

Study Number (SN)	0057-00
Title	Early Childhood Care and Education collection: Evaluation of the Early Years Programme of the Childhood Development Initiative (ECCE), 2008 – 2011
Depositor	Tallaght West Childhood Development Initiative
Publisher	Irish Social Science Data Archive (ISSDA)
URL	<a href="http://www.issda.ie/ecce">www.issda.ie/ecce</a>
Publication Date	2017
Version	1
Type	Dataset
Suggested citation	Tallaght West Childhood Development Initiative. (2017). <i>Early Childhood Care and Education collection: Evaluation of the Early Years Programme of the Childhood Development Initiative (ECCE), 2008 – 2011</i> . [data collection]. Version 1. Irish Social Science Data Archive. SN: 0057-00. <a href="http://www.issda.ie/ecce">www.issda.ie/ecce</a>

Survey documents (parent interviews only) for the evaluation of the Early Childhood Care and Education (ECCE) at Tallaght West Childhood Development Initiative, by Centre for Social and Educational Research, Dublin Institute of Technology and Institute of Education, University of London, 2013

**THIS VERSION OF THE SURVEY HAS BEEN PREPARED FOR THE ARCHIVE BY THE CHILDREN'S RESEARCH NETWORK PREVENTION AND EARLY INTERVENTION RESEARCH INITIATIVE (2017). SOME OF THE CONTENT OF THIS SURVEY HAS BEEN REDACTED DUE TO COPYRIGHT RESTRICTIONS ON STANDARDISED INSTRUMENTS THAT WERE USED IN THE PFL STUDY. REDACTED CONTENT IS MARKED IN THE TEXT IN YELLOW BOXES.**

Survey for **Parent Interview at End Phase** of the Early Childhood Care and Education (ECCE) Evaluation

# Evaluation of CDI ECCE Programme-Endphase Parent Interview

Child I.D .....

Date of interview .....

Setting Name.....

Child Name .....

Parent Name.....

## Section 1

<b>1.1. Can you please tell us your relationship to the child in the study?</b>		
Birth mother	Birth father	Grandmother
Adoptive Mother	Adoptive father	Grandfather
Foster Mother	Foster Father	Other:
Stepmother/father's partner	Stepfather/mother's partner	
<b>1.2. What is your present marital/living status {ask if different from previous interview}?</b>		
Single/Lone parent	Separated	
Married	Divorced	
Living with partner/in a relationship	Widowed	
	Other/indicate if different here	
<b>1.3. Did we talk to you before at the beginning of the research?</b>		
Yes	No	You spoke to my partner
<b>1.4. Have you completed a parenting course since the beginning of the research?</b>		
Yes the CDI parenting course	Yes with some other group	No
2 a) If yes, how many sessions did you attend (i.e. how many out of how many)?		
<b>1.5. How many times did you get home visits from preschool staff since your child started attending the preschool?</b>		
Year 1:		Year 2:
<b>1.6. What do you think was positive about your child's preschool? What worked well?</b> {Prompts for Iris parents: PCF, parents course, the food, the SLT, the 2 year programme, the summer programme, the advice and support, the home visits, access to professionals. {General prompts: the cost, the location, the staff, community-based}}		
<b>1.7. Are there any things that you would change about the preschool?</b> {Prompts: as above}		

**1.8. Have you and/or your child gotten any extra help as a result of being involved with the preschool? {Prompt: E.g. diagnosis, quick referral, better access to health professionals?}**

**1.8a. If yes, what form did this help take?**

**1.9. Think about your child leaving the preschool to attend primary school. Do you think this preschool has helped them to be ready for school?**

<b>5</b> Yes, very much so	<b>4</b> Yes	<b>3</b> Undecided	<b>2</b> Not really	<b>1</b> No, definitely not
-------------------------------	-----------------	-----------------------	------------------------	--------------------------------

**1.9a. Why do you think this is the case?**

**1.10. Do you think this preschool has made a difference to you as a parent? {Ask them to indicate on the scale how much or how little, then prompt for examples to see if positive or negative difference}**

<b>5</b> Yes, very much so	<b>4</b> Yes	<b>3</b> Undecided	<b>2</b> Not really	<b>1</b> No, definitely not
-------------------------------	-----------------	-----------------------	------------------------	--------------------------------

**1.10a. Depending on answer ask “Why/in what way?” (Prompts: more confident, feel supported, understand my child better)?**

**1.11. Do you think this preschool has made a difference to your child ?{ask them to indicate on the scale how much or how little, then prompt for examples as above}**

<b>5</b> Yes, very much so	<b>4</b> Yes	<b>3</b> Undecided	<b>2</b> Not really	<b>1</b> No, definitely not
-------------------------------	-----------------	-----------------------	------------------------	--------------------------------

**1.11a. Why/in what way?**

<b>1.12. How would you rate the quality of preschool service that you and your child received?</b>			
<b>4</b> Excellent	<b>3</b> Good	<b>2</b> Fair/Average	<b>1</b> Poor/Not Good
<b>1.13. Did you get the kind of preschool service you wanted for you and your child?</b>			
<b>1</b> No, definitely not	<b>2</b> No, not really	<b>3</b> Yes, generally	<b>4</b> Yes, definitely
<b>1.14. To what extent did the preschool service meet the needs of you and your child?</b>			
<b>4</b> Almost all of our needs have been met	<b>3</b> Most of our needs have been met	<b>2</b> Only a few of our needs have been met	<b>1</b> None of our needs have been met
<b>1.15. If a friend needed a place to send their child to preschool, would you recommend the preschool to him or her?</b>			
<b>1</b> No, definitely not	<b>2</b> No, I don't think so	<b>3</b> Yes, I think so	<b>4</b> Yes definitely
<b>1.16. How satisfied are you with the amount of help/support you and your child received from programme staff?</b>			
<b>1</b> Quite satisfied	<b>2</b> Indifferent or mildly satisfied	<b>3</b> Mostly satisfied	<b>4</b> Very satisfied
<b>1.17. Has engaging with the preschool service helped you or your child to deal more effectively with any problems you might have had?</b>			
<b>4</b> Yes, it helped a great deal	<b>3</b> Yes, it helped somewhat	<b>2</b> No, it didn't help	<b>1</b> No, it seemed to make things worse
<b>1.18. In an overall, general sense, how satisfied are you with the service you and your child received?</b>			
<b>4</b> Very satisfied	<b>3</b> Mostly satisfied	<b>2</b> Indifferent or mildly dissatisfied	<b>1</b> Quite dissatisfied
<b>1.19. If you had the opportunity again, would you send another child to this preschool?</b>			
<b>1</b> No, definitely not	<b>2</b> No, I don't think so	<b>3</b> Yes, I think so	<b>4</b> Yes definitely

## Section 2: Your Child at Home

### 2.1. Does your child have .....

a) A regular bedtime?	Yes	No
b) Rules about watching TV/Videos?	Yes	No
c) How many hours of TV does your child watch in a typical weekday?		
0 hours	1 hour	1-3 hours
		3+ hours

### 2.2. How many days in a typical week has your child:

2.2a. Played with friends at home? (Prompt: Does your child have friends over to play?)

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

2.2b. Played with friends elsewhere? (Prompt: Does she/he go anywhere else to play?)

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

2.2c. Gone shopping with you?

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

2.2d. Gone on visits to friends or relatives?

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

e) Sat down and eaten a meal with the whole family together

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

### 2.3. Does anyone at home ever read to your child?

Yes

No

#### 2.3a. If yes, how often?

On special occasions      Once a week      Several times a week      Every day      Twice a day

### 2.4. Does anyone at home ever take your child to the library?

Yes

No

#### 2.4a. If yes, how often?

On special occasions      Once a month      Once a fortnight      Once a week

2.5. Does your child ever play with letters at home? Prompt: What sort of things has your child got at home to play with?)

#### 2.5a. How many days a week?

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

**2.6. Does your child ever play with numbers/sorting/matching at home?** (Jigsaws, shape sorter, abacus, counting games, matching colour games etc.)

**2.6a. How many days a week, on average?**

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

**2.7. How many days in an average week does your child paint and draw at home?**

0	1	2	3	4	5	6	7	Less Often
---	---	---	---	---	---	---	---	------------

**2.8. How many days in the average week have you tried to teach your child the ABC/Alphabet letters?**

(Prompt: Do you ever do anything like the ABC with your child at home? What have you taught/done? e.g. alphabet song, shapes of letters, writing their name etc. Write down exactly what is said without any more prompts. How Often?)

0	1	2	3	4	5	6	7	Less Often
---	---	---	---	---	---	---	---	------------

**2.9. How many days in the week have you tried to teach your child numbers, on average?**

Prompt: Have you done anything else with your child, such as numbers? What have you taught? (e.g. number rhymes, shapes of numbers etc. Write down anything number based i.e. shape, money, time, counting steps etc.)

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------

**2.10. How many times in a week do you teach your child any songs, poems or nursery rhymes?**

0	1	2	3	4	5	6	7	Less often
---	---	---	---	---	---	---	---	------------



**For each item, please mark the box for 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 or if the statement seems silly! Please give your answers on the basis of your child's behaviour over the last six months.**

	<b>Not True</b>	<b>Somewhat True</b>	<b>Certainly True</b>
2.11. Considerate of other people's feelings			
2.12. Restless, overactive, cannot stay still for long			
2.13. Often complains of headaches, stomach-aches or sickness			
2.14. Shares readily with other children (treats, toys, pencils etc.)			
2.15. Often has temper tantrums or hot tempers			
2.16. Rather solitary, tends to play alone			
2.17. Generally obedient, usually does what adult requests			
2.18. Many worries, often seems worried			
2.19. Helpful if someone is hurt, upset or feeling sick			
2.20. Constantly fidgeting or squirming			
2.21. Has at least one good friend			
2.22. Often fights with other children or bullies them			
2.23. Often unhappy, down-hearted or tearful			
2.24. Generally liked by other children			
2.25. Easily distracted, concentration wanders			
2.26. Nervous or clingy in new situations, easily loses confidence			
2.27. Kind to younger children			
2.28. Often argumentative with adults			
2.29. Picked on or bullied by other children			
2.30. Often volunteers to help others (parents, teachers, other children)			
2.31. Can stop and think things out before acting			
2.32. Can be mean, spiteful to others			
2.33. Gets on better with adults than with other children			
2.34. Many fears, easily scared			
2.35. Sees tasks through to the end, good attention span			

2.36. Over the last month, do you think that your child has had difficulties in one or more of the following areas:

Emotions, concentration, behaviour or being able to get on with other people?  
(Circle the areas that apply and record multiple entries if necessary)

No (if no skip to arrow at end of page)	Yes-minor difficulties	Yes-definite difficulties	Yes-severe difficulties
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.37. If you have answered "Yes", please answer the following questions...  
Do these difficulties upset or distress your child?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

	Not at all	Only a little	Quite a lot	A great deal
Home Life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure Activites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.40. Since your child came to preschool, are their problems/difficulties:

Much worse	A bit worse	About the same	A bit better	Much better
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.41. Has your and your child's involvement in this preschool/school been helpful in other ways, e.g. advice, making problems more bearable, giving you ideas?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**BELOW SURVEY QUESTIONS REDACTED DUE TO COPYRIGHT MATERIAL FROM THE FOLLOWING SCALE: Parent Stress Scale (Berry and Jones, 1995)**

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
2.42. Parenting Stress Scale item 1	1	2	3	4	5
2.43. Parenting Stress Scale item 2	1	2	3	4	5
2.44. Parenting Stress Scale item 3	1	2	3	4	5
2.45. Parenting Stress Scale item 4	1	2	3	4	5
2.46. Parenting Stress Scale item 5	1	2	3	4	5
2.47. Parenting Stress Scale item 6	1	2	3	4	5
2.48. Parenting Stress Scale item 7	1	2	3	4	5
2.49. Parenting Stress Scale item 8	1	2	3	4	5
2.50. Parenting Stress Scale item 9	1	2	3	4	5
2.51. Parenting Stress Scale item 10	1	2	3	4	5
2.52. Parenting Stress Scale item 11	1	2	3	4	5
2.53. Parenting Stress Scale item 12	1	2	3	4	5
2.54. Parenting Stress Scale item 13	1	2	3	4	5
2.55. Parenting Stress Scale item 14	1	2	3	4	5

2.56. Parenting Stress Scale item 15	1	2	3	4	5
2.57. Parenting Stress Scale item 16	1	2	3	4	5
2.58. Parenting Stress Scale item 17	1	2	3	4	5
2.59. Parenting Stress Scale item 18	1	2	3	4	5

**Copyright Professor Iram Siraj-Blatchford, Dr Nóirín Hayes and Siobhán Keegan, 2009**

**Space to record any extra relevant information**