

Early Life Cohort Feasibility Study
Post-consultation questionnaire draft

July 2022

*This draft supersedes the consultation version dated
August 2021*

Key changes to questionnaire since August 2021 draft:

- *Incorporation of consultation suggestions where possible*
 - *Cuts to shorten questionnaire length*
 - *Adapted for first interview age of 6 months*
- *Finalised approach to questionnaire specification for different respondents*



Contents

Introduction.....	2
Household module (PI and OHF only).....	5
Household information.....	6
Housing.....	19
Household income.....	20
Contact information.....	36
Household observations.....	36
Parent/Carer Module.....	39
Background: basic details.....	40
Background: employment.....	42
Background: pay.....	50
Background: parental leave.....	53
Background: education.....	56
Background: ethnicity.....	64
Background: religion.....	67
CASI.....	67
CASI: Bonding.....	75
CASI: health.....	80
CASI: Life Events.....	81
CASI: Social Support.....	86
CASI: Life Satisfaction.....	88
CASI: Loneliness.....	88
CASI: Couple relationship.....	88
CASI: Mental Health.....	91
CASI: Substance Use.....	94
CASI: Disadvantage.....	100
PI: Details of other parent (not fully resident and/or not PI's partner).....	101
PI: Partner information (employment, pay, parental leave, education, ethnicity).....	108
PI: childcare.....	117
PI: Services.....	123
Birth Mother: Pregnancy history.....	128
Not primary caregiver: engagement in childcare.....	128
Child Module.....	130
PI: baby ethnicity.....	131
PI: fertility treatments.....	133
PI: birth and delivery.....	134
PI: child anthropometrics.....	136
PI: child health.....	136
PI: child development.....	144
Early care activities.....	145
Child temperament.....	147

Introduction

This document contains a draft (as of July 2022) of the ELC-FS questionnaire. It is accompanied by a report containing the study team's response to consultation feedback from the scientific community on the earlier draft questionnaire, which was published in August 2021. Further changes may be made as a result of the questionnaire testing and scripting process prior to data collection, and adaptations for different modes are also planned.

The approach to the questionnaire design has been to create broad modules of questions: household module, parent/carer module and a child module. Different informants will answer specific selections of questions within these modules. The possible types of interview, and selection for that interview, are as follows:

1) Primary informant selection and interview:

Primary informants will be asked the questionnaire in its entirety. This includes questions about their household, their own personal circumstances, their relationship with their child, and some questions about their partner, and questions about their child's development and upbringing.

The primary informant must be a resident at the child's main residence and be either a birth parent or a legal guardian of the child. They should preferably provide most or equal amounts of care for the child (as the informant should be well-placed to answer questions about the child's life and development), but if the main/equal carer is not willing/available for interview another birth parent/legal guardian can be the primary informant.

The questionnaire will last 60 minutes face-to-face, including consents and contact information. Web and/or telephone may be used as a non-response follow-up, likely using a shorter (40 minute) interview in that instance.

2) Additional informant selection and interview:

First preference eligibility for the additional informant interview will be, following the selection of the primary informant, the child's other resident birth parents or legal guardians. However, partners of parents who are not the child's birth parent (i.e. 'step parents') who co-reside with the child at least part of the time, will also be eligible to give an additional informant interview.

Additional informants will not be asked questions about the household given they will usually be a co-resident partner (so information on this will have already been gained through the PI) or objective child related questions (childcare providers, pregnancy information, anthropometrics, child development) which will be reported on by the PI. They will be asked questions about their own individual circumstances and about their subjective relationship to their child (engagement with childcare, perception of child's temperament, parent-infant bonding).

The questionnaire will be 30 minutes in length, including consents and contact information. The interviews will likely be concurrent mixed-mode (web and face-to-face), with a telephone option used as a non-response follow-up.

3) Own Household Father/Parent (OHF) selection and interview:

OHFs are parents or legal guardians who do not live full-time with their child, and thus live either fully or partially in a different household.

OHFs will be given a questionnaire 'in between' the PI and AI questionnaires. They will be asked questions about their household, given that it is different to the PIs household, but they will not answer the objective child-related questions as these will already have been reported on by the PI.

The questionnaire will be 40 minutes in length, including consents and contact information. The OHF interview will be primarily face-to-face, with the option of web and telephone used flexibly to boost response rates and control fieldwork costs e.g. where the OHF does not live in or near the geographically clustered fieldwork areas.

The questionnaire is therefore structured as shown in the table below (note that this does not reflect proposed ordering of questions).

MODULE TYPE AND INFORMANT	Topics	Estimated Timing (min)	PI	OHF	AI
Household	Family Interview (Household Information)	15	X	X	
	Housing, incl. address history, languages				
	Household income, benefits, debts, wealth				
	Contact information				
	Interviewer Observations				
Parent/Carer: Background	Basic details	6	X	X	X
	Employment				
	Pay				
	Parental leave				
	Education				
	Ethnicity				
	Religion				
Parent/Carer: CASI	Parent-infant bonding	13	X	X	X
	Social support				
	Couple relationship				
	Mental and Physical Health				
	Substance use				
	Life events				
	Disadvantage indicators				
Parent/Carer: Primary Informant	Non-resident parent information	8	X		
	Partner employment and parental leave				
	Partner education and ethnicity				
	Childcare and childcare support				
	Service use				
Child: Primary informant	Baby ethnicity	7	X		
	Fertility treatments				
	Birth and delivery				
	Child anthropometrics				
	Child health and development				
Child	Early care activities	5	X	X	X
	Child temperament				
Parent/Carer: Birth mother	Pregnancy	1	X	X	X
Parent/Carer: Not primary caregiver	Engagement in childcare	0.5		X	X
Record Linkage	Data linkage consents	5	X	X	X
TOTAL			60	40	30

Household module (PI and OHF only)

Overview:

- 1) Family interview household information (numbers 1-27)
- 2) Housing including address history and languages spoken (28-32)
- 3) Household income, benefits, debt and wealth (33-68)
- 4) Contact information (61)
- 5) Home interviewer observations (62-69)

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
1	Household information	Child's Name	ALL	Ask All	MNAME1	Is your baby's first name {ChildFName from ECS}?	1. Yes 2. No			COTs (rework of SEED w1)
2			IF: MNAME1=2	Ask if baby's name does not correspond to our records	MNAME1O	Enter ^baby's name	Open: Name			COTs (rework of SEED w1)
3			ASK ALL	Ask All	MMIDNAME1	Does ^baby have any middle names?	1. Yes 2. No			COTs (rework of SEED w1)
4			IF:MMIDNAME1=1	Ask if baby has a middle name	MMIDNAME1O	Enter ^baby's middle name	Open: Middle Name			COTs (rework of SEED w1)
5			ASK ALL	Ask All	MSNAME1	Is your baby's surname {TEXTFILL:ChildSName from ECS}?	1. Yes 2. No			COTs (rework of SEED w1)
6			IF: MSNAME1=2	Ask if baby's surname does not correspond to our records	MSNAME1O	Enter ^baby's surname	Open: Surname			COTs (rework of SEED w1)
7	Household information	Child's DOB and sex	ASK ALL	Ask All	MDOB1	Is ^baby's date of birth the {ChildBirthDate from ECS}?	1. Yes 2. No			COTs (rework of SEED w1)
8			IF: MDOB1=2	Ask if baby's DOB does not correspond to our records	MDOBO	What is ^baby's date of birth?	DD/MM/YYYY			COTs (rework of SEED w1)

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
9			ASK ALL	Ask All	MSEX1	And can I just check, what is ^baby's sex?	1. Male 2. Female			Next Steps Age 32

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
10	Household information	HH Members	ASK ALL	Ask All	MHELSE	<p>Apart from you and your ^baby, does anyone else live with you regularly as a member of your household?</p> <p>Do not include lodgers or people who stay overnight just occasionally</p>	<p>1 Yes 2 No</p>	<p>INTERVIEWER : ADD IF NECESSARY: By member of a household we mean someone who usually shares meals or living accommodation with you.</p> <p>INTERVIEWER : IF HH MEMBER HAS BEEN OR IS LIKELY TO BE AWAY FOR 6 MONTHS OR MORE, COUNT AS RESIDENT ONLY IF S/HE IS EXPECTED TO COME BACK TO LIVE THERE</p>	<p>Include: -All those who are away from home temporarily for less than 6 months continuously e.g. on holiday, in hospital, for work, in prison -Children regularly living in the household for some of the time, eg where overnight residence/'custody' is shared between the cohort member and an ex-partner/child's other birth parent, or eg child part-time in residential care - PERSON (eg cohort child's birth father, or partner of Primary Informant, or adult child) WHO regularly STAYS OVERNIGHT SOME BUT NOT ALL OF THE TIME, eg for one or two days a week - PERSON (eg cohort child's</p>	MCS1 adaptation by ELC and COTs

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
									<p>birth father, or partner of Primary Informant, or adult child) who works or studies away during the working week and returns at weekends</p> <p>-Children under 16 attending boarding school but returning home at weekends or during school holidays</p> <p>- Boarders- people who pay rent for a room and for whom meals are provided</p> <p>Exclude:</p> <p>-All those who are away from home full-time for 6 months or more continuously e.g. on holiday, in hospital, for work or study, in prison</p> <p>-Children in full-time care of local authority, in residential home or with foster parents</p> <p>-All those full-time in long-stay institutions for disabled</p>	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
									children or adults -Children aged 16 or more attending boarding school -Students living away from home during term-time - Lodgers- people who rent a room but whose meals are not provided	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
11			IF: MHELSE=1	Loop starts for each HH member	LOOP1 STARTS	{START LOOP. LOOP FOR EACH ADDITIONAL HOUSEHOLD MEMBER}				
12	Household information	HH Member's name, DOB, age	IF:MHELSE=1	Ask if someone else lives in the HH	MFNAME6	Can I take the first name of the next person living in this household?	Open: ^HH Member's Name	INTERVIEWER ADD IF NECESSARY: This is only to help me ask the following questions and understand who is who in your household. Their name will not be used in the analysis of the survey data. INTERVIEWER : IF THERE ARE MULTIPLE PEOPLE IN THE HH WITH THE SAME FIRST NAME, PLEASE INCLUDE A MIDDLE NAME OR NOTE TO DIFFERENTIATE BETWEEN THEM IF RESPONDENT WOULD PREFER NOT TO SAY, ASK		SEED wave 1

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
								FOR A PSEUDONYM E.G. "Brother1", SO THAT THE SCRIPT KNOWS HOW TO REFER TO THAT PERSON.		
13			IF:MHELSE=1	Ask for each HH member in a loop over 11	MGEND6	And can I just check, what is ^HH member's gender?	1 Male 2 Female 3 Other (specify) ["MGEND630"]			Next Steps Age 32
14			IF:MHELSE=1	Ask for each HH member in a loop	MDOB6	What is ^HH member's date of birth?	DD/MM/YYYY			COTs
15			IF: DOB6=-99/-98	Ask if participant cannot remember the DOB of the HH member	MAGE6	What was ^HH member's age on their last birthday?	Range			Next Steps Age 32, Seed Wave 1

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
16			IF:MHELSE=1	Ask if someone else lives in the HH	MLOOP1	Does anyone else live with you regularly as a member of your household?	1 Yes 2 No	INTERVIEWER : ADD IF NECESSARY: By member of a household we mean someone who usually shares meals or living accommodation with you. Do not include lodgers or people who stay overnight just occasionally INTERVIEWER : IF HH MEMBER HAS BEEN OR IS LIKELY TO BE AWAY FOR 6 MONTHS OR MORE, COUNT AS RESIDENT ONLY IF S/HE IS EXPECTED TO COME BACK TO LIVE THERE		COTs
17			IF: MLOOP1=2	Loop end if no other HH member	LOOP1 ENDS	{END LOOP WHEN MLOOP1=2 (OR DK OR REFUSE)}				COTs

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
18	Household information	HH Member's relationship to Informant and Baby	ASK ALL	Ask All with a loop for: - each HH member relationship to the respondent - each HH member relationship to cohort baby	MRELAT	I'd now like to record the relationships of each member of your household to you and your ^baby	SHOWCARD: 1. Husband/Wife /Civil Partner 2. Partner 3. Birth/biological son/daughter 4. Adopted son/daughter 5. Foster child 6. Step-son/step-daughter/child of partner 7. Son-in-law/daughter-in-law 8. Birth/biological parent 9. Adoptive parent 10. Foster parent/Special guardian 11. Step-parent / Partner of parent (USE THIS IF HE/SHE IS PARTNER OF OTHER PARENT) 12. Parent-in-law 13. Full brother/sister 14. Half-brother/sister 15. Step-brother/sister 16. Adopted brother/sister	INTERVIEWER : BIOLOGICAL RELATIONSHIPS TAKE PRIORITY OVER NON-BIOLOGICAL RELATIONSHIPS. E.G. IF THE PRIMARY CAREGIVER IS THE CHILD'S GRANDPARENT AND FOSTER PARENT, CODE GRANDPARENT.		COTs (rework of SEED w1)

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							17. Foster brother/sister 18. Brother/sister-in-law 19. Grandchild 20. Grandparent 21. Other relative (specify) 22. Other non-relative (specify)			
19			IF MRELAT>12	Ask if relationship of respondent to cohort baby is not parent (e.g. is brother/grandparent etc)	MPIRELAT	In relation to your ^baby, are you their:	1. Adoptive parent 2. Foster parent/ Special guardian/ Kinship carer 3. Other (Specify) {"MPIRELAT O"}			COTs

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
20	Household information	Multiple Partners	IF: MRELAT=1 or 2 for >1 MNAME6+	Ask if PI/OHF has more than one partner resident in HH	MMULTIPART	<p>For the purposes of the interview, could you please select one partner to be invited to take part in the partner questionnaire?</p> <p>This should be the partner who spends the most time caring for your ^baby.</p>	<p>1 {name of first person6+ with MRELAT=1,2 with person 5}</p> <p>2 {name of second person6+ with MRELAT=1,2 with person 5}</p> <p>3 ...</p>	<p>INTERVIEWER : ADD IF NECESSARY: If this is equal for each, please choose the person whose name comes first alphabetically.</p>		COTs

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
21	Household information		<i>DERIVED VARIABLE</i>	Derive whether there is a resident partner of PI/OHF	MRESP	1 IF THERE IS A RESIDENT PARTNER IN THE HH, I.E. IF MRELAT=1 OR 2 FOR MNAME6+ IN RELATIONSHIP TO MPINAME 2 IF THERE IS NO RESIDENT PARTNER IN THE HH, I.E. IF MRELAT=1 OR 2 FOR NO MNAME6+ IN RELATIONSHIP TO MPINAME	n.a.			COTs
22	Household information		<i>DERIVED VARIABLE</i>	Derive name of partner to use for textfills	MRESPNAME	Resident partner's first name dervied from HH grid.	n.a.			COTs
23	Household information	Resident partner's details	IF: MRELAT=1 OR 2 for MNAME6+	Ask if there is a resident partner of PI/OHF	MRESPS	You told me about your ^resident partner, could you tell me their last name?	OPEN: Resident partner/spouse's surname			COTs

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
24	Household information	Resident partner lives PT or FT in HH	IF: MRELAT=1,2 or for MNAME6+	Ask if there is a resident partner of PI/OHF	MPARTLIVELS E=2	Does ^resident partner currently only live here or do they sometimes live somewhere else?	1 Yes - ONLY lives here 2 No - sometimes lives somewhere else	INTERVIEWER : IF THE FAMILY HAS A SECOND HOME CODE AS "YES - ONLY LIVES HERE" IF OTHER PARENT IS SOMETIMES WORKING AWAY PLEASE CODE AS "YES - ONLY LIVES HERE"		Seed wave 1 adapted by COTs/ELC
25	Household information	Part-time resident partner overnights with baby	IF: MPARTLIVELSE=2	Ask if partner is a part-time resident	MPARTPT	Does your ^baby ever stay overnight with ^part-time resident partner at their other place?	1. Yes 2. No			Fatherhood Institute ESRC Scoping work

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
26	Household information		IF: MPARTPT=1	Ask if baby spends overnights with the partner in their other HH	MPARTPT1	On average, how many times a month does your ^baby stay overnight with ^part-time resident partner at their other place?	1. TYPE IN: RANGE BETWEEN [0-31] 2. Once every few months 3. Less often			Fatherhood Institute ESRC Scoping work
27	Household information	PI/OHF's relationship to resident partner	IF: MRESP=1	Ask if there is a resident partner of PI/OHF	MCOUPLE	How long have you and ^resident partner been a couple?	TYPE IN: ONE BOX FOR MONTHS, ONE BOX FOR YEARS	INTERVIEWER : ADD IF NECESSARY: Include time as a couple whether or not living together.		Seed W1 adapted
28	Housing	Address history	ASK ALL	Ask all		ADDRESS HISTORY SINCE THE PREGNANCY OF THE REFERENCE CHILD				Not written
29	Housing	Languages Spoken	ALL	Ask to all	MLANGH	Can I just check - is English the language usually spoken at home?	1. Yes, English only 2. Yes, English and other languages 3. No			MCS1
30			IF: MLANGH=2,3	Ask if other languages are spoken at home	MLANGO	Which other language(s) are spoken at home?	1 Albanian..... 68 Yoruba 69 Other	CODE ALL THAT APPLY	MULTICODE Reponse Options will be a "LOOK UP" list	MCS1; MCS6

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
31	Housing	Housing tenure	ASK ALL	Ask to all	MTENURE	Do you ^{and your partner} own or rent your home or have some other arrangement?	1 Own outright 2 Own with a mortgage/loan 3 Part rent/part mortgage (shared equity) 4 Rent from local authority 5 Rent from Housing Association 6 Rent privately 7 Live with parents 8 Live rent free 9 Live with friends/ in hostel/ temporary accommodation 10 Squat 11 Other (SPECIFY) [variable label "MTENUREO"]	INTERVIEWER : ALL RENT PAID BY HOUSING BENEFIT IS NOT "RENT FREE"		MCS7; BCS70 age 38 and 42
32	Housing	Sharing House	ASK ALL	Ask to all	MROOM	How many rooms do you have (including bathroom and kitchen) for just your family's use?	[Range 0-50]			Osborn Index (COTs)
33	Household income	Income Intro	ALL	Show to all	MIncomeIntro	The next few questions are about your income and any state benefits or tax credits that you {and your partner} may receive.	NA	NA	NA	COSMO

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
34	Household income	Universal credit	All	Ask all	UNCR	<p>Universal Credit is a benefit which has been introduced. Some people now receive a single Universal Credit payment which replaces a number of other benefits, including: Income based Jobseeker's Allowance, Income-related Employment and Support Allowance, Income Support, Working Tax Credit, Child Tax Credit and Housing Benefit.</p> <p>Are you {or your partner} currently receiving Universal Credit? Include payments you {or your partner} receive jointly with other people.</p>	<p>1 Yes 2 No 3 Don't know</p>		<p>"I'm not sure if I receive Universal Credit, what should I do? If you currently receive individual payments for any of the following you do NOT receive Universal Credit at the moment:</p> <ul style="list-style-type: none"> • Income based Jobseeker's Allowance • Income-related Employment and Support Allowance • Income Support • Working Tax Credit • Child Tax Credit • Housing Benefit <p>"</p>	MCS8; NextSepts3 2
35			IF UNCR=1	Ask if receiving UC	UCAM	<p>How much was the last payment for Universal Credit that you {"or your partner"} received (to the nearest £)?</p>	<p>RANGE: 0..9999997 (unfolding brackets for refusal)</p>	<p>What if NAME doesn't know or want to answer? Please provide best estimate. If [NAME] really doesn't know or doesn't want to answer, choose don't know or prefer not to say.</p>		MCS8; NextSepts3 2

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
36			IF UCAM answered	Ask if receiving UC	UCAM2	What period does this cover?	1. One week 2. Calendar month 3. One year 4. Other period			MCS8; NextSepts3 2
37	Household income	Benefits	ASK ALL	Ask to all If there is a resident partner, ask about respondent and partner	BENT	Which, if any, of the following types of payments are you {or your partner} currently receiving? {IF UNCR=1: Do not include any benefits that you {or your partner} are receiving as part of your Universal Credit}	1. Jobseeker's Allowance 2. Income Support 3. Sickness, disability or incapacity benefits (including Employment and Support Allowance or Personal Independence Payments) 4. Pension - including private pensions, State Retirement Pension or pension credit (including guarantee credit, savings credit or housing credit). 5. Child Benefit 6. Tax credits - such as the Working Tax Credit, Disabled Person Tax Credit or Child Tax	CODE ALL THAT APPLY		MCS8; NextSepts3 2

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							Credit 7. Any other family related benefit or payment 8. Housing Benefit - including direct payments to your landlord or Council Tax Reduction or relief 9. Carer's Allowance 10. Income from any other state benefit			
38			IF BENT=8	If receiving family benefits	FABE	Are you currently receiving any of these types of family benefit payments? SELECT ALL THAT APPLY	1. Foster Allowance or Guardian Allowance 2. Maternity Allowance 3. In-Work Credit for Lone Parents 4. Statutory Maternity, Paternity, Shared Parental or Adoption Pay (from your employer or former employer) 5. Sure Start Maternity		What are these benefits? Foster allowance: paid to foster carers to help with the cost of fostering. Guardian allowance: paid to those looking after a child whose parents have died. In-Work Credit for Lone Parents: paid to lone parents in work but on a low income. Statutory	Next Steps 32 adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							Grant {WORDING IN ENGLAND, WALES AND NORTHERN IRELAND} / Sure Start Maternity Grant or Best Start Grant {WORDING IN SCOTLAND} 6. None of these		Maternity, Paternity or Adoption Pay: paid to new parents or those who have newly adopted a child.	
39			IF: BENT=3,5,6,8,9	Loop starts for each top 5 benefit	LOOP STARTS	{START LOOP. LOOP FOR EACH OF TOP 5 BENEFITS}				MCS8
40			IF BENT=3,5,6,8,9	If receiving top 5 benefit	BENA	How much was the last payment of {^BENT } you {IF ^DUMPTR2=1: "or ^DUMPTNAME1your partner"} received? You can give a weekly, monthly or yearly amount or an amount covering another period. You can choose this period on the next screen.	RANGE: 0..9999997 (unfolding brackets for refusal)			MCS8
41			IF BENA ANSWERED	If receiving top 5 benefit	BENP2	What period does this cover?	1. One week 2. Calendar month 3. One year 4. Other period			MCS8
42				Loop ends after each benefit type	LOOP ENDS	{END LOOP}				MCS8

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
43			IF BENT<>3,5,6,8,9	Ask if another benefit outside top 5	BENAO	In the last calendar month, what was the total amount of { {IF BENT = 1 "Jobseeker's allowance', " BENT =2 "Income Support', " BENT =4 " Pension - including private pensions, State Retirement Pension or pension credit (including guarantee credit, savings credit or housing credit)', " BENT =7 " Any other family related benefit or payment', " BENT =11 "^BENO', "} } that you {IF ^DUMPTR2=1: "or ^DUMPTNAME1"} received?	RANGE: 0..999997 (unfolding brackets for refusal)			MCS8
44			IF UNCR=1	Ask if receiving UC	MUNCREDCHECK	You mentioned that you receive Universal Credit. Do you receive any extra amounts of Universal Credit on top of your standard allowance for any of the following? Please choose all that apply	1. Yes, because I have children 2. Yes, because I have a disability or health condition 3. Yes, because I care for a severely disabled person 4. Yes, I receive additional payments for	MULTICODE		COSMO w1

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							housing 5. None of these (EXCL.)			
45			?	Ask if Scottish	BBSG	Have you received a Baby Box from the Scottish Government in the last 12 months?	1. Yes 2. No	A baby box is available for babies born after 15 August 2017 in Scotland. It contains essential items from birth to 6 months.		Family Resources Survey
46			?	Ask if Welsh	BBWG	Have you received a Baby Bundle from the Welsh Government in the last 12 months?	1. Yes 2. No			Family Resources Survey adaptation for new welsh baby bundle
47	Household income	Other income	ALL	Ask all	REPA	Do you or your partner currently receive any regular payment from any of these sources?	1. Regular cash help from parents 2. Regular cash help from other relatives or friends outside the household 3. Regular maintenance or child support payments (including payments made through the CSA)			MCS8; NextSepts3 2

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							<p>from a former partner</p> <p>4. Education grants or studentships, training or government training scheme allowance</p> <p>5. Income from investments (include interest on savings)</p> <p>6. Rent from boarders or lodgers or other property</p> <p>7. Pension from a former employer</p> <p>8. None of these</p>			
48			ASK IF REPA<>8	Ask if other source	REGA	<p>About how much in total do you {and your partner} usually receive from {if 1 response at REPA: "this source", if more than 1 response at REPA: "these sources"} in the last month?</p> <p>{If more than 1 response at REPA: "Include {LIST ALL ANSWERS AT REPA }"}}</p> <p>You can give a weekly, monthly or yearly amount or an amount covering another period. Please tell me the amount to the nearest pound (£)</p>	<p>RANGE: 0..9999997 (unfolding brackets for refusal)</p>	<p>What if [^NAME] doesn't know or want to answer? Please provide best estimate. If [^NAME] really doesn't know or doesn't want to answer, choose don't know or prefer not to say.</p>		MCS8; NextSepts3 2

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
49			ASK IF REGA answered	Ask if other source	REGAP1	What period does this cover?	1. One week 2. Calendar month 3. One year 4. Other period			MCS8; NextSteps3 2
50			ASK ALL	Ask to all If there is a resident partner, ask about respondent and partner	MINCPERIOD	Over what period would you find it easiest to provide an estimate of your {and your partner's combined} total income after deductions such as income tax or National Insurance? Think about what comes into your bank account(s) or the value of your pay packet(s).	1. Annually 2. Monthly/every four weeks 3. Weekly 4. Not applicable – no income			COSMO1; NextSteps3 2
51	Household income	Total HH Income	IF: MINCPERIOD =1	Ask to all who prefer to provide estimate of annual income. If there is a resident partner, ask about respondent and partner	MINCBANDA	Thinking about all sources of income, which of the following represents your {and your partner's combined} total annual income after any deductions such as income tax or National Insurance? Think about what comes into your bank account(s) or the value of your pay packet(s). If you are unsure, please give your best estimate.	A. Less than £6,500 B. £6,500 to less than-£10,500 C. £10,500 to less than £13,000 D. £13,000 to less than £15,000 E. £15,000 to less than £17,000 F. £17,000 to less than £19,000 G. £19,000 to less than £21,000 H. £21,000 to less than £23,000 I. £23,000 to less than £25,500 J. £25,500 to less than			COSMO1 adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							£27,500 K. £27,500 to less than £30,000 L. £30,000 to less than £32,500 M. £32,500 to less than £35,000 N. £35,000 to less than £38,000 O. £38,000 to less than £41,500 P. £41,500 to less than £46,000 Q. £46,000 to less than £51,500 R. £51,500 to less than £59,500 S. £59,500 to less than £75,000 T. £75,000 or more			

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
52			IF: MINCPERIOD =2	Ask to all who prefer to provide estimate of monthly income. If there is a resident partner, ask about respondent and partner	MINCBANDM	Thinking about all sources of income, which of the following represents your {and your partner's combined} total annual income after any deductions such as income tax or National Insurance? Think about what comes into your bank account(s) or the value of your pay packet(s). If you are unsure, please give your best estimate.	A. Less than £550 B. £550 to less than £870 C. £870 to less than £1,100 D. £1,100 to less than £1,270 E. £1,270 to less than £1,430 F. £1,430 to less than £1,600 G. £1,600 to less than £1,760 H. £1,760 to less than £1,930 I. £1,930 to less than £2,100 J. £2,100 to less than £2,290 K. £2,290 to less than £2,500 L. £2,500 to less than £2,700 M. £2,700 to less than £2,930 N. £2,930 to less than £3,170 O. £3,170 to less than £3,460 P. £3,460 to less than			COSMO1 adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							£3,810 Q. £3,810 to less than £4,270 R. £4,270 to less than £4,940 S. £4,940 to less than £6,270 T. £6,270 or more			

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
53			IF: MINCPERIOD =3	Ask to all who prefer to provide estimate of weekly income. If there is a resident partner, ask about respondent and partner	MINCBANDW	Thinking about all sources of income, which of the following represents your {and your partner's combined} total annual income after any deductions such as income tax or National Insurance? Think about what comes into your bank account(s) or the value of your pay packet(s). If you are unsure, please give your best estimate.	A. Less than £120 B. £120 to less than £200 C. £200 to less than £250 D. £250 to less than £300 E. £300 to less than £330 F. £330 to less than £370 G. £370 to less than £410 H. £410 to less than £450 I. £450 to less than £490 J. £490 to less than £530 K. £530 to less than £580 L. £580 to less than £630 M. £630 to less than £680 N. £680 to less than £730 O. £730 to less than £800 P. £800 to less than £880			COSMO1 adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							Q. £880 to less than £990 R. £990 to less than £1,140 S. £1,140 to less than £1,450 T. £1,450 or more			
54	Household income	Debt	Ask all	Ask all	MFCOM	I would now like to ask you about any financial commitments you (or your partner) may have apart from mortgages. For which, if any, of the items listed on this card do you (or your partner) currently owe any money? Please do not include credit card and other bills being fully paid off in the current month.	1 Credit card 2 Store card 3 Hire purchase agreement(s) 4 Personal loan(s) (from bank, building society or other financial institution) 5 Catalogue or mail order purchase agreement(s) 6 DWP Social Fund loan 7 Any other loan(s) from a private	CODE ALL THAT APPLY		MCS6

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
							individual 8 Student loan 9 Other debt not listed here 10 None of these			
55			ASK if MFCOM<=>10	Ask if financial commitments	MFCOMA	About how much do you owe on {this commitment/these commitments}?	Range: 1..999997 (plus unfolding brackets)			MCS6
56			ASK IF MTENURE=2	Ask if has mortgage	MOML	What is the amount still outstanding on all the mortgages/loans you {or your partner} have on this home - that is how much do you still have to pay off?	RANGE: 0...10000000			MCS6
57			Ask all	Ask to all	MBILLS	In the last six months have you {and your partner} been keeping up with bills and any regular debt repayments...	1. Yes 2. No			Family Resources Survey adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
58	Household income	Wealth	Ask all	Ask to all	MASS	Which, if any, of the accounts, investments or assets on this card do you [^or your husband/wife/partner] have?	1. An account at a bank, building society or elsewhere 2. Premium Bonds or National Savings Accounts or Certificates 3. ISA – Cash or Tessa 4. ISA – Stocks and shares or PEPS 5. Stocks and/or Shares which are not part of an ISA (including share options, employee share ownership or share clubs) 6. Unit or Investment Trusts/Bonds and Gilts which are not part of an ISA (government or corporate) 7. Other Savings or Investments 8. None of these [EXCLUSIVE]	CODE ALL THAT APPLY		BCS70

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
59			ASK IF MTENURE=1, 2	Ask if home owner	MOPA	About how much would you expect to get for your home if you sold it today? INTERVIEWER: IF RANGE GIVEN WRITE IN LOWEST FIGURE. WRITE IN AMOUNT IN £.	Range 0...10000000			MCS6
60			ASK IF MOPA=dk	Ask if home owner and dk amount	MOBR	Is it less than X, more than X or what?	1 Less than X 2 About X 3 More than X BRACKETS (X = £50,000, £100,000, £150,000, £200,000) [Bracket results are recorded in MOBBL, MOBBU, MOBBE, MOBBR]			MCS6
61	Contact information	Contact information				Not yet written				Not written
62	Household observations	Home observation			MHOME1	Child's in-home play environment seemed safe.	1. Yes 2. No			The HOME (Home Observation Measurement of the Environment)
63					MHOME2	Parent provided toys during visit.	1 Yes 2 No 3 Baby not present during interview			The HOME (Home Observation Measurement of the

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
										Environment) adapted
64					MHOME3	Parent kept child in vision (don't count occasions when the baby is with someone else).	1 Yes, always 2 Yes, most of the time 3 No, quite often the baby was out of sight 4 Baby not present during interview			The HOME (Home Observation Measurement of the Environment) adapted
65					MHOME5	Interior of home dark.	1. Yes 2. No			The HOME (Home Observation Measurement of the Environment)
66					MHOME6	House/flat was clean.	1 Very clean 2 Moderately clean 3 More dirty than clean			The HOME (Home Observation Measurement of the Environment) adapted
67					MHOME7	House/flat cluttered.	1 Very little clutter 2 Moderate clutter 3 Clutter impedes movement throughout home			The HOME (Home Observation Measurement of the Environment) adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source
68					MHOME8	Electronic intrusions (TV, radio, cell phone, computer)	1. None/Very few 2. Some (e.g. TV on, other electronic background noise) family not overly distracted 3. TV, radio, cell phone, computer interruptions fairly constant that distract the family			Descriptive In-home Survey of Chaos--Observer Reported (DISCORD)
69					MHOME9	Calmness vs Commotion	1 The atmosphere in the home was calm 2 The atmosphere in the home was a little noisy and/or chaotic 3 The atmosphere in the home was very noisy and/or chaotic			Descriptive In-home Survey of Chaos--Observer Reported (DISCORD) adapted

Parent/Carer Module

Overview:

- 1) Background
 - a. Basic details (70-79)
 - b. Employment (80-98)
 - c. Pay (99-111)
 - d. Parental leave (112-120)
 - e. Education (121-123)
 - f. Ethnicity (124-128)
 - g. Religion (129)
- 2) CASI
 - a. Parent-infant bonding (138-153)
 - b. Physical health (154-156)
 - c. Life events (157-169)
 - d. Social support, life satisfaction and loneliness (170-178)
 - e. Couple relationship (179-186)
 - f. Mental health (187-202)
 - g. Substance use (203-220)
 - h. Disadvantage indicators (221-224)
- 3) Primary Informant
 - a. Information on parents who are not full-time residents and/or are not the partner of PI (225-253)
 - b. Partner information: employment, pay, parental leave, education, ethnicity and general health (254-268)
 - c. Childcare and childcare support (269-294)
 - d. Service use (295-302)
- 4) Birth mother: Pregnancy history (303)
- 5) Non-primary caregiver: Engagement in parenting (304-309)

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
70	Backg round: basic details	PI/OHF/AI name	ASK ALL	Ask All	MNAME5	And your first name is {FirstName from ECS}, is that right?	1. Yes 2. No			COTs (rework of SEED w1)	
71			IF: MNAME1=2	Ask if PI/AI/OHF's name does not correspond to our records	MNAME5 O	Enter first name of PI/OHF/AI	Open: PI/OHF/AI's name			COTs (rework of SEED w1)	
72			IF: MIDNAME ECS	Ask if our records show middle name for PI/OHF/AI	MMIDNAME5	And your middle name is {MiddleName from ECS}?	1. Yes 2. No			COTs (rework of SEED w1)	
73			MMIDNAME5=2 OR MMIDNAME ECS=BLANK	Ask if no record of middle names for PI/OHF/AI or our records do not correspond to their middle name	MMIDNAME5O	...and do you have a middle name?/ Enter middle name of PI/OHF/AI	Open: PI/OHF/AI's Mmiddle name			COTs (rework of SEED w1)	
74			ASK ALL	Ask All	MSNAME5	And is your surname {Surname from ECS}?	1. Yes 2. No			COTs (rework of SEED w1)	
75			IF: MSNAME1=2	Ask if PI/OHF/AI's surname does not correspond to our records	MSNAME5 O	Enter PI/OHF/AI's surname	Open: PI/OHF/AI's surname			COTs (rework of SEED w1)	
76	Backg round:	Informant's DOB,	ASK ALL	Ask All	MDOB5	What is your date of birth?	DD/MM/YYYY			COTs (rework	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
	basic details	gender and sex								of SEED w1)	
77			ASK ALL	Ask All	MGEND5	And can I just check, what is your gender?	1. Male 2. Female 3. Other (Specify)			Next Steps Age 32 - adaptation of same question for HH members for PI	
78			IF: MGEND5 =1 OR 2	Ask if gender is Male or Female	MSEXGEND5	And can I check, is your gender the same as the sex you were registered at birth?	1. Yes 2. No	;ADD IF NECESSARY: If your gender is not the same as the sex recorded on your birth certificate when you were born (for example, you are transgender or non-binary), tick "no";		Next Steps Age 32 - adaptation of same question for HH members for PI	
79			IF: MSEXGEND5=2 OR MGEND5 =3	Ask if gender is not the same as birth sex OR if gender is "other"	MBIRTHSEX5	What was the sex you were registered at birth?	1. Male 2. Female			Next Steps Age 32 - adaptation of same question for HH members for PI	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
80	Background: employment	Employment	ASK ALL	Ask to all	MWORK1	Which of these best describes what you are currently doing?	<p>1 Employee – in paid work</p> <p>2 Self-employed</p> <p>3 In unpaid voluntary work</p> <p>4 Looking after family</p> <p>5 Found a job, waiting to start it</p> <p>6 Out of work and looking for a job</p> <p>7 On government scheme</p> <p>8 On apprenticeship scheme</p> <p>9 Full-time student</p> <p>10 Part-time student</p> <p>11 Retired from paid work</p> <p>12 Not in paid work, reasons of poor health</p> <p>13 Not in paid work for some other reason</p>	<p>INTERVIEWER: IF RESPONDENT IS ON PARENTAL/MATERNITY/PATERNITY LEAVE, CODE WHAT THEY WERE DOING PRIOR TO LEAVE I.E., EMPLOYED/SELF-EMPLOYED.</p> <p>IF RESPONDENT IS IN PAID WORK, CODE EMPLOYED/SELF-EMPLOYED, REGARDLESS OF NUMBER OF HOURS OR WHAT ELSE THEY ARE DOING</p> <p>LOOKING AFTER FAMILY INCLUDES CARING FOR FAMILY MEMBERS, INCLUDING FULL TIME CARERS, OR LOOKING AFTER THE CHILD/CHILDREN</p>	SHOWCARD	MCS7	
81	Background: employment	Previous employment	IF: MWORK1 = 3-11	Ask if not currently working	MWORK1A	Have you ever had a paid job, apart from casual or holiday work?	Yes No			COSMO1	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
82			IF: MWORK1 B=1	Ask if had a job in the past	MWORK1 B	For the next few questions, please think about the last job you had. In your last job, were you working as an employee or as self-employed?	1 Employee 2 Self Employed			COSMO 1	
83	Background: employment	PT or FT employment	IF: MWORK1 =1, 2 OR MWORK1 A=1	Ask if currently working or ever worked	MWORK2	How many hours do you usually work a week in your main job? Please include any overtime but do not include meal breaks.	Number of hours	IF NECESSARY: Please round answer to the nearest hour. If you do not work a usual number of hours please consider how many hours you work each day across a week and provide an estimate		NextSteps 32	
84			IF: MWORK= -99 OR - 98	Ask if does not know how many hours they worked per week	MWORK2 a	Are/were you working full-time or part-time?	1 Full-time (30 or more hours a week) 2 Part-time (under 30 hours a week)		MCS7 / Next Steps32		
85			<i>DERIVED VARIABLE</i>	Derive FT or PT job based on n. hours at MWORK2	MWORKTIME	1 {IF MWORK2 ≥ 30 OR MWORK2A=1}: Full-time 2 {IF MWORK2 < 30 OR MWORK2A=2}: Part-time	NA	NA		COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
86	Background: employment	Out of work for poor health	MWORK1 = 12	Ask if out of work because of poor health	MWORK3	Are you out of work due to poor health temporarily (for less than six months) or more long term (for more than six months)?	1 Temporarily 2 Longer-term			MCS7 adapted	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
87	Background: employment		DERIVED VARIABLE	Derive employment status	MWORKDER	1 Full time employment {IF MWORK1=1 AND MWORKTIME=1} 2 Part time employment {IF MWORK1=1 AND MWORKTIME=2} 3 Full time self-employed {IF MWORK1=2 AND MWORKTIME=1} 4 Part time self-employed {IF MWORK1=2 AND MWORKTIME=2} 5 In unpaid voluntary work (IF MWORK1=3) 6 Looking after the family {IF MWORK1=4} 7 Waiting to start a job {IF MWORK1=5} 8 Looking for a job {IF MWORK1=6} 9 Temporary sickness/disability {IF MWORK1=12 AND MWORK3=1} 10 Long-term sickness/disability {IF MWORK1=12 AND MWORK3=2} 11 Being on a government scheme {IF MWORK1=7} 12 Being on an apprenticeship scheme {IF MWORK1=8} 13 Full-time education {IF MWORK1=9} 14 Part-time education (IF MWORK1=10) 15 Retirement {IF MWORK1=11} 16 Not in paid work for	N.A.	NA		MCS7 adapted	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
						some other reason {IF MWOR1=12}					

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
88	Background: employment	End of last job	IF: MWORK1 A=1	Ask if not currently working but had a job in the past	MWORK5	When did your last job end? If you don't know the precise month, please give your best estimate.	ENTER MONTH AND YEAR			COTS	
89	Background: employment	Job title and type of work	IF: MWORKD ER=1-4 OR MWORK1 A=1	Ask if currently working or ever worked	MWORK6	{What is / In your last job, what was} your job title for your main job?	OPEN	IF NECESSARY: If you have more than one job, then the main job is the one with most hours. If the hours are equal for both jobs, the main job is the one with the highest pay.		SOC2020 coding. Wording from MCS7/COSMO1	
90			IF: MWORKD ER=1-4 OR MWORK1 A=1	Ask if currently working or ever worked	MWORK6 B	{What do / In your last job, what did} you mainly do in your job?	OPEN		SOC2020 coding (ONS/GSS)		
91			IF: MWORKD ER=1-4 OR MWORK1 A=1	Ask if currently working or ever worked	MWORK7	What does the firm or organisation you work for, or your business, mainly make or do (at the place where you work) OR In your last job, what did the firm or organisation you worked for, or your business, mainly make or do (at the place where you worked)?	OPEN	INTERVIEWER: please record in detail (for example manufacturing, processing or distribution, goods produced, materials used, wholesale or retail). Probe respondent if necessary.	SOC2020 coding (ONS/GSS; COSMO1)		

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
92	Background: employment	Qualifications required	IF: MWORKD ER=1-4 OR MWORK1 A=1	Ask if currently working or ever worked	MWORK8	{Does/In your last job, did} this job require any special qualifications or training?	1 Yes 2 No			SOC2020 coding (COSM O1/MCS7)	
93			MWORK8 = 1	Ask if their job required a qualification or training	MWORK9	What special qualifications or training are required?	OPEN			SOC2020 coding (COSM O1/MCS7)	
94	Background: employment	Supervisor / manager/ n. employees	IF: MWORKD ER=1,2 OR MWORK1 B=1	Ask if respondent is/was an employee	MWORK10	{In your job, do / In your last job, did} you have any formal responsibility for supervising the work of other employees?	1 Yes 2 No			SOC2020 coding (ONS/GSS)	
95			IF: MWORKD ER=1,2 OR MWORK1 B=1	Ask if respondent is/was an employee	MWORK10B	{In your job, does / In your last job, did} you have any managerial duties?	1 Manager 2 Foreman or supervisor 3 Not a manager or supervisor			SOC2020 coding (ONS/GSS)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
96			IF: MWORKD ER=1,2 OR MWORK1 B=1	Ask if respondent is/was an employee	MWORK1 1	How many people work for your employer at the place where you work? Were there... OR In your last job, how many people worked for your employer at the place where you worked? Were there...	1. 1 to 24 2. 25 or more	INTERVIEWER: THIS IS THE TOTAL NUMBER OF EMPLOYEES AT THE RESPONDENT'S WORKPLACE, E.G. IN THE BUILDING OR GROUP OF BUILDINGS IN WHICH THEY WORK		NS-SEC coding (ONS/GSS)	
97			MWORKD ER=3,4 OR MWORK1 B=2	Ask if respondent is/was self-employed	MWORK1 2	{Are you working on your own or do / In your last job, were you working on your own or did) you have employees?	1. On own/with partner(s) but no employees 2. With employees			NS-SEC coding (ONS/GSS)	
98			MWORK1 2 = 2	Ask if respondent is/was self-employed and had employees	MWORK1 3	How many people do you employ at the place where you work? Are there... OR In your last job, how many people did you employ at the place where you worked? Were there...	1.1 to 24 2. 25 or more			NS-SEC coding (ONS/GSS)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
99	Background: pay	Pay Intro	ASK IF MWORKD ER1-2	Ask if employed	PAYS	The next few questions are about your current gross and net pay. You may find it helpful to consult your last payslip when answering. Do you have this to hand, or can you view it online?	1 Yes 2 No			MCS7	
100	Background: pay	Pay	ASK IF MWORKD ER1-2	Ask if employed	GROA	In your main job how much is your GROSS pay, that is before any deductions for tax, national insurance, pension, union dues, and student loans? Include any overtime, bonuses, commissions, tips or tax refunds. You can give a weekly, monthly or yearly amount or an amount covering another period. Please tell me the amount to the nearest pound (£)	RANGE: 0..9999997 (Unfolding brackets for refusals)	What if [^NAME] doesn't know or want to answer? Please provide best estimate. If [^NAME] really doesn't know or doesn't want to answer, choose don't know or prefer not to say.		MCS7	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
101			ASK IF GROA answered	Ask if employed	MPAYP1	What period does this cover?	1 One week 2 Calendar month 3 One year 4 Other period (specify)			MCS7	
102			ASK IF MWORKD ER1-2	Ask if employed	NETA	<p>What was your take-home pay the last time you were paid – that is after any deductions were made for tax, National Insurance, pension, union dues, and student loans?</p> <p>You can give a weekly, monthly or yearly amount or an amount covering another period.</p>	RANGE: 0..999997 (Unfolding brackets for refusals)	What if [^NAME] doesn't know or want to answer? Please provide best estimate. If [^NAME] really doesn't know or doesn't want to answer, choose don't know or prefer not to say.		MCS7	
103			ASK IF NETA answered	Ask if employed	MPAYP2	What period does this cover?	1 One week 2 Calendar month 3 One year 4 Other period (specify)			MCS7	
104			ASK IF NETA answered	Ask if employed	PUSL	Is this your usual take-home pay?	1. Yes 2. No			MCS7	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
105			ASK IF PUSL=2	Ask if not usual take home pay	USLA	What is your usual take-home pay? You can give a weekly, monthly or yearly amount or an amount covering another period.	RANGE: 0..9999997 (Unfolding brackets for refusals)			MCS7	
106			ASK IF USLA answered	Ask if not usual take home pay	MPAYP3	What period does this cover?	1 One week 2 Calendar month 3 One year 4 Other period (specify)			MCS7	
107			ASK IF MWORKDER 3-4	Ask if self-employed	SEPA	It is sometimes difficult for self-employed people to give an exact figure for their income, but could you please think about your take home income in the last 12 months, that is the amount you personally took out of the business after all taxes and costs – about how much is this?	RANGE: 0..9999997 (Unfolding brackets for refusals)			MCS7	
108			?	Ask if second job	SJUA	After tax and deductions, how much are you usually paid in your second job?	RANGE: 0..9999997 (Unfolding brackets for refusals)			MCS8	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
109			?	Ask if second job	MAPYP4	What period does this cover?	1 One week 2 Calendar month 3 One year 4 Other period (specify)			MCS8	
110			ASK ALL	Ask all	OCIN	You have already told us about your income from your main job {REIN=1: 'and second job'}. Do you receive any {DACTIVITY =1,2,3,4,12, or REIN=1: 'other'} income from paid work – that means from regular jobs, odd jobs or casual work?	1. Yes 2. No			MCS8	
111			ASK if OCIN=1	Ask if other work	EASE	After tax and any other deductions, how much did you earn from this work in the last calendar month?	RANGE: 0..999997 (Unfolding brackets for refusals)	Please tell me the amount to the nearest pound (£)		MCS8	
112	Background: parental leave	Parental Leave	ASK IF EMPHIST MISSING	ASK IF MISSING INFORMATION ABOUT JOB FROM EMPLOYMENT HISTORY	MWORKS TOP1	Before the arrival of your baby, did you have a paid job?	1 Yes 2 No			GUS wave 1 adapted	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
113			ASK IF IN PAID WORK PRIOR TO BIRTH DERIVED OR MWORKS TOP1=1	Ask if paid job prior to birth	MWORKS TOP2	Before you brought your baby home, did you stop working?	1 Yes 2 No	NOTE THIS CAN MEAN JOB ENDED OR WENT ON LEAVE		Devised	
114			ASK IF MWORKS TOP2=1	Ask if stopped work prior to birth	MWORKS TOP3	Did the job finish then or did you go on leave?	1 Job finished 2 Went on leave/stopped work in own business	NOTE: OFFICIALLY ON LEAVE BUT DID NOT INTEND TO RETURN = ON LEAVE. Leave includes any periods of annual leave, sickness leave, parental leave or other type of leave from work (paid or unpaid)		GUS wave 1; MCS	
115			ASK IF MWORKS TOP2=1	Ask if stopped work prior to birth	MWORKS TOP4	When did you stop working before your baby arrived? PLEASE ENTER DATE IN FORM DD-MM-YYYY.	DD-MM-YYYY	Include any periods of annual leave, sickness leave or other type of leave from work (paid or unpaid) that led continuously up to the start of formal maternity leave or ending the work		Maternity and Paternity Rights Survey Adapted - interviewer instruction from FI	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
116			IF: MWORKD ER=1-4 OR MWORK1 A=1	Ask if currently working or ever worked	MLEAVE1	Thinking about your ^baby, have you taken parental leave? This includes statutory maternity leave, shared parental leave, workplace leave agreements and any unpaid leave from your job.	1 Yes 2 No			Devised (original devised by ELC after online consultation and then revised by COTs)	
117			MLEAVE1 = 1	Ask if respondent has taken parental leave	MLEAVE2	Are you currently on parental leave?	1 Yes 2 No			Devised (in original COTs first draft June 2021)	
118			MLEAVE1 = 1	Ask if respondent has taken parental leave	MLEAVE2 A	When {does/did} your parental leave finish?	DAY MONTH YEAR			Devised (in original COTs first draft June 2021)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
119			MLEAVE1 = 1	Ask if respondent has taken parental leave	MLEAVE2 B	How long in total {will you have taken by the end of /was} your parental leave?	DAYS WEEKS MONTHS	INTERVIEWER: ENTER A NUMBER IN EITHER THE "DAYS", "WEEKS" OR "MONTHS" BOX (OR MULTIPLE IF THE RESPONDENT ANSWERS USING MULTIPLE PERIODS). INTERVIEWER: IF CURRENTLY ON LEAVE AND NOT SURE HOW LONG IT WILL BE IN TOTAL, ASK THEM TO GIVE THEIR BEST ESTIMATION.		Devised (added by COTs when redoing section January 2022)	
120			MLEAVE2 = 1	Ask if respondent is currently on parental leave	MLEAVE3	Are you planning to return to work after your parental leave finishes?	1 Yes 2 No			Devised (in original COTs first draft June 2021)	
121	Background: education	Education	ASK ALL	Ask to all	MLFTE	I'd now like to ask a few questions about your education. First, how old were you when you left full-time continuous education?	{Range ALLOWED 0..35}	FOR INTERVIEWER: IF LEFT AND LATER RETURNED TO BECOME A FULL-TIME STUDENT, ASK: How old were you when you first left? IF SANDWICH COURSE OR GAP YEAR TREAT AS FULL-TIME CONTINUOUS EDUCATION		MCS1; MCS6	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
								IF STILL IN FULL-TIME EDUCATION, CODE 0			

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
122	Background: education		ASK ALL	Ask to all	MEDUC1	Please tell me which, if any, of the academic qualifications on this card you have?	1. University Higher Degree - Doctorate (PhD) 2. University Higher Degree - Masters Degree (MA, MSc, MPhil) 3. Degree (e.g. BA, BSc) 4. Foundation degree 5. Other degree level qualifications such as graduate membership of professional institutes 6. PGCE (Post-Graduate Certificate of Education) or equivalent 7. Other teaching qualification 8. Nursing or other paramedical qualification 9. Access to Higher Education (HE) Diploma / Scottish Wider Access Programme (SWAP), Accreditation of Prior Learning (APL) / Accreditation of Prior Experiential Learning (APEL) 10. A Level / A2 Level (GCE Advanced Level) 11. AS Level (not complete A Level)	INTERVIEWER PLEASE NOTE: OVERSEAS QUALIFICATIONS: CODE AS NEAREST EQUIVALENT, IF NO EQUIVALENT, CODE AS 'OTHER'. CODE 9 GENERALLY CORRESPONDS TO OVERSEAS QUALIFICATIONS OBTAINED AROUND AGE 18; CODE 14 GENERALLY CORRESPONDS TO OVERSEAS QUALIFICATIONS OBTAINED AROUND AGE 16. CODE ALL THAT APPLY.	SHOWCARD XX Multicod e	BCS70	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							12. Certificate of Sixth Year Studies 13. Advanced Highers 14. Highers 15. GCSE / iGCSE 16. Credit Standard Grade / National 5 / Intermediate 2 17. General Standard Grade / National 4 / Intermediate 1 18. Foundation Standard Grade / National 3 / Access 3 19. Other academic qualification 20. None of these [EXCLUSIVE] -99 Don't know {EXCL.} -98 Prefer not to say {EXCL.}				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
123	Background: education	Education	ASK ALL	Ask to all	MEDUC2	Please tell me which, if any, of the vocational qualifications on this card you have?	<ol style="list-style-type: none"> 1. Professional qualifications at degree level e.g. graduate member of professional institute, chartered accountant or surveyor 2. Nursing or other medical qualifications (below degree level) 3. NVQ or SVQ - Level 4 or 5 4. NVQ or SVQ - Level 3 5. NVQ or SVQ - Level 2 6. NVQ or SVQ - Level 1 7. GNVQ – Advanced 8. GNVQ – Intermediate 9. GNVQ - Level 3 10. GNVQ - Level 2 11. GNVQ - Foundation 12. City & Guilds - Advanced craft, Part III 13. City & Guilds - Craft, Part II 14. City & Guilds - Craft, Part I / d. 15. City & Guilds - Level 3 16. City & Guilds - Level 2 17. City & Guilds - Level 1 18. RSA - Advanced Diploma 	<p>INTERVIEWER: OVERSEAS QUALIFICATIONS: CODE AS NEAREST EQUIVALENT, IF NO EQUIVALENT, CODE AS 'OTHER'. TRADE APPRENTICESHIP S - USE CODE 9</p>	<p>SHOWCARD XX Multicode Note: presented to participants as below:</p> <ol style="list-style-type: none"> 1. Professional qualifications at degree level e.g. graduate member of professional institute, chartered accountant or surveyor 2. Nursing or other medical qualifications (below degree level) <p>NVQ or SVQ 3. Level</p>	BCS70	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							19. RSA - Higher Diploma 20. RSA - RSA Diploma 21. RSA - RSA Stage I, II, III 22. BTEC - Higher Level 23. BTEC - National 24. BTEC - First 25. SCOTVEC - National Certificate 26. SCOTVEC - First or general diploma 27. SCOTVEC - General diploma / d. 28. SCOTVEC - Modules 29. HND or HNC 30. OND or ONCM 31. Junior certificate 32. Other vocational qualifications (including some overseas) 33. None of these qualifications [EXCLUSIVE]		4 or 5 4. Level 3 5. Level 2 6. Level 1 GNVQ 7. Advanced 8. Intermediate 9. Level 3 10. Level 2 11. Foundation City & Guilds 12. Advanced craft, Part III 13. Craft, Part II 14. Craft, Part I / d. 15. Level 3 16. Level 2 17. Level 1 RSA 18.		

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
									Advanced Diploma 19. Higher Diploma 20. RSA Diploma 21. RSA Stage I, II, III BTEC 22. Higher Level 23. National 24. First SCOTVEC 25. National Certificate 26. SCOTVEC First or general diploma 27. SCOTVEC General diploma 28. SCOTVEC Modules 29. HND or HNC 30. OND		

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
									or ONCM 31. Junior certificate 32. Other vocational qualifications (including some overseas) 33. None of these qualifications		

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
124	Background: ethnicity	Parent Birth Country	ALL	Ask to all	MBIRUK	Were you born in the UK?	1 Yes 2 No			NextSteps 32	
125			IF: MBIRUK=2	Ask if born in UK	MBIRCOU UK	In which country were you born?	1. England 2. Scotland 3. Wales 4. Northern Ireland			NextSteps 32	
126			IF: MBIRUK=2	Ask if not born in the UK	MBIRCOU	In which country were you born?	Drop Down Menu		"LOOK UP" if possible or drop down menu/showcard	NextSteps 32	
127	Background: ethnicity	Time living in the UK	IF: MBIRUK=2	Ask if not born in the UK	MMIG	In what year did you first come to the UK to live, even if you have spent time abroad since?	Year			Life Study; Understanding Society	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
128	Background: ethnicity	Ethnicity	ALL	Ask to all	METHNIC	What is your ethnic group?	<p>1 White - English/Welsh/Scottish/Northern Irish/British</p> <p>2 White - Irish</p> <p>3 White - Gypsy or Irish Traveller</p> <p>4 White - Roma</p> <p>5 Any other White background (PLEASE SPECIFY – variable “METHNICa”)</p> <p>6 Mixed/multiple ethnic groups - White and Black Caribbean</p> <p>7 Mixed/multiple ethnic groups - White and Black African</p> <p>8 Mixed/multiple ethnic groups - White and Asian</p> <p>9 Any other mixed/multiple ethnic background (PLEASE SPECIFY – variable “METHNICb”)</p> <p>10 Asian/Asian British - Indian</p> <p>11 Asian/Asian British - Pakistani</p> <p>12 Asian/Asian British - Bangladeshi</p> <p>13 Asian/Asian British - Chinese</p> <p>14 Any other Asian background (PLEASE SPECIFY – variable “METHNICc”)</p>			Census 2021	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							15 Black/African/Caribbean/Black British - African 16 Black/African/Caribbean/Black British - Caribbean 17 Any other Black/African/Caribbean background (PLEASE SPECIFY - variable "METHNICd") 18 Other ethnic group - Arab 19 Any other ethnic group (PLEASE SPECIFY - variable "METHNICe")				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
129	Background: religion	Religion	ALL	Asked to all	MRELIG	What is your religion?	<ul style="list-style-type: none"> 1 No religion 2 Christian (including Church of England, Catholic, Protestant and all other Christian denominations) 3 Buddhist 4 Hindu 5 Jewish 6 Muslim 7 Sikh 8 Any other religion (PLEASE SPECIFY – variable "MRELIGO") 			Census 2021	
130	CASI	CASI Intro	ALL	Asked to all	MRESPECHECK1	Thank you for your time so far today, I just wanted to check that you are comfortable for us to continue?	<ul style="list-style-type: none"> 1. Yes 2. No – exit script and rearrange 			COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
131			SHOW IF NOT FACE-TO-FACE	SHOW IF NOT FACE-TO-FACE	SENSINT RO	<p>I now have some questions which are a bit more personal than the questions I have asked you so far. Please remember if there's a question that you don't want to answer just let me know and we can skip it.</p> <p>I'd like to remind you that all the answers you give will be completely confidential and any information that identifies you will never be shared with anyone outside of the research team.</p>				COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
132	CASI	Acceptance of self-completion and assistance	SHOW IF INTERVIEW IS FACE-TO-FACE	SHOW IF INTERVIEW IS FACE-TO-FACE	SELFCOMP	<p>I now have some questions which are a bit more personal than the questions I have asked you so far. No-one else will be able to find out what you have said, including me.</p> <p>Please try to answer all of the questions. Read everything carefully and take your time to answer each question as truthfully as you can. There are no right or wrong answers. If you come to a question that you don't want to answer or can't answer, you can skip it.</p> <p>Instructions about which keys to press will be shown on the computer screen. If you press the wrong key I can tell you how to change your answer. I can help you as we go along if you'd like me to.</p> <p>If you would like to stop or take a break, please let me know. Do not select the 'stop' button at any point, as we will be unable to continue with the interview.</p> <p>When you get to the end, please tell me and we'll finish off the interview with a few</p>	<p>Interviewer to code: has the respondent accepted the self-completion? Don't know and refusal not allowed</p> <p>1 Accepted as self-completion</p> <p>2 Refused to self complete using the computer</p> <p>3 Not able to self complete using the computer</p>			COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
						<p>more questions.</p> <p>I'd like to remind you that all the answers you give will be completely confidential and any information that identifies you will never be shared with anyone outside of the research team.</p>					

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
133	CASI		ALL	Asked to all	SENSCHECK	<p>INTERVIEWER PLEASE NOTE: SOME OF THE FOLLOWING QUESTIONS SHOULD NOT BE ASKED IF THE RESPONDENT IS HAVING ASSISTANCE FROM A FRIEND OR FAMILY MEMBER IN COMPLETING THE SURVEY, E.G. AS A PROXY, A TRANSLATOR, OR FOR SOME OTHER REASON.</p> <p>PLEASE RECORD WHETHER THEY ARE BEING ASSISTED BY A FRIEND OR FAMILY MEMBER IN COMPLETING THIS SECTION INTERVIEW SO THESE QUESTIONS WILL BE SKIPPED WHERE RELEVANT.</p>	<p>1 YES – RESPONDENT IS BEING ASSISTED BY A FRIEND OR FAMILY MEMBER</p> <p>2 NO – RESPONDENT IS NOT BEING ASSISTED BY A FRIEND OR FAMILY MEMBER</p> <p>{No DK/REF}</p>			COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
134	CASI		IF: SELFCOM P = 2	Ask if they refused self-completion	SCRF	Interviewer: please code reason(s) why respondent refused.	<ul style="list-style-type: none"> 1 Didn't like computer 2 Child crying/needed attention etc. 3 Worried about confidentiality 4 Concerned because someone else was present 5 Couldn't be bothered 6 Interview taking too long/ ran out of time 7 Other (SPECIFY – variable "SCRF0") 			COTs	
135	CASI		IF: SELFCOM P = 3	Ask if they are not able to do this section via self-completion	SCUN	Interviewer: please code reason(s) why respondent unable to complete self completion.	<ul style="list-style-type: none"> 1 Eyesight problems 2 Reading/literacy problems 3 Language problems 4 Other health problems or disability 5 Other (SPECIFY – variable "SCUN0") 			COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
136	CASI		ASK IF MINTMODE=2,3 OR (MINTMODE=1 AND SELFCOMP<>1	Ask if interview not f2f, or if interview f2f but did not accept selfcomplete	SHOWCHECK	<p>INTERVIEWER: SOME SENSITIVE QUESTIONS IN THIS SECTION WILL BE ASKED USING SHOWCARDS, WITH THE QUESTION WRITTEN AT THE TOP OF THE SHOWCARD.</p> <p>FOR THESE QUESTIONS YOU WILL NOT NEED TO READ OUT THE QUESTION – JUST DIRECT THE RESPONDENT TO THE CORRECT SHOWCARD AND RECORD THEIR ANSWER.</p> <p>IF THE RESPONDENT IS UNABLE TO ACCESS THE SHOWCARDS, OR IS UNABLE TO READ OR USE THEM, PLEASE CODE 2</p>	<p>1 ABLE TO ACCESS AND USE SHOWCARDS</p> <p>2 NOT ABLE TO ACCESS AND USE SHOWCARDS</p>			COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
137	CASI		ASK IF SHOWCH ECK=2	Ask if not able to access and use showcards	SHOWCH ECK2	<p>INTERVIEWER: SINCE THE RESPONDENT IS UNABLE TO ACCESS/USE SHOWCARDS, PLEASE CONTINUE TO READ OUT ALL QUESTIONS AND ANSWER CATEGORIES.</p> <p>IF THERE ARE ANY QUESTIONS THAT THE RESPONDENT IS UNCOMFORTABLE ANSWERING, CODE - 98 Prefer not to say.</p>				COTs	
138	CASI		IF: SELFCOM P = 1	Ask if they are doing this section via self-completion	SCIN	<p>TEST1: "Have you used a computer before?"</p> <p>TEST2: "I like using computers"</p>	<p>TEST 1: Yes/no</p> <p>TEST 2: Strongly agree/disagree</p>			COTs	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
139	CASI: Bonding	Bonding	ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON1	The next questions are about the different sorts of feelings parents might have when caring for young children. For each one please say which is closest to how you feel.		INTERVIEW READS: "These questions are written on the showcards, starting at SHOWCARD X. On each card please read the question to yourself and give me the number that corresponds to your answer."		MCS1	
140			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON1	First, when I am caring for ^Jack, I get feelings of annoyance or irritation...	1 ...almost all the time, 2 very frequently, 3 frequently, 4 occasionally, 5 very rarely, 6 or never? 7 Can't say			MCS1	
141			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON2	...when I am not with ^Jack, I find myself thinking about ^him...	1 ...almost all the time, 2 very frequently, 3 frequently, 4 occasionally, 5 very rarely, 6 or never? 7 Can't say			MCS1	
142			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON3	When I have to leave ^Jack...	" 1 ...I always feel rather sad 2 I often feel rather sad 3 I have mixed feelings of both sadness and relief 4 I often feel rather relieved 5 I always feel rather relieved 6 Can't say "			MCS1	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
143			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON4	When I am caring for ^Jack, I feel...	1 ...very incompetent and lacking in confidence 2 fairly incompetent and lacking in confidence 3 fairly competent and confident 4 very competent and confident 5 Can't say			MCS1	
144			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON5	Usually when I am with ^Jack...	1 ...I am very impatient 2 I am a bit impatient 3 I am fairly patient 4 I am extremely patient 5 Can't say			MCS1	
145			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON6	Regarding the things that ^we have had to give up because of ^Jack...	1 ...I find that I resent it quite a lot 2 I find that I resent it a fair amount 3 I find that I resent it a bit 4 I don't resent it at all 5 Can't say			MCS1	
146			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON7	I really cannot bear it when my baby cries.	1 I never feel this way 2 This is how I sometimes feel 3 This is often how I feel 4 This is exactly how I feel			ALSPAC Pregnancy, Birth and Infancy sweep (8 mths, 21 mths)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
147			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MPSINTR O	Please rate how much you agree or disagree with each of the following statements in relation to how things are for you and your {MCHILD} right now. Remember, there no right or wrong answers, just try to be as honest as possible.				The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	
148			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON8	Caring for my child sometimes takes more time and energy than I have to give	Strongly agree, agree, not sure, disagree, strongly disagree			The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
149			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON9	I sometimes worry whether I am doing enough for my child				The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	
150			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON10	The major source of stress in my life is my child				The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
151			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON11	Having a child leaves little time and flexibility in my life				The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	
152			ALL, SENSCHCK = 2	Ask all (only if not assisted)	MBON12	Having a child has been a financial burden				The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
153			ALL, SENSCHE CK = 2	Ask all (only if not assisted)	MBON13	It is difficult to balance different responsibilities because of my child				The Parental Stress Scale (Berry & Jones, 1995) Parental Stressors subscale (Growing Up in Ireland)	
154	CASI: health	Parent General Health	ALL	Ask all	MPGH1	<p>These next few questions ask about your health, to help us understand the health difficulties that families with young children have.</p> <p>How is your health in general?</p>	<p>1 Excellent 2 Very good 3 Good 4 Fair 5 Poor</p>			SF-36 question and response options, with introduction from SEED w1. SF-36 response options used in NCDS, BCS, Next Steps, MCS age 17.	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
155	CASI: health	Parental longstanding illness	ALL	Ask all	MPGH2	Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?	1 Yes 2 No			ONS; MCS6 (for parent); NS32; MCS7 for CM (varname CLSM)	
156	CASI: health	Parental longstanding illness	IF MPGH=1	Ask if they do have a condition lasting 12 months or more	MPGH2B	Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?	1. Yes, a lot 2. Yes, a little 3. Not at all			ONS; NS32; MCS6 (for parent); MCS7 for CM (varname CLSL)	
157	CASI: Life Events	Life Events	ALL, SENSHECK = 2	Ask all (only if not assisted)	MLIEVINTRO	The next few questions are about events which may have brought changes in your life. {If SELFCOMP=1, TEXTFILL: "Below is a list of events which may have brought changes in your life. Please select any whether any of these that have occurred during your pregnancy or since your baby was born"} "Below is a list of events which may have brought changes in your life. Please select any whether any of these that have occurred during your pregnancy or since your baby was born"		{IF MINTMODE=2,3 OR (MINTMODE=1 AND SELFCOMP<>1) "On showcard F6 are a number of events which may have brought changes in your life. Please select any whether any of these that have occurred during your pregnancy or since your baby was born.		ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
158	CASI: Life Events				MLIEV1	A serious illness or injury to yourself.	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options	
159	CASI: Life Events		ALL, SENSHECK = 2	Ask all (only if not assisted)	MLIEV2	A serious illness or injury to a close relative.	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options; CLS covid surveys 2&3	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
160	CASI: Life Events				MLIEV3	The death of a child, parent or partner.	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options; CLS covid surveys 2&3	
161	CASI: Life Events				MLIEV4	The death of other relative, or close friend.	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
162	CASI: Life Events				MLIEV5	Separation/break-up/divorce from your partner	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options	
163	CASI: Life Events				MLIEV6	Serious problem with a close friend, neighbour or relative.	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options	
164	CASI: Life Events				MLIEV7	Made redundant or lost job or business (either temporarily or permanently)	1 Yes, during pregnancy 2 Yes, after birth 3 No			COSMO 1	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
165	CASI: Life Events				MLIEV8	Major financial crisis(e.g. difficulties paying bills/rent/mortgage/re-payments on debts)	1 Yes, during pregnancy 2 Yes, after birth 3 No			CLS COVID Survey 2 &3	
166	CASI: Life Events				MLIEV9	Trouble with police and court appearance.	1 Yes, during pregnancy 2 Yes, after birth 3 No			ALSPAC (List of events and threatening experiences (Brugha et al., 1985) adapted response options	
167	CASI: Life Events				MLIEV10	Serious housing difficulties such as being evicted or made homeless	1 Yes, during pregnancy 2 Yes, after birth 3 No			CLS COVID Surveys Adapted	
168	CASI: Life Events	Abuse	ALL, SENSCHCK = 2	Ask all (only if not assisted)	MRACA13	Have you or an immediate family member been subject to any abuse, attack or threat because of race or religion?	1 Yes, during pregnancy 2 Yes, after birth 3 No	Interviewer READS: "The next few questions are written on the showcards, starting at SHOWCARD X. On each card please read the question to yourself and give me the number that corresponds to your answer."		CLS COVID Surveys adapted	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
169	CASI: Life Events		ALL, SENSCHCK = 2	Ask all (only if not assisted)	MRACA14	Have you or an immediate family member been subject to any abuse, attack or threat for another reason?	1 Yes, during pregnancy 2 Yes, after birth 3 No	Interviewer to tell respondent to refer to showcard X		CLS COVID Surveys	
170	CASI: Social Support	Social Support	ALL	Ask all	MSSQintro	Please indicate to what extent each of the following statements describes your current relationships with the people in your life.	1. 1 Not true at all 2. 2 3. 3 4. 4 5. 5 Very true	Interviewer to tell respondent to refer to showcard F9		Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	
171	CASI: Social Support		ALL	Ask all	MSSQ1	I experience a lot of understanding and support from others.				Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	
172	CASI: Social Support		ALL	Ask all	MSSQ2	I know a very close person whose help I can always count on.				Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
173	CASI: Social Support		ALL	Ask all	MSSQ3	If necessary, I can easily borrow something I might need from neighbours or friends				Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	
174	CASI: Social Support		ALL	Ask all	MSSQ4	I know several people who I enjoy doing things with.				Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	
175	CASI: Social Support		ALL	Ask all	MSSQ5	When I am sick, I can ask friends and family to take care of important matters for me without hesitation				Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	
176	CASI: Social Support		ALL	Ask all	MSSQ6	If I am feeling down, I know who I can go to.				Brief form of the Perceived Social Support Questionnaire (F-SozUK-6)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
177	CASI: Life Satisfaction	Life Satisfaction	ALL	Ask all	LIFESAT	Overall, how satisfied are you with your life nowadays, where 0 means 'not at all' and 10 means 'completely'?	"Not at all satisfied 0 1 2 3 4 5 6 7 8 9 Completely satisfied 10 "				
178	CASI: Loneliness	Loneliness	ALL	Ask all	MLON3	How often do you feel lonely?	Hardly ever or never Some of the time Often			ONS advised questions on loneliness taken from ELSA (UCLA Loneliness Scale) and Community Life Survey; SC-NCDS62	
179	CASI: Couple relationship	Couple Relationship	ASK IF SENSCHK = 2 AND SELFCOMP=1 and MRELAT= 1 or 2 OR MBF3 = 1	Ask if in a relationship (only for those who are not being assisted)	MCOUPINT	The next few questions are about your relationship with ^partner					

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
180	CASI: Couple relationship		ASK IF SENSCK = 2 AND SELFCOM P=1 and MRELAT= 1 or 2 OR MBF3 = 2	Ask if in a relationship (only for those who are not being assisted)	MCOUP1	On a scale from 1 to 7, where '1' means that you are very unhappy and '7' means that you are very happy, how happy is your relationship with your partner, all things considered?	1. Very unhappy 2. 3. 4. 5. 6. 7. Very happy			NCDS62, BCS50, NS32, Covid Surveys	
181	CASI: Couple relationship		ASK IF SENSCK = 2 AND SELFCOM P=1 and MRELAT= 1 or 2 OR MBF3 = 3	Ask if in a relationship (only for those who are not being assisted)	MCOUP2	Please indicate the extent to which the following statement is true... I have a warm and comfortable relationship with my partner.	0 Not at all true 1 A little true 2 Somewhat true 3 Mostly true 4 Almost completely true 5 Completely true	Interviewer to tell respondent to refer to showcard XX		CSI-4 (Couple Satisfaction Index)	
182	CASI: Couple relationship		ASK IF SENSCK = 2 AND SELFCOM P=1 and MRELAT= 1 or 2 OR MBF3 = 4	Ask if in a relationship (only for those who are not being assisted)	MCOUP3	How rewarding is your relationship with your partner?	0 Not at all 1 A little 2 Somewhat 3 Mostly 4 Almost completely 5 Completely	Interviewer to tell respondent to refer to showcard XX		CSI-4 (Couple Satisfaction Index)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
183	CASI: Couple relationship		ASK IF SENSCK = 2 AND SELFCOMP = 1 and MRELAT = 1 or 2 OR MBF3 = 5	Ask if in a relationship (only for those who are not being assisted)	MCOUP4	In general, how satisfied are you with your relationship?	0 Not at all 1 A little 2 Somewhat 3 Mostly 4 Almost completely 5 Completely	Interviewer to tell respondent to refer to showcard XX		CSI-4 (Couple Satisfaction Index)	
184	CASI: Couple relationship	Co-parenting Disagreement	ASK IF SENSCK = 2 and MRELAT = 1 or 2	Ask if there is a partner in the household, and they are not being assisted	MDISP	How often do you and ^partner disagree over issues relating to bringing up your ^child/children?	1 Very Often 2 Quite Often 3 Sometimes 4 Rarely 5 Never			GUS adapted	
185	CASI: Couple relationship		ASK IF SENSCK = 2 and ASK IF MOTHP = 1 OR 2	Ask if there is a non-resident parent and they are not being assisted	MDISF	How often do you and ^NonResidentParent disagree over issues relating to bringing up the ^child/children?				GUS adapted	
186	CASI: Couple relationship		ASK IF SENSCK = 2 and MPARENTNONPART = 1	Ask if there is a resident parent of the child who is not a partner in the household, and they are not being assisted	MDISNONPART	How often do you and ^ResidentParentNotPartner disagree over issues relating to bringing up the ^child/children?				GUS adapted	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
187	CASI	Parent mental health (PHQ & GAD)	ASK IF SENSCHCK = 2	Ask only if they are not being assisted and they are completing it themselves.	MMHIntro	The next few questions are about your health and wellbeing, including symptoms of depression and anxiety and drug and alcohol consumption You can skip any questions you don't wish to answer and all personal information is kept confidential.					
188	CASI: Mental Health		ASK IF SENSCHCK = 2	Ask if they are not being assisted	MPHGA1	Over the last 2 weeks, how often have you been bothered by Little interest or pleasure in doing things.	1 Not at all 2 Several days 3 More than half the days 4 Nearly every day	Interviewer to tell respondent to refer to showcard XX		Short PHQ and GAD (PHQ-4); NS32; Covid Surveys	
189	CASI: Mental Health		ASK IF SENSCHCK = 2		MPHGA2	Feeling down, depressed or hopeless.		Interviewer to tell respondent to refer to showcard XX		Short PHQ and GAD (PHQ-4); NS32; Covid Surveys	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
190	CASI: Mental Health		ASK IF SENSCHCK = 2		MPHGA3	Feeling nervous, anxious or on edge.		Interviewer to tell respondent to refer to showcard XX		Short PHQ and GAD (PHQ-4); NS32; Covid Surveys	
191	CASI: Mental Health		ASK IF SENSCHCK = 2		MPHGA4	Not being able to stop or control your worrying.		Interviewer to tell respondent to refer to showcard XX		Short PHQ and GAD (PHQ-4); NS32; Covid Surveys	
192	CASI: Mental Health	Parent mental health (Kessler-6)	ASK IF SENSCHCK = 2	Ask if they are not being assisted	MKESIINTRO	During the past 30 days, about how often did you feel...	1 All of the time 2 Most of the time 3 Some of the time 4 A little of the time 5 None of the time			Kessler 6 Inventory	
193	CASI: Mental Health		ASK IF SENSCHCK = 2		MKES1	...nervous?		Interviewer to tell respondent to refer to showcard XX	Kessler 6 Inventory		
194	CASI: Mental Health		ASK IF SENSCHCK = 2		MKES2	...hopeless?		Interviewer to tell respondent to refer to showcard XX	Kessler 6 Inventory		
195	CASI: Mental Health		ASK IF SENSCHCK = 2		MKES3	...restless or fidgety?		Interviewer to tell respondent to refer to showcard XX	Kessler 6 Inventory		
196	CASI: Mental Health		ASK IF SENSCHCK = 2		MKES4	...so depressed that nothing could cheer you up?		Interviewer to tell respondent to refer to showcard XX	Kessler 6 Inventory		
197	CASI: Mental Health		ASK IF SENSCHCK = 2		MKES5	...that everything was an effort?		Interviewer to tell respondent to refer to showcard XX	Kessler 6 Inventory		

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
198	CASI: Mental Health		ASK IF SENSCHCK = 2		MKES6	...worthless?		Interviewer to tell respondent to refer to showcard XX		Kessler 6 Inventory	
199	CASI: Mental Health	Treatment for depression / anxiety	ASK IF MPGH4 = 1	Ask if they are not being assisted	MPGH4	Have you ever consulted a doctor or other professional for depression or anxiety?	1 Yes 2 No	Interviewer to tell respondent to refer to showcard XX		SEED wave 1 adapted; MCS1, NSSure Start, Growing Up in Scotland wave 1	
200	CASI: Mental Health		ASK IF SENSCHCK = 2	Ask if they have consulted a professional for depression/anxiety.	MPGH4A	Have you consulted a doctor or other professional for depression or anxiety since the baby was born?	1 Yes - after [TEXTFILL CHILD NAME] was born 2 Yes - before and after [TEXTFILL CHILD NAME] was born 3 No - only before [TEXTFILL CHILD NAME] was born	Interviewer to tell respondent to refer to showcard XX		Devised by COTs based on SEED wave 1	
201	CASI: Mental Health		ASK IF SENSCHCK = 2 AND MPGH5 = 1	Ask if they are not being assisted	MPGH5	Have you ever had treatment for depression or anxiety? This includes any kind of medication or therapy.	1 Yes 2 No	Interviewer to tell respondent to refer to showcard XX		SEED wave 1 adapted; MCS1, NSSure Start, Growing Up in Scotland wave 1	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
202	CASI: Mental Health		ASK IF SENSCK = 2	Ask if they are not being assisted, and if they have ever had treatment	MPGH6	Have you had treatment for depression or anxiety since your ^child/children ^was/were born? This includes any kind of medication or therapy.	1 Yes - after [TEXTFILL CHILD NAME] was born 2 Yes - before and after [TEXTFILL CHILD NAME] was born 3 No - only before [TEXTFILL CHILD NAME] was born	Interviewer to tell respondent to refer to showcard XX		Devised by COTs based on SEED wave 1	
203	CASI: Substance Use		ASK IF SENSCK = 2	All	SUINTRO	The next few questions are about alcohol, smoking and drugs					
204	CASI: Substance Use	Alcohol	SENSCK = 2 and MRELAT= 8 for {MNAME5}'s relationship to {MNAME1-4} AND MSEX5=2	Ask if birth/biological mother, and is not being assisted	DRINK1	Thinking back to just before you were pregnant with ^child's name/child names, which of these best describes how often you usually drank then?	1 Every day 2 5-6 times a week 3 3-4 times a week 4 1-2 times a week 5 Less than once a month 6 Never - did not drink at all 7 Can't say 8 {IF MINTMODE=2,3 OR (MINTMODE=1 AND SELFCOMP<>1) TEXTFILL: "SPONTANEOUS - not applicable, respondent did not carry/was not pregnant with the baby"; ELSE "Not applicable, I was not pregnant with this baby"}				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
205	CASI: Substance Use		SENSCHECK = 2 and MRELAT= 8 for {MNAME5}'s relationship to {MNAME1-4} AND MSEX5=2	Ask if birth/biological mother, and is not being assisted	MMaHalc04	Thinking back to when you were pregnant with your ^child/children, which of these best describes how often you usually drank then?	1 Every day 2 5-6 times a week 3 3-4 times a week 4 1-2 times a week 5 Less than once a month 6 Never - did not drink at all 7 Can't say 8 {IF MINTMODE=2,3 OR (MINTMODE=1 AND SELFCOMP<>1) TEXTFILL: "SPONTANEOUS - not applicable, respondent did not carry/was not pregnant with the baby"; ELSE "Not applicable, I was not pregnant with this baby"}				
206	CASI: Substance Use					DRINKING BY TRIMESTER TBC					
207	CASI: Substance Use		ASK IF SENSHECK = 2	Ask if they are not being assisted	MMaHalc01	How often, on average, do you have an alcoholic drink?	1 Every day 2 4-6 times a week 3 2 to 3 times a week 4 Once a week 5 2 to 3 times a month 6 Once a month or less 7 Not in the last year 8 Do not drink at all 9 Can't say				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
208	CASI: Substance Use		ASK IF SENSCK = 2	Ask if they are not being assisted	MMaHalco2	In an average week, how many units do you drink? By a unit, we mean ½ a pint of beer, a glass of wine or a single measure of spirit or liqueur.	Record Number				
209	CASI: Substance Use		ASK IF SENSCK = 2	Ask if they are not being assisted	MMaHalco3	Thinking of the last 12 months, on average, how often would you have 5 or more units of alcohol on one occasion?	1 Every day 2 5-6 times a week 3 3-4 times a week 4 1-2 times a week 5 Less than once a month 6 Never				
210	CASI: Substance Use	Smoking	SENSCK = 2	Ask if not being assisted	MMaHcigo2	Now thinking about smoking, would you say that...	1. ...you've never smoked cigarettes 2. you used to smoke cigarettes but don't at all now 3. you now smoke cigarettes occasionally but not every day or 4. you smoke cigarettes every day?				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
211	CASI: Substance Use		SENSCHECK = 2 and MRELAT= 8 for {MNAME5}'s relationship to {MNAME1-4} AND MSEX5=2	Ask if birth/biological mother, and is not being assisted	CIPR	Just before you were pregnant with ^child's name/child names, did you smoke cigarettes at all?	1 Yes, every day 2 Yes, most days 3 Yes, occasionally 4 No 5 Spontaneous (did not carry the child)				
212	CASI: Substance Use		SENSCHECK = 2 and MRELAT= 8 for {MNAME5}'s relationship to {MNAME1-4} AND MSEX5=2	Ask if birth/biological mother, and is not being assisted	MMaHcig01	During your pregnancy with your {MCHILD}, did you smoke cigarettes at all?	1 Yes, occasionally 2 Yes, most days 3 No 4 {IF MINTMODE=2,3 OR (MINTMODE=1 AND SELFCOMP<>1) TEXTFILL: "SPONTANEOUS - not applicable, respondent did not carry/was not pregnant with the baby"; ELSE "Not applicable, I was not pregnant with this baby"} -99 Don't know				
213	CASI: Substance Use					SMOKING BY TRIMESTER TBC					
214	CASI: Substance Use		SENSCHECK = 2 and MaHcig02 =1	Ask if they smoke and are not being assisted	MMaHcig03	How many cigarettes do you usually smoke in one day?	RANGE 1..100				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
215	CASI: Substance Use		SENSCHE CK = 2	Ask if not being assisted	MMaHcig04	Including yourself, how many of the people who live with you ever smoke cigarettes in the same room as ^childname since [textfill childname/names] was/were born?	RANGE				
216	CASI: Substance Use		SENSCHE CK = 2	Ask if not being assisted	MMaHcig05	Do you find that your baby/babies is/are ever near people who are smoking in any of these places?	1 At home 2 In a car 3 In other people's homes 4 In other places 5 No, none of these				
217	CASI: Substance Use	E-cigarettes	SENSCHE CK = 2	Ask if not being assisted	VAPEINTRO	The next questions are about electronic nicotine products, such as e-cigarettes, vape pens, personal vaporizers and mods, e-cigars, e-pipes, e-hookahs, and hookah pens. Some common brands include Vuse, Blu, Logic, MarkTen, JUUL, NJOY, eGo, and iTaste.		These products are battery-powered and produce vapor or aerosol instead of smoke. Some electronic nicotine products can be bought as one-time, disposable products, while others can be bought as reusable kits with cartridges or a tank system. They typically use a nicotine liquid called "e-liquid", although the amount of nicotine can vary and some may not contain any nicotine at all.			

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
218	CASI: Substance Use		SENSCHECK = 2	Ask if not being assisted	VAPE1	Now thinking about electronic nicotine products, would you say that...	1. ...you've never used them 2. you used to use them but don't at all now 3. you now use them occasionally but not every day or 4. you use them every day?				
219	CASI: Substance Use		SENSCHECK = 2 and MRELAT= 8 for {MNAME5}'s relationship to {MNAME1-4} AND MSEX5=2	Ask if birth/biological mother, and is not being assisted	MMaHvape01	During your pregnancy with your ^child/children, did you use electronic nicotine products at all?	1 Yes, occasionally 2 Yes, most days 3 No 4 {IF MINTMODE=2,3 OR (MINTMODE=1 AND SELFCOMP<>1) TEXTFILL: "SPONTANEOUS - not applicable, respondent did not carry/was not pregnant with the baby"; ELSE "Not applicable, I was not pregnant with this baby"}				
220	CASI: Substance Use		SENSCHECK = 2	Ask if not being assisted	MMaHvape04	Including yourself, how many of the people who live with you have smoked e-cigarettes/vape inside the house, since your ^child/children ^was/were born?	Record Number				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
221	CASI: Disadvantage	Disadvantage	ALL, SENSCHCK = 2	Ask all (only if not assisted)	MFMAN	How well would you say you are managing financially these days?	<ol style="list-style-type: none"> 1. Living comfortably 2. Doing alright 3. Just about getting by 4. Finding it quite difficult 5. Finding it very difficult 	Questions displayed on SHOWCARD XX - respondent to give number that corresponds to answer.		MCS1-8; COSMO 1; NS32	
222	CASI: Disadvantage		ALL, SENSCHCK = 2	Ask all (only if not assisted)	MHOMQUAL	Do you currently have any of the issues listed below in any of your rooms? Please select all that apply	<ol style="list-style-type: none"> 1. Problems with damp, mould or condensation 2. Problems with heating or ventilation 3. Problems with domestic hygiene, pests or refuse 4. Problems with faulty appliances (e.g. boiler, cooker or oven, washing machine) 5. Other (please specify – variable "MHOMQUALO") 6. None of these {EXCL.} 	Questions displayed on SHOWCARD XX - respondent to give number that corresponds to answer.		COSMO 1	PI and OHF
223	CASI: Disadvantage		ALL, SENSCHCK = 2	Ask all (only if not assisted)	MFINS	Since your ^child/children ^was/were born, have you (or other adults in your household) ever cut the size of your meals or skipped meals because there wasn't enough money for food?	<ol style="list-style-type: none"> 1 Yes 2 No 	Questions displayed on SHOWCARD XX - respondent to give number that corresponds to answer.		Food Standards Agency Food and You surveys	PI and OHF

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
224	CASI: Disadvantage		ALL, SENSHECK = 2	Ask all (only if not assisted)	MNAPP	Do you ever feel that you cannot afford to buy essential baby items like nappies and baby clothes as often as you would like?	1 Yes 2 No	Questions displayed on SHOWCARD XX - respondent to give number that corresponds to answer.		adapted from Smith et al., 2013 Paediatrics	PI and OHF
225	PI: Details of other parent (not fully resident and/or not PI's partner)	Details of biological parent who is not the PI's partner	DERIVED VARIABLE	Derive whether there is a resident biological parent of baby who is not a partner of PI/OHF	MPARENT NOTPART	1 IF THERE IS A RESIDENT NON-PARTNER BIOLOGICAL PARENT IN THE HH, I.E. IF ANY MNAME6+ PERSON HAS RELATIONSHIP TO COHORT CHILD [MCHILDNAME1-4] OF MRELAT=8 WHO DOES NOT HAVE RELATIONSHIP TO PI [MNAME5] OF MRELAT=1 OR 2 2 IF THERE IS NO RESIDENT NON-PARTNER BIOLOGICAL PARENT IN THE HH				COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
226			IF: MPAREN TNOTPAR T=1	Ask if there is a biological parent not-partner resident in HH	MNOTPARTS	You told me about your ^baby's other parent, could you tell me their last name?	OPEN: {non-partner biological parent}'s surname			COTs	PI only
227			IF: MPAREN TNOTPAR T=1	Ask if there is a biological parent not-partner resident in HH	MRESFLI VELSE	Does ^resident parent currently only live here or do they sometimes live somewhere else?	1 Yes - ONLY lives here 2 No - sometimes lives somewhere else	INTERVIEWER: IF THE FAMILY HAS A SECOND HOME CODE AS "YES - ONLY LIVES HERE" IF OTHER PARENT IS SOMETIMES WORKING AWAY PLEASE CODE AS "YES - ONLY LIVES HERE"		Seed wave 1 adapted by COTs/ELC	PI only
228	PI: Other parent details	Biological parent not-partner living in HH FT or PT	MRESFLI VELSE=2	Ask if biological parent not-partner is a part-time resident	MBRESFPT	Does your ^baby ever stay overnight with ^part-time resident parent at their other place?	1. Yes 2. No			Fatherhood Institute ESRC Scoping work	PI only
229			IF: MBFRESP T=1	Ask if baby spends overnights with the biological parent non-partner	MBRESFPT1	On average, how many times a month does your ^baby stay overnight with ^part-time resident parent at their other place?	1. TYPE IN: RANGE BETWEEN [0-31] 2. Once every few months 3. Less often			Fatherhood Institute ESRC Scoping work	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
230	PI: Other parent details	Informant's relationship to resident biological parent not-partner	IF: MPAREN TNOTPART =1 & MRELAT OF PCG=8	Ask if there is a biological parent not-partner resident in HH AND respondent is biological parent	MNOTPARTC	Just to double check, do you consider yourself and ^resident parent to be a couple ?	1.Yes 2.No			Seed W1	PI only
231			IF: MNOTPARTC = 2	Ask if PI do not consider themselves to be in a relationship with parent not-partner	MNOTPARTCLONG	At the time your relationship with ^resident parent ended, how long had you been together as a couple?	1.TYPE IN: ALLOW EITHER NEAREST WEEKS, MONTH OR YEAR 2. We were never a couple	INTERVIEWER, IF NECESSARY: Please include time as a couple whether or not living together INTERVIEWER: IF DK, ENCOURAGE AN ESTIMATE/BEST GUESS		Seed W1 adapted	PI only
232			IF: MNOTPARTCLONG <2	Ask if the PI has been together some time with parent non-partner	MNOTPARTSEP	Could I check what month and year you separated?	MM/YYYY	INTERVIEWER: IF DK, ENCOURAGE AN ESTIMATE/BEST GUESS		Seed W1 adapted	PI only
233			IF: MNOTPARTC = 1	Ask if PI do consider themselves to be in a relationship with parent not-partner	MNONPARTCOUPLE	How long have you and ^resident parent been a couple?	TYPE IN: BOXES FOR EITHER NEAREST WEEK, MONTH, OR YEAR	INTERVIEWER: ADD IF NECESSARY: Include time as a couple whether or not living together		Seed W1 adapted	PI only
234			MPAREN TNOTPART =1 & MRELAT OF PCG=8	Ask if there is a biological parent not-partner resident in HH AND respondent	MNONPARTMAR	Are you currently or have you ever been married to or in a civil partnership with ^non-resident parent?	Yes – Currently married/ in a civil partnership with them No – Never married to them/in a civil partnership with them No – No longer			COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
				is biological parent			married to them/in a civil partnership with them				
235		Contact with birth family if adopted	IF: PCG MRELAT= 9, 10 to CHILD and MRELAT= 8 FOR NO PERSON IN HH	Ask if PI is adoptive parents/foster parents and there is no biological parent in HH	MBIRTHP	Does ^baby have any contact with their biological/birth family?	..READ OUT.. 1 Yes, more than once a week 2 Yes, about once a week 3 Yes, about once a month 4 Yes, less than once a month 5 No 6 SPONTANEOUS: Both biological/birth parents have passed away			COTs	PI only
236	PI: Other parent details	Non-resident parent involvement in child's life	IF: MRELAT= 8 for exactly 1 HH member	Ask if there is 1 and only 1 birth/biological parent in HH	MOTHP	Is ^baby's other biological/birth parent involved in your ^baby's life?	..READ OUT.. 1 Yes – sees the ^baby 2 Yes – does not see the ^baby but is involved in some other way (e.g. financial support) 3 No – not involved in the ^baby's life in any way 4 No – parent has passed away 5 SPONTANEOUS: parent is not known 6 SPONTANEOUS: donor who respondent does not consider to be a parent	INTERVIEWER: ADD IF NECESSARY: If more than one other birth/biological parent answer about the parent you consider to be most involved		COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
237	PI: Other parent details	Non-resident parent's name and surname	DERIVED VARIABLE	Derive whether there is a non-resident parent, even if not involved in child's life	MNONRE SP	1 IF MOTHP=1,2 OR 3 ELSE MNONRESP=2				COTS	PI only
238	PI: Other parent details		IF: MNONRE SP=1	Ask if there is a non-resident parent, even if not involved	MNONRE SPN	Could you tell me their first name ?	Open: Name	INTERVIEWER: IF RESPONDENT WOULD PREFER NOT TO SAY, ASK FOR A PSEUDONYM E.G. "Other parent", SO THAT THE SCRIPT KNOWS HOW TO REFER TO THAT PERSON.		COTS	PI only
239	PI: Other parent details		IF: MOTHP = 1 or 2	Ask if there is a non-resident parent who is involved in some way	MNONRE SPS	Could you tell me their last name?	Open: Surname			COTS	PI only
240	PI: Other parent details	Non-resident parent's age and gender	IF: MNONRE SP=1	Ask if there is a non-resident parent, even if not involved	MBF1	And can I just check, what is ^non-resident parent's gender?	1 Male 2 Female 3 Other (specify) [variable label "MBF1O"]			Next Steps 32 adapted	PI only
241	PI: Other parent details		IF: MNONRE SP=1	Ask if there is a non-resident parent, even if not involved	MBF2	What is ^non-resident parent's date of birth?	DD/MM/YYYY			Seed W1 adapted	PI only
242	PI: Other parent details		IF: MBF2=-99 OR -98	Ask if DOB of non-resident parent is unknown or refused	MBF2A	What was ^non-resident parent's age on their last birthday?	Range			Seed W1, Next Steps Age 32	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
243	PI: Other parent details	Non-resident parent's relationship to other parent	IF: MNONRE SP=1 and PCG is MRELAT=8	Ask if there is a non-resident parent, even if not involved AND respondent is the biological parent of the child	MBF3	Just to double check, do you consider yourself and ^non-resident parent to be a couple ?	1.Yes 2.No			SEED w1	PI only
244	PI: Other parent details		IF: MBF3 = 2	Ask if do not consider themselves to be in a relationship with non-resident parent	MBF4	At the time your relationship with ^non-resident parent ended, how long had you been together as a couple?	1.TYPE IN: ALLOW EITHER NEAREST WEEKS, MONTH OR YEAR 2. We were never a couple	INTERVIEWER, IF NECESSARY: Please include time as a couple whether or not living together INTERVIEWER: IF DK, ENCOURAGE AN ESTIMATE/BEST GUESS		Seed W1 adapted	PI only
245	PI: Other parent details		IF: MBF3=2 and MBF4<>2	Ask if the PI has been together some time with non-resident parent	MBF5	Could I check what month and year you separated?	MM/YYYY	INTERVIEWER: IF DK, ENCOURAGE AN ESTIMATE/BEST GUESS		Seed W1 adapted	PI only
246	PI: Other parent details		IF: MBF3 = 1	Ask if PI do consider themselves to be in a relationship with non-resident parent	MBF6	How long have you and ^non-resident parent been a couple?	TYPE IN: BOXES FOR EITHER NEAREST WEEK, MONTH, OR YEAR	INTERVIEWER: ADD IF NECESSARY: Include time as a couple whether or not living together		SEED W1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
247	PI: Other parent details		MRELAT FOR PCG TO CHILD=8 AND MNONRE SP=1	Ask if there is a non-resident parent AND respondent is biological parent	MBF6A	Are you currently or have you ever been married to or in a civil partnership with ^non-resident parent?	Yes – Currently married/ in a civil partnership with them No – Never married to them/in a civil partnership with them No – No longer married to them/in a civil partnership with them			COTs	PI only
248	PI: Other parent details	Non-resident parent contact with child	IF: MOTHP=1	Ask if non-resident parent is currently seeing the child	MBF7	Thinking about ^non-resident parent, how many times a month does ^baby see them (i.e. in person)?	1. TYPE IN: RANGE BETWEEN [0-31] 2. Once every few months 3. Less often	INTERVIEWER: IF THEY SEE THEM MORE THAN ONCE A DAY CODE AS ONCE PER DAY (I.E. TYPE IN 31).		Fatherhood Institute ESRC Scoping work	PI only
249	PI: Other parent details		IF: MOTHP=1	Ask if non-resident parent is currently seeing the child	MBF8	On a day that your ^baby see/sees ^non-resident parent how many hours do they typically spend together?	Range: 0-24	INTERVIEWER ADD IF NECESSARY: Please do not include any hours they spend overnight		COTs	PI only
250	PI: Other parent details		IF: MOTHP=1	Ask if non-resident parent is currently seeing the child	MBF9	Does your ^baby ever stay overnight with ^non-resident parent at their place?	1. Yes 2. No			Fatherhood Institute ESRC Scoping work	PI only
251	PI: Other parent details		IF: MBF9=1	Ask baby spends overnights with non-resident parent at their own HH	MBF10	On average, how many times a month does your ^baby stay overnight with ^non-resident parent at their place?	1. TYPE IN: RANGE BETWEEN [0-31] 2. Once every few months 3. Less often			Fatherhood Institute ESRC Scoping work	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
252	PI: Other parent details	Non-resident parent overnights in HH	IF: MOTHP=1	Ask if non-resident parent is currently seeing the child	MBF11	Does ^non-resident parent ever stay overnight at your home?	1. Yes 2. No			Fatherhood Institute ESRC Scoping work	PI only
253	PI: Other parent details		IF: MBF11=1	Ask if non-resident parent stays overnight in HH	MBF12	On average, how many times a month does ^non-resident parent stay overnight at your home?	1. TYPE IN: RANGE BETWEEN [0-31] 2. Once every few months 3. Less often			Fatherhood Institute ESRC Scoping work	PI only
254	PI: Partner information (employment, pay, parental leave, education, ethnicity)	Partner's Employment	IF: MRESP=1	Ask if there is a partner resident in the HH	MWORK1P	Which of these best describes what your partner {MRESPNAME} is currently doing?	1 Employee – in paid work 2 Self-employed 3 In unpaid voluntary work 4 Looking after family 5 Found a job, waiting to start it 6 Out of work and looking for a job 7 On government scheme 8 On apprenticeship scheme 9 Full-time student 10 Part-time student 11 Retired from paid work 12 Not in paid work, reasons of poor health 13 Not in paid work for some other reason	INTERVIEWER: IF PARTNER IS ON PARENTAL/MATERNITY/PATERNITY LEAVE, CODE WHAT THEY WERE DOING PRIOR TO LEAVE I.E., EMPLOYED/SELF-EMPLOYED. IF PARTNER IS IN PAID WORK, CODE EMPLOYED/SELF-EMPLOYED, REGARDLESS OF NUMBER OF HOURS OR WHAT ELSE THEY ARE DOING LOOKING AFTER FAMILY INCLUDES CARING FOR FAMILY MEMBERS, INCLUDING FULL TIME CARERS, OR LOOKING AFTER	SHOWCARD XX	MCS7	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
								THE CHILD/CHILDREN			
255	PI: Partner information		IF: MWORK1 P=1,2	Ask if partner is currently working	MWORK2 P	Are they working full-time or part-time?	1 Full-time (30 or more hours a week) 2 Part-time (under 30 hours a week)			MCS7 / Next Steps32	PI only
256	PI: Partner information		IF: MWORK1 P = 12	Ask if partner is out of work because of poor health	MWORK3 P	Are they out of work due to poor health temporarily (i.e., for less than six months), or more long-term –(i.e. for more than six months)?	1 Temporarily 2 Longer-term			MCS7 adapted	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
257	PI: Partner information		DERIVED VARIABLE	Derive employment status	MWORKD ERP	1 Full time employment {IF MWORK1=1 AND MWORKTIME=1} 2 Part time employment {IF MWORK1=1 AND MWORKTIME=2} 3 Full time self-employed {IF MWORK1=2 AND MWORKTIME=1} 4 Part time self-employed {IF MWORK1=2 AND MWORKTIME=2} 5 In unpaid voluntary work (IF MWORK1=3) 6 Looking after the family {IF MWORK1=4} 7 Waiting to start a job {IF MWORK1=5} 8 Looking for a job {IF MWORK1=6} 9 Temporary sickness/disability {IF MWORK1=12 AND MWORK3=1} 10 Long-term sickness/disability {IF MWORK1=12 AND MWORK3=2} 11 Being on a government scheme {IF MWORK1=7} 12 Being on an apprenticeship scheme {IF MWORK1=8} 13 Full-time education {IF MWORK1=9} 14 Part-time education (IF MWORK1=10) 15 Retirement {IF MWORK1=11} 16 Not in paid work for	N.A.	NA		COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
						some other reason {IF MWORk1=12}					

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
258	PI: Partner information	Partner's Pay	MRESP=1	Ask if partner employed	MPUTHP	What is your partner's usual take-home pay, that is after any deductions were made for tax, National Insurance, pension, union dues and so on?	RANGE: 0..9999997 (Unfolding brackets for refusals)			MCS7	PI only
259	PI: Partner information		MPUTHP answered	Ask if partner employed	MPAYP5	What period does this cover?	1 One week 2 Calendar month 3 One year 4 Other period (specify)			MCS7	PI only
260	PI: Partner information	Partner's parental leave	IF MRESP=1 AND MWORKD ERP=1-4	Ask if resident partner is currently employed	MLEAVE4 P	Has your partner {MRESPNAME} taken parental leave? This includes statutory maternity leave, shared parental leave, workplace leave agreements and any unpaid leave from their job.	1 Yes 2 No			Devised (original devised by ELC after online consultation and then revised by COTs)	PI only
261	PI: Partner information		IF: MLEAVE4 =1	Ask if resident partner has taken parental leave	MLEAVE4 AP	Are they currently on parental leave?	1 Yes 2 No			Devised (in original COTs first draft June 2021)	PI only
262	PI: Partner information		IF: MLEAVE4 =1	Ask if resident partner has taken parental leave	MLEAVE4 BP	When {does/did} their parental leave finish?	DAY MONTH YEAR			Devised (in original COTs first draft)	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
										June 2021)	
263	PI: Partner information		IF: MLEAVE4=1	Ask if resident partner has taken parental leave	MLEAVE5P	How long in total {will they have taken by the end of / was} their parental leave?	[Day/Month/Year]	INTERVIEWER: ENTER A NUMBER IN EITHER THE "DAYS", "WEEKS" OR "MONTHS" BOX (OR MULTIPLE IF THE RESPONDENT ANSWERS USING MULTIPLE PERIODS). INTERVIEWER: IF CURRENTLY ON LEAVE AND NOT SURE HOW LONG IT WILL BE IN TOTAL, ASK THEM TO GIVE THEIR BEST ESTIMATION.		Devised (added by COTs when redoing section January 2022)	PI only
264	PI: Partner information		IF: MLEAVE4A=1	Ask if resident partner is currently on parental leave	MLEAVE6P	Are they planning to return to work after your parental leave finishes?	1 Yes 2 No			Devised (in original COTs first draft June 2021)	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
265	PI: Partner information	Partner's education	IF: MRESP=1	Ask if there is a partner resident in the HH	MEDUC3	Please can you tell me the highest educational or school qualification your partner {MRESPNAME} has obtained?	<ul style="list-style-type: none"> 1 University Higher Degree – Doctorate (PhD) 2 University Higher Degree – Masters Degree (MA, MSc, MPhil) 3 Degree – (e.g. BA, BSc) 4 Diplomas in higher education 5 A / AS / S levels 6 O level / GCSE 7 Other academic qualifications 8 None of these qualifications 	<p>INTERVIEWER PLEASE NOTE: OVERSEAS QUALIFICATIONS: CODE AS NEAREST EQUIVALENT, IF NO EQUIVALENT, CODE AS 'OTHER'. A /AS /S LEVELS GENERALLY CORRESPOND TO OVERSEAS QUALIFICATIONS OBTAINED AROUND AGE 18; O LEVEL / GCSE GENERALLY CORRESPOND TO OVERSEAS QUALIFICATIONS OBTAINED AROUND AGE 16.</p>	SHOWCARD XX Single Code	Life Study (question wording) and MCS1 adapted response options	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
266	PI: Partner information	Partner ethnicity	ALL	Ask to all	METHNICP	What is the ethnicity of (name of child's other parent)?	<p>1 White - English/Welsh/Scottish/Northern Irish/British</p> <p>2 White - Irish</p> <p>3 White - Gypsy or Irish Traveller</p> <p>4 White - Roma</p> <p>5 Any other White background (PLEASE SPECIFY – variable "METHNICa")</p> <p>6 Mixed/multiple ethnic groups - White and Black Caribbean</p> <p>7 Mixed/multiple ethnic groups - White and Black African</p> <p>8 Mixed/multiple ethnic groups - White and Asian</p> <p>9 Any other mixed/multiple ethnic background (PLEASE SPECIFY – variable "METHNICb")</p> <p>10 Asian/Asian British - Indian</p> <p>11 Asian/Asian British - Pakistani</p> <p>12 Asian/Asian British - Bangladeshi</p> <p>13 Asian/Asian British - Chinese</p> <p>14 Any other Asian background (PLEASE SPECIFY – variable "METHNICc")</p>				PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							15 Black/African/Caribbean/Black British - African 16 Black/African/Caribbean/Black British - Caribbean 17 Any other Black/African/Caribbean background (PLEASE SPECIFY - variable "METHNICd") 18 Other ethnic group - Arab 19 Any other ethnic group (PLEASE SPECIFY - variable "METHNICe")				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions											
267	PI: Partner information	Partner health	ASK IF MRELAT= 1 or 2 FOR MFNAME 5 WITH ANY OTHER HH MEMBER, SINGLE CODE	Ask if they have a husband or partner who lives in the household.	MPGH3	Does ^partner have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?	1 Yes 2 No			ONS; MCS6	PI only											
268	PI: Partner information	Partner health	IF MPGH3=1	Ask if they said their partner has a health condition	MPGH3B	Do any of their conditions or illnesses reduce their ability to carry out day-to-day activities?	1. Yes, a lot 2. Yes, a little 3. Not at all			ONS; NS32; MCS6	PI only											
269	PI: childcare	Child Care & Education	ALL	Ask to All	MCCAR	Since your (MCHILD) (MWASWERE) born, have they ever been looked after on a regular basis by any of the following people or places on this card?	<table border="1"> <tr><td>1. Relative</td></tr> <tr><td>2. Friend or neighbour</td></tr> <tr><td>3. Childminder</td></tr> <tr><td>4. Professional Nanny</td></tr> <tr><td>5. Au pair</td></tr> <tr><td>6. Nursery school</td></tr> <tr><td>7. Day nursery</td></tr> <tr><td>8. Pre-school or playgroup</td></tr> <tr><td>9. Special day school or nursery or unit for children with special educational needs</td></tr> <tr><td>10. Other (specify – variable "MCCARO")</td></tr> <tr><td>11. Did not use any childcare at this time [EXCL.]</td></tr> </table>	1. Relative	2. Friend or neighbour	3. Childminder	4. Professional Nanny	5. Au pair	6. Nursery school	7. Day nursery	8. Pre-school or playgroup	9. Special day school or nursery or unit for children with special educational needs	10. Other (specify – variable "MCCARO")	11. Did not use any childcare at this time [EXCL.]	INTERVIEWER: ADD IF NECESSARY: Relative: Don't include care by your partner or by the child's other parent. Include care by grandparents or other relatives living in the household if they looked after child on a regular basis without the parents present. Pre-school or playgroup: Only include playgroup if parent left child in the care of staff.		SEED wave 1 adapted	PI only
1. Relative																						
2. Friend or neighbour																						
3. Childminder																						
4. Professional Nanny																						
5. Au pair																						
6. Nursery school																						
7. Day nursery																						
8. Pre-school or playgroup																						
9. Special day school or nursery or unit for children with special educational needs																						
10. Other (specify – variable "MCCARO")																						
11. Did not use any childcare at this time [EXCL.]																						

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
270	PI: childcare		ASK IF MCCAR=1	Ask if they selected "Relative"	MCCREL	Which relatives have looked after them?	1. Grandparents - my parents 2. Grandparents - other 3. Older sibling 4. Other (specify - variable "MCCRELO")			CEYSP 2018 adapted	PI only
271	PI: childcare		IF: MCCAR=1-10	Start a loop for each childcare category selected at MCCAR	LOOP STARTS	{IF ANY CODES 1-10 SELECTED AT MCCAR, START LOOP FOR EACH ANSWER GIVEN THERE}					PI only
272	PI: childcare		IF: MCCAR 1-10 FOR EACH	Ask for each childcare category selected	MCHOU	The next few questions are about the childcare you just mentioned for your {MCHILD}, how many hours did they typically spend each week at/with {TEXTFILL FROM MCCAR CODES 1-10}?	Range between 0 and 70 hours	INTERVIEWER: IF THIS VARIED FROM WEEK TO WEEK, PLEASE ASK FOR AN AVERAGE ACROSS THE TIME PERIOD THIS CHILDCARE WAS BEING USED.		SEED wave 1	PI only
273	PI: childcare	MCDAY			How many days a week did your {MCHILD} typically spend at/with {TEXTFILL FROM MCCAR CODES 1-10}?	Range between 1 and 7 days	INTERVIEWER: IF THIS VARIED FROM WEEK TO WEEK, PLEASE ASK FOR AN AVERAGE ACROSS THE TIME PERIOD THIS CHILDCARE WAS BEING USED.		SEED wave 1	PI only	
274	PI: childcare	MCAGE			What was ^baby's age in months when they started using ^MCCAR?	Range between 0 and 12 months			SEED wave 1	PI only	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
275	PI: childcare				MCEND	Are you still using ^MCCAR for ^baby?	1 Yes 2 No			SEED wave 1 adapted	PI only
276	PI: childcare		IF: MCEND = 2 FOR EACH	Ask if they have stopped using the childcare selected	MCSAG	What was baby's age in months when they stopped using ^MCAR	Range between 0 and 12 months			SEED wave 1	PI only
277	PI: childcare			End loop	LOOP ENDS	End Loop					PI only
278	PI: childcare support	Grandparent support	All	All	GSQINTR O1	I am going to ask you some questions now about any support you get with bringing up [child name/names] from family.				Grandparental Support Questions from Growing Up in Scotland Sweep 1	PI only
279	PI: childcare support		All	Ask all	MGALI1	First of all, can you tell me how many of [child name's/names'] grandparents are still alive?	OPEN TEXT			Grandparental Support Questions from Growing Up in Scotland Sweep 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
280	PI: childc are support		IF: MGALI>0	If child has grandparents	MGCON1	Still thinking about [child name's/names'] grandparents, how many of those are you in regular contact with – either face-to-face, or by phone, letter or e-mail?	OPEN TEXT			Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
281	PI: childc are support		IF: MGALI>0	If child has grandparents	MGCLO1	With how many of ^his grandparents would you say [child name/names] has/have a close or very close relationship?	OPEN TEXT			Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
282	PI: childc are support		IF: MGALI>0	If child has grandparents	MGLIV1	How many of [child name's/names'] grandparents live in this area – in other words, within 20-30 minutes drive?	OPEN TEXT			Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
283	PI: childc are support		IF: MGALI>0	If child has grandparents	MGCON2	How often, on average, would [child name/names] actually see of ^his grandparent(s)?	1 Every day or almost every day 2 At least once a week 3 At least once a month 4 At least once every three months 5 Less often than	If needed: by 'actually see' we mean to physically be with in person		Grandpa rental Support Questions from Growing Up in Scotland	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							that 6 Never			Sweep 1	
284	PI: childc are support		IF: MGALI>0		GSQINTR O2	Grandparents sometimes help out in practical ways with bringing up children. Can you tell me how often, if at all, any of ^Angus' grandparents, help out in the following ways?				Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
285	PI: childc are support		IF: MGALI>0	If child has grandparents	GS1 - GUS	Look after [child name/names] for an hour or more during the day	1 Every day or almost every day 2 At least once a week 3 At least once a month 4 At least once every three months 5 Less often than that 6 Never			Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
286	PI: childc are support		IF: MGALI>0		GS2 - GUS	Babysit for [child name/names] during the evening				Grandpa rental Support Questions from Growing Up in Scotland	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
										Sweep 1	
287	PI: childc are support		IF: MGALI>0		GS3 - GUS	Have [child name/names] to stay overnight				Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
288	PI: childc are support		IF: MGALI>0		GS4 - GUS	Take [child name/names] on outings or daytrips without you (^or your partner)				Grandpa rental Support Questions from Growing Up in Scotland Sweep 1	PI only
289	PI: childc are support		IF: MGALI>0		GS5 - MCS	Buying essentials for [child name/names] – food, clothes, nappies etc				MCS1	PI only
290	PI: childc are support		IF: MGALI>0		GS6 - MCS	Paying for other household costs - eg bills, shopping etc				MCS1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
291	PI: childc are support		IF: MGALI>0		GS7 - MCS	Buying gifts and extras for [child name/names]				MCS1	PI only
292	PI: childc are support		IF: MGALI>0		GS8 - MCS	Lending money				MCS1	PI only
293	PI: childc are support		IF: MGALI>0		GS9 - MCS	Paying for childcare				MCS1	PI only
294	PI: childc are support		IF: MGALI>0		GS10 - MCS	Other financial help				MCS1	PI only
295	PI: Services	Service Use: Professionals	ALL	ALL	MSEUSE1	<p>The following questions are about professionals you may have seen since your ^baby was born</p> <p>First, please tell me which, if any, of the professionals listed on SHOWCARD XX you have seen since your ^baby was born.</p>	1 Midwife 2 Health visitor 3 General practitioner (GP) 4 Family nurse (including Family Nurse Partnership (FNP) Nurse) 5 Social worker 6 Family Support Worker / Early Help Worker 7 Paediatrician 8 Consultant/ hospital doctor 9 Paediatric physiotherapist 10 None of these	INTERVIEWER ADD IF NECESSARY: This includes in person, virtual or telephone appointments		Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE and COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
296	PI: Services		IF: MSEUSE1 =1-9	Start a loop for each professional they have seen	LOOP STARTS	{IF ANY CODES 1-9 SELECTED AT MSEUSE1, START LOOP FOR EACH ANSWER GIVEN THERE}				Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE and COTs	PI only
297	PI: Services		IF: MSEUSE1 1-9 FOR EACH	Ask for each professional they have seen	MSEUSE1 FR	Thinking about the ^professional you saw... How many times have you seen them since your ^baby was born?	NUMERIC [RANGE 1-10]	INTERVIEWER: IF MORE THAN 10, CODE 10		Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE and COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
298	PI: Services			End loop	LOOP ENDS	End Loop				Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE and COTs	PI only
299	PI: Services		ALL	Ask to all	MSEUSE2	Did you and your {MCHILD} have your 6 weeks health visitor review?	1 Yes 2 No			Devised by COTs and DfE	PI only
300	PI: Services	Service Use: support services	All	Ask to all	MSEUSE3	Since your ^baby was born has your family used any of the following services or types of support from any kind of provider?	1. Breastfeeding support 2. Infant feeding/weaning/nutrition support 3. Infant weight and growth support 4. Infant sleep support 5. Baby and infant health advice and support 6. Playgroup or play sessions (e.g. stay and play groups, one o'clock clubs, baby singing)	RECORD ALL THAT APPLY		Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							groups, messy play groups)			and COTs	
							7. Baby Classes (e.g. Baby massage, baby yoga groups, Baby swimming, Signing groups, Sensory groups)				
							8. Advice and services for child's disability or learning needs				
							9. Parenting support/parenting classes				
							10. Mental health support				
							11. Family relationships support				
							12. Money or debt advice and support				
							13. Housing advice and support				
							14. Jobs and training advice and support				
							15. Parent fitness classes				
							16. Drug and alcohol support				
							17. Other (specify – variable "MSUSE30")				
							18. None of these [EXCL.]				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
301	PI: Services		IF: MSEUSE3 =1-17	Start a loop for each service they have used	LOOP STARTS	{START LOOP FOR EACH SERVICE SELECTED AT MSEUSE3 (CODES 1-17)}				Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE and COTs	PI only
302	PI: Services		IF: MSEUSE3 =1-17 FOR EACH	Ask for each service they have used	MSEUSE3 FR	Thinking about the ^{MSEUSE3} you used, how many times have you used this service since your {MCHILD} was born?	NUMERIC [RANGE 1-10]	INTERVIEWER: IF MORE THAN 10, CODE 10		Client Services Receipt Inventory (CSSRI - EU) inspired but predominantly derived through workshops held by DfE and COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
303	Birth Mother: Pregnancy history	Pregnancy history	IF birth mother	Only for mothers		PREGNANCY HISTORY OF MOTHER: to capture children elsewhere, birth order and some more information about health in pregnancy				Not written	Mothers only
304	Not primary caregiver: engagement in childcare	Childcare tasks	IF AI or OHF interview	To be asked only if not primary informant	MCCTintro	Now I'd like to ask you some questions about ^Jack. Please say how often you do each of the things I am going to read out.	1 More than once a day 2 Once a day 3 A few times a week 4 Once or twice a week 5 Less than once a week 6 Never				AI and OHF only
305	Not primary caregiver: engagement in childcare				MCCTa	First, how often do you look after ^Jack on your own?				AI and OHF only	
306	Not primary caregiver: engagement in childcare				MCCTb	And how often do you change ^Jack's nappy?				AI and OHF only	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
307	Not primary caregiver: engagement in childcare				MCCTc	And how often do you feed ^him?					AI and OHF only
308	Not primary caregiver: engagement in childcare				MCCTd	And how often do you get up in the night for ^Jack?					AI and OHF only
309	Not primary caregiver: engagement in childcare				MCCTe	And how often do you soothe ^baby when they are upset?					AI and OHF only

Child Module

Overview

- 1) Primary Informant
 - a. Baby ethnicity (310)
 - b. Fertility treatments (311-315)
 - c. Birth and delivery (316-322)
 - d. Childbirth weight (323)
 - e. Child health and development (324-357)
 - i. Child diet
 - ii. Child and parent sleep
 - iii. Child screen use
 - iv. Child crying
 - v. Developmental milestones
- 2) All
 - a. Early care activities (358-368)
 - b. Child temperament (369-383)

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
310	PI: baby ethnicity	Baby's ethnicity	ALL	Ask to all	METHNIC 2	What is the ethnic group of ^baby?	1 White - English/Welsh/Scottish/Northern Irish/British 2 White - Irish 3 White - Gypsy or Irish Traveller 4 White - Roma 5 Any other White background (PLEASE SPECIFY – variable "METHNICa") 6 Mixed/multiple ethnic groups - White and Black Caribbean 7 Mixed/multiple ethnic groups - White and Black African 8 Mixed/multiple ethnic groups - White and Asian 9 Any other mixed/multiple ethnic background (PLEASE SPECIFY – variable "METHNICb") 10 Asian/Asian British - Indian 11 Asian/Asian British - Pakistani 12 Asian/Asian British - Bangladeshi 13 Asian/Asian British - Chinese 14 Any other Asian background (PLEASE SPECIFY – variable "METHNICc") 15 Black/African/Caribbean/Black British - African 16 Black/African/Caribbean/Black British - Caribbean 17 Any other Black/African/Caribbean background (PLEASE			Census 2021	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
							SPECIFY – variable “METHNICd” 18 Other ethnic group - Arab 19 Any other ethnic group (PLEASE SPECIFY – variable “METHNICE”)				

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
311	PI: fertility treatments	Fertility treatments	{ASK ALL}	Ask all	MFETR	Did you [or your child's other parent] have any medical fertility treatment to help you conceive (child name/names)?	1 Yes 2 No	Please include any egg/sperm/embryo donation		MCS1 adapted	PI only
312	PI: fertility treatments		{ASK IF MFETR=1}	Ask if received fertility treatment	MDES	Did the conception involve donor egg, sperm or embryo?	CODE ALL THAT APPLY 1.no 2.yes, donor egg 3.yes, donor sperm 4.yes, donor embryo			Devised	PI only
313	PI: fertility treatments		{ASK IF MFETR=1}	Ask if received fertility treatment	MTRWT	What treatment did you [or your child's other parent] receive?	1 Clomiphene citrate or other ovulation inducing drugs only 2 Artificial Insemination/Intrauterine Insemination 3 IVF: In Vitro Fertilisation 4 ICSI: IVF with intra cytoplasmic sperm injection 5 Frozen embryo transfer 6 Pregnancy was conceived naturally after last treatment 95 Other	IF MORE THAN 1, CODE THE MOST RECENT TREATMENT WHICH LED TO (CHILD NAME/NAMES) CONCEPTION.		MCS1 adapted	PI only
314	PI: fertility treatments		{ASK IF had another kind of fertility treatment to those above: MTRWT=95 }	Ask if received other fertility treatment	MTRWS	What other treatment did you [or your child's other parent] receive?	String{100}				MCS1 adapted

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
315	PI: fertility treatments		{ASK IF MFETR=1}	Ask if received fertility treatment	MFTRL	How long have you [or your child's other parent] been receiving medical fertility treatments before you were able to conceive (child name/names)	1. <3 months 2. 3-6 months 3. 6-12 months 4. 1-2 years 5. More than 2 years			Devised	PI only
316	PI: birth and delivery	Due date	ALL	Ask all	MPREGB 1	The next few questions are about your baby's birth and health. What date was/were your ^child/children due to be born? (if you were told more than one due date, please enter the final date you were told)	[Enter Date] -99 Don't Know	-		Life Study; MCS1	PI only
317	PI: birth and delivery		IF MPREGB1 =-99	Ask if they did not know their child's due date	MPREGB 2	^Was/were your ^child/children born early, late or on time?	1 Early 2 Late 3 On time 4 Can't remember			GUS wave 1	PI only
318	PI: birth and delivery		IF MPREGB2 =1	Ask if the child was born early	MPREGB 3	^Was/were ^child/children born days or weeks early?	1 Days 2 Weeks			GUS wave 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
319	PI: birth and delivery		ASK IF MPREGB2 =1 AND MPREGB3 =1,2	Ask if the child was born early and response given to MPREGB3	MPREGB 4	How many {TEXTFILL: IF MPREGB3=1, "days"; IF MPREGB3=2, "weeks"} early {MWASWERE} your {MCHILD}	[Range 0-25]			GUS wave 1	PI only
320	PI: birth and delivery	Neonatal Care	ALL	Ask all	MPREGB 8	After birth some babies need specialist care, e.g. help with breathing, and are admitted to a neonatal unit, sometimes called a Special Care Baby Unit (SCBU) or Neonatal Intensive Care Unit (NICU). Was ^baby cared for in a neonatal unit (NNU, NICU, SCBU) at all?	1 Yes 2 No	INTERVIEWER: ADD IF NECESSARY : This does not include admittance of a healthy baby because the mother was too unwell to care for the baby in the post-natal ward.		Life Study; National Maternity Survey 2010	PI only
321	PI: birth and delivery	Discharge Date	ALL	Ask all	MPREGB 9	How old was ^baby when they came home from hospital (or neonatal care)?	1 Less than one day 2 Days 3 Weeks 4 Months 97 Still in neonatal care	CODE UNITS OF MEASUREMENT. CODE 0 NOT APPLICABLE , BABY BORN AT HOME		Life Study; MCS1	PI only
322	PI: birth and delivery		ASK IF MPREGB9 =2,3,4	Ask if discharge unit of measurement given	MPREGB 9a		[Number of days/weeks/months]	ENTER NUMBER OF DAYS OLD		Life Study; MCS1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
323	PI: child anthropometrics	Birth weight	ALL	Ask all	MWEIG1-3	How much did ^baby weigh at birth?	[MWEIG2=K/g] [MWEIG3=lb/oz]	INTERVIEWER: CODE IF ANSWER GIVEN IN KILOS OR POUNDS		MCS1	PI only
324	PI: child health	General health	ALL	Asked to all	MCHGH	How is ^baby's health in general? Would you say it is...	1. Very good 2. Good 3. Fair 4. Bad 5. Very bad			GUS wave 1	PI only
325	PI: child health	A&E	ALL	Asked to all	MACCEM	How many times have you taken ^baby to the Accident and Emergency department at a hospital or to a Minor Injuries Unit because they have had an accident or injury?	1. Never 2. Once 3. Twice 4. Three or more times			SEED wave 1 adapted	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
326	PI: child health	Chronic health problems	ALL	Asked to all	MCHLHP 1-19	Has ^baby's ever had any of the following serious or longstanding health or developmental conditions of the kind listed on this card? Please don't count very minor ailments.	<ol style="list-style-type: none"> 1. Eye/ sight problems 2. Heart problems 3. Skin problems 4. Ear, nose and throat or hearing problems 5. Stomach and digestion problems 6. Bone problems 7. Allergies and intolerances 8. Breathing problems (including wheezing or asthma) 9. Epilepsy (including fits) 10. Blood disorders 11. Urinary and/or kidney problems 12. Diabetes 13. Cerebral Palsy 14. Genetic problems and chromosomal disorders 15. Growth concerns (under weight or low muscle tone) 16. Health problems (unspecified/other) 17. Development problems (unspecified/other) 18. Other (PLEASE SPECIFY – variable "MCHLHPO") 19. None {EXCL.} 	INTERVIEWER: PLEASE CODE ALL THAT APPLY		SEED wave 1 adapted	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
327	PI: child health	Hospitalisation	ALL	Asked to all	MHOLON	How often, if ever, has ^baby's had to go to hospital because of a serious or longstanding health problem?	<ol style="list-style-type: none"> 1. Never 2. Once 3. Twice 4. Three or more times 	INTERVIEWER: THIS SHOULD INCLUDE ALL INSTANCES SINCE COMING HOME AFTER BIRTH E.G. WHETHER THEY'VE MADE AN APPOINTMENT, GONE TO A&E, STAYED OVERNIGHT, OR JUST BEEN FOR A FEW HOURS. THIS SHOULD NOT INCLUDE TRIPS TO THE HOSPITAL BECAUSE OF AN ACCIDENT.		SEED wave 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
328	PI: child health	Vaccines	ALL	Asked to all	MVAC1	Are ^[Cohort baby name]'s immunisations up to date?	"1 Yes 2 No"	ASK MOTHER FOR ^[COHORT CHILD'S NAME] PERSONAL CHILD HEALTH RECORD (RED BOOK) CHECK AGAINST THE PROFORMA (SEE BELOW) AS TO WHICH IMMUNISATIONS ^[COHORT BABY NAME] HAS RECEIVED		Life Study	PI only
329	PI: child health	Feeding	ALL	Asked to all	MBFEV	Did you ever try to breastfeed ^[child name]?	"1 Yes 2 No"			MCS wave 1	PI only
330	PI: child health		ALL	Asked to all	MBFEA	How old was ^Jack when ^he last had breast milk?	"1 Never took breast milk 2 Less than one day 3 Answer given in days 4 Answer given in weeks 5 Answer given in months 6 Still breastfeeding"			MCS wave 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
331	PI: child health		ALL	Asked to all	MAGDM	I'm now going to ask when ^Jack first had (other) different types of milk. Please include any eaten with cereal. First, how old was ^he when ^he first had Formula milk, such as Cow & Gate or SMA?	1 Has not had 2 Less than one day 3 Answer given in days 4 Answer given in weeks 5 Answer given in months			MCS wave 1	PI only
332	PI: child health		ALL	Asked to all	MAGCM	How old was ^Jack when ^he first had Cow's milk?	1 Has not had 2 Less than one day 3 Answer given in days 4 Answer given in weeks 5 Answer given in months			MCS wave 1	PI only
333	PI: child health		ALL	Asked to all	MAGOM	How old was ^Jack when ^he first had any other type of milk, such as soya milk?	1 Has not had 2 Less than one day 3 Answer given in days 4 Answer given in weeks 5 Answer given in months			MCS wave 1	PI only
334	PI: child health		ALL	Asked to all	MAGSF	How old was ^Jack when ^he first had any solid food such as pureed fruits or vegetables, or cereal?	1 Has not had 2 Answer given in days 3 Answer given in weeks 4 Answer given in months			MCS wave 1	PI only
335	PI: child health	Sleep	ALL	Asked to all	MSLEEP1	Where does ^baby's usually sleep?	1. Infant bed/cot in a separate room 2. Infant bed/cot in parents' room 3. In parents' bed 4. Infant bed/cot in room with sibling 5. Other	INTERVIEWER: IF MORE THAN ONE PLACE, CODE ALL THAT APPLY		MCS wave 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
336	PI: child health		ALL	Asked to all	MSLEEP2	Think about the past two weeks when answering these questions. My child needs parent in the room to fall asleep.	1 = Always 2 = More than half the time 3 = About half the time 4 = Less than half the time 5 = Never or Almost never			Sleep Habits Questionnaire Revised (Seifer et al., 1996)	PI only
337	PI: child health		ALL	Asked to all	MSLEEP3	Think about the past two weeks when answering these questions. My child falls asleep within 20 minutes after going to bed	1 = Always 2 = More than half the time 3 = About half the time 4 = Less than half the time 5 = Never or Almost never			Sleep Habits Questionnaire Revised (Seifer et al., 1996)	PI only
338	PI: child health		ALL	Asked to all	MSLEEP4	Think about the past two weeks when answering these questions. How many times does your child wakes up during the night?	NUMERIC			Sleep Habits Questionnaire Revised (Seifer et al., 1996)	PI only
339	PI: child health		ALL	Asked to all	MSLEEP5	Think about the past two weeks when answering these questions. If your child does wake up during the night, how often does your child have difficulty returning to sleep?	"1 Rarely 2 3 About half the time 4 5 Almost Always"			Sleep Habits Questionnaire Revised (Seifer et al., 1996)	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
340	PI: child health		ALL	Asked to all	MSLEEP6	How much total time does your child sleep at night on average?	HHMM			Sleep Habits Questionnaire Revised (Seifer et al., 1996)	PI only
341	PI: child health		ALL	Asked to all	MSLEEP7	How much time does your child spend napping during the day on average?	HHMM			Sleep Habits Questionnaire Revised (Seifer et al., 1996)	PI only
342	PI: child health		ALL	Asked to all	MSLEEP8	About how many hours of sleep a night are you getting at present?	[Record n. of hours]			GUS wave 1	PI only
343	PI: child health		ALL	Asked to all	MSLEEP9	Do you consider ^baby's sleep as a problem?	1. A very serious problem 2. A small problem 3. Not a problem at all			From the Life Study which in turn is Adapted from: The Brief Infant Sleep Questionnaire (BISQ) Sadeh 2004	PI only
344	PI: child health		ALL	Asked to all	MSLEEP10	How much does ^baby's sleep affect your ability to do day-to-day things?	1. A lot 2. A little 3. Not at all			Devised by COTs	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
345	PI: child health	Screen usage	ALL	Asked to all	MSCREE U	Typically, how many hours a day does ^baby's watch television, videos, or other digital content on a screen?	[Record n. of hours]			SEED wave 1 adapted	PI only
346	PI: child health	Crying	ALL	Asked to all	MCRY1	How much does your baby cry and fuss in general?	"1 Very little, much less than the average baby 2 3 4 Average, about as much as the average baby 5 6 7 A lot, much more than the average baby"			Born in Bradford wave 1	PI only
347	PI: child health		ALL	Asked to all	MCRY2	Do you feel that your baby's crying is a problem for you?	"1 Yes 2 No"			MCS wave 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
348	PI: child development	Development	ALL	Asked to all	DevIntro	All children develop at their own pace so I would like to ask whether ^Child name does certain things yet. Please say whether ^he does each thing often, has done it once or twice, or whether ^he has not started to do this yet. (Thinking about ^Child name ...)	1 Often 2 Once or twice 3 Not yet			GUS wave 1	PI only
349	PI: child development				MaDbab01	^he smiles when you smile at ^him				GUS wave 1	PI only
350	PI: child development				MaDbab02	^he can sit up without being supported				GUS wave 1	PI only
351	PI: child development				MaDbab03	^he can stand up while holding onto something like furniture				GUS wave 1	PI only
352	PI: child development				MaDbab04	^he puts ^his hands together				GUS wave 1	PI only
353	PI: child development				MaDbab05	^he grabs objects using ^his whole hand				GUS wave 1	PI only
354	PI: child development				MaDbab06	^he can pick up a small object using forefinger and thumb only				GUS wave 1	PI only

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
355	PI: child development				MaDbab07	^he passes a toy back and forth from one hand to another				GUS wave 1	PI only
356	PI: child development				MaDbab08	^he can walk a few steps on ^his own				GUS wave 1	PI only
357	PI: child development				MaDmov1	If you put ^Child name down on the floor, can ^he move about from one place to another?	1 Yes 2 No			GUS wave 1	PI only
358	Early care activities	Activities	ALL	Ask to All	Intro	The next few questions are about your {MCHILD}'s activities. How often do you do these activities with your {MCHILD}?	1. Never 2. Less than once a week 3. Once or twice a week 4. Several times a week 5. Once or twice a day 6. Several times a day			Life Study, adapted from ALSPA C - Children of the children of the 90's combined with items and responses from co-TEDS play questionnaire	
359	Early care activities				MPLAYFa	Physical play—for example, lifting or swinging your child, throwing up in the air, rough and tumble					
360	Early care activities				MPLAYFb	Play with toys					
361	Early care activities				MPLAYFc	Pretend games—for example, make a toy dog bark, talk on toy telephone, move a wooden block as if it is a car					

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
362	Early care activities				MPLAYFd	Turn-taking play without toys/other objects—for example, peek-a-boo, pat-a-cake, 'where's baby's eyes?', 'I spy'					
363	Early care activities				MPLAYFe	Show your {MCHILD} pictures inbooks					
364	Early care activities				MPLAYFf	Read your {MCHILD} stories					
365	Early care activities				MPLAYFg	Noisy play—for example, banging saucepans, child instruments					
366	Early care activities				MPLAYFh	Sing to your {MCHILD}					
367	Early care activities				MPLAYFi	Take your {MCHILD} outside for a walk or to play in the garden, a park, or a playground					
368	Early care activities				MPLAYFj	Cuddle your {MCHILD}					

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
369	Child temperament	Temperament	All	Ask all		<p>The following questions are about ^baby</p> <p>Please indicate how often ^baby did the behaviours described during the LAST WEEK (the past seven days).</p>		<p>The "Does Not Apply" option (number 8) should be used when you did not see the baby in the situation described during the last week. For example, if the situation mentions the baby having to wait for food or liquids and there was no time during the last week when the baby had to wait, choose option number 8.</p> <p>"Does Not Apply" is different from "Never" (option number "Never" should be used when you saw the baby in the situation but the baby never engaged in the behaviour listed during</p>		Infant Behavior Questionnaire (devised subscale)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
								<p>the last week. For example, if the baby did have to wait for food or liquids at least once but never cried loudly while waiting, choose option number 1.</p>			

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
370	Child temperament		All	Ask all	IBQ1	When tossed around playfully how often did ^baby laugh?	1 Never 2 Very Rarely 3 Less Than Half the Time 4 About Half the Time 5 More Than Half the Time 6 Almost Always 7 Always 8 Does Not Apply -99 Don't know -98 Prefer not to say			Infant Behavior Questionnaire (devised subscale)	
371	Child temperament		All	Ask all	IBQ2	When introduced to an unfamiliar adult, how often did ^baby cling to a parent?				Infant Behavior Questionnaire (devised subscale)	
372	Child temperament		All	Ask all	IBQ3	How often during the last week did ^baby play with one toy or object for 5-10 minutes?				Infant Behavior Questionnaire (devised subscale)	
373	Child temperament		All	Ask all	IBQ4	When put into the bath water, how often did ^baby laugh?				Infant Behavior Questionnaire (devised subscale)	
374	Child temperament		All	Ask all	IBQ5	When it was time for bed or a nap and ^baby did not want to go, how often did s/he whimper or sob?				Infant Behavior Questionnaire (devised subscale)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
375	Child temperament		All	Ask all	IBQ6	After waking up from a sleep, how often did ^baby cry if someone didn't come within a few minutes?				Infant Behavior Questionnaire (devised subscale)	
376	Child temperament		All	Ask all	IBQ7	During a peekaboo game, how often did ^baby laugh?				Infant Behavior Questionnaire (devised subscale)	
377	Child temperament		All	Ask all	IBQ8	How often did ^baby seem angry (crying and fussing) when you left her/him in the crib?				Infant Behavior Questionnaire (devised subscale)	
378	Child temperament		All	Ask all	IBQ9	How often during the last week did ^baby look at pictures in books and/or magazines for 5 minutes or longer at a time?				Infant Behavior Questionnaire (devised subscale)	
379	Child temperament		All	Ask all	IBQ10	How often did ^baby smile or laugh when given a toy?				Infant Behavior Questionnaire (devised subscale)	

Number	Topic	Category	Routing	Routing Explanation	Variable Name	Question	Responses	Interviewer Instructions	Optional Help Screen	Source	Informant restrictions
380	Child temperament		All	Ask all	IBQ11	When hair was washed, how often did ^baby vocalise (e.g. babbling, laughing)?				Infant Behavior Questionnaire (devised subscale)	
381	Child temperament		All	Ask all	IBQ12	When introduced to an unfamiliar adult, how often did ^baby refuse to go to the unfamiliar person?				Infant Behavior Questionnaire (devised subscale)	
382	Child temperament		All	Ask all	IBQ13	When you were busy with another activity, and ^baby was not able to get your attention, how often did s/he cry?				Infant Behavior Questionnaire (devised subscale)	
383	Child temperament		All	Ask all	IBQ14	How often during the last week did ^baby stare at a mobile, crib bumper/cushion or picture for 5 minutes or longer?				Infant Behavior Questionnaire (devised subscale)	