Changes and Adjustments Questionnaire

In this questionnaire we would like you to bring us up to date on what's been going on for your family since we visited you last year. Please take some time to think about what has happened in the past year before answering the questions. As before, the information you give us is strictly confidential.

A. PARENT'S WORK INFORMATION

1. Mother's work:

During the past year, on the average, about how much time per week did the mother in this family work or go to school? Please circle the answer that comes closest.

0 hours	Part-time 1-19 hrs.	part-time 20-34 hrs.	full-time 35-40 hrs.	more than 40 hrs. a week	no mother in the home
1	2	3	4	5	8

2. Father's work:

During the past year, on the average, about how much time per week did the father in this family work or go to school? Please circle the answer that comes closest.

0 hours	part-time 1-19 hrs.	part-time 20-34 hrs.	full-time 35-40 hrs.	more than 40 hrs. a week	no mother in the home
1	2	3	4	5	8

B. CHILD CARE ARRANGEMENTS

3. Who took care of _____ when he/she was not in school during the past year? Listed below are some possible caregivers. Please circle the number of hours which best describes the amount of time per week spent with this caregiver.

	occasionally or none	1-9 hr.	10-19 hr.	20-29 hr.	30 or more
a. mother	0	1	2	3	4
b. father	0	1	2	3	4
c. older brother or sister	0	1	2	3	4
d. relative who lives in the home	0	1	2	3	4
e. relative who comes to the home	0	1	2	3	4
f. babysitter who comes to the home	0	1	2	3	4
g. goes to relative's house	0	1	2	3	4

h. goes to babysitter's house	0	1	2	3	4
i. group daycare (summer)	0	1	2	3	4
j. after school daycare	0	1	2	3	4
k. goes to a neighbor	0	1	2	3	4

Use this space to tell us about any other child care arrangements not listed above and tell us how many hours per week are spent in this arrangement.

	occasionally or none	1-9 hr.	10-19 hr.	20-29 hr.	30 or more
l. _____	0	1	2	3	4
m. _____	0	1	2	3	4

4. How many times this past year did you have to make changes in who took care of your child?

no changes	1 change	2-3 changes	4-5 changes	6 or more changes
0	1	2	3	4

C. FAMILY CHANGES AND ADJUSTMENTS

5. What kind of changes and adjustments has your family had in the past year? Please circle yes (1) or no (0) for each item

		no	yes
a.	moved	0	1
b.	major repairs/remodeling to home	0	1
c.	severe and/or frequent illness for child	0	1
d.	accidents and/or injuries for child	0	1
e.	other medical problems for child	0	1
f.	medical problems for close family members	0	1
g.	death of close family member	0	1
h.	death of other important person	0	1
i.	divorce and/or separation for you and your husband/wife	0	1

j.	parent and child were separated (due to illness, divorce, work, etc.)	0	1
k.	money problems	0	1
l.	legal problems	0	1
m.	problems and conflicts with relatives	0	1
n.	birth of a baby	0	1
o.	problems at school for child	0	1
p.	problems at work for parents	0	1
q.	loss of a job	0	1
r.	remarriage or marital reconciliation	0	1

Please use this space (and the back of this page, if necessary) to tell us about any other changes or adjustments not listed above.

s. _____

t. _____

6. How hard were these changes and adjustments for your child?

no changes, or changes were helpful	not hard at all	a little hard	hard	very hard
1	2	3	4	5

7. How hard were these changes and adjustments for you and the rest of the family?

no changes, or changes were helpful	not hard at all	a little hard	hard	very hard
1	2	3	4	5

8. During the past year have you been able to get out and do things you want to do? (things you enjoy, either with or without the family)

no, not at all	a little, much less than desired	some, wanted more	almost as much as desired	whenever I want
1	2	3	4	5

9. Please tell us about the kind of help and support you have had from others in the past year. Please circle the number that best describes the support and help you received from each person.

	does not apply	hardly at all	some help	good help	great help
a. husband	8	1	2	3	4
b. wife	8	1	2	3	4
c. parents	8	1	2	3	4
d. in-laws	8	1	2	3	4
e. brother/sister	8	1	2	3	4
f. friends	8	1	2	3	4
g. neighbors	8	1	2	3	4
h. clergy or minister	8	1	2	3	4
i. older children	8	1	2	3	4
j. other relatives	8	1	2	3	4
k. social service agencies	8	1	2	3	4
l. counselor or therapist	8	1	2	3	4
m. your child's school	8	1	2	3	4

Please use this space to tell us about any other people who were helpful who were not listed above and tell us how helpful they were (1, 2, 3, or 4, as above).

n. _____	8	1	2	3	4
o. _____	8	1	2	3	4

D. YOUR CHILD'S BEHAVIOR

10. What kinds of misbehaviors has your child done in the past year? Please circle no (0), a little (1), or a lot (2).

	no	a little	a lot
a. breaks house rules (bedtime, chores, noise, etc.)	0	1	2
b. stubborn and defiant, talks back	0	1	2

c. temper tantrums	0	1	2
d. uses other people's belongings without permission, steals	0	1	2
e. destroys other people's belongings, household items, or own things	0	1	2
f. uses bad language, cusses	0	1	2
g. does something dangerous (like playing with matches or stove)	0	1	2
h. lies or keeps things from you	0	1	2
i. hurts or bothers animals	0	1	2
j. hits or bothers other children (including brothers and sisters)	0	1	2
k. hits or bothers adults	0	1	2

Use this space to tell us about any other misbehaviors not listed above.

l. _____	0	1	2
m. _____	0	1	2

11. During the past year what kinds of things have you done to correct your child's behavior? Please circle the number that best describes how often you have used the following methods.

	never	less than once a month	about once a month	about once a week	about every day
a. sent to room or stand in corner ("time-out")	0	1	2	3	4
b. deny privilege (TV, dessert, candy	0	1	2	3	4
c. tell child how or how not to behave	0	1	2	3	4
d. talk and explain reasons, discuss	0	1	2	3	4

e. yell or scold, raise voice	0	1	2	3	4
f. grab or shake	0	1	2	3	4
g. spank with hand	0	1	2	3	4
h. spank with object (switch or paddle)	0	1	2	3	4
i. get child to apologize; make amends	0	1	2	3	4
j. give child extra chores	0	1	2	3	4
k. threaten child with some punishment	0	1	2	3	4
l. shame or embarrass child	0	1	2	3	4
m. promise treat for good behavior	0	1	2	3	4

Use this space to tell us about other ways you correct your child's behavior that were not mentioned above.

n. _____	0	1	2	3	4
o. _____	0	1	2	3	4

12a. In the past year has anybody ever spanked or hit your child hard enough that he/she may have been hurt? Please circle your answer.

no	maybe	yes
0	1	2

12b. Who spanked or hit your child hard enough that he/she may have been hurt? Please circle all that apply.

Score 1=Mentioned 0=Not mentioned

a. no-one	f. other relative
b. yourself	g. babysitter
c. your husband/wife	h. teacher or school official
d. grandparent	i. other (please list)
e. brother or sister	_____

12c. If your child was spanked or hit hard, how badly was your child hurt? Please circle the answer that comes closest.

never was hurt	bruise or mark lasting less than 24 hrs.	bruise or mark lasting more than 24 hrs.
0	1	2

E. CONFLICTS

13. All husbands and wives have disagreements. What kind of disagreements has your child seen between you and your husband/wife in the last year? Please circle the number that applies.

	no partner	never	less than once a month	about once a month	about once a week	about every day
a. mild argument, no shouting	8	0	1	2	3	4
b. big argument, shouting	8	0	1	2	3	4
c. shouting and pushing	8	0	1	2	3	4
d. physical fight	8	0	1	2	3	4

14. During the past year what kinds of conflicts or disagreements has your child seen that took place between other family members, friends, or neighbors?

	never	less than once a month	about once a month	about once a week	about every day
a. mild argument, no shouting	0	1	2	3	4
b. big argument, shouting	0	1	2	3	4
c. shouting and pushing	0	1	2	3	4
d. physical fight	0	1	2	3	4

F. SCHOOL ADJUSTMENT

15. How did your child adjust to the social demands of school (did he or she get along with others, seem to make friends)? Please circle the description that comes closest.

a tough year, lots of difficulties with peers	improved over year, but still some problems	did fine in the end, but 1 or 2 rough spots	good times with peers; only minor problems, easily overcome	no problems, had good times from the start
1	2	3	4	5

16. How did your child adjust to the academic demands of school (did he or she do what the teacher asked, learn concepts, information and skills, etc.)? Please circle the description that comes closest.

lots of problems with school material, slow progress	some problems, but some progress--got by OK	did find in the end, but 1 or 2 rough spots at first	good progress across year	learned a lot—no problems—did very well
1	2	3	4	5

17. How much did your child like school in general? Please circle the description that comes closest.

really didn't like it at all	didn't like it much, but sometimes did	enjoyed it in the end, or liked it OK	enjoyed it overall--only few complaints	loved it from the start
1	2	3	4	5

18. What grade will your child enter in the fall? Please check the answer that comes the closest.

Score 1=Mentioned 0=Not mentioned

a. promoted from kindergarten to first grade……...
b. parents chose to have child repeat kindergarten……..
c. parents chose to have child enter T-1…….……..
d. school had child repeat kindergarten……....
e. school had child enter T-1…….
f. promoted from T-1 to first grade…….…..
g. promoted from first grade to second grade…….……..
h. parents chose to have child repeat T-1……..
i. parents chose to have child repeat first grade…….……..
j. school had child repeat T-1……...
k. school had child repeat first grade……..…..
l. decision about what grade to enter not yet made……..

19. If your child was not promoted (you checked either b, c, d, e, h, i, j, k), please tell us why this decision has been made. You can either check the choices provided, or write the reasons under "c" for other. Score 1=Mentioned 0=Not mentioned

a. problems with academic school material (didn't learn what he or she had to learn; problems paying attention…….

b. problems of social adjustment (didn't know how to get along with other children; behavior problems)……..…

c. other (please describe)…….

_____

_____

_____

20. Please tell us the name and address of the school your child will attend in the fall.

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21. Please use this space (and the back of this page, if necessary) to tell us anything else about this last year that you think is important.

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