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# BCS70 Age 34 Questionnaire about Children 6-16 years

**closer:sourceFileName**

bcs\_04\_pac\_16y

## Instrument Locations

- [https://discovery.closer.ac.uk/files/instruments/bcs\\_04\\_pac\\_16y-46f15f5755cc7b7e67c1065ddcdf725b.pdf](https://discovery.closer.ac.uk/files/instruments/bcs_04_pac_16y-46f15f5755cc7b7e67c1065ddcdf725b.pdf)

### bcs\_04\_pac\_16y

Label bcs_04_pac_16y	Location Sequence
Type Sequence	Order InOrderOfAppearance

### s\_intro\_i

Name s_intro_i	Location Sequence › bcs_04_pac_16y
Type Statement	

#### Statement Text

1970 British Cohort Study (BCS70) 2004 Survey

### s\_intro\_ii

Name s_intro_ii	Location Sequence › bcs_04_pac_16y
Type Statement	

#### Statement Text

Questionnaire about children aged 6 - 16 years

### s\_intro\_iii

Name s_intro_iii	Location Sequence › bcs_04_pac_16y
Type Statement	

**Statement Text**

Lilac questionnaire Confidential

s_intro_iv	
Name	s_intro_iv
Location	Sequence › bcs_04_pac_16y
Type	Statement

**Statement Text**

We would like you to answer a few questions about ... 's development and behaviour.

qg_1 - 1		
Name	qg_1	Location
	1	Sequence › bcs_04_pac_16y
Type	Question Grid	

**Question**

Please can you think back to how your child has been feeling over the past 6 months. For each of the following statements, please say whether it is not true of your child, somewhat true, or certainly true.

**Rows**

1	Considerate of other people's feelings
2	Restless, overactive and not able to sit still for long
3	Often complaining of headaches, stomach-aches or sickness
4	Sharing readily with other children (treats, toys, pencils etc.)
5	Has often had temper tantrums or hot tempers
6	Rather solitary, tending to play alone
7	Generally obedient, usually doing what adults requested
8	Many worries, often seeming worried
9	Helpful if someone was hurt, upset or feeling ill
10	Constantly fidgeting and squirming
11	Has had at least one good friend
12	Has often had fights with other children or bullies them
13	Often unhappy, downhearted or tearful

14	Generally liked by other children
15	Easily distracted, concentration wandered
16	Nervous or clingy in new situations, easily loses confidence
17	Kind to younger children
18	Often lied or cheated
19	Picked on or bullied by other children
20	Has often volunteered to help others (parents, teachers, other children)
21	Able to think things out before acting
22	Stole from home, school or elsewhere
23	Getting on better with adults than with other children
24	Many fears, easily scared
25	Has seen tasks through to the end, good attention span

**Columns**

	Code
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qi_2 - 2		
Name	Label	Location
qi_2	2	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

**Question**

Overall, do you think that your child has difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?

**Instructions**

Tick one box

**Choices**

1	Yes - minor difficulties
2	Yes - definite difficulties
3	Yes - severe difficulties
4	No

qi\_3 - 3

Name qi_3	Label 3	Location Sequence > bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style
Condition If Yes to question 2 Please go to question 3		

**Question**

How long have these difficulties been present?

**Instructions**

Tick one box

**Choices**

1	Less than a month
2	1 - 5 months
3	6 - 12 months
4	Over a year

? qi_4 - 4		
Name qi_4	Label 4	Location Sequence > bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style
Condition If Yes to question 2 Please go to question 3		

**Question**

Do these difficulties upset or distress your child?

**Instructions**

Tick one box

**Choices**

1	Not at all
2	Only a little
3	Quite a lot
4	A great deal

? qi_5_a - 5 a		
Name qi_5_a	Label 5 a	Location Sequence > bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition

If Yes to question 2 Please go to question 3

**Question**

Do these difficulties interfere with your child's everyday life in the following areas ... home life?

**Instructions**

Tick one box on each line

**Choices**

1	Not at all
2	Only a little
3	Quite a lot
4	A great deal

qi\_5\_b - 5 b

Name	Label	Location
qi_5_b	5 b	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Condition

If Yes to question 2 Please go to question 3

**Question**

Do these difficulties interfere with your child's everyday life in the following areas ... friendship?

**Instructions**

Tick one box on each line

**Choices**

1	Not at all
2	Only a little
3	Quite a lot
4	A great deal

qi\_5\_c - 5 c

Name	Label	Location
qi_5_c	5 c	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Condition

If Yes to question 2 Please go to question 3

**Question**

Do these difficulties interfere with your child's everyday life in the following areas ... .. classroom learning? (if your child is at school)

### Instructions

Tick one box on each line

### Choices

1	Not at all
2	Only a little
3	Quite a lot
4	A great deal

qi_5_d - 5 d		
Name	Label	Location
qi_5_d	5 d	Sequence › bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	
Condition		
If Yes to question 2 Please go to question 3		

### Question

Do these difficulties interfere with your child's everyday life in the following areas ... .. leisure activities?

### Instructions

Tick one box on each line

### Choices

1	Not at all
2	Only a little
3	Quite a lot
4	A great deal

qi_6 - 6		
Name	Label	Location
qi_6	6	Sequence › bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	
Condition		
If Yes to question 2 Please go to question 3		

### Question

Do these difficulties put a burden on you or the family as a whole?

### Instructions

Tick one box

**Choices**

1	Not at all
2	Only a little
3	Quite a lot
4	A great deal

qg_7 - 7		
Name	Label	Location
qg_7	7	Sequence > bcs_04_pac_16y
Type		
Question Grid		

**Question**

This section is about your relationship with your child. Please think about how far each of the statements currently applies to your relationship with your child.

**Rows**

1	I share an affectionate, warm relationship with my child
2	My child will seek comfort from me
3	My child is uncomfortable with physical affection or touch from me
4	My child values his or her relationship with me
5	My child spontaneously shares information about him or herself
6	My child easily becomes angry at me
7	It is easy to be in tune with what my child is feeling
8	My child remains angry or is resistant after being disciplined
9	Dealing with my child drains my energy
10	When my child wakes in a bad mood, I know we're in for a long and difficult day
11	My child's feelings towards me can be unpredictable or can change suddenly
12	My child is sneaky or manipulative with me
13	My child shares his or her feelings and experiences with me

**Columns**

	Code
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 qg\_8 - 8

Name	Label	Location
qg_8	8	Sequence › bcs_04_pac_16y
Type		
Question Grid		

### Question


Sometimes children are pretty well behaved and other times they are not. We are interested in what parents do when their children misbehave. Please think about how your child has been in the last three months.

### Rows

1	How often have you ignored your child?
2	How often have you shouted at your child?
3	How often have you sent your child to their bedroom, etc.?
4	How often have you had to take away TV privileges or other treats?
5	How often have you told your child off?
6	How often have you had to bribe your child (e.g. with sweets, or a treat)?
7	How often have you taken away your child's pocket money or allowance?
8	How often have you given your child a household task to do (e.g. clean their room or the bathroom, tidy the garden, mow the lawn)?
9	How often have you had to smack your child?

### Columns

	Code
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 qi\_9 - 9

Name	Label	Location
qi_9	9	Sequence › bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

### Question

Since starting school, has your child ever been off school for a continuous period of 1 month or more, other than for school holidays?

### Instructions

Tick one box

**Choices**

1	Yes
2	No

qi\_9\_i - 9 i

Name	Label	Location
qi_9_i	9 i	Sequence > bcs_04_pac_16y
Type	Low	High
Integer	0	

Condition

If Yes to question 9

**Question**

How many times has this happened? ... Times

s\_q9i

Name	Location
s_q9i	Sequence > bcs_04_pac_16y
Type	
Statement	

Condition

If Yes to question 9

**Statement Text**

Go to question 10

qi\_10 - 10

Name	Label	Location
qi_10	10	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Condition

If Yes to question 9

**Question**

Thinking about the (last) time your child was off school for 1 month or more, what was the reason for this absence?

**Instructions**

Tick one box

**Choices**

1	Ill health
2	Needed to help out at home or other family reason

3	Some other reason
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qi_11 - 11		
Name	Label	Location
qi_11	11	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

**Question**

Has your child ever been temporarily suspended or temporarily excluded from school for at least one day?

**Instructions**

Tick one box

**Choices**

1	Yes
2	No

qi_11_i - 11 i		
Name	Label	Location
qi_11_i	11 i	Sequence > bcs_04_pac_16y
Type	Low	High
Integer	0	
Condition		
If Yes to question 11		

**Question**

How many times has this happened? ... times

qi_12 - 12		
Name	Label	Location
qi_12	12	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

**Question**

Has your child ever been expelled or permanently excluded from school?

**Instructions**

Tick one box

**Choices**


1	Yes
2	No

 qi\_12\_i - 12 i

Name	Label	Location
qi_12_i	12 i	Sequence › bcs_04_pac_16y
Type	Low	High
Integer	0	
Condition		
If Yes to question 12		

**Question**

How many times has this happened? ... times

 qi\_13 - 13

Name	Label	Location
qi_13	13	Sequence › bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

**Question**

Have the police ever got in contact with you (or the child's other parent) about your child because he or she has done something against the law?

**Instructions**

Tick one box

**Choices**

1	Yes
2	No

 qi\_13\_i - 13 i

Name	Label	Location
qi_13_i	13 i	Sequence › bcs_04_pac_16y
Type	Low	High
Integer	0	
Condition		
If Yes to question 13		

**Question**

How many times has this happened? ... times

 qi\_14 - 14

Name	Label	Location
qi_14	14	Sequence › bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

**Question**

If your child is under the age of 10, tick this box / If your child is 10 or older, tick this box

**Choices**

1	If your child is under the age of 10, tick this box
2	If your child is 10 or older, tick this box

s_q15	
Name	Location
s_q15	Sequence › bcs_04_pac_16y
Type	
Statement	
Condition	If your child is under the age of 10, tick this box to question 14 Please go to question 15

**Statement Text**

The following question is about children younger than 10

qi_15 - 15		
Name	Label	Location
qi_15	15	Sequence › bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	
Condition	If your child is under the age of 10, tick this box to question 14 Please go to question 15	

**Question**

Approximately how often do you get the chance to read stories with or to your child?

**Instructions**

Tick one box

**Choices**

1	Every day
2	Several times a week
3	Several times a month
4	Several times a year
5	Never

s_q16	
Name	Location
s_q16	Sequence › bcs_04_pac_16y

Type Statement	
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**Statement Text**

The following questions are for everyone to answer

qi_16 - 16		
Name qi_16	Label 16	Location Sequence > bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style

**Question**

Approximately how many books does your child have (including books shared with brothers or sisters)?

**Instructions**

Tick one box

**Choices**

1	No books
2	1 - 2 books
3	3 - 9 books
4	10 - 19 books
5	20 - 49 books
6	50 plus

qi_17 - 17		
Name qi_17	Label 17	Location Sequence > bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style

**Question**

About how often would you say your child reads for enjoyment (not schoolwork)?

**Instructions**

Tick one box

**Choices**

1	Every day
2	Several times a week
3	Several times a month
4	Several times a year

5	Never
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qi_18 - 18		
Name	Label	Location
qi_18	18	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

**Question**

Does your child ever get any homework from school?

**Instructions**

Tick one box

**Choices**

1	Yes, my child regularly gets homework from school
2	Yes, my child sometimes gets homework from school
3	No homework is given by the school
4	My child does not go to school

qi_19 - 19		
Name	Label	Location
qi_19	19	Sequence > bcs_04_pac_16y
Type	Selection Type	Display Style
Multiple Choice	SelectOne	
Condition		
If Yes to question 18 Please go to question 19		

**Question**

Do you (or the child's other parent) help your child with his or her homework, even if it's only occasionally?

**Instructions**

Tick one box

**Choices**

1	No one helps
2	I usually help
3	Other parent usually helps
4	Both parents help equally

qi_20 - 20		
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Name qi_20	Label 20	Location Sequence › bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style
Condition If Yes to question 18 Please go to question 19		

**Question**


Do you (or the child's other parent) make sure that your child does his or her homework?

**Instructions**

Tick one box

**Choices**

1	Always
2	Sometimes
3	Occasionally
4	Never

 qi_21 - 21		
Name qi_21	Label 21	Location Sequence › bcs_04_pac_16y
Type Multiple Choice	Selection Type SelectOne	Display Style
Condition If Yes to question 18 Please go to question 19		

**Question**


Is there a computer at home your child can use to help with his or her homework?

**Instructions**

Tick one box

**Choices**

1	Yes
2	No, there's not a computer at home
3	No, there's a computer at home but not for my child to use

 s_outro_i	
Name s_outro_i	Location Sequence › bcs_04_pac_16y
Type Statement	



**Statement Text**

Thank you very much for taking the time to answer our questions. Please give the questionnaire to the interviewer or post it back in the envelope provided. All your answers will remain confidential. Please call Freephone if you have any queries.