

Children's Wellbeing Survey

Intro 1

Hello! Welcome to the Realigning Children's Services questionnaire.

You should be hearing the sound now. If it is too loud or too quiet, please change the volume on your computer now. If you do not know how to do this, please ask your teacher.

If everything is fine and you are happy to answer the questions, click the button with "next" on it below to start. If you do not want to answer the questions, you can stop now or at any time during the survey.

Intro2

You will now hear some questions being read out to you which are also written on the screen. Listen to the question and the answer options and then click on the number next to the answer that best fits how you feel. Remember, this is not a test, just say what you think. Your answers will be sent to the Researchers at ScotCen. We will not tell anyone the answers you give. Your answers will be combined with the answers of other children from across Scotland.

If there are any questions you don't want to answer you don't have to. To miss out a question, just click on the button with "next" on it without answering the question. If you want to go back to look at a question again, click the button with "previous" on it. If you want to listen to a question again, just wait a bit and it will be played again.

Remember you can just stop answering questions at any point if you don't want to continue.

About you

ChAge

The first few questions are about you.

How old are you?

1. 8 years old
2. 9 years old
3. 10 years old
4. 11 years old
5. 12 years old

ChSex

Are you a boy or a girl?

1. Boy
2. Girl

ChPrY

What year are you in at school?

1. P5
2. P6
3. P7

About your life

ChLife1

Now thinking about your life as a whole

How often do you feel that your life is going well?

1. Always
2. Often
3. Sometimes
4. Never

ChLife2

How often do you wish your life was different?

1. Always
2. Often
3. Sometimes
4. Never

ChLife3

How often do you feel that your life is just right?

1. Always
2. Often
3. Sometimes
4. Never

ChLife4

How often do you feel you have what you want in life?

1. Always
2. Often
3. Sometimes
4. Never

ChLife5

How often do you feel you have a good life?

1. Always
2. Often
3. Sometimes
4. Never

About your friends

ChFr1

The next few questions are about your friends.

How often are your friends nice to you?

1. Always
2. Often
3. Sometimes
4. Never
5. I don't have any friends

ChFr2 {If ChFr1 = 1-4}

How often are your friends mean to you?

1. Always
2. Often
3. Sometimes
4. Never

ChFr3 {If ChFr1 = 1-4}

How many **close** friends would you say you have?

1. None
2. One
3. Two
4. Three or more

About school

ChSch1

The next few questions are about school. There aren't any right or wrong answers – we're just interested in what you think and remember, we won't tell anyone what you say.

How much do you like school?

1. I like it a lot
2. I like it a bit
3. I don't like it very much
4. I don't like it at all

ChSch2

How often does your teacher help you when you need help?

1. Always
2. Often
3. Sometimes
4. Never

ChSch3

How often do you get along well with your teacher?

1. Always
2. Often
3. Sometimes
4. Never

ChSch4

How often do you get into trouble with the teachers at school?

1. Always
2. Often
3. Sometimes
4. Never

ChSch5

Have you ever skipped school, when your parents didn't know, even if only for half a day or a little while?

1. Yes, I have skipped school
2. No, I have never skipped school

ChPick1

The next few questions are about how other children **from your school** may treat you.

How often do other children pick on you by calling names or making fun of you in a way you don't like?

1. Most days
2. About once a week
3. About once a month
4. Every few months
5. Never

ChPick2

How often do other children pick on you by leaving you out of games and chats?

1. Most days
2. About once a week
3. About once a month
4. Every few months
5. Never

ChPick3

How often do other children pick on you by shoving, pushing, hitting or picking a fight with you?

1. Most days
2. About once a week
3. About once a month
4. Every few months
5. Never

ChPick4

How often do other children pick on you by sending emails, text messages or posting something online?

1. Most days
2. About once a week
3. About once a month
4. Every few months
5. Never

ChPick5

And how often do **you** hit, kick or punch other children at your school?

1. Most days
2. About once a week
3. About once a month
4. Every few months
5. Never

ChPick6

How often are **you** mean to other children at school or call them hurtful names?

1. Most days
2. About once a week
3. About once a month
4. Every few months
5. Never

About stealing

ChSteal

Since starting {INSERT P5, P6 or P7}, how many times have you stolen something that didn't belong to you?

1. Never
2. Once
3. More than once

A quick check

ChUse

A quick check before continuing, are you happy to send the answers you've given so far to the researchers?

1. Yes
2. No

ChCont

Are you happy to continue with the survey?

1. Yes
2. No

ContConfirm

{IF ChCont=2}

Just to check, you said 'you do not want to continue, is that correct? Click either:

1. *Yes, please stop the survey*
2. *No, I clicked the wrong button, please let me continue*

About your home and family

ChHome1

The next few questions are about your home and who you live with.

Who lives with you at home? Think about the home you live in most of the time.
You may need to select more than one answer here.

1. Mother
2. Father
3. Father's partner (this includes a step-parent)
4. Mother's partner (this includes a step-parent)
5. Grandmother
6. Grandfather
7. Foster carer

8. Brother (include half/step/foster)
9. Sister (include half/step/foster)
10. I live in a care home
11. Someone or somewhere else

ChSib1 {if ChHome108 = 1}

How many brothers live at home with you? This includes half, step or foster brothers.

1. 1 brother
2. 2 brothers
3. 3 brothers
4. 4 brothers
5. 5 brothers
6. 6 or more brothers

ChSib2 {if ChHome109 =1}

How many sisters live at home with you? This includes half, step or foster sisters.

1. 1 sisters
2. 2 sisters
3. 3 sisters
4. 4 sisters
5. 5 sisters
6. 6 or more sisters

ChFam1 {If ChHome1 =1-9 or 11}

How often do you enjoy being with your family?

1. Always
2. Often
3. Sometimes
4. Never

ChFam3 {If ChHome1 =1-9 or 11}

How often are there are a lot of bad arguments or fights at home?

1. Always
2. Often
3. Sometimes
4. Never

ChFam4 {If ChHome1 =1-9 or 11 and If ChFr1 = 1-4}

Compared with your friends, do you think your family is richer, poorer or about the same?

1. Richer
2. Poorer
3. About the same

ChFam5 {If ChFr1 = 1-4}

Thinking about the things you have at home – like toys, games, computers, phones or clothes – do you think you have more or less of these things than your friends or about the same?

1. More
2. Less
3. About the same

ChPar1 {If ChHome1 =1-9 or 11}

Not all families are the same. Some have mums and dads, others have just a mum or a dad, or another person who looks after the children. The next few questions talk about your 'parents'. By this we mean just whoever is that looks after you at home.

My parents can tell when I'm upset about something

1. Never true
2. Sometimes true
3. Often true
4. Always true

ChPar2 {If ChHome1 =1-9 or 11}

I talk to my parents when I am having a problem

1. Never true
2. Sometimes true
3. Often true
4. Always true

ChPar3 {If ChHome1 =1-9 or 11}

If my parents know that something is bothering me, they ask me about it

1. Never true
2. Sometimes true
3. Often true
4. Always true

ChPar4 {If ChHome1 =1-9 or 11}

I share my thoughts and feelings with my parents

1. Never true
2. Sometimes true
3. Often true
4. Always true

ChPar5 {If ChHome1 =1-9 or 11}

How often do you sit down at a table to eat a main meal with one or both of your parents?

1. Every day
2. Most days
3. Some days
4. Rarely
5. Never

ChSmoke1 {If ChHome1 =1-9 or 11}

Does anyone smoke **inside** your home? This does **not** include e-cigarettes or vaping devices.

1. Yes –most days
2. Yes – sometimes
3. No – never

About how you feel

ChFeel1

The next questions are about how you feel. Everyone has times when they feel happy, sad or angry.

How often do you feel happy?

1. Always
2. Often
3. Sometimes
4. Never

ChFeel2 {All}

How often do you get worried about what will happen to you?

1. Always
2. Often
3. Sometimes
4. Never

ChFeel3 {All}

How often do you feel sad?

1. Always
2. Often
3. Sometimes
4. Never

ChFeel4 {All}

How often do you feel afraid or scared?

1. Always
2. Often
3. Sometimes
4. Never

ChFeel5 {All}

How often do you laugh?

1. Always
2. Often
3. Sometimes
4. Never

ChFeel6 {All}

How often do you lose your temper?

1. Always
2. Often
3. Sometimes
4. Never

About your health

ChHealth1

The next questions about your health.

How is your health in general? Would you say it is...?

1. Very good
2. Good
3. Fair
4. Bad
5. Very bad

ChHealth2

The next question is about being active. Being active is anything that moves your body, makes your heart beat faster and makes you get out of breath some of the time.

You are active when you play in sports, take part in school activities, play with friends or walk to school. Some examples are running, walking quickly, cycling, dancing, skateboarding, swimming, football and gymnastics.

How often do you spend time doing things like that?

1. Every day
2. Most days
3. Some days
4. Rarely
5. Never

ChHealth3

How often do you brush your teeth with toothpaste?

1. More than once a day
2. Once a day
3. Less often than once a day

ChHealth4

How often do you eat fruit?

1. Every day
2. Most days
3. Some days
4. Rarely
5. Never

ChHealth5 {All}

How often do you eat vegetables, not including potatoes and chips?

1. Every day
2. Most days
3. Some days
4. Rarely
5. Never

ChHealth6 {All}

How often do you drink fizzy drinks, for example coke, lemonade, Fanta and Irn Bru?

1. Every day
2. Most days
3. Some days
4. Rarely
5. Never

ChAppear1 {All}

How do you feel about the way you look?

1. Very happy
2. Fairly happy
3. Not very happy
4. Not at all happy
5. I don't care / looks aren't important to me

About how much you worry

ChWorry1 {All}

Some people tend to worry about things, whilst other people don't worry so much.
How much, if at all, do you worry about these things?

How much do you worry about not doing well at school?

1. A lot
2. Quite a lot
3. Not very much
4. Not at all

ChWorry2 {If ChHome1=1-9}

How much do you worry about the health of someone in your family?

1. A lot
2. Quite a lot
3. Not very much
4. Not at all

ChWorry3 {If ChHome1=1-9}

How much do you worry about adults drinking too much alcohol at home?

1. A lot
2. Quite a lot
3. Not very much
4. Not at all

About where you live and play

ChPlay1

The last few questions are about where you live and play.

Do you have a garden at home that you can play in?

1. Yes
2. No

ChPlay2

Are there other places near where you live where you can play outdoors?

1. Yes – lots
2. Yes - some
3. No

ChPlay3

How much do you like the area you live in?

1. A lot
2. Quite a lot
3. A little
4. Not at all

END SCREEN 1

Well done! You have finished the questionnaire.

ChUse2

Are you happy to send **all** the answers you've given to the researchers?

1. Yes
2. No

UseConfirm2

{IF ChUse2=2}

Just to check, you said you do not want to send all your answers, is that correct?

1. *Yes, don't send any of my answers*
2. *No, I clicked the wrong button, send all my answers*

END SCREEN 2 {IF ChUse2 = 1 or UseConfirm2=2}

Now your answers will be sent away and no one will know what you have said. We really hope you've enjoyed answering the questions but if you have been upset by anything please talk to your parents, teacher or another adult you trust.

Thanks for your help.

END SCREEN 3 {IF UseConfirm2=1}

We really hope you've enjoyed answering the questions but if you have been upset by anything please talk to your parents, teacher or another adult you trust.

Thanks for your help.