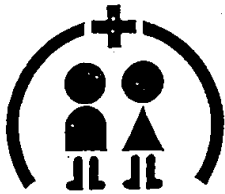


# DOCUMENT T

An Initiative of the International Centre for Child Studies  
A national study of all children born 5th-11th April 1970 in England, Wales and Scotland  
originating from the 1970 Birth Cohort of the National Birthday Trust Fund



YOUTHSCAN

1986/87

## FAMILY FOLLOW-UP FORM

STRICTLY CONFIDENTIAL

Director: Professor Neville Butler  
MD, FRCP, FRCOG, DCH  
International Centre for Child Studies  
Ashley Down House  
16 Cotham Park  
Bristol BS6 6BU  
Tel. (0272) 739783/743405

OFFICE USE ONLY

PLEASE USE BLOCK CAPITALS (DOC-MT)(DOC-YR) Today's Date . . . . .  
Teenager's Surname . . . . . (DOB86) . . . . . Date of Birth . . . . . /4/70  
Teenager's Forename(s) . . . . . (SEX86) . . . . . Sex M  F   
Teenager's Home Address . . . . .  
Telephone Number . . . . .  
Name of school attended in Summer term . . . . .

1. Please say what teenager is doing/will be doing shortly  
Please answer (a), (b), (c) and if necessary, (d)

(a) Is teenager now (or about to be) continuing his/her education eg. in 6th Form, 6th Form College, College of Further Education, Technical College, etc.  
Tick one box  
YES  NO  (TIA.1)  
If YES, give nature of establishment attended (or will attend) i.e. Same school, 6th Form College, FE College, Technical College or other establishment: (TIA.2)\*  
Give Name & Address of establishment (TIA.3)\*  
Give date when started (is starting) (TIA.4A) (TIA.4B)  
What Examination(s)/Certificate(s)/Diplomas(s), if any, is he/she studying for? (TIA.5)\*

(b) Is teenager in (or about to be in) a youth training scheme (YTS)?  
Tick one box  
YES  NO  (TIB.1)  
If YES, give Name and Address of YTS Scheme (TIB.2)\*  
Give Nature of YTS Training (TIB.3)\*  
Give date when started (is starting) (TIB.4A) (TIB.4B)

(c) Is teenager already in (or about to be in) employment? (TIC.1)  
Tick one box  
YES  NO   
If YES, give actual job (TIC.2)\*  
Give Trade or Industry (TIC.3)\*  
Give Name & Address of Place of Employment (TIC.4)\*

(d) If teenager is not in any of the above, what is he/she doing (about to do)? (TID.1)  
Tick one box  
UNEMPLOYED   
DOING SOMETHING ELSE  (WHAT? (TID.2)\*)

2. Please give study teenager's exam results, if applicable. (Include all exams taken). If did no exams, please write "No Exams".

	Tick all that apply 'O' or Equivalent	Enter Grading obtained	Tick all that apply CSE or Equivalent	Enter Grading obtained
English Language	<input type="checkbox"/> (T2A1.1)	(T2A1.2)	<input type="checkbox"/> (T2A2.1)	(T2A2.2)
English Literature	<input type="checkbox"/> (T2B1.1)	(T2B1.2)	<input type="checkbox"/> (T2B2.1)	(T2B2.2)
Mathematics	<input type="checkbox"/> (T2C1.1)	(T2C1.2)	<input type="checkbox"/> (T2C2.1)	(T2C2.2)
Science	<input type="checkbox"/> (T2D1.1)	(T2D1.2)	<input type="checkbox"/> (T2D2.1)	(T2D2.2)
Physics	<input type="checkbox"/> (T2E1.1)	(T2E1.2)	<input type="checkbox"/> (T2E2.1)	(T2E2.2)
Biology	<input type="checkbox"/> (T2F1.1)	(T2F1.2)	<input type="checkbox"/> (T2F2.1)	(T2F2.2)
History	<input type="checkbox"/> (T2G1.1)	(T2G1.2)	<input type="checkbox"/> (T2G2.1)	(T2G2.2)
Geography	<input type="checkbox"/> (T2H1.1)	(T2H1.2)	<input type="checkbox"/> (T2H2.1)	(T2H2.2)
Chemistry	<input type="checkbox"/> (T2I1.1)	(T2I1.2)	<input type="checkbox"/> (T2I2.1)	(T2I2.2)
French	<input type="checkbox"/> (T2J1.1)	(T2J1.2)	<input type="checkbox"/> (T2J2.1)	(T2J2.2)
German	<input type="checkbox"/> (T2K1.1)	(T2K1.2)	<input type="checkbox"/> (T2K2.1)	(T2K2.2)
Business Comm.	<input type="checkbox"/> (T2L1.1)	(T2L1.2)	<input type="checkbox"/> (T2L2.1)	(T2L2.2)
RE	<input type="checkbox"/> (T2M1.1)	(T2M1.2)	<input type="checkbox"/> (T2M2.1)	(T2M2.2)
Home Economics	<input type="checkbox"/> (T2N1.1)	(T2N1.2)	<input type="checkbox"/> (T2N2.1)	(T2N2.2)
Other subject(s) please specify:				
1 (T2O1.1) *	<input type="checkbox"/> (T2O1.2)	(T2O1.3)	<input type="checkbox"/> (T2O2.1)	(T2O2.2)
2 (T2P1.1) *	<input type="checkbox"/> (T2P1.2)	(T2P1.3)	<input type="checkbox"/> (T2P2.1)	(T2P2.2)
3 (T2Q1.1) *	<input type="checkbox"/> (T2Q1.2)	(T2Q1.3)	<input type="checkbox"/> (T2Q2.1)	(T2Q2.2)
4 (T2R1.1) *	<input type="checkbox"/> (T2R1.2)	(T2R1.3)	<input type="checkbox"/> (T2R2.1)	(T2R2.2)
5 (T2S1.1) *	<input type="checkbox"/> (T2S1.2)	(T2S1.3)	<input type="checkbox"/> (T2S2.1)	(T2S2.2)
6 (T2T1.1) *	<input type="checkbox"/> (T2T1.2)	(T2T1.3)	<input type="checkbox"/> (T2T2.1)	(T2T2.2)

Please continue on a separate sheet of paper if more than six others. CONTINUED ON  
 NB. If in Scotland and no grade has been given, please write N/G under 'Grading'. SEPARATE SHEET

3. Have the Youthscan School Questionnaires yet been filled in by teenager?

	Tick all that apply	
YES, all of them	<input type="checkbox"/> (T3.1)	IF NOT YET DONE, is the teenager willing to do this at home (or elsewhere if more convenient)? YES <input type="checkbox"/> (T3.10) NO <input type="checkbox"/> Remarks (T3.11) *
YES, part of them	<input type="checkbox"/> (T3.2)	
YES, but don't know how much	<input type="checkbox"/> (T3.3)	
NO, didn't hear anything from school	<input type="checkbox"/> (T3.4)	
NO, teenager has left school already	<input type="checkbox"/> (T3.5)	
NO, teenager was doing exams	<input type="checkbox"/> (T3.6)	
NO, teenager was on study leave	<input type="checkbox"/> (T3.7)	
NO, for other reason	<input type="checkbox"/> (T3.8)	
(Please say why	(T3.9) *	

4. Has the home interview yet been done/or already arranged?

	Tick one box only	
YES, everything completed and given back	<input type="checkbox"/> (T4.1)	IF NOT YET DONE, may we please arrange to do it at a convenient time? (T4.3) YES <input type="checkbox"/> NO <input type="checkbox"/> Remarks (T4.4) *
YES, part of it completed and given back	<input type="checkbox"/>	
YES, appointment being arranged but not yet done	<input type="checkbox"/>	
NO, nothing heard yet	<input type="checkbox"/>	
NO, suitable appointment couldn't be fixed or nobody in	<input type="checkbox"/>	
NO, for other reasons	<input type="checkbox"/>	
(Please say why	(T4.2) *	

5. Has teenager's medical check yet been done/or already arranged?

	Tick one box only	
YES	<input type="checkbox"/> (T5.1)	IF NOT YET DONE, may we please arrange to do it at a convenient time? (T5.3) YES <input type="checkbox"/> NO <input type="checkbox"/> Remarks (T5.4) *
YES, appointment being arranged, but not yet done	<input type="checkbox"/>	
NO and nothing heard yet	<input type="checkbox"/>	
NO, for other reasons	<input type="checkbox"/>	
(Please say why	(T5.2) *	

Qualifications if any obtained by the teenager's father and mother

6. What are the educational or occupational qualifications of the father and mother?

Fill in column A and column B and tick all that apply in each column.	A	B
	FATHER	MOTHER
Trade Apprenticeship, or other occupational training, (e.g. shorthand, typing, State Enrolled Nurse, etc.)	<input type="checkbox"/> (T6.1)	<input type="checkbox"/>
'O' Level or equivalent (e.g. Scottish Certificate of Education (SCE) 'O' grade, C.S.E., City and Guilds Intermediate Tech. Cert., Final Craft Cert. etc.)	<input type="checkbox"/> (T6.2)	<input type="checkbox"/>
'A' Level or equivalent (e.g. Scottish Certificate of Education (SCE) higher grade, OND, ONC, City and Guilds Final Tech. Cert.)	<input type="checkbox"/> (T6.3)	<input type="checkbox"/>
Nurse (SEN or State Registered Nurse)	<input type="checkbox"/> (T6.4)	<input type="checkbox"/>
Teacher (Certificate of Education or equivalent)	<input type="checkbox"/> (T6.5)	<input type="checkbox"/>
Holder of Degree, or Diploma, or Membership of Professional Institute (e.g. BSc, BEd, PhD, HND, HNC, FAC, FRICS, MIEE)	<input type="checkbox"/> (T6.6)	<input type="checkbox"/>
Other Qualification(s) (please specify (T6.8) *)	<input type="checkbox"/> (T6.7)	<input type="checkbox"/>
No qualification(s)	<input type="checkbox"/> (T6.9)	<input type="checkbox"/>
Qualification(s) not known	<input type="checkbox"/> (T6.10)	<input type="checkbox"/>

7. At what age did the teenager's father and mother finish full time education?

(a) Age father finished .. (T7.1) .. years
(b) Age mother finished .. (T7.2) .. years

8. Present employment situation of teenager's father and mother.

Fill in Column A and then Column B	Tick one box	Tick one box
	A FATHER	B MOTHER
<b>WORKING</b>	(T8.1)	(T8.2)
In a regular paid job or family business (even if temporarily absent from work for any reason, as long as there is a job to return to)	<input type="checkbox"/>	<input type="checkbox"/>
Works occasionally or on a casual basis only	<input type="checkbox"/>	<input type="checkbox"/>
Other employment situation (please specify (T8.3) *)	<input type="checkbox"/>	<input type="checkbox"/>
<b>NOT WORKING</b>		
Out of work but seeking work	<input type="checkbox"/>	<input type="checkbox"/>
Out of work because of sickness or injury but intending to seek work	<input type="checkbox"/>	<input type="checkbox"/>
Looks after home/family (e.g. housewife)	<input type="checkbox"/>	<input type="checkbox"/>
Permanently sick or injured, not intending to seek work	<input type="checkbox"/>	<input type="checkbox"/>
Full-time student	<input type="checkbox"/>	<input type="checkbox"/>
Retired	<input type="checkbox"/>	<input type="checkbox"/>
No father/mother figure	<input type="checkbox"/>	<input type="checkbox"/>

9. Number of weeks teenager's father and mother have been off work in past 12 months due to (A) Unemployment (B) Illness/Injury (if none, write 0)

	FATHER	MOTHER
	Write number	Write number
(T9.1.1) (A) Unemployment .. weeks	_____ weeks	_____ weeks (T9.2.1)
(T9.1.2) (B) Illness/Injury .. weeks	_____ weeks	_____ weeks (T9.2.2)

10. If teenager's father and mother not working now, how many years (months) since last employed regularly?

(T10.1)	FATHER	MOTHER (T10.2)
	Write number	Write number
	_____ yrs _____ mths	_____ yrs _____ mths

11. Present or most recent occupation of teenager's father and mother

Please give for teenager's father and mother the actual job/occupation, trade/profession followed (or most recent if out of current work). Then describe the type of industry worked in or type of service given. Please avoid vague terms such as 'mechanic', 'foreman' and use precise terms such as 'radio-mechanic', 'toolroom foreman'. If special name is used within trade or profession, please include this. (If in H.M. Forces, please give rank in addition to actual job or type of industry).

**FATHER (OR FATHER FIGURE)**

Actual job, occupation, trade or profession . . . . . (T11.5) \*

Type of industry, business or profession worked in . . . . . (T11.6) \*

(Give where necessary details of what is made, materials (T11.7) \*  
used or type of service given) . . . . . \_\_\_\_\_

**MOTHER (OR MOTHER FIGURE)**

Actual job, occupation, trade or profession . . . . . (T11.12) \*

Type of industry, business or profession worked in . . . . . (T11.13) \*

(Give where necessary details of what is made, . . . . . (VARIABLE ABSENT FROM ORIGINAL  
materials used or type of service given) . . . . . DATA FILE)

12. Employment status of teenager's father and mother

Please say whether employee or self-employed in present (or most recent) job.

	Tick one box only FATHER (T12.1)	Tick one box only MOTHER (T12.2)
<b>Employee -</b>		
not supervising others . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
not supervising others . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
as foreman, supervisor, chargehand . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
manager in establishments employing up to 24 persons . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
manager in establishments employing 25 or more persons . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
<b>Self-employed -</b>		
without employees other than family . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
with up to 24 employees . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
with 25 or more employees . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

13. Number of hours worked by teenager's father and mother

(T13.1) FATHER                      MOTHER (T13.2)

Please state how many hours worked during the last week worked . . .    \_\_\_\_\_ hrs                      \_\_\_\_\_ hrs

THE END

THANK YOU FOR YOUR HELP

Please give this completed form to your interviewer, or return to Youthscan using Freepost label provided.

CONTINUATION OF T2

Other subject(s) please specify:

7.	T2U1.1*	T2U1.2	T2U1.3	T2U2.1	T2U2.2
8.	T2V1.1*	T2V1.2	T2V1.3	T2V2.1	T2V2.2
9.	T2W1.1*	T2W1.2	T2W1.3	T2W2.1	T2W2.2
10.	T2X1.1*	T2X1.2	T2X1.3	T2X2.1	T2X2.2

T11 DERIVED VARIABLES

T11.1	Father's occupation unit group
T11.2	Father's social class
T11.3	Father's socio-economic group
T11.4	Father's industrial classification
T11.8	Mother's occupation unit group
T11.9	Mother's social class
T11.10	Mother's socio-economic group
T11.11	Mother's industrial classification