**QUESTIONNAIRE**

Dear Participants,

Thank-you for taking the time to fill out this questionnaire. Please read the participant information sheet and sign the consent form beforehand. Please feel free to ask if you are having trouble answering any of the questions.

**PLEASE CIRCLE ONE ANSWER**

**We will start by asking a few questions about the health services you and your family use.**

1. How often do you and your family use the following services?

 (1= never, 2 = sometimes, 3 = often)

General practitioners 1 2 3

Hospitals 1 2 3

Community health centres 1 2 3

Medical specialists 1 2 3

Health professionals eg dentist, optometrist 1 2 3

Therapist eg physiotherapist,

occupational therapist, speech pathologist 1 2 3

Alternative health practitioners

eg chiropractor, naturopath,

Chinese witch doctor, acupuncturist 1 2 3

**PLEASE TICK THE BOXES**

1. Out of the services that you have marked as never using, why haven’t you used these services? (**You may tick more than one box for each service**)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Don’t know about them | Too far/ transport problems | Don’t speak your language | Don’t understand your culture | Too expensive | Never needed their services | Other (Specify) |
| General practitioners |  |  |  |  |  |  |  |
| Hospitals |  |  |  |  |  |  |  |
| Community health centres |  |  |  |  |  |  |  |
| Medical specialists |  |  |  |  |  |  |  |
| Health professionals  |  |  |  |  |  |  |  |
| Therapists  |  |  |  |  |  |  |  |
| Alternative health practitioners  |  |  |  |  |  |  |  |

**PLEASE MARK THE SCALE WITH AN “X”**

**In the following questions, we have put two words which are opposite to each other at the end of the marked line.**

e.g. black \_|\_|\_|\_|\_ white

*If you think your feelings about a concept are close to a word at one end of the scale, put a mark (X) where you think they may be, e.g.*

black X|\_|\_|\_|\_ white or black \_|\_|\_|\_|X white

*If you feel neutral, that is no strong feelings one way or the other, mark the centre space, e.g.*

black \_|\_|X|\_|\_ white

*You may feel a little one way or the other, then mark the line like this:*

 black \_|X|\_|\_|\_ white or black \_|\_|\_|X|\_ white

**Of the services you and your family have used, please put a mark on the scales below to show your feelings:**

1. *General practitioners*

Most of the general practitioners I have taken my child to see have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

**PLEASE MARK THE SCALE WITH AN “X”**

**Of the services you and your family have used, please put a mark on the scales below to show your feelings:**

1. *Hospitals*

Most of the hospitals I have taken my child to have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

1. *Community health centres*

Most of the community health centres I have taken my child to have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

**PLEASE MARK THE SCALE WITH AN “X”**

**Of the services you and your family have used, please put a mark on the scales below to show your feelings:**

1. *Medical specialists*

Most of the medical specialists I have taken my child to have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

1. *Health professionals eg dentist, optometrist*

Most of the private health professionals (dentists, optometrists etc) I have taken my child to see have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

**PLEASE MARK THE SCALE WITH AN “X”**

**Of the services you and your family have used, please put a mark on the scales below to show your feelings:**

1. *Therapists eg physiotherapist, speech pathologist*

Most of the therapists I have taken my child to see have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

1. *Alternative health practitioners eg chiropractor, naturopath, Chinese witch doctor, acupuncturist*

Most of the alternative health professionals I have taken my child to see have been:

 unkind \_|\_|\_|\_|\_ kind

 uncaring \_|\_|\_|\_|\_ caring

 understanding \_|\_|\_|\_|\_ not understanding

 unhelpful \_|\_|\_|\_|\_ helpful

 relate to children well \_|\_|\_|\_|\_ do not relate to children well

 are easy to talk to \_|\_|\_|\_|\_ are not easy to talk to

 explain things in a way I can understand \_|\_|\_|\_|\_ do not explain things in a way I can understand

 gentle \_|\_|\_|\_|\_ rough

 incompetent \_|\_|\_|\_|\_ competent

 approving \_|\_|\_|\_|\_ disapproving

**PLEASE WRITE SHORT ANSWERS**

**Many people don’t know what the following health professionals do. Could you tell us what you think they do?**

1. Physiotherapist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Speech pathologist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Occupational therapist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Psychologist\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Psychiatrist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Community nurse \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. General practitioner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Paediatrician \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**YOU MAY CIRCLE MORE THAN ONE ANSWER**

**These questions relate specifically to community child health services.**

1. What community child health services have you and your family used? (**you may circle more than one**)

 Information seminars on parenting issues 1

 New parent’s groups 2

 Home visits by child health nurses 3

 Triple P parenting workshops 4

 Immunisation clinics 5

 Feeding clinics 6

 Therapy (physiotherapy, speech pathology,

 Occupational therapy, psychology) 7

 Paediatrician’s clinic 8

 Child, youth and mental health services 9

 Antenatal clinic 10

 Day management clinic 11

 Others (please specify) 12

 **PLEASE MARK THE SCALE WITH AN “X”**

**These questions relate specifically to community child health services.**

1. Of the services you and your family have used please mark on the scale how happy you were.

 Very Very

 satisfied dissatisfied

 Information seminars on parenting issues \_|\_|\_|\_|\_

 New parent’s groups \_|\_|\_|\_|\_

 Home visits by child health nurses \_|\_|\_|\_|\_

 Triple P parenting workshops \_|\_|\_|\_|\_

 Immunisation clinics \_|\_|\_|\_|\_

 Feeding clinics \_|\_|\_|\_|\_

 Therapy (physiotherapy, speech pathology,

 occupational therapy, psychology) \_|\_|\_|\_|\_

 Paediatrician’s clinic \_|\_|\_|\_|\_

 Child, youth and mental health services \_|\_|\_|\_|\_

 Antenatal clinics \_|\_|\_|\_|\_

 Day management clinics \_|\_|\_|\_|\_

 Others (please specify) \_|\_|\_|\_|\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What additional services would you like to have?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE CIRCLE ONE ANSWER**

**What would you do in the following situations?**

1. *Your 1 year old son has had severe diarrhoea for 2 days. He is not drinking at all. You notice that he is sleepy and has had only 2 wet nappies a day*.

 You would wait and see 1

 You would take him to your general practitioner or hospital

 immediately 2

 You would ask your mother, a neighbour or a friend for advice 3

 You would give him a lot of fluids, Panadol and put him to bed 4

1. *Your 2 year old daughter picks at her food. Every meal time seems to be a battle. She seems to be gaining weight and is otherwise healthy*.

You would take her to your general practitioner 1

You would ask your mother, a neighbour or a friend for advice 2

You would let her eat what she wants since she is gaining weight 3

You would force her to eat enough, even if you need to chase after her 4

1. *Your 18 month old son drinks a lot of milk. He insists on taking the bottle to bed with him every night. He doesn’t eat any solids at all*.

You would ask your mother, a neighbour or a friend for advice 1

You would take him to your general practitioner 2

You would let him continue to drink as much milk as he wants 3

You would try to cut down his milk intake and introduce solids 4

1. *Your 2 ½ year old daughter has been drinking from a bottle and has been spoon fed by you all the time. She seems to want to try and feed herself and use a cup, but she is messy and spills things a lot.*

You wouldn’t let her feed herself: she makes too much of a mess 1

You would ask your mother, a neighbour or a friend for advice 2

You would let her feed herself 3

You would ask your general practitioner 4

1. *Your 20 month old son is not yet walking by himself. He can “cruise”, holding onto furniture.*

You would wait and see 1

You would take him to your general practitioner 2

You would ask your mother, a neighbour or a friend for advice 3

You would buy a baby walker to help him walk 4

**PLEASE CIRCLE ONE ANSWER**

**What would you do in the following situations?**

1. *Your 2 year old daughter is not yet saying any words, only babbling*.

You would ask your mother, a neighbour or a friend for advice 1

You would wait and see 2

You would take her to your general practitioner 3

You would enrol her in daycare so she can learn to

speak by being around other children her age 4

1. *Your 3 month old baby prefers to lie on his back instead of his tummy*.

You would let him lie in whichever position he wants 1

You would encourage him to lie on his tummy 2

You would ask your mother, a neighbour or a friend for advice 3

You would ask your general practitioner 4

1. *Your 4 year old daughter plays with a variety of toys but doesn’t like books*.

You would start to read to her regularly 1

You would let her play with whatever toys she wants 2

You would buy more books for her, but let her decide

what she wants to play with 3

You would take away all her other toys and only let her play with books 4

1. *Your 5 year old son comes back from a day in the park with a friend and his mother. He has been playing in the mud and is very dirty. He has had a good time and want to tell you all about it.*

You would be upset that he is so dirty, make him take a bath 1

You would be happy that he’s had a good time, ask him to

tell you all about his day 2

You would make sure you never let this friend’s mother look after

him again: she shouldn’t have let him get so dirty 3

You would be happy that he’s had a good time, but ask him

to get cleaned up first before telling you about his day 4

1. *Your 3 year old daughter is watching TV. You ask her to come to dinner. She yells “I don’t want to!” and starts to scream*.

You tell her that because she hasn’t done as she’s told she is to go to

“quiet time” and you take her there 1

 You tell her “OK… you can have dinner after you finish watching TV,

 just stop screaming” 2

 You explain to her that it’s dinner time and it would be nice if she comes 3

 You smack her for being naughty 4

**YOU MAY CIRCLE MORE THAN ONE ANSWER**

**Now we would like to know what you think the causes of these conditions are.** (**you may circle more than one answer**)

1. Epilepsy

 What you did in a previous life 1

 Attempted abortion 2

 Head injury 3

 Genetics 4

1. Asthma

 Genetics 1

 Catch it from someone 2

 Preservatives in the diet 3

 Cold weather 4

1. Mental illness

 What you did in a previous life 1

 Genetics 2

 Psychological trauma 3

 Attempted abortion 4

1. Attention deficit hyperactivity disorder (ADHD,ADD)

 How a child was brought up 1

 Preservatives in the diet 2

 What you did in a previous life 3

 Genetics 4

1. Cerebral palsy

 Genetics 1

 Vitamin deficiencies in mother’s diet 2

 Birth trauma 3

 What you did in a previous life 4

**PLEASE CIRCLE ONE ANSWER**

**Finally we would like to know a little bit about you personally.**

1. Which of the following are you?

A father 1

A mother 2

Both parents 3

A guardian 4

1. Your age in years?

<20 1

20-24 2

25-29 3

30-34 4

35-39 5

40-44 6

45-54 7

55 and over 8

1. Your marital status?

 Single 1

 Separated/divorced 2

 Defacto/married 3

 Widowed 4

Other 5

1. Your country of birth?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. How long have you been in Australia (years)? (circle appropriate answer)

 1 2 3 4 5 6 7 8 9+ born here

1. What is your level of schooling? (circle appropriate number)

 Primary 1

 Some secondary 2

 Completed secondary 3

1. Have you done further studies? (circle the appropriate answer)

 No

 Yes\_\_\_\_\_\_\_\_\_\_\_\_\_ Some university 1

 University graduate 2

 Technical college/TAFE 3

**PLEASE** **CIRCLE ONE ANSWER**

1. What is your current job? (circle the appropriate number)

 Home duties 1

 Full time outside home 2

 Part time outside home 3

 Seeking work 4

 Unemployed 5

 Retired 6

1. What is your family’s total annual income before tax? (circle appropriate number)

 Less than $10,000 ($192 per week) 1

 $10,000 to $19,999 ($192 to $385 pw) 2

 $20,000 to $29,999 ($385 to $577 pw) 3

 $30,000 to $39,999 ($577 to $769 pw) 4

 $40,000 to $49,999 ($769 to $962 pw) 5

 $50,000 or more ($962 pw) 6

1. How well do you speak English?

 Well (I am easily understood by strangers) 1

 Alright 2

 Very little/not at all (Strangers understand little of what I say) 3

1. How well do you understand English?

 Well (I understand most of what I hear) 1

 Alright 2

 Very little/not at all (I understand very little of what I hear) 3

1. How well do you read English?

 Well (I understand most of what I read) 1

 Alright 2

 Very little/not at all (I understand little of what I read) 3

1. How many children do you have? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. How old are your children in years? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Do they attend a school?

 No

 Yes\_\_\_\_\_\_\_\_\_\_\_ Daycare 1

 Kindergarten 2

 Preschool 3

 Primary school 4

 High school 5

 University 6

**Thank you for your time and participation.**