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Research Report SOEP-Core - 2021: Mother and child (newborns)

SOEP Survey Papers, No. 1211

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Running since 1984, the German Socio-Economic Panel study (SOEP) is a wide-ranging representative longitudinal study of private households, located at the German Institute for Economic Research, DIW Berlin.

The aim of the SOEP Survey Papers Series is to thoroughly document the survey's data collection and data processing. The SOEP Survey Papers is comprised of the following series:

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The SOEP Survey Papers are available at http://www.diw.de/soepsurveypapers

Editors:

Dr. Carina Cornesse, DIW Berlin and University of Bremen Dr. Jan Goebel, DIW Berlin Prof. Dr. Cornelia Kristen, University of Bamberg and DIW Berlin Prof. Dr. Philipp Lersch, DIW Berlin and Humboldt-Universität zu Berlin Prof. Dr. Carsten Schröder, DIW Berlin and Freie Universität Berlin Prof. Dr. Jürgen Schupp, DIW Berlin and Freie Universität Berlin Prof. Dr. Sching Zing, DIW Berlin and Freie Universität Berlin

Prof. Dr. Sabine Zinn, DIW Berlin and Humboldt-Universität zu Berlin

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DIW Berlin German Socio-Economic Panel (SOEP) Mohrenstr. 58 10117 Berlin Germany

soeppapers@diw.de



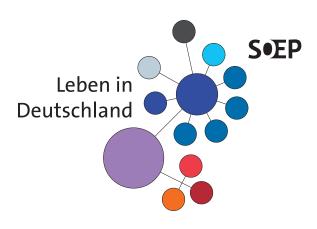
The German Socio Economic Panel study at DIW Berlin

SOEP-Core – 2021: Mother and Child (Newborns)

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2022

The variable names mentioned in this document belong to a collection of datasets, which is released with doi:10.5684/soep.core.v38eu.



Questionnaire

Mother and Child

Dear Participant,

The next generation is of utmost importance to the study "Living in Germany".

This short questionnaire is about children who were born in 2020 and 2021.

The questions deal with your personal experiences and the development of the child. Since some of the questions are about the pregnancy and the birth of the child, the questionnaire is usually completed by the biological mother. However, it can also be completed by another caregiver if appropriate to the case at hand.

Your participation is, of course, completely voluntary.

We cordially invite you to

- provide our staff member with an interview,

– or carefully complete the questionnaire yourself.

Please answer all of the questions in this questionnaire in relation to the following child

(may also be filled out by Interviewer):

Child's first name:

<Vorname>

Birth date:

<Tag.Monat.Jahr>



<Barcode>

We also offer an online questionnaire as an alternative to the paper version.

To complete the questionnaire online, please enter the following address into your Internet browser:

<LinkCAWI>

Your personal access code is:

<PWD-CAWI>

If you completed the questionnaire online, you don't need to return this printed questionnaire.



LFD des Kindes



LFD der Mutter



terviewernummer

infas

infas Institut für angewandte Sozialwissenschaft GmbH

Postfach 240101 53154 Bonn Tel. 0800/66 77 876 LiD@infas.de www.leben-in-deutschland.de

7701/K-A-EN/2021

<LFD/Personen-Nr>

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How should the questionnaire be filled out?

Make an X in the box next to the answer option that you think comes the closest. If you make a mistake, clearly cross out the wrong answer and make an X in the correct box.

Example:

Yes	鑁
No	X

If you change your mind and decide that you want to select the answer that you just crossed out, you will need to clearly cross out the second mistake and then make a circle around the box you had crossed out first.

Example:	
Yes	(33)
No	

When filling out the questionnaire, please pay attention to the instructions for each question:

Example:

⊂ Please select one answer only.

Sometimes you are asked to give numerical answers. Please enter your answer by aligning numbers to the right in the spaces provided:

Example:

Number:	1	5	0
i annoci i	 		

If you should skip certain questions, there will be specific instructions:

Example:

Yes

 $\Box \rightarrow$ Continue with question 11

Please make sure:

C that you fill out the questionnaire in black pen only.

- *C* that your answers are clearly legible.
- *⊂ and that your answers are inside the boxes.*

This makes our work much easier. Thank you very much!

Further information

If you have any questions about filling out the questionnaire or about your participation in the study, you are welcome to contact us at infas.

You can call us during normal business hours at our toll-free number, 0800–6677876, or send us an e-mail at LiD@infas.de. We will respond to e-mails as quickly as possible. For more information on the study, please see the infas homepage at: www.leben-in-deutschland.de

Please remember to answer the following questions solely with regard to the child whose name is listed on the cover of the questionnaire.

1	What is your relationship to the child: Are you the?		
⊥ biochild			
	The Please select one answer only.		
	Biological mother $1 \sqcup \rightarrow$ Continue with question 2		
	Biological father 2		
	In same-sex partnerships: Second, social mother / second, social father		
	Adoptive or foster mother / Adoptive or foster father 4		
	Stepmother / stepfather 5 Continue with question 7		
	Grandmother / grandfather / aunt / uncle 6		
	None of the above, other relationship to the child		
2 feeling1 feeling2	How were you feeling physically and mentally during the last third of your pregnancy and during the first three months after giving birth?		
feeling3 feeling4	C Please select one answer only per line.		
	Physically Very good Good Bad Very bad		
	in the last third of my pregnancy		
	in the first three months after giving birth		
	Mentally		
	in the last third of my pregnancy		
	in the first three months after giving birth		
3 nchild	Is the newborn baby your first, second, third, etc. child? Please specify:		
4			
fathinhh	Does the child's biological father live in this household?		
	Yes 1		
5			
pregplan			
	More unplanned $_2 \square \rightarrow Continue with question 7$		
6	How did you / the mother become pregnant?		
pregmethod	Naturally 1		
	With medical assistance (for example, through hormone treatment, IVF) 2		
	Through the use of alternative methods, without medical assistance ${}_{3}\square$		

7	Where was the baby delivered?
delivpl	At the hospital 2 -> Continue with question 8
	$\frac{\text{At home}}{1} \longrightarrow \text{Continue with question 9}$
	Elsewhere
8	Was the baby delivered by caesarean section?
delivcs	Yes 1
	No 2
9 birthpw	At what week of pregnancy was the baby born?
	At week .
10 weightb	What did your baby weigh and measure at birth?
heightb circum	Weight in grams
	Length in centimeters
	Head circumference in centimeters
11	Was your baby breastfed, and if so, for how long?
breastf breastfm	T Please select one answer only.
	Baby is still being breastfed
	Only breastfed for the first four weeks
	Was breastfed for a longer period $\exists \sqcup \rightarrow$ please specify: for $\sqcup \bot$ months
	No, baby was not breastfed 4
12 ages1	Did your baby experience any serious health problems in the first three months after birth that necessitated a hospital stay?
hospital3mb	
	Yes $_{1} \square \rightarrow$ please specify: for $\square \square$ days
13 Istmedex auntno	After giving birth, mothers are given a booklet called "Your Child's Medical Records" (Kinder-Untersuchungs- heft) to keep track of their baby's medical examinations (the second is referred to as "U2", the third as "U3", etc.). What was your baby's last medical examination?
	U
	Baby has not had any of these medical examinations
14	Have doctors found any indications of developmental delays, impairments, or disabilities in the child?
disord	C Please select one answer only.
	Yes, in the "U" examination $\Box \rightarrow$ Continue with question 15
	Yes, in a different examination
	No $\Box \rightarrow Continue$ with question 16

15 Which of the following developmental delays, impairments, or disabilities has your child been diagnosed disord1 disord2 disord3 に定 Please select all answers that annly

C Please select all answers that apply.	1
Sensory (vision, hearing)	
Motor skills (grasping, crawling, walking)	
Neurological disorders (seizures, spasms, cramps, etc.)	
Speech (articulation, speech acquisition disorder)	
Regulatory system (persistent crying, sleep or eating disorder)	
Chronic illness	
Physical disability	
Intellectual disability	
Other	

16 change1 change2 change3 change4 change5 change6 change7 change8 health

maincare

suppartn

disord4 disord5 disord6 disord7 disord8 disord9

Life changes after the birth of a child. You have new experiences and your expectations about the future begin to change. To what extent do you agree with the following statements?

ige3 ige4	Please select one answer only per line.				
ige5 ige6 ige7 ige8		Strongly agree	Agree	Disagree	Strongly disagree
tĥ	My life has changed significantly		= 🗌 =		
	Raising my child brings me joy and happiness				
	I often feel like I'm running out of energy			— 🗆 —	—
	I feel very satisfied in my role as a parent				—
	I often don't feel up to the new tasks and demands of parenthood	d 🗆 🗕			— 🗆
	I am meeting different people and making new acquaintances through my child				— 🗆
	I am having a hard time being restricted to my role as a parent				—
	Showing my child plenty of affection is important to me				
	I'm worried about my child's health				—
17	Are you the child's main caregiver?				
ncare	Yes 1				
	No 2				
18	How much do you feel your partner helps you in looking after the	e child?			
artn	A lot 1				
	Quite a bit 2				
	Not much				
	Not at all 4				
	Not applicable, no partner 5 \Box				

If you think about a normal week, is there anybody else who regularly spends time looking after the child? If so, who is it, and how many hours do they spend per week looking after the child?

care24h Yes Hours asit2 care3h 1 asit3 care4h \square Spouse / partner asit4 care5h Child's father / mother (if not your spouse / partner) \square asit5 care6h asit6 care8h Child's grandparents asit7 care12h \square Child's older siblings care19 \square Other relatives Home daycare provider (outside your home) П \square Nursery school / childcare center \square Other (e.g., babysitter, neighbor) No, nobody

Cr Do not count hours when the person looking after the child is sleeping.

20 temp1 temp2 temp3 temp4

temp5

19

asit1 care1h

asit8

What's your current impression of your child? To what extent do you agree with the following statements?

	Strongly Agree Disagree Strongly agree disagree
My child is generally cheerful and happy	
My child gets upset easily and cries a lot	
My child is difficult to comfort when upset	
My child is curious and active	
My child tends to be shy	

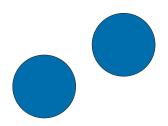
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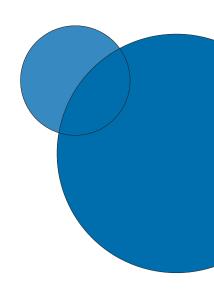
Α	What is the sex of the child?
sex_n	Male 1
	Female 2
	Divers 3
В	When did you finish filling out the questionnaire?
datt, datm datst, datmi	Date: Day Month Time: Hour Minute
С	Approximately how long did it take you to complete this questionnaire?
dauer2	Minutes
D	Were other persons present while you were filling out the questionnaire?
anw1 anw2 anw3	The please select all answers that apply.
anw4	Yes, spouse / partner
	Yes, other person who is living in the same household \Box \rightarrow Continue with question E
	Yes, other person who does not live in the same household 🔲
	No $\Box \rightarrow End of question naire$
E	Did any of the aforementioned people bother you while you were filling out the questionnaire?
abl	Yes 1
	No 2
Tha	ank you for taking part.

Please give the completed questionnaire to our interviewer or send it back to infas in the enclosed postage-paid envelope:

infas Institut für angewandte Sozialwissenschaft GmbH Postfach 24 01 01 53154 Bonn







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