Millennium Cohort Study
First Survey:
*Technical Report on Instrument Development and Fieldwork*

Andrew Shaw and Lisa Calderwood

Version 1.0
Millennium Cohort Study First Survey

Andrew Shaw and Lisa Calderwood

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Contents

1 INTRODUCTION ........................................................................................................3

2 DEVELOPMENT WORK ...........................................................................................4
   2.1 Overview of the development work ............................................................... 4
   2.2 First Pilot Survey ............................................................................................... 5
       2.2.1 Instrumentation, Sample and Fieldwork ............................................. 5
       2.2.2 Key findings and changes ....................................................................... 6
           Participating in the Study ........................................................................... 6
           Questionnaire content ................................................................................ 6
           Interview length .......................................................................................... 7
   2.3 Pilot Two: Dress Rehearsal ............................................................................ 7
       2.3.1 Instrumentation, Sample and Fieldwork ............................................. 7
       2.3.2 Key findings and changes ....................................................................... 9
           Headline comments from interviewers .................................................... 9
           Sample ........................................................................................................ 10
           Briefing ....................................................................................................... 10
           Advance materials, contact procedures and co-operation ....................... 10
           Interview structure and content ................................................................ 11
           Language and translation ............................................................................ 12
           Interview length .......................................................................................... 12
   2.4 Health Data Linkage Experiment ................................................................. 14
       2.4.1 Personal Child Health Record Data .................................................. 14
       2.4.2 Consent Form (Permission to Link Health Record Data) .............. 15
   2.5 Final phase of questionnaire development ................................................ 15

3 MAIN SURVEY SAMPLE DESIGN AND RESPONDENT SELECTION ..........................16
   3.1 Sample design ............................................................................................... 16
   3.2 Sampling procedures ..................................................................................... 18
   3.3 Respondent selection ..................................................................................... 20

4 SUMMARY OF FINAL SURVEY INSTRUMENTATION ........................................22

5 CONDUCT OF FIELDWORK 1 : MATERIALS, BRIEFINGS AND PROCEDURES ......................... 23
   5.1 Overview of procedures for interviewers .................................................. 23
   5.2 Materials for interviewers ............................................................................ 23
   5.3 Briefings ........................................................................................................ 24
   5.4 Issuing sample to interviewers ..................................................................... 25
   5.5 Contacting respondents ............................................................................... 26
   5.6 Timing of interviews: Target Dates ............................................................... 29
   5.7 Translation and Proxy interviewing ............................................................... 30
   5.8 The Consent Form ........................................................................................ 31
   5.9 Safety and confidentiality ............................................................................. 32
       5.9.1 Notifying the police ............................................................................. 32
       5.9.2 Interviewing parents aged 15 and under .......................................... 32
       5.9.3 Known respondents ............................................................................ 32
       5.9.4 Handling babies ............................................................................... 33
       5.9.5 “Child Abuse “ ................................................................................... 33
   5.10 Tracing respondents and establishing eligibility ...................................... 34

6 FIELDWORK 2 : QUALITY CONTROL AND ISSUES ARISING ..........................37
ACKNOWLEDGEMENTS

There are very many people to thank for the successful conduct of the fieldwork and data preparation of the First Sweep of the Millennium Cohort Study (MCS).

First we would like to pay tribute to the interviewers from the National Centre for Social Research (NatCen) and the Northern Ireland Statistics and Research Agency (NISRA) who both collected high quality data and achieved high response rates throughout the UK. Of course, this reflects equally on the willingness of over 32,000 parents to take part in this study and to provide a wealth of information about themselves and their baby or babies. We thank them all for participating.

NatCen’s Operations Department, especially the Green Team led by Pauline Burge, deserve special thanks for their excellent organisation of and tireless commitment to the survey over a period of more than two years. Several computing and research colleagues made substantial inputs to this project. We thank all and wish specifically to mention Sue Corbett, Sam Coster, Nina Stratford, Kavita Deepchand and Norman Glass.

We are delighted to have had the opportunity to work with colleagues at NISRA on this study and enjoyed our fruitful collaboration. Thank you to all of their team for ensuring that families from Northern Ireland have due representation in the first sweep data. Special thanks to Moira McKee for her assistance in compiling this report.

Finally, the success of NatCen and NISRA’s contribution was founded on good, collaborative working relations with the team at the Centre for Longitudinal Studies, Institute of Education who have overall responsibility for the study. We thank them for their tremendous input to Sweep One of the MCS and for enabling us to play our part effectively.
1 INTRODUCTION

The Millennium Cohort Study (MCS), known in the field as Child of the New Century, is expected to be among the most important social surveys to be conducted in the United Kingdom during the twenty-first Century. It will seek to track the lives of some 18,800 people born in 2000 and 2001, recording their family background, development, health, education and working lives to explain patterns of opportunity and well-being, barriers and disadvantage. It thereby resumes, after a break of 30 years, Britain’s enviable post-war chronicle of longitudinal birth cohorts studies. There is, though, to be greater emphasis on social and economic matters, reflecting the core sponsorship of the Economic and Social Research Council (ESRC) and the additional funding from departments of national governments. The MCS will be a resource of great richness for social scientists and policy makers alike.

Lead responsibility for the launch of the MCS was awarded to a consortium headed by the Centre for Longitudinal Studies (CLS), Institute of Education, University of London. Following competitive tender, the National Centre for Social Research (NatCen) was commissioned to contribute to developing the design and content of the first survey (or sweep), to conduct fieldwork and to code and edit data prior to delivery to CLS. Although performing distinct roles within this study, CLS and NatCen developed and maintained close, collaborative working practices throughout the first sweep of MCS.

The central objective of this technical report is to document NatCen’s contribution to the first sweep. The next chapter (2) details the development work undertaken to prepare the first sweep, which included a pilot survey and dress rehearsal. Readers needing information solely on the main survey and not on the ‘hows and whys’ of development, may wish to skip this chapter. Chapter 3 outlines the sample design and explains the procedures for respondent selection. Chapter 4 summarises the final survey instrumentation and Chapter 5 describes how the fieldwork was conducted. Chapter 6 discusses the progress of fieldwork, quality control thereof and issues which arose during this phase. Chapter 7 covers the verification of information on the achieved sample and the dispatch of thank you letters to respondents. Chapter 8 accounts for the survey response and Chapter 9 describes procedures for coding, editing and preparation of the data. Various documents used in the study are to be found in the Appendix.

The authoritative record of the questionnaire and the detailed coding and editing instructions are substantial documents in their own right. They have, therefore, been made available separately to data users (NatCen, 2003, NatCen and CLS, 2003).
2 DEVELOPMENT WORK

2.1 Overview of the development work

NatCen’s core tasks during the development stage were to contribute to the design of survey instrumentation and to prepare and conduct both a pilot survey and a dress rehearsal ahead of mainstage fieldwork. Prior decisions had determined that the survey would comprise face to face computer-assisted interviews with parent(s) or legal guardian(s) of babies born throughout a calendar year in a sample of electoral wards throughout the UK.

However, CLS had been awarded the lead role for MCS1 only in May 2000, and NatCen was commissioned in September (Shepherd et al, 2003 pp7-8). With a scheduled survey launch date of May, 2001, the development period for such a major study was severely compressed. Despite this, the need for a pilot and dress rehearsal was accepted. To accommodate both within the time available, it was agreed that the first pilot had to utilise a paper questionnaire, with computer-assisted interviewing introduced for the dress rehearsal. This mixing of data collection modes within the development schedule was not ideal, given that the many advantages of a computerised instrument were unavailable at the first pilot. However, this approach did enable, as required, a large volume of questions to be tested and timed quite soon after commissioning. Moreover, NatCen’s offer to computerise the questions for self-completion by respondents was accepted, thus enabling this aspect of the survey to be tested in the appropriate mode. Details of the pilot and, then, the dress rehearsal follow below.

Moving from a very long first pilot questionnaire to a fully computerised dress rehearsal depended upon considerable work on the questionnaire content, as well, of course, as the programming of the instrument. Shortly after commissioning, NatCen expressed its view was that a slightly later launch of the survey would facilitate a better developed dress rehearsal and a less hurried preparation of the launch, thus reducing the risks of errors and omissions. The need to avoid the census in late April, and an anticipated General Election in May were also considerations. Though there were some costs – in terms of the timeliness of the data collected relative to cohort members’ birth dates - these were judged to be minor. Overall, survey data quality was expected to be enhanced by having at least minimally adequate time for completing development and implementation. On this basis, agreement was secured to launch the survey in June rather than May.

CLS had responsibility for determining the content of the instruments (what should be measured) and, within the context of the short time available, engaged in considerable consultation and debate in the course of discharging this responsibility. NatCen was one among many contributors.

NatCen made a substantial input to the details of the instruments – structure, order, routing, volumes of questions and item wording. CLS and NatCen worked closely on these details, developing, sharing and discussing intensively the drafts of questionnaire modules.
2.2 First Pilot Survey

The first pilot survey was conducted in January 2001. The main aim of this initial pilot was to test the structure, content and duration of lengthy draft questionnaires designed to gather information from mothers and fathers.

2.2.1 Instrumentation, Sample and Fieldwork

Table 2.1 shows the topics covered in pilot interviews. Apart from computerised self-completion modules, interviews were conducted using paper questionnaires (91 pages for ‘Mothers’ and 37 pages for ‘Fathers’).

<table>
<thead>
<tr>
<th>Table 2.1 Contents of Pilot instruments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Mother</strong></td>
</tr>
<tr>
<td>Household details, baby’s father, lone</td>
</tr>
<tr>
<td>parenthood, previous pregnancies, non-</td>
</tr>
<tr>
<td>resident children</td>
</tr>
<tr>
<td>Pregnancy, labour &amp; delivery</td>
</tr>
<tr>
<td>Baby’s health</td>
</tr>
<tr>
<td>Baby’s development</td>
</tr>
<tr>
<td>Childcare</td>
</tr>
<tr>
<td>Grandparents &amp; friends</td>
</tr>
<tr>
<td>Self-completion(see Note)</td>
</tr>
<tr>
<td>Parent’s health</td>
</tr>
<tr>
<td>Employment &amp; income</td>
</tr>
<tr>
<td>Parent’s education</td>
</tr>
<tr>
<td>Housing</td>
</tr>
<tr>
<td>Interests</td>
</tr>
<tr>
<td>Lone Parenthood, other children</td>
</tr>
<tr>
<td>Summing up questions about the baby</td>
</tr>
<tr>
<td><strong>Father</strong></td>
</tr>
</tbody>
</table>

Note: For fathers, self-completion followed health.

Pilot 1 was conducted by 8 interviewers working in 7 areas: five in England, one each in Scotland and Wales. Interviewers were briefed by researchers on 10th January and de-briefed on 23rd January, at which time pilot evaluation forms were collected. Sixty interviews with mothers and 45 with fathers were conducted in the fieldwork period, with a further few interviews conducted at later dates.

This sample comprised mainly ‘advantaged’ families whom CLS had recruited through health visitors. Letters inviting participation were given to parents of babies born between March and May 2000. Those willing to take part forwarded their contact details to CLS. An advance letter outlining the survey was then sent by NatCen to all the parents who had volunteered. Interviewers were asked, where possible, to make contact by telephone, though certainly to visit any volunteers who could not be reached in this way.
Interviewers were asked to conduct, where possible, interviews with mothers and fathers, including adoptive, foster and step-parents, in the home of an eligible baby. For twins and multiple births, the oldest baby was to be the subject of the interview.

Respondents were given a £10 gift voucher to thank them for their contribution to testing the MCS1 questionnaire.

2.2.2 Key findings and changes

Participating in the Study

Overall, interviewers reported that parents were very positive about the experience of taking part in the study. As expected, given the nature and source of the sample, there were few problems gaining co-operation. However, fathers living with their baby were harder than mothers to contact, though in most cases interviewers felt that participation could ultimately have been achieved. Partly in view of this, the flexibility to conduct the father interview first was valued by interviewers. This was taken forward into the computerised instrumentation.

The gift voucher was not a reason for participation and most respondents were pleasantly surprised to receive it. Mothers usually received vouchers ‘for the baby’ without any objection from fathers. The response of respondents and the views of interviewers indicated that further use of vouchers on this study was unnecessary.

Questionnaire content

In general, the content of the questionnaire was thought to be interesting and appropriate. Interviewers commented that introductions were needed in places to signal changes in topic and to improve the general flow of the interview.

Interviewers felt that the self-completion module was positioned too early in the mother’s interview; it was subsequently moved to follow the section on Parent’s health. Some of the questions in the face-to-face interview were felt to be sensitive, in particular those on previous relationships and previous pregnancies. The presence of current partners or other children could add to unease and effect data quality. These questions were moved to the self-completion module.

Most interviewers felt that the father interview did not have enough questions about the baby and noted that such items which were included came at the very end of the instrument. A new section of ‘father-only’ questions about time spent with the baby(ies) was introduced at the beginning of this interview. As most of the information in the father interview was of a factual nature, interviewers suggested that it would often be possible to collect the data by proxy. A proxy partner interview was introduced for very specific circumstances.

Many other detailed recommendations for changes to question wording, routing, response categories were included in NatCen’s report on the First Pilot Survey.
**Interview length**

Interviews with mothers averaged (mean) 99 minutes, while those with fathers took an average of 62 minutes. Lengthy interviews had been anticipated; indeed, a key function of the pilot became to measure the overall durations and; hence, the number of items which needed to be excised.

Timings on sections within the instruments showed that the self-completion modules accounted for over a quarter of the total interview time (Table 2.2). Questions on employment and income took up nearly 10 per cent of the total. No other block of questions was notably time-consuming (many were conducted in under three minutes). The high average durations resulted from the sheer volume of questions rather than some element(s) taking longer than anticipated to administer.

<table>
<thead>
<tr>
<th>Table 2.2</th>
<th>Average length of interviews (hh:mm)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mother:</strong></td>
<td><strong>Mother: self completion</strong></td>
</tr>
<tr>
<td>face to face</td>
<td>01:12</td>
</tr>
</tbody>
</table>

Interviewers were unanimous in finding the interviews too long. Although respondents were happy to talk about their baby and did not complain about the length, interviewers felt that the quality of data collected towards the end of the mother’s interview was negatively affected. Certain sections were felt to be particularly lengthy for example, employment and income, parent’s health (especially for fathers), grandparents and the self-completion.

Given that the two interviews were often done in succession and that a baby (plus other children) was often present, interviewers reported some difficulties concentrating continuously for the time required to complete these instruments.

NatCen recommended that the mother interview was reduced to around 70 minutes and the partner to no more than 40 minutes. At this stage, we judged that the self-completion should be limited to 20 minutes.

### 2.3 Pilot Two: Dress Rehearsal

The ‘dress rehearsal’ for the study took place in April 2001. The procedures planned for mainstage sampling and fieldwork were tested. However, it was impractical to expect transformation in a single stage of the lengthy paper instruments into near finalised, fully computerised versions. Hence, the interviews conducted at this stage would be more accurately described as a comprehensive pilot of the instruments rather than a dress rehearsal.

#### 2.3.1 Instrumentation, Sample and Fieldwork

The survey continued to comprise interviews with, in essence, mothers and, where co-resident, fathers. However, for clarity and applicability in all circumstances, the two schedules were labelled ‘main’ and ‘partner’ questionnaires. Furthermore,
household details collected at the beginning of the interviews - from which appropriate respondents were determined automatically by the program – became a distinct module which could be completed with either parental figure. Contents of the instruments were, thus, as shown in Table 2.3.

**Table 2.3 Dress Rehearsal questionnaire content**

<table>
<thead>
<tr>
<th>Household grid</th>
<th>Main</th>
<th>Partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Languages spoken at home</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Ethnic Group</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Baby’s father</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Looking after baby</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Lone parenthood</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Pregnancy</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Labour &amp; delivery</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Baby’s health</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Baby’s development</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Childcare</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Grandparents &amp; friends</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Parent’s health</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Self-completion</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Employment</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Income</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Housing and local area</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Interests</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Time with baby</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

Note: For multiple births, sets of questions relating to ‘the baby’ would be repeated for each cohort member in turn.

Rules were also introduced to permit interviewing ‘part-time resident partners’ and precluding interviews with partners not resident with the cohort member(s). In addition, proxy partner interviews were permitted in tightly defined circumstances, namely if the partner respondent was away during the fieldwork period or incapable of understanding and answering questions for themselves due to physical or mental incapacity.

The sample for the Dress Rehearsal was selected from Child Benefit records administered by the DSS (later renamed DWP). It comprised babies born in a six-week period in June and July in 2001 and living in one of twelve electoral wards at approximately 7 months of age. DSS dispatched an opt-out letter two months prior to the start of dress rehearsal fieldwork and forwarded to CLS contact details for 119 families who did not opt out. Meanwhile, two further families joined the sample having been were identified as eligible by Health Visitors.
The sample was designed to over-represent disadvantaged areas (6) and those with high proportions of people from minority ethnic groups (3), in order to ensure robust testing of procedures across diverse fieldwork areas.

An additional letter - known as the ‘advance letter’ - was sent out centrally by NatCen Operations on the day before the interviewer briefing. This letter was printed on joint Child of the New Century/NatCen headed paper, with the relevant interviewer’s name then handwritten on to each copy. This additional letter was not strictly necessary, given the prior opt-out letter and procedure. However, members of NatCen’s team, especially interviewers and Operations Staff, were strongly of the view that a second letter would substantially benefit the conduct of fieldwork. Therefore, we requested that this be tested in the dress rehearsal. Simultaneously, a letter of this type was requested by the Medical Research Ethics Committee, concerned that an opt-out did not sufficiently ensure informed consent.

Fourteen interviewers were briefed on 10 April, 2001. Given this number of interviewers, in order to give each adequate time to contribute their findings, two de-briefings were held on 24 and 25 April, 2001. At the time of the de-briefs approximately 75 main and 50 partner interviews had been achieved.

Although the majority of the fieldwork was completed in the 13/14 days between briefing and de-brief, interview after de-briefing was permitted, indeed encouraged, in order that interviewers could complete assignments and maximise the numbers recruited to the pilot.

The final outcome achieved 91 and 60 main and partner interviews from a total of 121 issued addresses. Seven families were found to have moved to unknown or ineligible addresses. Hence, the fieldwork response was 91 achieved out of a maximum of 114, which is 80 per cent. It may be noted that response was especially strong in disadvantaged areas but weaker in wards with large minority ethnic communities.

2.3.2 Key findings and changes

Headline comments from interviewers

- Overall, interviewers reported that the dress rehearsal was a positive experience. Most parents were willing to co-operate, interviews were relatively straightforward to arrange and nearly always conducted successfully.

- Whether to co-operate with the study was not necessarily decided jointly by partners. Hence, there were cases where a main interview was achieved but an eligible partner could not be interviewed. Less commonly, one partner might oppose all participation while the other insisted s/he wished to participate. In principle, the right of each individual to decide whether or not to take part was respected, though clearly applying this in these circumstances required careful handling.
• The key finding of concern was that translated interviews were difficult to manage and that data quality might not be satisfactory.

• The duration of the interview was not a major obstacle to arranging interviews, despite the obvious childcare responsibilities of respondents. However, some interviewers reported that the questionnaires were still somewhat too long.

Sample
In general, the sampling procedures worked well and address information was usually comprehensive and accurate. DSS and CLS were notified some name information had been truncated before being supplied to NatCen.

However, as noted above, a small but non-negligible number of selected babies were not resident at the address supplied and in a few cases appeared never to have resided there. This provided forewarning about levels of inaccurate or out-of-date information within Child Benefit records and, as this was mainly due to moves between 7 and 9 months, the proportion of the issued sample who would not be eligible for interview.

The Address Record Form (ARF) upon which interviewers recorded their attempts to contact and interview sample members was reported to operate successfully in the field. Though the overall design was robust, a number of detailed changes to layout and content were suggested by interviewers which noticeably improved the final version.

Briefing
Interviewers found the briefing to be long and intensive. Although the briefing achieved the objectives of enabling interviewers to carry out high-quality data collection, it was felt that not all points had been absorbed and steps needed to be taken at the main stage to reinforce certain briefing points. In addition to modifications to the briefing itself, interviewers were required in advance of the main stage briefings to do an exercise involving completion of Address Record Forms.

Advance materials, contact procedures and co-operation
Though all respondents had been sent an opt-out letter and study information leaflet by the DSS two months beforehand, many had forgotten receiving these. On the other hand, a number of people had recognised that their baby was not eligible for the study according to the criteria in the letter and, hence, needed reassurance from interviewers with regard to this.

Interviewers had copies of the DSS opt-out letter to show respondents. Interviewers noted that the letter appeared to have been sent in a black and white format which could appear like a photocopy. There were also widespread reports that respondents

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1 The eligible birth dates agreed for the main survey had not been amended for the dress rehearsal opt-out letters; since dress rehearsal babies were born before this period it appeared that they were ineligible for the study!
Interviewers felt that the leaflet was attractive and memorable and so it was unlikely that respondents who recalled the letter would simply have forgotten the leaflet. It was recommended that headed, coloured, stationery was used by the DSS for main fieldwork and that study leaflets were always enclosed.

It was further noted that as respondents were sent leaflets with their DSS opt-out letter interviewers did not have a leaflet to give to respondents. A simplified leaflet, in the form of a Question and Answer Sheet, was produced for the main stage.

The advance letter sent out at the start of fieldwork was remembered by virtually every interviewed main respondent; partners had also seen it. Interviewers felt that the advance letter facilitated co-operation and provided re-assurance about the study. That many respondents were expecting the named interviewer to call was especially helpful. It was felt that giving interviewers control of when the letter was posted would enable them to optimise the gap between receipt of letter and first doorstep contact and allow them to plan their work. It was decided to use a similar advance letter, posted by interviewers, throughout the main stage.

Interviewers were able to make contact readily and were well received at the majority of addresses. The willingness to co-operate, thus far only inferred by parent’s failure to ‘opt-out’, was confirmed at this stage and was reflected in appointments which were usually made for within a week of contact, often 2-4 days after first contact. Sometimes interviewers were invited in straightaway, largely on the strength of the NatCen letter and identification. Many parents were keen to participate and enthusiastic about their baby’s selection for this study.

No incentive was offered to participate in the dress rehearsal and interviewers felt none was needed; moreover, they strongly opposed options such as a prize draw on the grounds that this would seem to devalue the study. NatCen researchers did note that supplying a voucher for all participants could, nevertheless, have a marginal positive impact on the response rate. However, the deadweight and organisational costs of this kind of incentive were expected to be very high relative to any benefit. NatCen recommended against the use of incentives and this was accepted.

Interviewers pointed to the potential benefits of having small gift packages which they could give to older siblings and, perhaps, a gift for the Cohort Member. Sticker packs for older children in the household aged 3 and over were introduced for the main stage.

**Interview structure and content**

Interviewers were very positive in their reports about the structure and content of the questionnaire. They felt that the interview flowed well and moved quite quickly from topic to topic and so retained respondent attention. The vast majority of the content seemed to be of clear relevance to both respondent and interviewer. In general, questions were said to be straightforward to answer.

The self-completion module was generally well received and judged to be interesting for respondents. There were some concerns, especially among interviewers in
deprived areas, about the number of questions included in this module. Interviewers felt that there were simply too many items for some respondents. Respondents did also query the length of this. Some thought the self-completion module signified the end of the interview, so a revised introduction to it informed respondents that further questions would be asked.

**Language and translation**

Four of the 14 interviewers were working in wards with high minority ethnic populations. Language problems were experienced by these interviewers. Many of the those interviewed in these wards did not speak English as their first language. The languages prevalent in the dress rehearsal wards were: Urdu, Tamil, Punjabi, Bravanese, Gujarati and Somali. Where the main interviewee could not speak sufficient English, their husband or in one case, a neighbour acted as translators.

Interviewers had concerns about the quality of data they were able to secure at some interviews. The primary concerns were husbands appearing to answer on behalf of their wife, rather than simply translating, together with attitude and sensitive questions. Duration of the main interview also became a major consideration, though respondents appeared willing to co-operate for the required time. However, conducting a partner interview immediately thereafter was sometimes simply not a practical option.

Some interviewers noted occasions whereby respondents, though conducting the interview in English, did not understand many of the baby-related terms which are used infrequently in other contexts, for example ‘coos’, ‘jittery’ or ‘naps’. As well as the potential impact on data quality, the impression might also be given that questionnaire design paid insufficient attention to the diversity of culture and language in Britain. Doubts were raised about the validity and suitability of, in particular, some items in scales which appeared to offer the advantage of producing data comparable to that collected in many other surveys. NatCen asked whether all scales had been tested successfully among the diverse communities of Britain, since we felt that, if not, some confusion or appearance of lack of sensitivity might be created by ‘importing’ certain items.

**Interview length**

Dress rehearsal main interviews averaged (mean) 75 minutes. The household module took an average of 5 minutes to complete. As this was usually conducted together with the main interview, the effective total duration for main interview was 80 minutes. Partner interviews averaged 35 minutes. Therefore, all dress rehearsal interviewing combined could be expected to take nearly two hours. However, there was considerable variation around these means. The fact that a significant minority of interviews were taking a very long time to complete was a particular concern, since it was vital that the burden at sweep 1 deterred relatively few people from participation in future rounds.
Table 2.4  Durations (mean and range) of interviews by ward type (minutes) including self-completion

<table>
<thead>
<tr>
<th></th>
<th>All</th>
<th>Advantaged</th>
<th>Disadvantaged</th>
<th>Ethnic</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Household Module</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>5.3</td>
<td>5.7</td>
<td>4.2</td>
<td>6.2</td>
</tr>
<tr>
<td>Range</td>
<td>1-19</td>
<td>1-15</td>
<td>1-19</td>
<td>1-17</td>
</tr>
<tr>
<td><strong>Main</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>75.0</td>
<td>65.7</td>
<td>71.2</td>
<td>87.5</td>
</tr>
<tr>
<td>Range</td>
<td>49-158</td>
<td>50-91</td>
<td>49-125</td>
<td>58-158</td>
</tr>
<tr>
<td><strong>Partner</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>34.7</td>
<td>32.6</td>
<td>34.3</td>
<td>39.0</td>
</tr>
</tbody>
</table>

**Bases:**
- **Household**: 73 21 27 24
- **Main**: 72 22 27 24
- **Partner**: 38 16 13 9

Timings for individual modules confirmed that all were being completed within reasonable average durations. The self-completion module had been reduced to a manageable length for most respondents, though the average of 23 minutes for main respondents suggested it was still too lengthy. We recommended that an average duration of 15 minutes would be optimal.

There were two sets of views among interviewers about the overall duration of interviewing. One was that the interview length was fully justified and caused few or no real problems for arranging and conducting fieldwork. This was due to the high salience of the study and the relevance of the questions. Some of the interviewers holding this view explained that the subject matter and the range of topics covered meant that the interview rarely seemed as long to either interviewer or respondent as it actually was.

A second view, more common among those working in deprived areas, was that there was too much material in the main interview to handle comfortably and retain respondent enthusiasm. Interviewers taking this view did not contend that the durations were wholly impractical. Rather, they suggested at least some pruning of the main schedule to reduce respondent fatigue and, perhaps, increase attachment to the study in the longer term.

Some interviewers would have preferred an hour average for main interview but most were content with up to 75 minutes, and all accepted that this was a reasonable duration for this survey. Thus it seemed that the modest cuts required to meet the mean duration target of 75 minutes for main interviews would ameliorate most of the concerns about excessive questioning among dress rehearsal interviewers.
2.4 Health Data Linkage Experiment

The dress rehearsal included a health data linkage experiment following proposals from members of the Millennium Cohort consortium to enhance the health information in the study.

This experiment had two components: i) direct recording of data within the interview context by extracting information from Personal Child Health Records and ii) seeking permission to link survey data to routinely collected health data. Standard methods of evaluation (feedback from interviewers at the de-brief) were supplemented by cognitive de-briefs with 10 respondents in order to find out how respondents felt about these two aspects of the study. These follow-up interviews were conducted by two specially trained interviewers and one researcher.

2.4.1 Personal Child Health Record Data

This experiment was conducted with respondents who had odd serial numbers and had available the Personal Child Health Record (PCHR) for the baby. The objective was to locate various information with the PCHR and copy it to a specially developed form (just over one side of A4 paper). It was suggested that the relevant information could be extracted by interviewers while respondents were undertaking the self-completion module. Thereby, little or no increase in interview duration would result. The information required covered baby’s birth weight and gestation, results of new born examination and neonatal hearing test, key details (weight etc) from 6-8 week and 6-9 month review, most recent weight and immunisation details.

Although all respondents who had their baby’s PCHR willingly agreed to the collection of information from the PCHR, wide-ranging difficulties were reported by the interviewers with the extraction of data. The main problems were that the quality of the data in the PCHR’s was highly variable and was not recorded in a standard way across different regions. This meant that often the interviewers needed the help of respondents to extract the relevant information and sometimes respondent’s own knowledge was more up-to-date than the book.

It was felt that collection of information from PCHR’s by interviewers would require a substantial amount of development work in order to work successfully. In addition, it was felt that this method may not be the optimal way of collecting this information. As a result of these concerns, it was agreed that the PCHR form would not be implemented on the main stage of the study. Instead it was recommended that consideration should be given as to whether any further information could be collected as part of the main interview (birth weight, most recent weight, gestational age and immunisations having already been included in the dress rehearsal schedule). Additional questions about hearing tests and problems were added for the main stage and respondents were asked to consult their PCHR in providing the answers to all questions where data should be recorded in the PCHR. In addition, the source of information (PCHR or respondents recollection) was recorded.
2.4.2 Consent Form (Permission to Link Health Record Data)

This part of the experiment was conducted with natural mothers with even serial numbers. Overall it worked well with the only problems of understanding due to language difficulties. All but one of the respondents willingly signed the consent form, with no indication (even during cognitive de-briefs) that they were uncomfortable doing so or that this would have any impact at all on their future participation. Indeed, some seemed to see this a further indicator of the importance and thoroughness of the study.

However, the cognitive de-briefs did reveal that some respondents thought that they were agreeing to the research team accessing their medical records prior to their pregnancy as they had made a mental link with the questions about their own health.

A similar consent form was included at the main stage of the study. The wording was re-drafted slightly to clarify that only maternity and birth records will be accessed and translated consent forms were provided.

2.5 Final phase of questionnaire development

As indicated, further reductions in the number of items included, and some refinements to questions, were required following the dress rehearsal. However, these were not extensive, so further piloting would not have been not required, even had time permitted.

It was, though, important that more checks of data consistency be built into the program and that extensive testing thereof by NatCen and CLS researchers and NatCen Operations staff be undertaken. Details of 187 built-in checks may be found in Appendix A of the questionnaire documentation.
3 MAIN SURVEY SAMPLE DESIGN AND RESPONDENT SELECTION

3.1 Sample design

As indicated in the Introduction, NatCen’s commission for this study did not require a substantial input to the sample design and selection. Readers requiring a comprehensive account are referred, therefore, to the Technical Report on Sampling produced by CLS (Plewis, 2004).

NatCen did input into discussions on sampling strategy, particularly with regard to the most efficient means of implementing the chosen design. In particular, we noted the large number of electoral wards with relatively few expected births during the eligibility period. Selection of many, scattered wards of this type would have been detrimental to efficient conduct of fieldwork. It was agreed, therefore, that wards with especially few births expected be joined to adjacent wards to form larger primary sampling units – hereafter described as ‘super’ wards.

NatCen researchers, Operations staff and interviewers were required to have a sound understanding of the sample’s main features. This understanding is reflected in the following non-technical summary of the sample design, which we hope may be of value to readers requiring an overview rather than a detailed account.

There are two key criteria for membership of the MCS:

i) an eligible date of birth (see below); AND

ii) residence in one of the sample electoral wards aged 9 months.

Table 3.1 Eligibility for MCS sample: dates of birth

<table>
<thead>
<tr>
<th>Country</th>
<th>Eligible Dates of Birth</th>
</tr>
</thead>
</table>

The eligible dates of birth reflected a wish to include children born throughout the year rather than concentrating, as in previous birth cohorts, on those born in a single week. In Scotland and Northern Ireland, the first eligibility date was put back to avoid potential overlaps with a survey of infant feeding practices; the final eligibility
date in these countries was over a year after the first because the survey was extended in an attempt to meet the target sample sizes in these countries.

The decision to cluster the sample in wards and to include all eligible babies in selected wards (instead, for example, of including a proportion of children in all places) reflected a wish to facilitate analyses incorporating socio-economic context, as well as the practical need to constrain fieldwork costs.

Samples were selected separately for each country, in accordance with target sample sizes agreed for each (which is large relative to population in Scotland, Wales and Northern Ireland in order that there would be sufficient sample to allow intra as well inter country comparisons). Within each country wards were classified as ‘disadvantaged’ (D) or ‘advantaged’ (A). Disadvantaged was defined to be below the level of the poorest quarter of wards in England and Wales according to a child poverty index; though the rest of the wards are labelled ‘advantaged’ they include most of each country and so are very diverse. Within England a further group of wards were identified, namely those having (at the time of the 1991 Census) 30% or more of their residents from Black or Asian ethnic groups (E wards). Most of these also had high child poverty rates, but in England ‘Disadvantaged’ wards were selected from those NOT also classified as ‘Ethnic’.

For each country, appropriate numbers of wards were selected within each type of ward (or stratum) according to the required target sample sizes. Relatively high numbers of D and E wards were selected for two reasons:

i) there is a strong policy and academic interest in children from these backgrounds; though, of course, not all of those living in D and E wards are disadvantaged or belong to minority ethnic groups, this approach ensured that substantial numbers of such people would be included in the study;

ii) people from such backgrounds have tended to be less likely to participate in such studies, especially on a longer-term basis. So over-sampling in the selection of wards provided some compensation for this.

The actual selection of wards within strata was done randomly. First wards in England and Scotland were grouped into nine and four regions, respectively. Then in all regions/countries wards were ordered by size (that is, expected number of births). Within each list, wards were selected at fixed intervals from random start points.
### Table 3.2 The numbers of sample wards

<table>
<thead>
<tr>
<th>Country</th>
<th>Ward Type</th>
<th>Number of sample wards</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENGLAND</td>
<td>Advantaged</td>
<td>110</td>
</tr>
<tr>
<td></td>
<td>Disadvantaged</td>
<td>71</td>
</tr>
<tr>
<td></td>
<td>Ethnic</td>
<td>19</td>
</tr>
<tr>
<td>WALES</td>
<td>Advantaged</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Disadvantaged</td>
<td>50</td>
</tr>
<tr>
<td>SCOTLAND</td>
<td>Advantaged</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>Disadvantaged</td>
<td>30</td>
</tr>
<tr>
<td>NORTHERN IRELAND</td>
<td>Advantaged</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Disadvantaged</td>
<td>40</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>398</td>
</tr>
</tbody>
</table>

#### 3.2 Sampling procedures

Having selected sample wards, eligible children had to be identified. The most comprehensive way to identify these Cohort Members was through Child Benefit records. However, Child Benefit records did not include everyone, particularly those who moved into a sample ward shortly before they should be approached for interview. So local Health Visitors were asked to forward the names and addresses of these families.

**Child Benefit Records**

Nearly all of the sample was drawn from Child Benefit (CB) records held by the Department of Work and Pensions (DWP). Until June 2001 this was the Department of Social Security (DSS). There were four stages to the procedure for drawing the sample from these records:

i) DWP conducted ‘scans’ of its records every four weeks to identify all eligible babies who were approaching the age at which we wished to interview their parents;

ii) DWP removed ‘sensitive cases’ from the sample. These were families with whom the DWP was ‘in correspondence’, including but not only suspected benefit fraud cases, plus cases that were sensitive because a child may have died or been removed from a parent. A little under 3 per cent of eligible families were excluded in this way.

iii) DWP then sent *opt-out letters* to the recipients of Child Benefit for the cohort babies. A ‘glossy’ information leaflet explaining the study was enclosed with these letters. Addresses in Wales were sent copies in both Welsh and English. Letters were dispatched every four weeks, to families whose babies were then around 7 months old. The letter invited parents to take part in the study and gave them the opportunity to opt-out by telephoning or writing to the DWP.
within two weeks of the letter’s dispatch. Just under 7 per cent of families opted-out of the study at this point.

iv) After the opt-out period, the final DWP stage at the next scan was the removal of any newly sensitive cases and any cases already known to have moved out of sample wards. Any address updates for families which have moved within or between sample wards were also made.

Additionally procedures were introduced during fieldwork to check four weeks after the initial scan for any eligible babies appearing newly on the Child Benefit records (that is, having a newly recorded change of address falling within a sample ward) who were added to the sample 4 weeks later.

Every four weeks DWP sent sample details to the Centre for Longitudinal Studies and, after checking, formatting and adding serial numbers, these were forwarded to Natcen.

The vast majority – at least 90% in Great Britain and 85% in Northern Ireland - of those identified in the scanning were issued to field.

**Health Visitors**

In order to identify some of the families missed by CB records and for general support on promoting the study, CLS recruited the help of Health Visitors working in the sample wards.

Health Visitors were asked to identify parents of babies who had moved in to sample wards (or moved within these wards) when a baby was aged 5-8 months (and who probably would not, therefore, have been included in the original DWP sample).

The Health Visitor asked parents who had recently moved to the area for permission to pass their name and address onto the CLS. They gave parents a letter and a leaflet about the study.

It was hoped, therefore, that Health Visitors would identify some eligible families who had not received DWP letters inviting participation because they had recently moved. Due to recent reorganisation of the Health Service, Health Visitors were not asked to check additionally for other eligible babies who may not have received a DWP letter.

Interviewers were alerted about families identified by Health Visitor, since a slightly different door-step introduction was required for these people. In practice, there were few such families in the issued sample. These families were incorporated by CLS into the four-weekly sample provided to NatCen and, shortly afterwards, issued to interviewers.
3.3 Respondent selection

In general terms, the survey had the straightforward objective of interviewing the cohort member’s mother and her partner, if co-resident. However, considerable attention was given to defining eligible respondents and ensuring their selection for entire range of household scenarios which it was envisaged interviews might encounter.

The HOUSEHOLD module could be administered to any of the following people who were resident with the baby:

- Mother (natural, adoptive, foster or step)
- Father (natural, adoptive, foster or step)
- Mother’s cohabiting partner
- Father’s cohabiting partner
- Main carer (if no parents resident)
- Main carer’s cohabiting partner (if no parents resident)

Interviewers were instructed not to collect the household data from anyone else in the household.

Once the household details were completed, the interview program determined who was asked for the MAIN interview and who, if anyone, should be invited to do the PARTNER interview. These two interviews could be completed in either order, but interviewers were instructed that it was preferable to start with the main interview.

In the vast majority of cases, the mother was the main respondent. Some exceptions are indicated in Table 3.3, which outlines the rules for respondent selection. So, for example, lone fathers were asked to complete a main interview (but the questions about pregnancy and birth were skipped). Foster/adoptive parents were eligible for interview in the same way as natural parents (note, again, that the questions about pregnancy and birth were skipped). If the baby was permanently cared for by and lived with someone other than parents (e.g. grandparent/aunt) then these carers were eligible for interview. However, if the mother and grandmother lived together, the mother was interviewed even where the grandmother was the main carer (partly in order to collect pregnancy and birth information). Only natural mothers who did not live with their baby were not eligible for interview. Same sex partners were both eligible for interview – if one was a natural parent of the child, they were the main respondent. If neither were natural parents, a question in the program established who was the main carer.

The inability of someone to take part due to being away from home or incapacity could cause the program to change who was to be the main respondent. For example, if a mother’s mental ill health precluded an interview, then the father could become the main respondent.
### Table 3.3 Who Gets Which Interview?

<table>
<thead>
<tr>
<th>Who’s resident?</th>
<th>Household questionnaire</th>
<th>Main questionnaire</th>
<th>Partner questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both parents</td>
<td>Either</td>
<td>Mother</td>
<td>Father</td>
</tr>
<tr>
<td>Mother only</td>
<td>Mother</td>
<td>Mother</td>
<td>-</td>
</tr>
<tr>
<td>Father only</td>
<td>Father</td>
<td>Father</td>
<td>-</td>
</tr>
<tr>
<td>Mother and step-father/cohabiting partner</td>
<td>Either</td>
<td>Mother</td>
<td>Step-father/cohabiting partner</td>
</tr>
<tr>
<td>Father and step-mother/cohabiting partner</td>
<td>Either</td>
<td>Father</td>
<td>Step-mother/cohabiting partner</td>
</tr>
</tbody>
</table>

Parents who were not resident with the baby were not interviewed. However, where a parent was sometimes or ‘part-time’ resident, for example spending one or two nights a week at the baby’s home, then they were asked to take part. Interviewers were not expected to go to another address to interview a parent who was not fully resident, though could do so at their discretion.
4 SUMMARY OF FINAL SURVEY INSTRUMENTATION

This one-page summary is designed to enable readers quickly to access an outline of what was included in MCS Sweep One. Table 4.1 summarises the content of the questionnaires. In addition, at the end of the main interview, respondents who were either the natural mother, or in their absence, the main carer were asked to read and sign a consent form giving permission to obtain and link clearly specified health records to the survey data.

Table 4.1 Summary of MCS Sweep Questionnaire Content

<table>
<thead>
<tr>
<th>Module</th>
<th>Title</th>
<th>‘Mother’ or ‘Father’</th>
<th>Main</th>
<th>Partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household</td>
<td>Household grid</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Languages spoken</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>Non-resident parents</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>Involvement with the baby(ies)</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>C</td>
<td>Pregnancy, labour &amp; delivery</td>
<td>✓</td>
<td></td>
<td>(where applic.)</td>
</tr>
<tr>
<td>D</td>
<td>Baby’s health &amp; development</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>Childcare</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>Grandparents &amp; friends</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>G</td>
<td>Parent’s health</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>H</td>
<td>Self-completion</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>J</td>
<td>Employment &amp; education</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>K</td>
<td>Housing &amp; local area</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>L</td>
<td>Interests and time with baby(ies)</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

The self completion module covered:
- Baby’s temperament & behaviour
- Relationship with partner
- Previous relationships
- Domestic tasks
- Previous pregnancies
- Mental health
- Attitudes to relationships, parenting, work and so forth

The program was designed to cope with twins and multiple births (up to 6 babies!) within a single main interview. Questions related to cohort members were, thus, repeated for each baby in turn.
5 CONDUCT OF FIELDWORK 1: MATERIALS, BRIEFINGS AND PROCEDURES

5.1 Overview of procedures for interviewers

In summary, the study involved the following procedures for interviewers:

i) attending one day briefing conference with researchers Natcen, CLS and, Northern Ireland, NISRA;
ii) receipt of assignments (sample addresses) by modem (initially by disk in Northern Ireland) and post every four weeks;
iii) attempting to make contact with a parent (or an adult caring for the child) for all the babies – Cohort Members – in assignments; this included attempting to trace any Cohort Members who had moved;
iv) arranging for ‘main’ interviews to be conducted as close as possible to a specific target date, namely when each Cohort Member was 9 months and 15 days old;
v) collecting brief information about all household members from either parent (or their partner) by means of computer assisted personal interviewing (CAPI);
vi) conducting main and partner CAPI interviews with each parent (or carer) as instructed by the program; both interviews included a computerised self-completion module (CASI);
vii) administer a request for consent to link specified health records to survey data;
viii) completing a paper ARF for all addresses;
ix) completing entry of administrative information within the CAPI program;
x) frequent return of work by modem and post.

5.2 Materials for interviewers

Interviewers’ materials for this survey comprised:

- Police letters
- Copies of DWP opt-out letters
- Study leaflets – ‘glossy’ card, green and blue design
- Shortened leaflets – simplified ‘Info Sheet’ on peach A4 paper
- Natcen/NISRA advance letters for every address
- Extra copies of advance letters to show as necessary
- Address Record Forms (ARFs)
- Sample cover sheet
- Postcode listings for each sample ward
- Forwarding letters with contact form, blank envelopes and reply-paid envelopes
- Appointment cards
- Show cards (slightly different versions in each country)
- Consent forms – ‘Permission to Obtain Health Information’
- Laptop computer with CAPI questionnaire
- Project Instructions
- Translations of the advance letter, shortened leaflet and consent forms
- Sticker Packs for older siblings
- Leaflets about the National Centre for Social Research
The advance letter and leaflet were translated in to Welsh and provided, alongside the English versions, for all Welsh addresses.

5.3 Briefings

Full day briefings for all interviewers were led by a member of the NatCen or NISRA research team with the substantial involvement of a CLS researcher. Briefings covered the origins and purpose of the study, sample and questionnaire information, details of fieldwork procedures (as outlined later in this chapter) and full practice interviews with ‘dummy’ main and partner respondents.

The survey was launched in England and Wales with 17 briefings held in seven cities between 31 May and 15 June, 2001. Launch briefings in Scotland (4) were held mainly in August (17th – 31st), with one briefing in September (6th). Only three further briefings were conducted (3 October, 29 November and 7 February, 2002) for interviewers in Great Britain. This was fewer than had been anticipated due to the high rate of retention of interviewers on the study. A total of seven briefings were conducted in Northern Ireland.

In total, 280 NatCen and 59 NISRA interviewers attended a briefing and carried out work on the study.

Key instructions made at the briefings which are not included elsewhere in this document included:

- Ensuring that dates of interview were entered correctly, recognising that interviewing at one household may take place on different dates;
- Trying to ensure the main respondent had to hand the Cohort Member’s Personal Child Health Record;
- Checking early whether respondents will have any difficulties reading showcards and the self-completion module;
- Making sure relationships recorded in the household module were coded ‘the right way round’ according to each question wording (for example, being sure to code ‘mother’ not ‘daughter’, as appropriate);
- Taking care to indicate the correct ‘units’ (weeks, months, pounds, kilos and so forth) before entering time periods and weights;
- Encouraging respondents to self-complete the appropriate module, due to sensitive nature of certain questions.

Finally, the importance of engaging at last one parent in the study was emphasised to interviewers. That is, while the aim was to involve both parents where resident, much the most important thing was to secure participation of at least one parent at this stage.
5.4 Issuing sample to interviewers

Sample was issued to interviewers at four week intervals. Serial numbers were allocated electronically and collected by interviewers through modems. Sample information was provided on Address Record Forms, upon which interviewers recorded their attempts to contact and interview sample members. A copy of this Form may be found in the Appendix.

Sample information was provided on two labels stuck upon the front of each Address Record Form. The first is a standard address label, in the form of the following (fictitious) example:

<table>
<thead>
<tr>
<th>SN:01299997R</th>
<th>FA:8</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRS MELANIE JONES</td>
<td></td>
</tr>
<tr>
<td>35 Northampton Square</td>
<td></td>
</tr>
<tr>
<td>London</td>
<td></td>
</tr>
<tr>
<td>EC1V OAX</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td></td>
</tr>
</tbody>
</table>

The serial number was in the top left corner, with NatCen field area in the top right. The name and address of the Child Benefit recipient (for DWP sample) or parent (for HV sample) followed. For the Heath Visitor sample only, the address label may also have contained the name of a second parent and a telephone number.

The second label

The second label provided additional information essential for this survey:

<table>
<thead>
<tr>
<th>SN:01299997R</th>
<th>SType:CB</th>
</tr>
</thead>
<tbody>
<tr>
<td>DoB: 7/9/2000</td>
<td>PType:A</td>
</tr>
<tr>
<td>Target Date: 22/6/2001</td>
<td></td>
</tr>
<tr>
<td>Name of Baby: BELINDA JONES</td>
<td></td>
</tr>
</tbody>
</table>

The serial number was repeated on this information label. In the top right hand corner, SType denoted whether the baby has been sampled via Child Benefit records (CB) or via Health Visitors (HV) and Ptype denoted ward type i.e. A (Advantaged), D (Disadvantaged) or E (relatively high minority ethnic population). The baby’s or babies’ date of birth (DoB) appeared below the serial number and the target interview date appeared below this. The final piece of information on the address label was the name - first name and surname - of the baby or babies (there was space on the label for the names of up to 6 babies).
As noted above, the sample for this study was issued in 4-weekly waves. Each issued wave of fieldwork (except the last) contained babies born in a 4-week period. In England and Wales sample was issued in 2 through 14 inclusive; in Scotland and Northern Ireland sample was issued in waves 5 through 18. The timetable (Table 5.1) shows the dates of birth and fieldwork start dates for each wave.

**Table 5.1 Fieldwork schedule**

<table>
<thead>
<tr>
<th>Fieldwork Wave</th>
<th>Baby’s Date of Birth</th>
<th>Issued to Field</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wave 2</td>
<td>1st - 28th Sept 2000</td>
<td>11th June 2001</td>
</tr>
<tr>
<td>Wave 3</td>
<td>29th Sept - 26th Oct 2000</td>
<td>9th July</td>
</tr>
<tr>
<td>Wave 4</td>
<td>27th Oct - 23rd Nov 2000</td>
<td>6th August</td>
</tr>
<tr>
<td>Wave 5</td>
<td>24th Nov - 21st Dec 2000</td>
<td>3rd September</td>
</tr>
<tr>
<td>Wave 6</td>
<td>22nd Dec 2000 - 18th Jan 2001</td>
<td>1st October</td>
</tr>
<tr>
<td>Wave 7</td>
<td>19th Jan - 15th Feb 2001</td>
<td>29th October</td>
</tr>
<tr>
<td>Wave 8</td>
<td>16th Feb - 15th Mar 2001</td>
<td>26th November</td>
</tr>
<tr>
<td>Wave 9</td>
<td>16th Mar - 12th Apr 2001</td>
<td>20th Dec 2001</td>
</tr>
<tr>
<td>Wave 10</td>
<td>13th Apr - 10th May 2001</td>
<td>21st Jan 2002</td>
</tr>
<tr>
<td>Wave 11</td>
<td>11th May - 7th June 2001</td>
<td>18th February</td>
</tr>
<tr>
<td>Wave 12</td>
<td>8th June - 5th July 2001</td>
<td>18th March</td>
</tr>
<tr>
<td>Wave 13</td>
<td>6th July - 2nd Aug 2001</td>
<td>15th April</td>
</tr>
<tr>
<td>Wave 14</td>
<td>3rd Aug - 30th Aug 2001</td>
<td>13th May (see note)</td>
</tr>
<tr>
<td>Wave 15</td>
<td>31st Aug - 27th Sept 2001</td>
<td>10th June</td>
</tr>
<tr>
<td>Wave 16</td>
<td>28th Sept - 25th Oct 2001</td>
<td>8th July</td>
</tr>
<tr>
<td>Wave 17</td>
<td>26th Oct - 23rd Nov 2001</td>
<td>5th August</td>
</tr>
<tr>
<td>Wave 18</td>
<td>24th Nov 2001 – 11th Jan 2002</td>
<td>2nd September, 2002</td>
</tr>
</tbody>
</table>

Note: Issued dates are as scheduled; some waves were made available to interviewers shortly ahead of these dates. The sample for the final wave (14) in England and Wales was delivered to NatCen 4 weeks late and issued in early June.

### 5.5 Contacting respondents

As outlined earlier, eligible respondents should have already received a letter and a leaflet about the study – either an opt-out letter and information leaflet from the DWP or a letter and leaflet from a Health Visitor. However, these had been sent several weeks before interviewers’ first opportunity to call. Therefore, following their successful use in the dress rehearsal, ‘advance’ letters were provided for each address. The addressee was nearly always the parent of the cohort member, usually the mother. Strictly, though, DWP provided the name of the Child Benefit recipient, so occasionally this could be someone other than a parent. There was a space in the text of the letter for interviewers to write in their name to aid recognition when they called to make an appointment with the family.
The timing for posting letters was largely at interviewers’ discretion (within the context of having target dates for interviews). Experience in the dress rehearsal indicated that letters received just a few days before the first visit would be most effective. Interviewers were given this advice but also instructed to be sure to allow at least two working days for delivery.

The dress rehearsal had also shown that most parents would make an appointment for interview within four or five days of first contact. So while interviewers needed to post the advance letter and call at the address ahead of the target date, they were asked to try not to do this too far ahead (and, if this was necessary, to be prepared to explain why they wanted an appointment on or near the target date, rather than straightaway).

A shortened leaflet or Info Sheet was provided for use on the doorstep and to leave with respondents. To help respondents whose first language was not English or Welsh to take an informed decision whether or not to take part in the study, the advance letter and the Info Sheet were translated into seven other languages:

- Punjabi
- Gujarati
- Bengali
- Turkish
- Kurdish
- Urdu
- Somali

The selection of these languages was based on the most common non-English languages spoken in the 19 ‘ethnic’ wards.

The Consent Form was also translated into these languages.

These translated materials were made available to interviewers on request, as it was not possible to assess beforehand which families would require translated materials.

**Introducing the study**

Interviewers were instructed to seek contact with the person named on the ARF address label. However, they could introduce the survey to either parent, a partner of a parent or, where neither parent is resident, the main carer or their partner.

It was very important that all potential respondents were properly informed about this study before they agreed to take part and interviewers were briefed accordingly with these instructions:
Always assess each individual’s needs for information before you start. First, check whether the respondent has received the DWP letter, study leaflet and Natcen letter. If not, encourage people to read your spare copies of these documents. And be prepared to offer the shortened leaflet if they seem to be finding the other materials rather a lot to read.

Second, where you establish the respondent has received the letters and study leaflet, check whether they read these and understand the key features of the study. If necessary, offer them spare copies. Unless a respondent decides to read the full study leaflet while you are there, always show the shortened leaflet and ask if they would like to read this short Information Sheet to inform or remind themselves of the main points about the study. If they do not wish to read this before you start, you should leave a copy for reference at the end of your interview.

Follow this procedure with each and every respondent. Do not assume that the main respondent will have informed their partner or fellow household members about the study. Indeed, do not assume that the main respondent definitely will have received and read the letters and leaflet – they may not have arrived, they may not have been opened or you may even be interviewing someone other than the person named on the letters or at another address!

Bear in mind that any Health Visitor (HV) addresses will not have had a DWP opt-out letter, so you should not refer to or show this. They may have been encouraged to participate by a Health Visitor or simply been provided with a letter and leaflet or Information Sheet. So apart from not using the DWP letter, check in exactly the same way their needs for information and that they are properly informed about the study before you start interviewing.

Other guidance on introducing the survey included:
- Emphasising the requirement to showing an identity card at all addresses and to anyone who asks to see it;
- A reminder always to refer to the study as ‘Child of the New Century’ rather than the Millennium Cohort Study. Explanation of the study might start with ‘The study is all about babies born at the beginning of the 21st century and their parents’.
- A recommendation to let the shortened leaflet do some of this work in answering questions about the study, in particular these four key questions:

  "How long will the survey take?"
  The main interview – usually with the baby’s mother – will take about 70-75 minutes. Most interviews with fathers take about half an hour.

  "Do both interviews have to be done at the same time."
  No. And they can be done in either order, though we prefer to do the main interview first.
“Will the government/DWP/DSS see my replies?”

No, they will not know who said what. The names and addresses of those interviewed in this study are known only to the National Centre for Social Research and researchers at the Institute of Education.

Your name and address will never be revealed without your permission and no one’s answers can be personally identified without these.

“How can I be sure you are a genuine interviewer?”

I have shown you my identity card. If you wish to check further, please telephone the ’National Centre’ Green Team project controller, Pauline Burge or her deputy Janice Morris. Or to check about the study you may wish to call the Child of the New Century freephone number which is on the leaflets and letter.”

Making Appointments

Interviewers were told not to expect to conduct interviews of this length on first visits. Their guidance was, if possible, try to get a time when the baby was asleep or being looked after by someone else.

Given the need to secure the long-term co-operation of the parents, the importance of respondents choosing a time convenient to them was emphasised. Respondents mistakenly feeling they should agree to do the interview straightaway or agreeing to ‘squeeze it in’ as soon as they could were to be avoided. Nevertheless, where a respondent was already well-informed and wished to do the interview straightaway, that was permitted, since clearly not to do so risked losing interviews by seeking to make appointments unnecessarily.

Interviewers were required to make a minimum of six calls before returning an unproductive outcome.

Twins and Multiple Births

The CAPI program was designed to cope with twins and multiple births (up to 6 babies) within a single main interview. Some questions were asked about each baby. Since the sample information label included the names of Cohort Members, interviewers usually had advance notice of a family with twins or triplets, so they could allow in advance a little extra time for the interview.

5.6 Timing of interviews: Target Dates

Each main interview was to be conducted as close as practical to the day when the cohort member(s) reached 9 months and 15 days of age. This was the ‘target date for interview’ which was printed on the second information label. The reason for having this target was that babies grow and develop very quickly at this age. In order to be able to compare, for example, the development of babies in different groups, we needed to make sure that all the babies were approximately the same age when the information about them was collected. Interviewers were instructed to organise their
work so as to conduct as many main interviews as possible within a week of the target date.

However, it was important not to risk losing interviews by sticking too rigidly to target dates. So, for example, if a family was away for some time, interviewers were encouraged to keep pursuing an interview. In principle, we accepted main interviews conducted up until the baby reached 11 months, though specific requests to conduct main interviews in the 12 month were generally granted. Partner interviews were possible until the baby’s first birthday.

5.7 Translation and Proxy interviewing

**Interviews in translation**

All the babies who met the eligibility criteria were equally entitled to be part of this Cohort study and so it was important not to exclude families in which the parents did not speak fluent English. However, neither time nor money was available to translate the questionnaire into other languages. So for respondents unable to understand English sufficiently for an interview, the aim was to conduct interviews through a translator. This could be a family member or a Natcen interviewer. It should not have been a friend or acquaintance from the local community due the sensitivity of several questions. For the same reason, interviewers were advised that older children were also unlikely to be suitable translators.

Interviewers who themselves were able to translate adequately were asked to do so. Commonly, though, the interviewer had to determine whether to proceed with translation by another family member (ideally of the same sex) or to request the help of another NatCen interviewer. Interviewers were advised to explain that translation makes for a very lengthy interview, and so to plan appointments accordingly.

Interviewers were required to record in the ‘Admin Block’ of the program (completed by interviewers before transmitting data to the office) and on the ARF whether or not the interview was conducted in full or in part in translation and in which language(s). Clearly this is crucial information for future interviews.

**Proxy interviewing**

Conducting main interviews by proxy was not permitted. Some information could be collected by proxy if and only if a respondent was either away from home for the survey period or unable to do an interview due to being incapacitated. By implication, proxy interviews should not have been be conducted if a respondent was unable to do an interview on their own due to language problems. Proxy interviews were not to have been conducted for parents who were resident and capable of being interviewed, but who refused or claimed not to have time to participate because of other commitments.

Questions in the household module established whether the short module proxy questions were to be asked. Only if the CAPI program instructed a proxy interview, was this permitted. So interviewers were not required to make decisions about proxy interviews; indeed their instructions were not to make such decisions.
5.8 The Consent Form

At the end of the main interview, the respondent who was the natural mother (or, in her absence, the main carer) was asked to read and decide whether to sign a consent form giving permission to link their survey data to health data. Interviewers were asked to ensure that all respondents read this form thoroughly before deciding whether or not to sign. If a respondent was unable to read the form for any reason (perhaps due to reading/sight problems or because they are attending to the baby’s needs), interviewers were instructed to read it out.

There were two distinct consents on the form. The first (A) asked for consent to the research team obtaining information about the respondent’s pregnancy and baby’s birth from health records (computerised summaries, not individual notes). Only information about pregnancy and birth was to be obtained. This information will be of great benefit to the study as it will give researchers a more complete picture of cohort member’s starts in life.

The second (B) consent asked to link to the National Health Service Central Register (NHSCR). This study, like the previous cohort studies, would like to mark the records of the cohort children on this register. This is to help keep track of them in the future, should other contact be lost. The register contains NHS number and the health authority for which their GP works, but not detailed medical records or individual addresses. Though neither the NHSCR nor the Health Authority provide addresses directly, other cohort studies have been able to re-establish lost contact with some cohort members by asking the health authority to forward a letter. It is, of course, up to the cohort member or their family to decide whether or not to respond. The NHSCR can also tell the study team if a cohort member dies though interviewers were not required to volunteer this information unless asked.

Respondents who were willing to give consent signed and printed their name and dated the form. It was possible to give one consent but withhold the other simply by crossing out either A or B. Only the natural mother can give consent for her pregnancy records to be accessed. If a father or other relative was the main carer and was completing this consent form, they could give consent with respect only to clause B.

Interviewers were told to be sure to write the serial number on the top of each signed consent form straightaway. They then left a blank copy of the consent form with the respondent for their records.

The consent form was translated into the same languages as the advance letter and simplified leaflet.
5.9 Safety and confidentiality

5.9.1 Notifying the police

Interviewers had to notify the police before starting work. This was especially important as the study involved visiting people with babies. Project specific police letters were provided. The instructions to interviewers with regard to this were as follows:

You should call at the nearest police station in the area in which you are working. Tell the desk officer what the study is about, give them a copy of the advance letter, and explain how long you will be working in the area. Then present your identity card and leave your name and home telephone number. Ensure that all the details you have given are recorded in the day book at the station desk, if that station has one. Make a note of the name of the officer to whom you speak and the date of your call so that in the event of any query or complaint to the police, you are fully covered. It is reassuring for suspicious parents, as well as those people you come into contact with when trying to make contact, to be told that the police know about you.

5.9.2 Interviewing parents aged 15 and under

It was possible for a main or partner respondent to be aged 15 or under. Where the young person was living with their parent(s), interviewers were required to get permission from a parent before the interview.

If the young parent was not living with his/her natural or adoptive parent, permission was to be obtained from the person(s) in the household who was in loco parentis for them on a permanent/long-term basis. Such a person was never to be asked to give permission if the natural or adopted parent was a member of the young person’s household: preference was always given to a natural/adopted parent.

The parent or “guardian” of a young person had to be present at the time of the interview, though not necessarily in the same room.

Where a young person wished to take part but either or both parents were opposed, interviewers were instructed not to conduct an interview. They were permitted to provide the Study’s freephone number, in order that the young person could, if they wished, contact the Study upon reaching 16 years in order to secure the Cohort Member’s long-term involvement.

5.9.3 Known respondents

Interviewers were precluded from interviewing anyone known to them personally, such as a friend, a neighbour or the son or daughter of a friend. This included anyone
know in a professional capacity such as a colleague at work or tutor at college. Such instances were re-assigned to other interviewers.

5.9.4 Handling babies

In general, handling of babies by interviewers was discouraged. Interviewers were briefed never to ask to touch or pick up a baby and never to pick up or touch a baby uninvited. Where they had to entertain a child (for example while a respondent mother did the self-completion module) interviewers were advised to be ‘ultra-careful: sit on the floor with them rather than picking them up and walking around, so there is no chance at all that they could fall. Try never to be left alone with the baby or other children.’

It was explained to interviewers that they were entitled to explain to respondents that, however well they were getting on and however much they loved children, it would be best for all if they were not left alone with children. If, for example, a parent had to use the lavatory, the interviewer could reasonably ask the respondent to place the child wherever they would if the interviewer were not present.

5.9.5 “Child Abuse“

As in all surveys, it was very important that to maintain the confidentiality of the information that was gathered for the study. Respondents needed to feel sure that the information they provided would be used only for the study and for no other purpose. It was important that the respondents did not have the impression that interviewers represented any official agency nor that they were “snooping” on them. Worries of this kind might have been even more pronounced in the case of young babies. So it was important that interviewers did as much as possible to alleviate them.

Interviewers were briefed that some of the parents visited may feel under pressure due to the demands of looking after a young baby. A telephone number of a support line for parents was included on the Info Sheet. However, it was recognised that there could exceptional occasions when because of various signs observed, interviewers became concerned about the treatment of the baby or other children in a family. Interviewers were advised to be very cautious about drawing inferences from their contact with families, bearing in mind they were unlikely to be professionally qualified to make judgements about “abuse”.

Nevertheless, it was recognised that, based on their observation, an interviewer’s concerns about a child could be so intense that the interviewer felt s/he must do something. In circumstances where an interviewer was convinced of a potential or actual danger of “abuse” they were asked to speak directly with NatCen’s Deputy Head of Operations, who took the lead in liaising with senior research colleagues to determine what action, if any, was appropriate. Such circumstances were, as anticipated extremely rare (less than five instances) but could, of course, have a profound impact on the interviewers involved.
5.10 Tracing respondents and establishing eligibility

Where interviewers could not find an address or, more commonly, discovered that the cohort member was not living at the address provided, they were required to trace— in other words, attempt to find or establish their current address. Though the objective was to locate the cohort member, a critical instruction to interviewers was: **ALWAYS TRACE ADULTS, NEVER TRACE BABIES.** That is, interviewers were always to ask people if they know the whereabouts of an adult, never to ask about a baby.

In the first instance, the adult to trace was the person named on the address label. Other adults were traced only when it was established that the named person was not eligible for interview (e.g. not living with the cohort member).

To trace people who have moved, interviewers were advised that the current occupants of the sample address and their neighbours were the obvious contacts to pursue. Even if they did not know the new address of the named adult, they might know close friends or relatives in the area who could be contacted. To help with both tracing and establishing eligibility, interviewers were asked try to establish when a family had moved.

It was understood that interviewers might speak with someone who knew the new address but, understandably, was not prepared to divulge this. For this situation, a forwarding letter and new address sheet were supplied. (see Appendix). Interviewer could ask the contact to give or post a letter on their behalf. The serial number would be written on the forwarding letter and new address sheet, as well as the name of the person who agreed to forward the letter. These documents and a reply paid envelope would be sealed in another envelope, onto which the adult’s name would be written.

As expected, very few addresses included mistakes which made them difficult to locate. Nevertheless, interviewers were required to search carefully for any such addresses. Where the address appears incomplete or inaccurate, they were advised to check with the local council or police, Post Office, sorting office or in telephone directories.

The tracing procedures are summarised in the following checklist provided to interviewers:
Tracing Checklist

IF YOU ARE GIVEN AN INCOMPLETE ADDRESS, HAVE YOU:

- checked with the Post Office to get a full address
- checked in telephone directories
- checked for roads or streets with a similar name in the local area

IF YOU CANNOT FIND THE ADDRESS, HAVE YOU:

- checked the telephone directory
- looked at local street maps
- consulted the Post Office
- consulted the police
- asked local shops such as a newsagent or florists
- checked at the local library
- asked people who live in the local area

IF THE COHORT MEMBER HAS MOVED, HAVE YOU DONE THE FOLLOWING:

- asked the present occupants for the cohort member’s whereabouts
- asked the neighbours
- followed up any local friends/relatives you are told might be able to help
- followed up any other useful leads

Having established a new address, interviewers next had to check whether it was within their sample ward. They were supplied with a list of postcodes to enable this to be done. For any new address within the ward, interviewers were briefed to seek contact, while being fully aware that the Child Benefit claimant may not have had the advance materials. In these circumstances, copies of the DWP letter and study leaflet were to be provided and the eligible parent offered an informed opportunity to opt out of the study.

For a new address not in the sampled ward, interviewers had simply to follow the instructions to complete the ARF unless the following exception applied:

If the family have moved out of ward but it was clear from neighbours or the new occupants that the cohort member was living at the address on the day s/he became exactly nine months old, then the parents were still eligible for interview. If they had moved locally, interviewer could trace them to their new address and try to interview them there. If they had moved a substantial distance, the ARF – with new address and date of moving - was to returned immediately for re-issuing to another interviewer.

Interviewers were briefed to record all tracing activities and relevant information in full on the ARF. The importance of detail was emphasised, since the information provided by interviewers to be used by CLS in their further work to trace sample
members. ARFs for all cases in which cohort members’ residence was unknown were passed to CLS for this purpose.

CLS used Tracing Unit Outcome Forms to record their tracing activity. These were attached to the appropriate ARFs and sent to NatCen, who issued to field new eligible addresses.
6 FIELDWORK 2 : QUALITY CONTROL AND ISSUES ARISING

6.1 Quality control

All interviewers in Great Britain were closely monitored through NatCen’s network of Area Managers and project supervisors, working in close collaboration with Operation’s Green Team. In addition to routine support and progress chasing, every interviewer is accompanied on a live project in the field twice yearly. On one of these accompaniments the previous year’s work is formally reviewed, the aim being to provide feedback to encourage and enhance good work, and to highlight any weaker areas so that they can be the focus of improvement. The review encompasses the interviewer’s response rates, outcomes of recall checks, outcomes from conversions and re-issues, feedback from respondents, comments about return of work and the standard of work, and the previous supervision report.

NatCen’s quality control practices include a recall check on ten per cent of issued samples. Hence, throughout fieldwork for this Study, a proportion of respondents were contacted by Natcen Operations Department to check the quality of fieldwork. On average, NatCen checks ten per cent of the issued sample. For this survey, the percentage of productive interviews checked was highest in early waves of fieldwork, in order to ensure that as far as possible that the work of all interviewers was subject to early checking.

Checks included:
- receipt of advance letter
- interviewer approach and use of ID card
- supply of the study Information Sheet
- use of show cards and the laptop computer, including for self-completion
- provision of the Consent Form, including respondent’s copy.

No substantial problems were identified through these recall checks. The final question asked respondents “what comments do you have about our interviewer and the manner in which the interview was conducted?” The substantial number of positive comments, together with the paucity of negative reactions, confirmed how well the study and the interviewers had been received by participants.

In Northern Ireland, NISRA’s rigourous control procedures included:
- Weekly ‘calls and outcomes’ reports to check the progress of each interviewer:
- Checking of ARFs for non-contact outcomes (number and timing of calls) and reasons for ineligibles and refusals;
- Ensuring all interviews (productive and non-productive) had a final outcome, and that the computer and ARF codes corresponded;
- Checks that interviewers conducted interviews as close as possible to target dates.
• Regular monitoring of interviewer and survey response rates
• Issuing recall cards to approximately 10% of the sample for each wave.

6.2 Other fieldwork issues

6.2.1 Sticker packs
As a result of one of the recommendations from the Dress Rehearsal, it was decided to provide interviewers with packs containing stickers that could be given to older siblings of the cohort members. Interviewers were told that the sticker packs were suitable for children aged 3 years and over. It was felt that giving these gifts to older children would provide some form of ‘compensation’ for the fact their younger sibling was getting lots of attention and would also be seen as a gesture of goodwill by respondents and hence be conducive to future participation.

These sticker packs were purchased from a company that had been used by NatCen on another study. Shortly after the start of fieldwork (in August 2001) it came to our attention that some of the surprise packs contained an image that was clearly unsuitable for children. A memo was issued immediately to all interviewers working on the study to open all their surprise packs and check the contents before giving them to any more children. The supplier subsequently provided replacement surprise packs whose content had been checked and all packs from the previous batch were withdrawn and returned to the supplier.

6.2.2 Ward to which NatCen was unable to send an interviewer
As a result of repeated attacks on interviewers, one of the large disadvantaged wards that was sampled for this study was classified by the NatCen Operations department as a ‘no-go’ area. This meant that from wave 7 onwards it was not possible to send an interviewer to make doorstep contact with a total of 46 potential respondents. Instead it was decided to write to these parents inviting them to attend an interview at a library a short distance away from the area. Respondents were offered a taxi to the library and a voucher to encourage them to take part. However, despite these special procedures no further interviews were achieved in this ward.

6.2.3 Fieldwork errors: Partner and proxy partner interviews
Reports from interviewers and quality control checks on returned data revealed some discrepancies in the collection of data about or from partners. In a significant number of cases, interviewers sought to maximise the data available by collecting proxy information, even though the conditions for so doing did not apply. Occasionally, the proxy version was administered with partners rather than the full version of the questionnaire.

Of course, these practices were far from systematic and so retaining data collected in this way would have been at least as likely to damage rather than enhance analysis. CLS and NatCen agreed that, as far as possible, the analysis data should reflect rules for data collection. Data was deleted or transferred accordingly. Specifically, data
from 117 proxy interviews and 42 partner interviews completed by proxy were deleted because there were not legitimate circumstances for collecting information by proxy. In six cases, data was transferred from the proxy to the full partner instrument, because the partner had participated in the interview. This mainly entailed straightforward transfers between identical questions. For a very small number of variables for these six cases, inferences were required to enable data transfer. Details may be obtained from CLS or NatCen.
7  SAMPLE INFORMATION AND THANK-YOU LETTERS

NatCen sent thank-you letters on behalf of the Study to all productive families after they had been interviewed. An example thank-you letter is printed in the Appendix. At NatCen’s suggestion, CLS produced and provided a sticker to be enclosed with letters. This gave respondents the Child of the New Century freephone number and email address and asked them to inform the study if they were moving.

7.1.1 Specification of letter and envelope

Thank-you letters were sent to all families unless the main respondent said that they did not wish to be contacted again. One letter was sent per family. The letter was printed on Child of the New Century headed paper. A Child of the New Century sticker was enclosed with each letter.

In families where there was a main and a partner respondent (who were both interviewed in person), the letter was addressed to them both. If only one respondent was interviewed in person, letter was addressed to them (Table 7.1).

Table 7.1  To whom thank you letters were addressed.

<table>
<thead>
<tr>
<th>Outcome Code</th>
<th>Description of Outcome</th>
<th>Letter specification</th>
</tr>
</thead>
<tbody>
<tr>
<td>111</td>
<td>Interview in person with main respondent, no-one eligible for partner interview</td>
<td>letter addressed to main respondent only</td>
</tr>
<tr>
<td>112</td>
<td>Interview in person with both main and partner respondents</td>
<td>letter addressed to main and partner respondents</td>
</tr>
<tr>
<td>120</td>
<td>Interview in person with main respondent and partner interview by proxy</td>
<td>letter addressed to main respondent only</td>
</tr>
<tr>
<td>211</td>
<td>Interview in person with main respondent, partner respondent eligible for interview in person but not interviewed</td>
<td>letter addressed to main respondent only</td>
</tr>
<tr>
<td>212</td>
<td>Interview in person with main respondent, partner respondent eligible to be interviewed by proxy but not done</td>
<td>letter addressed to main respondent only</td>
</tr>
<tr>
<td>213</td>
<td>Partner respondent interviewed in person , main respondent not interviewed</td>
<td>letter addressed to partner respondent only</td>
</tr>
</tbody>
</table>

Names and addresses were mail-merged in the top left of the letter. In the address window, names appeared in the form Title.Initial.Surname (or where 2 respondent's shared a surname Title.Initial. & Title. Initial. Surname). Where

2 except those who indicated at the interview that they did not want to be re-contacted.
surnames differ the names were mail-merged in the form Title. Initial. Surname & Title. Initial. Surname. In the salutation names appeared in the form Dear FirstName Surname/Dear FirstName1 Surname1 and FirstName2 Surname2/Dear FirstName1 and FirstName2 Surname. The project number and serial number was also mailmerged in the top right. Dates of mailings were not mail-merged. Instead either ‘Spring 2002’, ‘Summer 2002’, ‘Autumn 2002’ or ‘Winter 2002’ was printed in top right depending on when the mailing was done.

The window envelopes in which the letters were sent were over-printed with the CLS return address in the top left and NatCen’s postage licence number in top right.

### 7.1.2 Preparation for mail-out

The Titles/First Names and Surnames used on the letter were those keyed in the CAPI admin block by Interviewers. As these names will be used in subsequent contacts with the families of cohort members, they were checked before the thank-you letter mail out in order to assure quality. Although it was not necessary to check the baby’s name for the Thank-you letter mail out, it was felt that they should be checked as part of this process in order to quality assure the contact information.

The following cases were flagged for checking:

- a) surname of main and partner respondents in CAPI Admin data were not the same as each other
- b) name and/or surname of main respondent in CAPI Admin did not match the sample file
- c) Title/Name/Surname fields were empty/have don’t know/refusal entered
- d) Case already flagged by Operations Team as having informed us of a name change
- e) name and/or surname of cohort baby in CAPI Admin did not match the sample file
- f) Cohort Baby’s surname did not match either the main or partner respondent’s surname

All flagged cases were then checked by the Operations Team in Brentwood, using the following guidelines for resolving the discrepancy:

**Action for flags:**

- a) If difference between surnames did not appear to be genuine (e.g. very similar spelling), then one of the surnames corrected so they matched
- b) If difference did not appear to be genuine, CAPI surname used. If looked like CAPI had been mis-spelt, than CAPI field corrected.
- c) The ARF consulted in order to try to assign a name/surname
- d) In most cases these were where NatCen had been informed of a name/address change, check whether corrected data was used.
- e) If appeared to be genuine, CAPI name/surname used. If CAPI appeared to be mis-spelt, corrected (with reference to main and partner respondent’s surname if appropriate).
f) If appeared to be genuine, CAPI name/surname used. If CAPI appeared to be mis-spelt, corrected (with reference to main and partner respondent’s surname if appropriate).

This process resulted in the CAPI Admin data being changed for about 5% of cases. All letters were also checked visually after they had been prepared for the mail out.

7.1.3 Thank-you letter pilot

The procedures for the thank-you letter mailings were piloted before the main mailings commenced. This pilot took place in January 2002. Thank-you letters were sent to the parent/parents of 272 babies who were interviewed in wave 2 (June/July 2001). A random sample of 108 wards in England was selected from a list stratified by ward type and letters were sent to all families in these wards except those who has indicated that they did not wish to be re-contacted. Families in which the main or partner interview was conducted in whole or in part in a language other than English were also excluded from the pilot.

The name checking for the pilot sample resulted in the CAPI Admin data being changed for 16 (6%) of cases.

In order to assess how the letter and sticker were received by respondents, telephone recall checks were carried out by NatCen’s Quality Control Unit 3-7 days after the letters had been sent. Calls were attempted to 185 families and telephone contact was made at 83. Of these, there were 7 cases (8%) where the respondents were no longer living at the address (new addresses were picked up by the recallers in 2 cases) and 4 cases (5%) who had not received the letter (though the address that we had was confirmed as correct). Successful recall checks were carried out at 72 addresses. Of the 185 addresses where calls were attempted, 23 (13%) had incorrect phone numbers.

Of the 72 successful recalls, 3 cases didn’t remember receiving the sticker and one person thought it was a compliment slip. Fifty respondents (70%) said that they either had or intended to do something with the sticker – put it in address book, on fridge, file it etc. Generally people were pleased to have received the letter. Of 37 respondent’s who commented on the timing of the letter, 21 felt that it perhaps should have been sent sooner. There were some comments indicating that receiving the letter after a slight delay reassured them that they had not been forgotten. All but two of the names/addresses were correct. Out of 54 cases where the letter had been addressed to both the main and partner respondent, the partner had read the letter in 22 cases and either been told about it/glanced at it in a further 4 cases.

There were no reported problems regarding the content of the letter.

The main outcomes of the pilot were that:

• Checking names resulted in corrections and was continued (though babies surnames were only checked if the didn’t match either the main or partners surname - at the pilot they were flagged if not same as main respondents but in most of these cases they matched partners)
• The text of the letter was broadly fine but as some pilot respondents commented on the gap between the interview and receipt of thank-you letter, respondents who were interviewed in waves 2-4 (approx June – Aug 2001) should receive letters referring to the interview they conducted ‘last year’.

• The sticker was a valuable addition and would be kept by a high proportion of respondents

• It was imperative that the envelope included a return address as some respondents had already moved from the address at which they were interviewed

7.1.4 **Thank-you letters in other languages**

The thank-you letter was translated into Welsh, Somali, Bengali, Gujarati, Kurdish, Punjabi, Urdu, Arabic and Turkish. Fieldwork documents had not previously been translated into Arabic but an examination of the languages spoken by respondents indicated that these were sufficiently prevalent in order for it to be desirable to translate the thank-you letter into this additional language.

All respondents in sampled wards in Wales got a letter in English with the Welsh translation printed on the back. In families where the main interview was conducted solely in one of the minority ethnic languages the letter was sent in English with the appropriate translation printed on the back.

7.1.5 **Timing of thank you letters**

Table 7.2 summarises when thank you letters were dispatched by NatCen (Part A) and NISRA (Part B).
Table 7.2  Dispatch of Thank You Letters
A Great Britain

<table>
<thead>
<tr>
<th>WAVE</th>
<th>English Mailout</th>
<th>Date</th>
<th>Scottish Mailout Date</th>
<th>Welsh Mailout</th>
<th>Date</th>
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<th>Date</th>
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<tbody>
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<td></td>
<td>237</td>
<td>May-02</td>
<td>9</td>
<td>May-02</td>
</tr>
<tr>
<td>03</td>
<td>836</td>
<td>Mar-02</td>
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<td>206</td>
<td>May-02</td>
<td>9</td>
<td>May-02</td>
</tr>
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<td>895</td>
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<td></td>
<td>192</td>
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<td>May-02</td>
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<td>05</td>
<td>896</td>
<td>Apr-02</td>
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<td>216</td>
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<td>17</td>
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</tr>
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</tr>
<tr>
<td>07</td>
<td>898</td>
<td>Jun-02</td>
<td>161</td>
<td>206</td>
<td>May-02</td>
<td>18</td>
<td>May-02</td>
</tr>
<tr>
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<td>823</td>
<td>Jul-02</td>
<td>147</td>
<td>211</td>
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</tr>
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<td>18</td>
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<td>225</td>
<td>204</td>
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<td></td>
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</table>

11420  2183  2737  204
B Northern Ireland

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<th>DATE</th>
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<tr>
<td>06</td>
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<td>Sep-02</td>
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<td>Sep-02</td>
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<tr>
<td>16</td>
<td>Jan-03</td>
</tr>
<tr>
<td>17</td>
<td>Feb-03</td>
</tr>
<tr>
<td>18</td>
<td>Feb-03</td>
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</tbody>
</table>
8 SURVEY RESPONSE

Survey response was monitored frequently and regularly throughout fieldwork. Updates were provided to CLS in the format illustrated in Table 8.1. At least 50 updates were produced. In addition, figures for Northern Ireland and more detailed breakdowns by country and strata were provided periodically. Response figures in these updates generally treated those who had moved out of their issued address as ‘out of scope’. This reflects interviewers on-the-ground experience, though of course some of these movers were eligible for the study. The final response figures (below; Table 8.2) reflect this additional factor which was largely beyond the control of NatCen Operations. Readers may also note that some refusals to participate were made directly to our Operations office, thus providing no chance whatever for interviewers to secure a productive outcome. Removing these cases from the denominator results in a two to three percentage points increase in the ‘field’ or ‘interviewer’ response rates. These figures were shown in the regular updates, in order to monitor trends in interviewer performance, but are not retained in final response tables.

Regular attention to response figures provided both early indication that very high levels of response to the issued sample with eligible addresses were being achieved and enabled any slippage from these levels to be identified promptly. The detailed breakdowns highlighted the differential responses by strata. It was this more detailed analysis which identified the extent to which response in ‘E’ (Ethnic) wards was lower than that in ‘A’ (Advantaged) and ‘D’ (Disadvantaged) wards. While a gap had been anticipated, it was judged that resources should and could effectively be put into narrowing this gap. Measures to do so did seem to impact to constrain the gaps in final response rates.

A second significant intervention in fieldwork was to increase, despite above target response rates, the re-issuing of unproductive outcomes. This action was prompted in part by concern to maintain very high response rates but perhaps more significantly by the lower than expected size of the issued – and hence achieved – sample. This shortfall in numbers implied that devoting additional resources to raise response marginally could be justified.

The attempt to focus interviewing around target dates without curtailing extended efforts to achieve participation seems to have worked well. Seventy-five per cent of main interviews took place while the baby was aged 9 months, 3579 (19%) at 10 months – a proportion inflated by the late receipt of the final wave sample for England and Wales. Only 541 (3%) were completed at 8 months of age, representing babies born towards the end of the 4-week span whose parent(s) were interviewed early in a fieldwork period. Four hundred and seventy-nine main interviews took place late, 475 at 11 months and only 4 in month 12 -13. Seventeen cohort members were not included because the time window had expired before the eligible parent(s) were located.

In the vast majority of cases the natural mother did the main interview. The exceptions were 2 adoptive mothers, 2 foster mothers, 18 lone fathers, 2 natural
fathers where the natural mothers answered the partner interview, 1 father with proxy interview for natural mother and 5 maternal grandmothers.

Some interviews were carried out in verbal translation in both the eight languages specified earlier and other languages translated by relatives or friends. In certain circumstances where no one was available to translate into English, NatCen provided translator interviewers. Other languages encountered in non-trivial numbers included Arabic, Hindi and Tamil. In total, 226 (1%) of main interviews were carried out in a non-English language and a further 547 (3%) were done in a mix of English and another language. For partners the corresponding figures were 306 (2%) and 94 (1%).

Analysis to response at each stage of the sample process has been undertaken at CLS (Plewis, 2004). Definitive fieldwork response rates cannot be calculated because the eligibility of a small but significant minority of the issued sample remained uncertain. Nevertheless, the estimates produced by Plewis following definitions developed by Lynn et al (2001) are expected to be accurate.

Thus the overall field response for this survey, with its substantial over-representation of disadvantaged wards, was estimated to be 81 per cent (Table 8.2). Had the survey comprised an equal probability sample – that is, had all babies born in the relevant period been given the same chance of selection – then the UK-wide response rate would most likely have been 82 per cent. Response was highest in the A (‘advantaged’) wards, with A wards in Wales proving most productive of all (88%). Disadvantaged wards resulted in response levels two to seven points lower than their Advantage counterparts. This may be judged a modest differential, given the contrast in interviewing environments. The lowest response (74 per cent) was secured in the English wards with relatively high minority ethnic populations.

Within productive households, the vast majority (88%) of eligible partners were interviewed (or, occasionally, had partner data collected on their behalf). Again, participation was a little higher in Advantage wards (always over 90 per cent). The notably lower response (79 per cent) in the English wards with high proportions of people from minority ethnic groups may have been related to the long durations of some main interviews in these wards, although this has not been ascertained systematically.

Overwhelmingly, respondents accepted requests to undertake the self-completion module on the laptop computer (90 per cent of main respondents and 91 per cent of partners) and to give consent for specified health records to be linked to their survey data (94 per cent, though a small proportion of the forms themselves were not successfully completed and returned). Readers are referred to the Plewis (2004) report for further information on response within productive households.

Respondents voluntarily contributed something over 26,000 hours – or three full years - of their time to the actual survey interviews, plus, of course, time arranging these interviews and welcoming interviewers to their homes. The mean duration of main interviews (including household module) is estimated to have been 65.4 minutes, while partner interviews averaged 29.2 minutes. (It should be noted that timing data is indicative and was not quality controlled and edited in the manner of
the survey’s substantive data. Estimates are based on 95 per cent of both main and partner interviews, following the exclusion of very low and high values.)

A key concern during the development of this survey was the possibility of over-burdening a significant minority of respondents at Sweep 1 thus potentially jeopardising longer-term participation in the study. Substantial efforts to constrain this burden appear to have been fruitful. Not only were average interview durations reasonable but relatively few interviews appear to have been exceedingly long. Fewer than two per cent of main interviews were recorded as having lasted two hours or more. The data on participation, interview durations and respondent satisfaction with the survey all point strongly to a solid foundation having been established for achieving exceptionally high levels of future co-operation with the study.
Table 8.1 Example of response update

RESPONSE UPDATE : SUMMARY
GREAT BRITAIN

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<th>05</th>
<th>06</th>
<th>07</th>
<th>08</th>
<th>09</th>
<th>10</th>
<th>11</th>
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<td>9147</td>
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<td>DATE OF ISSUE</td>
<td>11-Jun</td>
<td>09-Jul</td>
<td>06-Aug</td>
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<td>29-Oct</td>
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</tr>
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<td>RETURNED TO DATE</td>
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<td>4</td>
<td>3</td>
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<td>2</td>
<td></td>
<td></td>
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<td>87.1</td>
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P2063

49
Table 8.2  Final response: United Kingdom

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<tr>
<td></td>
<td>TOTAL</td>
<td>Adv/Dis/Eth</td>
<td>Total</td>
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<td>Total</td>
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<td>979/2495/3474</td>
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<td>INELIGIBLE or UNCERTAIN ELIGIBILITY</td>
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<td>384/560/352</td>
<td>1296</td>
<td>45/192/237</td>
<td>99/138/237</td>
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<td>69/280/349</td>
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RATES (FROM PLEWIS, 2004)

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<th>Northern Ireland</th>
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<td>FIELD RESPONSE RATES (%)</td>
<td>81</td>
<td>84/81/74</td>
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<td>88/81/83</td>
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<td>WEIGHTED NATIONAL RESPONSE RATES (%) (see note a)</td>
<td>82</td>
<td>82/85</td>
<td>83</td>
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<td>78</td>
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<td>CONTACT RATES (%) (see note b)</td>
<td>96</td>
<td>98/95/94</td>
<td>96</td>
<td>98/96/97</td>
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<tr>
<td>COOPERATION RATES (%) (see note c)</td>
<td>85</td>
<td>87/85/79</td>
<td>84</td>
<td>89/85/86</td>
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<td>PARTNER RESPONSE RATE (see note d)</td>
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<td>92/87/79</td>
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<td>90/89/89</td>
<td>90/86/88</td>
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</tbody>
</table>

Notes:

a. Total field response rates for each of the four countries and the UK as a whole reflects both response rates in each stratum and the differential selection probabilities applied in sampling. By weighting to allow for these varying probabilities, one can estimate the response which would have been achieved within equal probability samples, both in each of the four countries and for the UK as a whole.

b. The contact rate is the proportion of all cases in which a household member was reached by an interviewer.

c. The cooperation rate is the proportion of those ever contacted during fieldwork who are productively interviewed.

d. The partner response rate is the proportion of participating households with an eligible partner from whom partner data was obtained.
9 CODING, EDITING AND DATA PREPARATION

In CAPI surveys, much of the data validation is completed by interviewers in the field. Checks built into the program allow interviewers to clarify and query data discrepancies directly with respondents. Nevertheless, a substantial coding and process is required to transform the ‘raw’ data by interviewers into a final, ‘clean’ data set.

Data requiring coding was of two forms:
- Responses to entirely ‘open’ questions, for which respondents’ answers were transcribed verbatim by interviewers;
- ‘other’ answers to questions which permitted interviewers to record a verbatim response, in addition to or instead of selecting one or more of the pre-coded options.

The instruments included relatively few entirely open questions. However, the ‘other-specify’ option was widely used. The number of questions coded by NatCen is shown in Table 9.1. Please note that coding of long-standing illnesses and disabilities was undertaken by CLS.

Table 9.1 Number of survey questions coded by NatCen

<table>
<thead>
<tr>
<th>Question type</th>
<th>Main respondent</th>
<th>Partner respondent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>Other specify</td>
<td>44</td>
<td>12</td>
</tr>
</tbody>
</table>

The editing process enables additional consistency and plausibility checks and rules to be applied to the data. Apparent errors can then be examined in order to correct or delete erroneous data, as appropriate. Though only a very small proportion of data is amended in this way, this editing does serve to lessen the number of ‘rogue’ values in the final dataset.

Blaise (the software in which the instruments were programmed) also enables interviewers to record memos alongside the data, for example to explain unusual circumstances or codings, or to qualify responses in some way. The coders considered every memo made by interviewers and make amendments to the data where appropriate.

Codeframes and editing instructions were developed by researchers at NatCen in consultation with researchers at CLS and agreed with CLS (NatCen and CLS, 2003). Most of the codeframes were developed by reviewing a sample of actual answers given. Job details were coded to standard codeframes; Standard Occupation Classification (SOC2000) and the National Statistics-Socio-Economic Classification (NS-SEC).
For each productive interview a ‘fact sheet’ was produced for coders to use. This provided a concise summary of the respondent and their household, the question name and text of all answers that required coding and all interviewer comments. A modified ‘edit’ version of the CAPI instrument which facilitates all additional coding and builds in further edits was then specified and programmed. The coding and editing was done on a case by case basis in this edit version of the CAPI instrument and a record of codes allocated and action taken in response to edit checks/memos was made on the paper fact sheet.

Researchers personally briefed a team of coders who undertook the coding and editing. Their work was managed and quality controlled intensively by the Green Team from NatCen’s Operations Department along, where necessary, with researchers. In view of the volume and importance of the MCS1 data, a researcher met with coders and Team members a second time to discuss issues arising in the conduct of coding and to re-iterate key instructions. One hundred per cent of early work was checked until such time that the Team was satisfied that coding and editing instructions were being comprehensively and accurately applied. Thereafter, further checks were made on a sample of each coder’s cases.

There were a number of questions for which a relatively low number of answers required coding. Training coders to learn and apply code frames for low volumes of responses is relatively inefficient. Hence, NatCen researchers coded these responses into Excel on a question by question basis. This coded data was then keyed into a second version of the CAPI edit program in order to ensure completeness of the Blaise data. The keying of data was verified.

A significant amount of the data to be coded related to medical conditions and symptoms. For these questions, detailed coding glossaries were produced by CLS on the basis of responses from waves 2 to 8. Continuing liaison with Professor Neville Butler enabled outstanding queries to be resolved and we are grateful for his substantial contribution to the coding of this data.

The coding of responses to two questions at the end of both main and partner interviews was unusually problematic:

**LDiff***
Since ^Jack^ was born, what has been the most difficult thing about your first ^BABYAGE^ months with ^him^?
DO NOT PROBE
TYPE IN
Text: OPEN

**LBest***
And what has been the best thing?
DO NOT PROBE
Text: OPEN
These questions were designed mainly to ensure all respondents felt they had had the opportunity to express at the end of the interview their key positive and negative views regarding the first nine or so months of the cohort members’ lives. This appears to have been achieved. It was anticipated that the responses would be relatively straightforward to code. In a majority of cases, this was so. However, a sizeable minority of cases – and thus a large number of responses, given these questions were asked of all – proved difficult to code reliably. Firstly, determining and describing straightforwardly a suitable set of concepts to capture the range of responses was challenging. Secondly, the meaning of some responses required some inference or, even, educated guesswork, partly due to the instruction not to probe responses (which was designed to prevent excessive time being spent on these questions but which we would recommend against repeating).

Coders had considerable difficulties operationalising the original codeframes for these questions. In order that the remainder of the process could continue in a timely and efficient manner, it was decided to withdraw this data and codeframe. Looking afresh at the problem, NatCen researchers suggested that a two-digit hierarchical coding structure would work more effectively with this data. We suggested that proposals for the higher level categories be developed independently by the NatCen Operations team, CLS and a highly experienced NatCen methodologist. The considerable variation between the three proposals confirmed the degree of difficulty presented by this data and the absence of a single, consensual solution. Nevertheless, there was sufficient overlap to point towards a rational, practical coding structure. Detailed codes were then developed and fine-tuned through series of test coding exercises undertaken by NatCen researchers and Operations Team members. A customised Excel spreadsheet was developed incorporating alphabetical sorting, look-ups to disallow invalid codes and locked cells to do this coding rapidly, efficiently and accurately. A small, dedicated team comprising NatCen operations staff and very experienced freelancers completed the full coding exercise in house. Coded data was then checked thoroughly by a NatCen researcher for duplicate codes, embedded blanks and other inconsistencies.

NatCen coded and edited all productive cases, that is, including the data collected by NISRA in Northern Ireland. For a small number of questions, Northern Ireland specific codeframes were developed. The Northern Ireland data was then combined with GB data which due to small differences between the questionnaires required some manipulation of the data structure.

Finally, NatCen produced and applied new labels in a standard format for all of the variables in the data set.

Upon completion of NatCen’s coding and editing work, data was delivered to CLS, who for this study are responsible for the further processing required to translate the full data set into a form suitable for release and archiving.
REFERENCES


APPENDIX  FIELDWORK DOCUMENTS

CONTENTS

Scanned examples of:

DSS Opt-out letter
  - English
  - Welsh

Study leaflet
  - English
  - Welsh

NatCen advance letter

Information Sheet

Address Record Form

Forwarding letter and new address sheet

Tracing Unit Outcome Form

Permission to Obtain Health Information (‘Consent forms’)
  - England and Wales
  - Scotland
  - Northern Ireland

Thank you letter

Translated documents
  - Information sheet
  - Consent form

Information from the Personal Health Child Record (Original in Yellow)
  - dress rehearsal only
Dear

CHILD OF THE NEW CENTURY
The Millennium Cohort Study

We are writing to invite you to take part in a new study of babies in the United Kingdom, which is going to be vitally important in getting good services for children growing up in the 21st century. The Centre for Longitudinal Studies at the Institute of Education, London University and the National Centre for Social Research are carrying out the study. The enclosed leaflet from the research team explains what it is about and why it is so important. The team has also told GPs and health visitors in your area about the study.

The study will collect information about the lives of up to 20,000 babies. This will be done by interviewing parents. It will not involve any medical examination or tests.

You may wish to know why your baby has been chosen from our records for 'Child of the New Century'. Firstly, the study only includes babies born between 1 September 2000 and 30 November 2001. Secondly, you live in one of the areas chosen by chance to be part of the study.

An interviewer from the National Centre will be calling on you at home some time during the next month or so. He or she will explain more about the study, confirm whether you will be taking part, and arrange a convenient time for the interview.

Whether or not you take part will not affect your benefit entitlement or any dealings you have with DSS or Benefits Agency, now or in the future. Anything you tell the interviewer will be treated in the strictest confidence. No report will ever identify you or your family.

We hope very much that you will help with this important study. If, however, you do not wish an interviewer to contact you, please let us know before 18 May 2001, either by writing to the FREEPOST address above or telephoning the Project Team during office hours (Monday-Thursday 9:00 a.m. to 4:30 p.m. Friday 9:00 a.m. to 4:00 p.m.) on 0800 015 0524. If you do write or phone, please remember to give your name and the reference number at the top of this letter.

Thank you for your co-operation. We hope you will enjoy talking to the interviewer.

Yours sincerely

Katie Dodd
PLENTYN Y GANRIF NEWYDD
Astdiaeth Carfan y Milleniwm

Rydym yn ysgrifennu i chi gwaodd chi i gymryd rhan meawn astudiaeth newydd o fabanod yn y Deyrnas Gyfunol, sydd am fod yn hanfodol bwysig er mwyn sirohau gwasaenaethau da i blant sy’n byfu i fy ny i wrthi un fed ganrif ar hugain. Canolfan Astudiaethau Hydredol y Sefydliad Addysg ym Mrhifysgol Llundain a’r Ganolfan Ymchwili Gymdeithasol Genedlaethol sy’n gwneud yr astudiaeth. Mae’r dafen amdanes digon gan y tîm ymchwil yn egluro beth sy’n digwydd a pham ei fod mor bwysig. Mae’r tîm hefyd wedi dweud wrth Feddygon Teulu ac ymwelwyr iechyd yn eich ardal chi am yr astudiaeth.

Bydd yr astudiaeth yn casglu gwybodaeth am fwydau hyd at 20,000 o fabanod. Gwrneir hyn trwy gwyfeliaid à rhieni. Ni fydd yn golygu gwneud unrhyw archwiliadau meddygol na phrifon.

Efalai y dymunech wybod pam y cafodd eich baban chi el ei ddewis o’n cofnodion ar gyfer ‘Plentyyn y Ganrif Newydd’. I ddechrau, dim ond babanod a anwyd rhwng 1 Medi 2000 a 30 Tachwedd 2001 sy’n cael eu cynnwys yn yr astudiaeth. Yn ail, rydych chi’n byw yn un o’r ardalod a ddodlwyd trwy haf i fod yn rhan o’r astudiaeth.

Bydd gywelydd o’r Ganolfan Genedlaethol yn galw yn eich cartref ny wro yr ystad y mis nesa neu’n fuan wedyn. Bydd ef neu hi yn egluro mw mwy am yr astudiaeth, yn cadarnhau a ydych am gymryd rhan, ac yn trefnu amser cyfieub ag ar gyfer y cywelydd.

Ni fydd eich penderfyniad i gymryd rhan neu beldio yn effeithio ar eich hawl i fudd-daliadau nac unrhyw ymmeud a gwech â’r Adrian Nwadd Cymdeithasol na’r Asiantaeth Budd-daliadau, yn awr nac yn y dyfodol. Bydd unrhyw beth a ddywedwch wrth y cywelydd yn cael ei ddiwedd i’r hoollol gyfrinachol. Ni fydd unrhyw adroddiad byth yn datgelu mai chi neu eich teulu y sonir amdanot.

Gobeithiwn y fawr iawn y byddwch yn barod i helpu gyda’r astudiaeth bwysig hon. Fodd bynnag, os nad ydyn yn dymuno i gywelydd gysylltu â chi, rhwch wybod i ni os gwelwch yn dda cyn 15 Mehefin 2001, nai ai trwy ysgrifennu at y cyfieithiad RHABDOST uchod neu trwy ffinion Tim y Prosiect yr ystod orlau swyddfa (Dydd Lliw i Dydgy nelau 9:30 a.m. i 4:30 p.m. Dydd Gwener 9:30 a.m. i 4:30 p.m.) ar yr rhif 0800 016 0524. Os byddwch yn ysgrifennu neu’n ffinion, cofiwch roi eich onw â’r cyfieithiad sydd i’w weld ym mhen uchaf y llwyth hwn, os gwelwch yn dda.

Diolch am eich cydweithredd. Gobeithio y byddwch yn mwynhau siarad â’r cywelydd.

Yn gywir
Katie Dodd
Study leaflet: English

Completely confidential

Everything we learn from those taking part in the new study will, of course, be treated as strictly confidential. Neither you or your family will be identified, and the information given will be stored anonymously on computer with no names and addresses from which individuals could be identified.

Who is funding the study?

The money to carry out this vital new study is provided by the Economic and Social Research Council, and a number of government departments, the Scottish and Northern Ireland executives and the Welsh Assembly. However, the research team carrying out the study are completely independent of government or any other agency.

Would you like to know more?

If you would like more information about the study, the research team will be pleased to hear from you.

Freephone 0800 682 1250
Email childnc@elsiac.ac.uk
Web http://www.childnc.net

Different starting points

Different pathways

Finding the answers
Introduction

Every new baby is special, but those born today - right at the start of a new century - belong to a unique generation.

What will growing up in the 21st century be like for its very newest citizens? How will they compare with previous generations - in their health and happiness, achievements and challenges?

Different Starting points

These babies are starting out in life in a United Kingdom full of contrasts and diversity. They will be born into families in varying circumstances and with different styles and standards of living.

Most will have parents who stay together. Others will experience change in their family life. Some will be the first child in their family, others will have older brothers or sisters. The variety of cultural and religious backgrounds which make up our society will also represent different views about bringing up children and different ways of preparing them for the future.

Add to these all the differences the contrasting experiences of being born and brought up in different parts of the UK - England, Scotland, Wales and Northern Ireland - in cities, suburbs or rural areas, and it's clear that the children born at the start of the 21st century will be setting out from many different starting points.

Different pathways

What will this mean for their future? Who will succeed in school and who will encounter problems? Who will overcome difficult beginnings or challenging circumstances in early life? Which children will need special help in order to ensure that they achieve their full potential in every aspect of their lives?

Finding the answers

The answers to these questions are important for everyone bringing up children, as well as for policy makers and professionals. This knowledge is vital if we are to develop the kind of services in health, education, child care and family support which will be of most benefit to young children and their parents.

But to provide the answers, a great deal of information is required about these new babies and their families. Collecting this information is the task of a major new research project - Child of the New Century. Its aim is to follow the unfolding lives, from birth onwards, of around 20,000 children born over a 12 month period from 1 September 2000.

Every year about 200,000 babies are born in the UK. Your new baby is one of the extra-special ones who have been selected to take part in this new study of what it is like growing up in the new century.

What will be involved if I agree to take part?

You will be visited for the first time when the new baby is around 9 months old. One of our interviewers will visit you at home, to ask about yourselves and your baby's birth and early development, and about your family and household. This will include details of who lives in your home, your family life, and your beliefs, opinions and concerns about bringing up children today. To complete the picture, some information will be collected about your own educational background and employment experience, and the home in which you are living.

The long-term plan for the study is to follow the children as they grow up and to update the information about them at future visits. This will include assessments of the health, educational and social development of the children themselves. Meanwhile, the research team will keep in regular contact with each family by sending a card once a year, to tell you about the study's progress and what it has discovered.

What use has this kind of research been in the past?

Britain has been a world leader in this type of research for more than 50 years. No fewer than three studies exist already: the first started in 1946 (National Survey of Health and Development); the second in 1958 (National Child Development Study); and the third in 1970 (British Cohort Study 1970). These three studies are tracking the lives of over 46,000 people. Their findings have been of enormous importance to parents, policy makers and professionals in tackling health, educational and social issues, and in developing services to meet the needs of children and their families.

Child of the New Century will be the source of equally important knowledge about the first generation of children of the 21st century. It will also provide fascinating comparisons with the earlier studies, by revealing the changes and similarities in the lives of today's children and those of yesterday.
Cwbl gyfrinachol

With gwe, bydd pysical a dylid gyn gan y rhai sy'n cynrychiyn nhn yn yr astudiaeth neuadd yna cae ei drin yn gyflcyfrinachol. Ni ddododd o'i gwy ych chi'n nhc'hr trlud, a bydd yr wybodaeth a noddir yn cael ei chodiyn nhn defwys ar gyfrinachol, heb unrhyw enwau, na chyfeiriaadu a oillt ddodgel yr wy yw'r unigellenn.

Pwy sy'n noddi'r astudiaeth?

Mae'r arian i gyflwystru'r astudiaeth neuadd hon yn cael ei ddarparu gan y Cyngor Ymchwil Economaidd a Chwyldroithol a nifer o afrannau'r llwyddiannau, gan gynnwys yr Alban a Gogledd Iwerddon a Chwaraeiddiad Creadiaethol Cymru. Fodd bynnag, mae'r dim ymchwil sy'n gwneud yr astudiaeth ynholl am byth niwch niwch am y llwyddiannau a phob asiaement oll.

Hoffech chi wybod mwy?

Os hoffech gael rhoi o wybodaeth o'r astudiaeth, bydd y dim ymchwil yna fach niwch goch yr amrywiad o 11,000 alaw, gwnnwch yr addasiadau ac yr cysylltiadau rhwng ymchwil a'r 26 cymuned gan ddefnyddio'r dathliadau eraill.

Cyfeiriaid rhoisbwynt:

Child of the New Century
Centre for Longitudinal Studies
Institute of Education
FREEROST LONDON W11 2DB

Rhuddfon
0800 092 1250

Eistedd
chilnet@clt.lse.ac.uk

Web
http://www.childnc.net

Plentyn y Ganrif Newydd'
Astudiaeth Carasyn y Mileniwm

Mannau cychwyn gwahanol

Gwahanol gyfeiriaadu

Canfod yr atebion
Gwahanol gyfeiriadau?

Beth fydd hyn y ni ei chlywed o ystyried eu fydolio? Pwy fydd y lwyddiant y ni yno deall y gwahanol problemu? Pwy fydd y gwerysion cyrchfn anodd neu anghyflogiad heiriol yni mewn un o’r dynion sydd eu bod enw na’u enwau. Pa blant y bydd angen cynorth o esecion eu mewn siciau eu bod enw na’u enwau eu potential llawn eu milwyo ar eu hwyriad?

Canfod yr aethebion

Mae’r aethebion yni o crechenhau hein y bynnag i bobol sy’n mwy sylweddol, y byddai hynny’n newid y pwyllgorddoriaeth. Enghraifft o’r cyfleť ybyddai bod enw heini’n newid o’u hawliau. Y byddai hynny’n newid i weld byddai hynny’n newid o’u hawliau. Y byddai hynny’n newid o’u hawliau. Y byddai hynny’n newid o’u hawliau. Y byddai hynny’n newid o’u hawliau. Y byddai hynny’n newid o’u hawliau.

Ond iawn darged neu aethebion, mae angen llawer o wythnosiaeth am y byddai heini’n newid o’u hawliau. Yn wythnosiaeth am y byddai heini’n newid o’u hawliau. Yn wythnosiaeth am y byddai heini’n newid o’u hawliau. Yn wythnosiaeth am y byddai heini’n newid o’u hawliau. Yn wythnosiaeth am y byddai heini’n newid o’u hawliau. Yn wythnosiaeth am y byddai heini’n newid o’u hawliau.

Beth fydd angen i mi ei wneud os cynafl i gymryd rhan?

Bydd hynny yn ddefod i mi wneud os cynafl i gymryd rhan eu bod eu byddai heini’n newid o’u hawliau. Bydd cyfludiantiau yr ymwydo o chwi’n hawliau eu bod eu byddai heini’n newid o’u hawliau. Bydd cyfludiantiau yr ymwydo o chwi’n hawliau eu bod eu byddai heini’n newid o’u hawliau. Bydd cyfludiantiau yr ymwydo o chwi’n hawliau eu bod eu byddai heini’n newid o’u hawliau. Bydd cyfludiantiau yr ymwydo o chwi’n hawliau eu bod eu byddai heini’n newid o’u hawliau.
CHILD OF THE NEW CENTURY
The Millennium Cohort Study

The National Centre for Social Research is carrying out the interviews for this important new study of babies in Britain. This year and next we shall be collecting information about the lives of over 20,000 babies and their families on behalf of the Centre for Longitudinal Studies.

A short while ago you should have received a letter and leaflet letting you know about the study. We do hope you found this information useful.

Your interviewer, ____________________________, will visit you shortly to ask for an interview at a time convenient to you. Our interviewers always carry identification cards and will treat everything you say in strictest confidence.

We, too, will treat your answers as confidential and will not pass them on to anyone outside the research team.

Your interviewer should be able to answer most of the questions you may have about the study and will have spare copies of the information leaflet. However, if you have any further questions or concerns please do call us on 0800 783 5890 or email joanned@natcen.ac.uk. We would be happy to discuss them with you. We hope that you enjoy the interview.

Thank you for helping us with this study.

Yours sincerely,

Heather Joshi
Project Manager

Joanne Day
Interview Co-ordinator
Child of the New Century

About our survey

Is your baby special?

We think so. Your baby has been picked to be in a major new national survey that could make all the difference to people's lives in the future.

What is it like for children growing up in the 21st century? How will they get on at school? What helps them and what holds them back? The answers you give us will help plan health care, education and child care services to really benefit children and their parents.

So can we come and ask all about you and your baby? The information you give us will be confidential under the law - you won't be named in the survey report, no names are made public.

Our interviewers are trained to ask everyone the same kinds of questions about:

- your baby's birth and early development
- your family
- your beliefs and concerns about bringing up children today

The interview with Mum will last a little over an hour, and one with Dad, if available, about half an hour. The interviewer will not need to handle your baby, and there will be no medical tests.

To fill in the background we'll also ask you a bit about your own education and employment and about the home you live in.

Then we'll put together the answers from all the people we talk to throughout the United Kingdom. This will show what life is like right now for the Children of the New Century.

Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies - Institute of Education - University of London
20 Bedford Way - London WC1H 0AL
Do you have questions for us?

What’s the point of this survey?
A fair question given all the fuss we’re making about your baby! It’s only by getting this kind of information - now and by following the babies as they grow into adulthood - that government, parents and others can change things for the better.

We’ve done surveys like this before - in fact Britain is the world leader in this research. We found out, for example, that good health services for mothers and children, good housing and proper food make a lasting difference to health and success as children grow up. But this is the first new survey for over 30 years.

Will this be the only interview?
We’d like to come back in a couple of years time and find out how things are going. As your baby grows up we will be following up with interviews every few years. That way we get a good idea of how your child is developing. This information will give the government and other groups valuable clues about how they can give people more help.

Once I’ve said ‘yes’ to this survey is my baby stuck with it for life?
Absolutely not. You or your child can bow out at any time, although of course we hope you stay with us. People generally seem to enjoy being part of these surveys.

Who’s this ‘we’ you keep talking about?
We are a research centre in the Institute of Education in London. We have been chosen to carry out this survey because we have carried out other, similar surveys and can be trusted to do a professional job. The interviews are being carried out by the National Centre for Social Research who we have chosen because they are experts in this field. Child of the New Century is being funded by government and others.

If you would like more information about the survey, there is a leaflet that goes into more detail.
Or you can talk to someone from the Study team on Freephone 0800 092 1250

For general information or advice to parents contact:
Parentline Plus - 0808 800 2222
or your local Citizens Advice Bureau
(the number will be in your local telephone directory)

Project Leader: Professor Heather Joan
Centre for Longitudinal Studies • Institute of Education • University of London
20 Bedford Way • London • WC1H 0AL

64
**Address Record Form**

**P2063  CHILD OF THE NEW CENTURY  GREEN TEAM  ADDRESS RECORD FORM**

**NAME & ADDRESS LABEL**  
(interviewer amend if necessary)

**INFORMATION LABEL**  
(interviewer amend if necessary)

**Telephone number:**

**Interviewer name:**

**CALLS RECORD**  
(Note all personal visits and telephone calls even if no reply)

<table>
<thead>
<tr>
<th>Call no</th>
<th>Date Dd/mm</th>
<th>Day of week</th>
<th>Time (24hr clock)</th>
<th>Notes: e.g. result, who spoke to, observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>/</td>
<td>/</td>
<td>:</td>
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<td>2</td>
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<td>10</td>
<td>/</td>
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</tr>
</tbody>
</table>

**SLOT NAME:**  
**RETURN NO.**  
**FINAL OUTCOME**  
(NUMBER IN BOLD):
### A: Establish whether to interview at this address

**A1** Is this address traceable, residential and occupied?

<p>| | | |</p>
<table>
<thead>
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<tr>
<td>Yes</td>
<td>Go to A5</td>
<td></td>
</tr>
<tr>
<td>Unsure</td>
<td>Go to A3</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>Go to A4</td>
<td></td>
</tr>
<tr>
<td>Not applicable — did not attempt to locate address</td>
<td>Go to A2</td>
<td></td>
</tr>
</tbody>
</table>

**A2** Code reason (Final Outcome):

<table>
<thead>
<tr>
<th>Code reason</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Office refusal</td>
<td>41</td>
</tr>
<tr>
<td>Re-allocated to another interviewer</td>
<td>90</td>
</tr>
<tr>
<td>Baby/babies ineligible - Withdrawn by office</td>
<td>79</td>
</tr>
</tbody>
</table>

**A3** Code reason:

<table>
<thead>
<tr>
<th>Code reason</th>
<th>Go to B1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inaccessible</td>
<td>62</td>
</tr>
<tr>
<td>Unable to locate address</td>
<td>63</td>
</tr>
<tr>
<td>Unknown whether address contains residential housing</td>
<td>64</td>
</tr>
</tbody>
</table>

**A4** Code reason:

<table>
<thead>
<tr>
<th>Code reason</th>
<th>Go to B1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not yet built/under construction</td>
<td>71</td>
</tr>
<tr>
<td>Demolished/Derelict</td>
<td>72</td>
</tr>
<tr>
<td>Vacant/empty</td>
<td>73</td>
</tr>
<tr>
<td>Non-residential address</td>
<td>74</td>
</tr>
</tbody>
</table>

**A5** Attempt to make contact at address:

<table>
<thead>
<tr>
<th>Code</th>
<th>Go to C1</th>
</tr>
</thead>
<tbody>
<tr>
<td>68</td>
<td>Go to B1</td>
</tr>
<tr>
<td>69</td>
<td>Go to B1</td>
</tr>
<tr>
<td>31</td>
<td>Go to A6</td>
</tr>
<tr>
<td>33</td>
<td>Go to A6</td>
</tr>
<tr>
<td>42</td>
<td>Go to A6</td>
</tr>
<tr>
<td>79</td>
<td>END</td>
</tr>
</tbody>
</table>

**A6** Are baby/babies named on the front of the ARF resident at original address? Try to find out by asking neighbours etc.

<table>
<thead>
<tr>
<th></th>
<th>Go to C2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Go to B1</td>
</tr>
<tr>
<td>No</td>
<td>Go to B1</td>
</tr>
<tr>
<td>Unsure</td>
<td>END (OPS to contact IOE)</td>
</tr>
</tbody>
</table>
B: Attempt to establish follow-up address for cohort member(s) (1)

B1 Write in details of your attempts to establish a follow-up address for baby/babies named on front of the ARF, then code outcome at B2.

B2 Did you establish a follow-up address for baby/babies named on front of ARF?

<table>
<thead>
<tr>
<th>Yes</th>
<th>G</th>
<th>Go to B3</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>92</td>
<td>END (OPS to contact IoE)</td>
</tr>
</tbody>
</table>

B3 Write in follow-up address then go to B4:

Address:

Postcode: Telephone number (inc. Area Code):
Notes on address location:

B4 Is this follow-up address in this selected ward? (Use postcode listing to decide)

<table>
<thead>
<tr>
<th>Yes</th>
<th>H</th>
<th>Go to B5</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>93</td>
<td>END (OPS to contact IoE)</td>
</tr>
<tr>
<td>Unsure</td>
<td>93</td>
<td></td>
</tr>
</tbody>
</table>

B5 Is this follow-up address traceable, residential and occupied?

<table>
<thead>
<tr>
<th>Yes</th>
<th>A</th>
<th>Go to B8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsure</td>
<td>B</td>
<td>Go to B6</td>
</tr>
<tr>
<td>No</td>
<td>C</td>
<td>Go to B7</td>
</tr>
</tbody>
</table>

B6 Code reason:

Inaccessible
Unable to locate address
Unknown whether address contains residential housing

| 62 | 63 | 64 |

Go to BB1

B7 Code reason:

Not yet built/under construction
Demolished/Derelict
Vacant/empty
Non-residential address

| 71 | 72 | 73 | 74 |

Go to BB1
B: Follow-up attempt (1) continued

B8  Attempt to make contact at follow-up address:

<table>
<thead>
<tr>
<th>E</th>
<th>Go to C1</th>
</tr>
</thead>
<tbody>
<tr>
<td>68</td>
<td>Go to BB1</td>
</tr>
<tr>
<td>31</td>
<td>G</td>
</tr>
<tr>
<td>33</td>
<td>Go to B9</td>
</tr>
<tr>
<td>42</td>
<td></td>
</tr>
<tr>
<td>42</td>
<td></td>
</tr>
<tr>
<td>79</td>
<td>END</td>
</tr>
</tbody>
</table>

B9  Are baby/babies named on the front of the ARF resident at follow-up address? Try to find out by asking neighbours etc

<table>
<thead>
<tr>
<th>F</th>
<th>Go to C2</th>
</tr>
</thead>
<tbody>
<tr>
<td>G</td>
<td>Go to BB1</td>
</tr>
<tr>
<td>91</td>
<td>END (OPS to contact IOE)</td>
</tr>
</tbody>
</table>

BB: Attempt to establish follow-up address for cohort member(s) (2)

BB1  Write in details of your attempts to establish a follow-up address for baby/babies named on front of the ARF, then code outcome at BB2.

BB2  Did you establish a follow-up address for baby/babies named on front of ARF?

<table>
<thead>
<tr>
<th>G</th>
<th>Go to BB3</th>
</tr>
</thead>
<tbody>
<tr>
<td>92</td>
<td>END (OPS to contact IOE)</td>
</tr>
</tbody>
</table>

BB3  Write in follow-up address then go to BB4:

Address:

Postcode:  Telephone number (Inc. Area Code):

Notes on address location:
<table>
<thead>
<tr>
<th>BB4</th>
<th>Is this follow-up address in this selected ward? (Use postcode listing to decide)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>H Go to BB5 END (OPS to contact IoE)</td>
</tr>
<tr>
<td>No</td>
<td>93 END</td>
</tr>
<tr>
<td>Unsure</td>
<td>93</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BB5</th>
<th>Is this follow-up address traceable, residential and occupied?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>A Go to BB8</td>
</tr>
<tr>
<td>Unsure</td>
<td>B Go to BB6</td>
</tr>
<tr>
<td>No</td>
<td>C Go to BB7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BB6</th>
<th>Code reason:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inaccessible</td>
<td>62 Go to Q1 on Continuation sheet</td>
</tr>
<tr>
<td>Unable to locate address</td>
<td>63 Go to Q1 on Continuation sheet</td>
</tr>
<tr>
<td>Unknown whether address contains residential housing</td>
<td>64 Go to Q1 on Continuation sheet</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BB7</th>
<th>Code reason:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not yet built/under construction</td>
<td>71 Go to Q1 on Continuation Sheet</td>
</tr>
<tr>
<td>Demolished/Derelict</td>
<td>72 Go to Q1 on Continuation Sheet</td>
</tr>
<tr>
<td>Vacant/empty</td>
<td>73 Go to Q1 on Continuation Sheet</td>
</tr>
<tr>
<td>Non-residential address</td>
<td>74 Go to Q1 on Continuation Sheet</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BB8</th>
<th>Attempt to make contact at follow-up address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact made at the address - baby/babies named on front of ARF are resident</td>
<td>E Go to C1</td>
</tr>
<tr>
<td>Contact made at address - baby/babies named on front of ARF are NOT resident</td>
<td></td>
</tr>
<tr>
<td>No contact with anyone at address after 6+ calls</td>
<td></td>
</tr>
<tr>
<td>Contact made at address but not with any responsible resident</td>
<td></td>
</tr>
<tr>
<td>Contact made - parent(s) named on front of ARF resident but complete refusal of further information</td>
<td></td>
</tr>
<tr>
<td>Contact made, but complete refusal of information about occupants</td>
<td></td>
</tr>
<tr>
<td>Contact made - parent(s) named on front of ARF resident but baby/babies died</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BB9</th>
<th>Are baby/babies named on the front of the ARF resident at follow-up address? Try to find out by asking neighbours etc</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>F Go to C2 END (OPS to contact IoE)</td>
</tr>
<tr>
<td>No</td>
<td>G Go to Q1 on Continuation Sheet</td>
</tr>
<tr>
<td>Unsure</td>
<td>91 END</td>
</tr>
</tbody>
</table>

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### C: Final Outcome for Cohort Member(s)

#### C1
Attempt to complete CAPI household module with a resident parent, partner of a resident parent or other main carer (if no parent resident):

<table>
<thead>
<tr>
<th>Successful</th>
<th>Unsuccessful</th>
</tr>
</thead>
<tbody>
<tr>
<td>AA</td>
<td>BB</td>
</tr>
</tbody>
</table>

OFFICE APPROVAL ONLY - Baby/babies ineligible: 79 END

#### C2
Record Final Outcome Code for cohort member(s):

Productive (computed in Admin):

| Eligible respondent(s) interviewed in person | 11 Go to D1 |
| Eligible respondents interviewed (main in person, partner by proxy) | 12 Go to D1 |
| Only one of eligible respondents interviewed | 21 Go to D1 |

Unproductive:

| No contact with anyone at the address (Cohort Member resident) | 31 Go to C3 |
| Contact made at the address but not with any responsible resident (Cohort Member resident) | 33 Go to C3 |
| Contact made with responsible resident at address but not with eligible respondent(s) (Cohort Member resident) | 34 Go to C3 |
| Complete refusal of information about occupants of address (Cohort Member resident) | 42 Go to C3 |
| Refusal at introduction/before household module | 43 Go to C3 |
| Refusal during interview/after household module (computed in Admin) | 44 Go to D1 |
| Broken Appointment – no re-contact | 45 Go to C3 |
| Ill at home during survey period | 51 Go to C3 |
| Away from home/in hospital during survey period | 52 Go to C3 |
| Physically or mentally unable/incompetent | 53 Go to C3 |
| Language difficulties | 54 Go to C3 |
| OFFICE APPROVAL ONLY – Lost productive | 55 Go to C3 |
| OFFICE APPROVAL ONLY – Other unproductive | 56 Go to C3 |

#### C3
Record full details of why outcome for cohort member(s) was unproductive. In particular, for refusals and other non-response give details of everyone you spoke to and their relationship(s) to the cohort member(s) and if language problems, write in what language was spoken:

#### C4
If a different interviewer called again in 2-3 weeks, how likely do you think it is that they would get an interview? Code your best guess:

<table>
<thead>
<tr>
<th>Very Likely</th>
<th>Likely</th>
<th>Possible</th>
<th>Unlikely</th>
<th>Very unlikely</th>
<th>Impossible to say</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>8</td>
</tr>
</tbody>
</table>
## D: Individual Interview Outcome(s)

**D1**  
**CODE OUTCOME OF ATTEMPTS TO CONDUCT MAIN AND PARTNER INTERVIEWS:**

<table>
<thead>
<tr>
<th>Productive (computed in Admin):</th>
<th>MAIN</th>
<th>PARTNER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full interview in person</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Partial interview in person</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>Full interview by proxy</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>Partial interview by proxy</td>
<td>23</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Unproductive:</th>
<th>MAIN</th>
<th>PARTNER</th>
</tr>
</thead>
<tbody>
<tr>
<td>No contact</td>
<td>34</td>
<td>34</td>
</tr>
<tr>
<td>Refusal before individual interview</td>
<td>43</td>
<td>43</td>
</tr>
<tr>
<td>Refusal during individual interview (computed in Admin)</td>
<td>44</td>
<td>44</td>
</tr>
<tr>
<td>Broken Appointment – no re-contact</td>
<td>45</td>
<td>45</td>
</tr>
<tr>
<td>Ill at home during survey period</td>
<td>51</td>
<td>51</td>
</tr>
<tr>
<td>Away from home during survey period</td>
<td>52</td>
<td>52</td>
</tr>
<tr>
<td>Physically or mentally unable/incompetent</td>
<td>53</td>
<td>53</td>
</tr>
<tr>
<td>Language difficulties</td>
<td>54</td>
<td>54</td>
</tr>
<tr>
<td>OFFICE APPROVAL ONLY – Lost productive</td>
<td>55</td>
<td>55</td>
</tr>
<tr>
<td>OFFICE APPROVAL ONLY – Other unproductive</td>
<td>56</td>
<td>56</td>
</tr>
<tr>
<td>No-one eligible for partner interview</td>
<td></td>
<td>BB</td>
</tr>
</tbody>
</table>

**If D1=Unproductive (codes 34-56) for main and/or partner, complete D2 and D3:**

**D2**  
Record full reasons why no contact/refusal/other non-response.  
If language difficulties write in language spoken:

**D3**  
If a different interviewer called again in 2-3 weeks, how likely do you think it is that they would get an interview?

| Very Likely | 1    |
| Likely      | 2    |
| Possible    | 3    |
| Unlikely    | 4    |
| Very unlikely | 5  |
| Impossible to say | 8 |

**If D1=Productive main interview and/or Productive partner interview in person, answer D4.**

**D4**  
Was this interview/Were either of these interviews conducted (partly or fully) in a language other than English?

<table>
<thead>
<tr>
<th>Yes</th>
<th>CC</th>
<th>Go to D5</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>DD</td>
<td>Go to E1</td>
</tr>
</tbody>
</table>

**D5**  
Write in language:  

<table>
<thead>
<tr>
<th>Main:</th>
<th>Go to E1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partner:</td>
<td></td>
</tr>
</tbody>
</table>

71
E: Details of Cohort Member(s) and Respondents

E1  Record details of the Cohort Member(s):

<table>
<thead>
<tr>
<th></th>
<th>First Name</th>
<th>Surname</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baby 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby 4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby 6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

E2  Record details of respondents who completed main and (if applicable) partner interview:

<table>
<thead>
<tr>
<th></th>
<th>Title</th>
<th>First Name</th>
<th>Surname</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partner:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

E3  If given, write in stable address:

Name:
Relationship to the main respondent:
Address:
Postcode:  Telephone number (Inc. Area Code):

E4  If respondent tells you that they are planning to move, write in new address and (if possible) date at which they will be moving:

Date of move:
Address:
Postcode:  Telephone number (Inc. Area Code) if known:

E5  Please use this space to write in any other information which may be useful:

*
Dear………………………………………

I am writing to invite you to join in a major new study of families with babies in the United Kingdom. The study will start by collecting information on over 20,000 babies. This will be done by interviewing parents. It will not involve any medical examination or tests.

The study will help improve services for children growing up in the 21st Century. This is why your co-operation would be so valuable. Your place cannot be taken by anyone else.

An interviewer from our partner organisation, the National Centre for Social Research, spoke to …………………………………… who did not wish to give your address without your permission, but did agree to send this letter to you.

I would be most grateful if you would let us know your present address, wherever you are living now. Please call us on Freephone 0800 092 1250. If you prefer, you can return the enclosed form in the FREEPOST envelope – you will not need a stamp.

Can I stress that by giving us your address you are not committing yourself to an interview. You can decide that when the interviewer contacts you. If you do take part, everything you say will be treated in strict confidence and will never be released in a way that identifies you or your family.

If you have any questions please do not hesitate to contact us on Freephone 0800 092 1250.

Thank you very much for your help.

Yours sincerely,

Heather Joshi
Project Leader
MY NEW ADDRESS

Please complete using BLOCK CAPITALS

Title:  
First Name:  
Surname:  

Address:  

Postcode:  
Telephone:  
(inc. STD code)

Please return the completed form in the enclosed FREEPOST envelope - you don’t need a stamp.

If you have any questions about this form, or about Child of the new Century please call:

Freephone 0800 092 1250.

THANK YOU FOR YOUR HELP

Child of the new Century, FREEPOST LON20095, London WC1H 0BR
**P2063 CHILD OF THE NEW CENTURY**

**IoE TRACING UNIT OUTCOME FORM**

*IoE tracing team:*
PLEASE WRITE SERIAL NUMBER IN BOX BELOW, COMPLETE THE REVERSE OF THIS FORM, ATTACH TO THE FRONT OF THE ARF AND RETURN TO:
The Green Team, National Centre for Social Research, 100 Kings Rd, Brentwood, Essex, CM14 4LX

<table>
<thead>
<tr>
<th>Serial Number</th>
<th>Wave</th>
<th>Point</th>
<th>Address</th>
<th>Chai</th>
</tr>
</thead>
</table>

*NatCen interviewer:*
WRITE IN YOUR NAME AND NUMBER BELOW THEN ATTEMPT TO MAKE CONTACT AT THE ADDRESS WRITTEN AT B3/BB3. USE THE CALLS RECORD BELOW. COMPLETE THE ARF AS NORMAL BEGINNING AT B5/BBS.

<table>
<thead>
<tr>
<th>Interviewer name:</th>
<th>Interviewer number:</th>
<th>TNC:</th>
</tr>
</thead>
</table>

**CALLS RECORD (Note all personal visits and telephone calls even if no reply)**

<table>
<thead>
<tr>
<th>Call no</th>
<th>Date (Dd/mm)</th>
<th>Day of week</th>
<th>Time (24hr clock)</th>
<th>Notes: e.g. result, who spoke to, observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
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<tr>
<td>6</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
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<td>7</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>/</td>
<td>/</td>
<td>:</td>
<td></td>
</tr>
</tbody>
</table>
# TRACING OUTCOME

<table>
<thead>
<tr>
<th>Field Outcome</th>
<th>Final Outcome Code/Further Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>91 - Unable to establish whether cohort member resident</td>
<td>A Go to T1</td>
</tr>
<tr>
<td>92 - Cohort member is not resident – no follow-up address</td>
<td>B Go to T2</td>
</tr>
<tr>
<td>93 - Follow-up address for cohort member is not in this ward</td>
<td>C Go to T4</td>
</tr>
</tbody>
</table>

**T1** Does the Cohort Member live at the address?

- **Yes** – Cohort Member DOES live at address
- **No** – Cohort Member DOES NOT live at address
- Unable to establish whether or not Cohort Member lives at address

**T2** Were the tracing unit able to establish a follow-up address for Cohort Member?

- **Yes**
- **No**

**T3** Was the outcome at the original/previous address code 62-64?

- **Yes**
- **No**

**T4** Is the follow-up address in a sampled ward?

- **Yes** – in ORIGINAL sampled ward
- **Yes** – in DIFFERENT sampled ward
- **No** – not in any sampled ward

**T5** Write in point number of new ward:

**T6** Is the address already in the sample?

- **Yes** – duplicate
- **No** – not in sample

**T7** Is the cohort member still young enough to be issued (i.e. less than 11 months old)?

- **Yes**
- **No**

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* NB: If field outcome is 91 or 92, new address MUST be written on ARF at B3/BB3.

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**IoE tracing team notes:**
Permission to Obtain Health Information

We have already asked about your pregnancy and the baby’s birth. To make the information complete we would like to find out more about your pregnancy and your baby’s birth and health from health records. These include birth registration, maternity or central records.

In most cases we would obtain this information from the summaries held by the Office for National Statistics and the Department of Health. If this is not possible, we will write to the hospital where your baby was born, or the maternity service attending the birth if the baby was born at home. Getting the baby’s NHS number, with your permission, from these records would help us keep in touch with you.

To obtain any of this information we need your written permission for it to be released.

Like everything else you have told us, the health information collected from these records will be completely confidential. The information is used for statistical research purposes only. Names and addresses are never included in the results.

Please ask the interviewer about anything that concerns you or you can call the research team free on 0800 092 1250, or write or email to the addresses below.

I have read or heard the information leaflet (and introductory letter) about the Child of the New Century and have had the opportunity to ask questions.

I understand that all the about information about my family and myself will be treated in the strictest confidence.

A. I understand that the Child of the New Century wishes to obtain information about my pregnancy and the baby’s birth from birth registration, clinic, hospital or central records. I give permission for this information to be released to the Child of the New Century.

B. I give my permission for Child of the New Century to follow my baby’s National Health Service registration where necessary.

• DELETE A OR B IF YOU DO NOT WISH TO GIVE PERMISSION FOR BOTH

Signature __________________________ Date __________________

Print Name __________________________
Permission to Obtain Health Information

We have already asked about your pregnancy and the baby's birth. To make the information complete we would like to find out more about your pregnancy and your baby's birth and health from health records. These include birth registration, maternity or central records.

In most cases we would obtain this information from the summaries held by the General Register Office for Scotland and the Information and Statistics Division of NHS Scotland. If this is not possible, we will write to the hospital where your baby was born, or the maternity service attending the birth if the baby was born at home. Getting the baby's NHS number, with your permission, from these records would help us keep in touch with you.

To obtain any of this information we need your written permission for it to be released.

Like everything else you have told us, the health information collected from these records will be completely confidential. The information is used for statistical research purposes only. Names and addresses are never included in the results.

Please ask the interviewer about anything that concerns you or you can call the research team free on 0800 092 1250, or write or email to the addresses below.

I have read or heard the information leaflet (and introductory letter) about the Child of the New Century and have had the opportunity to ask questions.

I understand that all the information about my family and myself will be treated in the strictest confidence.

A. I understand that the Child of the New Century wishes to obtain information about my pregnancy and the baby's birth from birth registration, clinic, hospital or central records. I give permission for this information to be released to the Child of the New Century.

B. I give my permission for Child of the New Century to follow my baby's National Health Service registration where necessary.

DELETE A OR B IF YOU DO NOT WISH TO GIVE PERMISSION FOR BOTH

Signature __________________________ Date __________________________

Print Name __________________________

Scotland
Permission to Obtain Health Information

We have already asked about your pregnancy and the baby's birth. To make the information complete we would like to find out more about your pregnancy and your baby's birth and health from health records. These include birth registration, maternity or central records.

In most cases we would obtain this information from the summaries held by the General Register Office and the Department of Health. If this is not possible, we will write to the hospital where your baby was born, or the maternity service attending the birth if the baby was born at home. Getting the baby's NHS number, with your permission, from these records would help us keep in touch with you.

To obtain any of this information we need your written permission for it to be released.

Like everything else you have told us, the health information collected from these records will be completely confidential. The information is used for statistical research purposes only. Names and addresses are never included in the results.

Please ask the interviewer about anything that concerns you or you can call the research team free on 0800 092 1250, or write or email to the addresses below.

I have read or heard the information leaflet (and introductory letter) about the Child of the New Century and have had the opportunity to ask questions.

I understand that all the information about my family and myself will be treated in the strictest confidence.

a) I understand that the Child of the New Century wishes to obtain information about my pregnancy and the baby's birth from birth registration, clinic, hospital or central records. I give permission for this information to be released to the Child of the New Century.

b) I give my permission for Child of the New Century to follow my baby's National Health Service registration where necessary.

DELETE a) or b) if you do not wish to give permission to both.

Signature ___________________________ Date __________________

Print Name ___________________________
Dear <Respondent(s) name(s): first and last names>

CHILD OF THE NEW CENTURY
The Millennium Cohort Study

We are writing to thank you for taking part in this study and hope that you enjoyed talking to our interviewer.

The study needs to include all kinds of families from the whole of the UK. So we are delighted that so many parents have joined in. This shows that most parents are happy to support high quality research which will follow the progress of their children.

The information collected by Child of the New Century will guide the provision of services for children, like yours, growing up in the 21st Century. Our aim is that the research will benefit this new generation of children and, we hope, their families.

As you know, we are very keen to stay in touch. You probably provided information to the interviewer which will help us to do this. However, if you change your address or telephone number, please take a minute to call us on 0800 092 1250. Your call will be free, and a great help to us. We hope that the enclosed sticker will help you to find this number in the future. We’ll also be pleased to receive a call if you have any questions or would like any more information about the study.

Thank you again for your co-operation.

Yours sincerely

Heather Joshi
Study Director
Institute of Education

Andrew Shaw
Research Director
National Centre for Social Research
নতুন শতাব্দির শিশু
আমাদের জরিপ সংস্করণ

আপনার শিশু কি একটি আলাদা?

আমাদা মনে করি তাই। আপনার শিশুকে একটি বড় ধরনের নতুন জাতীয় জরিপে (সাংবাদিক) অংশুক্ত করা হচ্ছ। এ জরিপ আমাদুর লিখে মানুষের জীবনের মান বৃদ্ধি করার ক্ষেত্রে অনন্য রয়েছে।

একটি পন্ডিতে বেরেল উদ। হেমেরের জন্য এটি কি? হেমেরেরা হুলে কোনো কোনো জন ভিত্তিতে তাদেরকে সাহায্য করতে এবং কোনো জন তাদেরকে পিছে রেখেছে। আমাদুর এসব প্রশ্নের উত্তর দিতে যাচ্ছে, বিষয় ও বিষয় চর্চা করলে সম্পর্ক পরিবর্তন করতে আমাদের সাহায্য হবে।

এর ফলে প্রকৃতপক্ষে হেমেরেরা ও তাদের পিতামাতায় উপকৃত হবেন।

তাই আমরা আপনার কাছে এসে আপনার ও আপনার শিশুর সম্পর্কে এসব প্রশ্ন জিজ্ঞাসা করতে পারি কি?

আমাদেরকে আপনার দেয়া তথ্য আইন অনুসারে গোপন থাকবে – জরিপ প্রতিযোগিতায় আপনার নাম লিখা হবে না, আপনার নাম রক্ষণ করা হবে না।

আমাদের সাহায্যের প্রস্তাবচেষ্টার প্রয়োগকেই একই ধরনের প্রশ্ন জিজ্ঞাসা করবেন। প্রশ্নগুলো হবে এসব সম্পর্কে:

- আপনার শিশুর জন্ম ও কোথায় কোথায় উড়া
- আপনার পরিবার
- তাদের প্রতি আপনার হেমেরের কাছে সাহায্য করা সম্পর্কে আপনার বিশ্বাস ও উদ্দেশ্য

মায়ের সাথে সাক্ষাতের বিষয় বেশ সহজ হবে যেন এক দিনের উপরে হবে, এবং যদি কোনো প্রশ্ন পড়া যায় তাহলে প্রথম বেগ শীতের একটি সাক্ষাতের। সাক্ষাতেরগ্রহণকারীর আপনার শিশুকে প্রয়োজন হবে না, কোনো ডাকটেল পরিশোধ করা হবে না।

আপনার মূল তথ্য পূর্ণ করার পর আমরা আপনার শিশু ও চারক্ষী এবং আপনি এবং তাদেরকে বসবাস করেন সে সম্পর্কে আমার বিষয় প্রশ্ন জিজ্ঞাসা করবে।

সরা সরারায় বাসের লোকেদের সাথে সাহায্য করা বলে যে সব উচ্চ পাওয়া তা সব একত্র করা হবে। এক ফলাফল থেকে নতুন শতাব্দির হেমেরেরের জন্য সাহিত্য জীবন সম্পর্কে কথা বলার সৌজন্যে আসছ।

Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies = Institute of Education = University of London
29 Bedford Way = London = WC1H 0AL

Simplified leaflet: BENGALI
আমাদের সম্পর্কে আপনার কি কোনো প্রশ্ন রয়েছে?

এ জরিপের কাজের বিষয়বস্তু কি?
আপনার শিরোনাম সম্পর্কে একটি বিশেষ প্রশ্ন করা হবে। সত্যিই এবং প্রকৃতপক্ষে শিখে রেখে তুমি সম্পর্কে তথ্য পাওয়ার জন্য এ প্রশ্ন করা হবে - যথেষ্ট সরকারি, মানচিত্রিক ও অন্যান্য সিদ্ধান্তের মাধ্যমে জন্য একটি পারদর্শ করতে পারবেন।

এ ধারণা জরিপের আমার সুন্দর করেছি - প্রকৃতপক্ষে সুন্দর হলে এ ধারণা গবেষণায় আগ্রহী। আমার ফুটে পেয়েছি, যেমন, যা ও সব কোথায় না তা যাত্রা নেবে, তার সত্যি এবং উপকৃতি খাবার খেয়ে যায়। তাই এই একটি প্রথম নতুন করিন্থা।

এটি কি একটি সক্ষরতার?
আমরা করেছি তাদের মধ্যে আমার জরিপ চালাতে এবং যাত্রা করে দেখব ফলাফল কেমন হচ্ছ।
আপনি কি শেখে একটি সক্ষরতা তথ্য সহ সরকারি কোড পরামর্শ আপনার সাক্ষরতার সূচনা। আপনার শিখ নিয়ে বেঁচে খেয়ে মনে করা একটি প্রক্রিয়া, এর জন্য সাক্ষরতার কোড জ্ঞান সাহায্য করতে পারবে।

একটি আমার শিরোনাম সম্পর্কে জরিপের অংশ দেখার ব্যাপারে 'হীরা' ছবিটি দেখার কাজে যোগ দেওয়া হচ্ছে কিন্তু এটি মূলত সৃষ্টি করা হবে কিন্তু?
অন্য কিছু রা। আপনি একটি আমার শিরোনাম সম্পর্কে সত্যি জরিপ অংশ দেখার জন্য আমাদের সাহায্য করান। সাহায্য মনে হচ্ছ এ জরিপ কাজে অংশ নিয়ে যোগ দিয়ে আলোর পান।

'আমারা' কলেজ কাজ করুন বুকাক, যদি সাধারণ আলাপ করে করতে পারেন?
আমার নাম শিরোনাম ইন্টারনেটের অন্য একটি কাজ করে একটি সম্পর্কে শুনে যে একটি তথ্য প্রতিক্রিয়া জানতে আমার। এর জন্য যোগ দেওয়া করুন বুকাক, যদি সাধারণ আলাপ করে করতে পারেন।
বাংলাদেশ সর্বোচ্চ শীর্ষ সম্পর্কে আলাপ, যদি সাধারণ আলাপ করে করতে পারেন।

| যদি জরিপ সম্পর্কে আপনি আমাদের জানতে চান, তাহলে এখানে একটি প্রশ্ন তুমি দেখলে আমাদের শিরোনাম সম্পর্কে জানতে পারবেন। 
| অথবা ফ্যাকস 0800 092 1250 নামের সন্ধানে আপনার সাহায্যের কাজের সাথে যোগ দেন আলাপ করে আমার জানতে পারবেন। |
| মানববিদ্যাতে সম্পর্কে তথ্য এবং প্রশ্ন তুমি চিঠি লিখে দেখানোর কর্ম: 
| পাকিস্তান 0808 800 2222 |
| অথবা আপনার স্থলীয় নির্দেশিত একোনো প্রক্রিয়া সাথে আলাপ করুন। |
| (আপনার স্থলীয় নির্দেশিত প্রক্রিয়া সাথে আলাপ করুন।) |

Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies ● Institute of Education ● University of London
20 Bedford Way ● London ● WC1H 0AL

Simplified leaflet: BENGALI
નવી સરીનું ભાળુક
અમારા અવલોકન વિશે

શું તમારું ભાળુક વિશેષ છે?

અમે અમદાવાદમાં છીએ તે કાદ્ય લોકોના માનવના જીવનમાં શું જ તકનીક લાગી રહી છે અશા વાંદરા અને આમ રાષ્ટ્રીય અવલોકન માટે તમારા ભાળુકને પસંદ કરીએ છું?

20મી સદીમાં ભાળુક માટે મોટી બધું વચ્ચે કેવા અનુભવ દરશાવે તમારા સાદો કસરત હિંમત માયા કાપડી છે અને કી બદલણો તમે પાક્યાં રાખી રાખવા છે તમે જ જવાણી આપી અંગે સાધારણની કાજકા, માધ્યમ અને ભાળુકગણી કાળના તથા રાધાલ એટલી, તેમ વિષણના વાતાવરણમાં મહત્વ હતો.

તી, શું અમે તમારે તબુ આપીને તમારા વિશે આ તમારા ભાળુક વિશે બધુ પુણી શીલા આપી?

તમ કે માત્રિક સાયાખાં કે એક શું શું પ્રભાવિત બંને માટે આશીર્વદાય થઈ સાથે, યદિ નાં ઘટાડે કરતાં આજી નથી.

તમારી સુખકાંત લનારી સમાજનો સ્ટેટ સ્વપ્નનો પ્રવામ અંગે પ્રતિબદ્ધ છે જ જનતા સમાજી પુણ અંગે તાત્કાલિક માંગણે છે

- તમારા ભાળુકે કામ અને સારાંશની વિકાર
- તમારું કુંછમ
- આજી તમારા ભાળુક કામને મહત્વ દીધી છે તમારી માન્યતા અને વિતરણ

સાત સાદો મુખજીના અંગા અધિકારી પ્રથમ સમય આવાની, અને વિનંતી સાથે, જે તેમાં ઉદાલા હોય, તો આપીને અંગે કાયદો સુખકાંત લનારી તમારા ભાળુકે સમાજમાં લખાની મહત્વથી અને કોઇ પણ તખ્ખત તમારા હોવ માના હોઈ શકે.

પાસેલંબિક વસવાસ માટે તમારી પાંચના બંધુઓ ઉદાર અંગે કાયદે અને તમે જ ગરમામાં આવી છો તે વજા સમાચાર કરીશું?

નીર પણી સાથે પુણાંકે કન્યાના જ અંગે લાંબી સાધી કાળી અંગે તસ્વીર જમાવી નહીં શક્યા છે અંગ વાસ્તાણે.

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Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies • Institute of Education • University of London
20 Bedford Way • London • WC1H 0AL

Simplified leaflet: GUJARATI
શું તમારી પાસે અમારા માટે કોઈ સવાલ છે?

આ અબલોકનીએ કેટલું છે?

અમે તમારા બ્રાંડની વિપસ્તતા અને તમારી બાજારની સમલાઈ અલગ અખબાર અંગે માહિતી મેળવવા પહેલા જાણવાનું મહત્વ હતું - અંતિમ અને તમારી માર્કેટ પ્લનિંગ પુનર્ણબાદ શામેલ થવાનું રીત પસંદ કરીને - તેના પછી, માત્રાના અને ભીડના પરિવર્તનની શરૂઆત કરી શકાશે.

અમે આવા અબલોકન પૂર્ણ કરવા માટે કીમતની દરેક અંદર તે આ સૌથી વિશ્વસની અસર થશે. ધમાણ તબીકે - અને તમે શું થયા છે, તે સામાન્ય અને આવા માટે સામેલા પ્રશંસામાં વધુ શું થયા છે, તેવા સામાન્ય અંતર સયાત્ય માટે આવા સયાત્ય માટે કેટલી શકાશે. એ સમયએ તેમણે 30 વર્ષો કરીને આ સયાત્ય પંચી શકશે.

શું સાધારણ વધારે માટેની સુલભતામાં કોઈ અંદર છે?

અંદર કીમત વધારે ઝડપ કરી શકે છે અને આવા માટે પ્રશંસાની એવી પરિસ્થિતિમાં જે તમે તમારું આવા સયાત્ય પૂર્ણ કરી શકો છો તે અને આવા માટેની સુલભતા કરતા હોય છે. તમે તે અને તે સુલભતા શક્તિઓને શક્ય કે તમે તમારી સામાન્ય રહેશો. તમે તે શક્તિઓને શક્ય કે તમે તે અને સાધારણ નથી શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો. તમે તે શક્તિઓને શક્ય કે તમે તે અને તે શક્તિઓને શક્ય છો.
ਕੇਡੀ ਮਹਿੰਦਰ ਚੋਂਨਾ
ਮਾਹੇ ਮਕਹਾਂ ਵਾਲੇ

ਬੀ ਉਰਾਕਾਨ ਭੋਗਾ ਅਭਾਰ ਦੇ?

ਅਸਲੀ ਪੁਰਾਤਨ ਅਭਾਰ ਦੇ ਮਕਹਾਂ ਵਾਲੇ ਨੇ ਦੀਂ ਕੀਤੀ ਅਭਾਰ ਪ੍ਰਾਪਤ ਕੇ ਤਾਲਿ ਅਨਵੇਂਜ਼ ਵਿਚ ਸੀਮਣਾ ਦੀ ਲੜਾਈ ਦੇ ਨਾਲ ਕਾਰਨ ਜਾਂ ਸ਼ੁਕਾਰਾ ਪ੍ਰੋਸਲਾ?

21 ਵਾਂ ਸਾਲ ਵਿੱਚ ਬੀ ਈਸ ਵਿੱਚ ਵਿਸ਼ਿਕ ਮਾਨਦੀਆਂ ਨਾਨਾ ਦੇਣ ਵਿਚ ਸੀਮਣਾ ਲਈ ਪੀਸ਼ਕਾਰੀ ਵਚ ਤੀਜੀ ਦੀਆਂ ਸ਼ੁਕਾਰਾ ਦੀਆਂ ਜਗ੍ਹਾਂ ਦੀਆਂ ਰਿਕਾਰਟ ਦੀ ਲਭਿਆ ਤਾਲਿ ਸੇਵਾ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੇ ਜਿਆਦਾ ਵਿਚਾਰਾਂ ਵੀ ਉੱਚ ਵਿਚਾਰਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀ ਸ਼ੁਕਾਰਾਵਾਂ ਤੇ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀ ਰਿਕਾਰਟ ਵਿਚਾਰਾਂ ਦੀਆਂ ਕੀਤੀਆਂ ਹਨ।

ਬੀ ਭਾਸ਼ੀ ਮਹਿੰਦਰ ਚੋਂਨਾ ਵਿੱਚ ਕੀ ਇਕੋਂ ਵੇਲੇ ਵੀ ਅਭਾਰ ਵੋਂ ਸ਼ੁਕਾਰਾ ਮਕਹਾਂ ਵਾਲੇ ਦੇ?

ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਿਚ ਰਿਕਾਰਟ ਵਚ ਸੇਵਾ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਵਿਚਾਰਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਵਿਚਾਰਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਵਿਚਾਰਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਵਿਚਾਰਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੇ ਗਰਨਾ ਵਾਲੇ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਵਿਚਾਰਾਂ ਵਚੇ ਗਰਨਾ ਵਾਲੇ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੇ ਗਰਨਾ ਵਾਲੇ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੇ ਗਰਨਾ ਵਾਲੇ ਸ਼ੁਕਾਰਾਵਾਂ 

ਮਾਦੇ ਪੀੜ੍ਹਾਲ ਦੇਣਾ ਕਲਪਕਾ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਵਿਚਾਰਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ 

ਪ੍ਰਤੀ ਤੀਥ ਤੇ ਸਾਈ ਪੀੜ੍ਹਾਲ ਦੇਣਾ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ 

ਵੀਮ ਐਸ ਇੱਕ ਸਕਮ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਵਚੋਂ ਸ਼ੁਕਾਰਾਵਾਂ 

ਨਿਕੀਕਰਣ ਚਢੀ ਸੁਕਮਾਣੀ ਦੇ ਸਰ ਅਸ਼ਮਾਣਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ ਦੀਆਂ ਸ਼ੁਕਾਰਾਵਾਂ 

ਪੁਰਾਤਨ ਭਾਸ਼ੀ ਚੋਂਨਾ ਵਿੱਚ ਪੁਰਾਤਨ ਭਾਸ਼ੀ ਚੋਂਨਾ ਵਿੱਚ ਪੁਰਾਤਨ ਭਾਸ਼ੀ ਵਿੱਚ ਪੁਰਾਤਨ ਭਾਸ਼ੀ ਵਿੱਚ ਪੁਰਾਤਨ ਭਾਸ਼ੀ ਵਿੱਚ ਪੁਰਾਤਨ ਭਾਸ਼ੀ ਵਿੱਚ 

Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies • Institute of Education • University of London
20 Bedford Way • London • WC1H 0AL

Simplified leaflet: PUNJABI
बी उम्र की महिलाओं के लिए महल्ला पंडित्य चुपटे है?

पूर्व संदेश दर्ज करने और महसूल देने के लिए महल्ला पंडित्य बचाव समिति की कृपा से। इसके लिए कला फिर संदेश के लिए महिलाओं को देते हैं। उन्हें इस संदेश के लिए महल्ला पंडित्य बचाव समिति की कृपा से।

अभी इस संदेश के महल्ला पंडित्य बचाव समिति की कृपा से। इस संदेश के लिए महल्ला पंडित्य बचाव समिति की कृपा से।

बी फिर संदेश देने के लिए महल्ला पंडित्य बचाव समिति की कृपा से। इस संदेश के लिए महल्ला पंडित्य बचाव समिति की कृपा से।

लेंगे यह रहता है महल्ला पंडित्य बचाव समिति का संदेश? इस संदेश के लिए महल्ला पंडित्य बचाव समिति की कृपा से।

निम्नलिखित संदेश के महल्ला पंडित्य बचाव समिति की कृपा से। इस संदेश के लिए महल्ला पंडित्य बचाव समिति की कृपा से।

Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies • Institute of Education • University of London
20 Bedford Way • London • WC1H 9AL

Simplified leaflet: PUNJABI
Ilmaha Qarniga Cusub
(Child of the New Century)

Daraasaddayada

Ilmahaagu khaas mayahay?

Waxay noola egtahay in ilmahaagu khaas yahay. Ilmahaaga waxaa loo xushay in uu ka mid noqdo daraasad cusub oo baalaaran oo saamayn wayn ku yeelan karta habka banaadkuma u noolyahay.

Qiyaas xaaladda caruurta koraysa qarniga 21aad? Sideebay ula qabsan doonaan Iskuu? Maxaa saacdi doona, maxaaase dib u dhac u keeni kara? Jawaabta aad su'aalaha naga siiso waxay cawimi doontaa qorshaynta caafimaadka, waxbarashada iyo daryeska caruurta oo si dhab ah waxtar ugu leh carruurta iyo waalidkooda.

Sidaa awgeed ma kuu imaan karna oo kuwaydiin karnaax waxyaalo la xiriira adiga iyo ilmahaaga?

Wixii akhbaar ah ee aad nadda wuxuu noqon doonaad mid si gaar ah loo xafido oo kast oo xariciga falaaliyo. Magacaaga iyo cidd kale toona warbixinta laguma sheegi doono.

Dadka waraysiga qaadi doona waxaa loo tababaray in ay ogf waalka waydiyayn su'aal loo isku mid ah oo la xiriira:

- Dhalashaddii Ilmahaaga iyo kortaankaada
- Qoskaaga
- Waxa aad aamminisantahay sida diinta iyo waxyaabaha aad walaaco ka qabto ee la xiriira barbaarinta ilmahaaga

Waraysiga lala yeelanayo hooxayada wuxuu qaadanayaada ilaa in wax yar ka badan hal saac, kana aabuhna addal lahe loo wuxuu qaadanayaa qadder ku dhow nusasac. Dadka waraysiga qaadayda uuma baahna in ay ilmahaaga wax waydiyayaa, mana dhici doonto in tijaabo caafimaad ay ilmahaagu maraan.

Waxaan ku waydiin doonaa waxyaalo la xiriira waxbarashadaada, shaqadaada iyo guriga aad ku nooshay.

Intaa kadib waxaan isku uureefinayn jawaabaha aad ka helinay dadka aad waraysannay guud ahaan waddanka United Kingdom oo dhan. Taasi waxay muujin doonta xaaladda carruurta qarniga cusubi ku sugantahay.
Wax su'aalo ah mana weydiineysaa?

Waa maxay ujeedadda daraasaddani?
Waa su'aal macquu ah marka la eegi wardooyayga la xiriira ilmahaaga. Hase ahaateed wax tan kaliya ee - hadda oo lajoogo iyo marka ilmuhu koraan oo loo sii dhabbo galo – dawadda, wanaadka iyo inta kale ee ay khusaysaaba isbaddal wax ku ool ah kukeeni karaan.

Horay in badan ayaan daraasad noocaan oo kale ah u samaynay. Xaqiigdo waxay tahay Britan (Britan) waxay hormuud ku tahay cilmii baarista nooqan ah. Waxaan ogaminay, tusaale ahaan, ee aad caafimaad oo hufan oo carruuta iyo hoyaladda, raashin waxaan iyo hoy waqooyiga in ay raad wayn uga tagaan, korraanka iyo horumarka ay ilmuhu gaaraan markay koraan. Hase ahaatee tani wax tiirkoob cusub illaa iyo muddo ka badan 30 sano.

Ma waraysigaan oo kelliya ayey dareesadu ku eg tahay?
Waxaan jecnaan lahayn in aan soo noqonno ilaa iyo muudo laba sano ah oo aan ogaan noo xaaladda halka ay marayso. Markii ilmahaagii sii koroba, waxaan gaadi doonka waraysiyuul kale dhawrkii sanoba mar. Qaabkaas waxaan ku guur doonnaa in aan heliga fikrad fican oo la xiriirta qaabka ilmahaagii u korayo. Wuxuu kasoo baxa cilmii baaristaan waxay u suuray galiin doontaa dawadda iyo kooxaha kaleba in ay siiso xog waxtar u leh sidii dadkaa loogu diyaarini lahaa kaalmaaday ay u baahanyihiin.

Haddii aan daraasaddaan ka qayb qaato ilmahayga waligood malla daba joogaya?
Jawaabta waa maya. Adiga iyo ilmahaygubka markaad rabtaan ayaad iska joogin kartaa, inkastaan aad jeednaha in aad wax nala qabtayaan. Guud ahaan dadkaa hooyga loo caawinay daraasadda noocsan oo kale ah waxa kuraaxaysa jireen.

Daraasaddaan yaa samaynaya?
Waxaan naahay xarun cilmii baariss oo ku taalla Machadka Waxbarashada oo ka mid ah Jaamicadda London. Waxaana nalaaydooyin in aan daraasdaar soneynno, sababtii ah waxaan hor e u samaynay daraa soo din yarada oo kale ah. Waxaana kale oo nala ugu sammi karin in aan gabanno shaqadaan u baahan xirfad iyo taksuus gaar ah. Warrayiiska waxa xaad doono Xarunta Qaranka ee Cilmii Baarista Bulshada (National Centre for Social Research) oo aan xulaynno sababtii ah waxay ku xeel dheer yihiin arrimaaga noocsan oo kale.
Mashruucaan Ilmaha Gambiga Cusub waxa uu maagislay dawadda iyo qolo kale.

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**Haddii aad u baahantahay akhbaar intaa dhaafisiiin ee la xiriirta tiirkoodkaan, waxaana jira qoraal kooban oo bixinaya tafaasiil intaan ka badan.**
Ama waxaad la hadli kartaa qof kamid ah dadka daraasadda samaynaya oo aad kale hadli kartid telefoonkaan bilaashka ah 0800 092 1250

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**Haddii aad u baahato akhbaaro guud ama talo siinta waalidka la xiriir khadka waaliddinta oo nambarkaas yahay 0808 800 2222.**
Ama xafiiska layraadho Citizens Advice Bureau ee aagga aad daggantahay (Nambarka telefoonka xafiiskaa waxa laga heli karaa buugga telefoonada lagu daabaco – local telephone directory)

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*Project Leader: Professor Heather Joshi*
*Centre for Longitudinal Studies ● Institute of Education ● University of London*
*20 Bedford Way ● London ● WC1H 0AL*

*Simplified leaflet: SOMALI*
Yeni Yüzyıl Çocuğu
(Child of the New Century)

Anketimiz hakkında

Bebeğiniz sizin için çok mu değerli?

Biz çok değerli olduğunu düşünüyoruz. Bebeğiniz ülke çapında yapılan ve insanların gelecekteki yaşamlarını tümüyle değiştirebilecek yeni ve geniş kapsamlı bir anketa katılmak üzere seçilmiştir bulunuyor.


Öyleyse size gelip kendiniz ve bebeğiniz hakkında sorular sorabilir miyz?

Bize verdüğiniz bilgiler yansıtar gereğince gizli kalacak. Anket raporunda adınız geçmeyecek, hiç kimsein adı kamuoyuna açıklanmayacak.

Anketörlerimiz gereklı eğitimi almiş olup herkese aşağıdaki konuları kapsayan aynı tür sorular sorulacaktır:

- Bebeğinizin doğumu ve ilk gelişimi
- Alınız
- Gündüz gözlerinde çocuk yetiştirme konusundaki görüşlerinize ve kaygılarınız

Anne ile görüşme bir saatten biraz fazla, varsı baba ile görüşme yaklaşık yarım saat sürecek. Anketörün bebeğinizde dokunması bile gerekmayip herhangi bir tıbbi test de uygulanmayacak.

Konunun başında, çerçevesi ve tarihçesile ilgili bilgi sahibi olmak için, size kendi eğitim ve iş durumunuz hakkında, oturduğunuz ev hakkında da bazı sorular soracağız.

Bundan sonra Birlikte Kralık inçinda içerisinde görüştüğümüz kimselerden alınan bilgileri birleştiricez. Bu anket, Yeni Yüzyınlın Çocukları için daha şimdiden nasıl bir yaşamın söz konusu olduğunu gösterecek.

Project Leader: Professor Heather Joghi
Centre for Longitudinal Studies • Institute of Education • University of London
20 Bedford Way • London • WC1H 0AL

Simplified leaflet: TURKISH

89
Bize sormak istedigeniz sorular mi var?

Niye böyle bir anket yapıyoruz?
Bebeğiniz hakkında gösterdğiniz bu yoğun ilgi karşısında pekala yerinde bir soru fıv var ki, eğer bu tür bilgiler bu günden toplanır ve bebeklerin nasıl yetiştirkin birer birey durumuna geldikleri günümüzdeki people olarak izlenebilir, ancak o zaman gerek hükümet, gerekse anne-babalara ve diğer ilgilileri koşulları daha iyi bir hale getirebilir.

Bunun gibi anketleri daha önce de yaptık. Aslında Britanya bu araştırma alaninda dünyanın en gelen ülkeleridir. Örneğin, anneler ve çocukları için verimli sağlık hizmetleri, kaliteli konutlar ve uygun şeritte beslenmenin çocuklarının büyüme sürecinde sağlıgı ve güçlenme işlerinde kalıcı bir etki yaratığıını görebilir. Ne var ki, 30 yılı aşkın süredir ilk kez böyle yeni bir anketin yapıldığını da söylemez de ekleyeceğiz var var.

Yalnızca tek bir görüşme mi yapılacak?

Peki bu anket 'Evet' dersem, çocuğunum ömür boyu buna yanıt vermek zorunda mı kalacak?

'Biz' deyip duruyoruz ama, peki biz kimiz?

Anket hakkında daha fazla bilgi almak isterseniz, daha ayrıntılı açıklamaların yer aldığı bir broşür var.
Ya da Ücretsiz Telefon numaramızı arayarak Study Team (Araştırma Ekibi) personelimizle konuşabilirsiniz 0800 092 1250.

Genel danışma veya anne-babalara bilgi için:
Parentline – 0808 800 2222
ve ya size en yakın Citizens Advice Bureau
(Telefon numarasını bülgenizin telefon rehberinde bulabilirsiniz)

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Project Leader: Professor Heather Joshi
Centre for Longitudinal Studies » Institute of Education » University of London
20 Bedford Way » London » WC1H 0AL

Simplified leaflet: TURKISH
(Child of the New Century)

کیا آپ کا تخت چقی پانی نیست؟

(Child of the New Century)

John Smith

Project Leader: Professor Heather Jusli
Centre for Longitudinal Studies • Institute of Education • University of London
20 Bedford Way • London • WC1H 9AL

Simplified leaflet: URDU
ভাষা সঠিকতা তথ্য পাওয়ার জন্য অনুমতি

আমারা ইতিমধ্যে আপনার পার্থক্য ও শিক্ষা জন্য সম্পর্কে জিজ্ঞেসা করেছি। তথ্য সম্পূর্ণ করার জন্য আপনার পার্থক্য ও শিক্ষা জন্য সম্পর্কে এবং সেক্ষেত্র থেকে পাওয়া সম্পর্কে আমা অবিকল তথ্য গ্রহণ করে। এগুলির মাধ্যমে লিখা রয়েছে সর্বাধিক প্রচীন সময়ের সাথে সম্পর্কিত সারাভাষ্য থেকে এ সর্ব তথ্য আমার পাওয়া যায়।

গণনায়ক সত্ত্বায় অন্তর্জাতিক বাণিজ্য ও বিপণনের অর্থ খ্যাতি সংগ্রহকারী সংস্থায় সম্পর্ক থেকে এ সারা তথ্যের সঙ্গে পার্থক্য করার জন্য দেখায় যে এরা কাছাকাছি মানুষের দৃষ্টিকোণ থেকে সম্পর্ক থেকে দেখায় যে অন্তর্জাতিক সাহিত্যের মাধ্যমে আমাদের কাছে তা দেখায়। আমার তথ্য পাওয়ার জন্য লিখন। আপনার অনুমতি সহ শিশুর এরাই একমাত্র নাম্বার৩ নেই, এবং প্রচ্ছদ থেকে তথ্য পাওয়া সহজ হয়েছে।

আমাদের শেষের তথ্য পাওয়া যায় আপনার কাছে তথ্য প্রদানের জন্য অনুমতি পাওয়া প্রয়োজন রয়েছে।

এ এই সম্পর্কে বলতে এমন কোনো অপরিসংখ্যান সংজ্ঞা যা আমাদের প্রকৃতপক্ষে ব্যবহার করা হবে। একে নাম ও শিশুর নিয়ন্ত্রণ করা উচিত।

অনুরূপ করে আপনার শেষের প্রশ্ন মানে সন্তোষের প্রকাশকে বিষয়বস্তু করতে পারেন বা বিষয়টি তাদের মধ্যে দিতে পারেন ০৮০০ ০৯২ ১২৫০ নাম্বার দোকানের কাছে পারেন, যা আমাদের দুটির লিখন লিখতে বা ইমেইল করতে পারেন।

চাইড হল নিশ্চিত করে তাদের শিশুর (মানুষ হিসাবের শিশু) সম্পর্কে তথ্য সংজ্ঞায়ক সংস্থাপনা (এবং বাণিজ্যিক দৃষ্টিকোণ)। আমি প্রতিকৃত বা অনুমতি এবং এ সম্পর্কে প্রশ্ন করার সুযোগ প্রদান করিয়েছি।

আমি তুমি শেখার পরিবার ও আমার সম্পর্কে সকল কথা কাজ করার জন্য প্রাণ দোকানের কাছে পারেন হবে।

১. আমি মন্ত্রণালয় যে, চাইড হল নিশ্চিত করে তাদের শিশুর (মানুষ দৃষ্টিকোণ)। যদিও, হস্তক্ষেপ আমরা সেনাবাহিনীর কাছ থেকে আমার পার্থক্য ও শিক্ষা জন্য সম্পর্কে তথ্য প্রদান করা। চাইড হল নিশ্চিত করে তাদের সেনাবাহিনী ও সেনাবাহিনীর কাছ থেকে তথ্য প্রদান করার জন্য প্রতিকৃত গ্রহণ।

২. সেনাবাহিনী প্রদান করার রুপে দোকানের কাছে শিক্ষা নিশ্চিত করে নেওয়ার সার্খিশ সেনাবাহিনী অনুমতি করা জন্য আমি চাইড হল নিশ্চিত করে তাদের অনুমতি দিয়েছি।

• উল্লেখিত জন্য অনুমতি দিতে না চাইলে ক প্রথম সেনা দিন

সত্যিকরণ: ________________

পূর্ণ নাম: ____________________

প্রধানতন্ত্রী: ____________________
GUJARATI

આખી દસ શાશ્વત પ્રવાસ માટે પરિયોજના સંપાદક

સામાન્ય અને સુસંગત જાફ વિદ્યુત સુરક્ષા ચર્ચામાં કરીને, માધ્યમિક પટ્ટા વિદ્યાર્થી માટે સમાજ તમારી સારી અને આદર્શ જીવન અને શાશ્વત પ્રવાસ વિદ્યાર્થી પાસની તથા પ્રવાસ માટે એડિટર સર્કલર ઓફિસર અને તમારી સાથે જીવન અને શાશ્વત પ્રવાસ વિદ્યાર્થી પાસની સર્કલર ઓફિસર અને તમારી સાથે જીવન અને શાશ્વત પ્રવાસ વિદ્યાર્થી પાસની સર્કલર ઓફિસર 

આખી દસ શાશ્વત પ્રવાસ માટે આ માધ્યમિક પટ્ટા માટે અને શાશ્વત પ્રવાસ વિદ્યાર્થી પાસની 

તમે આમ શાસન અને કયા કયા શાસની વિદ્યાર્થી માટે અને સમગ્ર સરકારી વ્યવસ્થા પર કોઈ વ્યવસ્થા અને કોઈ વિદ્યાર્થી પાસની 

સાથે વિચારા કરવું છે કે માધ્યમિક પટ્ટા અને શાસની વિદ્યાર્થી પાસની 

A. માધ્યમિક પટ્ટા અને શાસની વિદ્યાર્થી પાસની 

B. નિશ્ચિત અને સામાન્ય 

• તમે આ દસ શાશ્વત પ્રવાસ માટે પરિયોજના સંપાદક નથી તારી તો A સ્થાયી B છે તારી તો A સ્થાયી
मैं स्वीकार करता हूँ कि मेरे नाम की सट्टवाली एक दूध के मूल्य और लाभ के माध्यम से लिखा गया है। मेरे साइकिल के लिए यह निर्माण शुरू किया गया है। यह निर्माण स्थान में है और यह निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है।

मैं हामी देश के पूर्व राष्ट्रपति के लिए यह निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है।

भारत सरकार के पूर्व राष्ट्रपति के लिए यह निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है। मेरे निर्माण के सामान्य लाभ के माध्यम से, मेरे सारे एक संगठन निर्माण शुरू किया गया है।
Ogolaansho in Akhbaar Laxiriirta Caafimaadka Lahelo
(Permission to Obtain Health Information)

Waxaan hore kuu waxyaynay waxyaablo laxiriiraa ururkaaga iyo markay ilmuhu dheeshaan. Si aan u dhammaystirno akhbaarista waxaan jecilaan lahayn in aan ku waddyinno waxyaalalo laxiriiru ururkaaga iyo caafimaadka markay ilmuhu dhashaana annaga oo tirsitaayna diiwaankaaga caafimaadka ee dheeqtarkaaga. Waxyaalaha aan ubaahannahay waxaa ka mid ah waxyaalihii daagtarku diiwaanka gashay ilmuhu markay dheesheen, caafimaadka ilmuhu markay yaraaeyeen iyo diiwaanka dheexa ee caafimaadka ilmaha.

Inta badan akhbaarista aan ubaahannahay waxaan ka heleynaa diiwaanka Xafiiska Tirakoobka Garanka iyo Waaxda Caafimaadka. Haddii aysan taasi suuro gali noqon, waxaan laxiriiraynalsu ilmahaaga ku dhashay, ama Qaybta Adeegga Ummulaha haddii ilmaha guriga lagu dhaallay. Ogolaanshaahaaga markaa ku helno lambarka caafimaadka ilmaga (baby’s NHS number) waxay naga caawinaysaa in aan si joogtaa kuula soo xiriinu.

Si aan uhelno akhbaaristaan waxaan ubaahannahay ogolaanshaahaaga oo qoraal ah, oo markaa kadib ayaa nalo oggolaanayaa in aan heino.

Sida waxyaalaha kale ee aad noo sheegtay, waxyaalaha laxiriiru caafimaadkaaga ee aan helno waxaa loo xafiidaya si khaas ah ama qarsoodi ah. Akhbaaristaan waxa xali ah ee loo icismahaayaa ujeeddo caliimo baarish. Ciuwaanka iyo magaca toona laguma darayo wixii kasoo baxa caliimo baaristaan.

Fadlan waydii qofka warraagiga kale yeesaynaya wixii aad wabac ka qabto oo dhan ama waxaad wici kartaa khuburada caliimo baarista samaynaysaa oo aad kala xiriiru kard 0800 092 1250. Waxaad kale oo aad qoraal ahaan oola xiriiru kartaa amaba ilmey uddin kartaa ciwaanka hoos kuwig. [Some content elided due to text length]

Waxaan akhriiay ama la'aheegay qoraalka laxiriiru Ilmaha Cargiga Cusub waxaanan kaansho u helay in aan wixii aan su'aal qabo soo gudbiyo.

Waxaan fahmey in wixii akhbaar aanga iyo ooqayska wixii loo tixgaliinayo si aad u xafiid dhoodan oo qarsoodi ah.

A. Waxaan fahmey in Dashuurka Ilmaha Cargiga Cusubi uu doonaayo in uu akhbaar laxiriiru ururkaaga (my pregnancy) iyo markay ilmahaayu dhashaan ka qaadanayo isbitaalka iyo dhiwaanka dheexa ee caafimaadka. Waxaad siyay oggolaanshaahayga in akhbaaristaas loo oggolaado Dashuurka Ilmaha Cargiga Cusub.

B. Waxaan siyay Dashuurka Ilmaha Cargiga Cusub oggolaanshaahayga in ay dabagal ku sameeyn rajistarka Adeegga Caafimaadka Garanka haddii loo baahdo.

● TIRTIR: AAMA B HADDII AADAN DOCNAYN IN AADAN OGGOLAAN LABADABA.

Saxiix ____________________ Taariikhda ____________________

Magacaaga ku qor
TURKISH

Sağlık Bilgileri Alma İzni
(Permission to Obtain Health Information)


Tüm bu bilgileri alıp kullanmak için sizin bize bunları verilmesine yazılı izin vermeniz gerekmektedir.


Kayıttan duyduğunuz herhangi bir nokta tarafınıza belirtmek lütfen sorun. İletişim no. 0800 002 1250 numaralı telefonu arımına ekinin ücretsiz arayabilir, aşağıdaki adreslere mektup yazabilir veya elektronik posta mesajı da gönderebilirsiniz.

Child of the New Century [Yeni Yüzyıl Çocuğu] hakkındaki bilgilendirme broşürünü okuduğunuz veya duyдум ve sorular sorma olanağına sahip olduğum.


B. Gereksizce Child of the New Century tarafından bebeğinin NHS sicolının izlenmesine izin veriyorum.

- İKİSİNİ BİR DENİZ İZİN VERMEK İSTEMİYORSANIZ A VEYA B'İN ÜZERİNİ KARALAYIN

İmza ____________________________ Tarih ____________

İsim ____________________________
صحب سے متعلق معلومات حاصل کریں جی کی اجارت

تمہیں پہلا مرتبہ اور دوسری چھوٹی کی اجرا کے لئے قانونی پیشراع کی سہولت میں کرنا ضروری ہے۔ سہولت کا ہدایت پر جوابی پیغام سے جواب دیں جو اس کے ساتھ اور دوسرے کے ساتھ جواب دیں۔

تمہیں اپنے ذریعہ کے لئے پلان کر کے جواب دیں جو اس کے ساتھ اور دوسرے کے ساتھ جواب دیں۔

اب پہلا مرتبہ اور دوسری چھوٹی کی اجرا کے لئے قانونی پیشراع کی سہولت میں کرنا ضروری ہے۔

اپنی کلید میں دارمکھ کی کامیابی کے لئے جواب گزین باپڑا پیشراع کی خرید پیش کرے۔

ایک کلید میں دارمکھ کے ساتھ اور دوسرے کے ساتھ جواب دیں جو اس کے ساتھ اور دوسرے کے ساتھ جواب دیں۔

ایک کلید میں دارمکھ کے ساتھ اور دوسرے کے ساتھ جواب دیں جو اس کے ساتھ اور دوسرے کے ساتھ جواب دیں۔

ایک کلید میں دارمکھ کے ساتھ اور دوسرے کے ساتھ جواب دیں جو اس کے ساتھ اور دوسرے کے ساتھ جواب دیں۔

ایک کلید میں دارمکھ کے ساتھ اور دوسرے کے ساتھ جواب دیں جو اس کے ساتھ اور دوسرے کے ساتھ جواب دیں۔

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Information from the Personal Health Child Record
- dress rehearsal only

<table>
<thead>
<tr>
<th>BABY'S BIRTHWEIGHT and GESTATION:</th>
<th>Kg</th>
<th>Gm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of weeks gestation</td>
<td></td>
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<table>
<thead>
<tr>
<th>NEWBORN EXAMINATION:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination not carried out</td>
</tr>
<tr>
<td>Examination carried out – no problems recorded</td>
</tr>
<tr>
<td>Examination carried out – problems recorded COPY HERE</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>NEO NATAL HEARING TEST:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Test not carried out</td>
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<tr>
<td>Test carried out – no problems recorded</td>
</tr>
<tr>
<td>Test carried out – problems recorded COPY HERE</td>
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</table>

### REVIEWS & WEIGHTS

<table>
<thead>
<tr>
<th>Date</th>
<th>Baby's weight</th>
<th>Mode of feeding</th>
<th>Distraction Hearing Test</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Kg</td>
<td>Gm</td>
<td></td>
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<table>
<thead>
<tr>
<th>FIRST review (6-8 weeks)</th>
<th>Day</th>
<th>Month</th>
<th>Year</th>
<th>Kg</th>
<th>Gm</th>
<th>Breast</th>
<th>Formula / bottle</th>
<th>Both</th>
<th>Information not on record</th>
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| COPY any problems recorded: |

<table>
<thead>
<tr>
<th>SECOND review (6-9 months)</th>
<th>Day</th>
<th>Month</th>
<th>Year</th>
<th>Kg</th>
<th>Gm</th>
<th>Breast</th>
<th>Formula / bottle</th>
<th>Both</th>
<th>Information not on record</th>
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| COPY any problems recorded: |

<table>
<thead>
<tr>
<th>MOST RECENT WEIGHT</th>
<th>Day</th>
<th>Month</th>
<th>Year</th>
<th>Kg</th>
<th>Gm</th>
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/continued...
## IMMUNISATIONS

### Routine immunisations:

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Doses</th>
<th>Information not in record</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria/tetanus/pertussis/ Hib (Haemophilus influenzae type b)</td>
<td>0 1 2 3</td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td>0 1 2 3</td>
<td></td>
</tr>
<tr>
<td>Meningitis C</td>
<td>0 1 2 3</td>
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</tbody>
</table>

### Non-routine immunisations:

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Doses</th>
<th>Information not in record</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neonatal BCG</td>
<td>0 1</td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>0 1 2 3</td>
<td></td>
</tr>
</tbody>
</table>

WRITE IN BELOW ANY DETAILS WHICH DID NOT FIT IN THE AVAILABLE SPACE, MAKING CLEAR TO WHICH SECTION(s) THE INFORMATION RELATES.