1. **What is your relationship to [CHILD]? do not read categories**

🔾 Mother/Female Guardian 🔾 Stepmother/Girlfriend 🔾 Other Non-Relative

🔾 Father/Male Guardian 🔾 Stepfather/Boyfriend

🔾 Grandmother 🔾 Partner of Child’s Parent/Guardian

🔾 Grandfather 🔾 Other Relative (Aunt, Uncle)

Please think back to the **2020-21 school year** (LAST year), which was the first full school year during the pandemic. We’d like to ask you some questions about (INSERT CHILD’S NAME)’s experiences during that year.

1. Which of the following statements describe the schooling (INSERT CHILD’S NAME) received **during the 2020-21 school year**? For our purposes, if [CHILD’S NAME] was ever quarantined at home due to Covid and doing school work, we call that remote learning.
   * (CHILD’S NAME) was home schooled and did not enroll in a public school.
   * Only in-person classes all year (on site in the school).
   * Only remote learning classes all year (not in the school, e.g., at home).
   * Both in-person and remote learning classes.
     + More in-person than remote days
     + More remote than in-person days
     + Amount of in-person and remote was about the same.
2. Overall, do you feel that (INSERT CHILD’S NAME) learned more, less, or the same amount in **the 2020-21 school year** compared to prior years?
   * A lot more
   * Some more
   * About the same
   * Some less
   * A lot less
3. Do you feel that (INSERT CHILD’S NAME)’s connections with friends during **the 2020-21 school year** were better or worse than in prior school years?
   * A lot worse
   * Some worse
   * The same
   * Some better
   * A lot better
4. After the end of the normal school year in the **Summer of 2021**, did (INSERT CHILD’S NAME) do any of the following (please select all that apply):
   * Attended a traditional summer school program because of poor grades
   * Attended a summer school program to help students catch up with lost learning time during the pandemic
   * Attended school-led summer camps for subjects like math, science, or reading
   * Worked with private tutors to catch up with lost learning time during the pandemic
   * None of the Above

**Now please think about this school year (2021-22). We’d like to ask you some questions about your experiences during this year.**

1. Which of the following statements describe the schooling (INSERT CHILD’S NAME) is receiving **during the 2021-22 school year**? If [CHILD’s NAME] was ever quarantined at home and doing school work, we call that remote learning.
   * Home schooled and is not enrolled in a public school.
   * Only in-person classes all year (on site in the school).
   * Only remote learning classes all year (not in the school, e.g., at home).
   * Both in-person and remote learning classes.
2. Overall, do you feel that (INSERT CHILD’S NAME) is learning more, less, or the same amount **this** **school year** compared to last year?
   * A lot more
   * Some more
   * About the same
   * Some less
   * A lot less
3. Do you feel that (INSERT CHILD’S NAME)’s connections with friends during **this school year** are better or worse than last year?
   * A lot worse
   * Some worse
   * The same
   * Some better
   * A lot better
4. Are the classes (INSERT CHILD’S NAME) is taking **this school** **year** on track with their grade level?
   * All classes are on grade level
   * All classes are behind grade level
   * Some classes are on grade level, others are classes from last year
   * All classes are ahead of their grade level
   * Some classes are on grade level, others are ahead of their grade level
5. During **this** **school year**, how much catching up has (INSERT CHILD’S NAME) had to do with their schoolwork?
   * No catching up necessary
   * A little catching up
   * Some catching up
   * A lot of catching up
6. How many adults are in your household? \_\_\_\_
7. How many children are in your household? \_\_\_\_

11.a. How many children are younger than [INSERT CHILD’S NAME]?  \_\_\_\_

1. What impact has the COVID pandemic had on your family? (Check **ALL** that apply)
   * Family member lost his/her job.
   * Family member got a new job.
   * Income largely reduced.
   * Income largely increased.
   * Struggled to pay for basic needs such as housing, food, or healthcare.
   * You became closer to family members.
   * You lost a family member or close friend to Covid.
   * Had to make major changes in your living situation, e.g., moving to lower priced housing or have others move into your home.
   * Evicted and had to find other housing.
   * (INSERT CHILD’S NAME) became more independent.
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * None of the above.
2. Has a household family member had COVID?
   * Yes
   * No

**[PLANS FOR THE FUTURE]**

**Section A These questions are about** (**INSERT CHILD’S NAME)’s** **plans for the future – Mark all that apply.**

(To the interviewer: Last time we asked this question, the parent said their child was most likely to [last survey response].)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **AFTER HIGH SCHOOL, WHAT IS YOUR CHILD MOST LIKELY TO DO**   **If continue in school is answer, please ask the following:** | Continue in school | Get a job | Volunteer | Join the military | No Clear Plan |
| 1. a. Check the highest level of education you think your child will reach. | Trade school | Tech college | | Community college | 4 yr college |
|  | Master’s degree | PhD or MD | |  |  |
| **HOW SURE ARE YOU** |  |  | |  |  |
| 2 … that going to school will help (INSERT CHILD’S NAME) get ahead in life. | Not at all sure | Not really sure | | Mostly sure | Very sure |
| 1. … that going to school will make a difference in (INSERT CHILD’S NAME) life as an adult. | Not at all sure | Not really sure | | Mostly sure | Very sure |
| 1. … about the work opportunities (INSERT CHILD’S NAME) will have as an adult. | Not at all sure | Not really sure | | Mostly sure | Very sure |
| 1. …that(INSERT CHILD’S NAME) will have an easy time **finding** a **good** job as an adult. | Not at all sure | Not really sure | | Mostly sure | Very sure |
| 1. … that , once he/she has a job, it will be easy for (INSERT CHILD’S NAME) to **keep** the job as an adult. | Not at all sure | Not really sure | | Mostly sure | Very sure |
| 1. … that studying for school will help (INSERT CHILD’S NAME) get ahead as an adult. | Not at all sure | Not really sure | | Mostly sure | Very sure |

2. [If plans have changed] Last time we asked this question, you said (INSERT CHILD’S NAME) was most likely to [last survey response]. What caused you to change your mind?

**[BIG 5 CONSCIENTIOUSNESS ITEMS with original anchors]**

**Section B The next questions are about (INSERT CHILD’S NAME)’s** **behavior. Your answer choices are changing.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. (INSERT CHILD’S NAME) does things carefully and completely. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) can be somewhat careless | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) is a reliable worker. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) tends to be disorganized. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) tends to be lazy. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) keeps working until things are done. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) does things efficiently (quickly and correctly). | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) makes plans and sticks to them. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) is a hard worker. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |
| 1. (INSERT CHILD’S NAME) is easily distracted; has trouble paying attention. | Disagree Strongly | Disagree a little | Neither agree nor disagree | Agree a little | Agree strongly |

Interviewer: You can use the pronoun he or she instead of repeating the child’s name if it seems more comfortable.

**[PARENT INVOLVEMENT IN SCHOOL]**

**Section C Please indicate how often you do the following: Explain that the anchors are changing. Review new anchors.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. (INSERT CHILD’S NAME) is assigned homework. | Never | Sometimes | Often | Always |
| 2. Do you check (INSERT CHILD’S NAME)’s homework? N/A | Never | Sometimes | Often | Always |
| 3. Do you ask (INSERT CHILD’S NAME) what he/she did at school? | Never | Sometimes | Often | Always |
| 4. (INSERT CHILD’S NAME) brings home graded papers. | Never | Sometimes | Often | Always |
| 5. Do you go over graded papers with (INSERT CHILD’S NAME)? | Never | Sometimes | Often | Always |
| 6. Do you talk to (INSERT CHILD’S NAME) about his/her homework? N/A | Never | Sometimes | Often | Always |
| 7. Do you talk with (INSERT CHILD’S NAME) about how she/he behaves at school? | Never | Sometimes | Often | Always |
| 8. Do you talk with (INSERT CHILD’S NAME) about doing his/her best at school? | Never | Sometimes | Often | Always |
| 9. Do you contact parents of (INSERT CHILD’S NAME)’s friends? | Never | Sometimes | Often | Always |
| 10. Do you know what (INSERT CHILD’S NAME) is doing during his/her free time? | Never | Sometimes | Often | Always |
| 11. Do you know who (INSERT CHILD’S NAME) hangs out with during his/her free time? | Never | Sometimes | Often | Always |
| 12. Do you know if (INSERT CHILD’S NAME) does something you don’t approve of outside the home? | Never | Sometimes | Often | Always |
| 13. Do you know how (INSERT CHILD’S NAME) does in different subjects in school? | Never | Sometimes | Often | Always |
| 14. Do you know where (INSERT CHILD’S NAME) goes and what he/she does after school? | Never | Sometimes | Often | Always |
| 15. Do you know what (INSERT CHILD’S NAME) is doing when he/she is away from home? | Never | Sometimes | Often | Always |
| 16. How often have you found out that (INSERT CHILD’S NAME) keeps secrets from you about what he/she does during his/her free time? | Never | Sometimes | Often | Always |

**[PARENT REPORT OF CHILD’S FRIEND’S DELINQUENCY – ADAPTED FROM CDC MEASURE]**

**Section D These next questions are about (INSERT CHILD’S NAME’s) friends, please select Yes or No.**

|  |  |  |
| --- | --- | --- |
| **During this school year, have any of (INSERT CHILD’S NAME’s) friends ….** | | |
| 1. Stolen something from another student? | No | Yes |
| 1. Snuck into someplace without paying such as movies, onto a bus? | No | Yes |
| 1. Skipped school or a class? | No | Yes |
| 1. Cheated on a test? | No | Yes |
| 1. Taken something from a store without paying for it? | No | Yes |
| 1. Written things or spray painted walls, sidewalks or cars where they were not supposed to? | No | Yes |
| 1. Damaged school or other property that didn't belong to them? | No | Yes |
| 1. Taken a motor vehicle not belonging to them for a ride without the owner's permission? | No | Yes |
| 1. Hit someone with the intent of really hurting that person? | No | Yes |
| 1. Attacked someone with a weapon or other thing to really hurt that person? | No | Yes |
| 1. Had alcohol to drink? | No | Yes |
| 1. Smoked a cigarette or vaped? | No | Yes |
| 1. Used drugs? | No | Yes |
| 1. Been in a gang fight? | No | Yes |

**[PARENT REPORT OF CHILD DELINQUENCY – ADAPTED FROM CDC MEASURE]**

**Section E The next questions are about your child.**

|  |  |  |
| --- | --- | --- |
| **During this school year, has (INSERT CHILD’S NAME) ….** | | |
| 1. Stolen something from another student? | No | Yes |
| 1. Snuck into someplace without paying such as movies, onto a bus? | No | Yes |
| 1. Skipped school or a class? | No | Yes |
| 1. Cheated on a test? | No | Yes |
| 1. Taken something from a store without paying for it? | No | Yes |
| 1. Written things or spray painted walls, sidewalks or cars where they were not supposed to? | No | Yes |
| 1. Damaged school or other property that didn't belong to him or her? | No | Yes |
| 1. Taken a motor vehicle not belonging to him/her for a ride without the owner's permission? | No | Yes |
| 1. Hit someone with the intent of really hurting that person? | No | Yes |
| 1. Attacked someone with a weapon or other thing to really hurt that person? | No | Yes |
| 1. Had alcohol to drink? | No | Yes |
| 1. Smoked a cigarette or vaped? | No | Yes |
| 1. Used drugs? | No | Yes |
| 1. Been in a gang fight? | No | Yes |

[**STRENGTHS AND DIFFICULTIES QUESTIONNAIRE]** **Section F These next questions are about your child.**

|  |  |  |  |
| --- | --- | --- | --- |
| *For each item, please circle Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain. Please give your answers on the basis of how things have been for you over the last six months.* | | | |
| 1. Considerate of other people's feelings | Not True | Somewhat True | Certainly True |
| 1. Restless, overactive, cannot stay still for long | Not True | Somewhat True | Certainly True |
| 1. Often complains of headaches, stomach-aches or sickness | Not True | Somewhat True | Certainly True |
| 1. Shares readily with peers, for example books, games, pencils | Not True | Somewhat True | Certainly True |
| 1. Often loses temper | Not True | Somewhat True | Certainly True |
| 1. Would rather be alone than with peers | Not True | Somewhat True | Certainly True |
| 1. Generally well behaved, usually does what adults request | Not True | Somewhat True | Certainly True |
| 1. Many worries or often seems worried | Not True | Somewhat True | Certainly True |
| 1. Helpful if someone is hurt, upset or feeling ill | Not True | Somewhat True | Certainly True |
| 1. Constantly fidgeting or squirming | Not True | Somewhat True | Certainly True |
| 1. Has at least one good friend | Not True | Somewhat True | Certainly True |
| 1. Often fights with other youth or bullies them | Not True | Somewhat True | Certainly True |
| 1. Often unhappy, depressed or tearful | Not True | Somewhat True | Certainly True |
| 1. Generally liked by peers | Not True | Somewhat True | Certainly True |
| 1. Easily distracted, concentration wanders | Not True | Somewhat True | Certainly True |
| 1. Nervous in new situations, easily loses confidence | Not True | Somewhat True | Certainly True |
| 1. Kind to younger children | Not True | Somewhat True | Certainly True |
| 1. Often lies or cheats | Not True | Somewhat True | Certainly True |
| 1. Picked on or bullied by peers | Not True | Somewhat True | Certainly True |
| 1. Often offers to help others (parents, teachers, children) | Not True | Somewhat True | Certainly True |
| 1. Thinks things out before acting | Not True | Somewhat True | Certainly True |
| 1. Steals from home, school or elsewhere | Not True | Somewhat True | Certainly True |
| 1. Gets along better with adults than with peers | Not True | Somewhat True | Certainly True |
| 1. Many fears, easily scared | Not True | Somewhat True | Certainly True |
| 1. Good attention span, sees work through to the end | Not True | Somewhat True | Certainly True |

**What is the best thing that happened to (INSERT CHILD’S NAME) during this past year?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_