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TELETHON INSTITUTE FOR CHILD HEALTH RESEARCH

**WESTERN AUSTRALIAN
PREGNANCY COHORT (RAINE) STUDY**

Part A: School Administration/Teacher's Study Child Questionnaire

School details:

Name of School: _____

Name of Principal: _____

Contact person for any follow-up information that may be needed:

Contact Details

Tel. _____ Email _____

Student details:

Name of student: _____

Date of birth ____/____/____

School Code

Year of student _____

Office Use

Date of Completion ____/____/____

Please fill in the spaces provided or circle the option that is most appropriate.

Q1. What is the length of this student's current enrolment in your school?

Years

and Terms

Q2. Which best describes this student?

0 Day student Go to Q4

1 Boarding at this school

2 Boarding at an associated hostel

3 Other *please specify*

Q3. Is the boarding facility co-educational?

0 No

1 Yes

Q4. Has this child ever repeated a year/grade in this school?

0 No Go to Q6

1 Yes



Q5. Which year/grade was repeated?

year/grade

Q6. Has this student received an out of school suspension from this school during this school year?

0 No Go to Q9

1 Yes



Q7. On how many occasions?

Q8. For a total of how many days?

Q9. Is this student currently receiving support or assistance for:

a. the gifted and talented?

T13 SFD5

0 No

1 Yes

b. a learning difficulty?

T13 SFD7

0 No

1 Yes

c. an emotional or behavioural disturbance?

T13 SFD4

0 No

1 Yes

Q10. Does this student require speech therapy services?

T13 SP50

0 No

1 Yes

2 Don't know

Q11. Is this student being seen by a speech therapist?

T13 SP51

0 No

1 Yes

2 Don't know

Q12. Does this student have a visual, hearing, intellectual, physical or other disability?

0 No **STOP HERE**

1 Yes Go to Q13

T13 CH19



Please forward this form to the teacher you deem is best able to complete the information required in the second part of the questionnaire. This person will need to have some knowledge of the study child's academic progress, truancy (if applicable) and behavioural patterns.

Q13. Does this student need support because of any of the following disabilities or other special needs: *(Please tick the appropriate boxes)*

	Is support needed?		Is support available?		Is support being used?		
	No	Yes	No	Yes	No	Yes	
T13_SU1 a. visual impairment?	<input type="checkbox"/>	<input checked="" type="checkbox"/> A <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> B <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> C <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
T13_SU2 b. deaf or hard of hearing?	<input type="checkbox"/>	<input checked="" type="checkbox"/> A <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> B <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> C <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
T13_S3 c. intellectual disability?	<input type="checkbox"/>	<input checked="" type="checkbox"/> A <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> B <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> C <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
T13_SU4 d. physical disability?	<input type="checkbox"/>	<input checked="" type="checkbox"/> A <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> B <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> C <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
T13_SU5 e. other special need? (please specify)	<input type="checkbox"/>	<input checked="" type="checkbox"/> A <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> B <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> C <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Q14. What level of support do you think is required to address these needs?

(Please tick all boxes that apply)

	None required	Support delivered by teachers	Use of services in the school (student services)	Special services (Teachers aides, visiting health services)	Special therapy focused school
T13_SU1 a. visual impairment?	<input type="checkbox"/> D	<input type="checkbox"/> F	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
T13_SU2 b. deaf or hard of hearing?	<input type="checkbox"/> D	<input type="checkbox"/> F	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
T13_S3 c. intellectual disability?	<input type="checkbox"/> D	<input type="checkbox"/> F	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
T13_SU4 d. physical disability?	<input type="checkbox"/> D	<input type="checkbox"/> F	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
T13_SU5 e. other special needs? (please specify)	<input type="checkbox"/> D	<input type="checkbox"/> F	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H

Q15. In your opinion, how would you describe the support actually provided to address this student's level of disability? *(Please circle the appropriate answer)* T13_SU6

Not appropriate

Most appropriate

0 1 2 3 4 5 6

Please forward form to appropriate teacher for completion of Part B

Thank you for your co-operation

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TELETHON INSTITUTE FOR CHILD HEALTH RESEARCH

**WESTERN AUSTRALIAN
PREGNANCY COHORT (RAINE) STUDY**

Part B: Classroom Teacher's Questionnaire

Thankyou for taking the time to complete this questionnaire. The purpose of this questionnaire is to obtain information about the study child in a number of areas: the child's behaviour, academic/scholastic performance, social compatibility, and physical and psychosocial features.

This questionnaire is broken into a series of sections.

- The first of these (pgs 1-2) looks at the study child's academic performance and addresses any difficulties they may experience during the course of their schooling. It may be necessary to source input from more than one staff member in addressing these items.
- Pages 3-6 encompass a series of inventories that look at the study child's behaviour and social compatibility. The 'Child Behaviour Checklist' and 'Teachers Rating Scale' must be completed by the teacher who knows that child best. If that person does not have enough information to make a judgement on a given item, it should be left blank.

If you are uncomfortable about a question or unsure of an answer relating to any part of this form, leave it blank or feel free to contact a member of the Raine Study staff at 9489 7793, 9489 7794 or 9489 7796.

Office Use

Date of Completion

____/____/____

T13 DNWN

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Section 1

The following questions concern this student. Please fill in the spaces provided or circle the option that is most appropriate.

Q16. Compared to all students of the same age how would you describe this student's overall academic performance?

T13_PF1

- 0 Far below average
 1 Somewhat below average
 2 At age level
 3 Somewhat above average
 4 Far above average
 5 Don't know

Q17. Compared to all students of the same age how would you describe this student's academic performance in:

- a. literacy
- 0 Far below average
 1 Somewhat below average
 2 At age level
 3 Somewhat above average
 4 Far above average
 5 Don't know

T13_PF2

- b. numeracy
- 0 Far below average
 1 Somewhat below average
 2 At age level
 3 Somewhat above average
 4 Far above average
 5 Don't know

T13_PF3

Q18. So far this school year, how many half days has this student been absent?

Possible half days of attendance

T13_ABS1

Total half days absent

T13_ABS2

Q19. Of the total absences above (Q18) how many of these half days were:

a. explained with a reasonable cause

T13_ABS3

b. unexplained

T13_ABS4

Q20. So far this school year how often has this student been removed from formal instruction (but not from the school) owing to his or her behaviour?

- 0 Never
 1 Rarely
 2 Occasionally
 3 Frequently

T13_REMV

Q21. How much time does this child usually spend using a computer at school each week?

- 0 None
 1 Less than 3 hours a week
 2 Up to 1 hour a day (3 to 6 hrs a week)
 3 Between 1 and 2 hours a day (7 to 13 hrs a week)
 4 Between 2 and 3 hours a day (14 to 21 hrs a week)

T13_AC4C

5 More than 3 hours a day (more than 21 hrs a week)

1

Q22. Overall, do you think that this child has difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?

- 0 No Go to Q27
 1 Yes – minor difficulties
 2 Yes – moderate difficulties
 3 Yes – severe difficulties

T13_DIF1

Q23. How long has this child had the difficulties?

- 0 Less than one month
 1 1 to 5 months
 2 6 to 12 months
 3 Over one year
 4 Not sure

T13_DIF2

Q24. Do the difficulties upset or distress the child?

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

T13_DIF3

Q25. Do the difficulties interfere with the child's everyday life in the following areas:

a. peer relations?

T13_DIF4

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

b. classroom learning?

T13_DIF5

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

Q26. Do the difficulties put a burden on you or the class as a whole?

a. on you?

T13_DIF6

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

b. on the class as a whole?

T13_DIF7

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

Behaviour Checklist

This takes about 7 - 10 minutes to complete. The student should not be present when you complete this section.

Q27. Below is a list of items that describes students. For each item that describes the student **now or within the past 2 months**, please circle the **2** if the item is **very true** or **often true** of the student. Circle item **1** if the item is **somewhat** or **sometimes true** of the student. If the item is **not true** of the student, circle the **0**. Please answer all items as well as you can, even if some do not seem to apply to this student.

0=not true (as far as you know) 1=somewhat or sometimes true 2=very true or often true

T13_C		0	1	2
	1. Acts too young for his/her age			2
	2. Hums or makes other odd noises in class			1 2
	3. Argues a lot			1 2
	4. Fails to finish things he/she starts			1 2
	5. Behaves like opposite sex			1 2
	6. Defiant, talks back to staff			1 2
	7. Bragging, boasting			1 2
	8. Can't concentrate, can't pay attention for long			5
	9. Can't get his/her mind off certain thoughts; obsessions			1 2
	10. Can't sit still, restless or hyperactive			6
	11. Clings to adults or too dependent			1 2
	12. Complains of loneliness			1 2
	13. Confused or seems to be in a fog			1 2
	14. Cries a lot			1 2
	15. Fidgets			1 2
	16. Cruelty, bullying, or meanness to others			1 2
	17. Day-dreams or gets lost in his /her thoughts			1 2
	18. Deliberately harms self or attempts suicide			1 2
	19. Demands a lot of attention			9 6
	20. Destroys his/her own things			1 2
	21. Destroys property belonging to others			1 2
	22. Difficulty following directions			1 2
	23. Disobedient at school			1 2
	24. Disturbs other pupils			1 2
	25. Doesn't get along with other pupils			2 5
	26. Doesn't seem to feel guilty after misbehaving			2 7
	27. Easily jealous			3 0
	28. Eats or drinks things that are not food Don't include sweets			3 1
	29. Fears certain animals, situations, or places other than school			3 2
	30. Fears going to school			1 1 6
	31. Fears he/she might think or do something bad			1 1 7
	32. Feels he/she has to be perfect			1 1 8
	33. Feels or complains that no one loves him/her			1 1 9

0=not true (as far as you know) 1=somewhat or sometimes true 2=very true or often true

		0	1	2
T13_C	34. Feels others are out to get him/her	120		
	35. Feels worthless or inferior	121		
	36. Gets hurt a lot, accident prone	34		
	37. Gets in many fights	35		
	38. Gets teased a lot	122		
	39. Hangs around with others who get in trouble	123		
	40. Hears sounds or voices that aren't there	124		
	41. Impulsive or acts without thinking	125		
	42. Would rather be alone than with others	126		
	43. Lying or cheating	127		
	44. Bites fingernails	128		
	45. Nervous, high-strung or tense	47		
	46. Nervous movements or twitching	46		
	47. Over conforms to rules	167		
	48. Not liked by other pupils	129		
	49. Has difficulty learning	168		
	50. Too fearful or anxious	87		
	51. Feels dizzy	130		
	52. Feels too guilty	131		
	53. Talks out of turn	169		
	54. Overtired	50		
	55. Overweight	51		
	56. Physical problems without known medical cause:			
	a. Aches or pains (not headaches)	1		
	b. Headaches	39		
	c. Nausea, feels sick	45		
	d. Problems with eyes	57		
	e. Rashes or other skin problems	60		
	f. Stomachaches or cramps	78		
	g. Vomiting, throwing up	93		
	h. Other (describe):	101		
	57. Physically attacks people	53		
	58. Picks nose, skin, or other parts of body	54		
	59. Sleeps in class	170		
	60. Apathetic or unmotivated	171		
	61. Poor school work	133		
	62. Poorly coordinated or clumsy	56		
	63. Prefers being with older children or youths	134		
	64. Prefers being with younger children	135		
	65. Refuses to talk	136		
	66. Repeats certain acts over and over; compulsions	137		
	67. Disrupts class discipline	172		
	68. Screams a lot	66		
	69. Secretive, keeps things to self	138		
	70. Sees things that aren't there	139		

0=not true (as far as you know) 1=somewhat or sometimes true 2=very true or often true

T13_C

Item	0	1	2
71. Self-conscious or easily embarrassed	68	0	1 2
72. Messy work	173	0	1 2
73. Behaves irresponsibly	174	0	1 2
74. Showing off or clowning	142	0	1 2
75. Shy or timid	73	0	1 2
76. Explosive and unpredictable behaviour	175	0	1 2
77. Demands must be met immediately; easily frustrated	29	0	1 2
78. Inattentive, easily distracted	176	0	1 2
79. Speech problem	76	0	1 2
80. Stares blankly	77	0	1 2
81. Feels hurt when criticized	33	0	1 2
82. Steals	145	0	1 2
83. Stores up things he/she doesn't need	79	0	1 2
84. Strange behaviour	80	0	1 2
85. Strange ideas	146	0	1 2
86. Stubborn, sullen, or irritable	81	0	1 2
87. Sudden changes in mood or feelings	82	0	1 2
88. Sulks a lot	83	0	1 2
89. Suspicious	147	0	1 2
90. Swearing or obscene language	148	0	1 2
91. Talks about killing self	149	0	1 2
92. Underachieving, not working up to potential	177	0	1 2
93. Talks too much	150	0	1 2
94. Teases a lot	151	0	1 2
95. Temper tantrums or hot temper	85	0	1 2
96. Seems preoccupied with sex	152	0	1 2
97. Threatens people	153	0	1 2
98. Tardy to school or class	178	0	1 2
99. Too concerned with neatness or cleanliness	86	0	1 2
100. Fails to carry out assigned tasks	179	0	1 2
101. Truancy or unexplained absence	184	0	1 2
102. Under active, slow moving, or lacks energy	89	0	1 2
103. Unhappy, sad or depressed	90	0	1 2
104. Unusually loud	91	0	1 2
105. Uses alcohol or drugs for non-medical purposes	156	0	1 2
106. Overly anxious to please	180	0	1 2
107. Dislikes school	181	0	1 2
108. Is afraid of making mistakes	182	0	1 2
109. Whining	97	0	1 2
110. Unclean personal appearance	183	0	1 2
111. Withdrawn, doesn't get involved with others	98	0	1 2
112. Worries	99	0	1 2

Q28. Teachers Rating Scale Of The Students Actual Behaviour

For this student, please indicate what you feel he/she is actually like, in your opinion. First decide whether you feel the individual is more like the teenager described on the left or right side of each statement. Then, for that side only, indicate whether the statement is **really true**, or just **sort of true**, for that individual. (If you feel that you do not have enough information to make a judgment on a given question, then just leave that item blank.

	Really True	Sort of True	T13_HP		Sort of True	Really True					
i	<input type="checkbox"/>	<input type="checkbox"/>		37	<input type="checkbox"/>		This individual is intelligent	BUT	This individual is not that intelligent	<input type="checkbox"/>	<input type="checkbox"/>
ii	<input type="checkbox"/>	<input type="checkbox"/>		11	<input type="checkbox"/>		This individual does not have a lot of friends	BUT	This individual does have a lot of friends	<input type="checkbox"/>	<input type="checkbox"/>
iii	<input type="checkbox"/>	<input type="checkbox"/>		3	<input type="checkbox"/>		This individual is good at sports	BUT	This individual is not that good at sports	<input type="checkbox"/>	<input type="checkbox"/>
iv	<input type="checkbox"/>	<input type="checkbox"/>		22	<input type="checkbox"/>		This individual has a nice physical appearance	BUT	This individual does not have such a nice physical appearance	<input type="checkbox"/>	<input type="checkbox"/>
v	<input type="checkbox"/>	<input type="checkbox"/>		32	<input type="checkbox"/>		This individual doesn't do that well at paying jobs	BUT	This individual does do well at paying jobs	<input type="checkbox"/>	<input type="checkbox"/>
vi	<input type="checkbox"/>	<input type="checkbox"/>		6	<input type="checkbox"/>		This individual is liked by those he/she is romantically interested in	BUT	This individual is not that well liked by those he/she is interested in	<input type="checkbox"/>	<input type="checkbox"/>
vii	<input type="checkbox"/>	<input type="checkbox"/>		7	<input type="checkbox"/>		This individual often doesn't do the right thing	BUT	This individual usually does do the right thing	<input type="checkbox"/>	<input type="checkbox"/>
viii	<input type="checkbox"/>	<input type="checkbox"/>		8	<input type="checkbox"/>		This individual is able to make close friends	BUT	This individual finds it hard to make really close friends	<input type="checkbox"/>	<input type="checkbox"/>
ix	<input type="checkbox"/>	<input type="checkbox"/>		19	<input type="checkbox"/>		This individual does well at schoolwork	BUT	This individual doesn't do that well at schoolwork	<input type="checkbox"/>	<input type="checkbox"/>
x	<input type="checkbox"/>	<input type="checkbox"/>		29	<input type="checkbox"/>		This individual is popular	BUT	This individual is not that popular	<input type="checkbox"/>	<input type="checkbox"/>
xi	<input type="checkbox"/>	<input type="checkbox"/>		39	<input type="checkbox"/>		This individual is not that athletic	BUT	This individual is athletic	<input type="checkbox"/>	<input type="checkbox"/>
xii	<input type="checkbox"/>	<input type="checkbox"/>		31	<input type="checkbox"/>		This individual is good looking	BUT	This individual is not that good looking	<input type="checkbox"/>	<input type="checkbox"/>
xiii	<input type="checkbox"/>	<input type="checkbox"/>		41	<input type="checkbox"/>		This individual does his/her best on paying jobs	BUT	This individual does not always do his/her best on paying jobs	<input type="checkbox"/>	<input type="checkbox"/>
xiv	<input type="checkbox"/>	<input type="checkbox"/>		15	<input type="checkbox"/>		This individual is not dating someone he/she is romantically interested in	BUT	This individual is dating someone he/she is romantically interested in	<input type="checkbox"/>	<input type="checkbox"/>
xv	<input type="checkbox"/>	<input type="checkbox"/>		43	<input type="checkbox"/>		This individual usually acts the way he/she is supposed to	BUT	This individual often doesn't act the way he/she is supposed to	<input type="checkbox"/>	<input type="checkbox"/>
xvi	<input type="checkbox"/>	<input type="checkbox"/>		35	<input type="checkbox"/>		This individual doesn't have a close friend he/she can really trust	BUT	This individual does have a close friend he/she can really trust	<input type="checkbox"/>	<input type="checkbox"/>

Please return form to your point of contact in administration

Thank you for your co-operation