a cross"), you may agree with the child. Lay the card flat on the work surface rather than holding it up. Give the booklet to the child.

For Office use only

☐ ¹ Has done it [1]

☐ ² Could not do it

4. VISUAL-MOTOR/ADAPTIVE, continued

3. COPY SQUARE

Present the card with the square (□) for the child to copy. Say:

Draw one just like this on this paper.

Do not demonstrate or name the square. If the child names the form, (for example, "that's a square"), you may agree with the child. Lay the card flat on the work surface rather than holding it up. Give the booklet to the child.

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☐ ⁴ Has done it [1]

☐ ⁵ Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

4. COPY DIAMOND

Present the card with the diamond (\diamond) for the child to copy. Say:

Draw one just like this on this paper.

Do not demonstrate or name the diamond. If the child names the form, (for example, "that's a diamond"), you may agree with the child. Lay the card flat on the work surface rather than holding it up. Give the booklet to the child.

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☐ ¹ Has done it [1]

☐ ² Could not do it

I. VISUAL-MOTOR/ADAPTIVE, continued

C. DRAW A PERSON

Draw a picture of a person – a boy or a girl.

For Office use only

- | | | |
|------------------------------------|---------------------------------------|-----|
| <input type="radio"/> ⁴ | Has done it with 5 or more body parts | [2] |
| <input type="radio"/> ⁵ | Has done it with 3 or 4 body parts | [1] |
| <input type="radio"/> ⁶ | Could not do it | |

I. VISUAL-MOTOR/ADAPTIVE, continued

D VISUAL SEQUENTIAL MEMORY

1. Take out the cup duck and house cards. Say:

Now we're going to play a pointing game with these pictures. I'm going to put this one here (put the cup to your right) and this one here (put the duck to your left).

The cards should look as follows :



Look at them carefully and remember where they are -- this one is here (point to cup) and this one is here (point to duck).

Now I'll turn them over.

Turn the cards face down one at a time in the same order as they were laid out. Now put the #1 card (with the duck) flat on the table just above the overturned cards. The card should be placed several inches above the middle of the row of overturned cards. Saying:



Interviewer

Point to the card that has a picture just like this.

Be prepared to keep the child from turning over the cards and looking at the pictures. If the child attempts to turn over the cards, cover the cards with your hand and say:

This is a pointing game, point with your finger.

Repeat for the #2 card (cup).

1. VISUAL-MOTOR/ADPATIVE, continued

If the child does not correctly identify where both the duck and the cup are, redo the exercise, but this time reversing the order in which the pictures are put in front of the child. Say:

Now we'll try it a different way. I am going to put this one (duck) here [your right] and this one (cup) here [your left].

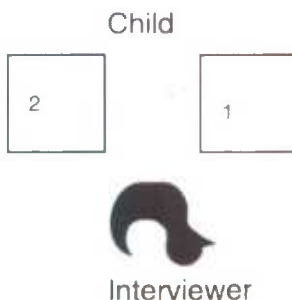
As you talk, lay the cards out horizontally for the child, from the child's left to right. Then say,



Look at them carefully and remember where they are – this one is here (pointing to the duck) and this one is here (pointing to the cup).

Now I'll turn them over.

Turn the cards face down one at a time in the same order as they were laid out. Now put the #1 card (with the duck) flat on the table just above the overturned cards. The card should be placed several inches above the middle of the row of overturned cards. Saying:



Point to the card that has a picture just like this.

Be prepared to keep the child from turning over the cards and looking at the pictures. If the child attempts to turn over the cards, cover the cards with your hand and say:

This is a pointing game, point with your finger.

Repeat for the #2 card (cup).

This item is not scored. If the child was unsuccessful in both attempts then go to Section II, Gross Motor.

I. VISUAL-MOTOR/ADAPTIVE, continued

2. **Now we'll try it a different way. I am going to put this one here** (*house on your right*), **this one here** (*duck in the middle*) **and this one here** (*cup on your left*).

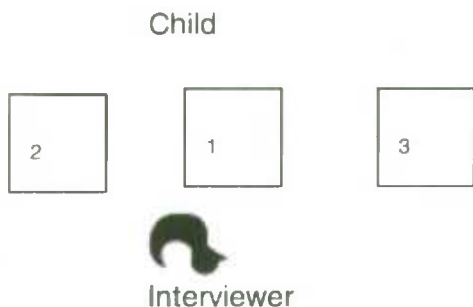
As you talk, lay the cards out horizontally for the child.



Look at them carefully and remember where they are – this one is here (*pointing to the house*) **this one is here** (*pointing to the duck*) **and this one is here** (*pointing to the cup*).

Now I'll turn them over.

Turn the cards face down one at a time in the same order as they were laid out from your right to your left. For the pointing part, show the cards in numerical order : 1 : duck, 2 : cup, 3 : house, laying each one flat on the table above the over-turned cards.



Say:

Point to the card that has a picture just like this

for each card that you lay down. Even if the child makes an error on the first or the second card that is shown, lay down the three cards. If the child has all three enter the score on the next page and go to the Section II, Gross Motor.

I. VISUAL-MOTOR/ADAPTIVE, concluded

If the child does not identify all three cards correctly, redo the exercise saying:

Now we'll try it a different way. I am going to put this one here (*cup on your right*), **this one here** (*house in the middle*) **and this one here** (*duck on your left*).

As you talk lay the cards out horizontally for the child.



Look at them carefully and remember where they are – this one is here (*pointing to the cup*) **this one is here** (*pointing to the house*) **and this one is here** (*pointing to the duck*).

Now I'll turn them over.

Turn the cards face down one at a time in the same order as they were laid out from your right to your left. For the pointing part, show the cards in numerical order : 1 : duck, 2 : cup, 3 : house, laying each one flat on the table above the over-turned cards. Saying:



Point to the card that has a picture just like this

for each card that you lay down. Even if the child makes an error on the first or the second card that is shown, lay down the three cards.

- ☐ ⁴ Pointed correctly to all three pictures (first trial) [1]
- ☐ ⁵ Pointed correctly to all three pictures (second trial) [1]
- ☐ ⁶ Could not do it
- ☐ ⁹ Refused

II. GROSS MOTOR

A. BALANCE

Now we're going to play some standing up games.

You and the child should stand so that the child has room to balance and will not be tempted to hold onto or lean against anything. Say:

I want to see if you can stand on one foot, like this, while I count to 10.

Demonstrate briefly. As soon as the child lifts his/her foot, begin to count out loud to 10 slowly at 1-second intervals.

Now stand on the other foot while I count to 10.

Child may have up to three trials on each foot. Do not count false starts or a one to two-second balance as a trial unless that is the best the child can do. If the child is having significant difficulty with this task, do not continue with the full number of trials.

- ☐ ¹ Able to stand on each foot for 10 seconds [2]
- ☐ ² Able to stand on either foot for 5-9 seconds [1]
- ☐ ³ Could not do it
- ☐ ⁹ Refused

II. GROSS MOTOR, concluded

B. HOP

I want to see you hop 5 times on one foot.

If child hesitates, demonstrate hopping. Count the number of hops at loud as the child hops.

Now hop 5 times on the other foot.

Count the number of hops at loud as the child hops. Child may have up to 3 trials on each foot.

☐ ⁴ Can hop at least 5 times on each foot [2]

☐ ⁵ Can hop at least 3-4 times on either foot [1]

☐ ⁶ Could not do it

☐ ⁹ Refused

C. SKIP

Now I want to see you skip.

If the child hesitates, you should demonstrate. Mark "could not do it" if the child gallops instead of skipping.

☐ ⁵ Skips using alternating feet [2]

☐ ⁶ Could not do it

☐ ⁹ Refused

PLEASE INDICATE END TIME (24 HOUR CLOCK)

Example: 6:25 p.m. = 18:25

<input type="text"/>	<input type="text"/>	:	<input type="text"/>	<input type="text"/>
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REMINDER: Enter the final status code on the cover page.



Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Livret 4



Questionnaire ESI-R

Numéro de tâche

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Numéro de la personne

						-		-		-		
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Nom de famille de l'enfant

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Prénom de l'enfant

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Date de naissance de l'enfant

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AAAA -- MM -- JJ

Âge en mois

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Confidentiel une fois rempli.

English on reverse.

Renseignements recueillis en vertu de la Loi sur la
statistique, Lois revisées du Canada, 1985,
chapitre S19.

Pointage total

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CODE D'ÉTAT FINAL DU LIVRET

- 000 ☐ Complet
001 ☐ Partiel
034 ☐ Pas de contact
030 ☐ Refus du parent
031 ☐ Refus de l'enfant
018 ☐ Hors cible
099 ☐ Autre NR (Précisez)

Commentaires:

8-5300-339: 17-08-1999 STC/HLD-040-75020

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Statistique
Canada

Statistics
Canada

Canada

NOTE À L'INTERVIEWEUR

*Les instructions à l'intervieweur sont en italiques. Le texte que vous direz à l'enfant est imprimé en **caractère gras**.*

Certaines questions seront notées suite à la réponse de l'enfant. Les autres questions seront notées au bureau central. Lorsque c'est le cas, les catégories de réponse seront ombragées et inscrit "À l'usage du bureau seulement".

Vous verrez des nombres entre crochets près des catégories de réponses. Ces nombres sont à l'usage du bureau central.

*Si l'enfant est âgé entre **36 et 53 mois**, allez au sous-questionnaire 1 - Pré-scolaire à la **page 3**.*

*Si l'enfant est âgé entre **54 et 71 mois**, allez au sous-questionnaire 2 – École maternelle à la **page 19**.*

SOUS-QUESTIONNAIRE 1 – Pré-scolaire
(pour les enfants âgés entre 36 et 53 mois)

VEUILLEZ INDiquer L'HEURE DE DÉBUT (SELON L'HORAIRE DE 24 HEURES)

Exemple: 6h15 p.m. = 18h15

		h		
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LIRE À L'ENFANT SELECTIONNÉ

Nous allons jouer à des jeux avec des blocs et faire quelques dessins.

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION

A. CONSTRUCTION AVEC DES BLOCS

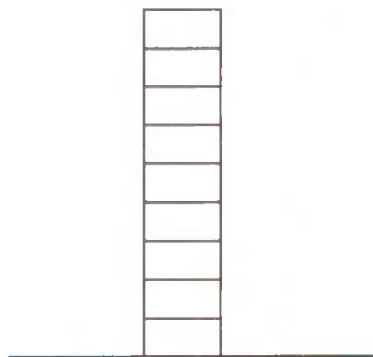
1. TOUR

Mettez 9 blocs sur une feuille de papier de construction.

Voici quelques blocs avec lesquels nous allons pouvoir jouer. Construisons une tour. Voyons jusqu'à quelle hauteur tu peux monter. Utilise tous les blocs.

Si l'enfant hésite, faites une démonstration avec 2 ou 3 blocs. Défaites votre exemple et donnez tous les blocs à l'enfant. Si la tour s'écroule, permettez à l'enfant d'essayer une autre fois en disant :

Essaie encore.



Un alignement précis n'est pas nécessaire, mais la tour doit rester debout après que l'enfant enlève ses mains.

☐¹ Réussi (avec 9 blocs) [1]

☐² Pas réussi

☐³ Refus

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

2. PONT D'APRÈS UN MODÈLE (construction d'un pont derrière un écran)

Construisez sur une feuille de papier de construction.

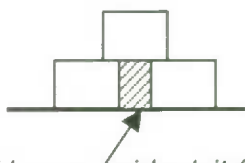
Maintenant, je vais construire un pont.

Construisez le pont derrière l'écran. Enlevez l'écran.

Regarde bien celui-ci. Maintenant, fais-en un comme le mien.

Donnez trois blocs à l'enfant. Lorsque l'enfant semble avoir terminé, demandez-lui :

Est-ce qu'il est exactement comme le mien?



L'espace vide doit être assez large pour laisser passer un crayon.

Si l'enfant n'est pas capable de construire le pont ou l'espace vide n'est pas assez grand, construisez le pont sans l'écran, dites :

Regarde comment je fais celui-ci.

Construisez le pont sans utiliser l'écran pour que l'enfant puisse voir facilement (voir le diagramme ci-dessus). Laissez le modèle en place et mettez trois blocs sur le papier de construction devant l'enfant. Dites :

Maintenant, fais-en un exactement comme le mien.

Lorsque l'enfant semble avoir terminé, demandez-lui :

Est-ce qu'il est exactement comme le mien?

Enregistrez le résultat lorsque l'enfant semble satisfait.

- | | | |
|------------------------------------|------------------------|-----|
| <input type="radio"/> ⁴ | Réussi (sans aide) | [2] |
| <input type="radio"/> ⁵ | Réussi (par imitation) | [1] |
| <input type="radio"/> ⁶ | Pas réussi | |
| <input type="radio"/> ⁹ | Refus | |

Si l'enfant a échoué aux questions 1 et 2, passez à la section B - Copier des formes.

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

3. **UNIQUEMENT POUR LES ENFANTS DE 48 MOIS ET PLUS – ENTRÉE PAR IMITATION** (construction d'une entrée sans utiliser d'écran)

Maintenant, je vais construire une entrée. Regarde comment je vais faire.

Construisez l'entrée sans utiliser l'écran pour que l'enfant puisse voir facilement (voir le diagramme ci-dessous). Ne décrivez pas l'entrée pendant que vous la construisez. Laissez le modèle en place et mettez cinq blocs sur le papier de construction devant l'enfant. Dites :

Maintenant, fais-en une exactement comme la mienne.



Ne touchez pas la structure de blocs de l'enfant, ni l'aider en gardant les blocs en place. Lorsque l'enfant semble avoir terminé, demandez-lui :

Est-ce qu'elle est exactement comme la mienne?

Enregistrez le résultat lorsque l'enfant semble satisfait.

☒ ¹ Réussi [1]

☐ ² Pas réussi

☐ ⁹ Refus

B COPIER DES FORMES

Maintenant, faisons quelques dessins.

Prenez un crayon et donnez à l'enfant un crayon sans gomme à effacer. Prenez une feuille de papier blanc et les cartes plastifiées ayant un cercle et une croix.

Seulement un essai par forme est requis. Mais si l'enfant demande de faire un deuxième dessin, donnez-lui un deuxième essai.

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

1 IMITER UNE LIGNE VERTICALE I

*Faites une ligne verticale (I) en dessinant la ligne vers l'enfant sur une autre feuille de papier.
Dites :*

Dessine une forme comme celle-ci sur cette feuille.

Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐ ⁴ Réussi [1]

☐ ⁵ Pas réussi

MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

2. IMITER LIGNE HORIZONTALE —

Faites une ligne horizontale (—) sur une autre feuille de papier. Dites :

Dessine une forme comme celle-ci sur cette feuille.

Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐ ¹ Réussi [1]

☐ ² Pas réussi

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

3. COPIER UN CERCLE

Présentez la carte avec le dessin d'un cercle (○) pour que l'enfant le copie. Dites:

Dessine une forme comme celle-ci sur la feuille.

Ne dessinez pas le cercle et n'en faites pas mention. Si l'enfant nomme la forme (par exemple, « c'est un cercle »), vous pouvez être d'accord avec l'enfant. Laissez la carte à plat sur la surface de travail plutôt que de la tenir debout. Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐⁴ Réussi [1]

☐⁵ Pas réussi

4. COPIER UNE CROIX

Présentez la carte avec le dessin d'une croix (+) pour que l'enfant le copie. Dites:

Dessine une forme comme celle-ci sur la feuille.

Ne dessinez pas la croix et n'en faites pas mention. Si l'enfant nomme la forme (par exemple, « c'est une croix »), vous pouvez être d'accord avec l'enfant. Laissez la carte à plat sur la surface de travail plutôt que de la tenir debout. Donnez le livret à l'enfant.

Si l'enfant a moins de 48 mois, allez à la section D.

A l'usage du bureau seulement

☐ ¹ Réussi [1]

☐ ² Pas réussi

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

C. UNIQUEMENT POUR LES ENFANTS DE 48 MOIS ET PLUS – DESSINER UNE PERSONNE

Dessine une personne — un garçon ou une fille

À l'usage du bureau seulement

- ☐ ⁴ Réussi avec 5 parties du corps ou davantage [2]
- ☐ ⁵ Réussi avec 3 ou 4 parties du corps [1]
- ☐ ⁶ Pas réussi

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

D. MOTRICITÉ SÉQUENTIELLE VISUELLE

1. *Sortez les cartes plastifiées ayant des dessins d'une tasse, d'un canard et d'une maison. Dites:*

Maintenant, nous allons jouer à un jeu où il faut pointer du doigt ces dessins. Je vais mettre ce dessin-ci (tasse) ici, et celui-ci (canard) ici.

Disposez les cartes de manière à ce qu'elles soient à l'endroit pour l'enfant, comme il est indiqué ci-contre:

Enfant



Intervieweur

Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez la tasse) et celle-ci est ici (désignez le canard).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à la fois dans le même ordre qu'elles ont été disposées. Mettez la carte n°1 (le canard) à plat sur la table juste au-dessous des cartes retournées. La carte devrait être placée à quelques pouces en dessous du milieu de la rangée des cartes retournées, en disant :

Enfant



Intervieweur

Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci.

Soyez prêt à empêcher l'enfant de retourner les cartes et de regarder les images. Si l'enfant essaye de retourner les cartes, couvrez-les avec votre main et dites:

C'est un jeu de pointage, montre-le avec ton doigt.

Répétez pour la carte n°2 (la tasse).

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

Si l'enfant n'identifie pas correctement où sont le canard et la tasse, refaites l'exercice, mais cette fois-ci renversez l'ordre des images placées en face de l'enfant.

Dites:

Maintenant, nous allons essayer d'une façon différente. Je vais mettre ce dessin-ci (le canard) ici [votre droite] et celui-ci (tasse) ici [votre gauche].

Tout en parlant, disposer les cartes pour qu'elles soient à l'endroit pour l'enfant, de sa gauche vers sa droite,

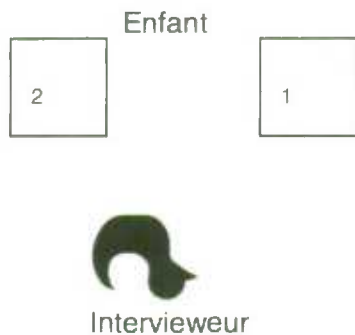


Et dites:

Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez le canard) et celle-ci est ici (désignez la tasse).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à la fois dans le même ordre qu'elles ont été disposées. Mettez la carte n°1 (le canard) à plat sur la table juste au-dessus des cartes retournées. La carte devrait être placée à quelques pouces en dessous du milieu de la rangée des cartes retournées, en disant :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci.

MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

Soyez prêt à empêcher l'enfant de retourner les cartes et de regarder les images. Si l'enfant essaie de retourner les cartes, couvrez-les avec votre main et dites:

C'est un jeu de pointage, montre-le avec ton doigt.

Répétez pour la carte n°2 (la tasse).

- | | | |
|------------------------------------|--|-----|
| <input type="radio"/> ¹ | Réussi (premier essai) | [1] |
| <input type="radio"/> ² | Réussi (deuxième essai) | [1] |
| <input type="radio"/> ³ | Pas réussi (aller à la section II – Motricité globale) | |
| <input type="radio"/> ⁹ | Refus (aller à la section II – Motricité globale) | |

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

2. **Maintenant, nous allons essayer d'une façon différente. Je vais mettre ce dessin-ci ici [la maison à votre droite], celui-ci ici (le canard au milieu) et celui-ci ici (la tasse à votre gauche).**

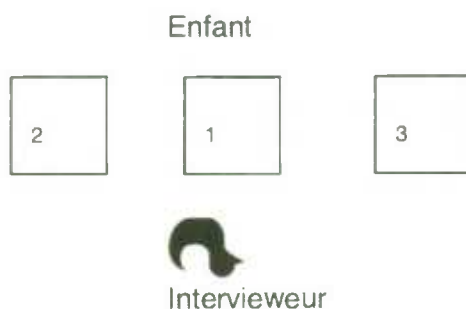
Tout en parlant, disposez les cartes horizontalement pour l'enfant.



Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez la maison) celle-ci est ici (désignez le canard) et celle-ci est ici (désignez la tasse).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à une dans le même ordre qu'elles ont été disposées de votre droite vers votre gauche. Montrez les cartes de manière à ce qu'on puisse les désigner par ordre numérique (1-canard, 2-tasse, 3-maison), mettez-les une à une à plat sur la table en dessous des cartes retournées, en disant :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci,

pour chaque carte que vous disposez. Même si l'enfant fait une erreur à la première ou à la deuxième carte, montrez-lui les trois cartes. Si l'enfant réussit les 3 cartes, inscrire le résultat sur la page suivante et allez à la section II, Motricité globale.

MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (fin)

Si l'enfant n'identifie pas les trois cartes correctement, refaites l'exercice en disant:

Maintenant, nous allons essayer d'une façon différente. Je vais mettre ce dessin-ci ici [la tasse à votre droite], **celui-ci ici** (la maison au milieu) **et celui-ci ici** (le canard à votre gauche).

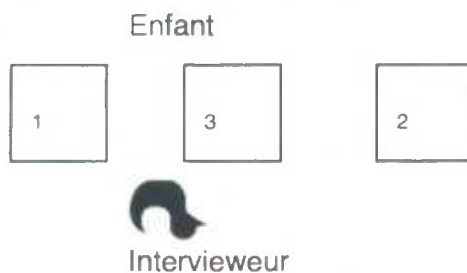
Tout en parlant, disposez les cartes horizontalement pour l'enfant.



Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez la tasse) **celle-ci est ici** (désignez la maison) **et celle-ci est ici** (désignez le canard).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à une dans le même ordre qu'elles ont été disposées de votre droite vers votre gauche. Montrez les cartes de manière à ce qu'on puisse les désigner par ordre numérique (1-canard, 2-tasse, 3-maison), mettez-les une à une à plat sur la table en dessous des cartes retournées en disant :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci,

pour chaque carte que vous disposez. Même si l'enfant fait une erreur à la première ou à la deuxième carte, montrez-lui les trois cartes.

☐ ⁴ Réussi (premier essai) [2]

☐ ⁵ Réussi (deuxième essai) [2]

☐ ⁶ Pas réussi

☐ ⁹ Refus

II. MOTRICITÉ GLOBALE

A. SAUT

Demandez à l'enfant de se lever et allez à un endroit dégagé de la pièce.

Demandez la permission au parent de fixer le ruban sur le plancher et appliquez-le fermement.

Maintenant, nous allons jouer à des jeux debout.

Montre-moi comment tu sautes par-dessus la ligne, comme cela.

Montrez comment sauter par dessus la ligne. Vous pouvez sauter une deuxième fois si l'enfant ne répond pas à la première démonstration.

Pour recevoir un pointage, les pieds de l'enfant doivent être ensemble au moment de la prise d'envol du saut et au moment de l'atterrissage. Un pas au galop effectué par-dessus la ligne ne peut être pointer, de même qu'un saut dont l'envol ou l'atterrissage se fait sur un pied.

☐¹ Saut à pieds joint par-dessus la ligne [1]

☐² Ne sautes pas à pieds joint par-dessus la ligne

☐⁹ Refus

B. MARCHE SUR UNE LIGNE

Maintenant, montre-moi comment tu marches sur cette ligne.

Indiquez un bout puis l'autre bout de la ligne. Montrez-lui comment marcher sur la ligne. Sur la ligne signifie qu'au moins une partie du pied est sur la ligne à chaque pas.

Marche d'ici jusqu'à là.

☐⁴ Tous les pas sur la ligne [2]

☐⁵ Seulement 1 ou 2 pas ne sont pas sur la ligne [1]

☐⁶ Pas réussi

☐⁹ Refus

C. ÉQUILIBRE

Vous et l'enfant devriez être debout pour que l'enfant ait de la place pour se balancer sans qu'il puisse être tenté de se tenir ou de s'appuyer sur quelque chose. Dites:

Maintenant, je veux voir si tu sais rester en équilibre sur un pied, comme cela, pendant que je compte jusqu'à 5.

Faites une brève démonstration. Aussitôt que l'enfant lève son pied, comptez lentement à haute voix jusqu'à 5, à intervalles d'une seconde.

Maintenant, reste en équilibre sur l'autre pied pendant que je compte jusqu'à 5.

L'enfant peut faire jusqu'à 3 essais sur chaque pied. Ne comptez pas les faux départs ou des périodes d'équilibre d'une ou deux secondes comme essai à moins que ce soit le mieux que l'enfant puisse faire. Si l'enfant a beaucoup de difficulté avec cette tâche, ne faites pas tous les essais.

- ☐ ¹ Capable de rester en équilibre pour 5 secondes sur chaque pied [2]
- ☒ ² Capable de rester en équilibre pour 3 ou 4 secondes sur l'un ou l'autre des pieds [1]
- ☐ ³ Pas réussi
- ☐ ⁹ Refus

II. MOTRICITÉ GLOBALE (fin)

D. **UNIQUEMENT POUR LES ENFANTS DE 48 MOIS ET PLUS – SAUTILLEMENT SUR UN PIED** (à cloche pied)

Je veux que tu sautes 5 fois sur un pied.

Si l'enfant hésite, montrez-lui comment sauter. Comptez le nombre de saut à haute voix lorsque que l'enfant saute.

Maintenant saute 5 fois sur l'autre pied.

Comptez le nombre de saut à haute voix lorsque que l'enfant saute. L'enfant peut faire jusqu'à 3 essais sur chaque pied.

- ☐ ⁴ Capable de sauter 5 fois sur chaque pied [2]
- ☐ ⁵ Capable de sauter 3 ou 4 fois sur l'un ou l'autre des pieds [1]
- ☐ ⁶ Pas réussi
- ☐ ⁹ Refus

VEUILLEZ INDIQUER L'HEURE DE FIN (SELON L'HORAIRE DE 24 HEURES)

Exemple: 6h25 p.m. = 18h25

		h		
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RAPPEL : N'oubliez pas d'indiquer le code d'état final sur la page couverture.

SOUS-QUESTIONNAIRE 2 – ÉCOLE MATERNELLE
(pour les enfants âgés entre 54 et 71 mois)

VEUILLEZ INDICER L'HEURE DE DÉBUT (SELON L'HORAIRE DE 24 HEURES)

Exemple: 6h15 p.m. = 18h15

		h		
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LISEZ À L'ENFANT SÉLECTIONNÉ

Nous allons jouer à des jeux avec des blocs et faire quelques dessins.

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION

A. CONSTRUCTION AVEC DES BLOCS

1. TOUR

Mettez 10 blocs sur une feuille de papier de construction.

Voici quelques blocs avec lesquels nous allons pouvoir jouer. Construisons une tour. Voyons jusqu'à quelle hauteur tu peux monter. Utilise tous les blocs.

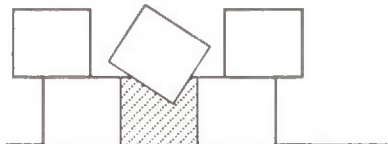
Si l'enfant hésite, faites une démonstration avec 2 ou 3 blocs. Défaites votre exemple et donnez tous les blocs à l'enfant. Si l'enfant choisit de construire autre chose, c'est acceptable. N'insistez pas pour construire une tour.

Il y a aucun point pour cette question, c'est un exercice.

2. ENTRÉE APRÈS UN MODÈLE (construction d'un pont derrière un écran)

Construisez sur une feuille de papier de construction.

Maintenant, je vais construire une entrée (voir le diagramme ci-dessous). Lorsque j'aurai fini, je veux que tu en fasses une exactement comme la mienne. Regarde bien celle-là.



Laissez le modèle en place et mettez cinq blocs sur le papier de construction devant l'enfant et dites :

Maintenant, fais-en exactement comme la mienne.

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

Ne touchez pas la structure de blocs de l'enfant, ni l'aider en gardant les blocs en place. Lorsque l'enfant semble avoir terminé, demandez-lui:

Est-ce qu'elle est exactement comme la mienne?

Enregistrez le résultat lorsque l'enfant semble satisfait.

Ou, si échoué : Entrée par imitation – construire sans écran

Prenez les blocs de l'enfant, en disant:

Regarde comment je fais celui-ci.

Construisez l'entrée sans utiliser l'écran pour que l'enfant puisse voir facilement (voir le diagramme à la page précédente). Laissez le modèle en place et mettez cinq blocs sur le papier de construction devant l'enfant. Dites:

Maintenant, fais-en un exactement comme le mien.

Ne touchez pas la structure de blocs de l'enfant, ni l'aider en gardant les blocs en place. Lorsque l'enfant semble avoir terminé, demandez-lui:

Est-ce qu'elle est exactement comme la mienne?

Enregistrez le résultat lorsque l'enfant semble satisfait.

- | | | |
|------------------------------------|----------------------------|-----|
| <input type="radio"/> ¹ | Réussi (d'après le modèle) | [2] |
| <input type="radio"/> ² | Réussi (par imitation) | [1] |
| <input type="radio"/> ³ | Pas réussi | |
| <input type="radio"/> ⁹ | Refus | |

B. COPIER DES FORMES

Maintenant, faisons quelques dessins.

Donnez un crayon à l'enfant.

Seulement un essai par forme est requis. Mais si l'enfant demande de faire un deuxième dessin, donnez-lui un deuxième essai.

1. COPIER UN CERCLE

Présentez la carte avec le dessin d'un cercle (○) pour que l'enfant le copie. Dites:

Dessine une forme comme celle-ci sur la feuille.

Ne dessinez pas le cercle et n'en faites pas mention. Si l'enfant nomme la forme (par exemple, « c'est un cercle »), vous pouvez être d'accord avec l'enfant. Laissez la carte à plat sur la surface de travail plutôt que de la tenir debout. Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐ ⁴ Réussi [1]

☐ ⁵ Pas réussi

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

2. COPIER UNE CROIX

Présentez la carte avec le dessin d'une croix (+) pour que l'enfant le copie. Dites:

Dessine une forme comme celle-ci sur la feuille.

Ne dessinez pas la croix et n'en faites pas mention. Si l'enfant nomme la forme, (par exemple, "c'est une croix"), vous pouvez être d'accord avec l'enfant. Laissez la carte à plat sur la surface de travail plutôt que de la tenir debout. Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐ ¹ Réussi [1]

☐ ² Pas réussi

3. COPIER UN CARRÉ

Présentez la carte avec le dessin d'un carré (□) pour que l'enfant le copie. Dites:

Dessine une forme comme celle-ci sur la feuille.

Ne dessinez pas le carré et n'en faites pas mention. Si l'enfant nomme la forme, (par exemple, "c'est un carré"), vous pouvez être d'accord avec l'enfant. Laissez la carte à plat sur la surface de travail plutôt que de la tenir debout. Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐ ⁴ Réussi [1]

☐ ⁵ Pas réussi

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

4. COPIER UN LOSANGE

Présentez la carte avec le dessin d'un losange (◊) pour que l'enfant le copie. Dites:

Dessine une forme comme celle-ci sur la feuille.

Ne dessinez pas le losange et n'en faites pas mention. Si l'enfant nomme la forme, (par exemple, "c'est un losange"), vous pouvez être d'accord avec l'enfant. Laissez la carte à plat sur la surface de travail plutôt que de la tenir debout. Donnez le livret à l'enfant.

À l'usage du bureau seulement

☐¹ Réussi [1]

☐² Pas réussi

MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

C. DESSINER UNE PERSONNE

Dessine une personne – un garçon ou une fille.

À l'usage du bureau seulement

- ☐ ⁴ Réussi avec 5 parties du corps ou davantage [2]
- ☐ ⁵ Réussi avec 3 ou 4 parties du corps [1]
- ☐ ⁶ Pas réussi

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

D. MOTRICITÉ SÉQUENTIELLE VISUELLE

1. *Sortez les cartes plastifiées ayant des dessins d'une tasse, d'un canard et d'une maison. Dites:*

Maintenant, nous allons jouer à un jeu où il faut pointer du doigt ces dessins. Je vais mettre ce dessin-ci (tasse) ici, et celui-ci (canard) ici.

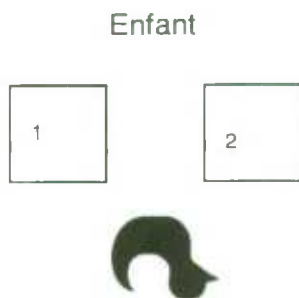
Disposez les cartes de manière à ce qu'elles soient à l'endroit pour l'enfant, comme il est indiqué ci-contre:



Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez la tasse) et celle-ci est ici (désignez le canard).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à la fois dans le même ordre qu'elles ont été déposées. Mettez la carte n° 1 (le canard) à plat sur la table juste au-dessus des cartes retournées. La carte devrait être placée à quelques pouces en dessous du milieu de la rangée des cartes retournées, en disant :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci.

Soyez prêt à empêcher l'enfant de retourner les cartes et de regarder les images. Si l'enfant essaie de retourner les cartes, couvrez-les avec votre main et dites:

C'est un jeu de pointage, montre-le avec ton doigt.

Répétez pour la carte n°2 (la tasse).

MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

Si l'enfant n'identifie pas correctement où sont le canard et la tasse, refaites l'exercice, mais cette fois-ci renverser l'ordre des images placées en face de l'enfant. Dites:

Maintenant, nous allons essayer d'une façon différente. Je vais mettre ce dessin-ci (le canard) ici [votre droite] et celui-ci (tasse) ici [votre gauche].

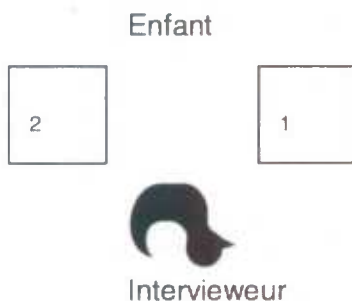
Tout en parlant, disposer les cartes pour qu'elles soient à l'endroit pour l'enfant, de sa gauche vers sa droite, et dites :



Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez le canard) et celle-ci est ici (désignez la tasse).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à la fois dans le même ordre qu'elles ont été disposées. Mettez la carte n°1 (le canard) à plat sur la table juste au-dessus des cartes retournées. La carte devrait être placée à quelques pouces en dessous du milieu de la rangée des cartes retournées, en disant :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci.

Soyez prêt à empêcher l'enfant de retourner les cartes et de regarder les images. Si l'enfant essaie de retourner les cartes, couvrez-les avec votre main et dites:

C'est un jeu de pointage, montre-le avec ton doigt.

Répétez pour la carte n°2 (la tasse).

Cette question n'est pas notée. Si l'enfant avait échoué les 2 essais allez à la section II, Motricité globale.

I. MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (suite)

2. **Maintenant, nous allons essayer d'une façon différente. Je vais mettre ce dessin-ci ici (la maison à votre droite), celui-ci ici (le canard au milieu) et celui-ci ici (la tasse à votre gauche).**

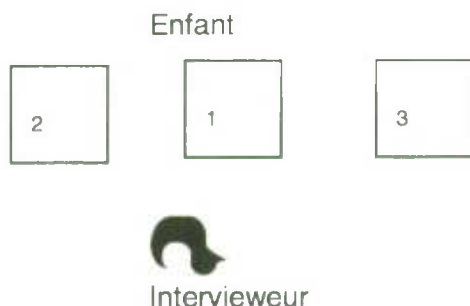
Tout en parlant, disposer les cartes pour qu'elles soient à l'endroit pour l'enfant, de sa gauche vers sa droite, et dites



Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez la maison) celle-ci est ici (désignez le canard) et celle-ci est ici (désignez la tasse).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à une dans le même ordre qu'elles ont été disposées de votre droite vers votre gauche. Montrez les cartes de manière à ce qu'on puisse les désigner par ordre numérique (1-canard, 2-tasse, 3-maison), mettez-les une à une à plat sur la table en dessus des cartes retournées. Dites :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci,

pour chaque carte que vous disposez. Même si l'enfant fait une erreur à la première ou à la deuxième carte, montrez-lui les trois cartes. Si l'enfant réussit les 3 cartes, inscrire le résultat sur la page suivante et allez à la section II, Motricité globale.

MOTRICITÉ VISUELLE/CAPACITÉ D'ADAPTATION (fin)

Si l'enfant n'identifie pas les trois cartes correctement, refaites l'exercice en disant:

Maintenant, nous allons essayer d'une façon différente. Je vais mettre ce dessin-ci ici [la tasse à votre droite], **celui-ci ici** (la maison au milieu) **et celui-ci ici** (le canard à votre gauche).

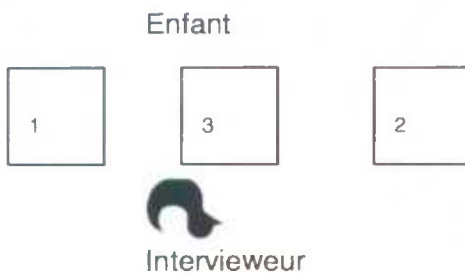
Tout en parlant, disposer les cartes pour qu'elles soient à l'endroit pour l'enfant, de sa gauche vers sa droite, et dites



Regarde les cartes attentivement et souviens-toi de leur place – celle-ci est ici (désignez la tasse) **celle-ci est ici** (désignez la maison) **et celle-ci est ici** (désignez le canard).

Maintenant, je vais les tourner.

Tournez les cartes à l'envers une à une dans le même ordre qu'elles ont été disposées de votre droite vers votre gauche. Montrez les cartes de manière à ce qu'on puisse les désigner par ordre numérique (1-canard, 2-tasse, 3-maison), mettez-les une à une à plat sur la table en dessus des cartes retournées (plus près de vous) en disant :



Pointe du doigt la carte sur laquelle il y a un dessin exactement comme celui-ci,

pour chaque carte que vous disposez. Même si l'enfant fait une erreur à la première ou à la deuxième carte, montrez-lui les trois cartes.

☐ ⁴ Réussi (premier essai) [2]

☐ ⁵ Réussi (deuxième essai) [2]

☐ ⁶ Pas réussi

☐ ⁹ Refus

II. MOTRICITÉ GLOBALE

A. ÉQUILIBRE

Maintenant, nous allons jouer à des jeux debout.

Vous et l'enfant devriez être debout pour que l'enfant ait de la place pour se balancer sans qu'il puisse être tenté de se tenir ou de s'appuyer sur quelque chose. Dites:

Maintenant, je veux voir si tu sais rester en équilibre sur un pied, comme cela, pendant que je compte jusqu'à 10.

Faites une brève démonstration. Aussitôt que l'enfant lève un pied, comptez à haute voix lentement jusqu'à 10, à intervalles d'une seconde.

Maintenant, reste en équilibre sur l'autre pied pendant que je compte jusqu'à 10.

L'enfant peut faire jusqu'à 3 essais sur chaque pied. Ne comptez pas les faux départs ou des périodes d'équilibre d'une ou deux secondes comme essai à moins que ce soit le mieux que l'enfant puisse faire. Si l'enfant a beaucoup de difficulté avec cette tâche, ne faites pas tous les essais.

- ☐ ¹ Capable de rester en équilibre pour 5 secondes sur chaque pied [2]
- ☐ ² Capable de rester en équilibre pour 3 ou 4 secondes sur l'un ou l'autre des pieds [1]
- ☐ ³ Pas réussi
- ☐ ⁹ Refus

B. SAUTILLEMENT SUR UN PIED (à cloche pied)

Je veux que tu sautes 5 fois sur un pied.

Si l'enfant hésite, montrez-lui comment sauter. Comptez le nombre de saut à haute voix lorsque que l'enfant saute.

Maintenant saute 5 fois sur l'autre pied.

Comptez le nombre de saut à haute voix lorsque que l'enfant saute.

L'enfant peut faire jusqu'à 3 essais sur chaque pied.

- ☐⁴ Capable de sauter 5 fois sur chaque pied [2]
- ☐⁵ Capable de sauter 3 ou 4 fois sur l'un ou l'autre des pieds [1]
- ☐⁶ Pas réussi
- ☐⁹ Refus

C. SAUTILLEMENT D'UN PIED À L'AUTRE

Je veux maintenant que tu sautilles d'un pied à l'autre.

Faites une démonstration si l'enfant hésite. Cochez « Ne peut le faire » si l'enfant saute au lieu de sautiller.

- ☐⁵ Sautilles d'un pied à l'autre [2]
- ☐⁶ Ne peut le faire
- ☐⁹ Refus

VEUILLEZ INDiquer L'HEURE DE FIN (SELON L'HORAIRE DE 24 HEURES)

Exemple: 6h25 p.m. = 18h25

<input type="text"/>	<input type="text"/>	h	<input type="text"/>	<input type="text"/>
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RAPPEL: N'oubliez pas d'indiquer le code d'état final sur la page couverture .



Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Livret 5



Questionnaire CPM de Raven

Numéro de tâche	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Numéro de la personne	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>
Nom de famille de l'enfant	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Prénom de l'enfant	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Date de naissance de l'enfant	Âge en mois
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
AAAA -- MM -- JJ	

Confidentiel une fois rempli.

English on reverse.

Renseignements recueillis en vertu de la Loi sur
la statistique, Lois revisées du Canada, 1985,
chapitre S19.

CODE D'ÉTAT FINAL DU LIVRET

- 000 ☐ Complet
001 ☐ Partiel
034 ☐ Pas de contact
030 ☐ Refus du parent
031 ☐ Refus de l'enfant
018 ☐ Hors cible
099 ☐ Autre NR (Précisez)

Commentaires:

8-5300-338: 11-08-1999 STC/HLD-040-75020

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Statistique
Canada

Statistics
Canada

Canada

Note à l'intervieweur:

Les réponses exactes des deux séries de problèmes sont présentées dans le tableau suivant.

Série A		Série A _B	
1	4	1	4
2	5	2	5
3	1	3	1
4	2	4	6
5	6	5	2
6	3	6	1
7	6	7	3
8	2	8	4
9	1	9	6
10	3	10	3
11	4	11	5
12	5	12	2

À LIRE À L'ENFANT CHOISI

Nous ferons une activité ensemble avec ce livret. Il contient des images qui ressemblent à des casse-tête.

VEUILLEZ INDIQUER L'HEURE DU DÉBUT (SELON LE FORMAT DE 24 HEURES)

Exemple: 1 h 00 p.m. = 13 h 00

<input type="text"/>	<input type="text"/>	h	<input type="text"/>	<input type="text"/>
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PROBLÈME A1

Ouvrez le livret à la page du premier problème, A1.

Regarde cette image.

Pointez l'image supérieure ...

Tu vois, c'est un motif dont on a découpé un morceau. Chacun des morceaux ci-dessous ...

Pointez chacun des morceaux,

...a la bonne forme, mais seulement un d'entre eux a le bon motif. Le morceau numéro 1 a la bonne forme mais n'a pas le bon motif. Le morceau numéro 2 n'est pas un motif du tout. Le morceau numéro 3 est tout à fait autre chose. Le morceau numéro 6 convient presque, mais pas ici.

Pointez le morceau blanc (numéro 6)...

Un seul morceau est le bon. Montre-moi le morceau qui permet de compléter le motif, ou qui entre ici.

Pointez l'espace qui doit être rempli.

Si l'enfant ne donne pas la bonne réponse, indiquez quel est le morceau approprié et répétez l'explication jusqu'à ce que l'enfant comprenne la nature du problème. Pour ce problème seulement, vous pouvez varier quelque peu l'explication afin d'aider l'enfant à comprendre.

Cochez le numéro de la réponse pour A1 sur la feuille de pointage au centre de ce livret.

PROBLÈME A2

Passez au problème A2.

Maintenant, pointe du doigt le morceau qui entre ici.

Pointez l'espace qui doit être rempli.

*Cochez le numéro de la réponse pour A2 sur la feuille de pointage.
Si le problème est résolu correctement, passez au problème suivant (#A3).*

*Si l'enfant ne pointe pas le bon morceau, répétez la démonstration du problème A1.
Passez ensuite au problème A2 et demandez à l'enfant de le résoudre.*

Si le problème est résolu correctement, passez au problème suivant (#A3).

Si le problème n'est pas encore résolu correctement, mettez fin à l'activité. Cochez sur la feuille de pointage dans la colonne FIN que le questionnaire s'est terminé à A2, en indiquant l'heure à laquelle a pris fin l'activité à la page 9.

Merci. Tu as travaillé fort.

PROBLÈME A3

Passez au problème A3.

Pointe du doigt le morceau qui entre ici.

Pointez l'espace qui doit être rempli.

*Cochez le numéro de la réponse pour A3 sur la feuille de pointage.
Si le problème est résolu correctement, passez au problème suivant (#A4).*

Si l'enfant ne pointe pas le bon morceau, répétez la démonstration du problème A1, puis passez au problème A3 et demandez à l'enfant de le résoudre.

Si le problème A3 est résolu correctement, passez au problème suivant (# A4).

Si le problème n'est pas encore résolu correctement, mettez fin à l'activité. Cochez sur la feuille de pointage dans la colonne FIN que le questionnaire s'est terminé à A3, en indiquant l'heure à laquelle a pris fin l'activité à la page 9.

Merci. Tu as travaillé fort.

PROBLÈMES A4 ET A5

Avant que l'enfant n'ait le temps de désigner l'un des morceaux, dites...

Regarde attentivement ces morceaux.

Pointez du doigt tous les morceaux, l'un après l'autre.

Seulement un de ces morceaux permet de compléter le motif. Fais attention. Regarde d'abord chacun des six morceaux.

Pointez du doigt chacun des six morceaux.

Maintenant, pointe du doigt le morceau qui entre ici.

Pointez l'espace à remplir.

Une fois que l'enfant a désigné l'un des morceaux, que ce soit le bon ou non, dites...

Est-ce que c'est le morceau qui entre ici?

Si l'enfant répond "oui", acceptez son choix, qu'il soit correct ou non. Cochez le numéro de la réponse sur le feuille de pointage.

Si l'enfant veut modifier son choix, dites...

D'accord. Montre-moi le bon morceau.

Si l'enfant a résolu les problèmes A1 à A5, passez au problème A6.

*Si l'enfant ne parvient pas à résoudre **A4 et A5**, terminez ici. Cochez sur la feuille de pointage dans la colonne FIN que le questionnaire s'est terminé à A4, en indiquant l'heure à laquelle a pris fin l'activité à la page 9.*

Merci. Tu as travaillé fort.

Note : Peu importe le stade, entre A1 et A5, le problème A1 peut être utilisé pour montrer à l'enfant ce qu'il faut faire. Faites cela en demandant à l'enfant d'essayer à nouveau. Une fois que l'enfant commence A6, il ou elle doit effectuer le reste de la série A ainsi que la série A_B. L'enfant peut être en mesure de résoudre certains problèmes même s'il n'a pas réussi à en résoudre plusieurs autres.

PROBLÈMES A6 À A12

Regarde attentivement le motif. Lequel de ces morceaux ...

Pointez du doigt chacun des morceaux.

...entre ici?

Pointez l'espace à remplir.

**Fais attention. Il n'y a qu'un seul morceau qui peut y entrer. Lequel?
Assure-toi d'avoir le bon morceau avant de me le montrer.**

- *Si l'enfant semble hésiter, dites...*

Si tu n'es pas sûr(e), tu peux deviner. Parfois, on devine correctement.

Cochez le numéro de la réponse définitive sur la feuille de pointage.

- *Si l'enfant ne veut pas deviner, proposez ...*

**Voudrais-tu passer au prochain et revenir à celui-ci plus tard?
Rappelle-moi que tu veux essayer de nouveau plus tard.**

Si, lorsque l'enfant est aux prises avec un problème difficile, il ou elle n'a pas de réponse et ne veut pas non plus essayer de deviner, cochez «Ne Sait Pas» sur la feuille de pointage pour le problème en question.

Présentez chacun des problèmes restants de la série A en donnant au besoin les mêmes instructions que pour A6.

- *Si l'enfant attire votre attention sur des imperfections mineures des dessins, dites-lui qu'il(elle) n'a pas à en tenir compte.*
- *Si l'enfant semble bloquer sur un problème en particulier, proposez de passer aux problèmes suivants. Par la suite, il ou elle peut revenir au problème qui comportait des difficultés.*
- *Si cela paraît nécessaire afin de progresser, demandez à l'enfant de deviner.*

UNE FOIS QUE LA SÉRIE A EST TERMINÉE, PASSEZ AU PROBLÈME A_B1.

PROBLÈMES A_B1 À A_B5

Regarde attentivement ce motif.

Tu vois comment ça marche. Quel sera le prochain?

Pointez du doigt chacune des trois figures du motif ainsi que l'espace à remplir.

Pointe du doigt le morceau qui va ici.

Pointez du doigt chacun des morceaux...

Fais attention. Regarde chaque morceau, l'un après l'autre. Un seul est le bon. Lequel?

Après que l'enfant a désigné l'un des morceaux, correctement ou non, demandez ...

Est-ce que c'est le bon morceau pour compléter le motif?

Pointez du doigt le motif et l'espace à remplir. Si la réponse est «oui», inscrivez le numéro de la réponse sur la feuille de pointage.

Si l'enfant veut modifier son choix, dites ...

D'accord. Montre-moi le bon morceau.

Que la réponse soit correcte ou encore incorrecte ...

Est-ce que c'est le bon morceau?

Si l'enfant répond «oui», acceptez la réponse, que le choix soit correct ou non. Si l'enfant semble avoir des doutes, dites ...

Lequel des morceaux est vraiment le bon, d'après toi?

Cochez le numéro du choix définitif de l'enfant sur la feuille de pointage.

PROBLÈMES A_B6 À A_B12

Au besoin, les instructions pour le problème A_B6 peuvent être données pour chacun des problèmes restants de la série A_B. L'enfant continue jusqu'à ce que la série A_B soit terminée.

Si l'enfant a fait une erreur, ou s'il ou elle veut modifier sa réponse, effacez la réponse incorrecte et cochez le numéro du choix définitif sur la feuille de pointage.

Dans le cas du problème A_B6, il ne faut plus demander à l'enfant si la réponse est correcte. Dites simplement ...

Regarde attentivement le motif.

Pointez du doigt toutes les figures, l'une après l'autre, ainsi que l'espace à remplir.

Fais attention. Seulement un de ces morceaux permet de compléter correctement le motif.

Pointez du doigt les morceaux, l'un après l'autre.

Lequel est le bon?

Cochez le numéro du choix définitif sur la feuille de pointage.

Une fois que la série A_B est terminée, notez l'heure à laquelle a pris fin l'activité à l'endroit désigné ci-dessous.

L'enfant ne fait pas la série B.

Merci. Tu as travaillé fort.

VEUILLEZ INDIQUER L'HEURE DE FIN (SELON LE FORMAT DE 24 HEURES)

exemple: 1h15 p.m. = 13h15

		h		
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SCORING SHEET

Check the circle corresponding to the child's final response for each problem.

	PROBLEM	RESPONSE	END
SET A	A1	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	<input type="radio"/>
Score: <div> <input type="text"/> <input type="text"/> </div>	A2	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	<input type="radio"/>
	A3	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	<input type="radio"/>
	A4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	<input type="radio"/>
	A5	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	<input type="radio"/>
	A6	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A7	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A8	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A9	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A10	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A11	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A12	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	For office use only.		
SET A _B	A _B 1	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
Score: <div> <input type="text"/> <input type="text"/> </div>	A _B 2	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 3	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 5	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 6	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 7	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 8	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 9	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 10	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 11	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	A _B 12	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> DON'T KNOW	
	For office use only.		

FEUILLE DE POINTAGE

Cochez le cercle correspondant à la réponse finale de l'enfant pour chaque problème.

	PROBLÈME	RÉPONSE	FIN
SERIE A	A1	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	<input type="radio"/>
Pointage: <input type="text"/> <input type="text"/> À l'usage du bureau seulement.	A2	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	<input type="radio"/>
	A3	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	<input type="radio"/>
	A4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	<input type="radio"/>
	A5	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	<input type="radio"/>
	A6	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A7	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A8	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A9	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A10	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A11	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A12	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	SERIE A _B	A _B 1	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS
Pointage: <input type="text"/> <input type="text"/> À l'usage du bureau seulement.	A _B 2	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 3	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 5	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 6	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 7	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 8	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 9	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 10	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 11	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	
	A _B 12	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> NE SAIT PAS	



National Longitudinal Survey of Children and Youth

Understanding the Early Years

Booklet 5



Raven's CPM Questionnaire

Interviewer Assignment #	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Person ID	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Child's Last Name	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Child's First Name	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Child's Date of Birth	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Age in Months
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
YYYY -- MM -- DD	

Confidential when completed.

Version française au verso.

Collected under the authority of the Statistics
Act, Revised Statutes of Canada, 1985, Chapter
S19.

BOOKLET FINAL STATUS CODE

- 000 ☐ Complete
- 001 ☐ Partial
- 034 ☐ No Contact
- 030 ☐ Refusal by Parent
- 031 ☐ Refusal by the Child
- 018 ☐ Out of Scope
- 099 ☐ Other NR (Specify)

Comments: _____

B-5300-338 1999-08-11 STC/HLD-040-75020

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Statistics
Canada

Statistique
Canada

Canada

Note to Interviewer:

The correct answer for the two sets of problems are presented in the following table.

Set A		Set A _B	
1	4	1	4
2	5	2	5
3	1	3	1
4	2	4	6
5	6	5	2
6	3	6	1
7	6	7	3
8	2	8	4
9	1	9	6
10	3	10	3
11	4	11	5
12	5	12	2

READ TO THE SELECTED CHILD

We will do an activity together with this booklet. It contains pictures, which are like puzzles.

PLEASE INDICATE START TIME (24 HOUR CLOCK)

example: 1:00 p.m. = 13:00

<input type="text"/>	<input type="text"/>	:	<input type="text"/>	<input type="text"/>
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PROBLEM A1

Open the booklet at the first problem, A1.

Look at this.

Point to the upper figure.

You see, it is a pattern with a piece cut out of it. Each of these pieces below...

Point to each in turn,

...is the right shape to fill the space, but only one of them is the right pattern. Number 1 is the right shape, but is not the right pattern. Number 2 is not a pattern at all. Number 3 is quite wrong. Number 6 is nearly right, but is wrong here.

Point to the white piece in Number 6.

Only one is right. You point to the piece, which is correct to complete the pattern, or which fits in here.

Point to the space to be filled.

If the child does not then point to the right piece, repeat your explanation until the child understands the nature of the problem. For this problem only, you may vary your wording somewhat to help the child understand.

Check the number of the answer for A1 on the scoring sheet on the middle page of this booklet.

PROBLEM A2

Turn to problem A2.

Now point to the piece, which goes in here.

Point to the space to be filled.

*Check the number of the answer for A2 on the scoring sheet.
If problem is solved correctly, turn to the next problem (#A3).*

*If the child does not point to the right piece, repeat the demonstration of problem A1.
Then go to problem A2 and ask the child for an answer to problem A2.*

If problem is solved correctly, turn to the next problem (#A3).

If the problem is still not solved correctly, end the activity. Check on the scoring sheet in the END column that the questionnaire has ended at problem A2 and note the end time of the activity on page 9.

Thank you. You have worked hard.

PROBLEM A3

Turn to problem A3.

Point to the piece, which goes in here.

Point to the space to be filled.

*Check the number of the answer for A3 on the scoring sheet.
If problem is solved correctly, turn to the next problem (#A4).*

*If the child does not point to the right piece, repeat the demonstration of problem A1.
Then go to problem A3 and ask the child for an answer to problem A3.*

If problem is solved correctly, turn to the next problem (#A4).

If the problem is still not solved correctly, end the activity. Check on the scoring sheet in the END column that the questionnaire has ended at problem A3 and note the end time of the activity on page 9.

Thank you. You have worked hard.

PROBLEMS A4 AND A5

Before the child has time to point to one of the pieces, say...

Look carefully at these pieces.

Move your fingers across the pieces.

Only one of these pieces is right to complete the pattern. Be careful. Look at each of the six pieces first.

Point to each of the six pieces.

Now you point to the right one to go in here.

Point to the space.

When the child has pointed to one of the pieces, whether it is right or wrong, say...

Is that the right one to go in here?

If the child says "yes", accept the choice, whether right or wrong. Check the number of the answer on the scoring sheet.

If the child wants to change the choice, say...

All right. Point to the one that is right.

If problems A1 to A5 are solved correctly, turn to A6.

*If the child is not able to solve **A4 and A5**, end here. Check on the scoring sheet in the END column that the questionnaire has ended at A4 and note the end time of the activity on page 9.*

Thank you. You have worked hard.

Note: At any stage between A1 and A5, problem A1 can be used to show the child what has to be done. Do this by asking the child to try again. Once the child starts at A6, he or she is to continue for the rest of Set A and for Set A_B. He or she may be able to do some problems even after missing several.

PROBLEMS A6 TO A12

Look at the pattern carefully. Now which of these pieces...

Point to each in turn.

...goes in here?

Point to the space to be filled.

Be careful. Only one is right. Which one is it? Be sure you find the right one before you point to it.

- *If the child seems stuck, say...*

If you are not sure, you may guess. Guesses are sometimes correct.

On the scoring sheet, check the number of the final choice.

- *If the child doesn't want to guess, suggest...*

Why don't you go on to the next one and come back to this one later? Remind me that you want to try it again later.

If, when the child comes to a difficult item, and he or she does not have an answer and doesn't want to guess or wait, check "Don't Know" on the scoring sheet for that item.

Present each remaining problem in Set A, giving the same instructions as for A6, if they are needed.

- *If the child is concerned about minor defects in the drawings, assure him or her that they do not need to worry about that.*
- *If the child seems to get stuck on a particular problem, suggest that they move on and see if they can do later problems. They can then come back to the problem that caused the difficulties.*
- *If in order to make progress, it seems necessary to do so, ask the child to guess.*

AT THE END OF SET A, TURN TO PROBLEM A_B1.

PROBLEMS A_B1 TO A_B5

Look at this pattern carefully.

You see how it goes. What will this one be?

Point in turn to each of the three figures on the pattern and the space to be filled.

Point to the right one of these to go here.

Point to each of the possible answer figures in turn.

Be careful. Look at each one in turn. Only one is right. Which one is it?

After the child has pointed to one of the pieces, whether it is right or wrong, ask...

Is that the right one to complete the pattern?

Point to the pattern and the space to be filled. If the answer is "yes", record the number of the answer on the scoring sheet.

If the child wants to change the choice, say....

All right. Point to the one that is right.

Whether the answer is right or wrong again....

Is that the right one?

If the child is satisfied, whether the choice is right or wrong, accept it. If there seems to be doubt, say...

Which do you think is really right?

Check the number of the child's final choice on the scoring sheet.

PROBLEMS A_B6 TO A_B12

The instructions for A_B6 can be given to the child for each remaining problem of Set A_B if they are needed. The child continues until Set A_B is completed.

If a mistake has been made or the child wants to change his or her answer, erase the incorrect answer and check the number of the final choice on the scoring sheet.

For problem A_B6, the child should not be asked if the answer is right. Simply...

Look carefully at the pattern.

Point to each of the figures in turn and the space to be filled.

Be careful. Only one of these pieces completes the pattern properly.

Point to each in turn.

Which is it?

Record the number of the final choice on the scoring sheet.

When Set A_B is completed, note the end time of the activity below.

The child does not complete Set B.

Thank you. You have worked hard.

PLEASE INDICATE END TIME (24 HOUR CLOCK)

example: 1:15 p.m. = 13:15

		:		
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APPENDIX G

Parent Questionnaire - Booklet 7



National Longitudinal Survey of Children and Youth

Understanding the Early Years Parent Questionnaire

Booklet 7



Interviewer Assignment #

Person ID

Child's Last Name

Child's First Name

Child's Date of Birth

YYYY

MM

DD

Child's Age in Months

Confidential when completed

Collected under the authority of the
Statistics Act, Revised Statutes of
Canada, 1985, Chapter S19.

Version française au verso

If address on Control Form is incorrect or incomplete make
corrections below:

Street & No

City/Town

Province

Postal Code

Record of Calls/Visits

	Date	Time	Comments
1			
2			
3			
4			
5			
6			
7			
8			
9			

Booklet Final Status Code

- 000 ☐ Complete
- 001 ☐ Partial
- 034 ☐ No Contact
- 030 ☐ Refusal
- 018 ☐ Out of Scope
- 099 ☐ Other NR (SPECIFY)

Comments



Telephone contact - -

Enter start time (using 24 hour clock) : Example: 6:15pm = 18:15

Hello, I'm ... from Statistics Canada.

1. Is this the household of (NAME OF PARENT APPEARING ON CONTROL FORM)?

I am contacting you about the National Longitudinal Survey of Children and Youth. We are conducting this survey to collect information on children, their development and families.

2. Would you prefer to be interviewed in English or in French?

- 1 ☐ English
2 ☐ French

Your answers will be kept strictly confidential and used only for statistical purposes. While participation is voluntary, your assistance is essential if the results are to be accurate.

The next few questions are about _____ and his/her family.
(SELECTED CHILD)

3. Does _____ live in this household most of the time?
(SELECTED CHILD)

- 1 ☐ Yes ➡ ENTER NAME ON LINE 1 BELOW AND GO TO QUESTION 4
2 ☐ No



END INTERVIEW

4. Now, I'd like to confirm your address of residence. Is it still ... ? CONFIRM ADDRESS ON CONTROL FORM AND MAKE ANY NECESSARY CORRECTIONS ON FRONT PAGE OF QUESTIONNAIRE.

5. Who in the household would be able to answer questions about _____ ?
(SELECTED CHILD)

ENTER FULL NAME ON LINE 2 BELOW AND CHECK PERSON MOST KNOWLEDGEABLE CIRCLE.

6. Who in the household is your spouse/the spouse of the Person Most Knowledgeable? ENTER NAME ON LINE 3 AND CHECK SPOUSE/PARTNER CIRCLE OR


- 1 ☐ No spouse/partner in household

7. Does anyone else live in the household? ENTER THEIR NAMES IN LINES 4 TO 10.

	First name	Last name	Check appropriate box
1			1 <input type="radio"/> Selected child
2			1 <input type="radio"/> Person Most Knowledgeable 2 <input type="radio"/> Spouse/partner
3			1 <input type="radio"/> Person Most Knowledgeable 2 <input type="radio"/> Spouse/partner
4			
5			
6			
7			
8			
9			
10			

A Demographics


Now, I would like to ask some general background questions. *COLLECT INFORMATION ON PERSON MOST KNOWLEDGEABLE, SPOUSE/PARTNER IF APPLICABLE AND SELECTED CHILD ONLY.*

	Person Most Knowledgeable	Spouse/partner	Selected child
Transcribe the names of the household members 	<div></div>	<div></div>	<div></div>
1. What is ____'s relationship to ____? <i>(WRITE NAME OF PERSON MOST KNOWLEDGEABLE)</i>		1 <input type="radio"/> Husband/wife 2 <input type="radio"/> Common-law partner 3 <input type="radio"/> Other	1 <input type="radio"/> Birth child 2 <input type="radio"/> Step child 3 <input type="radio"/> Adopted child 4 <input type="radio"/> Foster child 5 <input type="radio"/> Other
2. What is your/ ____'s relationship to ____? <i>(WRITE NAME OF SPOUSE/PARTNER)</i>	1 <input type="radio"/> Husband/wife 2 <input type="radio"/> Common-law partner 3 <input type="radio"/> Other		1 <input type="radio"/> Birth child 2 <input type="radio"/> Step child 3 <input type="radio"/> Adopted child 4 <input type="radio"/> Foster child 5 <input type="radio"/> Other
3. What is your/ ____'s age?	<div></div> Years	<div></div> Years	1 <div></div> Years 2 <div></div> Months
4. What is your/ ____'s date of birth?	<div></div> Day <div></div> Month <div></div> Year	<div></div> Day <div></div> Month <div></div> Year	<div></div> Day <div></div> Month <div></div> Year
5. What is your/ ____'s gender / sex?	1 <input type="radio"/> Male 2 <input type="radio"/> Female	1 <input type="radio"/> Male 2 <input type="radio"/> Female	1 <input type="radio"/> Male 2 <input type="radio"/> Female
6. What is your/ ____'s marital status?	1 <input type="radio"/> Legally married 2 <input type="radio"/> Common-law 3 <input type="radio"/> Living with a partner (same sex) 4 <input type="radio"/> Single (never married) 5 <input type="radio"/> Widowed 6 <input type="radio"/> Separated 7 <input type="radio"/> Divorced	1 <input type="radio"/> Legally married 2 <input type="radio"/> Common-law 3 <input type="radio"/> Living with a partner (same sex) 4 <input type="radio"/> Single (never married) 5 <input type="radio"/> Widowed 6 <input type="radio"/> Separated 7 <input type="radio"/> Divorced	

7. How many children older than _____ (SELECTED CHILD) Children

8. How many younger? Children

B Socio-Demographics

	Person most knowledgeable	Spouse/partner	Selected child
Transcribe the names of the household members 	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
1. In what country were you/ was _____ born?	1 <input type="radio"/> Canada (GO TO QUESTION 3) 2 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> Canada (GO TO QUESTION 3) 2 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> Canada (GO TO QUESTION 3) 2 <input type="radio"/> Other (SPECIFY) _____
2. In what year did you/ _____ first immigrate to Canada?	<input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/>	<input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/>	<input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/>
3. Which of the official languages (English and French) do you/does _____ speak well enough to conduct a conversation?	1 <input type="radio"/> English only 2 <input type="radio"/> French only 3 <input type="radio"/> Both English and French 4 <input type="radio"/> Neither English or French	1 <input type="radio"/> English only 2 <input type="radio"/> French only 3 <input type="radio"/> Both English and French 4 <input type="radio"/> Neither English or French	1 <input type="radio"/> English only 2 <input type="radio"/> French only 3 <input type="radio"/> Both English and French 4 <input type="radio"/> Neither English or French
4. What is the language that you / _____ first learned in childhood and can still understand(s)? (MARK ALL THAT APPLY) FOR A CHILD WHO IS NOT YET SPEAKING, INDICATE THE LANGUAGE HE/SHE IS EXPECTED TO LEARN FIRST.	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other (SPECIFY) _____
5. What language do you / does _____ speak most often at home?	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other – Same as Question 4 4 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other – Same as Question 4 4 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other – Same as Question 4 4 <input type="radio"/> Other (SPECIFY) _____

	Person most knowledgeable	Spouse/partner	Selected child
6. What language do you / does _____ most often speak to _____ in? (SELECTED CHILD)	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other – Same as Question 5 4 <input type="radio"/> Other (SPECIFY) _____	1 <input type="radio"/> English 2 <input type="radio"/> French 3 <input type="radio"/> Other – Same as Question 5 4 <input type="radio"/> Other (SPECIFY) _____	

MAKE AN APPOINTMENT FOR A HOME VISIT. RECORD THE APPOINTMENT TIME ON THE FRONT COVER.

For Parents of Children 3 to 5 years old

7. We will be doing some activities with _____ . Would you like these activities done in English or French?
 (SELECTED CHILD)

1 ☐ English
 2 ☐ French

IF THE PARENT NEEDS MORE INFORMATION ABOUT THE ACTIVITIES, REFER TO YOUR INTERVIEWER'S MANUAL.

THIS IS THE END OF THE TELEPHONE PORTION.

Enter end time (using 24 hour clock)

 :

Enter start time of home interview (using 24 hour clock)

:



Child Health

The next questions are about _____ 's health.
(SELECTED CHILD)

1. Over the past few months, how often has ... been in good health?

- 1 ☐ Almost all the time
2 ☐ Often
3 ☐ About half the time
4 ☐ Sometimes
5 ☐ Almost never

2. What is ...'s height in feet and inches or in metres/centimetres (without shoes on)?

1 Feet Inches
OR

2 • Metres/Centimetres

999 ☐ Don't know

3. What is ...'s weight in kilograms (and grams) or in pounds?

1 • Kilograms.grams
OR

2 Pounds

999 ☐ Don't know

4. The following are questions concerning's birth.
What was his/her birth weight in kilograms and grams or pounds and ounces?

1 • Kilograms.grams
OR

2 Pounds Ounces

999 ☐ Don't know

5. Was ... born before the due date?

- 1 ☐ Yes
2 ☐ No ➡ GO TO QUESTION 7

6. How many weeks before the due date was ... born?

1 Weeks

00 ☐ Less than one week

99 ☐ Don't know

7. In your opinion, how physically active is ... compared to other children of the same age and sex?
(READ LIST.)

- 1 ☐ Much more
2 ☐ Moderately more
3 ☐ Equally
4 ☐ Moderately less
5 ☐ Much less

8. In the following questions, long-term conditions refer to conditions that have lasted or are expected to last 6 months or more and have been diagnosed by a health professional. Does ... have any of the following long-term conditions:

(READ LIST. MARK ALL THAT APPLY)

- 01 ☐ food or digestive allergies?
- 02 ☐ respiratory allergies such as hay fever?
- 03 ☐ any other allergies?
- 04 ☐ bronchitis?
- 05 ☐ heart condition or disease?
- 06 ☐ epilepsy?
- 07 ☐ cerebral palsy?
- 08 ☐ kidney condition or disease?
- 09 ☐ mental handicap?
- 10 ☐ learning disability?
- 11 ☐ emotional, psychological or nervous difficulties?
- 12 ☐ any other long term condition? *Specify*

13 ☐ none

9. Does ... have any long term conditions or health problems that prevent or limit his/her participation in school, at play, sports or in any other activity for a child of his/her age?

1 ☐ Yes

2 ☐ No

10. Does ... have trouble seeing?

1 ☐ Yes

2 ☐ No ➡ GO TO QUESTION 12

11. Has this been corrected (e.g. by glasses or surgery)?

1 ☐ Yes

2 ☐ No

12. Can ... see different colours?
(THAT IS, HE/SHE IS NOT COLOUR BLIND)

1 ☐ Yes

2 ☐ No

3 ☐ Don't know

13. Since his/her birth, has ... had an ear infection (otitis)?

1 ☐ Yes

2 ☐ No ➡ GO TO QUESTION 15

14. How many times?

1 ☐ Once

2 ☐ 2 times

3 ☐ 3 times

4 ☐ 4 or more times

15. Does ... have trouble hearing?

1 ☐ Yes

2 ☐ No ➡ GO TO QUESTION 17

16. Has this been corrected (e.g. by a hearing aid or surgery)?

1 ☐ Yes

2 ☐ No

17. Has ... ever had trouble walking, climbing, reaching, holding on to things?

1 ☐ Yes

2 ☐ No

18. Which hand does ... use when drawing figures?

1 ☐ Right

2 ☐ Left

3 ☐ Don't know

4 ☐ Does not draw yet

19. Is ... presently on any medications?

1 ☐ Yes ➡ Specify _____

2 ☐ No

D

Child Development - for children 0-2 years only

3-5 YEAR OLDS ➡ GO TO SECTION E - ACTIVITIES (PAGE 10)

THIS SECTION IS ASKED ONLY IF THE RESPONDENT IS A BIRTH, STEP OR ADOPTIVE PARENT OF THE SELECTED CHILD.

This next set of questions asks about how you think most infants and young children act, how they grow, and how to care for them.

Please answer each of the following questions based on young children in general. Do not answer about and how he/she acts. Think about what you know about young children you have had contact with or anything you have read.

1. First, for each statement I read, please tell me whether, for most babies, you agree or disagree with the statement, or are not sure.

	Agree	Disagree	Not sure
a. All infants need the same amount of sleep.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Some normal babies do not enjoy being cuddled.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. A child thinks he/she is speaking correctly even when he/she says words and sentences in an unusual or different way, like "I Goed to town" or "what the dolly have?".	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

2. Now, the next statements that I read are about the age at which young children can do something. If you think the age is about right, say you agree. If you don't agree, please tell me if you think an older or younger child can do it. If you aren't sure of the age, just tell me you aren't sure.

(USE REFERENCE CARD ITEM 1 FOR THIS QUESTION.)

	Agree	Older	Younger	Not sure
a. A one-year old knows right from wrong.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. Most infants are ready to be toilet trained by 1 year of age.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. One year-olds often co-operate and share when they play together.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. A baby is about 7 months old before he or she can reach for and grab things.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. A two-year old is able to reason logically, much as an adult would.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

The next questions have to do with when ... may have been able to do certain things. If you do not know the exact age, your best estimate is fine.

3. At what age (in months) did ... first sit him/herself up?

Months

OR

98 ☐ Not yet

99 ☐ Don't know

4. At what age (in months) did ... start eating solid food?

Months

OR

98 ☐ Not yet

99 ☐ Don't know

5. At what age (in months) did ... start feeding him/herself?

Months

OR

98 ☐ Not yet

99 ☐ Don't know

6. At what age (in months) did ... take his/her first steps?

Months

OR

98 ☐ Not yet ➡ GO TO QUESTION 8

99 ☐ Don't know

7. At what age (in months) did ... start walking confidently?

Months

OR

98 ☐ Not yet

99 ☐ Don't know

8. At what age (in months) did ... start saying his/her first words?

Months

OR

98 ☐ Not yet

99 ☐ Don't know

E Activities

The next section is about activities ... may participate in.

1. Does ... attend any of the following programs or activities? (MARK ALL THAT APPLY)

	Yes	No
a. Nursery school, preschool	1 <input type="radio"/>	2 <input type="radio"/>
b. Play group	1 <input type="radio"/>	2 <input type="radio"/>
c. Drop-in centre program	1 <input type="radio"/>	2 <input type="radio"/>
d. Infant stimulation program	1 <input type="radio"/>	2 <input type="radio"/>
e. Baby and me program (such as swimming)	1 <input type="radio"/>	2 <input type="radio"/>
f. A program to enhance children's learning and development	1 <input type="radio"/>	2 <input type="radio"/>
g. Library story time or other reading programs or book clubs	1 <input type="radio"/>	2 <input type="radio"/>
h. Music, dance or sports lessons	1 <input type="radio"/>	2 <input type="radio"/>

IF ALL ANSWERS ARE NO ➡ GO TO QUESTION 3

2. For about how many hours a week does ... attend these in total?

--	--

Hours per week

3. How often does ... do the following:

(USE REFERENCE CARD ITEM 2 FOR THIS QUESTION.)

	At least once a week	At least once a month	A few times a year	Never
a. visit the library or bookmobile (including school library)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. visit a toy library?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. visit an educational centre or workshop (such as a science centre or museum)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. attend movies, plays, zoos, music performances, etc?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. attend sports events, including recreational games (such as a hockey or baseball game)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. use recreational resources such as parks, recreational centres or swimming pools?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
g. use child activity or play centres?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

4. How many hours a day does ... spend watching TV programs or videos?

--	--

Hours per day

OR

00 ☐ None

F Literacy and Learning Activities

3-5 YEAR OLDS ➡ GO TO QUESTION 4

1. How often do you or your spouse/partner (IF APPLICABLE) get a chance to do the following with ...?

(USE REFERENCE CARD ITEM 3 FOR THIS QUESTION.)

	Rarely	A few times a month	Once a week	A few times a week	Daily
a. Play little games (e.g. peek-a-boo or patty cake)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. Take him/her shopping or on errands	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Read stories or show pictures or wordless baby books	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

1. How often do you or your spouse/partner (IF APPLICABLE) get a chance to do the following with ...?

(USE REFERENCE CARD ITEM 3 FOR THIS QUESTION)

	Rarely	A few times a month	Once a week	A few times a week	Daily
d. Tell stories	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Sing songs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Play finger/action songs or games (such as itsy bitsy spider)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Teach him/her new words	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Take him/her outside for a walk or to play in the yard, park, playground	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

2. Does another adult or youth do any of these activities with ...?

1 ☐ Yes
2 ☐ No

3. How many months old was ... when you started to read to him/her or show picture books?

Months



**GO TO SECTION H –
BEHAVIOUR (PAGE15)**

3-5 year olds



4. How often do you or your spouse/partner (IF APPLICABLE) get a chance to do the following with ...?

(USE REFERENCE CARD ITEM 3 FOR THIS QUESTION.)

	Rarely	A few times a month	Once a week	A few times a week	Daily
a. Take ... shopping or on errands	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. Read aloud to ...	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Tell stories	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Sing songs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Play finger/action songs or games (such as hokey pokey)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Teach ... to name printed letters	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Teach ... to name printed numbers	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Teach ... to read words	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Take ... outside for a walk or to play in the yard, park, playground	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. Involve ... in household chores	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
k. Encourage ... to build things (for example, with Lego or blocks)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
l. Encourage ... to do puzzles	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
m. Encourage ... to write or pretend to write	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
n. Encourage ... to talk and take time to listen	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
o. Play board games, such as Snakes and Ladders or Sorry / Trouble	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
p. Encourage ... to use numbers in day to day activities, e.g. counting the cookies on a plate, how many forks needed to set the table, how many stairs in a flight	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

5. Does another adult or youth do any of these activities with ...?

- 1 ☐ Yes
2 ☐ No

6. How old was ... when you started to read to him/her on a regular basis?

1 Years AND 2 Months

7. How often does ...

(USE REFERENCE CARD ITEM 3 FOR THIS QUESTION.)

	Rarely	A few times a month	Once a week	A few times a week	Daily	N/A
a. look at books or try to read on his/her own?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
b. read simple books?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
c. talk about a book with family or friends?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
d. use a computer at home for doing reading, writing, or number activities?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>

8. About how many children's books does ... have of his/her own?

- 1 ☐ None
 2 ☐ 1 or 2 books
 3 ☐ 3 to 9 books
 4 ☐ 10 or more

9. Does ... know basic colours, such as red, blue, yellow, white and black?

- 1 ☐ Yes
 2 ☐ No

10. Does ... know basic shapes, such as squares, triangles and circles?

- 1 ☐ Yes
 2 ☐ No

G Education - for 4 and 5 years only

3 YEARS OLDS ➡ GO TO SECTION H - BEHAVIOUR (PAGE 15)

The next section is about ...'s experiences at school.

1. Does ... currently attend school or home schooling?

- 1 ☐ Yes
 2 ☐ No ➡ GO TO SECTION H - BEHAVIOUR (PAGE 15)

2. What grade is ... in?

- 1 ☐ Junior kindergarten
 2 ☐ Kindergarten
 3 ☐ Taught at home (Home schooled)
 4 ☐ Other

3. In a typical week, how often is ... being taught at school (or at home)?
(READ LIST)

- 1 ☐ Full-days - every day
- 2 ☐ Half day - every day
- 3 ☐ Full days - alternate days
- 4 ☐ Half days - alternate days
- 5 ☐ Some other combination, *specify*

4. In what language is ... mainly taught in?

- 1 ☐ English
- 2 ☐ French
- 3 ☐ Both
- 4 ☐ Other (*SPECIFY*)

H Behaviour

4-5 YEAR OLDS ➡ GO TO QUESTION 8

The following questions relate to ...'s sleep patterns.

1. In general, how long does it take ... to go to sleep?

- 1 ☐ Less than 15 minutes
- 2 ☐ From 15 minutes to less than 30 minutes
- 3 ☐ From 30 minutes to less than 45 minutes
- 4 ☐ From 45 minutes to less than 60 minutes
- 5 ☐ 60 minutes or more

2. In general, how many hours in a row does .. sleep at night?

- 1 ☐ Less than 4 hours
- 2 ☐ From 4 hours to less than 5 hours
- 3 ☐ From 5 hours to less than 6 hours
- 4 ☐ From 6 hours to less than 7 hours
- 5 ☐ From 7 hours to less than 8 hours
- 6 ☐ 8 hours or more

GO TO
QUESTION 4

3. From what age has ... slept for six hours uninterrupted a night?

1 Years AND 2 Months

4. In general, what is the longest time ... naps during the day?

- 1 ☐ Less than 1 hour
- 2 ☐ From 1 hour to less than 2 hours
- 3 ☐ From 2 hours to less than 3 hours
- 4 ☐ From 3 hours to less than 4 hours
- 5 ☐ 4 hours or more

5. Does ... have a particular and long routine (more than 30 minutes) to go to bed (rocking, songs, nursery rhymes, etc.) that ... cannot go to sleep without?

- 1 ☐ Almost every time
- 2 ☐ Often
- 3 ☐ About half the time
- 4 ☐ Sometimes
- 5 ☐ Almost never

6. On average, how many times a night was your sleep interrupted by ... this past month?

- 1 ☐ Never
- 2 ☐ 1-2 times
- 3 ☐ 3-4 times
- 4 ☐ 5 times or more

7. Does ... have night terrors (that is, wakes up suddenly, crying, sometimes drenched in sweat and confused)?

- 1 ☐ Never
- 2 ☐ Sometimes
- 3 ☐ Often
- 4 ☐ Always

8. How many hours a day does ... sleep on average?
(INCLUDE BOTH DAYTIME NAPS AND SLEEP AT NIGHT).

Hours a day

9. Did ... sleep as usual yesterday?

- 1 ☐ Yes
- 2 ☐ No, slept less than usual
- 3 ☐ No, slept more than usual



**GO TO SECTION I –
CHILD CARE (PAGE 19)**

Now I would like to ask you some questions about how ... seems to feel or act.

10. For each of the following questions, please tell me if ... never, hardly ever, sometimes, often or always behaves or feels this way.

(USE REFERENCE CARD ITEM 4 FOR THIS QUESTION.)

	Never	Hardly ever	Sometimes	Often	Always
a. When ... has a problem with a puzzle or other toy that fits together does s/he keep on trying until s/he gets it together?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. If ... is doing something creative, does s/he persist with solving a problem, even when things go wrong for a while?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Can ... get another child to let her/him have a turn with something by asking?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Does ... have a good concentration span when working or playing with things that interest him/her?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Does ... make an effort to do something, even if s/he doesn't feel confident about it?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Does ... generally show independence when dressing?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Does ... generally show independence when washing?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Does ... need help with toileting?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Can ... clearly convey his/her needs and feelings?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. Does ... accomplish tasks for which he/she is responsible without having to be reminded?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

The next set of questions are about how ... communicates.

11. For each question, please tell me whether ... is never, hardly ever, sometimes, often or always able to communicate as follows.

(USE REFERENCE CARD ITEM 4 FOR THIS QUESTION.)

	Never	Hardly ever	Sometimes	Often	Always
a. When s/he is paying attention, is ... able to remember and carry out a simple instruction after hearing it only once?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. If s/he does not understand what someone has said will ... ask for it to be repeated or explained again?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

11.	Never	Hardly ever	Sometimes	Often	Always
c. Can ... follow what is being talked about in a conversation, and stay on the same topic (even if s/he does not always do so)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Does ... understand the story in a children's book that is being read to him/her or in a children's television program?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Can ... be relied on to pass simple messages from one person to another without getting the message mixed up?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Is ...'s speech easily understood, even by people who haven't met him/her before?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Does ... vary her/his speech to help get her/his ideas across, e.g., talk loudly, softly, enthusiastically, depending on the situation?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Does ... experiment with language, e.g., by using new words or expressions?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Does ... clearly explain about things s/he has seen or done so that you get a very good idea of what happened?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

12. For the next set of questions, please think about ...'s behaviour over the past month or two. Decide how often s/he demonstrates the behaviour described. Some items may apply more to older children, but answer as accurately as you can. Tell me if ... never, sometimes or very often does the behaviour described.

(USE REFERENCE CARD ITEM 5 FOR THIS QUESTION.)

	Never	Sometimes	Very Often	N/A
a. Easily joins others in play	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. Makes and keeps friends	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. Comforts or helps other children	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. Helps with chores	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. Co-operates with family members	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. Is creative in work or play	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
g. Shows interest in a variety of things	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

12.	Never	Sometimes	Very Often	N/A
h. Shows eagerness to learn new things	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
i. Responds appropriately to teasing from friends or relatives of his or her own age	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
j. Controls temper	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
k. Concentrates on a task and ignores distractions	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
l. Listens carefully to others	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
m. Keeps working at something until it is finished	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

Child Care

Now I'd like to ask you some questions about child care arrangements for ...

1. Do you currently use child care such as daycare, babysitting, care by a relative or other caregiver, nursery school or a before and after school program while you (and your spouse/partner) are at work or studying?

1 ☐ Yes

2 ☐ No



GO TO SECTION J – PARENTING
(PAGE 20)

2. Which of the following methods of child care do you currently use while you (and your spouse/partner) are at work or studying?
(READ LIST. MARK ALL THAT APPLY)

- 1 ☐ Care provided in someone else's home by a non-relative
- 2 ☐ Care in a daycare centre
- 3 ☐ Care in someone else's home by a relative
- 4 ☐ Care in own home by a relative other than a sister or brother of the child
- 5 ☐ Care in own home by a non-relative
- 6 ☐ Care in a nursery school/preschool
- 7 ☐ Care in a before or after school program
- 8 ☐ Other, *specify*

3. For about how many hours per week do you use child care?

--	--	--

Hours per week

The following questions are about what being a parent is like for you.

1. Please respond to the following statements indicating your agreement or disagreement with each statement, by answering strongly agree, agree, mildly agree, mildly disagree, disagree, strongly disagree.

(USE REFERENCE CARD ITEM 6 FOR THIS QUESTION.)

	Strongly agree	Agree	Mildly agree	Mildly disagree	Disagree	Strongly disagree
a. The problems of taking care of a child are easy to solve once you know how your actions affect your child, is an understanding I have acquired.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
b. Even though being a parent could be rewarding, I am frustrated now while my child is at his/her present age.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
c. I go to bed the same way I wake up in the morning - feeling I have not accomplished a whole lot.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
d. I do not know what it is, but sometimes when I'm supposed to be in control, I feel more like the one being manipulated.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
e. My mother/father was better prepared to be a good parent than I am.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
f. I would make a fine model for a new parent to follow in order to learn what he/she would need to know to be a good parent.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
g. Being a parent is manageable, and any problems are easily solved.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
h. A difficult problem in being a parent is not knowing whether you're doing a good job or a bad one.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
i. Sometimes I feel like I'm not getting anything done.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
j. I meet my own personal expectations for expertise in caring for my child.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
k. If anyone can find the answer to what is troubling my child, I am the one.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
l. My talents and interests are in other areas, not in being a parent.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>

- | | Strongly agree | Agree | Mildly agree | Mildly disagree | Disagree | Strongly disagree |
|--|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| 1. | | | | | | |
| m. Considering how long I've been a parent, I feel thoroughly familiar with this role. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |
| n. If being a parent of a child were only more interesting, I would be motivated to do a better job as a parent. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |
| o. I honestly believe I have all the skills necessary to be a good parent to my child. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |
| p. Being a parent makes me tense and anxious. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |


ONLY FOR HOUSEHOLDS WHERE THE PERSON MOST KNOWLEDGEABLE HAS A SPOUSE/PARTNER.


2. If there is a parenting decision to be made (e.g., rules to be set, child misbehaving, school decisions), how often ...

(USE REFERENCE CARD ITEM 7 FOR THIS QUESTION.)

- | | Never | Less than half the time | About half the time | More than half the time | Always |
|--|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| a. do you and your spouse/partner agree on what to do? | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> |
| b. do you generally go along with what your spouse/partner has done? | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> |
| c. do you consult your spouse/partner about what to do? | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> |

Now I would like to ask more background questions about you and your spouse/partner (IF APPLICABLE).

	Person Most Knowledgeable	Spouse/partner
Transcribe the names of the Person Most Knowledgeable and his/her spouse/partner 	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>
1. Excluding kindergarten, how many years of elementary and high school have you / has _____ successfully completed?	1 <input type="radio"/> No schooling 2 <input type="radio"/> 1 to 5 years 3 <input type="radio"/> 6 years 4 <input type="radio"/> 7 years 5 <input type="radio"/> 8 years 6 <input type="radio"/> 9 years 7 <input type="radio"/> 10 years 8 <input type="radio"/> 11 years 9 <input type="radio"/> 12 years 10 <input type="radio"/> 13 years	1 <input type="radio"/> No schooling 2 <input type="radio"/> 1 to 5 years 3 <input type="radio"/> 6 years 4 <input type="radio"/> 7 years 5 <input type="radio"/> 8 years 6 <input type="radio"/> 9 years 7 <input type="radio"/> 10 years 8 <input type="radio"/> 11 years 9 <input type="radio"/> 12 years 10 <input type="radio"/> 13 years
2. Have you / has _____ graduated from high school?	1 <input type="radio"/> Yes 2 <input type="radio"/> No	1 <input type="radio"/> Yes 2 <input type="radio"/> No
3. Have you / has _____ ever attended any post secondary institution or school such as a university, community college, business school, trade or vocational school or CEGEP?	1 <input type="radio"/> Yes 2 <input type="radio"/> No	1 <input type="radio"/> Yes 2 <input type="radio"/> No

	Person Most Knowledgeable	Spouse/partner
Transcribe the names of the Person most knowledgeable and her/his spouse/partner 	<div></div>	<div></div>
4. What is the highest level of education that you have/has _____ ever attained?	<p>1 <input type="radio"/> Some trade, technical or vocational school or business college</p> <p>2 <input type="radio"/> Some community college, CEGEP or nursing school</p> <p>3 <input type="radio"/> Some university</p> <p>4 <input type="radio"/> Diploma or certificate from trade, technical or vocational school, or business college</p> <p>5 <input type="radio"/> Diploma or certificate from community college, CEGEP, nursing school</p> <p>6 <input type="radio"/> Bachelor or undergraduate degree or teacher's college (E.G. B.A., B.SC., B.A. CS, B.ED.)</p> <p>7 <input type="radio"/> Master's (E.G. M.A., M.SC., M.ED.)</p> <p>8 <input type="radio"/> Degree in medicine (M.D.), dentistry (D.D.S., D.M.D.), veterinary medicine (D.V.M) optometry (O.D.) or law (LL.B)</p> <p>9 <input type="radio"/> Earned doctorate (E.G. PH.D, D.SC., D.ED.)</p> <p>10 <input type="radio"/> Other (<i>SPECIFY</i>) _____ _____</p>	<p>1 <input type="radio"/> Some trade, technical or vocational school or business college</p> <p>2 <input type="radio"/> Some community college, CEGEP or nursing school</p> <p>3 <input type="radio"/> Some university</p> <p>4 <input type="radio"/> Diploma or certificate from trade, technical or vocational school, or business college</p> <p>5 <input type="radio"/> Diploma or certificate from community college, CEGEP, nursing school</p> <p>6 <input type="radio"/> Bachelor or undergraduate degree or teacher's college (E.G. B.A., B.SC., B.A. CS, B.ED.)</p> <p>7 <input type="radio"/> Master's (E.G. M.A., M.SC., M.ED.)</p> <p>8 <input type="radio"/> Degree in medicine (M.D.), dentistry (D.D.S., D.M.D.), veterinary medicine (D.V.M) optometry (O.D.) or law (LL.B)</p> <p>9 <input type="radio"/> Earned doctorate (E.G. PH.D, D.SC., D.ED.)</p> <p>10 <input type="radio"/> Other (<i>SPECIFY</i>) _____ _____</p>
5. I am going to read you a list of activities. Excluding work or school tell me if you do / _____ does each daily, weekly, monthly, several times a year, once or twice a year or never. (USE REFERENCE CARD ITEM 8 FOR THIS QUESTION.)		
a. Use a public library	<p>1 <input type="radio"/> Daily</p> <p>2 <input type="radio"/> Weekly</p> <p>3 <input type="radio"/> Monthly</p> <p>4 <input type="radio"/> Several times a year</p> <p>5 <input type="radio"/> Once or twice a year</p> <p>6 <input type="radio"/> Never</p>	<p>1 <input type="radio"/> Daily</p> <p>2 <input type="radio"/> Weekly</p> <p>3 <input type="radio"/> Monthly</p> <p>4 <input type="radio"/> Several times a year</p> <p>5 <input type="radio"/> Once or twice a year</p> <p>6 <input type="radio"/> Never</p>
b. Write letters or anything else that is more than one page in length	<p>1 <input type="radio"/> Daily</p> <p>2 <input type="radio"/> Weekly</p> <p>3 <input type="radio"/> Monthly</p> <p>4 <input type="radio"/> Several times a year</p> <p>5 <input type="radio"/> Once or twice a year</p> <p>6 <input type="radio"/> Never</p>	<p>1 <input type="radio"/> Daily</p> <p>2 <input type="radio"/> Weekly</p> <p>3 <input type="radio"/> Monthly</p> <p>4 <input type="radio"/> Several times a year</p> <p>5 <input type="radio"/> Once or twice a year</p> <p>6 <input type="radio"/> Never</p>

Continued	Person Most Knowledgeable	Spouse/partner
c. Read newspapers or magazines	1 <input type="radio"/> Daily 2 <input type="radio"/> Weekly 3 <input type="radio"/> Monthly 4 <input type="radio"/> Several times a year 5 <input type="radio"/> Once or twice a year 6 <input type="radio"/> Never	1 <input type="radio"/> Daily 2 <input type="radio"/> Weekly 3 <input type="radio"/> Monthly 4 <input type="radio"/> Several times a year 5 <input type="radio"/> Once or twice a year 6 <input type="radio"/> Never
d. Read books	1 <input type="radio"/> Daily 2 <input type="radio"/> Weekly 3 <input type="radio"/> Monthly 4 <input type="radio"/> Several times a year 5 <input type="radio"/> Once or twice a year 6 <input type="radio"/> Never	1 <input type="radio"/> Daily 2 <input type="radio"/> Weekly 3 <input type="radio"/> Monthly 4 <input type="radio"/> Several times a year 5 <input type="radio"/> Once or twice a year 6 <input type="radio"/> Never

ASK PERSON MOST KNOWLEDGEABLE ONLY

6. Which of the following material do you currently have in your home? (READ LIST. MARK ALL THAT APPLY)
- 1 ☐ Daily newspapers
 - 2 ☐ Magazines/weekly newspapers
 - 3 ☐ More than 25 books
 - 4 ☐ A multi-volume encyclopedia
 - 5 ☐ A dictionary

L

Labour Force

	Person Most Knowledgeable	Spouse/partner
1. What do you / does _____ consider to be your/his/her main activity currently? (READ LIST.)	1 <input type="radio"/> Caring for family (GO TO QUESTION 3) 2 <input type="radio"/> Working for pay or profit 3 <input type="radio"/> Caring for family and working for pay or profit 4 <input type="radio"/> Going to school (GO TO QUESTION 3) 5 <input type="radio"/> Recovering from illness/or disability (GO TO QUESTION 3) 6 <input type="radio"/> Looking for work (GO TO QUESTION 3) 7 <input type="radio"/> Retired (GO TO QUESTION 3) 8 <input type="radio"/> Other (SPECIFY) (GO TO QUESTION 3) _____ _____	1 <input type="radio"/> Caring for family (GO TO QUESTION 3) 2 <input type="radio"/> Working for pay or profit 3 <input type="radio"/> Caring for family and working for pay or profit 4 <input type="radio"/> Going to school (GO TO QUESTION 3) 5 <input type="radio"/> Recovering from illness/or disability (GO TO QUESTION 3) 6 <input type="radio"/> Looking for work (GO TO QUESTION 3) 7 <input type="radio"/> Retired (GO TO QUESTION 3) 8 <input type="radio"/> Other (SPECIFY) (GO TO QUESTION 3) _____ _____

	Person Most Knowledgeable	Spouse/partner
2. How many jobs do you / does _____ currently hold?	<input type="text"/> <input type="text"/> jobs	<input type="text"/> <input type="text"/> jobs
3. Have you / has _____ worked for pay or profit at any time in the past 12 months?	1 <input type="radio"/> Yes 2 <input type="radio"/> No ➔ GO TO SECTION M – INCOME OR ASK QUESTIONS 3,4,5 FOR SPOUSE/PARTNER	1 <input type="radio"/> Yes 2 <input type="radio"/> No ➔ GO TO SECTION M – INCOME
4. During the past 12 months, how many weeks did you/ did _____ do any work at a job or business? Include weeks on paid vacation leave, paid maternity or parental leave, paid sick leave.	<input type="text"/> <input type="text"/> weeks	<input type="text"/> <input type="text"/> weeks
5. About how many hours a week did you / did _____ usually work? (READ LIST.)	1 <input type="radio"/> Less than ten hours 2 <input type="radio"/> Between 10 to 19 hours 3 <input type="radio"/> Between 20 to 29 hours 4 <input type="radio"/> Between 30 to 39 hours 5 <input type="radio"/> Between 40 to 49 hours 6 <input type="radio"/> 50 hours or more	1 <input type="radio"/> Less than ten hours 2 <input type="radio"/> Between 10 to 19 hours 3 <input type="radio"/> Between 20 to 29 hours 4 <input type="radio"/> Between 30 to 39 hours 5 <input type="radio"/> Between 40 to 49 hours 6 <input type="radio"/> 50 hours or more

M

Income

ASK PERSON MOST KNOWLEDGEABLE ONLY

1. During the past 12 months did your household receive income from the following sources:
(READ LIST. MARK ALL THAT APPLY)

- 1 ☐ wages and salaries?
- 2 ☐ self-employment income (including business, professional, commission, child care)?
- 3 ☐ employment insurance benefits?
- 4 ☐ child Tax Benefit/National Child Benefit and provincial child benefits?
- 5 ☐ social assistance (welfare) and provincial income supplements?
- 6 ☐ child and spousal support?
- 7 ☐ other sources, including dividends, interest, capital gains, tips?
- 8 ☐ refusal ➔ GO TO QUESTION 4

2. Thinking about all the sources of income you just told me about, what was the total household income before taxes and other deductions for the last 12 months. Your best guess would be fine.

\$

 ➔ GO TO QUESTION 4

00 ○ Don't know ➡ GO TO QUESTION 3

01 ☐ Refusal ➡ GO TO QUESTION 4

3. Then, could you estimate in which of the following groups your household income falls?

```
graph LR; 01((01)) --- 03((03)); 01 --- 04((04)); 03 --- 07((07)); 03 --- 08((08)); 04 --- 09((09)); 04 --- 10((10)); 02((02)) --- 05((05)); 02 --- 06((06)); 05 --- 11((11)); 05 --- 12((12)); 06 --- 13((13)); 06 --- 14((14)); 06 --- 15((15)); 06 --- 16((16));
```

01 ○ Less than \$20,000

- 03 ○ Less than \$10,000
 - 07 ○ Less than \$5,000
 - 08 ○ \$5,000 or more
- 04 ○ \$10,000 or more
 - 09 ○ Less than \$15,000
 - 10 ○ \$15,000 or more

02 ○ \$20,000 or more

- 05 ○ Less than \$40,000
 - 11 ○ Less than \$30,000
 - 12 ○ \$30,000 or more
- 06 ○ \$40,000 or more
 - 13 ○ Less than \$50,000
 - 14 ○ \$50,000 to less than \$60,000
 - 15 ○ \$60,000 to less than \$80,000
 - 16 ○ \$80,000 or more

The next few questions ask you whether or not you feel that your family's financial resources are adequate.

Please tell me whether you strongly agree, agree, disagree or strongly disagree with the following statements.

4. You worry about whether the money you have will be enough to support your family.

- 1 ☐ Strongly agree
2 ☐ Agree
3 ☐ Disagree
4 ☐ Strongly disagree

5. If you or your spouse/partner lost your jobs, you are confident that you could find an equivalent one within 6 months.

- 1 ☐ Strongly agree
- 2 ☐ Agree
- 3 ☐ Disagree
- 4 ☐ Strongly disagree
- 5 ☐ Not working for pay/not applicable

6. How do you perceive your financial situation compared with that of other people at the same stage in their lives? Are you ...
(READ LIST.)

- 1 ☐ better off financially?
2 ☐ worse off financially?
3 ☐ just about the same?

7. Would you say that you (and your family) are better off, worse off, or just about the same financially than you were a year ago?

- 1 ☐ Better off financially
2 ☐ Worse off financially
3 ☐ Just about the same

8. Now looking ahead, do you think that a year from now you (and your family) will be better off, worse off, or just about the same as now?

- 1 ☐ Better off financially
2 ☐ Worse off financially
3 ☐ Just about the same

Enter end time (using 24 hour clock)

:

IF THE RESPONDENT RECEIVED THE AGES AND STAGES QUESTIONNAIRE (BOOKLET 8) (VERIFY THE CONTROL FORM), PICK IT UP. IF THE RESPONDENT DID NOT COMPLETE THE QUESTIONNAIRE, COMPLETE THE QUESTIONNAIRE WITH THE RESPONDENT.

TO COMPLETE MACARTHUR SHORT FORM VOCABULARY CHECKLIST (BOOKLET 9) – FOR CHILDREN 0 TO 2 YEARS OLD

GIVE THE RESPONDENT THE MaCARTHUR SHORT FORM VOCALUBARY CHECKLIST TO COMPLETE.

This checklist is used to record your child's developing vocabulary. Please complete this questionnaire.

IF THE RESPONDENT IS UNABLE OR UNWILLING TO COMPLETE IT HIM OR HERSELF, ASK THE QUESTIONS AND COMPLETE THE QUESTIONNAIRE WITH THE RESPONDENT.

GO TO SECTION – DEBRIEFING QUESTIONNAIRE FOR PARENTS (PAGE 28)

CONSENT OF RESPONDENT – ACTIVITIES – WITH CHILDREN 3 TO 5 YEARS

1. For the next part of the interview, I will be doing a few short activities with _____ . As with
(SELECTED CHILD)
the other information you have provided, these results will be kept confidential. Will you allow us to do these activities with ...?

- 1 ☐ Respondent gives consent
2 ☐ Respondent does not give consent

IF THE PARENT WANTS MORE INFORMATION ON THE SPECIFIC ACTIVITIES REFER TO THE CONTROL FORM TO DETERMINE WHICH QUESTIONNAIRES (BOOKLETS) THE CHILD WILL RECEIVE. INFORMATION ON EACH QUESTIONNAIRE IS INCLUDED IN YOUR INTERVIEWER'S MANUAL.

ONCE CONSENT HAS BEEN OBTAINED GO TO THE NEXT QUESTIONNAIRE AS LISTED ON THE CONTROL FORM.

AFTER YOU HAVE COMPLETED THE QUESTIONNAIRES WITH THE CHILD, COMPLETE THE DEBRIEFING PORTION OF THIS QUESTIONNAIRE ON THE FOLLOWING PAGES.

Debriefing Questions for parents

Getting your reaction is another important element of the survey. I would appreciate it if you would answer these questions honestly without hesitating to say what you really think. It is important for us to know how you feel because we are here to learn from you. If you have any suggestions about the survey, please feel free to give me your ideas.

I – Respondent Relations

1. Did you find that the introductory letter, which you received, encouraged you to participate in the survey?

1 ☐ Yes ➡ why? _____

2 ☐ No ➡ why not? _____

2. Is there any way that we could improve the letter, for example, by changing the wording or making the survey sound more appealing?

3. The brochure, which was with the letter, is meant to give you some information about the survey and to help you understand how important the survey is. Did it have useful information?

4. Did it help encourage you to participate? Why or why not?

1 ☐ Yes ➡ why? _____

2 ☐ No ➡ why not? _____

5. Is there any way that we could improve the brochure by adding other types of information or by changing the format and/or appearance?

6. How do you think ... reacted to the poster and picture that he/she received?

7. Do you think the poster and picture is a good idea for keeping you interested in participating in the survey as ... grows up?

8. Is there any way that we could improve the poster and the picture or, should we use some other way to make the child feel important?

FOR PARENTS OF CHILDREN 3 TO 5 YEARS OLD ONLY

FOR PARENTS OF CHILDREN 0-2 YEARS OLD, GO TO SECTION III (PAGE 32) – AGES AND STAGES QUESTIONNAIRE.

II – Activities with child

1. How did you find the length of time I spent when working with ... ?

1 ☐ Just right

2 ☐ Too long ➞ What is a reasonable length? _____

3 ☐ Too short ➞ What do you feel is missing? _____

2. If an interview with you were to last for an hour and a half, with an additional 30 minutes to complete the activities with ..., what would be the best time to schedule the interview? (MARK ALL THAT APPLY)

Weekdays

- 1 ☐ Morning
2 ☐ Afternoon
3 ☐ Evenings

Weekend

- 4 ☐ Morning
5 ☐ Afternoon
6 ☐ Evenings

3. Would you say ... behaved in a typical way, or do you think my presence changed his/her behaviour in some way?

- 1 ☐ Typical
2 ☐ Not typical

If not typical: How was it different from usual?

4. How do you think ... felt about doing these activities?

5. How could I have improved my interaction with him/her?

6. Do you feel the language used (English or French) caused any problems for ...?

- 1 ☐ No problem
2 ☐ Yes, caused a problem

How?

7. How would you feel if we asked you to leave the room during the activities?

8. In terms of the cleanliness of the materials, is it enough for me to have said that the materials were cleaned?

1 ☐ Yes

2 ☐ No

If no, would you like to:

	Yes	No
a. see a sheet outlining the cleaning procedures?	1 <input type="radio"/>	2 <input type="radio"/>
b. have the materials cleaned in your home?	1 <input type="radio"/>	2 <input type="radio"/>
c. see the materials in sealed bags before use?	1 <input type="radio"/>	2 <input type="radio"/>

Other (specify)

9. Do you consider these activities intrusive?

10. Were there any questions/activities, which you felt were inappropriate for ...?

1 ☐ Yes

2 ☐ No

If yes, which ones? Why?

11. Were there any materials used that you felt were inappropriate for ...?

1 ☐ Yes

2 ☐ No

If yes, which ones? Why?

12. Before the activities, did I provide you with enough information about them?

1 ☐ Yes

2 ☐ No

If not, what kind of information would you have liked to receive?

13. If you could suggest one or two things to improve the administration of these activities, what would you suggest?

III – Ages and Stages Questionnaire

ASK THIS SECTION ONLY IF THE PARENT RECEIVED THE AGES AND STAGES QUESTIONNAIRE. OTHERWISE:

- FOR CHILDREN 0-2 YEARS ➡ GO TO SECTION IV (PAGE 33) – PARENT QUESTIONNAIRE AND MACARTHUR SHORT FORM VOCABULARY CHECKLIST
- FOR CHILDREN 3-5 YEARS ➡ GO TO SECTION V (PAGE 37) – PARENT QUESTIONNAIRE

1. How did you find the length of the questionnaire that was sent to you with your letter?

1 ☐ Just right

2 ☐ Too long ➡ What would be a reasonable length? _____

3 ☐ Too short

2. Approximately how long did it take you to complete it?

1 Hours AND 2 Minutes

3. a) Was there enough information given to fill out the questionnaire on your own without any difficulty (i.e. trouble finding where to start or what to do)?

b) If not, how could we improve the type of information you receive?

4. Was it too much to do on your own or did you enjoy taking responsibility for this part of the survey?

- 1 ☐ Too much
2 ☐ Enjoyed doing it

5. Were there any questions that you did not understand or were not clear as to what they were asking?

- 1 ☐ Yes
2 ☐ No

If yes, which ones?

6. Would you have preferred me to have administered the questionnaire?

- 1 ☐ Yes
2 ☐ No

Why or why not?

**IV – Parent Questionnaire and MacArthur Short Form Vocabulary Checklist
(FOR PARENTS OF CHILDREN 0 TO 2 YEARS OLD)**

GO TO SECTION V (PAGE 37) FOR PARENTS OF CHILDREN 3 TO 5 YEARS OLD.

SHOW THE RESPONDENT A BLANK COPY OF THE QUESTIONNAIRE TO HELP HIM/HER ANSWER THE FOLLOWING QUESTIONS.

1. Section C – Child Health

Did you know ...'s current height and weight or did you have to estimate?

- 1 ☐ Knew both
2 ☐ Estimated both
3 ☐ Knew height only
4 ☐ Knew weight only

2. Section D – Child Development – questions 1-2

a) How do you feel about these questions?

b) Do they capture a sense of a parent's knowledge about early child development?

3. Questions 3-8

a) Do you have any comments on these questions about children's developmental milestones?

b) Were you able to recall the information being asked or did you have to estimate?

1 ☐ Yes, recalled

2 ☐ No, had to estimate

4. Section E – Activities – question 1 – What does "a program to enhance children's learning and development" mean to you?

5. Question 3 – Are any of the activities listed not relevant to ...?

1 ☐ Yes ➡ If yes, which ones? _____

2 ☐ No

6. Section F – Literacy and Learning Activities – question 1

a) Did you find this question easy or difficult to answer?

1 ☐ Easy

2 ☐ Difficult

b) Do the response options for this question make sense?

1 ☐ Yes

2 ☐ No

If not, what changes would you suggest?

7. Question 1(f) – When I used the phrase 'finger/action songs or games', how did you interpret this?

8. Are there any other activities that should be added?

- 1 ☐ Yes ➡ If yes, which ones? _____
- 2 ☐ No

9. Section J – Parenting – question 1

a) This question deals with your sense of competence as a parent. How did you react to this part of the questionnaire?

b) Do you have any comments or suggestions on how this section can be improved?

10. Parenting – question 2

a) Do you feel these series of questions on how parents make parenting decisions are easy or difficult to answer?

- 1 ☐ Easy
- 2 ☐ Difficult

b) Do you have any changes to suggest?

11. Income – questions 4-8

a) What is your reaction to these questions on your sense of your family's financial security?

b) Do you have any suggestions for changes?

12. Were there any other questions/sections that you found difficult to answer because their intent was not clear?

1 ☐ Yes

2 ☐ No

If yes, which questions?

13. Did you find the terms and language in the questionnaire easy to understand?

1 ☐ Yes

2 ☐ No

If no, which terms/which questions were not easy to understand?

14. Did you have any general comments about the questionnaire?

MacArthur Short Form Vocabulary Checklist

1. Were the questions easy or difficult to answer?

1 ☐ Easy

2 ☐ Difficult ➡ Why? _____

2. How did you find the length of the checklist?

1 ☐ Just right

2 ☐ Too long ➡ What would be an appropriate length? _____

3 ☐ Too short ➡ What is missing? _____

3. Were there any words that were not appropriate?

1 ☐ Yes, specify _____

2 ☐ No

4. Would you have preferred me to administer the questionnaire?

- 1 ☐ Prefer ➡ Why? _____
- 2 ☐ Not Prefer

GO TO SECTION VI (PAGE 40) – GENERAL QUESTIONS REGARDING THE OVERALL SURVEY

V – Parent Questionnaire (FOR PARENTS OF CHILDREN 3 TO 5 YEARS OLD)

SHOW THE RESPONDENT A BLANK COPY OF THE QUESTIONNAIRE TO HELP HIM/HER ANSWER THE FOLLOWING QUESTIONS

1. Section C – Child Health – Did you know ... current height and weight or did you have to estimate?

- 1 ☐ Knew both
- 2 ☐ Estimated both
- 3 ☐ Knew height only
- 4 ☐ Knew weight only

2. Section E – Activities – question 1 – What does "a program to enhance children's learning and development" mean to you?

3. Question 3 – Are any of the activities listed not relevant to ...?

- 01 ☐ Yes ➡ If yes, which ones? _____
- 02 ☐ No

4. Section F – Literacy and Learning Activities, questions 4 and 7 – Did you find these questions easy or difficult to answer?

- 01 ☐ Easy
- 02 ☐ Difficult

b) Do the response options for these questions make sense?

- 01 ☐ Yes
- 02 ☐ No

If not, what changes would you suggest?

5. Question 7(b) – When I used the term 'simple books' what did this mean to you?

6. Are there any other activities that should be added?

- 1 ☐ Yes ➡ If yes, which ones? _____
- 2 ☐ No

7. Section H – Behaviour – question 10 – Did you find these questions easy or difficult to answer?

- 1 ☐ Easy
- 2 ☐ Difficult ➡ Why? _____

8. Question 10(j) – What does this question mean for you, for example, what routines would it include?

9. Question 11 – Do these questions on children's communication skills seem relevant for ...?

- 1 ☐ Yes
- 2 ☐ No

If no, which questions are not fitting and how would you suggest improving the overall question?

10. Question 12 – Did you find these questions easy or difficult to answer?

- 1 ☐ Easy
- 2 ☐ Difficult ➡ Why? _____

11. Section J – Parenting – question 1

a) This question deals with your sense of competence as a parent. How did you react to this part of the questionnaire?

b) Do you have any comments or suggestions on how this section can be improved?

12. Question 2

a) Do you feel these series of questions on how parents make parenting decisions are easy or difficult to answer?

1 ☐ Easy

2 ☐ Difficult

b) Do you have any changes to suggest?

13. Section M – Income – questions 4-8

a) What is your reaction to these questions on your sense of your family's financial security?

b) Do you have any suggestions for changes?

14. Were there any other questions/sections that you found difficult to answer because their intent was not clear?

1 ☐ No

2 ☐ Yes

If yes, which questions?

15. Did you find the terms and language in the questionnaire easy to understand?

1 ☐ Yes

2 ☐ No

If no, which terms/which questions were not easy to understand?

VI – General Questions Regarding the Overall Survey

1. How did you find the length of the whole interview?

1 ☐ Just right

2 ☐ Too long ➡ What is a reasonable length? _____

3 ☐ Too short ➡ What do you feel is missing? _____

2. This survey deals with our personal lives and there may be some questions that people consider personal and sensitive.

a) Were there any questions or series of questions that you felt were too personal?

1 ☐ No

2 ☐ Yes

If yes, what were they and how did you react or feel?

b) Could you give suggestions on how to better our approach in asking these questions?

3. Do you have any other comments about the interview or the survey that you would like to give me?



Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance Questionnaire du parent

Livret 7



Numéro de tâche

Numéro de la personne

 - - - -

Nom de famille de l'enfant

Prénom de l'enfant

Date de naissance de l'enfant

AAAA

MM

JJ

Âge en mois

Confidentiel une fois rempli

Renseignements recueillis en vertu de
la Loi sur la statistique, Lois révisées
du Canada, 1985 chapitre S19.

English on reverse

Si l'adresse qui figure sur le Formulaire de contrôle est incorrecte
ou incomplète, veuillez indiquer les corrections ci-dessous:

Rue et numéro

Ville/municipalité

Province

Code postal

Registre des appels et des visites

	Date	Heure	Commentaires
1			
2			
3			
4			
5			
6			
7			
8			
9			

Code d'état final du livret

Commentaires

000 ☐ Complet

001 ☐ Partiel

034 ☐ Pas de contact

030 ☐ Refus

018 ☐ Hors cible

099 ☐ Autre NR (*PRÉCISEZ*)



Contact téléphonique - -

Indiquez l'heure de début (selon le format de 24 heures) :

Exemple : 6 h 15pm = 18 h 15

Bonjour, je m'appelle ... et je travaille pour Statistique Canada.

1. Est-ce bien le ménage de (NOM DU PARENT FIGURANT SUR LE FORMULAIRE DE CONTRÔLE)?

Je vous appelle dans le cadre de l'Enquête longitudinale nationale sur les enfants et les jeunes. Nous menons cette enquête dans le but de recueillir des renseignements sur les enfants, leur développement et leur famille.

2. Aimeriez-vous que l'interview se déroule en français ou en anglais?

- 1 ☐ Anglais
2 ☐ Français

Vos réponses seront tenues strictement confidentielles et seront utilisées seulement à des fins statistiques. Bien que votre participation soit volontaire, votre aide est essentielle pour assurer la précision des résultats.

Les prochaines questions portent sur _____ et sa famille.
(ENFANT CHOISI)

3. Est-ce que _____ vit dans ce ménage la plupart du temps?
(ENFANT CHOISI)

- 1 ☐ Oui ➡ ENTREZ LE NOM SUR LA LIGNE 1 CI-DESSOUS ET PASSEZ À LA QUESTION 4.
2 ☐ Non



ARRÊTEZ L'INTERVIEW

4. Maintenant, j'aimerais confirmer l'adresse de votre résidence. Est-ce bien ... ? CONFIRMEZ L'ADRESSE INSCRITE SUR LE FORMULAIRE DE CONTRÔLE ET APPORTÉZ LES MODIFICATIONS NÉCESSAIRES SUR LA PAGE COUVERTURE DU QUESTIONNAIRE.

5. Quelle personne du ménage serait le plus en mesure de répondre à des questions au sujet de _____ ?
(ENFANT CHOISI)

ENTREZ LE NOM COMPLET SUR LA LIGNE 2 CI-DESSOUS ET COCHEZ LA CASE PCM (PERSONNE QUI CONNAIT LE MIEUX L'ENFANT).

6. Quelle personne du ménage est votre conjoint(e) ou le(a) conjoint(e) de la PCM? ENTREZ LE NOM SUR LA LIGNE 3 ET COCHEZ LA CASE CONJOINT(E) OU

- 1 ☐ Aucun(e) conjoint(e) dans le ménage

7. Est-ce que d'autres personnes font partie du ménage? ENTREZ LEUR NOM SUR LES LIGNES 4 À 10.

	Prénom	Nom de famille	Cochez la case appropriée
1			1 <input type="radio"/> Enfant choisi
2			1 <input type="radio"/> PCM 2 <input type="radio"/> Conjoint(e)
3			1 <input type="radio"/> PCM 2 <input type="radio"/> Conjoint(e)
4			
5			
6			
7			
8			
9			
10			

Maintenant, j'aimerais vous poser des questions générales à votre sujet. RECUEILLEZ DES DONNÉES SUR LA PERSONNE QUI CONNAIT LE MIEUX L'ENFANT (PCM), LE(LA) CONJOINT(E) S'IL Y A LIEU ET L'ENFANT CHOISI SEULEMENT.

	PCM	Conjoint(e) de la PCM	Enfant choisi
Inscrivez le nom des membres du ménage ➡	<div></div>	<div></div>	<div></div>
1. Quel est le lien de _____ par rapport à _____ ? (INSCRIVEZ LE NOM DE LA PCM)		1 <input type="radio"/> Époux/épouse 2 <input type="radio"/> Conjoint(e) de fait 3 <input type="radio"/> Autre	1 <input type="radio"/> Enfant biologique 2 <input type="radio"/> Enfant du conjoint (de la conjointe) 3 <input type="radio"/> Enfant adopté 4 <input type="radio"/> Enfant en famille d'accueil 5 <input type="radio"/> Autre lien
2. Quel est votre lien/ le lien de _____ par rapport à _____ ? (INSCRIVEZ LE NOM DU CONJOINT OU DE LA CONJOINTE)	1 <input type="radio"/> Époux/épouse 2 <input type="radio"/> Conjoint(e) de fait 3 <input type="radio"/> Autre		1 <input type="radio"/> Enfant biologique 2 <input type="radio"/> Enfant du conjoint (de la conjointe) 3 <input type="radio"/> Enfant adopté 4 <input type="radio"/> Enfant en famille d'accueil 5 <input type="radio"/> Autre lien
3. Quel est votre âge/ l'âge de _____ ?	<div></div> ans	<div></div> ans	1 <div></div> ans 2 <div></div> mois
4. Quelle est votre date de naissance/la date de naissance de _____ ?	<div></div> Jour <div></div> Mois <div></div> Année	<div></div> Jour <div></div> Mois <div></div> Année	<div></div> Jour <div></div> Mois <div></div> Année
5. Quel est votre sexe/ le sexe de _____ ?	1 <input type="radio"/> Masculin 2 <input type="radio"/> Féminin	1 <input type="radio"/> Masculin 2 <input type="radio"/> Féminin	1 <input type="radio"/> Masculin 2 <input type="radio"/> Féminin
6. Quel est votre état matrimonial/l'état matrimonial de _____ ?	1 <input type="radio"/> Marié(e) 2 <input type="radio"/> Conjoint(e) de fait 3 <input type="radio"/> Partenaire de même sexe 4 <input type="radio"/> Célibataire (jamais marié(e)) 5 <input type="radio"/> Veuf(ve) 6 <input type="radio"/> Séparé(e) 7 <input type="radio"/> Divorcé(e)	1 <input type="radio"/> Marié(e) 2 <input type="radio"/> Conjoint(e) de fait 3 <input type="radio"/> Partenaire de même sexe 4 <input type="radio"/> Célibataire (jamais marié(e)) 5 <input type="radio"/> Veuf(ve) 6 <input type="radio"/> Séparé(e) 7 <input type="radio"/> Divorcé(e)	

7. Combien d'enfants plus âgés que _____ font partie du ménage? (ENFANT CHOISI)

--	--

 Enfants

8. Combien d'enfants moins âgés font partie du ménage?

--	--

 Enfants

B Données socio-démographiques

	PCM	Conjoint(e)	Enfant choisi												
Inscrivez le nom des membres du ménage →	<table border="1" style="width: 100%;"><tr><td> </td></tr><tr><td> </td></tr></table>			<table border="1" style="width: 100%;"><tr><td> </td></tr><tr><td> </td></tr></table>			<table border="1" style="width: 100%;"><tr><td> </td></tr><tr><td> </td></tr></table>								
1. Dans quel pays êtes-vous né(e)/ _____ est-il/elle né(e)?	1 <input type="radio"/> Canada (PASSEZ À LA QUESTION 3) 2 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Canada (PASSEZ À LA QUESTION 3) 2 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Canada (PASSEZ À LA QUESTION 3) 2 <input type="radio"/> Autre (PRÉCISEZ) _____												
2. En quelle année avez-vous/ _____ a-t-il/elle immigré au Canada?	<table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td> </td><td> </td></tr></table>	1	9			<table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td> </td><td> </td></tr></table>	1	9			<table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td> </td><td> </td></tr></table>	1	9		
1	9														
1	9														
1	9														
3. Quelles langues officielles (anglais et français) connaissez-vous/ _____ connaît-il/elle assez pour soutenir une conversation?	1 <input type="radio"/> Anglais seulement 2 <input type="radio"/> Français seulement 3 <input type="radio"/> Anglais et français 4 <input type="radio"/> Ni anglais ni français	1 <input type="radio"/> Anglais seulement 2 <input type="radio"/> Français seulement 3 <input type="radio"/> Anglais et français 4 <input type="radio"/> Ni anglais ni français	1 <input type="radio"/> Anglais seulement 2 <input type="radio"/> Français seulement 3 <input type="radio"/> Anglais et français 4 <input type="radio"/> Ni anglais ni français												
4. Quelle langue avez-vous/ _____ a-t-il/elle apprise la première et que vous/il/elle comprenez encore? (COCHER TOUTES LES RÉPONSES PERTINENTES.) SI L'ENFANT NE PARLE PAS ENCORE, INSCRIVEZ LA LANGUE QU'IL VA APPRENDRE EN PREMIER.	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre (PRÉCISEZ) _____												
5. Quelle langue parlez-vous/ _____ parle-t-il/elle le plus souvent à la maison?	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre – Même qu'à la question 4 4 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre – Même qu'à la question 4 4 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre – Même qu'à la question 4 4 <input type="radio"/> Autre (PRÉCISEZ) _____												

	PCM	Conjoint(e)	Enfant choisi
6. Quelle langue parlez-vous/parle-t-il/elle le plus souvent à _____ ? (ENFANT CHOISI)	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre – Même qu'à la question 5 4 <input type="radio"/> Autre (PRÉCISEZ) _____	1 <input type="radio"/> Anglais 2 <input type="radio"/> Français 3 <input type="radio"/> Autre – Même qu'à la question 5 4 <input type="radio"/> Autre (PRÉCISEZ) _____	

FIXEZ UN RENDEZ-VOUS POUR UNE VISITE À LA MAISON. CONSIGNEZ L'HEURE DU RENDEZ-VOUS SUR LA COUVERTURE.

Pour les parents d'un enfant de 3 à 5 ans

7. Nous allons effectuer quelques activités avec _____. Préférez-vous que ces activités se déroulent en anglais ou en français? (ENFANT CHOISI)

- 1 ☐ Anglais
 2 ☐ Français

VEUILLEZ CONSULTER VOTRE MANUEL DE L'INTERVIEWEUR SI LE PARENT SOUHAITE OBTENIR DE L'INFORMATION SUR CES ACTIVITÉS.

ICI SE TERMINE L'INTERVIEW TÉLÉPHONIQUE.

Indiquez l'heure de fin (selon le format de 24 heures)

<input type="text"/>	<input type="text"/>	:	<input type="text"/>	<input type="text"/>
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Indiquez l'heure de début de l'interview à la maison
(selon le format de 24 heures)

:

C Santé de l'enfant

Les prochaines questions portent sur la santé de _____
(ENFANT CHOISI)

1. Au cours des derniers mois, dans quelle proportion
est-ce que ... était en bonne santé?

- 1 ☐ Presque tout le temps
2 ☐ Souvent
3 ☐ Environ la moitié du temps
4 ☐ Parfois
5 ☐ Presque jamais

2. Quelle est la taille de ... en pieds et en pouces ou en
mètres et en centimètres (sans ses souliers)?

1 Pieds Pouces

OU

2 • Mètres, centimètres

999 ☐ Ne sait pas

3. Quel est le poids de ... en kilogrammes (et en
grammes) ou en livres?

1 • Kilogrammes, grammes

OU

2 Livres

999 ☐ Ne sait pas

4. Les prochaines questions portent sur la naissance de
.... Quel était son poids en kilogrammes et en
grammes ou en livres et en onces à sa naissance?

1 • Kilogrammes, grammes

OU

2 Livres Onces

999 ☐ Ne sait pas

5. Est-ce que ... est né(e) avant la date prévue?

- 1 ☐ Oui
2 ☐ Non ➡ PASSEZ À LA QUESTION 7.

6. Combien de semaines avant la date prévue est-ce que
... est né(e)?

1 Semaines

00 ☐ Moins d'une semaine

99 ☐ Ne sait pas

7. Selon vous, est-ce que ... est plus ou moins actif(ve)
physiquement que les autres enfants du même âge et
du même sexe?
(LISEZ LA LISTE.)

- 1 ☐ Beaucoup plus
2 ☐ Un peu plus
3 ☐ Égal
4 ☐ Un peu moins
5 ☐ Beaucoup moins

8. Au cours des prochaines questions, le terme « problèmes de santé à long terme » désigne tout problème qui a duré ou qui devrait durer 6 mois ou plus, selon le diagnostic d'un professionnel de la santé. Est-ce que ... souffre de l'un des problèmes de santé à long terme suivants :
(LISEZ LA LISTE. COCHEZ TOUTES LES RÉPONSES PERTINENTES.)

- 01 ☐ allergies alimentaires ou digestives?
02 ☐ allergies respiratoires, comme le rhume des foins?
03 ☐ toute autre allergie?
04 ☐ bronchite?
05 ☐ maladie du coeur?
06 ☐ épilepsie?
07 ☐ paralysie cérébrale?
08 ☐ maladie du foie?
09 ☐ handicap mental?
10 ☐ difficultés d'apprentissage?
11 ☐ déficience affective, psychologique ou nerveuse?
12 ☐ tout autre problème à long terme? Précisez

13 ☐ aucun

9. Est-ce que ... souffre d'un problème de santé à long terme ou tout autre problème de santé qui l'empêche en totalité ou en partie d'aller à l'école, de jouer, de faire du sport ou de faire toute autre activité propre à un enfant de son âge?

- 1 ☐ Oui
2 ☐ Non

10. Est-ce que ... a des problèmes de vision?

- 1 ☐ Oui
2 ☐ Non ➡ PASSEZ À LA QUESTION 12

11. Est-ce que ce problème a été corrigé (c.-à-d.) au moyen de lunettes ou d'une chirurgie)?

- 1 ☐ Oui
2 ☐ Non

12. Est-ce que ... peut différencier les couleurs?
(C.-À-D. L'ENFANT N'EST PAS DALTONIEN.)

- 1 ☐ Oui
2 ☐ Non
3 ☐ Ne sait pas

13. Depuis sa naissance, est-ce que ... a souffert d'une infection des oreilles (otite)?

- 1 ☐ Oui
2 ☐ Non ➡ PASSEZ À LA QUESTION 15

14. Combien de fois?

- 1 ☐ 1 fois
2 ☐ 2 fois
3 ☐ 3 fois
4 ☐ 4 fois ou plus

15. Est-ce que ... a de la difficulté à entendre?

- 1 ☐ Oui
2 ☐ Non ➡ PASSEZ À LA QUESTION 17

16. Est-ce que ce problème a été corrigé (c.-à-d. au moyen d'une prothèse auditive ou d'une chirurgie)?

1 ☐ Oui

2 ☐ Non

17. Est-ce que ... a déjà eu de la difficulté à marcher, à grimper, à prendre ou à tenir un objet?

1 ☐ Oui

2 ☐ Non

18. Quelle main est-ce que ... utilise pour dessiner?

1 ☐ Droite

2 ☐ Gauche

3 ☐ Ne sait pas

4 ☐ Ne dessine pas encore

19. Est-ce que ... prend en ce moment des médicaments?

1 ☐ Oui ➡ Précisez _____

2 ☐ Non

D Développement de l'enfant - Enfants de 0 à 2 ans seulement

DANS LE CAS D'UN ENFANT DE 3 À 5 ANS ➡ PASSEZ À LA SECTION E - ACTIVITÉS (PAGE 10)

POSEZ LES QUESTIONS DE LA PRÉSENTE SECTION SEULEMENT SI LE RÉPONDANT EST LE PARENT BIOLOGIQUE, LE BEAU-PARENT OU LE PARENT ADOPTIF DE L'ENFANT CHOISI.

Le prochain groupe de questions porte sur la perception que vous avez du comportement de la plupart des bébés ou des jeunes enfants, sur la manière dont ils grandissent et sur les soins qu'il faut leur donner.

Veuillez répondre à chaque question en pensant à l'ensemble des jeunes enfants. Ne répondez pas pour ce qui est de et de son comportement. Pensez à ce que vous savez des jeunes enfants que vous avez rencontrés ou à ce que vous avez lu à leur sujet.

1. D'abord, pour chaque énoncé que je vais lire, veuillez me dire si, pour la plupart des bébés, vous êtes d'accord ou en désaccord ou si vous n'êtes pas certain(e).

	D'accord	En désaccord	Pas certain(e)
a. Tous les enfants ont besoin du même nombre d'heures de sommeil.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Certains bébés normaux n'aiment pas être caressés.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. Un enfant pense qu'il parle correctement même lorsqu'il dit des mots ou des phrases de manière inhabituelle ou différente, comme « Hier, je vais au marché » ou « C'est quoi fait le bruit? ».	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

2. Maintenant, les prochains énoncés que je vais lire portent sur l'âge auquel un jeune enfant peut faire une chose. Si vous pensez que l'âge est à peu près correct, dites que vous êtes d'accord. Sinon, veuillez me dire si, selon vous, l'enfant peut faire cette chose à un âge plus jeune ou plus vieux. Si vous n'avez aucune idée de l'âge auquel l'enfant peut faire cette chose, dites que vous n'êtes pas certain(e).

(POUR CETTE QUESTION, VEUILLEZ UTILISER L'ITEM 1 DE LA FICHE DE RÉFÉRENCE)

	D'accord	Plus vieux	Plus jeune	Pas certain(e)
a. Un enfant de 1 an peut différencier le bien du mal.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. La plupart des enfants sont prêts à être propres vers 1 an.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. Les enfants de 1 an coopèrent ensemble souvent et se partagent les jouets lorsqu'ils jouent ensemble.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. Un bébé est âgé d'environ 7 mois lorsqu'il commence à prendre des objets.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. À deux ans, un enfant peut avoir une pensée logique, comme les adultes.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

Les prochaines questions portent sur les capacités physiques de votre enfant à divers âges. Si vous ne savez pas l'âge exact, donnez votre estimation la plus précise.

3. Quel âge (en mois) avait ... lorsqu'il(elle) s'est assis(e) seul(e) la première fois?

Mois

OU

98 ☐ Pas encore

99 ☐ Ne sait pas

4. Quel âge avait ... lorsqu'il(elle) a commencé à manger des aliments solides?

Mois

OU

98 ☐ Pas encore

99 ☐ Ne sait pas

5. Quel âge avait ... lorsqu'il(elle) a commencé à se nourrir seul(e)?

Mois

OU

98 ☐ Pas encore

99 ☐ Ne sait pas

6. Quel âge avait ... lorsqu'il(elle) a fait ses premiers pas?

Mois

OU

98 ☐ Pas encore ➡ PASSEZ À LA QUESTION 8

99 ☐ Ne sait pas

7. Quel âge avait ... lorsqu'il(elle) a commencé à marcher avec confiance?

Mois

OU

98 ☐ Pas encore

99 ☐ Ne sait pas

8. Quel âge avait ... lorsqu'il(elle) a dit ses premiers mots?

Mois

OU

98 ☐ Pas encore

99 ☐ Ne sait pas

E Activités

La prochaine section porte sur les activités auxquelles peut participer ...

1. Est-ce que ... est inscrit(e) aux activités ou aux programmes suivants?
(COCHEZ TOUTES LES RÉPONSES PERTINENTES)

	Oui	Non
a. Garderie éducative ou préscolaire	1 <input type="radio"/>	2 <input type="radio"/>
b. Groupe de jeu	1 <input type="radio"/>	2 <input type="radio"/>
c. Programme de halte-garderie	1 <input type="radio"/>	2 <input type="radio"/>
d. Programme de stimulation précoce	1 <input type="radio"/>	2 <input type="radio"/>
e. Programme parent-enfant (comme la natation)	1 <input type="radio"/>	2 <input type="radio"/>
f. Programme visant à améliorer l'apprentissage et le développement de l'enfant	1 <input type="radio"/>	2 <input type="radio"/>
g. Heure du conte en bibliothèque ou autre programme de lecture ou club de livres	1 <input type="radio"/>	2 <input type="radio"/>
h. Leçons de musique, de danse ou de sports	1 <input type="radio"/>	2 <input type="radio"/>

SI TOUTES LES RÉPONSES SONT « NON » ➡ PASSEZ À LA QUESTION 3

2. Combien d'heures par semaine au total est-ce que ... participe à ces activités?

Heures par semaine

3. À quelle fréquence est-ce que votre enfant effectue les activités suivantes :

(POUR CETTE QUESTION, VEUILLEZ UTILISER L'ITEM 2 DE LA FICHE DE RÉFÉRENCE.)

	Au moins une fois par semaine	Au moins une fois par mois	Quelques fois par année	Jamais
a. visiter la bibliothèque ou le bibliobus (y compris la bibliothèque de l'école)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. visiter une joujouthèque?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. visiter un centre ou un atelier éducatif (comme un centre de sciences ou un musée)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. aller au cinéma, au théâtre, au zoo ou assister à un concert, etc.?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. assister à un événement sportif, y compris des jeux récréatifs (comme une joute de hockey ou de base-ball)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. utiliser des ressources récréatives, comme un parc, un centre récréatif ou une piscine publique?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
g. aller à un centre récréatif ou d'activités pour enfants?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

4. Combien d'heures par jour est-ce que ... écoute la télévision ou des vidéocassettes?

Heures par jour

OU

00 ☐ Aucune

F Alphabétisation et activités d'apprentissage

DANS LE CAS D'UN ENFANT DE 3 ANS À 5 ANS ➡ PASSEZ À LA QUESTION 4

1. À quelle fréquence est-ce que vous ou votre conjoint(e), (S'IL Y A LIEU), avez la chance de participer aux activités suivantes avec ...?

(POUR CETTE QUESTION, VEUILLEZ UTILISER L'ITEM 3 DE LA FICHE DE RÉFÉRENCE.)

	Rarement	Quelques fois par mois	Une fois par semaine	Quelques fois par semaine	Chaque jour
a. Jouer à des jeux d'enfants (p. ex. coucou ou tape la galette)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. L'amener au magasin ou faire des courses	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Lire des histoires ou montrer des images ou des livres pour bébés	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

1. À quelle fréquence est-ce que vous ou votre conjoint(e), (S'IL Y A LIEU), avez la chance de participer aux activités suivantes avec ...?

(POUR CETTE QUESTION, VEUILLEZ UTILISER L'ITEM 3 DE LA FICHE DE RÉFÉRENCE.)

	Rarement	Quelques fois par mois	Une fois par semaine	Quelques fois par semaine	Chaque jour
d. Raconter des histoires	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Chanter des chansons	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Jouer à des jeux de mains ou chanter des comptines (comme Sur le pont d'Avignon)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Lui apprendre de nouveaux mots	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Aller marcher avec lui(elle) ou jouer dans la cour, au parc ou au terrain de jeux	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

2. Est-ce qu'un autre adulte ou un jeune fait ces activités avec votre enfant?

1 ☐ Oui

2 ☐ Non

3. Quel âge en mois avait votre enfant lorsque vous avez commencé à lui lire des livres ou à lui montrer des livres illustrés?

Mois

Arrêtez si
l'enfant est
âgé de 0 à
2 ans



**PASSEZ À LA SECTION H –
COMPORTEMENT (PAGE 15)**

Enfant de
3 à 5 ans



4. À quelle fréquence est-ce que vous ou votre conjoint(e) (S'IL Y A LIEU) avez la chance de participer aux activités suivantes avec votre enfant?

(VEUILLEZ UTILISER L'ITEM 3 DE LA FICHE DE RÉFÉRENCE.)

	Rarement	Quelques fois par mois	Une fois par semaine	Quelques fois par semaine	Chaque jour
a. L'amener au magasin ou faire des courses	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. Lui faire la lecture à haute voix	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Lui raconter des histoires	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Chanter des chansons	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Jouer à des jeux de mains ou chanter des comptines (comme Sur le pont d'Avignon)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Lui apprendre à écrire certaines lettres (en lettres moulées)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Lui apprendre à écrire des chiffres	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Lui apprendre à lire des mots	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Aller marcher avec lui(elle) ou jouer dans la cour, au parc ou au terrain de jeux	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. Lui faire exécuter des tâches ménagères	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
k. L'encourager à construire des choses (p. ex. avec des Lego ou d'autres blocs)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
l. L'encourager à faire des casse-têtes	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
m. L'encourager à écrire ou à faire semblant d'écrire	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
n. L'encourager à parler et prendre le temps de l'écouter	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
o. Jouer à des jeux de sociétés, comme Serpents et échelles, Trouble	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
p. L'encourager à utiliser des nombres dans ses activités quotidiennes, p. ex. compter les biscuits sur une plaque, le nombre de fourchettes à placer sur la table, le nombre de marches dans un escalier.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

5. Est-ce qu'un autre adulte ou un jeune fait ces activités avec votre enfant?

1 ☐ Oui

2 ☐ Non

6. Quel âge avait votre enfant lorsque vous avez commencé à lui faire des lectures régulièrement?

1 Ans ET 2 Mois

7. À quelle fréquence est-ce que ...

(VEUILLEZ UTILISER L'ITEM 3 DE LA FICHE DE RÉFÉRENCE.)

	Rarement	Quelques fois par mois	Une fois par semaine	Quelques fois par semaine	Chaque jour	N/A
a. regarde des livres ou essaie d'en lire?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
b. lit des livres simples?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
c. parle d'un livre avec la famille ou des amis?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
d. utilise un ordinateur à la maison pour lire, écrire ou compter?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>

8. Combien de livres votre enfant possède-t-il?

- 1 ☐ Aucun
 2 ☐ 1 ou 2 livres
 3 ☐ De 3 à 9 livres
 4 ☐ 10 et plus

9. Est-ce que ... reconnaît les couleurs de base, comme le rouge, le bleu, le jaune, le blanc et le noir?

- 1 ☐ Oui
 2 ☐ Non

10. Est-ce que ... reconnaît les formes de base, comme le carré, le triangle et le cercle?

- 1 ☐ Oui
 2 ☐ Non



Éducation - seulement pour les enfants de 4 et 5 ans

POUR LES ENFANTS DE 3 ANS ➡ PASSEZ À LA SECTION H – COMPORTEMENT (PAGE 15)

La prochaine section porte sur les expériences de ... à l'école.

1. Est-ce que ... va présentement à l'école ou est-ce qu'il(elle) suit un enseignement à domicile?

- 1 ☐ Oui
 2 ☐ Non ➡ PASSEZ À LA SECTION H – COMPORTEMENT (PAGE 15)

2. En quelle année est-il(elle)?

- 1 ☐ Prématernelle
 2 ☐ Maternelle
 3 ☐ Enseignement à domicile
 4 ☐ Autre

3. Au cours d'une semaine normale, à quelle fréquence est-ce que votre enfant suit des cours à l'école (ou à domicile)?
(LISEZ LA LISTE.)

- 1 ☐ journées complètes - tous les jours
- 2 ☐ demi-journées - tous les jours
- 3 ☐ journées complètes - tous les deux jours
- 4 ☐ demi-journées - tous les deux jours
- 5 ☐ autre fréquence, veuillez préciser

4. Dans quelle langue suit-il(elle) ses cours?

- 1 ☐ Anglais
- 2 ☐ Français
- 3 ☐ Les deux
- 4 ☐ Autre (PRÉCISEZ)

H Comportement

POUR LES ENFANTS DE 4 OU 5 ANS ➡ PASSEZ À LA QUESTION 8

Les prochaines questions portent sur le sommeil de

1. En général, combien de temps faut-il à ... pour s'endormir?

- 1 ☐ Moins de 15 minutes
- 2 ☐ De 15 minutes à moins de 30 minutes
- 3 ☐ De 30 minutes à moins de 45 minutes
- 4 ☐ De 45 minutes à moins de 60 minutes
- 5 ☐ 60 minutes ou plus

2. En général, combien d'heures d'affilée est-ce que ... dort la nuit?

- 1 ☐ Moins de 4 heures
- 2 ☐ De 4 heures à moins de 5 heures
- 3 ☐ De 5 heures à moins de 6 heures
- 4 ☐ De 6 heures à moins de 7 heures
- 5 ☐ De 7 heures à moins de 8 heures
- 6 ☐ 8 heures ou plus

PASSEZ À LA QUESTION 4

3. À quel âge a-t-il(elle) commencé à dormir pendant six heures d'affilée la nuit?

1 Ans ET 2 Mois

4. En général, combien de temps durent les siestes les plus longues de ... durant le jour?

- 1 ☐ Moins de 1 heure
- 2 ☐ De 1 heure à moins de 2 heures
- 3 ☐ De 2 heures à moins de 3 heures
- 4 ☐ De 3 heures à moins de 4 heures
- 5 ☐ 4 heures ou plus

5. Est-ce que ... exige une routine particulière et longue (plus de 30 minutes) avant d'aller se coucher (se faire bercer, chanter, comptines, etc.) sans quoi il(elle) ne peut pas dormir?

- 1 ☐ Presque chaque fois
2 ☐ Souvent
3 ☐ La moitié du temps
4 ☐ Parfois
5 ☐ Presque jamais

6. En moyenne, combien de fois par nuit votre sommeil a-t-il été interrompu par ... au cours du dernier mois?

- 1 ☐ Jamais
2 ☐ 1 ou 2 fois
3 ☐ 3 ou 4 fois
4 ☐ 5 fois ou plus

7. Est-ce que son sommeil est perturbé par des terreurs nocturnes (c.-à-d. il(elle) se réveille soudainement en pleurant, parfois tout(e) en sueur et désorienté(e))?

- 1 ☐ Jamais
2 ☐ Parfois
3 ☐ Souvent
4 ☐ Toujours

8. Combien d'heures de sommeil quotidien est-ce que ... dort en moyenne (INCLUEZ LES SIESTES DE JOUR ET LES NUITS)?

Heures

9. Est-ce que ... a dormi comme à l'habitude hier?

- 1 ☐ Oui
2 ☐ Non, moins qu'à l'habitude
3 ☐ Non, plus qu'à l'habitude

Arrêtez si
l'enfant est
âgé de 0 à
2 ans



**PASSEZ À LA SECTION I –
GARDE DES ENFANTS (PAGE 19)**

Maintenant, j'aimerais vous poser quelques questions au sujet du comportement ou des réactions de

10. Pour chaque question suivante, veuillez me dire si ... n'a jamais ou a rarement, parfois, souvent ou toujours agit de la sorte.

(VEUILLEZ UTILISER L'ITEM 4 DE LA FICHE DE RÉFÉRENCE.)

	Jamais	Rarement	Parfois	Souvent	Toujours
a. Lorsque ... a un problème avec un casse-tête ou un autre jouet d'assemblage, est-ce qu'il(elle) essaie jusqu'à ce que les pièces s'emboîtent?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. Si ... fait une activité de création, est-ce qu'il(elle) persévère même si les choses vont mal pendant un certain temps?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
c. Est-ce que ... demande à un autre enfant de lui laisser jouer à son tour avec un objet?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Est-ce que ... fait preuve d'une bonne période de concentration lorsqu'il(elle) travaille à une chose qui l'intéresse?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Est-ce que ... fait un effort pour réaliser une chose, même s'il(si elle) ne se sent pas sûr(e) de lui(d'elle)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Est-ce que ... démontre en général une certaine autonomie pour s'habiller?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Est-ce que ... démontre en général une certaine autonomie pour se laver?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Est-ce que ... a besoin d'aide pour aller à la toilette?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Est-ce que ... communique clairement ses besoins et ses sentiments?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
j. Est-ce que ... accomplit les tâches dont il(elle) est responsable sans que vous ayez à les lui rappeler?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

Le prochain groupe de questions porte sur la capacité de communication de

11. Pour chaque question suivante, veuillez me dire si ... ne peut jamais ou peut rarement, parfois, souvent ou toujours communiquer de la sorte.

(VEUILLEZ UTILISER L'ITEM 4 DE LA FICHE DE RÉFÉRENCE.)

	Jamais	Rarement	Parfois	Souvent	Toujours
a. Lorsqu'il(elle) écoute attentivement, est-ce que ... peut se souvenir d'une instruction simple et la réaliser après ne l'avoir entendue qu'une seule fois?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
b. Si ... ne comprend pas ce qu'une personne a dit, est-ce qu'il(elle) demande qu'on le lui répète ou explique?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

11.	Jamais	Rarement	Parfois	Souvent	Toujours
c. Est-ce que ... peut suivre le fil d'une conversation et y participer sans changer le sujet (même s'il(elle) n'y parvient pas toujours)?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
d. Est-ce que ... comprend l'histoire que vous lui lisez à partir d'un livre d'enfants ou qu'il(elle) écoute à la télévision dans le cadre d'une émission pour enfants?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
e. Est-ce que vous pouvez compter sur ... pour transmettre un message simple à une autre personne sans qu'il(elle) s'embrouille?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
f. Est-ce que les autres personnes, même celles que ... rencontre pour la première fois, comprennent bien ce qu'il(elle) dit?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
g. Est-ce que ... varie son intonation lorsqu'il(elle) parle, p. ex. fort, bas, avec enthousiasme, selon la situation?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
h. Est-ce que ... expérimente le langage, c.-à-d. utilise des expressions ou des mots nouveaux?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
i. Est-ce que ... explique avec clarté les choses qu'il(elle) a vues ou faites pour que vous ayez une très bonne idée de ce qui s'est passé?	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

12. Pour le prochain groupe de questions, veuillez penser au comportement de ... au cours des deux derniers mois. Vous devez préciser la fréquence à laquelle il(elle) a démontré le comportement décrit. Certains énoncés peuvent s'appliquer davantage à des enfants plus âgés, mais je vous demande de répondre avec la plus grande précision possible. Veuillez me dire si votre enfant n'a jamais ou a parfois ou très souvent adopté le comportement énoncé.

(VEUILLEZ UTILISER L'ITEM 5 DE LA FICHE DE RÉFÉRENCE.)

	Jamais	Parfois	Très souvent	Non applicable
a. Se joint facilement aux autres enfants pour jouer	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
b. Se fait des amis et les conserve	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
c. Réconforte ou aide les autres enfants	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
d. Aide aux tâches ménagères	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
e. Coopère avec les autres membres de la famille	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
f. Est créatif au travail et dans ses jeux	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
g. Démonstre de l'intérêt à diverses activités	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

12.	Jamais	Parfois	Très souvent	Non applicable
h. Démontre de l'empressement à apprendre de nouvelles choses	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
i. Répond de manière appropriée à l'agacement des amis et des cousins de son âge	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
j. Maîtrise son tempérament	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
k. Se concentre à une tâche et ne se laisse pas distraire	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
l. Écoute attentivement les autres	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>
m. Travaille à une activité jusqu'à ce qu'il(elle) l'ait terminée	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>

Garde des enfants

Maintenant, j'aimerais vous poser quelques questions au sujet des dispositions de garde de ...

1. Avez-vous actuellement recours à un service de garde d'enfants, comme une garderie, un(e) gardien(ne) d'enfants, la garde par un parent ou une autre personne, une garderie éducative ou une garderie scolaire pendant que vous (et votre conjoint(e)) êtes au travail ou aux études?

1 ☐ Oui

2 ☐ Non ➡ **PASSEZ À LA SECTION J – RÔLE PARENTAL (PAGE 20)**

2. Laquelle des méthodes de garde suivantes utilisez-vous actuellement pendant que vous (et votre époux(se) ou conjoint(e)) êtes au travail ou aux études?

(LISEZ LA LISTE. COCHEZ TOUTES LES RÉPONSES PERTINENTES.)

1 ☐ garde en milieu familial par une personne sans lien de parenté

2 ☐ garderie

3 ☐ garde en milieu familial par une personne apparentée

4 ☐ garde à la maison par une personne apparentée autre qu'un frère ou une sœur de l'enfant

5 ☐ garde à la maison par une personne sans lien de parenté

6 ☐ garderie éducative ou prématernelle

7 ☐ garderie scolaire

8 ☐ autre, veuillez préciser

3. Pendant combien d'heures par semaine faites-vous garder ... ?

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Heures par semaine

J Rôle parental

Les prochaines questions portent sur votre rôle parental.

1. Veuillez répondre aux énoncés suivants en indiquant si vous êtes entièrement d'accord, d'accord, un peu d'accord, un peu en désaccord, en désaccord, entièrement en désaccord.

(VEUILLEZ UTILISER L'ITEM 6 DE LA FICHE DE RÉFÉRENCE.)

	Entièrement d'accord	D'accord	Un peu d'accord	Un peu en désaccord	En désaccord	Entièrement en désaccord
a. Les problèmes de soins des enfants sont faciles à résoudre lorsque vous connaissez les actions qui influencent votre enfant, c'est une compréhension que j'ai acquise.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
b. Même si le rôle de parent m'apporte un enrichissement, je me sens frustré en ce moment, à l'âge actuel de mon enfant.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
c. Je me couche dans le même état d'esprit que je me lève le matin - j'ai l'impression de ne pas accomplir grand chose.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
d. Je ne sais pas pourquoi, mais parfois lorsque je devrais avoir la maîtrise, j'ai l'impression d'être manipulé(e).	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
e. Ma mère ou mon père était mieux préparé(e) que moi au rôle parental.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
f. Je ferais un excellent modèle à suivre pour un nouveau parent qui désire apprendre à être un bon parent.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
g. Je m'acquitte très bien du rôle de parent et je résous facilement tous les problèmes.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
h. Un problème du rôle de parent, c'est de ne pas savoir si je m'en acquitte bien ou mal.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
i. Parfois j'ai l'impression de tourner en rond.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
j. Je réponds à mes propres attentes pour ce qui est de la compétence nécessaire pour les soins donnés à mon enfant.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
k. Si une personne peut trouver la réponse aux problèmes de mon enfant, c'est moi.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
l. J'ai des talents et des intérêts seulement dans des domaines autres que dans le rôle de parent.	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>

- | 1. | Entièrement d'accord | D'accord | Un peu d'accord | Un peu en désaccord | En désaccord | Entièrement en désaccord |
|---|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------------|
| m. Depuis le temps que je suis parent, je me sens très à l'aise dans ce rôle. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |
| n. Si seulement le fait d'être parent d'un enfant était plus intéressant, je serais plus motivé(e) à être un meilleur parent. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |
| o. Je crois sincèrement que je détiens les compétences nécessaires pour être un bon parent pour mon enfant. | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |
| p. Le rôle de parent me stresse et me rend inquiet(ète). | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> | 6 <input type="radio"/> |

POUR LES MÉNAGES DONT LA PCM À UN(E) CONJOINT(E)


2. Lorsqu'il y a une décision à prendre (p. ex. établir une règle, punir un enfant, choix de l'école), dans quelle proportion ...

(VEUILLEZ UTILISER L'ITEM 7 DE LA FICHE DE RÉFÉRENCE.)

- | | Jamais | Moins de la moitié du temps | Environ la moitié du temps | Plus de la moitié du temps | Toujours |
|--|-------------------------|-----------------------------|----------------------------|----------------------------|-------------------------|
| a. est-ce que vous et votre conjoint(e) êtes du même avis sur la décision à prendre? | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> |
| b. est-ce que vous appuyez en général la décision de votre conjoint(e)? | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> |
| c. est-ce que vous consultez votre conjoint(e) avant de prendre une décision? | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> | 4 <input type="radio"/> | 5 <input type="radio"/> |

Maintenant, j'aimerais vous poser des questions générales à votre sujet et au sujet de votre conjoint(e) (LE CAS ÉCHÉANT).

	PCM	Conjoint(e)
Inscrivez le nom de la PCM et du conjoint(e) de la PCM →	<div></div>	<div></div>
1. En excluant la maternelle, combien d'années avez-vous terminé avec succès au primaire et au secondaire? Votre conjoint(e)?	1 <input type="radio"/> Aucune 2 <input type="radio"/> 1 à 5 ans 3 <input type="radio"/> 6 ans 4 <input type="radio"/> 7 ans 5 <input type="radio"/> 8 ans 6 <input type="radio"/> 9 ans 7 <input type="radio"/> 10 ans 8 <input type="radio"/> 11 ans 9 <input type="radio"/> 12 ans 10 <input type="radio"/> 13 ans	1 <input type="radio"/> Aucune 2 <input type="radio"/> 1 à 5 ans 3 <input type="radio"/> 6 ans 4 <input type="radio"/> 7 ans 5 <input type="radio"/> 8 ans 6 <input type="radio"/> 9 ans 7 <input type="radio"/> 10 ans 8 <input type="radio"/> 11 ans 9 <input type="radio"/> 12 ans 10 <input type="radio"/> 13 ans
2. Avez-vous obtenu votre diplôme d'études secondaires? Votre conjoint(e)?	1 <input type="radio"/> Oui 2 <input type="radio"/> Non	1 <input type="radio"/> Oui 2 <input type="radio"/> Non
3. Avez-vous/a-t-il(elle) fréquenté un établissement post-secondaire ou une école comme une université, un collège communautaire, un collège commercial, une école de métier ou professionnelle ou un CÉGEP?	1 <input type="radio"/> Oui 2 <input type="radio"/> Non	1 <input type="radio"/> Oui 2 <input type="radio"/> Non

	PCM	Conjoint(e)
Inscrivez le nom de la PCM et du conjoint(e) de la PCM 	<div></div>	<div></div>
4. Quel est le plus haut niveau de scolarité que vous avez obtenu? Votre conjoint(e)?	1 <input type="radio"/> Quelques cours d'une école de métiers, technique ou professionnelle ou d'un collège commercial 2 <input type="radio"/> Quelques cours d'un collège préuniversitaire, d'un CÉGEP ou d'une école de nursing 3 <input type="radio"/> Quelques cours universitaires 4 <input type="radio"/> Diplôme ou certificat d'une école de métiers, technique ou professionnelle ou d'un collège commercial 5 <input type="radio"/> Diplôme ou certificat d'un collège préuniversitaire, d'un CÉGEP, d'une école de nursing 6 <input type="radio"/> Baccalauréat ou diplôme de premier cycle ou d'un établissement de formation des maîtres (p. ex. B.A., B.SC., B.A. CS, B.ED.) 7 <input type="radio"/> Maîtrise (p. ex. M.A., M.SC., M.ED.) 8 <input type="radio"/> Diplôme en médecine (M.D.), dentisterie (D.D.S., D.M.D.), médecine vétérinaire (D.V.M) optométrie (O.D.) ou droit (LL.B) 9 <input type="radio"/> Doctorat acquis (p. ex. PH.D, D.SC., D.ED.) 10 <input type="radio"/> Autre (<i>PRÉCISEZ</i>) <div></div> <div></div>	1 <input type="radio"/> Quelques cours d'une école de métiers, technique ou professionnelle ou d'un collège commercial 2 <input type="radio"/> Quelques cours d'un collège préuniversitaire, d'un CÉGEP ou d'une école de nursing 3 <input type="radio"/> Quelques cours universitaires 4 <input type="radio"/> Diplôme ou certificat d'une école de métiers, technique ou professionnelle ou d'un collège commercial 5 <input type="radio"/> Diplôme ou certificat d'un collège préuniversitaire, d'un CÉGEP, d'une école de nursing 6 <input type="radio"/> Baccalauréat ou diplôme de premier cycle ou d'un établissement de formation des maîtres (p. ex. B.A., B.SC., B.A. CS, B.ED.) 7 <input type="radio"/> Maîtrise (p. ex. M.A., M.SC., M.ED.) 8 <input type="radio"/> Diplôme en médecine (M.D.), dentisterie (D.D.S., D.M.D.), médecine vétérinaire (D.V.M) optométrie (O.D.) ou droit (LL.B) 9 <input type="radio"/> Doctorat acquis (p. ex. PH.D, D.SC., D.ED.) 10 <input type="radio"/> Autre (<i>PRÉCISEZ</i>) <div></div> <div></div>
5. Je vais vous lire une liste d'activités. En excluant le travail et les études, veuillez me dire si vous et votre conjoint(e) pratiquez ces activités chaque jour, chaque semaine, chaque mois, plusieurs fois par année, une ou deux fois par année ou jamais. (VEUILLEZ UTILISER L'ITEM 8 DE LA FICHE DE RÉFÉRENCE.)		
a. Aller à la bibliothèque publique.	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais
b. Rédiger des lettres ou tout autre texte/article de plus d'une page de longueur.	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais

Suite	PCM	Conjoint(e)
c. Lire des journaux ou des revues.	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais
d. Lire des livres.	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais	1 <input type="radio"/> Chaque jour 2 <input type="radio"/> Chaque semaine 3 <input type="radio"/> Chaque mois 4 <input type="radio"/> Plusieurs fois par année 5 <input type="radio"/> Une ou deux fois par année 6 <input type="radio"/> Jamais

DEMANDEZ CETTE QUESTION À LA PCM SEULEMENT.

6. Quels documents possédez-vous actuellement à la maison? (LISEZ LA LISTE. COCHEZ TOUTES LES RÉPONSES PERTINENTES.)

- 1 ☐ Journaux quotidiens
2 ☐ Magazines et journaux hebdomadaires
3 ☐ Plus de 25 livres
4 ☐ Encyclopédie en plusieurs volumes
5 ☐ Dictionnaire

L Travail/Activité

	PCM	Conjoint(e)
1. Quelle est votre principale activité en ce moment? Votre conjoint(e)? (LISEZ LA LISTE.)	1 <input type="radio"/> Soins de la famille (PASSEZ À LA QUESTION 3) 2 <input type="radio"/> Travailler pour un salaire ou en vue d'un bénéfice 3 <input type="radio"/> M'occuper de la famille et travailler pour un salaire ou un bénéfice 4 <input type="radio"/> Étudier (PASSEZ À LA QUESTION 3) 5 <input type="radio"/> Me remettre d'une maladie ou d'une incapacité (PASSEZ À LA QUESTION 3) 6 <input type="radio"/> Rechercher un emploi (PASSEZ À LA QUESTION 3) 7 <input type="radio"/> Retraité(e) (PASSEZ À LA QUESTION 3) 8 <input type="radio"/> Autre (PRÉCISEZ) (PASSEZ À LA QUESTION 3)	1 <input type="radio"/> Soins de la famille (PASSEZ À LA QUESTION 3) 2 <input type="radio"/> Travailler pour un salaire ou en vue d'un bénéfice 3 <input type="radio"/> M'occuper de la famille et travailler pour un salaire ou un bénéfice 4 <input type="radio"/> Étudier (PASSEZ À LA QUESTION 3) 5 <input type="radio"/> Me remettre d'une maladie ou d'une incapacité (PASSEZ À LA QUESTION 3) 6 <input type="radio"/> Rechercher un emploi (PASSEZ À LA QUESTION 3) 7 <input type="radio"/> Retraité(e) (PASSEZ À LA QUESTION 3) 8 <input type="radio"/> Autre (PRÉCISEZ) (PASSEZ À LA QUESTION 3)

	PCM	Conjoint(e)
2. Combien d'emplois occupez-vous actuellement? Votre conjoint(e)?	<input type="text"/> <input type="text"/> <input type="text"/> Emploi(s)	<input type="text"/> <input type="text"/> <input type="text"/> Emploi(s)
3. Avez-vous travaillé pour un salaire ou un profit au cours des 12 derniers mois? Votre conjoint(e)?	1 <input type="radio"/> Oui 2 <input type="radio"/> Non ➡ <i>PASSEZ À LA SECTION M – REVENU OU POSEZ LES QUESTIONS 3,4,5 POUR LE(LA) CONJOINT(E)</i>	1 <input type="radio"/> Oui 2 <input type="radio"/> Non ➡ <i>PASSEZ À LA SECTION M – REVENU</i>
4. Au cours des 12 derniers mois, combien de semaines avez-vous travaillé? Votre conjoint(e)? (Incluez les vacances payées, les congés de maternité payés ou les congés parentaux et les congés de maladie payés.)	<input type="text"/> <input type="text"/> <input type="text"/> Semaine(s)	<input type="text"/> <input type="text"/> <input type="text"/> Semaine(s)
5. Environ combien d'heures par semaine avez-vous travaillé? Votre conjoint(e)? (LISEZ LA LISTE.)	1 <input type="radio"/> Moins de 10 heures 2 <input type="radio"/> Entre 10 et 19 heures 3 <input type="radio"/> Entre 20 et 29 heures 4 <input type="radio"/> Entre 30 et 39 heures 5 <input type="radio"/> Entre 40 et 49 heures 6 <input type="radio"/> 50 heures et plus	1 <input type="radio"/> Moins de 10 heures 2 <input type="radio"/> Entre 10 et 19 heures 3 <input type="radio"/> Entre 20 et 29 heures 4 <input type="radio"/> Entre 30 et 39 heures 5 <input type="radio"/> Entre 40 et 49 heures 6 <input type="radio"/> 50 heures et plus

M

Revenu

POSEZ LES QUESTIONS À LA PCM SEULEMENT

1. Au cours des 12 derniers mois, est-ce que votre ménage a touché un revenu des sources suivantes : (LISEZ LA LISTE. COCHEZ TOUTES LES RÉPONSES PERTINENTES.)

- 1 ☐ Salaires et traitements
- 2 ☐ Revenu d'un travail autonome (y compris les affaires, les honoraires, les commissions, le gardiennage)
- 3 ☐ Prestations d'assurance-emploi
- 4 ☐ Prestations fiscales nationales et provinciales pour enfants
- 5 ☐ Aide sociale (bien-être) et suppléments provinciaux de revenu
- 6 ☐ Pension alimentaire pour enfants et du conjoint
- 7 ☐ Autres sources, y compris dividendes, intérêts, gains en capital, pourboires
- 8 ☐ Refus ➡ *PASSEZ À LA QUESTION 4*

2. En additionnant le revenu de toutes les sources précitées, quel est le revenu total du ménage avant impôt et autres déductions au cours des 12 derniers mois? Votre meilleure estimation est acceptable.

\$ _____

➡ PASSEZ À LA QUESTION 4

00 ○ Ne sait pas ➡ **PASSEZ À LA QUESTION 8**

01 ☐ Refus ➡ **PASSEZ À LA QUESTION 4**

3. Dans ce cas, pouvez-vous évaluer dans laquelle des catégories suivantes se situe le revenu de votre ménage?

```

graph LR
    01((01)) --- 03((03))
    01 --- 04((04))
    03 --- 07((07))
    03 --- 08((08))
    04 --- 09((09))
    04 --- 10((10))
    02((02)) --- 05((05))
    02 --- 06((06))
    05 --- 11((11))
    05 --- 12((12))
    06 --- 13((13))
    06 --- 14((14))
    06 --- 15((15))
    06 --- 16((16))

```

01 ○ Moins de 20,000 \$

03 ○ Moins de 10,000 \$

07 ○ Moins de 5,000 \$

08 ○ 5,000 \$ ou plus

04 ○ 10,000 \$ ou plus

09 ○ Moins de 15 000 \$

10 ○ 15 000 \$ ou plus

02 ○ 20 000 \$ ou plus

05 ○ Moins de 40 000 \$

11 ○ Moins de 30,000 \$

12 ○ 30,000 \$ ou plus

06 ○ 40,000 \$ ou plus

13 ○ Moins de 50,000 \$

14 ○ 50,000 \$ à moins de 60,000 \$

15 ○ 60 000 \$ à moins de 80 000 \$

16 ○ 80,000 \$ ou plus

Les prochaines questions ont pour but de savoir si, selon vous, le revenu de votre ménage est adéquat.

Veuillez me dire ce que vous pensez des énoncés suivants, c.-à-d. si vous êtes entièrement d'accord, d'accord, en désaccord ou entièrement en désaccord.

4. Vous vous inquiétez de savoir si les sommes dont vous disposez sont suffisantes au soutien de votre ménage.

- 1 ☐ Entièrement d'accord
2 ☐ D'accord
3 ☐ En désaccord
4 ☐ Entièrement en désaccord

5. Si vous ou votre conjoint(e) perdez votre emploi, vous êtes persuadé(e) que vous pourriez trouver un emploi équivalent en moins de 6 mois.

- 1 ☐ Entièrement d'accord
- 2 ☐ D'accord
- 3 ☐ En désaccord
- 4 ☐ Entièrement en désaccord
- 5 ☐ Ne travaille pas pour un salaire/ne s'applique pas

6. Comment percevez-vous votre situation financière par rapport à celle des autres personnes de votre groupe d'âge? Êtes-vous : (LISEZ LA LISTE.)

- 1 ☐ plus à l'aise financièrement?
2 ☐ moins à l'aise financièrement?
3 ☐ à peu près équivalent?

7. Diriez-vous que vous (et votre ménage) êtes plus à l'aise, moins à l'aise ou à peu près équivalent financièrement que vous ne l'étiez il y a un an?

- 1 ☐ Plus à l'aise financièrement
2 ☐ Moins à l'aise financièrement
3 ☐ À peu près équivalent

8. Lorsque vous entrevoyez l'avenir, pensez-vous que dans un an vous (et votre ménage) serez plus à l'aise, moins à l'aise ou à peu près équivalent que ce que vous ne l'êtes maintenant?

- 1 ☐ Plus à l'aise financièrement
2 ☐ Moins à l'aise financièrement
3 ☐ À peu près équivalent

Indiquez l'heure de fin (selon le format de 24 heures)

:

SI LE RÉPONDANT A REÇU LE QUESTIONNAIRE SUR LES ÉTAPES DU DÉVELOPPEMENT (LIVRET 8), (VÉRIFIEZ LE FORMULAIRE DE CONTRÔLE), VEUILLEZ LE RAMASSER. SI LE RÉPONDANT N'A PAS REMPLI LE QUESTIONNAIRE, REMPLIR LE QUESTIONNAIRE AVEC LE RÉPONDANT.

MacArthur Version abrégée – Questionnaire sur le vocabulaire (Livret 9) – Pour les enfants de 0 à 2 ans

REMETTEZ AU RÉPONDANT LE QUESTIONNAIRE SUR LE VOCABULAIRE MaCARTHUR VERSION ABRÉGÉE POUR QU'IL LE REMPLISSE.

Ce questionnaire permet de consigner le développement de votre enfant pour ce qui est du vocabulaire. Veuillez remplir ce formulaire.

SI LE RÉPONDANT NE PARVIENT PAS OU NE VEUT PAS REMPLIR LE QUESTIONNAIRE LUI(ELLE)-MÊME, REMPLIR LE QUESTIONNAIRE AVEC LE RÉPONDANT

PASSEZ À LA SECTION SUIVANTE – QUESTIONNAIRE DE COMPTE RENDU À L'INTENTION DES PARENTS (PAGE 28)

CONSENTEMENT DU RÉPONDANT – ACTIVITÉS AVEC LES ENFANTS DE 3 À 5 ANS

1. La prochaine section de l'interview est consacrée à quelques courtes activités faites avec _____ (ENFANT CHOISI)

Comme c'était le cas des autres renseignements que vous nous avez fournis, les résultats seront tenus confidentiels. Voulez-vous que je fasse ces activités avec votre enfant?

- 1 ☐ Le répondant consent
2 ☐ Le répondant refuse

SI LE PARENT SOUHAITE OBTENIR DE PLUS AMPLES RENSEIGNEMENTS SUR LES ACTIVITÉS PRÉCISES, CONSULTEZ LE FORMULAIRE DE CONTRÔLE POUR DÉTERMINER QUELS QUESTIONNAIRES (LIVRETS) SERONT FAITS AVEC L'ENFANT. VOTRE MANUEL DE L'INTERVIEWEUR COMPORTE DES RENSEIGNEMENTS SUR CHAQUE QUESTIONNAIRE.

LORSQUE VOUS AUREZ OBTENU LE CONSENTEMENT, PASSEZ AU PROCHAIN QUESTIONNAIRE, TEL QU'INDIQUÉ SUR LE FORMULAIRE DE CONTRÔLE.

LORSQUE VOUS AUREZ REMPLI LES QUESTIONNAIRES AVEC L'ENFANT, REMPLISSEZ LA SECTION SUR LES QUESTIONS DE COMPTE-RENDU À L'INTENTION DES PARENTS AUX PAGES SUIVANTES.

Questions de compte-rendu à l'intention des parents

La consignation de vos commentaires est un autre élément important de l'enquête. J'aimerais que vous répondiez à ces questions en toute honnêteté et sans hésitation afin que vous me disiez réellement ce que vous pensez. Il nous est important de connaître vos sentiments parce que nous désirons apprendre de vous. Si vous avez des suggestions au sujet de l'enquête, veuillez nous en faire part.

I – Relations avec le répondant

1. Croyez-vous que la lettre de présentation que vous avez reçue vous a encouragé à participer à l'enquête?

1 ☐ Oui ➡ pourquoi? _____

2 ☐ Non ➡ pourquoi? _____

2. Selon vous, pourrions-nous améliorer la lettre, par exemple, en changeant des mots ou des phrases ou en rendant l'enquête plus attrayante?

3. La brochure annexée à la lettre avait pour but de vous donner quelques renseignements sur l'enquête et de vous aider à en comprendre l'importance. Y avez-vous trouvé des renseignements utiles?

4. Est-ce qu'elle vous a encouragé à participer? Pourquoi?

1 ☐ Oui ➡ pourquoi? _____

2 ☐ Non ➡ pourquoi? _____

5. **Pouvons-nous améliorer la brochure en y ajoutant d'autres renseignements ou en changeant son format ou sa disposition?**

6. **Quelle a été la réaction de votre enfant lorsqu'il(elle) a reçu l'affiche et la photo?**

7. **Pensez-vous que l'affiche et la photo sont une bonne idée pour susciter votre participation à l'enquête à mesure que votre enfant grandira?**

8. **Pouvons-nous améliorer l'affiche et la photo ou devons-nous recourir à autre chose pour que votre enfant se sente important(e)?**

POUR LES PARENTS D'UN ENFANT DE 3 À 5 ANS SEULEMENT

POUR LES PARENTS D'UN ENFANT DE 0 À 2 ANS : PASSEZ À LA SECTION III (PAGE 32) – QUESTIONNAIRE SUR LES ÉTAPES DU DÉVELOPPEMENT.

II – Activités avec l'enfant

1. **Que pensez-vous de la durée des activités avec votre enfant?**

1 ☐ Juste de la bonne longueur

2 ☐ Trop longue ➡ Quelle serait la durée raisonnable?

3 ☐ Trop courte ➡ Que manque-t-il selon vous?

2. Si une interview avec vous devait durer une heure et demie, avec en plus 30 minutes pour effectuer les activités avec l'enfant, quelle serait le meilleur moment pour mener l'interview? (INDIQUEZ TOUT CE QUI EST PERTINENT)

Semaine

Fin de semaine

1 ☐ Avant-midi

4 ☐ Avant-midi

2 ☐ Après-midi

5 ☐ Après-midi

3 ☐ Soirée

6 ☐ Soirée

3. Selon vous, est-ce que votre enfant s'est comporté normalement ou est-ce que ma présence lui a fait adopter un comportement différent?

1 ☐ Normal

2 ☐ Différent

Si l'enfant a adopté un comportement différent, en quoi consistait cette différence?

4. Selon vous, quelle a été la réaction de l'enfant face à ces activités?

5. De quelle manière aurais-je pu améliorer ma relation avec lui(elle)?

6. Pensez-vous que la langue utilisée (anglais ou français) a soulevé des problèmes chez votre enfant?

1 ☐ Aucun problème

2 ☐ Oui, il y a eu un problème

Quel était ce problème?

7. Que diriez-vous si je vous demandais de quitter la pièce durant ces activités?

8. Pour ce qui est de la propreté du matériel requis pour les activités (blocs, cartes, etc), est-ce suffisant si je vous dit que le matériel a été nettoyé?

1 ☐ Oui

2 ☐ Non

Si non, almeriez-vous :

	Oui	Non
a. lire une feuille énonçant la procédure?	1 <input type="radio"/>	2 <input type="radio"/>
b. voir nettoyer le matériel chez vous?	1 <input type="radio"/>	2 <input type="radio"/>
c. voir le matériel dans un sac scellé avant usage?	1 <input type="radio"/>	2 <input type="radio"/>

Autre, veuillez précisez

9. Considérez-vous que ces activités sont indiscretes?

10. Y a-t-il des questions ou des activités que vous jugiez hors contexte pour votre enfant?

1 ☐ Oui

2 ☐ Non

Si oui, lesquelles? Pourquoi?

11. Y a-t-il du matériel que vous jugiez inapproprié pour votre enfant?

1 ☐ Oui

2 ☐ Non

Si oui, lequel? Pourquoi?

12. Avant les activités, est-ce que je vous ai fourni assez de renseignements sur celles-ci?

1 ☐ Oui

2 ☐ Non

Si non, quel type de renseignement auriez-vous aimé recevoir?

13. Si vous pouviez formuler une ou deux suggestions pour améliorer ces activités, quelles seraient-elles?

III – Questionnaire sur les étapes du développement

POSEZ LES QUESTIONS DE LA PRÉSENTE SECTION SEULEMENT SI LE PARENT A REÇU LE QUESTIONNAIRE SUR LES ÉTAPES DU DÉVELOPPEMENT. AUTREMENT:

- POUR LES ENFANTS DE 0 À 2 ANS ➡ PASSEZ À LA SECTION IV (PAGE 33) – QUESTIONNAIRE DU PARENT ET QUESTIONNAIRE SUR LE VOCABULAIRE-MACARTHUR VERSION ABRÉGÉE
- POUR LES ENFANTS DE 3 À 5 ANS ➡ PASSEZ À LA SECTION V (PAGE 37) – QUESTIONNAIRE DU PARENT

1. Que pensez-vous de la durée du questionnaire que vous avez reçu par la poste?

1 ☐ Juste de la bonne longueur

2 ☐ Trop long ➡ Quelle serait la durée raisonnable? _____

3 ☐ Trop court

2. Environ combien de temps vous a-t-il fallu pour le remplir?

1 Heures ET 2 Minutes

3. a) Est-ce que le questionnaire était assez explicite pour que vous puissiez le remplir sans difficulté (c.-à-d. difficulté à trouver le début ou à savoir quoi faire)?

b) Si non, comment pourrions-nous améliorer les renseignements que vous avez reçus?

4. Est-ce que le questionnaire prenait trop de votre temps ou est-ce que vous avez aimé prendre la responsabilité de cette partie de l'enquête?

1 ☐ Le questionnaire prend trop de mon temps

2 ☐ J'ai aimé remplir le questionnaire

5. Y a-t-il des questions que vous ne compreniez pas ou qui portaient à confusion?

1 ☐ Oui

2 ☐ Non

Si oui, lesquelles?

6. Auriez-vous préféré que je vous pose les questions?

1 ☐ Oui

2 ☐ Non

Pourquoi?

IV – Questionnaire du parent et Questionnaire sur le vocabulaire – MacArthur version abrégée (POUR LES PARENTS D'UN ENFANT DE 0 À 2 ANS)

PASSEZ À LA SECTION V (PAGE 37) POUR LES PARENTS D'UN ENFANT DE 3 À 5 ANS.

REMETTEZ AU RÉPONDANT UN EXEMPLAIRE EN BLANC DU QUESTIONNAIRE DU PARENT POUR L'AIDER À RÉPONDRE AUX QUESTIONS SUIVANTES.

1. Section C – Santé de l'enfant

Connaissez-vous la taille et le poids ou les avez-vous estimés ?

1 ☐ Je connaissais les deux

2 ☐ J'ai estimé les deux

3 ☐ Je savais seulement sa taille

4 ☐ Je savais seulement son poids

2. Section D – Développement de l'enfant – questions 1-2

a) Que pensez-vous de ces questions ?

b) Est-ce qu'elles permettent de saisir la connaissance des parents au sujet du développement d'un jeune enfant ?

3. Questions 3-8

a) Avez-vous des commentaires à formuler au sujet de ces questions sur les jalons du développement d'un enfant ?

b) Étiez-vous en mesure de vous souvenir des informations demandées ou les avez-vous estimées ?

1 ☐ Je m'en souvenais

2 ☐ Je les ai estimées

4. Section E – Activités – question 1 – Que signifiait "un programme visant à améliorer l'apprentissage et le développement de l'enfant " pour vous ?

5. Question 3 – Jugez-vous que certaines des activités de la liste n'étaient pas pertinentes ou appropriés pour ...?

1 ☐ Oui ➡ Si oui, lesquelles ? _____

2 ☐ Non

6. Section F – Alphabétisation et activités d'apprentissage – question 1

a) Diriez-vous que cette question était facile ou difficile à répondre?

1 ☐ Facile

2 ☐ Difficile

b) Est-ce que le choix de réponse était pertinent?

1 ☐ Oui

2 ☐ Non

Si non, quels changements aimeriez-vous suggérer?

7. Question 1(f) – Lorsque j'ai utilisé l'énoncé "Jouer à des jeux de mains ou chanter des comptines", comment l'avez-vous interprété ?

8. Ajouteriez-vous d'autres activités à cette liste ?

- 1 ☐ Oui ➡ Si oui, lesquelles? _____
- 2 ☐ Non

9. Section J – Rôle parental – question 1

a) Cette question porte sur votre faculté d'être parent. Quelle était votre réaction à cette partie du questionnaire?

b) Avez-vous des commentaires ou des suggestions à formuler afin d'améliorer cette section?

10. Rôle parental – question 2

a) Selon vous, est-ce qu'il était facile ou difficile de répondre à cette série de questions sur la prise de décision entre parents?

- 1 ☐ Facile
- 2 ☐ Difficile

b) Est-ce que vous aimeriez suggérer des changements?

11. Revenu – questions 4-8

a) Que pensez-vous de ces questions sur la sécurité financière de votre ménage?

b) Est-ce que vous aimeriez suggérer des changements?

12. Y a-t-il d'autres questions ou sections auxquelles vous avez eu de la difficulté à répondre parce que la question ou son but n'était pas clair?

1 ☐ Oui

2 ☐ Non

Si oui, quelles questions?

13. Est-ce que le langage ou les termes utilisés dans le questionnaire étaient faciles à comprendre?

1 ☐ Oui

2 ☐ Non

Si non, quels termes ou quelles questions étaient difficiles à comprendre?

14. Y a-t-il tout autre commentaire au sujet du questionnaire que vous aimeriez partager?

Questionnaire sur le vocabulaire – MacArthur version abrégée

1. Les questions étaient-elles faciles ou difficiles à répondre ?

1 ☐ Facile

2 ☐ Difficile ➡ Pourquoi? _____

2. Que pensez-vous de la durée du questionnaire sur le vocabulaire?

1 ☐ Juste de la bonne longueur

2 ☐ Trop long ➡ Quelle serait la durée raisonnable ? _____

3 ☐ Trop court ➡ Que manque-t-il selon vous ? _____

3. Y avait-il des mots qui n'étaient pas pertinents / appropriés ?

1 ☐ Oui, précisez _____

2 ☐ Non

4. Auriez-vous mieux aimé que je complète ce questionnaire avec vous ?

- 1 ☐ J'aurais préféré ➡ Pourquoi? _____
- 2 ☐ Je n'aurais pas aimé

PASSEZ À LA SECTION VI (PAGE 40) – QUESTIONS GÉNÉRALES SUR L'ENSEMBLE DE L'ENQUÊTE

V – Questionnaire du parent (POUR LES PARENTS D'UN ENFANT DE 3 À 5 ANS)

REMETTEZ AU RÉPONDANT UN EXEMPLAIRE EN BLANC DU QUESTIONNAIRE DU PARENT POUR L'AIDER À RÉPONDRE AUX QUESTIONS SUIVANTES.

1. Section C – Santé de l'enfant – Connaissiez-vous la taille et le poids ou les avez-vous estimés ?

- 1 ☐ Je connaissais les deux
- 2 ☐ J'ai estimé les deux
- 3 ☐ Je savais seulement sa taille
- 4 ☐ Je savais seulement son poids

2. Section E – Activités – question 1 – Que signifiait "un programme visant à améliorer l'apprentissage et le développement de l'enfant " pour vous ?

3. Question 3 – Jugez-vous que certaines des activités de la liste n'étaient pas pertinentes ou appropriées pour ...?

- 01 ☐ Oui ➡ Si oui, lesquelles ? _____
- 02 ☐ Non

4. Section F – Alphabétisation et activités d'apprentissage, questions 4 et 7 – Diriez-vous que ces questions étaient faciles ou difficiles à répondre ?

- 01 ☐ Faciles
- 02 ☐ Difficiles

b) Est-ce que le choix de réponses était pertinent/adéquat ?

- 01 ☐ Oui
- 02 ☐ Non

Si non, quels changements aimeriez-vous suggérer ?

5. Question 7(b) – Lorsque j'ai utilisé le terme « livres simples », qu'est-ce que vous avez compris au juste?

6. Ajouteriez-vous d'autres activités à ces listes ?

- 1 ☐ Oui ➡ Si oui, lesquelles _____
- 2 ☐ Non

7. Section H – Comportement – question 10 – Avez-vous trouvé ces questions faciles ou difficiles à répondre ?

- 1 ☐ Facile
- 2 ☐ Difficile ➡ Pourquoi? _____

8. Question 10(j) – Qu'avez-vous compris dans cette question ? Par exemple, quelles sont les tâches dont il/elle est responsable ?

9. Question 11 – Est-ce que ces questions sur les aptitudes à la communication de l'enfant semblaient pertinentes à votre enfant ?

- 1 ☐ Oui
- 2 ☐ Non

Si non, quelles questions ne sont pas pertinentes et que suggéreriez-vous pour améliorer la question dans l'ensemble?

10. Question 12 – Avez-vous trouvé ces questions faciles ou difficiles à répondre ?

- 1 ☐ Faciles
- 2 ☐ Difficiles ➡ Pourquoi? _____

11. Section J – Rôle parental – question 1

a) Cette question porte sur votre sentiment de compétence comme parent. Quelle était votre réaction à cette partie du questionnaire?

b) Avez-vous des commentaires ou des suggestions à formuler afin d'améliorer cette section?

12. Question 2

a) Selon vous, est-ce qu'il était facile ou difficile de répondre à cette série de questions sur la prise de décision entre parents?

1 ☐ Facile

2 ☐ Difficile

b) Est-ce que vous aimeriez suggérer des changements?

13. Section M – Revenu – questions 4-8

a) Que pensez-vous de ces questions sur la sécurité financière de votre ménage?

b) Est-ce que vous aimeriez suggérer des changements?

14. Y a-t-il d'autres questions ou sections auxquelles vous avez eu de la difficulté à répondre parce que la question ou son but n'était pas clair?

1 ☐ Non

2 ☐ Oui

Si oui, quelles questions?

15. Est-ce que le langage ou les termes utilisés dans le questionnaire étaient faciles à comprendre?

1 ☐ Oui

2 ☐ Non

Si non, quels termes ou quelles questions étaient difficiles à comprendre?

VI – Questions générales sur l'ensemble de l'enquête

1. Que pensez-vous de la durée totale de l'interview?

1 ☐ Juste assez longue

2 ☐ Trop longue ➡ Quelle serait une durée raisonnable? _____

3 ☐ Trop courte ➡ Selon vous, que manque-t-il? _____

2. La présente enquête porte sur nos vies personnelles et les gens peuvent juger que certaines questions sont personnelles ou confidentielles.

a) Y a-t-il une question ou une série de questions que vous jugiez trop personnelles?

1 ☐ Non

2 ☐ Oui

Si oui, quelles étaient ces questions et quelle est votre réaction ou votre sentiment à leur égard?

b) Pouvez-vous nous suggérer des façons d'améliorer notre approche pour poser ce genre de questions?

3. Y a-t-il tout autre commentaire au sujet de l'interview ou de l'enquête que vous aimeriez partager?

APPENDIX H

Ages and Stages Questionnaire - Booklet 8



National Longitudinal Survey of Children and Youth Understanding the Early Years Ages and Stages Questionnaire

Booklet 8



On the following pages are questions about activities children do. Please answer for the child indicated below. This child may have already done some of the activities described here, and there may be some he/she has not begun doing yet. For each question, please check the circle that tells whether he/she is doing the activity regularly, sometimes, or not yet.

If this child is aged between:

- | | | |
|------------------|---|---------------|
| 10 and 14 months | → | Go to page 2 |
| 16 and 20 months | → | Go to page 6 |
| 22 and 26 months | → | Go to page 10 |
| 34 and 38 months | → | Go to page 14 |
| 46 and 50 months | → | Go to page 19 |
| 58 and 62 months | → | Go to page 24 |

Confidential when completed

Collected under the authority of the
Statistics Act, Revised Statutes of
Canada, 1985, Chapter S19.

Version française au verso

BE SURE TO TRY EACH ACTIVITY.

Note: In the following pages, the pronouns "he" and "she"
apply to both sexes.



FOR OFFICE USE ONLY

Interviewer Assignment #	Person ID	Child's Date of Birth
<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		YY MM DD
Child's First Name	Child's Last Name	
<input type="text"/>	<input type="text"/>	





Booklet Final Status Code	Comments
000 <input type="radio"/> Complete	
001 <input type="radio"/> Partial	
034 <input type="radio"/> No Contact	
030 <input type="radio"/> Refusal	
018 <input type="radio"/> Out of Scope	
099 <input type="radio"/> Other NR: _____	
	Questionnaire filled out prior to the interview ¹ <input type="checkbox"/> during the interview ² <input type="checkbox"/>

For children aged 10 to 14 months

- | | |
|--|--|
| 1. If you ask her to, does your baby play at least one nursery game even if you don't show her the activity yourself (e.g., "bye-bye", "Peekaboo", "clap your hands", "So Big")? | <input type="radio"/> 01 Yes
<input type="radio"/> 02 Sometimes
<input type="radio"/> 03 Not Yet |
| 2. Does your baby follow one simple command, such as "Come here", "Give it to me", or "Put it back", without your using gestures? | <input type="radio"/> 04 Yes
<input type="radio"/> 05 Sometimes
<input type="radio"/> 06 Not Yet |
| 3. Does your baby say one word in addition to "Mama" and "Dada"? (A "word" is a sound or sounds the baby says consistently to mean someone or something, such as "baba" for bottle.) | <input type="radio"/> 01 Yes
<input type="radio"/> 02 Sometimes
<input type="radio"/> 03 Not Yet |
| 4. When you ask, "Where is the ball (hat, shoe, etc.?)" does your baby look at the object? Make sure the object is present. Check "yes" if he knows one object. | <input type="radio"/> 04 Yes
<input type="radio"/> 05 Sometimes
<input type="radio"/> 06 Not Yet |
| 5. When your baby wants something, does she tell you by pointing to it? | <input type="radio"/> 01 Yes
<input type="radio"/> 02 Sometimes
<input type="radio"/> 03 Not Yet |
| 6. Does your baby shake his head when he means "no" or "yes"? | <input type="radio"/> 04 Yes
<input type="radio"/> 05 Sometimes
<input type="radio"/> 06 Not Yet |
| 7. While holding onto furniture, does your baby bend down and pick up a toy from the floor and then return to a standing position? | <input type="radio"/> 01 Yes
<input type="radio"/> 02 Sometimes
<input type="radio"/> 03 Not Yet |



For children aged 10 to 14 months

8. While holding onto furniture, does your baby lower herself with control (without falling or flopping down)?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
9. Does your baby walk along furniture while holding on with only one hand?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
10. If you hold both hands just to balance him, does your baby take several steps without tripping or falling? (If your baby already walks alone, check "yes" for this item.)
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
- 
-
11. When you hold one hand just to balance her, does your baby take several steps forward? (If your baby already walks alone, check "yes" for this item.)
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
- 
-
12. Does your baby stand up in the middle of the floor by himself and take several steps forward?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
13. After one or two tries, does your baby pick up a piece of string with her first finger and thumb? (The string may be attached to a toy.)
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
- 
-
14. Does your baby pick up a crumb or Cheerio with the tips of his thumb and a finger? He may rest his arm or hand on the table while doing it.
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
- 
-
15. Does your baby put a small toy down, without dropping it, and then take her hand off the toy?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 10 to 14 months

16. Without resting his arm or hand on the table, does your baby pick up a crumb or Cheerio with the tip of his thumb and a finger?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

17. Does your baby throw a small ball with a forward arm motion? (If he simply drops the ball, check "not yet" for this item.)



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

18. Does your baby help turn the pages of a book? (You may lift a page for her to grasp.)

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

19. While holding a small toy in each hand, does your baby clap the toys together (like "Pat-a-cake")?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

20. Does your baby poke at or try to get a crumb or Cheerio that is inside a clear bottle (such as a plastic soda-pop bottle or baby bottle)?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

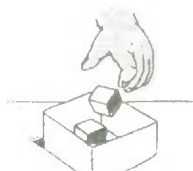
21. After he watches you hide a small toy under a piece of paper or cloth, does your baby find it? (Be sure the toy is completely hidden.)

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

22. If you put a small toy into a bowl or box, does your baby copy you by putting in a toy, although she may not let go of it? (If she already lets go of the toy into a bowl or box, check "yes" for this item.)

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

23. Does your baby drop two small toys, one after the other, into a container like a bowl or box? (You may show him how to do it.)



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 10 to 14 months

24. After you scribble back and forth on paper with a crayon (or a pencil or pen), does your baby copy you by scribbling? (If she already scribbles on her own, check "yes" for this item.)
- 04 ☒ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
25. When you hold out your hand and ask for his toy, does your baby offer it to you even if he doesn't let go of it? (If he already lets go of the toy into your hand, check "yes" for this item.)
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
26. When you dress her, does your baby push her arm through a sleeve once her arm is started in the hole of the sleeve?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
27. When you hold out your hand and ask for his toy, does your baby let go of it into your hand?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
28. When you dress her, does your baby lift her foot for her shoe, sock, or pant leg?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
29. Does your baby roll or throw a ball back to you so that you can return it to him?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
30. Does your baby play with a doll or stuffed animal by hugging it?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet



For children aged 16 to 20 months

- | | |
|---|------------------------------------|
| 1. When your child wants something, does she tell you by pointing to it? | 01 <input type="radio"/> Yes |
| | 02 <input type="radio"/> Sometimes |
| | 03 <input type="radio"/> Not Yet |
| <hr/> | |
| 2. When you ask him to, does your child go into another room to find a familiar toy or object? (You might ask, "Where is your ball?" or say, "Bring me your coat" or "Go get your blanket".) | 04 <input type="radio"/> Yes |
| | 05 <input type="radio"/> Sometimes |
| | 06 <input type="radio"/> Not Yet |
| <hr/> | |
| 3. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as "Mama eat", "Daddy play", "Go home" or "What's this?" does your child say both words back to you? (Check "yes" even if her words are difficult to understand.) | 01 <input type="radio"/> Yes |
| | 02 <input type="radio"/> Sometimes |
| | 03 <input type="radio"/> Not Yet |
| <hr/> | |
| 4. Does your child say eight or more words in addition to "Mama" and "Dada"? | 04 <input type="radio"/> Yes |
| | 05 <input type="radio"/> Sometimes |
| | 06 <input type="radio"/> Not Yet |
| <hr/> | |
| 5. Without showing him first, does your child point to the correct picture when you say, "Show me the kitty" or ask, "Where is the dog?" (He needs to identify only one picture correctly.) | 01 <input type="radio"/> Yes |
| | 02 <input type="radio"/> Sometimes |
| | 03 <input type="radio"/> Not Yet |
| <hr/> | |
| 6. Does your child say two or three words that represent different ideas together, such as "See dog", "Mommy come home" or "Kitty gone"? (Don't count word combinations that express one idea, such as "Bye-bye", "All gone", "All right", and "What's that?".) | 04 <input type="radio"/> Yes |
| | 05 <input type="radio"/> Sometimes |
| | 06 <input type="radio"/> Not Yet |

Please give an example of your child's word combinations:

For children aged 16 to 20 months

- | | |
|--|--|
| 7. Does your child bend over or squat to pick up an object from the floor and then stand up again without any support? | 01 <input type="radio"/> Yes
02 <input type="radio"/> Sometimes
03 <input type="radio"/> Not Yet |
| 8. Does your child move around by walking, rather than by crawling on her hands and knees? | 04 <input type="radio"/> Yes
05 <input type="radio"/> Sometimes
06 <input type="radio"/> Not Yet |
| 9. Does your child walk well and seldom fall? | 01 <input type="radio"/> Yes
02 <input type="radio"/> Sometimes
03 <input type="radio"/> Not Yet |
| 10. Does your child climb on an object such as a chair to reach something he wants? | 04 <input type="radio"/> Yes
05 <input type="radio"/> Sometimes
06 <input type="radio"/> Not Yet |
| 11. Does your child walk down stairs if you hold onto one of her hands? (You can look for this at a store, on a playground, or at home.) | 01 <input type="radio"/> Yes
02 <input type="radio"/> Sometimes
03 <input type="radio"/> Not Yet |
| 12. When you show him how to kick a large ball, does your child try to kick the ball by moving his leg forward or by walking into it? (If your child already kicks a ball, check yes for this item.) | 04 <input type="radio"/> Yes
05 <input type="radio"/> Sometimes
06 <input type="radio"/> Not Yet |
| 13. Does your child throw a small ball with a forward arm motion? (If he simply drops the ball, check "not yet" for this item.) | 01 <input type="radio"/> Yes
02 <input type="radio"/> Sometimes
03 <input type="radio"/> Not Yet |
| 14. Does your child stack a small block or toy on top of another one? (You could also use spools of thread, small boxes, or toys that are about 1 inch in size.) | 04 <input type="radio"/> Yes
05 <input type="radio"/> Sometimes
06 <input type="radio"/> Not Yet |



For children aged 16 to 20 months

15. Does your child make a mark on the paper with the tip of a crayon (or pencil or pen) when trying to draw?



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

16. Does your child stack three small blocks or toys on top of each other by herself? (You can also use spools of thread, small boxes, or toys that are about 1 inch in size.)

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

17. Does your child turn the pages of a book by himself? (He may turn more than one page at a time.)

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

18. Does your child get a spoon into her mouth right side up so that the food usually doesn't spill?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

19. Does your child drop several (six or more) small toys into a container, such as a bowl or box? (You may show him how to do it.)

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

20. After you have shown her how, does your child try to get a small toy that is slightly out of reach by using a spoon, stick, or similar tool?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

21. After a crumb or Cheerio is dropped into a bottle, does your child purposely turn the bottle over to dump it out? You may show him how to do this. You can use a plastic soda-pop bottle or baby bottle.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

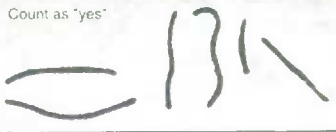
22. Without first showing her how, does your child scribble back and forth when you give her a crayon (or pencil or pen)?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

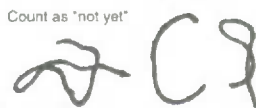
For children aged 16 to 20 months

23. After he watches you draw a line from the top of the paper to the bottom with a crayon (or pencil or pen), does your child copy you by drawing a single line on the paper in any direction? (Scribbling back and forth does not count as "yes".)

Count as "yes"



Count as "not yet"



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

24. After a crumb or Cheerio is dropped into a small, clear bottle, does your child turn the bottle upside down to dump out the crumb or Cheerio? (Do not show her how.)

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

25. While looking at himself in the mirror, does your child offer a toy to his own image?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

26. Does your child play with a doll or stuffed animal by hugging it?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

27. Does your child get your attention or try to show you something by pulling on your hand or clothes?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

28. Does your child come to you when she needs help, such as with winding up a toy?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

29. Does your child drink from a cup or glass, putting it down again with little spilling?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

30. Does your child copy the activities you do, such as wipe up a spill, sweep, shave, or comb hair?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet



For children aged 22 to 26 months

1. Without showing her first, does your child point to the correct picture when you say, "Show me the kitty", or ask, "Where is the dog?" (She needs to identify only one picture correctly.)

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

2. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as "Mama eat", "Daddy play", "Go home", or "What's this?" does your child say both words back to you? (Check "yes" even if his words are difficult to understand.)

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

3. Without giving her clues by pointing or using gestures, can your child carry out at least three of these kinds of directions?

- a. "Put the toy on the table." d. "Find your coat."
b. "Close the door." e. "Take my hand."
c. "Bring me a towel." f. "Get your book."

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

4. If you point to a picture of a ball (kitty, cup, hat, etc.) and ask your child, "What is this?" does your child correctly name at least one picture?

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

5. Does your child say two or three words that represent different ideas together, such as "See dog", "Mommy come home", or "Kitty gone"? (Don't count word combinations that express one idea, such as "Bye-bye", "All gone", "All right", and "What's that?")






01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

Please give an example of your child's word combinations:

6. Does your child correctly use at least two words like "me", "I", "mine", and "you"?

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 22 to 26 months

7. Does your child walk down stairs if you hold onto one of his hands? (You can look for this at a store, on a playground, or at home.)
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
8. When you show her how to kick a large ball, does your child try to kick the ball by moving her leg forward or by walking into it? (If your child already kicks a ball, check "yes" for this item.)
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
- 
-
9. Does your child walk either up or down at least two steps by himself? You can look for this at a store, on a playground, or at home. (Check "yes" even if he holds onto the wall or railing.)
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
- 
-
10. Does your child run fairly well, stopping herself without bumping into things or falling?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
- 
-
11. Does your child jump with both feet leaving the floor at the same time?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
- 
-
12. Without holding onto anything for support, does your child kick a ball by swinging his leg forward?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
- 
-
13. Does your child get a spoon into her mouth right side up so that the food usually doesn't spill?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
14. Does your child turn the pages of a book by himself? (He may turn more than one page at a time.)
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 22 to 26 months

15. Does your child use a turning motion with her hand while trying to turn doorknobs, wind up toys, twist tops, or screw lids on and off jars?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

16. Does your child flip switches off and on?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

17. Does your child stack seven small blocks or toys on top of each other by himself? (You could also use spools of thread, small boxes, or toys that are about 1 inch in size.)

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

18. Does your child thread a shoelace through either a bead or an eyelet of a shoe?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

19. After she watches you draw a line from the top of the paper to the bottom with a crayon (or pencil or pen), does your child copy you by drawing a single line on the paper in any direction? (Scribbling back and forth does not count as "yes".)

Count as "yes"



Count as "not yet"



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

20. Without showing him how, does your child purposefully turn a small, clear bottle upside down to dump out a crumb or Cheerio? (You can use a soda-pop bottle or baby bottle.)

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

21. Does your child pretend objects are something else? For example, does your child hold a cup to her ear, pretending it is a telephone? Does she put a box on her head, pretending it is a hat? Does she use a block or small toy to stir food?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

22. Does your child put things away where they belong? For example, does he know his toys belong on the toy shelf, his blanket goes on his bed, and dishes go in the kitchen?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 22 to 26 months

23. If your child wants something she cannot reach, does she find a chair or box to stand on to reach it?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

24. While your child watches, line up four objects like blocks or cars in a row. Does your child copy or imitate you and line up four objects in a row? (You can also use spools of thread, small boxes, or other toys.)



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

25. Does your child drink from a cup or glass, putting it down again with little spilling?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

26. Does your child copy activities you do, such as wipe up a spill, sweep, shave, or comb hair?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

27. Does your child eat with a fork?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

28. When playing with either a stuffed animal or doll, does your child pretend to rock it, feed it, change its diapers, put it to bed, and so forth?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

29. Does your child push a little shopping cart, stroller, or wagon, steering it around objects and backing out of corners if he cannot turn?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

30. Does your child call herself "I" or "me" more often than her own name? For example, "I do it" more often than "Juanita do it".

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet



For children aged 34 to 38 months

1. When you ask her to point to her nose, eyes, hair, feet, ears, and so forth, does your child correctly point to at least seven body parts? (She can point to parts of herself, you, or a doll.)
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
2. Does your child make sentences that are three or four words long?
- Please give an example:
- _____
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
3. Without giving him help by pointing or using gestures, ask your child to "Put the shoe on the table" and "Put the book under the chair". Does your child carry out both of these directions correctly?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
4. When looking at a picture book, does your child tell you what is happening or what action is taking place in the picture? (For example, "Barking", "Running", "Eating" and "Crying") You may ask, "What is the dog (or boy) doing?"
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
5. Show your child how a zipper on a coat moves up and down, and say, "See, this goes up and down". Put the zipper to the middle and ask your child to move the zipper down. Return the zipper to the middle and ask your child to move the zipper up. Do this several times, placing the zipper in the middle before asking your child to move it up or down. Does your child consistently move the zipper up when you say "up" and down when you say "down"?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
6. When you ask, "What is your name?" does your child say both her first and last names?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 34 to 38 months

7. Without holding onto anything for support, does your child kick a ball by swinging his leg forward?



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

8. Does your child jump with both feet leaving the floor at the same time?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

9. Does your child walk up stairs, using only one foot on each stair? (The left foot is on one step, and the right foot is on the next.) She may hold onto the railing or wall. (You can look for this at a store, on a playground, or at home.)



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

10. Does your child stand on one foot for about 1 second without holding onto anything?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

11. While standing, does your child throw a ball overhand by raising his arm to shoulder height and throwing the ball forward? (Dropping the ball or throwing the ball underhand does not count.)



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

12. Does your child jump forward at least 6 inches with both feet leaving the ground at the same time?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

13. After she watches you draw a line from the top of the paper to the bottom with a pencil, crayon, or pen, ask your child to make a line like yours. Do not let your child trace your line. Does your child copy you by drawing a single line in a vertical direction?

Count as "yes"

111

Count as "not yet"

-C2

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 34 to 38 months

14. Does your child thread a shoelace through either a bead or an eyelet of a shoe?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

15. After he watches you draw a single circle, ask your child to make a circle like yours. Do not let him trace your circle. Does your child copy you by drawing a circle?



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

16. After she watches you draw a line from one side of the paper to the other side, ask your child to make a line like yours. Do not let your child trace your line. Does your child copy you by drawing a single line in a horizontal direction?

Count as "yes"



Count as "not yet"



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

17. Does your child try to cut paper with child-safe scissors? He does not need to cut the paper but must get the blades to open and close while holding the paper with the other hand. (You may show your child how to use scissors. Carefully watch your child's use of scissors for safety reasons.)



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

18. When drawing, does your child hold a pencil, crayon, or pen between her fingers and thumb like an adult does?



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

19. While your child watches, line up four objects like blocks or cars in a row. Does your child copy or imitate you and line up four objects in a row? (You can also use spools of thread, small boxes, or other toys.)



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

20. If your child wants something he cannot reach, does he find a chair or box to stand on to reach it?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 34 to 38 months

21. When you point to the figure and ask your child, "What is this?" does your child say a word that means a person? Responses like "snowman", "boy", "man", "Girl", and "Daddy" are correct.

Please write your child's response here:



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

22. When you say, "Say seven three" does your child repeat just the two numbers in the correct order? Do not repeat the numbers. If necessary, try another pair of numbers and say, "Say eight two." Your child must repeat just one series of two numbers for you to answer "yes" to this question.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

23. Show your child how to make a bridge with blocks, boxes, or cans, like the example. Does your child copy you by making one like it?



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

24. When you say, "Say five eight three", does your child repeat just the three numbers in the correct order? Do not repeat these numbers. If necessary, try another series of numbers and say, "Say six nine two". Your child must repeat just one series of three numbers for you to answer "yes" to this question.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

25. Does your child use a spoon to feed herself with little spilling?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

26. Does your child push a little shopping cart, stroller, or wagon, steering it around objects and backing out of corners if he cannot turn?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

27. When she is looking in a mirror and you ask, "Who is in the mirror?" does your child say either "Me" or her own name?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 34 to 38 months

28. Can your child put on a coat, jacket, or shirt by himself?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

29. Using these exact words, ask your child, "Are you a girl or a boy?" Does your child answer correctly?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

30. Does your child take turns by waiting while another child or adult takes a turn?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet



For children aged 46 to 50 months

1. Does your child name at least three items from a common category? For example, if you say to your child, "Tell me some things that you can eat," does your child answer with something like, "Cookies, eggs, and cereal"? Or if you say, "Tell me the names of some animals", does your child answer with something like, "Cow, dog, and elephant"?

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

2. Does your child answer the following questions:

"What do you do when you are hungry?" (Acceptable answers include: "Get food", "Eat", "Ask for something to eat", and "Have a snack".)

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

Please write your child's response:

"What do you do when you are tired?" (Acceptable answers include: "Take a nap", "Rest", "Go to sleep", "Go to bed", "Lie down", and "Sit down".)

Please write your child's response:

Mark "sometimes" if your child answers only one question.


3. Does your child tell you at least two things about common objects? For example, if you say to your child, "Tell me about your ball", does he say something like, "It's round. I throw it. It's big"?

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

4. Does your child use endings of words, such as "s", "ed", and "ing"? For example, does your child say things like, "I see two cats", "I am playing", or "I kicked the ball"?

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 46 to 50 months

- | | |
|---|---|
| <p>5. Without giving help by pointing or repeating, does your child follow three directions that are unrelated to one another? For example, you may ask your child to "Clap your hands, walk to the door, and sit down".</p> | <p>01 <input type="radio"/> Yes</p> <p>02 <input type="radio"/> Sometimes</p> <p>03 <input type="radio"/> Not Yet</p> |
| <p>6. Does your child use all of the words in a sentence (for example, "a", "the", "am", "is", and "are") to make complete sentences, such as "I am going to the park", or "Is there a toy to play with?" or "Are you coming, too?"</p> | <p>04 <input type="radio"/> Yes</p> <p>05 <input type="radio"/> Sometimes</p> <p>06 <input type="radio"/> Not Yet</p> |
| <p>7. Does your child catch a large ball with both hands? You should stand about 5 feet away and give your child two or three tries.</p> | <p>01 <input type="radio"/> Yes</p> <p>02 <input type="radio"/> Sometimes</p> <p>03 <input type="radio"/> Not Yet</p> |
|  | |
| <p>8. Does your child climb the rungs of a ladder of a playground slide and slide down without help?</p> | <p>04 <input type="radio"/> Yes</p> <p>05 <input type="radio"/> Sometimes</p> <p>06 <input type="radio"/> Not Yet</p> |
| <p>9. While standing, does your child throw a ball overhand in the direction of a person standing at least 6 feet away? To throw overhand, your child must raise her arm to shoulder height and throw the ball forward. (Dropping the ball, letting the ball go, or throwing the ball underhand should be scored as "not yet".)</p> | <p>01 <input type="radio"/> Yes</p> <p>02 <input type="radio"/> Sometimes</p> <p>03 <input type="radio"/> Not Yet</p> |
|  | |
| <p>10. Does your child hop up and down on either the right or left foot at least one time without losing his balance or falling?</p> | <p>04 <input type="radio"/> Yes</p> <p>05 <input type="radio"/> Sometimes</p> <p>06 <input type="radio"/> Not Yet</p> |
| <p>11. Does your child jump forward a distance of 20 inches from a standing position, starting with her feet together?</p> | <p>01 <input type="radio"/> Yes</p> <p>02 <input type="radio"/> Sometimes</p> <p>03 <input type="radio"/> Not Yet</p> |

For children aged 46 to 50 months

12. Without holding onto anything, does your child stand on one foot for at least 5 seconds without losing his balance and putting his foot down? You may give your child two or three tries before you mark the question.



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

13. Does your child put together a six-piece interlocking puzzle? (If one is not available, take a full-page picture from a magazine or catalog and cut it into six pieces. Does your child put it back together correctly?)

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

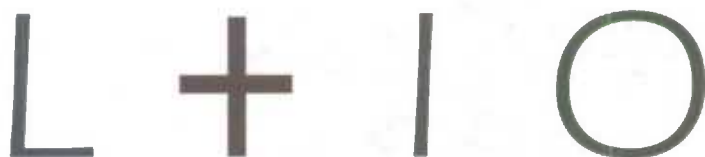
14. Using child-safe scissors, does your child cut a paper in half on a more or less straight line, making the blades go up and down? (Carefully watch your child's use of scissors for safety reasons.)



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

15. Using the shapes below to look at, does your child copy at least three shapes onto a large piece of paper using a pencil or crayon, without tracing? Your child's drawings should look similar to the design of the shapes below, but they may be different in size.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet



16. Does your child unbutton one or more buttons? Your child may use his own clothing or a doll's clothing.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

17. Does your child draw pictures of people that have at least three of the following features: head, eyes, nose, mouth, neck, hair, trunk, arms, hands, legs, or feet?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 46 to 50 months

18. Does your child color mostly within the lines in a coloring book? Your child should not go more than $\frac{1}{4}$ inch outside the lines on most of the picture.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

19. When you say, "Say five eight three" does your child repeat just these three numbers in the correct order? Do not repeat these numbers. If necessary, try another series of numbers and say, "Say six nine two". Your child must repeat just one series of three numbers to answer "yes" to this question.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

20. When asked, "Which circle is the smallest?" does your child point to the smallest circle? Ask this question without providing help by pointing, gesturing, or looking at the smallest circle.



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

21. Without giving help by pointing, does your child follow three different directions using the words "under", "between", and "middle"? For example, ask your child to put a book "under the couch". Then ask her to put the ball "between the chairs" and the shoe "in the middle of the table".

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

22. When shown an object and asked, "What color is this?" does your child name five different colors like red, blue, yellow, orange, black, white, or pink? Answer "yes" only if your child answers the question correctly using five colors.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

23. Does your child dress up and "play-act" pretending to be someone or something else? For example, your child may dress up in different clothes and pretend to be a mommy, daddy, brother or sister, or an imaginary animal or figure.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 46 to 50 months

24. If you place five objects in front of your child, can he count them saying, "One, two, three, four, five" in order? Ask this question without providing help by pointing, gesturing, or naming.
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
25. Does your child serve herself, taking food from one container to another using utensils? For example, can your child use a large spoon to scoop applesauce from a jar into a bowl?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
26. Does your child tell you at least four of the following:
- a. First name d. Last name
b. Age e. Boy or girl
c. City she lives in f. Telephone number
- Please circle the items your child knows.
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
27. Does your child wash his hands and face using soap and dry off with a towel without help?
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
28. Does your child tell you the names of two or more playmates, not including brothers and sisters? Ask this question without providing help by suggesting names of playmates or friends.
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet
-
29. Does your child brush her teeth by putting toothpaste on the toothbrush and brushing all her teeth without help? You may still need to check and rebrush your child's teeth.
- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet
-
30. Does your child dress or undress himself without help (except for snaps, buttons, and zippers)?
- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet



For children aged 58 to 62 months

1. Without giving your child help by pointing or repeating directions, does your child follow three directions that are unrelated to one another? Give all three directions before your child starts. For example, you may ask your child to "Clap your hands, walk to the door, and sit down" or "Give me the pen, open the book, and stand up".

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

2. Does your child use four- and five-word sentences? For example, does your child say, "I want the car"?

Please write an example:

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

3. When talking about something that already happened, does your child use words that end in "ed", such as walked, jumped, or played? Ask your child questions, such as "How did you get to the store?" ("We walked".) "What did you do at your friend's house?" ("We played".)

Please write an example:

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

4. Does your child use comparison words, such as heavier, stronger, or shorter? Ask your child questions, such as "A car is big, but a bus is " (bigger); "A cat is heavy, but a man is " (heavier); "A TV is small, but a book is " (smaller).

Please write an example:

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 58 to 62 months

5. Does your child answer the following questions:

"What do you do when you are hungry?" (Acceptable answers include: "Get food", "Eat", "Ask for something to eat", and "Have a snack".)

Please write your child's response:

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

"What do you do when you are tired?" (Acceptable answers include: "Take a nap", "Rest", "Go to sleep", "Go to bed", "Lie down" and "Sit down".)

Please write your child's response:

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

Mark "sometimes" if your child answers only one question.

6. Does your child repeat the sentences shown below back to you, without any mistakes? You may repeat each sentence one time. Mark "yes" if your child repeats both sentences without mistakes or "sometimes" if your child repeats one sentence without mistakes.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

Jane hides her shoes for Maria to find.
Al read the blue book under his bed.

7. While standing, does your child throw a small ball overhand in the direction of a person standing at least 6 feet away? To throw overhand, your child must raise his arm to shoulder height and throw the ball forward. (Dropping the ball, letting the ball go, or throwing the ball underhand should be scored as "not yet".)



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

8. Does your child catch a large ball with both hands? You should stand about 5 feet away and give your child two or three tries.



- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 58 to 62 months

9. Without holding onto anything, does your child stand on one foot for at least 5 seconds without losing her balance and putting her foot down? You may give your child two or three tries before you mark the answer.



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

10. Does your child walk on his tiptoes for 15 feet (about the length of a large car)? You may show her how to do this.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

11. Does your child hop forward on one foot for a distance of 4-6 feet without putting down the other foot? You can give him two tries on each foot. Mark "sometimes" if he can hop on one foot only.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

12. Does your child skip using alternating feet? You may show her how to do this.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

13. Ask your child to trace on the line below with a pencil. Does your child trace on the line without going off the line more than two times?

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

Mark "sometimes" if your child goes off the line three times.

14. Ask your child to draw a picture of a person on a blank sheet of paper. You may ask your child to "Draw a picture of a girl or a boy". If your child draws a person with head, body, arms, and legs, mark "yes". If your child draws a person with only three parts (head, body, arms, or legs), mark "sometimes". If your child draws a person with two or fewer parts (head, body, arms, or legs), mark "not yet". Be sure to attach the sheet of paper with your child's drawing to this questionnaire.

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 58 to 62 months

15. Draw a line across a piece of paper. Using child- safe scissors, does your child cut the paper in half on a more or less straight line, making the blades go up and down? (Carefully watch your child's use of scissors for safety reasons.)



- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

16. Using the shapes below to look at, does your child copy the shapes in the space below without tracing? Your child's drawings should look similar to the design of the shapes below, but they may be different in size. (Mark "yes" if she can copy all three shapes; mark "sometimes" if your child can copy two shapes.)



(Copy shapes here.)

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

17. Using the letters below to look at, does your child copy the letters without tracing? Cover up all of the letters except the letter being copied. Mark "yes" if your child can copy four of the letters, and you can read them. Mark "sometimes" if your child can copy two or three letters, and you can read them.

V H T C A

(Copy letters here.)

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 58 to 62 months

18. Print your child's first name. Can your child copy the letters? The letters may be large, backward, or reversed. Mark "sometimes" if your child copies about half of the letters.

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

(Space for adult's printing)

(Space for child's printing)

19. When asked, "Which circle is smallest?" does your child point to the smallest circle? Ask this question without providing help by pointing, gesturing, or looking at the smallest circle.

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet



20. When shown an object and asked, "What color is this?" does your child name five different colors like red, blue, yellow, orange, black, white, or pink? Answer "yes" only if your child answers the question correctly using five colors.

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

21. Does your child count up to 15 without making mistakes? If so, mark "yes". If your child counts to 12 without making mistakes, mark "sometimes".

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

For children aged 58 to 62 months

22. Is your child able to finish the following sentences using a word that means the opposite of the word that is italicized? For example: "A rock is *hard*, and a pillow is soft".

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

Please write your child's responses below:

A cow is *big*, and a mouse is _____

Ice is *cold*, and fire is _____

We see stars at *night*, and we see the sun during the _____

When I throw the ball *up*, it comes _____

Mark "yes" if she finishes three of four sentences correctly. Mark "sometimes" if she finishes two of four sentences correctly.

23. Does your child know the names of numbers? Mark "yes" if he identifies the three numbers below. Mark "sometimes" if he identifies two numbers.

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

3 1 2

24. Does your child name at least four letters in her name? Point to the letters and ask, "What letter is this?" Point to the letters out of order.

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

25. Does your child serve himself, using a large spoon or fork? For example, does your child use a large spoon to scoop applesauce from a jar into a bowl?

04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

26. Does your child wash her hands and face with soap and water and dry off with a towel without help?

01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

For children aged 58 to 62 months

27. Can your child tell you at least four of the following?

- | | |
|---------------------|---------------------|
| a. First name | d. Last name |
| b. Age | e. Boy or girl |
| c. City he lives in | f. Telephone number |

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

Please circle the items your child knows.

28. Does your child dress and undress herself, including buttoning medium-sized buttons and zipping front zippers?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet

29. Does your child use the toilet by himself? (He goes to the bathroom, sits on the toilet, wipes, and flushes.) Mark "yes" even if he does this after you remind him.

- 04 ☐ Yes
05 ☐ Sometimes
06 ☐ Not Yet

30. Does your child usually take turns and share with other children?

- 01 ☐ Yes
02 ☐ Sometimes
03 ☐ Not Yet





Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Questionnaire sur les étapes du développement

Livret 8



Vous retrouverez dans les pages suivantes des questions portant sur les diverses activités que les enfants peuvent faire. Veuillez répondre pour l'enfant indiqué ci-dessous. Cet enfant peut avoir déjà fait certaines de ces activités ou n'a peut-être pas encore commencé à les faire. Pour chaque question, veuillez cocher le cercle qui indique si il/elle fait cette activité habituellement, parfois ou ne la fait pas encore.

Si votre enfant est âgé entre:

- 10 et 14 mois → allez à la page 2
- 16 et 20 mois → allez à la page 6
- 22 et 26 mois → allez à la page 10
- 34 et 38 mois → allez à la page 14
- 46 et 50 mois → allez à la page 19
- 58 et 62 mois → allez à la page 24

Confidentiel une fois rempli

Renseignements recueillis en vertu de la Loi sur la statistique, Lois révisées du Canada, 1985 chapitre S19.

English on reverse

PRENEZ SOIN D'EFFECTUER CHAQUE ACTIVITÉ AVEC VOTRE ENFANT.

Nota: Dans les pages suivantes, les pronoms "il" et "elle" représentent les deux sexes en tout temps.



À L'USAGE DU BUREAU SEULEMENT

N° de tâche	N° de la personne	Date de naissance de l'enfant
<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		AA MM JJ
Prénom de l'enfant	Nom de famille de l'enfant	
<input type="text"/>	<input type="text"/>	

Code d'état final du livret

- 000 ☐ Complet
- 001 ☐ Partiel
- 034 ☐ Pas de contact
- 030 ☐ Refus
- 018 ☐ Hors cible
- 99 ☐ Autre NR: _____

Commentaires

Questionnaire rempli

↗ avant l'interview ¹ ☐

↘ durant l'interview ² ☐



Pour les enfants âgés de 10 à 14 mois

1. Lorsque vous le lui demandez, votre bébé joue-t-il à au moins un jeu d'enfant même si vous ne lui montrez pas à faire l'activité au préalable (p. ex., « bye-bye », « coucou », « tape les mains », « montre-moi ton nez, ta bouche, etc. »)?

01 ☐ Oui
 02 ☐ Parfois
 03 ☐ Pas encore

2. Votre bébé est-il capable de donner suite à une consigne simple du genre « Viens ici », « Donne-moi ça » ou « Remets-ça à sa place » sans que vous n'usiez de gestes pour le guider?

04 ☐ Oui
 05 ☐ Parfois
 06 ☐ Pas encore

3. Votre bébé est-il capable de dire un autre mot, mis à part « maman » et « papa »? (Un « mot » consiste en un son ou un groupe de sons que le bébé émet régulièrement pour désigner une personne ou une chose, p. ex., « baba » pour ballon.)

01 ☐ Oui
 02 ☐ Parfois
 03 ☐ Pas encore

4. Lorsque vous lui demandez « Où est la balle (le chapeau, le soulier, etc.)? », votre bébé oriente-t-il son regard vers l'objet désigné? Assurez-vous que l'objet se trouve dans la pièce. Cochez « oui » s'il reconnaît un objet.

04 ☐ Oui
 05 ☐ Parfois
 06 ☐ Pas encore

5. Lorsqu'il désire quelque chose, votre bébé vous le fait-il savoir en montrant cette chose du doigt?

01 ☐ Oui
 02 ☐ Parfois
 03 ☐ Pas encore

6. Votre bébé hoche-t-il la tête pour signifier « non » ou « oui »?

04 ☐ Oui
 05 ☐ Parfois
 06 ☐ Pas encore

7. Tout en s'agrippant au mobilier, votre bébé est-il capable de se pencher, de ramasser un jouet sur le sol et de se relever en position debout?

01 ☐ Oui
 02 ☐ Parfois
 03 ☐ Pas encore



Pour les enfants âgés de 10 à 14 mois

8. Tout en s'agrippant au mobilier, votre bébé est-il capable de s'abaisser en gardant le contrôle de ses mouvements (sans tomber ou basculer)?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

9. Votre bébé parvient-il à marcher le long des meubles en se tenant d'une seule main?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

10. Lorsque vous lui tenez les deux mains pour l'aider à garder son équilibre, votre bébé effectue-t-il plusieurs pas sans trébucher ou tomber? (Cochez « oui » si votre bébé marche déjà seul.)



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

11. Lorsque vous lui tenez une seule main pour l'aider à garder son équilibre, votre bébé effectue-t-il plusieurs pas vers l'avant? (Cochez « oui » si votre bébé marche déjà seul.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

12. Votre bébé parvient-il à se lever debout sans aide au milieu d'une pièce et à effectuer plusieurs pas vers l'avant?

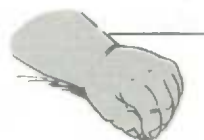
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

13. Votre bébé est-il capable de ramasser une ficelle entre le pouce et l'index après une ou deux tentatives? (Vous pouvez lui présenter une ficelle reliée à un jouet.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

14. Votre bébé est-il capable de ramasser une miette ou une céréale de type Cheerios avec le bout du pouce et d'un autre doigt? Il peut poser son bras ou sa main sur la table tout en effectuant cette activité.



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

15. Votre bébé est-il capable de déposer un petit jouet, sans l'échapper, puis de retirer sa main du jouet?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 10 à 14 mois

16. Votre bébé est-il capable de ramasser une miette ou une céréale de type Cheerios avec le bout du pouce et d'un autre doigt sans poser son bras ou sa main sur la table?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

17. Votre bébé est-il capable de lancer une petite balle en élançant son bras vers l'avant? (Cochez « pas encore » s'il laisse simplement tomber la balle.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

18. Votre bébé vous aide-t-il à tourner les pages d'un livre? (Vous pouvez soulever une page à son intention de sorte qu'il puisse la saisir plus facilement.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

19. Lorsque vous lui mettez un petit jouet dans chacune de ses mains, votre bébé frappe-t-il les jouets l'un contre l'autre (p. ex., « tape la galette »)?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

20. Lorsque vous insérez une miette ou une céréale de type Cheerios dans une bouteille transparente, votre bébé enfonce-t-il son doigt dans la bouteille ou tente-t-il de dégager la miette ou la céréale de quelque façon? (Vous pouvez utiliser une bouteille de boisson gazeuse transparente ou un biberon pour effectuer cette activité.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

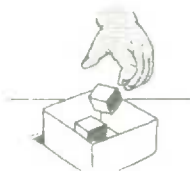
21. Lorsque vous cachez un petit jouet sous un morceau de papier ou de tissu alors qu'il vous regarde, votre bébé parvient-il à trouver le jouet? (Assurez-vous que le jouet est complètement caché.)

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

22. Lorsque vous placez un petit jouet dans un bol ou dans une boîte, votre bébé vous imite-t-il en plaçant à son tour un jouet dans le bol ou la boîte même s'il ne lâche peut-être pas prise? (Cochez « oui » si votre bébé laisse aller le jouet dans le bol ou dans la boîte.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

23. Votre bébé laisse-t-il tomber deux petits jouets l'un après l'autre dans un contenant comme un bol ou une boîte? (Vous pouvez lui montrer à faire cette activité au préalable.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 10 à 14 mois

24. Lorsque vous crayonnez devant lui sur une feuille de papier, votre bébé vous imite-t-il en crayonnant à son tour? (Cochez « oui » s'il crayonne déjà de lui-même.)
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
25. Lorsque vous tendez la main et lui demandez de vous remettre son jouet, votre bébé vous le présente-t-il même s'il ne lâche pas nécessairement prise? (Cochez « oui » s'il vous remet déjà le jouet.)
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
26. Lorsque vous habillez votre bébé, étend-il son bras pour finir d'enfiler la manche une fois que vous y avez inséré sa main?
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
27. Lorsque vous tendez la main et lui demandez de vous remettre son jouet, votre bébé place-t-il le jouet dans votre main et lâche-t-il prise?
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
28. Lorsque vous habillez votre bébé, lève-t-il le pied pour enfiler son soulier, sa chaussette ou son pantalon?
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
29. Votre bébé fait-il rouler une balle en votre direction, ou vous lance-t-il une balle, pour que vous la lui retourniez?
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
30. Votre bébé serre-t-il une poupée ou un toutou dans ses bras pour jouer?
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

ARRÊT

Pour les enfants âgés de 16 à 20 mois

- | | |
|--|---|
| 1. Lorsqu'il désire quelque chose, votre enfant vous le fait-il savoir en montrant cette chose du doigt? | 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 2. Lorsque vous le lui demandez, votre enfant va-t-il chercher un jouet ou un objet familier qui se trouve dans une autre pièce? (Par exemple, vous pourriez lui demander « Où est la balle? », « Va chercher ton manteau. » ou « Amène-moi ta couverture. ») | 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |
| 3. Votre enfant est-il capable de reproduire une phrase de deux mots? Autrement dit, lorsque vous lui dites une phrase de deux mots, par exemple, « Maman mange », « Papa joue », « Viens ici » ou « Fais dodo », votre enfant répète-t-il ces deux mots? (Cochez « oui » même si l'enfant ne s'exprime pas de façon très compréhensible.) | 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 4. Votre enfant a-t-il un vocabulaire d'au moins huit mots en plus de « maman » et « papa »? | 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |
| 5. Votre enfant parvient-il à montrer du doigt l'image appropriée lorsque vous lui demandez « Montre-moi le chat. » ou « Où est le chien? »? Vous ne devez pas lui montrer à faire cette activité au préalable. (Cochez « oui » s'il parvient à reconnaître une image.) | 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 6. Votre enfant est-il capable de dire deux ou trois mots qui représentent des idées différentes, par exemple, « Regarde le chien », « Maman maison » ou « Chat parti dehors »? (Ne tenez pas compte des groupes de mots qui expriment une seule idée, par exemple, « bye-bye », « tout fini » et « c'est quoi? »). | 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |

Veuillez noter un groupe de mots utilisé par votre enfant:

Pour les enfants âgés de 16 à 20 mois

- | | |
|---|--|
| 7. Votre enfant est-il capable de se pencher ou de s'accroupir pour ramasser un objet qui se trouve sur le sol, puis de se redresser sans prendre appui sur quoi que ce soit? | 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 8. Votre enfant se déplace-t-il en marchant plutôt qu'en rampant sur ses mains et ses genoux? | 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |
| 9. Votre enfant marche-t-il avec assurance et ne tombe-t-il qu'en de rares occasions? | 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 10. Votre enfant grimpe-t-il sur un objet (p. ex., une chaise) lorsqu'il désire atteindre une chose située hors de sa portée? | 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |
| 11. Votre enfant descend-il les escaliers debout lorsque vous lui tenez la main? (Vous pouvez vérifier cette aptitude au magasin, au terrain de jeu ou à la maison.) | 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 12. Lorsque vous lui montrez à donner un coup de pied sur un gros ballon, votre enfant élançait-il sa jambe vers l'avant pour frapper le ballon ou avance-t-il simplement en direction du ballon jusqu'à ce qu'il le cogne? (Cochez « oui » si votre enfant frappe déjà un ballon avec son pied.) | <div data-bbox="900 1291 1001 1459" data-label="Image"> </div> 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |
| 13. Votre enfant est-il capable de lancer une petite balle en élançant son bras vers l'avant? (Cochez « pas encore » s'il laisse simplement tomber la balle.) | <div data-bbox="900 1512 1001 1680" data-label="Image"> </div> 01 <input type="radio"/> Oui
02 <input type="radio"/> Parfois
03 <input type="radio"/> Pas encore |
| 14. Votre enfant est-il capable d'empiler de petits blocs ou de petits jouets l'un sur l'autre? (Vous pouvez également utiliser des bobines de fil, de petites boîtes ou des jouets qui mesurent environ 1 pouce.) | 04 <input type="radio"/> Oui
05 <input type="radio"/> Parfois
06 <input type="radio"/> Pas encore |

Pour les enfants âgés de 16 à 20 mois

15. Votre enfant est-il capable de tracer une marque sur une feuille de papier à l'aide de la pointe d'un crayon (ou d'un stylo) lorsqu'il tente de dessiner?



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

16. Votre enfant est-il capable d'empiler trois petits blocs ou trois petits jouets l'un sur l'autre sans aucune aide? (Vous pouvez également utiliser des bobines de fil, de petites boîtes ou des jouets qui mesurent environ 1 pouce.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

17. Votre enfant parvient-il à tourner les pages d'un livre sans aide? (Cochez « oui » même s'il tourne plus d'une page à la fois.)

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

18. Votre enfant est-il capable de porter sa cuillère à la bouche sans la retourner, donc sans tout renverser la nourriture qu'elle contient?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

19. Votre enfant est-il capable de laisser tomber plusieurs (six ou plus) petits jouets dans un contenant, par exemple, un bol ou une boîte? (Vous pouvez lui montrer à faire cette activité au préalable.)

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

20. Une fois que vous lui avez montré la façon de faire, votre enfant tente-t-il d'atteindre un petit jouet qui se trouve légèrement hors de sa portée à l'aide d'une cuillère, d'un bâton ou d'un autre outil semblable?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

21. Lorsque vous laissez tomber une miette ou une céréale de type Cheerios dans une bouteille, votre enfant retourne-t-il expressément la bouteille à l'envers pour faire sortir la miette ou la céréale? Vous pouvez lui montrer à faire cette activité au préalable. Utilisez une bouteille de boisson gazeuse ou un biberon.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

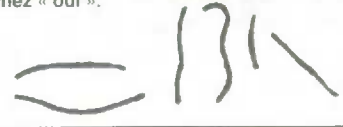
22. Sans que vous ne lui ayez démontré l'activité au préalable, votre enfant griffonne-t-il lorsque vous lui donnez un crayon (ou un stylo)?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 16 à 20 mois

23. Lorsque vous tracez une ligne du haut au bas de la page devant lui à l'aide d'un crayon (ou d'un stylo), votre enfant vous imite-t-il en traçant à son tour une ligne unique sur la page peu importe la direction? (Ne cochez pas « oui » s'il se contente de griffonner.)

Cochez « oui ».



Cochez « pas encore ».



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

24. Lorsque vous laissez tomber une miette ou une céréale de type Cheerios dans une petite bouteille transparente, votre enfant retourne-t-il expressément la bouteille à l'envers pour faire sortir la miette ou la céréale? (Ne lui démontrez pas cette activité au préalable.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

25. Lorsqu'il se regarde dans le miroir, votre enfant offre-t-il un jouet à l'image qu'il a de lui?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

26. Votre bébé serre-t-il une poupée ou un toutou dans ses bras pour jouer?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

27. Votre enfant tire-t-il sur votre main ou sur vos vêtements lorsqu'il désire attirer votre attention ou vous montrer quelque chose?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

28. Votre enfant vient-il vous voir lorsqu'il a besoin d'aide, par exemple, pour remonter un jouet?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

29. Votre enfant est-il capable de boire à la tasse ou au verre et de déposer le contenant sans renverser une grande quantité de liquide?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

30. Votre enfant imite-t-il vos activités, par exemple, nettoyer un dégât, balayer, se raser ou se peigner?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore



Pour les enfants âgés de 22 à 26 mois

1. Votre enfant parvient-il à montrer du doigt l'image appropriée lorsque vous lui demandez « Montre-moi le chat. » ou « Où est le chien? »? (Cochez « oui » s'il parvient à reconnaître une image.)
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
2. Votre enfant est-il capable de reproduire une phrase de deux mots? Autrement dit, lorsque vous lui dites une phrase de deux mots, par exemple, « Maman mange », « Papa joue », « Viens ici » ou « Fais dodo », votre enfant répète-t-il ces deux mots? (Cochez « oui » même si l'enfant ne s'exprime pas de façon très compréhensible.)
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
3. Sans que vous ne l'aidiez en montrant du doigt ou en faisant des gestes, votre enfant est-il capable de donner suite à au moins trois des consignes suivantes:
- a. « Dépose le jouet sur la table. » d. « Trouve ton manteau. »
b. « Ferme la porte. » e. « Tiens ma main. »
c. « Apporte-moi une serviette. » f. « Va chercher ton livre. »
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
4. Lorsque vous montrez l'image d'une balle (d'un chat, d'une tasse, d'un chapeau, etc.) à votre enfant et lui demandez « Qu'est-ce que c'est? », votre enfant parvient-il à reconnaître correctement au moins l'une des images?
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
5. Votre enfant est-il capable de dire deux ou trois mots qui représentent des idées différentes, par exemple, « Regarde le chien », « Maman maison » ou « Chat parti dehors »? (Ne tenez pas compte des groupes de mots qui expriment une seule idée, par exemple, « bye-bye », « tout fini » et « c'est quoi? »).
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
- Veillez noter un groupe de mots utilisé par votre enfant:
- _____
-
6. Votre enfant utilise-t-il correctement au moins deux mots comme « moi », « je », « le mien » et « tu ».
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 22 à 26 mois

7. Votre enfant est-il capable de descendre les escaliers debout lorsque vous lui tenez la main? (Vous pouvez vérifier cette aptitude au magasin, au terrain de jeu ou à la maison.)

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

8. Lorsque vous lui montrez à donner un coup de pied sur un gros ballon, votre enfant élançait-il sa jambe vers l'avant pour frapper le ballon ou avance-t-il simplement en direction du ballon jusqu'à ce qu'il le cogne? (Cochez « oui » si votre enfant frappe déjà un ballon avec son pied.)



04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

9. Votre enfant est-il capable de monter ou de descendre au moins deux marches sans aucune aide? Vous pouvez vérifier cette aptitude au magasin, au terrain de jeu ou à la maison. (Cochez « oui » même s'il s'agrippe au mur ou à la rampe.)



01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

10. Votre enfant court-il assez aisément et est-il capable de s'arrêter sans se buter contre des objets ou tomber?



04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

11. Votre enfant est-il capable de sauter en soulevant les deux pieds à la fois?



01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

12. Votre enfant est-il capable de frapper la balle en élançant la jambe vers l'avant sans prendre appui sur quoi que ce soit?



04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

13. Votre enfant est-il capable de porter sa cuillère à la bouche sans la retourner, donc sans tout renverser la nourriture qu'elle contient?

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

14. Votre enfant parvient-il à tourner les pages d'un livre sans aide? (Cochez « oui » même s'il tourne plus d'une page à la fois.)

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 22 à 26 mois

15. Votre enfant effectue-t-il un mouvement de rotation de la main lorsqu'il essaie de tourner les poignées de porte, de remonter les jouets ou de serrer et de desserrer les couvercles des bocaux?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

16. Votre enfant est-il capable de soulever et d'abaisser les commutateurs?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

17. Votre enfant est-il capable d'empiler sept petits blocs ou sept petits jouets l'un sur l'autre sans aucune aide? (Vous pouvez également utiliser des bobines de fil, de petites boîtes ou des jouets qui mesurent environ 1 pouce.)

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

18. Votre enfant est-il capable d'enfiler une perle sur un lacet ou d'insérer un lacet dans l'œillet d'une chaussure?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

19. Lorsque vous tracez une ligne du haut au bas de la page devant lui à l'aide d'un crayon (ou d'un stylo), votre enfant vous imite-t-il en traçant à son tour une ligne unique sur la page peu importe la direction? (Ne cochez pas « oui » s'il se contente de griffonner.)

Cochez « oui ».



Cochez « pas encore ».



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

20. Lorsque vous laissez tomber une miette ou une céréale de type Cheerios dans une bouteille, votre enfant retourne-t-il expressément la bouteille à l'envers pour faire sortir la miette ou la céréale sans que vous ne lui ayez démontré cette activité au préalable? (Vous pouvez utiliser une bouteille de boisson gazeuse ou un biberon.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

21. Votre enfant fait-il semblant que les objets représentent autre chose que ce qu'ils sont réellement? Par exemple, votre enfant tient-il une tasse à son oreille en faisant semblant qu'il s'agit d'un téléphone? Place-t-il une boîte sur sa tête comme si c'était un chapeau? Utilise-t-il un bloc ou un petit jouet pour brasser la nourriture?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

22. Votre enfant est-il capable de ranger les choses à leur place? Par exemple, sait-il que ses jouets vont sur l'étagère, que ses couvertures vont sur le lit et que la vaisselle va dans la cuisine?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 22 à 26 mois

23. Lorsque votre enfant veut obtenir une chose qui est hors de sa portée, monte-t-il sur une chaise ou sur une boîte pour l'atteindre plus facilement?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

24. Lorsque vous alignez quatre objets (p. ex., des blocs ou des voitures) devant lui, votre enfant reproduit-il ou imite-t-il votre comportement en alignant à son tour quatre objets? (Vous pouvez également utiliser des bobines de fil, de petites boîtes ou d'autres jouets.)



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

25. Votre enfant est-il capable de boire à la tasse ou au verre et de déposer le contenant sans renverser une grande quantité de liquide?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

26. Votre enfant imite-t-il vos activités, par exemple, nettoyer un dégât, balayer, se raser ou se peigner?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

27. Votre enfant est-il capable de manger à la fourchette?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

28. Lorsqu'il joue avec un toutou ou une poupée, votre enfant fait-il semblant de le bercer, de le nourrir, de changer ses couches, de le mettre au lit, etc.?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

29. Votre enfant est-il capable de pousser un chariot, une poussette ou une voiturette en se frayant un passage entre les objets et en reculant pour se dégager lorsqu'il est coincé et qu'il ne peut tourner?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

30. Votre enfant dit-il « je » ou « moi » plus souvent que son propre nom pour se désigner? Par exemple, a-t-il tendance à privilégier la formulation « C'est moi qui veut le faire » à « C'est Juanita qui veut le faire »?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore



Pour les enfants âgés de 34 à 38 mois

- | | |
|--|--|
| <p>1. Lorsque vous lui demandez de montrer du doigt son nez, ses yeux, ses cheveux, ses pieds, ses oreilles, etc., votre enfant parvient-il à montrer correctement au moins sept parties de son corps? (Il peut montrer du doigt les parties de son corps, celles d'une poupée ou les vôtres.)</p> | <p>01 <input type="radio"/> Oui</p> <p>02 <input type="radio"/> Parfois</p> <p>03 <input type="radio"/> Pas encore</p> |
| <p>2. Votre enfant est-il capable de formuler des phrases de trois ou quatre mots?</p> <p>Donnez un exemple:</p> <p>_____</p> | <p>04 <input type="radio"/> Oui</p> <p>05 <input type="radio"/> Parfois</p> <p>06 <input type="radio"/> Pas encore</p> |
| <p>3. Sans que vous ne l'aidiez en montrant du doigt ou en faisant des gestes, demandez à votre enfant « Place les souliers sur la table. » et « Place le livre sous la chaise. » Votre enfant est-il capable de donner suite à ces deux consignes?</p> | <p>01 <input type="radio"/> Oui</p> <p>02 <input type="radio"/> Parfois</p> <p>03 <input type="radio"/> Pas encore</p> |
| <p>4. Lorsqu'il regarde une image dans un livre, votre enfant vous dit-il ce qui se passe ou décrit-il l'action qui se déroule sur l'image? (Par exemple, « Aboie », « Court », « Mange » et « Pleure ».) Vous pouvez lui demander « Qu'est-ce que le chien (ou le garçon) fait? »</p> | <p>04 <input type="radio"/> Oui</p> <p>05 <input type="radio"/> Parfois</p> <p>06 <input type="radio"/> Pas encore</p> |
| <p>5. Montrez à votre enfant le mouvement de va-et-vient qu'effectue la fermeture éclair d'un manteau et dites-lui « Regarde, la fermeture éclair se déplace vers le haut et vers le bas. » Placez la fermeture éclair au centre et demandez à l'enfant de la descendre. Replacez la fermeture éclair au centre et demandez à l'enfant de la monter. Reprenez cette activité à plusieurs reprises en prenant soin de toujours replacer la fermeture éclair au centre avant de demander à votre enfant de la descendre ou de la monter. Votre enfant monte-t-il et abaisse-t-il régulièrement la fermeture éclair lorsque vous le lui demandez?</p> | <p>01 <input type="radio"/> Oui</p> <p>02 <input type="radio"/> Parfois</p> <p>03 <input type="radio"/> Pas encore</p> |
| <p>6. Lorsque vous lui demandez « Quel est ton nom? », votre enfant cite-t-il à la fois son prénom et son nom de famille?</p> | <p>04 <input type="radio"/> Oui</p> <p>05 <input type="radio"/> Parfois</p> <p>06 <input type="radio"/> Pas encore</p> |

Pour les enfants âgés de 34 à 38 mois

7. Votre enfant est-il capable de frapper la balle en élançant la jambe vers l'avant sans prendre appui sur quoi que ce soit?



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

8. Votre enfant est-il capable de sauter en soulevant les deux pieds à la fois?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

9. Votre enfant monte-t-il les escaliers en posant un seul pied sur chaque marche? (Par exemple, il pose le pied gauche sur une marche et le pied droit sur la marche suivante.) Il peut tenir la rampe ou le mur. (Vous pouvez vérifier cette aptitude au magasin, au terrain de jeu ou à la maison.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

10. Votre enfant est-il capable de se tenir debout sur un pied pendant environ 1 seconde sans prendre appui sur quoi que ce soit?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

11. En position debout, votre enfant est-il capable de lancer une balle par-dessus l'épaule en soulevant son bras au-dessus de la hauteur de l'épaule, puis en lançant la balle vers l'avant? (Ne cochez pas « oui » s'il laisse simplement tomber la balle ou s'il la lance par en-dessous.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

12. Votre enfant est-il capable d'effectuer un bond d'au moins 6 pouces vers l'avant en soulevant les deux pieds à la fois?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

13. Tracez une ligne du haut au bas d'une feuille de papier devant votre enfant à l'aide d'un crayon ou d'un stylo, puis demandez-lui de tracer une autre ligne identique. Ne permettez pas à votre enfant de simplement repasser sur votre ligne. Votre enfant est-il capable de vous imiter et de tracer une ligne verticale?

Cochez « oui ».

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Cochez « pas encore ».

-C2

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 34 à 38 mois

14. Votre enfant est-il capable d'enfiler une perle sur un lacet ou d'insérer un lacet dans l'œillet d'une chaussure?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

15. Tracez un cercle devant votre enfant, puis demandez-lui de tracer un autre cercle identique. Ne permettez pas à votre enfant de simplement repasser sur votre cercle. Votre enfant est-il capable de vous imiter et de tracer un cercle?

Cochez « oui »



Cochez « pas encore »



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

16. Tracez une ligne d'un côté à l'autre d'une feuille de papier devant votre enfant à l'aide d'un crayon ou d'un stylo, puis demandez-lui de tracer une autre ligne identique. Ne permettez pas à votre enfant de simplement repasser sur votre ligne. Votre enfant est-il capable de vous imiter et de tracer une ligne horizontale?

Cochez « oui »



Cochez « pas encore »



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

17. Votre enfant tente-t-il de découper le papier à l'aide de ciseaux sans danger pour les enfants? Il ne doit pas nécessairement couper le papier, mais il doit ouvrir les ciseaux et les refermer en tenant la feuille de papier de l'autre main. (Vous pouvez montrer à votre enfant comment utiliser les ciseaux. Surveillez attentivement votre enfant lorsqu'il manipule les ciseaux pour des raisons de sécurité.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

18. Lorsqu'il dessine, votre enfant tient-il son crayon ou son stylo entre le pouce et les doigts à la manière d'un adulte?



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

19. Lorsque vous alignez quatre objets (p. ex., des blocs ou des voitures) devant lui, votre enfant reproduit-il ou imite-t-il votre comportement en alignant à son tour quatre objets? (Vous pouvez également utiliser des bobines de fil, de petites boîtes ou d'autres jouets.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

20. Lorsque votre enfant veut obtenir une chose qui est hors de sa portée, monte-t-il sur une chaise ou sur une boîte pour l'atteindre plus facilement?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 34 à 38 mois

21. Lorsque vous montrez l'image suivante à votre enfant et lui demandez « Qu'est-ce que c'est? », votre enfant répond-il par un mot qui désigne une personne? Par exemple, « un bonhomme de neige », « un garçon », « un homme », « une fille » ou « papa ».



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Veuillez noter la réponse fournie par votre enfant:

22. Lorsque vous lui demandez « Dis sept trois. », votre enfant répète-t-il ces deux chiffres seulement et dans le bon ordre? Ne répétez pas les chiffres. Au besoin, reprenez l'activité en utilisant deux autres chiffres, par exemple, « Dis huit deux. » Cochez « oui » si votre enfant est capable de répéter une série de deux chiffres.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

23. Montrez à votre enfant comment construire un pont à l'aide de blocs, de boîtes ou de boîtes de conserves comme dans l'exemple illustré. Votre enfant vous imite-t-il en construisant un pont à son tour?



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

24. Lorsque vous lui demandez « Dis cinq huit trois. », votre enfant répète-t-il ces trois chiffres seulement et dans le bon ordre? Ne répétez pas les chiffres. Au besoin, reprenez l'activité en utilisant trois autres chiffres, par exemple, « Dis six neuf deux. » Cochez « oui » si votre enfant est capable de répéter une série de trois chiffres.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

25. Votre enfant est-il capable de manger à la cuillère sans tout renverser?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

26. Votre enfant est-il capable de pousser un chariot, une poussette ou une voiturette en se frayant un passage entre les objets et en reculant pour se dégager lorsqu'il est coincé et qu'il ne peut tourner?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

27. Lorsqu'il se regarde dans le miroir et que vous lui demandez « Qui est dans le miroir? », est-ce que votre enfant répond « Moi » ou son propre nom?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 34 à 38 mois

28. Votre enfant est-il capable de mettre un manteau, une veste ou une chemise par lui-même?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

29. Posez à votre enfant la question suivante telle quelle:
« Es-tu une fille ou un garçon? ». Est-ce que votre enfant répond correctement?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

30. Est-ce que votre enfant attend son tour lorsque c'est le tour d'un autre enfant ou d'un adulte?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore



Pour les enfants âgés de 46 à 50 mois

1. Votre enfant peut-il nommer trois éléments faisant partie d'une même catégorie? Par exemple, si vous lui demandez « Nomme-moi des choses qui se mangent. », sa réponse s'apparentera-t-elle à « Biscuits, œufs et céréales »? Ou, si vous lui demandez « Peux-tu me dire des noms d'animaux? », sa réponse s'apparentera-t-elle à « Vache, chien et éléphant »?

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

2. Votre enfant est-il capable de répondre aux questions suivantes:

« Que fais-tu quand tu as faim? » (Les réponses acceptables englobent: « Je vais chercher de la nourriture. », « Je mange. », « Je dis que j'ai faim. » et « Je prends une collation. »)

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Veuillez noter la réponse fournie par votre enfant.

« Que fais-tu quand tu es fatigué? » (Les réponses acceptables englobent: « Je fais une sieste. », « Je me repose. », « Je vais dormir. », « Je vais dans mon lit. », « Je m'allonge. » et « Je m'assois. »)

Veuillez noter la réponse fournie par votre enfant.

Cochez « parfois » si votre enfant répond à une seule de ces questions.

3. Votre enfant peut-il dire deux choses au sujet d'un même objet? Par exemple, lorsque vous lui demandez « Parle-moi de ta balle. », sa réponse s'apparente-t-elle à « Elle est ronde. Je la lance. Elle est grosse. »

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

4. Votre enfant utilise-t-il la conjugaison de verbe adéquate en vue de situer l'action dans le temps. Par exemple, votre enfant dit-il « J'ai frappé le ballon », « Je vois deux chats. » ou « Je joue. »?

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 46 à 50 mois

5. Sans que vous ne l'aidiez en montrant du doigt ou en répétant, votre enfant est-il capable de donner suite à trois consignes qui n'ont aucun rapport entre elles? Par exemple, vous pourriez lui demander « Tape des mains, rends-toi à la porte et assieds-toi. »

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

6. Votre enfant émet-il des phrases complètes (sans omettre de mots). Par exemple, votre enfant dit-il « Je veux aller au parc. » « y a-t-il un jouet ? » ou « Viens-tu avec moi ? »

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

7. Votre enfant est-il capable d'attraper une grosse balle avec les deux mains? Placez-vous à environ cinq pieds de lui et lancez-lui la balle à deux ou trois reprises.



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

8. Votre enfant parvient-il à monter les barreaux de l'échelle qui mène à la glissoire et à glisser sans aide?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

9. En position debout, votre enfant est-il capable de lancer une balle par-dessus l'épaule en direction d'une personne qui se tient à au moins six pieds de lui? Pour lancer la balle par-dessus l'épaule, il doit soulever son bras au-dessus de la hauteur de l'épaule, puis lancer la balle vers l'avant? (Cochez « pas encore » s'il échappe la balle, s'il la laisse tomber ou s'il la lance par en-dessous.)



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

10. Votre enfant est-il capable de sauter à cloche-pied (sur le pied gauche ou droit) à au moins une reprise sans perdre l'équilibre ou tomber?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

11. Votre enfant parvient-il à faire un bond d'une distance de 20 pouces vers l'avant à partir de la position debout, les pieds joints?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 46 à 50 mois

12. Votre enfant est-il capable de se tenir sur un pied pendant au moins cinq secondes sans s'appuyer sur quoi que ce soit et sans perdre l'équilibre ou poser l'autre pied par terre? Accordez deux ou trois tentatives à votre enfant avant d'inscrire votre réponse.



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

13. Votre enfant est-il capable d'assembler un casse-tête de six pièces? (Si vous ne disposez pas d'un tel casse-tête, prenez une image pleine-page dans une revue ou un catalogue et découpez-la en six morceaux). Votre enfant parvient-il à reconstituer correctement l'image?

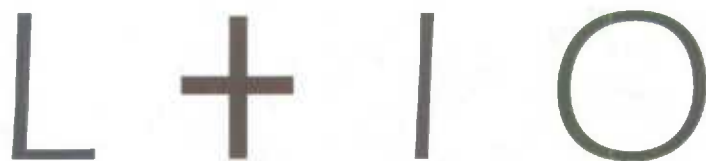
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

14. À l'aide de ciseaux sans danger pour les enfants, votre enfant parvient-il à couper une feuille de papier en deux selon une ligne plus ou moins droite en ouvrant et en refermant les ciseaux? (Surveillez attentivement votre enfant lorsqu'il manipule les ciseaux pour des raisons de sécurité.)



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

15. Lorsque vous lui présentez les formes suivantes comme modèle, votre enfant est-il capable de reproduire au moins trois d'entre elles sur une grande feuille de papier à l'aide d'un crayon ou d'un stylo sans repasser sur le modèle? Les formes dessinées par votre enfant devraient s'apparenter à celles illustrées ci-dessous, mais leur taille peut varier.



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

16. Votre enfant est-il capable de déboutonner un ou plusieurs boutons? Votre enfant peut effectuer cette activité sur ses propres vêtements ou sur ceux d'une poupée.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

17. Votre enfant inclut-il au moins trois des caractéristiques suivantes (tête, yeux, nez, bouche, cou, cheveux, tronc, bras, mains, jambes ou pieds) lorsqu'il dessine des personnes?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 46 à 50 mois

18. Votre enfant est-il capable de colorier les images d'un album à colorier sans dépasser les lignes ou presque? Cochez « oui » si votre enfant ne dépasse pas les lignes de plus d'un quart de pouce en général.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

19. Lorsque vous lui demandez « Dis cinq huit trois. », votre enfant répète-t-il ces trois chiffres seulement et dans le bon ordre? Ne répétez pas les chiffres. Au besoin, reprenez l'activité en utilisant trois autres chiffres, par exemple, « Dis six neuf deux. » Cochez « oui » si votre enfant est capable de répéter une série de trois chiffres.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

20. Lorsque vous lui demandez « Lequel de ces cercles est le plus petit? », votre enfant vous montre-t-il le plus petit cercle du doigt? Évitez de l'aider en montrant du doigt le plus petit cercle, en faisant des gestes en sa direction ou en le regardant.



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

21. Sans que vous ne l'aidiez en montrant du doigt, votre enfant est-il capable de donner suite à trois consignes différentes qui contiennent les mots « sous », « entre » et « centre »? Par exemple, demandez à votre enfant de placer un livre « sous le divan ». Demandez-lui ensuite de placer la balle « entre les chaises » et la chaussure « au centre de la table ».

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

22. Lorsque vous lui montrez un objet et lui demandez « De quelle couleur est-ce? », votre enfant nomme-t-il cinq couleurs différentes comme rouge, bleu, jaune, orange, noir, blanc ou rose? Cochez « oui » uniquement si votre enfant nomme correctement cinq couleurs?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

23. Votre enfant se déguise-t-il ou joue-t-il à faire semblant d'être une autre personne? Par exemple, votre enfant revêt peut-être des vêtements autres que les siens et fait peut-être semblant d'être une maman, un papa, un frère ou une sœur, ou encore un animal ou un personnage imaginaire.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 46 à 50 mois

24. Si vous placez cinq objets devant lui, votre enfant est-il capable de les compter « Un, deux, trois, quatre, cinq » dans l'ordre? Ne l'aidez pas en montrant du doigt les objets, en faisant des gestes en leur direction ou en les nommant.
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
25. Votre enfant est-il capable de se servir en utilisant des ustensiles pour transférer la nourriture qui se trouve dans un contenant à un autre contenant? Par exemple, votre enfant parvient-il à extraire de la compote de pomme d'un bocal à l'aide d'une cuillère et à la déposer dans un bol?
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
26. Votre enfant connaît-il au moins quatre des éléments d'information suivants:
- a. Son prénom d. Son nom de famille
b. Son âge e. S'il est une fille ou un garçon
c. La ville où il habite f. Son numéro de téléphone
- Veuillez encercler les éléments d'information que votre enfant connaît.
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
27. Votre enfant est-il capable de se laver le visage et les mains à l'eau et au savon, puis de se sécher sans aide?
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
28. Votre enfant peut-il vous dire le nom de deux camarades ou plus, mis à part ses frères et ses sœurs? Ne l'aidez pas en suggérant le nom d'ami(e)s ou de camarades.
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore
-
29. Votre enfant est-il capable d'étendre le dentifrice sur sa brosse à dents et de se brosser les dents sans aide? Cochez « oui » même si vous devez vérifier le brossage et le répéter.
- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore
-
30. Votre enfant est-il capable de s'habiller et de se déshabiller seul (à l'exception des boutons pression, des boutons et des fermetures-éclair).
- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore



Pour les enfants âgés de 58 à 62 mois

1. Sans que vous ne l'aidiez en montrant du doigt ou en répétant les consignes, votre enfant est-il capable de donner suite à trois consignes qui n'ont aucun lien entre elles? Donnez-lui les trois consignes du même coup. Par exemple, vous pourriez demander à votre enfant « Tape des mains, rends-toi à la porte et assieds-toi. » ou « Donne-moi le crayon, ouvre le livre et lève-toi. »

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

2. Votre enfant est-il capable de formuler des phrases de quatre ou cinq mots? Par exemple, votre enfant dit-il « Je veux la voiture. »

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Donnez un exemple:

3. Lorsque vous discutez d'un événement qui a déjà eu lieu, votre enfant conjugue-t-il ses verbes au passé, par exemple, j'ai marché, j'ai sauté ou j'ai joué? Posez des questions à votre enfant, du genre « Comment vous êtes-vous rendus au magasin? » (Nous avons marché.) ou « Qu'as-tu fait chez ton ami? » (Nous avons joué.)

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Donnez un exemple:

4. Votre enfant utilise-t-il des comparatifs, par exemple, plus lourd, plus fort ou plus court? Posez des questions à votre enfant, du genre « La voiture est grosse, mais l'autobus est xxxxx » (plus gros); « Le chat est lourd, mais une personne est xxxxx » (plus lourde); « Le téléviseur est petit, mais un livre est xxxxx » (plus petit).

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Donnez un exemple:

Pour les enfants âgés de 58 à 62 mois

5. Votre enfant est-il capable de répondre aux questions suivantes:

« Que fais-tu quand tu as faim? » (Les réponses acceptables englobent: « Je vais chercher de la nourriture. », « Je mange. », « Je dis que j'ai faim. » et « Je prends une collation. »)

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Veuillez noter la réponse fournie par votre enfant.

« Que fais-tu quand tu es fatigué? » (Les réponses acceptables englobent: « Je fais une sieste. », « Je me repose. », « Je vais dormir. », « Je vais dans mon lit. », « Je m'allonge. » et « Je m'assois. »)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Veuillez noter la réponse fournie par votre enfant.

Cochez « parfois » si votre enfant répond à une seule de ces questions.

6. Votre enfant est-il capable de répéter les phrases ci-dessous sans se tromper? Vous pouvez lui répéter chaque phrase une fois. Cochez « oui » si votre enfant répète les deux phrases sans se tromper ou « parfois » s'il ne répète qu'une phrase sans faire d'erreurs.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Jeanne cache ses souliers pour que Marie les trouve.
Alex lit le livre bleu sous son lit.

7. En position debout, votre enfant est-il capable de lancer une balle par-dessus l'épaule en direction d'une personne qui se tient à au moins six pieds de lui? Pour lancer la balle par-dessus l'épaule, il doit soulever son bras au-dessus de la hauteur de l'épaule, puis lancer la balle vers l'avant? (Cochez « pas encore » s'il échappe la balle, s'il la laisse tomber ou s'il la lance par en-dessous.)



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

8. Votre enfant est-il capable d'attraper une grosse balle avec les deux mains? Placez-vous à environ cinq pieds de lui et lancez-lui la balle à deux ou trois reprises.



- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 58 à 62 mois

9. Votre enfant est-il capable de se tenir sur un pied pendant au moins cinq secondes sans prendre appui sur quoi que ce soit et sans perdre l'équilibre ou poser l'autre pied par terre? Accordez deux ou trois tentatives à votre enfant avant d'inscrire votre réponse.



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

10. Votre enfant est-il capable de parcourir une distance de 15 pieds (environ la longueur d'une grosse voiture) sur la pointe des pieds? Vous pouvez lui montrer à faire cette activité au préalable.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

11. Votre enfant est-il capable de couvrir une distance de quatre à six pieds en sautant sur un seul pied, sans déposer l'autre pied par terre? Vous pouvez lui accorder jusqu'à deux tentatives pour chaque pied. Cochez « parfois » s'il réussit l'activité sur un seul pied.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

12. Votre enfant est-il capable de sautiller sur un pied, puis sur l'autre. Vous pouvez lui montrer à faire cette activité au préalable.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

13. Demandez à votre enfant de repasser sur la ligne ci-dessous avec un crayon. Votre enfant parvient-il à exécuter cette activité sans s'éloigner de la ligne à plus de deux reprises?

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Cochez « parfois » si votre enfant s'éloigne de la ligne à trois reprises.

14. Votre enfant est-il capable de dessiner une personne sur une feuille blanche. Par exemple, vous pouvez lui demander « Dessine une fille ou un garçon. » Cochez « oui » si votre enfant dessine une personne ayant une tête, un corps, des bras et des jambes. Cochez « parfois » si votre enfant dessine seulement trois parties du corps (tête, corps, bras ou jambes). Cochez « pas encore » s'il dessine deux parties du corps ou moins (tête, corps, bras ou jambes). N'oubliez pas de joindre le dessin de votre enfant au présent questionnaire.

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 58 à 62 mois

15. Tracez une ligne d'un côté à l'autre d'une feuille de papier. Votre enfant est-il capable de couper la feuille en deux en ouvrant et en refermant des ciseaux sans danger pour les enfants de manière à réaliser une ligne relativement droite? (Surveillez attentivement votre enfant lorsqu'il manipule les ciseaux pour des raisons de sécurité.)



- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

16. Lorsque vous lui présentez les formes suivantes comme modèle, votre enfant est-il capable de les reproduire sur une grande feuille de papier sans repasser sur le modèle? Les formes dessinées par votre enfant devraient s'apparenter à celles illustrées ci-dessous, mais leur taille peut varier. (Cochez « oui » si votre enfant parvient à reproduire les trois formes et « parfois » s'il ne peut reproduire que deux des formes.)



(Reproduire les formes ici.)

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

17. Lorsque vous lui présentez les lettres suivantes comme modèle, votre enfant est-il capable de les reproduire sur une grande feuille de papier sans repasser sur le modèle? Cachez toutes les autres lettres, mis à part celle qu'il reproduit. Cochez « oui » si votre enfant parvient à reproduire quatre lettres de façon lisible. Cochez « parfois » s'il peut reproduire deux ou trois lettres de façon lisible.

V H T C A

(Reproduire les lettres ici.)

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 58 à 62 mois

18. Écrivez le prénom de votre enfant en lettres moulées. Votre enfant est-il capable de reproduire les lettres de son nom? Cochez « oui » même si les lettres sont grosses, inversées ou renversées. Cochez « parfois » si votre enfant parvient à reproduire plus ou moins la moitié des lettres?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

(Espace réservé aux lettres dessinées par l'adulte.)

(Espace réservé aux lettres dessinées par l'enfant.)

19. Lorsque vous lui demandez « Lequel de ces cercles est le plus petit? », votre enfant vous montre-t-il le plus petit cercle du doigt? Évitez de l'aider en montrant du doigt le plus petit cercle, en faisant des gestes en sa direction ou en le regardant.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore



20. Lorsque vous lui montrez un objet et lui demandez « De quelle couleur est-ce? », votre enfant nomme-t-il cinq couleurs différentes comme rouge, bleu, jaune, orange, noir, blanc ou rose? Cochez « oui » uniquement si votre enfant nomme correctement cinq couleurs?

- 01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

21. Votre enfant est-il capable de compter jusqu'à 15 sans se tromper? Cochez « oui » dans l'affirmative. Cochez « parfois » si votre enfant sait compter jusqu'à 12.

- 04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

Pour les enfants âgés de 58 à 62 mois

22. Votre enfant est-il capable de compléter les phrases suivantes en insérant un mot qui présente le sens contraire du mot en italique? Par exemple, « La roche est dure, mais l'oreiller est mou. »

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Veillez noter la réponse fournie par votre enfant dans l'espace réservé à cette fin.

La vache est grosse, mais la souris est _____

La glace est froide, mais le feu est _____

Les étoiles brillent la nuit et le soleil resplendit le _____

Lorsque je lance une balle en l'air, elle _____

Cochez « oui » si votre enfant complète correctement trois de ces quatre phrases. Cochez « parfois » s'il ne parvient à compléter que deux des quatre phrases.

23. Votre enfant est-il capable de lire les chiffres? Cochez « oui » s'il est capable de reconnaître les trois chiffres dessinés ci-dessous. Cochez « parfois » s'il ne parvient à reconnaître que deux de ces chiffres.

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

3 1 2

24. Votre enfant connaît-il au moins quatre des lettres qui forment son nom? Montrez-lui les lettres et demandez-lui « Comment s'appelle cette lettre? » Montrez-lui les lettres dans le désordre.

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

25. Votre enfant est-il capable de se servir à l'aide d'une grosse cuillère ou d'une fourchette? Par exemple, votre enfant parvient-il à extraire de la compote de pomme d'un bocal en utilisant une cuillère et à la déposer dans un bol?

04 ☐ Oui
05 ☐ Parfois
06 ☐ Pas encore

26. Votre enfant est-il capable de se laver le visage et les mains à l'eau et au savon, puis de se sécher sans aide?

01 ☐ Oui
02 ☐ Parfois
03 ☐ Pas encore

Pour les enfants âgés de 58 à 62 mois

27. Votre enfant connaît-il au moins quatre des éléments d'information suivants:

04 ☐ Oui

05 ☐ Parfois

06 ☐ Pas encore

a. Son prénom

d. Son nom de famille

b. Son âge

e. S'il est une fille ou un garçon

c. La ville où il habite

f. Son numéro de téléphone

Veillez encercler les éléments d'information que votre enfant connaît.

28. Votre enfant est-il capable de s'habiller et de se déshabiller, entre autres, de déboutonner des boutons de taille moyenne et de monter les fermetures éclair qui se trouvent à l'avant de ses vêtements?

01 ☐ Oui

02 ☐ Parfois

03 ☐ Pas encore

29. Votre enfant est-il capable d'aller aux toilettes seul? (c.-à-d. de se rendre à la salle de bain, de s'asseoir sur la toilette, de s'essuyer et de tirer la chasse d'eau.) Cochez « oui » même si vous devez lui rappeler certaines étapes.

04 ☐ Oui

05 ☐ Parfois

06 ☐ Pas encore

30. De façon générale, votre enfant attend-il son tour et partage-t-il avec les autres?

01 ☐ Oui

02 ☐ Parfois

03 ☐ Pas encore



APPENDIX I

MacArthur Short Form Vocabulary Checklist - Booklet 9



National Longitudinal Survey of Children and Youth Understanding the Early Years

Booklet 9



MacArthur Short Form Vocabulary Checklist

If this child is between **8 and 16 months**
old, go to **page 3 (Level I)**.

If this child is between **17 and 30 months**
old, go to **page 4 (Level II, Form A)**.

Interviewer Assignment #	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Person ID	
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Child's Last Name	
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Child's First Name	
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Child's Date of Birth	
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YYYY -- MM -- DD	

Confidential when completed.

Version française au verso.

Collected under the authority of the Statistics
Act, Revised Statutes of Canada, 1985, Chapter
S19.

BOOKLET FINAL STATUS CODE

- 000 ☐ Complete
001 ☐ Partial
034 ☐ No Contact
030 ☐ Refusal by Parent
031 ☐ Refusal by the Child
018 ☐ Out of Scope
099 ☐ Other NR (Specify)

Comments: _____

☐ Booklet completed by Respondent.

☐ Booklet completed by Interviewer.

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Statistics
Canada

Statistique
Canada

Canada

8 to 16 months (Level I)

MacArthur Short Form Vocabulary Checklist

We are interested in the words UNDERSTOOD and SAID by your child. Please check separately the words you know your child understands and those you know your child says. If your child uses a different pronunciation of a word, mark it as understands and says. However, if your child does not understand a word yet, do not check either circle.

UNDERSTANDS			UNDERSTANDS AND SAYS			UNDERSTANDS			UNDERSTANDS AND SAYS			UNDERSTANDS			UNDERSTANDS AND SAYS		
1	Choo choo	1 <input type="radio"/>	2 <input type="radio"/>	31	Chair	1 <input type="radio"/>	2 <input type="radio"/>	61	Wait	1 <input type="radio"/>	2 <input type="radio"/>						
2	Meow	3 <input type="radio"/>	4 <input type="radio"/>	32	Couch	3 <input type="radio"/>	4 <input type="radio"/>	62	Break	3 <input type="radio"/>	4 <input type="radio"/>						
3	Ouch	1 <input type="radio"/>	2 <input type="radio"/>	33	Kitchen	1 <input type="radio"/>	2 <input type="radio"/>	63	Feed	1 <input type="radio"/>	2 <input type="radio"/>						
4	Uh oh	3 <input type="radio"/>	4 <input type="radio"/>	34	Table	3 <input type="radio"/>	4 <input type="radio"/>	64	Finish	3 <input type="radio"/>	4 <input type="radio"/>						
5	Bird	1 <input type="radio"/>	2 <input type="radio"/>	35	Television	1 <input type="radio"/>	2 <input type="radio"/>	65	Help	1 <input type="radio"/>	2 <input type="radio"/>						
6	Dog	3 <input type="radio"/>	4 <input type="radio"/>	36	Blanket	3 <input type="radio"/>	4 <input type="radio"/>	66	Jump	3 <input type="radio"/>	4 <input type="radio"/>						
7	Duck	1 <input type="radio"/>	2 <input type="radio"/>	37	Bottle	1 <input type="radio"/>	2 <input type="radio"/>	67	Kick	1 <input type="radio"/>	2 <input type="radio"/>						
8	Kitty	3 <input type="radio"/>	4 <input type="radio"/>	38	Cup	3 <input type="radio"/>	4 <input type="radio"/>	68	Kiss	3 <input type="radio"/>	4 <input type="radio"/>						
9	Lion	1 <input type="radio"/>	2 <input type="radio"/>	39	Dish	1 <input type="radio"/>	2 <input type="radio"/>	69	Push	1 <input type="radio"/>	2 <input type="radio"/>						
10	Mouse	3 <input type="radio"/>	4 <input type="radio"/>	40	Lamp	3 <input type="radio"/>	4 <input type="radio"/>	70	Sing	3 <input type="radio"/>	4 <input type="radio"/>						
11	Car	1 <input type="radio"/>	2 <input type="radio"/>	41	Radio	1 <input type="radio"/>	2 <input type="radio"/>	71	Smile	1 <input type="radio"/>	2 <input type="radio"/>						
12	Stroller	3 <input type="radio"/>	4 <input type="radio"/>	42	Spoon	3 <input type="radio"/>	4 <input type="radio"/>	72	Night	3 <input type="radio"/>	4 <input type="radio"/>						
13	Ball	1 <input type="radio"/>	2 <input type="radio"/>	43	Flower	1 <input type="radio"/>	2 <input type="radio"/>	73	Today	1 <input type="radio"/>	2 <input type="radio"/>						
14	Book	3 <input type="radio"/>	4 <input type="radio"/>	44	Home	3 <input type="radio"/>	4 <input type="radio"/>	74	All gone	3 <input type="radio"/>	4 <input type="radio"/>						
15	Doll	1 <input type="radio"/>	2 <input type="radio"/>	45	Moon	1 <input type="radio"/>	2 <input type="radio"/>	75	Big	1 <input type="radio"/>	2 <input type="radio"/>						
16	Bread	3 <input type="radio"/>	4 <input type="radio"/>	46	Outside	3 <input type="radio"/>	4 <input type="radio"/>	76	Broken	3 <input type="radio"/>	4 <input type="radio"/>						
17	Candy	1 <input type="radio"/>	2 <input type="radio"/>	47	Plant	1 <input type="radio"/>	2 <input type="radio"/>	77	Dark	1 <input type="radio"/>	2 <input type="radio"/>						
18	Cereal	3 <input type="radio"/>	4 <input type="radio"/>	48	Rain	3 <input type="radio"/>	4 <input type="radio"/>	78	Fast	3 <input type="radio"/>	4 <input type="radio"/>						
19	Cookie	1 <input type="radio"/>	2 <input type="radio"/>	49	Rock	1 <input type="radio"/>	2 <input type="radio"/>	79	Hurt	1 <input type="radio"/>	2 <input type="radio"/>						
20	Juice	3 <input type="radio"/>	4 <input type="radio"/>	50	Water	3 <input type="radio"/>	4 <input type="radio"/>	80	Pretty	3 <input type="radio"/>	4 <input type="radio"/>						
21	Toast	1 <input type="radio"/>	2 <input type="radio"/>	51	Babysitter	1 <input type="radio"/>	2 <input type="radio"/>	81	Soft	1 <input type="radio"/>	2 <input type="radio"/>						
22	Hat	3 <input type="radio"/>	4 <input type="radio"/>	52	Girl	3 <input type="radio"/>	4 <input type="radio"/>	82	I	3 <input type="radio"/>	4 <input type="radio"/>						
23	Pants	1 <input type="radio"/>	2 <input type="radio"/>	53	Grandma	1 <input type="radio"/>	2 <input type="radio"/>	83	Me	1 <input type="radio"/>	2 <input type="radio"/>						
24	Shoe	3 <input type="radio"/>	4 <input type="radio"/>	54	Mommy	3 <input type="radio"/>	4 <input type="radio"/>	84	How	3 <input type="radio"/>	4 <input type="radio"/>						
25	Sock	1 <input type="radio"/>	2 <input type="radio"/>	55	Bath	1 <input type="radio"/>	2 <input type="radio"/>	85	Who	1 <input type="radio"/>	2 <input type="radio"/>						
26	Eye	3 <input type="radio"/>	4 <input type="radio"/>	56	Don't	3 <input type="radio"/>	4 <input type="radio"/>	86	Away	3 <input type="radio"/>	4 <input type="radio"/>						
27	Head	1 <input type="radio"/>	2 <input type="radio"/>	57	Hi	1 <input type="radio"/>	2 <input type="radio"/>	87	Out	1 <input type="radio"/>	2 <input type="radio"/>						
28	Leg	3 <input type="radio"/>	4 <input type="radio"/>	58	Night night	3 <input type="radio"/>	4 <input type="radio"/>	88	Other	3 <input type="radio"/>	4 <input type="radio"/>						
29	Nose	1 <input type="radio"/>	2 <input type="radio"/>	59	Patty cake	1 <input type="radio"/>	2 <input type="radio"/>	89	Some	1 <input type="radio"/>	2 <input type="radio"/>						
30	Tooth	3 <input type="radio"/>	4 <input type="radio"/>	60	Please	3 <input type="radio"/>	4 <input type="radio"/>										

17 to 30 months (Level II, Form A) MacArthur Short Form Vocabulary Checklist

Children understand many more words than they say. We are particularly interested in the words your child SAYS. Please mark the words you have heard your child use. If your child uses a different pronunciation of a word, mark it anyway.

1	Baa baa	1 <input type="radio"/>	35	Comb	1 <input type="radio"/>	68	Like	2 <input type="radio"/>
2	Meow	2 <input type="radio"/>	36	Key	2 <input type="radio"/>	69	Pretend	1 <input type="radio"/>
3	Ouch	1 <input type="radio"/>	37	Plate	1 <input type="radio"/>	70	Rip	2 <input type="radio"/>
4	Uh oh	2 <input type="radio"/>	38	Trash	2 <input type="radio"/>	71	Shake	1 <input type="radio"/>
5	Woof woof	1 <input type="radio"/>	39	Tray	1 <input type="radio"/>	72	Taste	2 <input type="radio"/>
6	Bear	2 <input type="radio"/>	40	Towel	2 <input type="radio"/>	73	Gentle	1 <input type="radio"/>
7	Bird	1 <input type="radio"/>	41	Bed	1 <input type="radio"/>	74	Think	2 <input type="radio"/>
8	Cat	2 <input type="radio"/>	42	Bedroom	2 <input type="radio"/>	75	Wish	1 <input type="radio"/>
9	Dog	1 <input type="radio"/>	43	Bench	1 <input type="radio"/>	76	All gone	2 <input type="radio"/>
10	Duck	2 <input type="radio"/>	44	Oven	2 <input type="radio"/>	77	Cold	1 <input type="radio"/>
11	Horse	1 <input type="radio"/>	45	Stairs	1 <input type="radio"/>	78	Fast	2 <input type="radio"/>
12	Airplane	2 <input type="radio"/>	46	Flag	2 <input type="radio"/>	79	Happy	1 <input type="radio"/>
13	Boat	1 <input type="radio"/>	47	Rain	1 <input type="radio"/>	80	Hot	2 <input type="radio"/>
14	Car	2 <input type="radio"/>	48	Star	2 <input type="radio"/>	81	Last	1 <input type="radio"/>
15	Ball	1 <input type="radio"/>	49	Swing	1 <input type="radio"/>	82	Tiny	2 <input type="radio"/>
16	Book	2 <input type="radio"/>	50	School	2 <input type="radio"/>	83	Wet	1 <input type="radio"/>
17	Game	1 <input type="radio"/>	51	Sky	1 <input type="radio"/>	84	After	2 <input type="radio"/>
18	Applesauce	2 <input type="radio"/>	52	Party	2 <input type="radio"/>	85	Day	1 <input type="radio"/>
19	Candy	1 <input type="radio"/>	53	Friend	1 <input type="radio"/>	86	Tonight	2 <input type="radio"/>
20	Coke	2 <input type="radio"/>	54	Mommy	2 <input type="radio"/>	87	Yourself	1 <input type="radio"/>
21	Cracker	1 <input type="radio"/>	55	Person	1 <input type="radio"/>	88	Their	2 <input type="radio"/>
22	Juice	2 <input type="radio"/>	56	Bye	2 <input type="radio"/>	89	This	1 <input type="radio"/>
23	Meat	1 <input type="radio"/>	57	Hi	1 <input type="radio"/>	90	Us	2 <input type="radio"/>
24	Milk	2 <input type="radio"/>	58	No	2 <input type="radio"/>	91	Where	1 <input type="radio"/>
25	Peas	1 <input type="radio"/>	59	Shopping	1 <input type="radio"/>	92	Beside	2 <input type="radio"/>
26	Hat	2 <input type="radio"/>	60	Thank you	2 <input type="radio"/>	93	Down	1 <input type="radio"/>
27	Necklace	1 <input type="radio"/>	61	Carry	1 <input type="radio"/>	94	Under	2 <input type="radio"/>
28	Shoe	2 <input type="radio"/>	62	Chase	2 <input type="radio"/>	95	All	1 <input type="radio"/>
29	Sock	1 <input type="radio"/>	63	Dump	1 <input type="radio"/>	96	Much	2 <input type="radio"/>
30	Chin	2 <input type="radio"/>	64	Finish	2 <input type="radio"/>	97	Could	1 <input type="radio"/>
31	Ear	1 <input type="radio"/>	65	Hide	1 <input type="radio"/>	98	Need	2 <input type="radio"/>
32	Hand	2 <input type="radio"/>	66	Hug	2 <input type="radio"/>	99	Lemme / Let me	1 <input type="radio"/>
33	Leg	1 <input type="radio"/>	67	Listen	1 <input type="radio"/>	100	If	2 <input type="radio"/>
34	Broom	2 <input type="radio"/>					Go to question 101.	

101. Has your child begun to combine words yet, such as « nother cookie » or « doggie bite »?

3 ☐ Not yet

4 ☐ Sometimes

5 ☐ Often



Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Livret 9



MacArthur version abrégée Questionnaire sur le vocabulaire

Si l'enfant est âgé entre **8 et 16 mois**, allez à
la **page 3 (Niveau I)**.

Si l'enfant est âgé entre **17 et 30 mois**, allez
à la **page 4 (Niveau II, Formule A)**.

Numéro de tâche

Numéro de la personne

 - - - -

Nom de famille de l'enfant

Prénom de l'enfant

Date de naissance de l'enfant

AAAA -- MM -- JJ

Âge en mois

Confidentiel une fois rempli.

English on reverse.

Renseignements recueillis en vertu de la Loi sur
la statistique, Lois revisées du Canada, 1985,
chapitre S19.

CODE D'ÉTAT FINAL DU LIVRET

- 000 ☐ Complet
001 ☐ Partiel
034 ☐ Pas de contact
030 ☐ Refus du parent
031 ☐ Refus de l'enfant
018 ☐ Hors cible
099 ☐ Autre NR (Précisez)

Commentaires:

☐ Livret complété par le répondant.

☐ Livret complété par l'intervieweur.

8-5300-336: 04-08-1999 STC/HLD-040-75020

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Statistique
Canada

Statistics
Canada

Canada

8 à 6 mois (Niveau I)

MacArthur version abrégée - Questionnaire sur le vocabulaire

Nous sommes intéressés par les mots COMPRIS et les mots DIT par votre enfant. Veuillez SVP cocher séparément les mots que vous savez que votre enfant comprend mais ne dit pas encore et ceux que vous avez entendu votre enfant utiliser. Si votre enfant utilise une prononciation différente d'un mot, cochez-le comme étant compris et dit. Si toutefois votre enfant ne comprend pas encore le mot, ne cochez aucun cercle.

		COMPRIS		COMPRIS ET DIT				COMPRIS		COMPRIS ET DIT				COMPRIS		COMPRIS ET DIT	
1	Tchou tchou	1	<input type="radio"/>	2	<input type="radio"/>	31	Chaise	1	<input type="radio"/>	2	<input type="radio"/>	61	Attends	1	<input type="radio"/>	2	<input type="radio"/>
2	Miaou	3	<input type="radio"/>	4	<input type="radio"/>	32	Divan	3	<input type="radio"/>	4	<input type="radio"/>	62	Briser / casser	3	<input type="radio"/>	4	<input type="radio"/>
3	Aïe / ouch	1	<input type="radio"/>	2	<input type="radio"/>	33	Cuisine	1	<input type="radio"/>	2	<input type="radio"/>	63	Manger	1	<input type="radio"/>	2	<input type="radio"/>
4	Oh oh	3	<input type="radio"/>	4	<input type="radio"/>	34	Table	3	<input type="radio"/>	4	<input type="radio"/>	64	Finir	3	<input type="radio"/>	4	<input type="radio"/>
5	Oiseau	1	<input type="radio"/>	2	<input type="radio"/>	35	Télévision	1	<input type="radio"/>	2	<input type="radio"/>	65	Aider	1	<input type="radio"/>	2	<input type="radio"/>
6	Chien	3	<input type="radio"/>	4	<input type="radio"/>	36	Couverte / couverture	3	<input type="radio"/>	4	<input type="radio"/>	66	Sauter	3	<input type="radio"/>	4	<input type="radio"/>
7	Canard	1	<input type="radio"/>	2	<input type="radio"/>	37	Bouteille	1	<input type="radio"/>	2	<input type="radio"/>	67	Donner un Coup de pied	1	<input type="radio"/>	2	<input type="radio"/>
8	Petit minou	3	<input type="radio"/>	4	<input type="radio"/>	38	Tasse	3	<input type="radio"/>	4	<input type="radio"/>	68	Baiser / embrasser	3	<input type="radio"/>	4	<input type="radio"/>
9	Lion	1	<input type="radio"/>	2	<input type="radio"/>	39	Assiette / vaisselle	1	<input type="radio"/>	2	<input type="radio"/>	69	Pousser	1	<input type="radio"/>	2	<input type="radio"/>
10	Souris	3	<input type="radio"/>	4	<input type="radio"/>	40	Lampe	3	<input type="radio"/>	4	<input type="radio"/>	70	Chanter	3	<input type="radio"/>	4	<input type="radio"/>
11	Auto / voiture	1	<input type="radio"/>	2	<input type="radio"/>	41	Radio	1	<input type="radio"/>	2	<input type="radio"/>	71	Sourire	1	<input type="radio"/>	2	<input type="radio"/>
12	Poussette	3	<input type="radio"/>	4	<input type="radio"/>	42	Cuillère	3	<input type="radio"/>	4	<input type="radio"/>	72	Nuit	3	<input type="radio"/>	4	<input type="radio"/>
13	Balle	1	<input type="radio"/>	2	<input type="radio"/>	43	Fleur	1	<input type="radio"/>	2	<input type="radio"/>	73	Aujourd'hui	1	<input type="radio"/>	2	<input type="radio"/>
14	Livre	3	<input type="radio"/>	4	<input type="radio"/>	44	Chez nous	3	<input type="radio"/>	4	<input type="radio"/>	74	Parti	3	<input type="radio"/>	4	<input type="radio"/>
15	Poupée	1	<input type="radio"/>	2	<input type="radio"/>	45	Lune	1	<input type="radio"/>	2	<input type="radio"/>	75	Gros / grand	1	<input type="radio"/>	2	<input type="radio"/>
16	Pain	3	<input type="radio"/>	4	<input type="radio"/>	46	Extérieur / dehors	3	<input type="radio"/>	4	<input type="radio"/>	76	Brisé / cassé	3	<input type="radio"/>	4	<input type="radio"/>
17	Bonbon	1	<input type="radio"/>	2	<input type="radio"/>	47	Plante	1	<input type="radio"/>	2	<input type="radio"/>	77	Noir	1	<input type="radio"/>	2	<input type="radio"/>
18	Céréales	3	<input type="radio"/>	4	<input type="radio"/>	48	Pluie	3	<input type="radio"/>	4	<input type="radio"/>	78	Vite	3	<input type="radio"/>	4	<input type="radio"/>
19	Biscuit	1	<input type="radio"/>	2	<input type="radio"/>	49	Roche	1	<input type="radio"/>	2	<input type="radio"/>	79	Avoir mal / mal	1	<input type="radio"/>	2	<input type="radio"/>
20	Jus	3	<input type="radio"/>	4	<input type="radio"/>	50	Eau	3	<input type="radio"/>	4	<input type="radio"/>	80	Beau / belle	3	<input type="radio"/>	4	<input type="radio"/>
21	Toast / rôtie	1	<input type="radio"/>	2	<input type="radio"/>	51	Gardienne	1	<input type="radio"/>	2	<input type="radio"/>	81	Doux	1	<input type="radio"/>	2	<input type="radio"/>
22	Chapeau	3	<input type="radio"/>	4	<input type="radio"/>	52	Fille	3	<input type="radio"/>	4	<input type="radio"/>	82	Je	3	<input type="radio"/>	4	<input type="radio"/>
23	Pantalons	1	<input type="radio"/>	2	<input type="radio"/>	53	Grand- maman	1	<input type="radio"/>	2	<input type="radio"/>	83	Moi	1	<input type="radio"/>	2	<input type="radio"/>
24	Soulier	3	<input type="radio"/>	4	<input type="radio"/>	54	Maman	3	<input type="radio"/>	4	<input type="radio"/>	84	Comment	3	<input type="radio"/>	4	<input type="radio"/>
25	Bas	1	<input type="radio"/>	2	<input type="radio"/>	55	Bain	1	<input type="radio"/>	2	<input type="radio"/>	85	Qui	1	<input type="radio"/>	2	<input type="radio"/>
26	Yeux	3	<input type="radio"/>	4	<input type="radio"/>	56	Non / fait pas ça	3	<input type="radio"/>	4	<input type="radio"/>	86	Loin / là-bas	3	<input type="radio"/>	4	<input type="radio"/>
27	Tête	1	<input type="radio"/>	2	<input type="radio"/>	57	Allô	1	<input type="radio"/>	2	<input type="radio"/>	87	Dehors	1	<input type="radio"/>	2	<input type="radio"/>
28	Jambe	3	<input type="radio"/>	4	<input type="radio"/>	58	Dodo / bonne nuit	3	<input type="radio"/>	4	<input type="radio"/>	88	Un autre	3	<input type="radio"/>	4	<input type="radio"/>
29	Nez	1	<input type="radio"/>	2	<input type="radio"/>	59	Tape Tape	1	<input type="radio"/>	2	<input type="radio"/>	89	Un peu	1	<input type="radio"/>	2	<input type="radio"/>
30	Dent	3	<input type="radio"/>	4	<input type="radio"/>	60	S'il vous plaît	3	<input type="radio"/>	4	<input type="radio"/>						

17 à 30 mois (Niveau II, Formule A)
MacArthur version abrégée - Questionnaire sur le vocabulaire

En général, les enfants comprennent plus de mots qu'ils n'en utilisent. Nous sommes particulièrement intéressés par les mots DIT par votre enfant. Veuillez SVP cocher les mots que vous avez entendu votre enfant utiliser. Si votre enfant utilise une prononciation différente d'un mot, cochez-le également.

1	Bêêê bêêê	1 <input type="radio"/>	35	Peigne	1 <input type="radio"/>	68	Aimer	2 <input type="radio"/>
2	Miaou	2 <input type="radio"/>	36	Clé	2 <input type="radio"/>	69	Faire semblant	1 <input type="radio"/>
3	Aïe / ouch	1 <input type="radio"/>	37	Assiette	1 <input type="radio"/>	70	Déchirer	2 <input type="radio"/>
4	Oh oh	2 <input type="radio"/>	38	Vidanges	2 <input type="radio"/>	71	Brasser	1 <input type="radio"/>
5	Wouf wouf	1 <input type="radio"/>	39	Plat / plateau / cabaret	1 <input type="radio"/>	72	Goûter	2 <input type="radio"/>
6	Ours / ourson	2 <input type="radio"/>	40	Serviette	2 <input type="radio"/>	73	Gentil	1 <input type="radio"/>
7	Oiseau	1 <input type="radio"/>	41	Lit	1 <input type="radio"/>	74	Penser	2 <input type="radio"/>
8	Chat	2 <input type="radio"/>	42	Chambre	2 <input type="radio"/>	75	Souhaiter	1 <input type="radio"/>
9	Chien	1 <input type="radio"/>	43	Banc	1 <input type="radio"/>	76	Parti	2 <input type="radio"/>
10	Canard	2 <input type="radio"/>	44	Four	2 <input type="radio"/>	77	Froid	1 <input type="radio"/>
11	Cheval	1 <input type="radio"/>	45	Escalier	1 <input type="radio"/>	78	Vite	2 <input type="radio"/>
12	Avion	2 <input type="radio"/>	46	Drapeau	2 <input type="radio"/>	79	Content	1 <input type="radio"/>
13	Bateau	1 <input type="radio"/>	47	Pluie	1 <input type="radio"/>	80	Chaud	2 <input type="radio"/>
14	Auto / voiture	2 <input type="radio"/>	48	Étoile	2 <input type="radio"/>	81	Dernier	1 <input type="radio"/>
15	Balle	1 <input type="radio"/>	49	Balançoire	1 <input type="radio"/>	82	Tout petit	2 <input type="radio"/>
16	Livre	2 <input type="radio"/>	50	École	2 <input type="radio"/>	83	Mouillé	1 <input type="radio"/>
17	Jeu	1 <input type="radio"/>	51	Ciel	1 <input type="radio"/>	84	Après	2 <input type="radio"/>
18	Compote aux pommes	2 <input type="radio"/>	52	Fête	2 <input type="radio"/>	85	Jour	1 <input type="radio"/>
19	Bonbon	1 <input type="radio"/>	53	Ami	1 <input type="radio"/>	86	Ce soir	2 <input type="radio"/>
20	Coke	2 <input type="radio"/>	54	Maman	2 <input type="radio"/>	87	Toi	1 <input type="radio"/>
21	Biscuit soda	1 <input type="radio"/>	55	Personne	1 <input type="radio"/>	88	À eux	2 <input type="radio"/>
22	Jus	2 <input type="radio"/>	56	Bye / au revoir	2 <input type="radio"/>	89	Ce / celui-là	1 <input type="radio"/>
23	Viande	1 <input type="radio"/>	57	Allô	1 <input type="radio"/>	90	Nous	2 <input type="radio"/>
24	Lait	2 <input type="radio"/>	58	Non	2 <input type="radio"/>	91	Où	1 <input type="radio"/>
25	Pois	1 <input type="radio"/>	59	Aller au magasin	1 <input type="radio"/>	92	À côté de	2 <input type="radio"/>
26	Chapeau	2 <input type="radio"/>	60	Merci	2 <input type="radio"/>	93	En bas	1 <input type="radio"/>
27	Collier	1 <input type="radio"/>	61	Transporter / apporter	1 <input type="radio"/>	94	Sous / en-dessous	2 <input type="radio"/>
28	Soulier	2 <input type="radio"/>	62	Courir après	2 <input type="radio"/>	95	Tout / toute	1 <input type="radio"/>
29	Bas	1 <input type="radio"/>	63	Jeter	1 <input type="radio"/>	96	Beaucoup	2 <input type="radio"/>
30	Menton	2 <input type="radio"/>	64	Finir	2 <input type="radio"/>	97	Peux / peut	1 <input type="radio"/>
31	Oreille	1 <input type="radio"/>	65	Cacher	1 <input type="radio"/>	98	Besoin	2 <input type="radio"/>
32	Main	2 <input type="radio"/>	66	Serrer dans ses bras	2 <input type="radio"/>	99	Laisse moi	1 <input type="radio"/>
33	Jambe	1 <input type="radio"/>	67	Écouter	1 <input type="radio"/>	100	Si	2 <input type="radio"/>
34	Balai	2 <input type="radio"/>					Passez à la question 101.	

101. Votre enfant a-t-il commencé à combiner des mots? Par exemple, dit-il des choses comme « donne cuillère » ou « encore jus »?

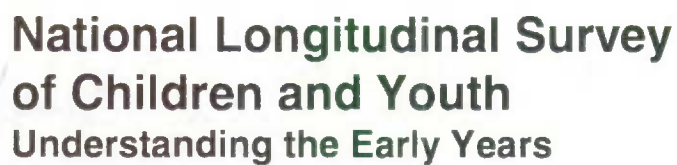
3 ☐ Pas encore

4 ☐ Parfois

5 ☐ Souvent

APPENDIX J

Interviewer's Observation Questionnaire - Booklet 10



Interviewer's Observation Questionnaire

Interviewer Assignment #										
Person ID										
Child's Last Name										
Child's First Name										
Child's Date of Birth					Age in Months					
YYYY					--		MM		DD	

Confidential when completed.

Version française au verso.

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

BOOKLET FINAL STATUS CODE

- 000 ☐ Complete
- 001 ☐ Partial
- 034 ☐ No Contact
- 030 ☐ Refusal by Parent
- 031 ☐ Refusal by the Child
- 018 ☐ Out of Scope
- 099 ☐ Other NR (Specify)

Comments:

8-5300-337: 1999-08-04 STC/HLD-040-75020



Statistics Canada / Statistique Canada

Canada

Interviewer's Observation Questionnaire

Outside the respondent's home, think about the child's behavior and attitude overall during the activities. Put a check mark to score each of the following.

1. Child's response during activities.

- | | | | |
|----|--|---|--|
| a. | Task persistence: | <ul style="list-style-type: none"> - persists with task..... - attempts tasks briefly..... - attempts task after much encouragement..... - refuses..... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |
| b. | Attention span: | <ul style="list-style-type: none"> - focuses attention voluntarily..... - attends with your direction..... - some distraction with noise or movement of others..... - easily distracted..... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |
| c. | Body Movement: | <ul style="list-style-type: none"> - sits quietly..... - some squirming..... - much movement..... - out of seat; body constantly in motion..... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |
| d. | Attention to directions: | <ul style="list-style-type: none"> - listens carefully to entire direction..... - attends only to brief directions..... - plunges ahead after hearing only portion..... - plunges ahead immediately..... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |
| e. | Comprehension of directions: | <ul style="list-style-type: none"> - rapid comprehension of most directions, - given age expectations..... - understands after several repetitions..... - partial comprehension of directions..... - does not appear to comprehend most directions.... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |
| f. | Verbalization : | <ul style="list-style-type: none"> - many spontaneous comments..... - occasional comments..... - responds only when spoken to..... - extremely reluctant to speak or inappropriate speech..... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |
| g. | Ease of relationship (rapport): | <ul style="list-style-type: none"> - immediately friendly..... - friendly but reserved..... - shy..... - very reluctant and/or fearful..... | 4 <input type="radio"/>
3 <input type="radio"/>
2 <input type="radio"/>
1 <input type="radio"/> |

- h. Confidence:**
- very sure of self..... 4 ☐
 - confident with things known; attempts new things with encouragement..... 3 ☐
 - reluctant to try new or difficult things..... 2 ☐
 - very uncertain; needs much encouragement..... 1 ☐

- i. Motivation/Interest:**
- very motivated/interested..... 4 ☐
 - begins motivated but slowly loses interest..... 3 ☐
 - somewhat motivated but loses interest quickly..... 2 ☐
 - not motivated or interested..... 1 ☐

2. Special Situations.

	NOT AT ALL	SOMEWHAT	VERY MUCH
a. Child responded nonverbally.	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
b. Child has limited English/French (depending on language used during activities) proficiency.	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
c. Child has difficulty hearing the interviewer.	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
d. Child has difficulty seeing the testing materials.	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
e. Child's speech was difficult to understand.	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
f. Child was sick or injured.	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>

3. During the activities was the following an interference:

	NOT AT ALL	SOMEWHAT	VERY MUCH
a. Noise level?	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
b. Interruptions?	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
c. Distractions?	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
d. Temperature?	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>
e. Presence of others?	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>

4. Did you or someone in the household act as an interpreter:

- a) during the interview with the parent? 1 ☐ YES 0 ☐ NO
- b) during the activities with the child? 1 ☐ YES 0 ☐ NO

5. Parent and Child Interaction During Visit

Place a check in the circle that best describes the behavior of the parent during the interview.

	YES	NO/NOT OBSERVED
a. Parent converses with child at least twice during visit.	1 <input type="radio"/>	0 <input type="radio"/>
b. Parent answers child's questions or requests verbally.	1 <input type="radio"/>	0 <input type="radio"/>
c. Parent usually responds verbally to child's speech.	1 <input type="radio"/>	0 <input type="radio"/>
d. Parent spontaneously praises child's qualities twice during visit.	1 <input type="radio"/>	0 <input type="radio"/>
e. Parent caresses, kisses, or cuddles child at least once during visit.	1 <input type="radio"/>	0 <input type="radio"/>
f. Parent helps child demonstrate some achievement during visit.	1 <input type="radio"/>	0 <input type="radio"/>
g. Parent uses complex sentence structure and vocabulary.	1 <input type="radio"/>	0 <input type="radio"/>

Examples for assessing the correct response:

a. Parent converses with child at least twice during visit.

(Scolding and suspicious comments are not counted.) This item involves parental conversation, not just vocalization which can be any sounds or words exchanged with the child. To obtain a "yes" response, the parent must make an effort to converse with the child and ask questions, to talk about things, or to engage in verbal interchange other than scolding or degrading comments.

b. Parent answers child's questions or requests verbally.

In order to mark as "Yes" for this item, the parent must make an effort to answer the question for the child. If the parent is unable to answer it at the moment she may tell the child she doesn't know but that they will look up the answer later. Responses such as "I am busy, go away" or "Don't bother me now" receive a "No" response.

c. Parent usually responds verbally to child's speech.

The key here is that the mother recognizes and acknowledges the child's vocalizations and does not ignore them. To receive a "Yes" response there could be a series of words or sounds such as, "Uh huh," "Um" or "Sure." If the child does not vocalize in any way during the interview, thereby giving no opportunity for response, the item would receive a "No" response.

d. Parent spontaneously praises child's qualities twice during visit.

The key word here is "spontaneous," but since most parents enjoy talking about and are proud of their children, this is not too hard to observe. Frequently a parent will tell you how well her/his child throws a ball or runs and will brag on how well he/she dresses himself or can get his own drink.

e. Parent caresses, kisses or cuddles child at least once during visit.

This need not be a wild burst of showy affection. Simple signs of concern such as a parent gently tucking the child's shirt in, holding him on her lap, holding a hand, or a gentle pat on the shoulder would all receive a "Yes" response.

f. Parent helps child demonstrate some achievement during visit.

Does the parent consciously get the child to sing a song, count, show how a toy works or anything that allows the child to do something to impress the visitor?

g. Parent uses complex sentence structure and vocabulary.

If the parent makes an attempt at carrying on a regular conversation instead of just finding a way to answer all of the questions with "yes" or "no" or "I don't know" and not giving any explanation, this should receive a "Yes" response.

COMMENTS

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



Enquête longitudinale nationale sur les enfants et les jeunes

Comprendre la petite enfance

Livret 10



Questionnaire d'observation par l'intervieweur

Numéro de tâche	
<input type="text"/>	
Numéro de la personne	
<input type="text"/>	<input type="text"/>
Nom de famille de l'enfant	
<input type="text"/>	
Prénom de l'enfant	
<input type="text"/>	
Date de naissance de l'enfant	Âge en mois
<input type="text"/>	<input type="text"/>
AAAA -- MM -- JJ	

Confidentiel une fois rempli.

English on reverse.

Renseignements recueillis en vertu de la Loi sur
la statistique, Lois revisées du Canada, 1985,
chapitre S19.

CODE D'ÉTAT FINAL DU LIVRET

- ☐ 000 Complet
- ☐ 001 Partiel
- ☐ 034 Pas de contact
- ☐ 030 Refus du parent
- ☐ 031 Refus de l'enfant
- ☐ 018 Hors cible
- ☐ 099 Autre NR (Précisez)

Commentaires:

8-5300-337: 04-08-1999 STC/HLD-040-75020



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Questionnaire d'observation par l'intervieweur

À l'extérieur de la résidence du (de la) répondant(e), réfléchissez de façon globale au comportement et à l'attitude de l'enfant pendant les activités. Cochez le cercle qui correspond le plus à chacun des aspects suivants.

1. Réactions de l'enfant pendant les activités.

- a. Persévérance :**
- accomplit la tâche avec persévérance..... 4 ☐
 - essaie brièvement d'exécuter la tâche..... 3 ☐
 - a besoin de nombreux encouragements pour entreprendre la tâche..... 2 ☐
 - refuse..... 1 ☐
- b. Capacité de concentration :**
- se concentre volontairement..... 4 ☐
 - suit les instructions..... 3 ☐
 - un peu distrait(e) par le bruit ou le mouvement d'autres personnes..... 2 ☐
 - facilement distrait(e)..... 1 ☐
- c. Mouvement du corps :**
- reste tranquillement assis(e)..... 4 ☐
 - remue un peu 3 ☐
 - bouge beaucoup..... 2 ☐
 - quitte son siège; corps constamment en mouvement..... 1 ☐
- d. Attention portée aux instructions :**
- écoute attentivement l'ensemble des instructions..... 4 ☐
 - porte seulement attention aux instructions courtes..... 3 ☐
 - s'attaque à la tâche après avoir écouté une partie des instructions seulement 2 ☐
 - s'attaque immédiatement à la tâche 1 ☐
- e. Compréhension des instructions :**
- compréhension rapide de la plupart des instructions, compte tenu de l'âge de l'enfant..... 4 ☐
 - comprend après plusieurs répétitions..... 3 ☐
 - comprend partiellement les instructions..... 2 ☐
 - ne semble pas comprendre la plupart des instructions..... 1 ☐
- f. Expression orale :**
- nombreux commentaires spontanés..... 4 ☐
 - commentaires occasionnels..... 3 ☐
 - répond seulement quand on lui parle 2 ☐
 - réticence extrême à parler ou expression inadéquate.. 1 ☐
- g. Aisance dans les rapports avec autrui :**
- immédiatement aimable..... 4 ☐
 - aimable, mais réservé..... 3 ☐
 - timide..... 2 ☐
 - très peu enthousiaste et/ou très craintif(ve)..... 1 ☐

- h. Confiance:**
- très sûr(e) de soi..... 4 ☐
 - a confiance lorsqu'il s'agit de choses connues; entreprend des choses nouvelles si on l'y encourage.. 3 ☐
 - hésite à entreprendre des choses nouvelles ou difficiles..... 2 ☐
 - très peu sûr(e) de soi; a besoin de beaucoup d'encouragements..... 1 ☐
- i. Motivation/Intérêt:**
- très intéressé(e)/motivé(e)..... 4 ☐
 - motivé(e) au début, mais disparition progressive de l'intérêt..... 3 ☐
 - une certaine motivation, mais disparition rapide de l'intérêt..... 2 ☐
 - pas de motivation ni d'intérêt..... 1 ☐

2. Situations particulières.

	PAS DU TOUT	UN PEU	BEAUCOUP
a. L'enfant répond de façon non verbale.	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
b. L'enfant a une connaissance limitée du français (ou de l'anglais, selon langue utilisée pour les activités).	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
c. L'enfant a de la difficulté à entendre l'intervieweur.	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
d. L'enfant a de la difficulté à voir le matériel utilisé pour les activités.	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
e. Il est difficile de comprendre les paroles de l'enfant.	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
f. L'enfant était malade ou blessé(e).	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>

3. L'évaluation a-t-elle été dérangée par les éléments suivants?

	PAS DU TOUT	UN PEU	BEAUCOUP
a. Bruit	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
b. Interruptions	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
c. Distractions	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
d. Température	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>
e. Présence d'autres personnes	⁰ <input type="radio"/>	¹ <input type="radio"/>	² <input type="radio"/>

4. Est-ce que vous-même ou un membre du ménage avez servi d'interprète :

- a) pendant l'interview avec le parent? ¹☐ OUI ⁰☐ NON
- b) pendant les activités avec l'enfant? ¹☐ OUI ⁰☐ NON

5. Interaction entre le parent et l'enfant pendant la visite

Cochez le cercle qui décrit le mieux le comportement du parent pendant l'interview.

	OUI	NON/PAS OBSERVÉ
a. Le parent a conversé au moins deux fois avec l'enfant pendant la visite.	1 <input type="radio"/>	0 <input type="radio"/>
b. Le parent a répondu verbalement aux questions ou aux demandes de l'enfant.	1 <input type="radio"/>	0 <input type="radio"/>
c. Habituellement, le parent a réagi verbalement aux paroles de l'enfant.	1 <input type="radio"/>	0 <input type="radio"/>
d. Par deux fois, le parent a spontanément fait l'éloge des qualités de l'enfant pendant la visite.	1 <input type="radio"/>	0 <input type="radio"/>
e. Le parent a caressé, embrassé ou câliné l'enfant au moins une fois pendant la visite.	1 <input type="radio"/>	0 <input type="radio"/>
f. Pendant la visite, le parent a aidé l'enfant à montrer un peu ce qu'il ou elle sait faire.	1 <input type="radio"/>	0 <input type="radio"/>
g. Le parent a utilisé une structure de phrase et un vocabulaire complexes.	1 <input type="radio"/>	0 <input type="radio"/>

Exemples pour aider à évaluer la réponse qui convient :

a. Le parent a conversé au moins deux fois avec l'enfant pendant la visite.

(Les réprimandes et les remarques défavorables n'entrent pas en ligne de compte.) Cette rubrique porte sur la conversation du parent, et pas seulement sur l'expression orale qui peut se composer de sons ou de mots échangés avec l'enfant. Pour que la réponse soit « Oui », le parent doit avoir fait un effort pour converser avec l'enfant et poser des questions, pour parler de certaines choses ou pour entreprendre un échange verbal ne visant pas à réprimander ou à prononcer des remarques dégradantes.

b. Le parent a répondu verbalement aux questions ou aux demandes de l'enfant.

Pour que la réponse soit « Oui », le parent doit avoir fait un effort pour répondre à la question posée par l'enfant. Si le parent n'est pas en mesure d'y répondre immédiatement, il peut dire à l'enfant qu'il ne sait pas, mais que tous deux chercheront la réponse plus tard. Des réponses telles que « Je suis occupé(e), va-t-en » ou « laisse-moi tranquille » entraînent la réponse « Non ».

c. Habituellement, le parent a réagi verbalement aux paroles de l'enfant.

L'objet central de cette rubrique est que la mère fait écho à l'expression orale de l'enfant et y prête attention. Pour que la réponse soit « Oui », le parent peut avoir prononcé une série de mots ou de sons tels que « Uh huh », « Um » ou « Bien sûr ». Si l'enfant n'a émis aucun son pendant l'interview et n'a donc pas donné au parent l'occasion de répondre, la réponse à la question est « Non ».

d. Par deux fois, le parent a spontanément fait l'éloge des qualités de l'enfant pendant la visite.

Le mot clé est « spontanément ». Comme toutefois la plupart des parents aiment parler de leurs enfants et en sont fiers, cet aspect n'est pas difficile à observer. Il arrive souvent qu'un parent dise combien son enfant lance bien une balle et vante la manière dont celui-ci ou celle-ci sait s'habiller ou se servir à boire.

e. Le parent a caressé, embrassé ou câliné l'enfant au moins une fois pendant la visite.

Il ne doit pas nécessairement s'agir d'un élan d'affection passionné et ostentatoire. De simples marques d'affection du parent consistant par exemple à rentrer doucement la chemise de l'enfant dans son pantalon, à le prendre sur ses genoux, à lui tenir la main ou à lui donner une petite tape sur l'épaule justifient la réponse « Oui ».

f. Pendant la visite, le parent a aidé l'enfant à montrer un peu ce qu'il ou elle sait faire.

Le parent a-t-il consciemment incité l'enfant à chanter une chanson, à compter, à montrer comment un jouet fonctionne ou à faire quelque chose en vue d'impressionner le visiteur?

g. Le parent a utilisé une structure de phrase et un vocabulaire complexes.

Si le parent s'est efforcé de tenir une conversation normale avec l'enfant au lieu de répondre uniquement « oui », « non » ou « je ne sais pas » sans donner d'explication, on répondra « Oui » à la question.

APPENDIX K

How to use the polaroid

APPENDIX K How to use the Polaroid?

The camera you will be using is the Polaroid OneStep Close-up. The picture automatically ejects from the camera. With this camera, the focus is not automatic so you need to be careful especially when you use the close-up lens.

1 - Raise the electronic flash

Grip the sides of the flash unit. Swing the flash unit up to snap it in place. The flash will automatically charge every 4 seconds. When the flash is ready, the green flash-ready light will come on. To save energy, the flash will shut off every 60 seconds. To turn it on, simply press the shutter button **part way**.

2 - Load the film

Push the latch forward to open the film door. Hold the film pack by its edges only and slide it all the way into the camera. Close the film door. As soon as it is closed, the camera will eject the film cover.

To remove an empty film pack, push the latch forward to open the film door. Pull the colored tab on the film pack and remove the film from the camera.

3 - Take the picture

Grip the camera with your left hand. Place your right index on the shutter button and your thumb on the thumb rest. Position the subject within your camera range: 4-10 ft. (1.2-3m). Be sure the green flash-ready light is on. If not, press the shutter button **part way** to charge the flash (For best results, always use the flash). Frame your subject in the viewfinder and press the shutter button. The camera will eject the picture and the flash will automatically recharge. Hold the developing picture by its white border. While developing, keep the picture out of direct sunlight.

4 - The close-up lens

Use the close-up lens when your subject is 2 - 4 ft. (0.6-1.2m) away. Slide the lever to the 2-4ft. (0.6-1.2m) position (the position is illustrated by the flower). When your subject's head fills the oval frame, you are at the correct distance for a close-up. When you have finished using the close-up lens, return the lever to the 4ft. to ∞ (1.2m to ∞) setting.

5 - The lighten/darken control

Use this control only when you want to reshoot a picture to make it lighter or darker. To take a lighter picture, slide the control toward the white arrow until you feel it stop. To take a darker picture, slide the control toward the black arrow until you feel it stop. Return the control to the center position when you have finished finish reshooting.

APPENDIX L

Definitions

Appendix L

Definitions

Cycle 1

The first time the survey was conducted (winter and spring of 1994-95).

Cycle 2

The second time the survey was conducted (winter and spring of 1996-97).

Cycle 3

The third time the survey was conducted. This cycle of the survey was completed during three collection periods, began in the fall of 1998 and ended in the early summer of 1999.

Selected Child

Refers to the child in a household who is selected to be part of the survey.

Respondent

For the household portion of this survey, a respondent can be any one of the following: the child, the child's parent or guardian or, as a last resort if no one else is available, a knowledgeable household member who is 15 years of age or older.

PMK

Person Most Knowledgeable about the selected child

Who Am I? Questionnaire

Booklet 1

Involves tasks such as writing numbers, letters, words, their name, and copying figures. Takes about 15-20 minutes to complete and is administered to 3 to 5 year olds.

Number Knowledge Questionnaire

Booklet 2

Measures children's understanding of quantities and the system of whole numbers. Takes about 10-15 minutes to complete and is administered to 3 to 5 year olds.

WPPSI-R Block Design Questionnaire

Booklet 3

Examines intelligence and developmental level through tasks which involve reproducing simple designs using coloured blocks. It takes about 15 minutes to complete and is administered to 3 to 5 years-olds.

ESI-R Questionnaire

Booklet 4

Measures physical, motor, and cognitive development through tasks such as hopping, copying figures, drawing, etc. There are two tests, one for 3 to 4.5 year-olds and one for 4.5 to 6 year-olds. It takes about 15 minutes to complete.

Raven's CPM Questionnaire

Booklet 5

Measures capacity for analogical reasoning by having the child choose the missing piece from different coloured abstract designs. It takes about 15 minutes to complete and is administered to 5 year olds.

Parent Questionnaire

Booklet 7

Administered to the Person Most Knowledgeable about the child. The first section is the contact telephone call, the second section is administered at the beginning of the home visit interview, and the third section, the debriefing questions, takes place at the very end of the home visit interview. This questionnaire gathers a range of information about the child and the parents. It takes about 30 minutes to complete.

Ages and Stages Questionnaire

Booklet 8

Measures communication, gross motor, fine motor, problem solving, and personal-social domains of children 1 to 5 years old. It is mailed to the household before the interview and is completed by the PMK before the home interview.

MacArthur Short Form Vocabulary Checklist

Booklet 9

The purpose is to assess the course of language development. There are 2 versions, one for infants (8 to 16 months) and one for toddlers (16 to 30 months). It is completed at the home visit interview by the Person Most Knowledgeable about the child.

Interviewer's Observation Questionnaire

Booklet 10

For you to record your observations and comments about the interview, the child, and the parent. It is to be completed after each interview.

* **Note** that there is no Booklet 6

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APPENDIX F

Raven's CPM Questionnaire - Booklet 5



National Longitudinal Survey of Children and Youth Understanding the Early Years - Field Test



Debriefing Questionnaire

Dear Interviewers/Senior Interviewers,

The Understanding the Early Years field test has come to an end. We would like to thank you for all your hard work and hope that you found the field test interesting. Without you, this field test would not be the success that it has been.

As interviewers, you have a wealth of first-hand information about the attitudes of the respondents as well as the reactions and behaviours of young children. Your experiences and observations are extremely valuable. Your answers to the questionnaire will be used to improve future cycles of this survey. Your information will also enable us to better train interviewers, ultimately making your job easier.

The enclosed questionnaire asks about your experiences with this survey and any problems you may have encountered while conducting interviews. There are no "right" or "wrong" answers, we are simply looking for your comments. **Your responses will not be used to evaluate your work.**

We ask that you complete this questionnaire and to bring it with you to the debriefing session.

Thank you for taking the time to complete this questionnaire. Your answers are very important to us and we look forward to receiving your feedback.

Sincerely,

Jennifer Hubbard
Survey Operations Division
(613) 951-6819



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Canada

Statistique
Canada

Canada

A. GENERAL INFORMATION

A.1 What is your Assignment Number?

A.2 Are you...

a senior interviewer? ☐

an interviewer? ☐

A.3 Which Regional Office are you from?

Pacific ☐

Québec ☐

A.4 How many cases were you assigned?

cases

A.5 When did you begin data collection?

September 10th, 1999 ☐

September 16th, 1999 ☐

Other ☐ → What date? _____

A.6 Were you able to complete all your cases within the collection period (September 10 to October 6, 1999)?

Yes ☐

No ☐ → Why not?

A.7 Do you have previous experience as a National Longitudinal Survey of Children and Youth (NLSCY) interviewer or senior interviewer?

Yes, as a senior interviewer ☐

Yes, as an interviewer ☐

Nor ☐ → Go to question A.9

A.8 Which cycles did you work on? (Mark all that apply.)

Cycle 1 (test) ☐

Cycle 1 (main) ☐

Cycle 2 (test) ☐

Cycle 2 (main) ☐

Cycle 3 (test) ☐

Cycle 3 (main) ☐

A.9 What is the most number of cases you fully completed in one day?

cases

A.10 Did you ever have to make more than one personal visit for a household?

No ☐ → Go to question A.12

Yes ☐ → In how many cases did you have to make more than one personal visit?

cases

Why did you have to do more than one visit?

A.11 What is the largest number of personal visits you had to do for one case?

visits

A.12 How many cases were you not able to complete because the child did not speak English or French?

3 year olds children

cases

4 year olds children

cases

5 year olds children

cases

A.13 Did you find the Control Form easy to work with?

Yes ☐

No ☐ → Why not?

A.14 What would you suggest in order to improve the Control Form?

A.15 Did you receive the following before, during or after the training?

Interviewer's Manual	Before	<input type="checkbox"/>
	During	<input type="checkbox"/>
	After	<input type="checkbox"/>
Supplies Kit	Before	<input type="checkbox"/>
	During	<input type="checkbox"/>
	After	<input type="checkbox"/>

If you received the Supplies Kit before the training, do you think it was useful? Choose one statement among the following:

- Yes, it was a good introduction before the training and I looked at the material for most of the direct measures. ☐
- I looked at the material and I think it did not help me very much. ☐
- I did not look at the material before the training. ☐

A.16 Did you read the Interviewer's Manual prior to the training session?

Yes ☐

No ☐ → Go to question A.18

A.17 How long did it take you to read the Interviewer's Manual?

hours minutes

A.18 Was the Interviewer's Manual easy to use?

Yes ☐

No ☐ → What would make it easier to use?

A.19 Was the Interviewer's Manual complete?

Yes ☐

No ☐ → What information would you include?

B. TRAINING

B.1 List the objectives of the field test?

B.2 How clear were the objectives of the field test?

- Very clear ☐
- Clear ☐
- Unclear ☐
- Very unclear ☐

B.3 Did you receive enough information to explain the survey to respondents?

Yes ☐

No ☐ → What information would you like to have to explain the survey and answer questions?

B.4 Do you feel that 3 days of training was sufficient to cover all the material that was covered?

Too long ☐ → What length would you suggest?

days

Just right ☐

Not long enough ☐ → What length would you suggest?

days

B.5 Once you completed the required training (read Interviewer's Manual, attended 3 days training session and practiced administering direct measures at home), did you feel ready to begin interviewing?

Yes ☐

No ☐ → What would you suggest we add to the training to ensure that interviewers are properly prepared to begin interviewing for this survey?

C. WHO AM I? QUESTIONNAIRE (BOOKLET 1)

- C.1 Do you think the time spent in training on the Who Am I? Questionnaire - Booklet 1 was sufficient for you to accurately administer this direct measure to young children?

Yes ☐

No ☐ → How long should be spent in training to adequately cover the administration of the Who Am I? Questionnaire - Booklet 1?

hours minutes

- C.2 Before beginning interviewing how confident did you feel about administering the Who Am I? Questionnaire - Booklet 1?

Very confident ☐

Confident ☐

Not very confident ☐

Not confident at all ☐

- C.3 How many times did you administer the Who Am I? Questionnaire - Booklet 1?

times

If "0", go to question C.19

C.4 Did you practice the administration of the Who Am I? Questionnaire - Booklet 1 at home before administering it to a child?

No ☐ → Go to question C.6

Yes ☐

C.5 How many times did you practice at home?

with a young child times

with an adult times

other times → specify _____

C.6 What was your level of comfort in administering the Who Am I? Questionnaire - Booklet 1 to young children?

Very comfortable ☐

Comfortable ☐

Uncomfortable ☐

Very uncomfortable ☐

C.7 Did your comfort level increase the more often you administered the Who Am I? Questionnaire - Booklet 1?

Yes ☐

No ☐

C.8 To what degree are you certain that you administered the Who Am I? Questionnaire - Booklet 1, following the **exact** procedures outlined in your Interviewer's Manual and the training session?

- Very certain ☐
- Certain ☐
- Uncertain ☐
- Very uncertain ☐

C.9 Generally speaking, how did the young children you observed feel about the Who Am I? Questionnaire - Booklet 1?

- Loved it ☐
- Liked it ☐
- Had no reaction ☐
- Did not like it ☐
- Hated it ☐

C.10 Generally speaking, how did parents feel about the administration of the Who Am I? Questionnaire - Booklet 1?

- Very interested ☐
- Interested ☐
- Uninterested ☐
- Not interested at all ☐

If the parents had any problems with the Who Am I? Questionnaire - Booklet 1, what were they?

C.11 Do you think that the administration time of the Who Am I?
Questionnaire - Booklet 1 was a too long, just right or too short?

Too long ☐

Just right ☐

Too short ☐

C.12 In most cases, was the child seated at a right angle to you
during the administration?

Yes ☐

No ☐ → How was the child seated?

C.13 In most cases, did you have to give the child additional
instructions other than what was included in the Interviewer's
Manual?

No ☐

Yes ☐ → What type of instructions?

C.14 Did any children ask to use an eraser?

No ☐

Yes ☐ → How many children? ☐☐ children

C.15 Did you ever use the words "circle", "cross", "square", "triangle" or "diamond" during the copying section of the Who Am I? Questionnaire - Booklet 1?

No ☐

Yes ☐

C.16 Did any child copy the words at the top of the pages?

No ☐

Yes ☐ → How many did this?

☐☐ children

C.17 Which tasks did children seem to like the most? Number the following from 1 to 4, starting with the one you think the children liked the most.

Copying shapes

☐

Writing numbers

☐

Writing letters, words and sentences

☐

Drawing a picture of themselves

☐

C.18 Did the Who Am I? Questionnaire - Booklet 1 seem to be appropriate for three year olds? Was it easy to explain to them, if you compare with older children?

Yes ☐

No ☐ → Explain.

Not applicable (no 3 year old case assigned for this booklet) ☐

C.19 List any suggestions you may have to improve the administration or the format of the Who Am I? Questionnaire - Booklet 1.

D. NUMBER KNOWLEDGE QUESTIONNAIRE (BOOKLET 2)

- D.1 Do you think the time spent in training on the Number Knowledge Questionnaire - Booklet 2 was sufficient for you to accurately administer this direct measure to young children?

Yes ☐

No ☐ → How long should be spent in training to adequately cover the administration of the Number Knowledge Questionnaire - Booklet 2?

hours minutes

- D.2 Before beginning interviewing how confident did you feel about administering the Number Knowledge Questionnaire - Booklet 2?

Very confident ☐

Confident ☐

Not very confident ☐

Not confident at all ☐

- D.3 How many times did you administer the Number Knowledge Questionnaire - Booklet 2?

times

If "0", go to question D.18

D.4 Did you practice the administration of the Number Knowledge Questionnaire - Booklet 2 at home before administering it to a child?

No ☐ → Go to question D.6

Yes ☐

D.5 How many times did you practice at home?

with a young child times

with an adult times

other times → specify _____

D.6 What was your level of comfort in administering the Number Knowledge Questionnaire - Booklet 2 to young children?

Very comfortable ☐

Comfortable ☐

Uncomfortable ☐

Very uncomfortable ☐

D.7 Did your comfort level increase the more often you administered the Number Knowledge Questionnaire - Booklet 2?

Yes ☐

No ☐

D.8 To what degree are you certain that you administered the Number Knowledge Questionnaire - Booklet 2, following the **exact** procedures outlined in the questionnaire, your Interviewer's Manual and the training session?

- Very certain ☐
- Certain ☐
- Uncertain ☐
- Very uncertain ☐

D.9 Generally speaking, how did the young children you observed feel about the Number Knowledge Questionnaire - Booklet 2?

- Loved it ☐
- Liked it ☐
- Had no reaction ☐
- Did not like it ☐
- Hated it ☐

D.10 Generally speaking, how did parents feel about the administration of the Number Knowledge Questionnaire - Booklet 2?

- Very interested ☐
- Interested ☐
- Uninterested ☐
- Not interested at all ☐

If the parents had any problems with the Number Knowledge Questionnaire - Booklet 2, what were they?

D.11 Do you think that the administration time of the Number Knowledge Questionnaire - Booklet 2 was a too long, just right or too short?

Too long ☐

Just right ☐

Too short ☐

D.12 In most cases, was the child seated in front of you at a table during the administration?

Yes ☐

No ☐ → How was the child seated?

D.13 In most cases, did you have to give the child additional instructions other than what was included in the questionnaire and in your Interviewer's Manual?

No ☐

Yes ☐ → What type of instructions?

D.14 In most cases, did you follow the exact script on the questionnaire for each item?

Yes ☐

No ☐ → How did you change the script?

D.15 Did you have any problems calculating the scores at the end of a level?

No ☐

Yes ☐ → What seemed to be unclear or difficult?

D.16 Did you have any problems manipulating the material easily during the administration of this questionnaire (chips, triangles, circles and laminated cards)?

No ☐

Yes ☐ → Why?

D.17 In most cases, did you put away the material you were not using?

Yes ☐

No ☐ → Why?

D.18 List any suggestions you may have to improve the administration or the format of the Number Knowledge Questionnaire - Booklet 2.

E. WPPSI-R BLOCK DESIGN QUESTIONNAIRE (BOOKLET 3)

- E.1 Do you think the time spent in training on the WPPSI-R Block Design Questionnaire - Booklet 3 was sufficient for you to accurately administer this direct measure to young children?

Yes ☐

No ☐ → How long should be spent in training to adequately cover the administration of the WPPSI-R Block Design Questionnaire - Booklet 3?

hours minutes

- E.2 Before beginning interviewing how confident did you feel about administering the WPPSI-R Block Design Questionnaire - Booklet 3?

Very confident ☐

Confident ☐

Not very confident ☐

Not confident at all ☐

- E.3 How many times did you administer the WPPSI-R Block Design Questionnaire - Booklet 3?

times

If "0", go to question E.17

E.4 Did you practice the administration of the WPPSI-R Block Design Questionnaire - Booklet 3 at home before administering it to a child?

No ☐ → Go to question E.6

Yes ☐

E.5 How many times did you practice at home?

with a young child times

with an adult times

other times → specify _____

E.6 What was your level of comfort in administering the WPPSI-R Block Design Questionnaire - Booklet 3 to young children?

Very comfortable ☐

Comfortable ☐

Uncomfortable ☐

Very uncomfortable ☐

E.7 Did your comfort level increase the more often you administered the WPPSI-R Block Design Questionnaire - Booklet 3?

Yes ☐

No ☐

E.8 To what degree are you certain that you administered the WPPSI-R Block Design Questionnaire - Booklet 3, following the **exact** procedures outlined in the questionnaire, your Interviewer's Manual and the training session?

- Very certain ☐
- Certain ☐
- Uncertain ☐
- Very uncertain ☐

E.9 Generally speaking, how did the young children you observed feel about the WPPSI-R Block Design Questionnaire - Booklet 3?

- Loved it ☐
- Liked it ☐
- Had no reaction ☐
- Did not like it ☐
- Hated it ☐

E.10 Generally speaking, how did parents feel about the administration of the WPPSI-R Block Design Questionnaire - Booklet 3?

- Very interested ☐
- Interested ☐
- Uninterested ☐
- Not interested at all ☐

If the parents had any problems with the WPPSI-R Block Design Questionnaire - Booklet 3, what were they?

E.11 Do you think that the administration time of the WPPSI-R Block Design Questionnaire - Booklet 3 was too long, just right or too short?

Too long ☐

Just right ☐

Too short ☐

E.12 In most cases, was the child seated in front of you during the administration?

Yes ☐

No ☐ → How was the child seated?

E.13 In most cases, did you have to give the child additional instructions other than what was included in the questionnaire and in your Interviewer's Manual?

No ☐

Yes ☐ → What type of instructions?

E.14 In most cases, did you follow the exact script on the questionnaire for each model?

Yes ☐

No ☐ → How did you change the script?

E.15 In most cases, did you find the scoring easy to do (a pass or a failure of a model and when to stop the assessment)?

Yes ☐

No ☐ → Why?

E.16 In most cases, did you manipulate the material easily during the administration of this questionnaire (stopwatch, models with blocks, screen, Stimulus Booklet)?

Yes ☐

No ☐ → Why?

E.17 List any suggestions you may have to improve the administration or the format of the WPPSI-R Block Design Questionnaire - Booklet 3.

F. ESI-R QUESTIONNAIRE (Booklet 4)

- F.1 Do you think the time spent in training on the ESI-R Questionnaire - Booklet 4 was sufficient for you to accurately administer this direct measure to young children?

Yes ☐

No ☐ → How long should be spent in training to adequately cover the administration of the ESI-R Questionnaire - Booklet 4?

☐☐ hours ☐☐ minutes

- F.2 Before beginning interviewing how confident did you feel about administering the ESI-R Questionnaire - Booklet 4?

Very confident ☐

Confident ☐

Not very confident ☐

Not confident at all ☐

- F.3 How many times did you administer the ESI-R Questionnaire - Booklet 4?

☐☐ times

If "0", go to question F.20

F.4 Did you practice the administration of the ESI-R Questionnaire - Booklet 4 at home before administering it to a child?

No ☐ → Go to question F.6
Yes ☐

F.5 How many times did you practice at home?

with a young child times

with an adult times

other times → specify _____

F.6 What was your level of comfort in administering the ESI-R Questionnaire - Booklet 4 to young children?

Very comfortable ☐
Comfortable ☐
Uncomfortable ☐
Very uncomfortable ☐

F.7 Did your comfort level increase the more often you administered the ESI-R Questionnaire - Booklet 4?

Yes ☐
No ☐

F.8 To what degree are you certain that you administered the ESI-R Questionnaire - Booklet 4, following the **exact** procedures outlined in the questionnaire, your Interviewer's Manual and the training session?

- Very certain ☐
- Certain ☐
- Uncertain ☐
- Very uncertain ☐

F.9 Generally speaking, how did the young children you observed feel about the ESI-R Questionnaire - Booklet 4?

- Loved it ☐
- Liked it ☐
- Had no reaction ☐
- Did not like it ☐
- Hated it ☐

F.10 Generally speaking, how did parents feel about the administration of the ESI-R Questionnaire - Booklet 4?

- Very interested ☐
- Interested ☐
- Uninterested ☐
- Not interested at all ☐

If the parents had any problems with the ESI-R Questionnaire - Booklet 4, what were they?

F.11 Do you think that the administration of the ESI-R Questionnaire - Booklet 4 was too long, just right or too short?

Too long ☐

Just right ☐

Too short ☐

F.12 In most cases, was the child seated in front of you during the administration?

Yes ☐

No ☐ → How was the child seated?

F.13 In most cases, did you have to give the child additional instructions other than what was included in the questionnaire and in your Interviewer's Manual?

No ☐

Yes ☐ → What type of instructions?

F.14 In most cases, did you follow the exact script on the questionnaire for each item administered?

Yes ☐

No ☐ → How did you change the script?

F.15 Did you have any problems doing the scoring?

No ☐

Yes ☐ → Explain.

F.16 In most cases, did you easily manipulate the material during the administration of this questionnaire (cards, models with blocks, screen, construction paper, tape)?

Yes ☐

No ☐ → Why?

F.17 How many times did you use scotch tape to hold the tape on the floor?

times

If "0", go to question F.18.

F.18 Generally, what was the attitude of the parents about the scotch tape in order to hold the tape on the floor?

- No problem at all ☐
- No reaction ☐
- Didn't want it used ☐
- Wasn't used ☐

F.19 Generally, how easy or difficult was it for you to demonstrate the activities of the Gross motor part (balance, hop, skip, jump, walk on the line)?

- Very easy ☐
- Easy ☐
- Difficult ☐
- Very difficult ☐

If difficult or very difficult, what kind of difficulty did you have and for which activity?

Was the difficulty temporary or permanent?

- temporary ☐
- permanent ☐

F.20 List any suggestions you may have to improve the administration or the format of the ESI-R Questionnaire - Booklet 4.

G. Raven's CPM QUESTIONNAIRE (Booklet 5)

- G.1 Do you think the time spent in training on the Raven's CPM Questionnaire - Booklet 5 was sufficient for you to accurately administer this direct measure to young children?

Yes ☐

No ☐ → How long should be spent in training to adequately cover the administration of the Raven's CPM Questionnaire - Booklet 5?

hours minutes

- G.2 Before beginning interviewing how confident did you feel about administering the Raven's CPM Questionnaire - Booklet 5?

Very confident ☐

Confident ☐

Not very confident ☐

Not confident at all ☐

- G.3 How many times did you administer the Raven's CPM Questionnaire - Booklet 5?

times

If "0", go to question G.17

G.4 Did you practice the administration of the Raven's CPM Questionnaire - Booklet 5 at home before administering it to a child?

No ☐ → Go to question G.6

Yes ☐

G.5 How many times did you practice at home?

with a young child ☐☐ times

with an adult ☐☐ times

other ☐☐ times → specify _____

G.6 What was your level of comfort in administering the Raven's CPM Questionnaire - Booklet 5 to young children?

Very comfortable ☐

Comfortable ☐

Uncomfortable ☐

Very uncomfortable ☐

G.7 Did your comfort level increase the more often you administered the Raven's CPM Questionnaire - Booklet 5?

Yes ☐

No ☐

G.8 To what degree are you certain that you administered the Raven's CPM Questionnaire - Booklet 5, following the **exact** procedures outlined in the questionnaire, your Interviewer's Manual and the training session?

- Very certain ☐
- Certain ☐
- Uncertain ☐
- Very uncertain ☐

G.9 Generally speaking, how did the young children you observed feel about the Raven's CPM Questionnaire - Booklet 5?

- Loved it ☐
- Liked it ☐
- Had no reaction ☐
- Did not like it ☐
- Hated it ☐

G.10 Generally speaking, how did parents feel about the administration of the Raven's CPM Questionnaire - Booklet 5?

- Very interested ☐
- Interested ☐
- Uninterested ☐
- Not interested at all ☐

If the parents had any problems with the Raven's CPM Questionnaire - Booklet 5, what were they?

G.11 Do you think that the administration time of the Raven's CPM Questionnaire - Booklet 5 was too long, just right or too short?

Too long ☐

Just right ☐

Too short ☐

G.12 In most cases, was the child seated just beside you or at a right angle during the administration?

Yes ☐

No ☐ → How was the child seated?

G.13 In most cases, did you have to give the child additional instructions other than what was included in the questionnaire and in your Interviewer's Manual?

No ☐

Yes ☐ → What type of instructions?

G.14 In most cases, did you follow the exact script on the questionnaire for each item administered?

Yes ☐

No ☐ → How did you change the script?

G.15 In most cases, did you find the scoring easy to do?

Yes ☐

No ☐ → Why?

G.16 In most cases, did you easily manipulate the Raven's Booklet during the administration of this questionnaire?

Yes ☐

No ☐ → Why?

G.17 List any suggestions you may have to improve the administration or the format of the Raven's CPM Questionnaire - Booklet 5.

H. PARENT QUESTIONNAIRE (BOOKLET 7)

H.1 Did you find the instructions on the questionnaire clear?

Yes ☐

No ☐ → How could they be improved?

H.2 Generally, how well the respondent understood the questions?

Very easily ☐

Easily ☐

With difficulty ☐

With a lot of difficulty ☐

H.3 How did you find the length of this questionnaire?

Good length ☐

A bit too long ☐

Extremely long ☐

H.4 Were there any questions or sections that you think respondents found sensitive?

No ☐

Yes ☐ → Specify.

H.5 List any suggestions you may have to improve the questionnaire.

I. AGES AND STAGES QUESTIONNAIRE (BOOKLET 8)

- I.1 How many of your cases were selected to receive the Ages and Stages Questionnaire - Booklet 8?

cases

If "0", Go to Question I.11

- I.2 In how many of these cases did the respondent complete the Ages and Stages Questionnaire - Booklet 8 before the home interview?

cases

- I.3 In how many of these cases did the respondent did not complete the Ages and Stages Questionnaire - Booklet 8 before the home interview?

cases

If "0" case, go to question I.9

- 1.4 Of these cases (selected to receive the Booklet 8), indicate why the respondent did not complete the Ages and Stages Questionnaire before the home interview. Indicate the number of cases for each of the following reasons:

Did not understand instructions	<input type="text"/> <input type="text"/> cases
Did not have time to do it	<input type="text"/> <input type="text"/> cases
Not interested	<input type="text"/> <input type="text"/> cases
Forgot about it	<input type="text"/> <input type="text"/> cases
Lost the questionnaire	<input type="text"/> <input type="text"/> cases
Did not receive it	<input type="text"/> <input type="text"/> cases
Other	<input type="text"/> <input type="text"/> cases → Specify _____

- 1.5 Of the cases completed during the home interview, even if there was no time allocated for the parents to try the activities, what proportion of the questions you think the parents were able to answer accurately?

75-100%	<input type="checkbox"/>
50-74%	<input type="checkbox"/>
25-49%	<input type="checkbox"/>
0-24%	<input type="checkbox"/>

- I.6 Of the cases completed during the home interview, in how many cases did the respondents fill out the Ages and Stages Questionnaire - Booklet 8 by themselves?

cases

- I.7 Of the cases completed during the home interview, in how many cases did you administer directly the Ages and Stages Questionnaires - Booklet 8 to the respondent?

cases

If "0" case, go to question I.9

- I.8 Did the respondents have trouble answering any of the questions?

No ☐

Yes ☐ → Specify.

- I.9 Did respondents ask you questions about the instructions on how to fill out the Ages and Stages Questionnaire (which section to fill out, which child it is about, how to do the activities...)?

No ☐

Yes ☐ → Specify.

- I.10 Generally speaking, how did parents feel about completing the Ages and Stages Questionnaire - Booklet 8 on their own, before the interview?

Very interested ☐

Interested ☐

Uninterested ☐

Not interested at all ☐

- I.11 List any suggestions you may have to improve the administration or the format of the Ages and Stages Questionnaire - Booklet 8?

**J. MacARTHUR SHORT FORM VOCABULARY CHECKLIST
(BOOKLET 9)**

- J.1 How many of your cases had the MacArthur Short Form Vocabulary Checklist - Booklet 9 to complete?

cases

If "0", Go to Question J.6

- J.2 Of these cases, how many of them did not fill out the MacArthur Short Form Vocabulary Checklist - Booklet 9 by themselves (so that the questionnaire was administered orally by you, to the respondent)?

cases

- J.3 Generally, did the respondent find the instructions clear on how to fill out this questionnaire?

Yes ☐

No ☐ → Specify.

J.4 Generally, did the respondent find the words appropriate for their child?

Yes ☐

No ☐ → Specify.

J.5 Generally speaking, how did parents feel about the MacArthur Short Form Vocabulary Checklist - Booklet 9?

Very interested ☐

Interested ☐

Uninterested ☐

Not interested at all ☐

J.6 List any suggestions you may have to improve the administration and the format of the MacArthur Short Form Vocabulary Checklist - Booklet 9?

K. INTERVIEWER'S OBSERVATION QUESTIONNAIRE (BOOKLET 10)

K.1 Generally, did you complete the Interviewer's Observation Questionnaire - Booklet 10 right after your home visit (within the 20 minutes following the end of the home visit)?

Yes ☐

No ☐ → Why? How long after the home visit did you fill out the questionnaire?

K.2 On average, how long did it take you to complete the Interviewer's Observation Questionnaire - Booklet 10?

minutes

K.3 Do you think that this questionnaire took into account all the important situations (in term of child behavior and interaction between the parent and the child) that occurred during the interviews?

Yes ☐

No ☐ → Why? What was missing?

K.4 Were you able to observe everything that was asked in the Interviewer's Observation Questionnaire - Booklet 10?

Yes ☐

No ☐ → What was difficult to observe?

K.5 Generally, was it easy to remember the child's behavior and attitude, as well as the interaction between the parent and the child?

Yes ☐

No ☐ → Specify.

K.6 List any suggestions you may have to improve the format and/or the content of Interviewer's Observation Questionnaire - Booklet 10.

L.INCENTIVES

L.1 Generally speaking, how did children like the poster?

Liked it ☐

Had no reaction ☐

Did not liked it ☐

L.2 Generally speaking, how did parents like the poster?

Liked it ☐

Had no reaction ☐

Did not liked it ☐

L.3 How do you like the idea of giving a poster to children as an incentive?

Like it ☐

Neutral about it ☐

Do not like it ☐

L.4 Did you encounter any problems with the poster?

No ☐

Yes ☐ → Specify.

L.5 Was 25 posters enough for the total assigned cases you had?

Yes ☐

No ☐ → How many posters did you need?

☐☐☐ posters

L.6 Did it happen that you gave a poster not only to the selected child but also to other children in the household (friends, brothers, sisters...)?

No ☐

Yes ☐ → To how many children?

☐☐ children

L.7 List any suggestions you may have to improve the posters.

L.8 Generally speaking, how did children like the idea of the picture?

Liked it ☐

Had no reaction ☐

Did not liked it ☐

L.9 Generally speaking, how did parents like the idea of the picture?

Liked it ☐

Had no reaction ☐

Did not liked it ☐

L.10 How did you feel about taking the child's picture?

Comfortable ☐

Bit uncomfortable ☐

Very uncomfortable ☐

L.11 Did you encounter any problems with the Polaroid?

No ☐

Yes ☐ → Specify.

L.12 Were 30 pictures (3 films of 10 pictures) enough for the total assigned cases you had?

Yes ☐

No ☐ → How many pictures did you need?

☐☐☐ pictures

L.13 Did it happen that you took a picture of someone else than the selected child in the household (parents, friends, brothers, sisters...)?

No ☐

Yes ☐ → How many people ?

people

L.14 List any suggestions you may have to improve anything related to the use of the Polaroid and/or the picture.

L.15 What incentives do you think are best for children aged 0-2 years?

Poster ☐

Activity book ☐

Stickers ☐

Eraser ☐

Pencil ☐

Other ☐ → What do you propose?

L.16 What incentives do you think are the best for children aged 3-5 years?

- Poster ☐
Activity book ☐
Stickers ☐
Eraser ☐
Pencil ☐
Other ☐ → What do you propose?
-
-

L.17 At which time during the interview you think is best to give the child an incentive?

- At the beginning of the interview ☐
During the interview ☐
At the end of the interview ☐

L.18 Generally speaking, how did parents like the brochure?

- Found it useful ☐
Had no reaction ☐
Felt it wasn't necessary ☐
Other ☐ → Specify
-

L.19 Do you feel the brochure helped to encourage a respondent's interest in the survey?

- Yes ☐
No ☐

L.20 List any suggestions you may have to improve the brochure.

L.21 Were 20 extra brochures enough for the total assigned cases you had?

Yes ☐

No ☐ → How many brochures did you need?

brochures

L.22 Did you encounter any problems with the brochure?

No ☐

Yes ☐ → Specify.

L.23 Were 20 extra copies of each type of letter enough for the total assigned cases you had?

Yes ☐

No ☐ → How many extra copies of each type did you need?

copies

L.24 Did you encounter any problems with the letters?

No ☐

Yes ☐ → Specify.

L.25 Do you feel the letters provide a good introduction to the survey for respondents and would encourage their participation?

Yes ☐

No ☐ → Why?

L.26 List any suggestions you may have to improve the letters.

M. MATERIALS

M.1 How many times did you have to disinfect the material?

times

If "0", go to question M.6

M.2 Did you always disinfect the material at your home?

Yes ☐ → Go to Question M.4

No ☐ → How many times did you disinfect material outside your home?

times

M.3 Of the number of times you disinfected the material outside your home, how many times were in...

a respondent's home? times

Generally, how was the attitude of the respondent about having the material disinfected at their home?

Very positive ☐
Positive ☐
Neutral ☐
Negative ☐
Very negative ☐

another place? times → Specify

M.4 On average, how long did it take you, to disinfect the material?

minutes

M.5 Did you encounter any problems when disinfecting materials?

No ☐

Yes ☐ → Specify.

M.6 List any suggestions you may have to improve disinfection of materials.

M.7 Did you notice that any supplies got damaged during the collection period?

No ☐

Yes ☐ → What specific material? Why did it get damaged?

M.8 Did you find the bag (grey bag) appropriate for carrying your supplies?

Yes ☐

No ☐ → Why?

M.9 List any suggestions you may have regarding all the material.

N.INTERVIEWING YOUNG CHILDREN

N.1 Generally, how did you feel about establishing rapport with the child during the home visit?

- Very comfortable ☐
- Comfortable ☐
- Uncomfortable ☐
- Very uncomfortable ☐

N.2 List any suggestions you may have to help the interviewers to establish rapport with the child in order to administer the direct measures.

N.3 What kind of warm-up activity you think would be the best before beginning the administration of the direct measures?

- Chatting with child ☐
- Construction with blocks ☐
- Drawing ☐
- Gross motor activity
(hop, skip, balance...) ☐
- Ask questions on numbers... ☐
- Other ☐ → Specify _____

N.4 How comfortable would you be using a puppet supplied by Statistics Canada to amuse and help the child to be at ease with you (establishing rapport), before beginning the administration of the direct measures?

- Very comfortable ☐
Comfortable ☐
Uncomfortable ☐
Very uncomfortable ☐

N.5 Generally speaking, which direct measures did the children prefer? Number the following from 1 to 5, starting with the one you think children liked the most.

Who Am I? Questionnaire - Booklet 1

☐

Number Knowledge Questionnaire - Booklet 2

☐

WPPSI-R Block Design Questionnaire - Booklet 3

☐

ESI-R Questionnaire - Booklet 4

☐

Raven's CPM Questionnaire - Booklet 5

☐

N.6 The following questionnaires had an introduction which was to be read to the child. Did each of these provide a good introduction to the activity for the child?

Number Knowledge Questionnaire - Booklet 2

Yes ☐

No ☐ → Why?

WPPSI-R Block Design Questionnaire - Booklet 3

Yes ☐

No ☐ → Why?

ESI-R Questionnaire - Booklet 4

Yes ☐

No ☐ → Why?

Raven's CPM Questionnaire - Booklet 5

Yes ☐

No ☐ → Why?

N.7 In how many cases did the children know in advance that you would come to do some activities with him/her?

cases

If "0", go to question N.9

N.8 Do you think knowing in advance that someone would come to do some activities with him/her helped the child to be better prepared for your visit and to establish rapport more easily?

Yes ☐

No ☐ → Why?

N.9 In how many cases did the child appear frustrated?

cases

If "0", go to question N.12

N.10 Generally, were you able to help the child overcome his or her frustrations?

Yes ☐

No ☐ → Go to N.12 and indicate why.

N.11 How did you do this?

N.12 List any suggestions you may have to help interviewers in a situation where a child is frustrated.

N.13 In how many cases did the child appear very shy?

cases

If "0", go to question N.16

N.14 Generally, were you able to reduce the child's shyness and get the child involved in the activity?

Yes ☐

No ☐ → Go to N.16 and indicate why?

N.15 How did you reduce the child's shyness?

N.16 List any suggestions you may have to help interviewers in a situation where a child is very shy.

N.17 In how many cases was the child extremely excited?

cases

If "0", go to question N.20

N.18 Generally, were you able to calm the excited child down?

Yes ☐

No ☐ → Go to N.20 and indicate why.

N.19 How did you calm the excited child down?

N.20 List any suggestions you may have to help interviewers in a situation where a child is extremely excited.

N.21 In how many cases did the child appear stressed by knowing or feeling that he/she was being evaluated with the direct measures?

☐ ☐ cases

If "0", go to question N.24

N.22 Generally, were you able to reduce the child's stress and encourage the child to complete the activity?

Yes ☐

No ☐ → Go to N.24 and indicate why?

N.23 How did you reduce the child's stress?

N.24 List any suggestions you may have to help the interviewers in a situation where a child appears stressed.

N.25 Generally, were children distracted by anything (people, television...) in the environment during the administration of the direct measures?

No ☐

Yes ☐ → Specify

N.26 In how many cases were the parents in the room most of the time while you administered the direct measures to the child?

cases

If "0", go to question N.28

N.27 In how many cases did the parent sit behind the child?

cases

N.28 Generally, did the parents intervene between you and the child during the administration of the direct measures?

No ☐

Yes ☐ → Specify how they intervened and for which direct measure?

N.29 List any suggestions you may have to help reduce the intervention of the parents or other people in the household during the administration of the direct measures.

N.30 Generally, did the children ask you a lot of questions during the administration of the direct measures?

No ☐

Yes ☐ → What type of questions and how did you answer them?

N.31 In how many cases you did not follow the "Booklet Order" indicated on the Control Form to administer the questionnaires?

cases

If "0" go to question N.33

N.32 Why you did not follow the order indicated on the Control Form? Specify for each case.

N.33 In how many cases did you have to interrupt the administration of the direct measures?

cases

If "0" go to question N.36

N.34 Why did you have to interrupt the administration of the direct measures?
Specify for each case.

N.35 Of the cases you had to interrupt, in how many cases did you complete the direct measure after the interruption?

cases

N.36 Do you think that administering the Parent Questionnaire - Booklet 7 at the beginning of the home visit helps the child to get used to you before starting the administration of the direct measures?

Yes ☐

No ☐ → Why?

N.37 When is the best time to administer the direct assessments?

- Beginning of the interview ☐
- Middle of the interview ☐
- End of the interview ☐

Important

For each case in your assignment, complete the form on one of the following pages.

For example, if you had 5 cases assigned, complete 5 forms.

Person ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/>	Total Interview Time* <input type="text"/> <input type="text"/> hr. <input type="text"/> <input type="text"/> min.	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone?	Day of interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
Child's Age in months <input type="text"/> <input type="text"/> months	* include all time spent on the telephone and in person	* include interviews where only the contact portion was conducted over the telephone.	

Booklet Number (Check all the booklets assigned for this case)	Final Status Code (Check the appropriate Final Status for each Booklet)								Administration Time (24 hours clock → 6:15 p.m. = 18:15)		
	Complete	Partial	No Contact	Refusal by Parent	Refusal by the Child	Out of Scope	Other		Start Time	End Time	For office use only
1 <input type="radio"/>											
2 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
4 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>				
8 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>				
9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
10 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

→ **Booklet 8**

- ☐ questionnaire filled out prior to the interview
- ☐ questionnaire filled out during the interview – by the parent
- ☐ questionnaire filled out during the interview – by the interviewer

Person ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Child's Age in months <input type="text"/> <input type="text"/> months	Total Interview Time* <input type="text"/> <input type="text"/> hr. <input type="text"/> <input type="text"/> min. <small>* include all time spent on the telephone and in person</small>	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone? <small>* include interviews where only the contact portion was conducted over the telephone.</small>	Day of interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> <small>* if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.</small>
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Booklet Number (Check all the booklets assigned for this case)	Final Status Code (Check the appropriate Final Status for each Booklet)							Administration Time (24 hours clock → 6:15 p.m. = 18:15)		
	Complete	Partial	No Contact	Refusal by Parent	Refusal by the Child	Out of Scope	Other	Start Time	End Time	For office use only
1 <input type="radio"/>										
2 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
4 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>			
8 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>			
9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
10 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			

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- ☐ questionnaire filled out during the interview – by the interviewer

Person ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> Child's Age in months <input type="text"/> <input type="text"/> months	Total Interview Time* <input type="text"/> <input type="text"/> hr. <input type="text"/> <input type="text"/> min. * include all time spent on the telephone and in person	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone? * include interviews where only the contact portion was conducted over the telephone.	Day of interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
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2 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
4 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>			
8 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>			
9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
10 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			

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Person ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Total Interview Time* <input type="text"/> <input type="text"/> hr. <input type="text"/> <input type="text"/> min.	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone?	Day of interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
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3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
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5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>				
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9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
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Person ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/>	Total Interview Time* <input type="text"/> <input type="text"/> hr. <input type="text"/> <input type="text"/> min.	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone?	Day of interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
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3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
4 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>			
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9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
10 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			

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<u>Person ID</u> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div>	<u>Total Interview Time*</u> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div>	<u>Interview conducted by...</u> telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone? * include interviews where only the contact portion was conducted over the telephone.	<u>Day of interview*</u> Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
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1 <input type="radio"/>											
2 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
4 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
8 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
10 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			

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Person ID <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div>	Total Interview Time* <div style="border: 1px solid black; width: 40px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 5px 0;"></div>	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone? * include interviews where only the contact portion was conducted over the telephone.	Day of interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
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Person ID <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div>	Total Interview Time* <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> hr. <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> min.	Interview conducted by... telephone only <input type="radio"/> in person interview only* <input type="radio"/> combination <input type="radio"/> → Which booklets/sections/questions were done over the telephone?	Day of Interview* Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday <input type="radio"/> Sunday <input type="radio"/> Before 4 p.m. <input type="radio"/> After 4 p.m. <input type="radio"/> * if interview conducted over more than one day, check all days that apply – do not include day of initial contact when the appointment was made.
Child's Age in months <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 5px 0;"></div> months	* include all time spent on the telephone and in person * include interviews where only the contact portion was conducted over the telephone.		

Booklet Number (Check all the booklets assigned for this case)	Final Status Code (Check the appropriate Final Status for each Booklet)								Administration Time (24 hours clock → 6:15 p.m. = 18:15)		
	Complete	Partial	No Contact	Refusal by Parent	Refusal by the Child	Out of Scope	Other		Start Time	End Time	For office use only
1 <input type="radio"/>											
2 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
3 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
4 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
5 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
7 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>				
8 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>				
9 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
10 <input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

➔ **Booklet 8**

- ☐ questionnaire filled out prior to the interview
- ☐ questionnaire filled out during the interview – by the parent
- ☐ questionnaire filled out during the interview – by the interviewer