

1 Year, 9 Months Child Health Examination Questionnaire (2)

The items within this form are standardized questions used in health examinations nationwide.

<u>1.</u> Does the mother currently smoke? (Including e-cigarettes and heated tobacco products)	1 No 2 Yes (___ cigarettes per day)																		
<u>2.</u> Does the father (or partner) currently smoke? (Including e-cigarettes and heated tobacco products)	1 No 2 Yes (___ cigarettes per day)																		
<u>3.</u> Is the bathroom door child-proofed (e.g., equipped with a latch or device) to prevent the child from opening it alone?	1 Yes 2 No 3 Not applicable																		
<u>4.</u> Do you have time to relax and enjoy being with your child?	1 Yes 2 No 3 Not sure																		
<u>5.</u> Are you aware that most children between 18 and 24 months old will point at things to communicate interest?	1 Yes 2 No																		
<u>6.</u> Do you ever feel that your child is difficult to raise?	1 No 2 Sometimes 3 Always																		
<u>7.</u> For those who answered "Always" or "Sometimes" to Question 6: Do you know of any methods or resources to help manage these difficulties?	1 Yes 2 No																		
<u>8.</u> Do the mother and father (or partner) cooperate in housework and childcare?	1 Very cooperative 2 Sometimes cooperative 3 Rarely 4 Not sure																		
<u>9.</u> In the past few months, have any of the following occurred in your home? (Multiple responses allowed)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">1 Overly harsh discipline</td> <td style="width: 10%; padding: 2px;">1</td> <td rowspan="7" style="width: 30%; text-align: center; vertical-align: middle; padding: 5px;">Please circle all that apply</td> </tr> <tr> <td style="padding: 2px;">2 Hit the child emotionally/in anger</td> <td style="padding: 2px;">2</td> </tr> <tr> <td style="padding: 2px;">3 Left the infant or young child home alone</td> <td style="padding: 2px;">3</td> </tr> <tr> <td style="padding: 2px;">4 Did not provide meals for a long period of time</td> <td style="padding: 2px;">4</td> </tr> <tr> <td style="padding: 2px;">5 Shouted or yelled at the child emotionally</td> <td style="padding: 2px;">5</td> </tr> <tr> <td style="padding: 2px;">6 Covered the child's mouth</td> <td style="padding: 2px;">6</td> </tr> <tr> <td style="padding: 2px;">7 Shook the child violently</td> <td style="padding: 2px;">7</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">8</td> <td style="padding: 2px;">None of the above apply</td> </tr> </table>	1 Overly harsh discipline	1	Please circle all that apply	2 Hit the child emotionally/in anger	2	3 Left the infant or young child home alone	3	4 Did not provide meals for a long period of time	4	5 Shouted or yelled at the child emotionally	5	6 Covered the child's mouth	6	7 Shook the child violently	7		8	None of the above apply
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<u>10.</u> Are you aware of the local community playgroups or childcare support centers?	1 Yes 2 No																		
<u>11.</u> How do you feel about your current overall financial situation?	1 Very comfortable 2 Somewhat comfortable 3 Average 4 Somewhat difficult 5 Very difficult																		
<u>12.</u> Do you wish to continue raising your child in this area?	1 Yes 2 Somewhat yes 3 Not particularly 4 No																		
Please use the space below to write down any other concerns or topics you would like to discuss.																			