



The Economic and Social Research Institute
Whitaker Square
Sir John Rogerson's Quay
Dublin 2
Ph: 01-863 2000 Fax 01-863 2100



An Roinn Leanaí
agus Gnóthaí Óige
Department of
Children and Youth Affairs

University of Dublin
Trinity College
College Green
Dublin 2



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DUBLIN

**A SUMMARY GUIDE TO
WAVE 2
OF THE CHILD COHORT
(AT 13 YEARS)
OF
GROWING UP IN IRELAND**

**Amanda Quail, James Williams,
Maeve Thornton and Aisling Murray**

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1. INTRODUCTION

In this document we provide the reader with a brief summary of the second wave of the Child Cohort (at 13 years) from the *Growing Up in Ireland* study, as well as an overview of the microdata files (Researcher and Anonymised) from that round of the project.

Growing Up in Ireland - the National Longitudinal Study of Children, is the first project of its kind ever undertaken in Ireland and, as such, aims to explore the many and varied factors that contribute to or undermine the wellbeing of children currently living here. A two cohort longitudinal design was adopted. The Child Cohort recruited and interviewed 8,568 nine-year-olds and their families in 2007/2008. The Infant Cohort recruited and interviewed the families of 11,134 nine-month-olds in 2008. Since the project is longitudinal in nature both cohorts are being interviewed on a number of occasions. The nine year cohort and their parents/guardians were interviewed for a second time at thirteen years of age (the focus of the current document), while the families of the infants were interviewed when the children were nine-months, three-years and five-years of age.

The 8,568 children in the Child Cohort were born between 1st November 1997 and 31st October 1998 and data collection for the first wave at age 9 years took place between August 2007 and May 2008. Data collection for the second wave at 13 years took place between August 2011 and March 2012 and resulted in a completed datafile of 7,525 cases.

This report describes in detail the background, design, instruments and procedures used only in respect of Wave 2 of the Child Cohort. Wave 1 of this cohort (and the Infant Cohort) are the subject of a parallel set of reports. The focus here is on the sample design and response rates in Wave 2 of the Child Cohort, the nature and content of the questionnaires and other instrumentation, along with a broad overview of the dataset.

1.1 Background

Growing Up in Ireland provides a very important input to the implementation of *The National Children's Strategy* - a major national plan for children, published in 2000 by the then Department of Health and Children. The principal objective of the Study is to provide evidence-informed research into childhood and children's wellbeing. This increased understanding of the determinants and drivers of wellbeing and its change and transformation over time will be used to assist in policy formation and the design and delivery of services for children and their families.

Growing Up in Ireland was commissioned by the Irish Government. It is funded by the Department of Children and Youth Affairs in association with the Department of Social Protection and the Central Statistics Office. Detailed recommendations for the design of a National Longitudinal Children's Study were first presented in a paper entitled *Design of the National Children's Strategy – Longitudinal Study of Children* (Collins, 2001). The

current study stems from a Request for Tender¹ which was issued by the then Department of Health and Children in December 2004. After an assessment and evaluation process throughout 2005 and early 2006, work on the project began in April 2006 by a research consortium led by the Economic and Social Research Institute (ESRI) and Trinity College Dublin (TCD).

The study provides an immense amount of information on children and their families, and explores those factors which influence the child's physical health and development, social/emotional/behavioural wellbeing, and educational achievement/intellectual capacity. A series of reports, summary Key Findings and peer reviewed papers is being produced from both cohorts.

While children's current wellbeing is of immense importance, researchers are also cognisant of future outcomes for children as they develop into young adults. By gathering comprehensive data on childhood development the study will provide a statistical basis for evidence-informed policy formation and applied research across all aspects of a child's development – currently and into the future.

Growing Up in Ireland has nine specific objectives as set out below:

1. To describe the lives of Irish children, to establish what is typical and normal as well as what is atypical and problematic
2. To chart the development of Irish children over time, to examine the progress and wellbeing of children at critical periods from birth to adulthood
3. To identify the key factors that, independently of others, most help or hinder children's development
4. To establish the effects of early child experiences on later life
5. To map dimensions of variation in children's lives
6. To identify the persistent adverse effects that lead to social disadvantage and exclusion, educational difficulties, ill health and deprivation
7. To obtain children's views and opinions on their lives
8. To provide a bank of data on the whole child
9. To provide evidence for the creation of effective and responsive policies and services for children and families

Full details on the underlying theoretical and conceptual framework can be found in Greene *et al.*, 2010.²

¹ *Request for Tenders (RFT) for Proposals to Undertake a National Longitudinal Study of Children in the Republic of Ireland*, issued by the National Children's Office of the Department of Health and Children and the Department of Social and Family Affairs, December 2005, p.20.

² Available at

http://www.growingup.ie/fileadmin/user_upload/documents/Technical_Reports/GUI_Background_and_Conceptual_Framework.pdf

2. SAMPLE DESIGN

2.1 Sample Design at Wave 1

Full details on the population, sampling frame and sample design for Wave One of the Child Cohort are given in a separate, dedicated publication entitled *Sample Design and Response in Wave 1 of the Child Cohort (at 9 years) of **Growing Up in Ireland***, (<http://www.ucd.ie/t4cms/GUI-SampleDesign9YearCohort.pdf>) This subsection provides a brief summary as an introduction for the sample design adopted in Wave Two.

The aim was to interview a random sample of nine-year-olds and their parents/guardians, and Teacher and School Principal. As with all sample design strategies, the first issue was the identification of an appropriate sampling frame. A two-stage design was adopted. In the first instance a random sample of Primary Schools was recruited and at the second stage a sample of nine year old children was selected from the sample of schools. The design required that the sample be representative of the national population of nine-year-olds. No over-sampling or booster sampling of subgroups was required. There was a total of 56,497 nine-year-olds registered in the Census of Population in 2006 so a sample size of 8,568 represented approximately 14 percent or about 1 in every 7 of the nine-year-olds resident in the country.

The ideal population frame would contain a comprehensive list of all nine-year-olds resident in Ireland. As this was not readily available the two-stage design based on the primary school system was developed to access the cohort of children in question. Based on data provided by the Department of Education and Science, a comprehensive listing of all schools (both public and private) was generated. In addition to detailing the total number of enrolments in each school by age and gender, this database also recorded information on the characteristics of the school such as region, disadvantaged status, size, school type, denominational status and gender mix.

The two-stage design based on the school system offered a number of operational and analytical benefits. Using the school as the primary sampling unit allowed for direct access to the principal and teachers, who were key Study informants, and facilitated the completion of the school and teacher questionnaires and recording of related classificatory variables on the child's school environment. It also facilitated the self-completion of academic achievement tests by the children in a group setting, thus reducing respondent burden and contact time in the home. Group self-completion within the schools by the nine-year-olds was also a very efficient way of recording substantial amounts of information from the children.

The first point of contact with the schools involved sending an introductory letter to the principal of each school selected into the target sample. This was followed a few days later by a telephone call from the Study Team to discuss and clarify the school's participation and role in the study. An appointment was made by an interviewer to meet with the principal to go through the details of the survey and to explain the process. The interviewer generally had to pay several visits to the school to explain

the study and secure the cooperation of principal and teachers. Phone calls and letters were also issued from Head Office to support this effort and encourage participation throughout the school recruitment phase.

The initial information sent to the principal included an introductory letter from the Study Team as well as information sheets for both principals and teachers on the nature, purpose and objectives of the study, along with several copies of a poster promoting the study and encouraging participation. The principal was asked to display the posters prominently in the school, particularly in the classrooms of potential target students. In addition, a letter from the Minister of Education and Science was also included with the initial information pack forwarded to the school. The letter from the Minister emphasised the importance of the project, encouraged participation by the school and pointed out that the project had the full support of the Department of Education and Science.

Staff within the schools were asked to identify and record on a form provided by the Study Team all nine-year-old children who fell within scope for inclusion in the study. It was anticipated that most of the children would be in 3rd class, with some in 2nd and 4th class. In the original design it was envisaged that principals would be asked to select a systematic selection of children from those who fell within the age reference period. In subsequent discussion with the Project Team this was amended somewhat so that all children in schools which contained up to 40 children within age scope were included in the study. In larger schools (those with more than 40 children who fell within age range) the principal was instructed by the interviewer on how to select a random sample of 40 children. For example, if a school had 49 pupils within the age range listed on the School Record Sheet, nine of these would be excluded when choosing the sample. These exclusions were selected using a random number table provided.

When the children were selected for inclusion in the study the principal issued information packs and consent forms to their parents with a view to securing their informed consent and participation. Parents and children were provided with information sheets on the study and were asked to sign consent and assent forms respectively. Children were not included in the study until consent / assent forms were returned.

2.2 Sample Design at Wave 2

Growing Up in Ireland is a longitudinal study based on the same set of children and their families over time.

Accordingly, the Wave 2 target sample included all 8,568 Study Children who participated in the first round of interviewing. The Study Child is the longitudinal focus of the study. We are interested throughout the study in tracking, interviewing, measuring and testing the child, regardless of changes in his/her family composition, structure, location etc. In this respect the study is based on a pure, fixed panel of children who were nine years of age at the time of first interview. After the initial sample selection no additions⁶ were made to the sample with the only loss being through interwave non-response or attrition (including moving outside the jurisdiction) and death. Therefore the longitudinal population which we are referring to at Wave 2 is the population of nine-year olds (and their

families) who were resident in Ireland at Wave 1 and who continued to be resident in Ireland at Wave 2.

Fieldwork for Wave 2 took place between August 2011 and March 2012.

2.3 Response Rates

Table 2.1 summarises response outcomes for Wave 2. From this, one can see that the overall response rate in Wave 2 was 88.9 per cent when based on valid addresses only (that is, excluding families who had moved abroad since first interview). When based on valid addresses contacted this increases to 91.2 per cent.

Table 2.1: Summary response rates in Wave 2 of the Child Cohort (at 13 years)

	A No. of Cases	B Valid Address Response	C Valid Contact Response
Outcome	N	Per cent	Per cent
(i) Completed	7,525	88.9	91.2
(ii) Refused	668	7.9	8.1
(iii) Cannot contact	218	2.6	—
(iv) Other	54	0.6	0.7
Total valid	8,465	100.0	100.0
(v) Moved abroad / child deceased	103	—	—
Initial target sample Wave 2	8,568		

In Table 2.1 outcome (ii) ('Refused') includes some families who did not definitively refuse to participate in the study but who failed to participate because they were 'too busy' and continuously broke appointments with the interviewer or who continually put the interviewer off, saying they would participate but never actually did so. These were considered as "soft refusals".

Outcome (iii) ('Cannot contact') includes families who had moved address since their first interview and for whom a new address could not be found, as well as other families where no contact was made, despite repeated call backs. Many of these families who had moved address between the first and second wave of interviewing may have moved outside the country and so were no longer living in Ireland. As such they really should not be included in the valid sample. Such families were included in the valid sample for calculating response rates, however, unless it could be definitively confirmed that they had left the country.

Outcome (v) ('Moved abroad / child deceased') includes families who were affirmatively identified as having moved out of the Republic of Ireland and a very small number where the Study Child had died between waves.

2.4 Attrition

Notwithstanding rigorous proactive and retrospective tracing procedures (discussed in Section 2.3 above) which were adopted to minimise longitudinal attrition³, interwave non-response is unavoidable in panel surveys like *Growing Up in Ireland*. Attrition is seldom a random process and is usually systematically related to the characteristics of target respondents, as well as to a number of characteristics related to the conduct of earlier waves of the study – such as the respondent’s satisfaction with the length and administration of the questionnaire in previous rounds of the project. (For a general discussion of the factors associated with interwave attrition see, for example, Watson and Wooden (2009)).

To assess the extent and correlates of Wave 2 attrition Table 2.2 summarises response rates at that round of the survey, classified by four socio-demographic characteristics which were recorded at Wave 1 - Primary Caregiver’s education, family structure, social class and equivalised income quintile. The table indicates strong social and educational gradients in participation at Wave 2. One can see that it is strongly related to the Primary Caregiver’s educational attainment, family social class and family income. For example, 82 per cent of families in which the Primary Caregiver had left school with a Junior Certificate or less participated in the survey at Wave 2, compared with 93 per cent of families in which the Primary Caregiver had a degree. Similar trends are apparent in respect of other measures of social advantage/disadvantage, as outlined in the table. The relationship between participation and background socio-demographic characteristics is further reflected in response levels by family structure, being lower for one-parent than for two-parent families. One can see from the figures that non-contact rates (as well as explicit refusals) are higher among more socially disadvantaged families.

³ These included “change of address” postcards left with families when they were being interviewed for the first time as well as those sent to families between interviews; alternative contact details (usually of the family members or an employer) and tracking of families through the Child Benefit Register.

Table 2.2: Response rates in Wave 2 of the Child Cohort (at 13 years) classified by Primary Caregiver’s educational attainment, family type, family social class and family income

Family Characteristics at Wave 1 (9 years)	Outcome at Wave 2 (13 years)				
	Completed	Refused	No contact	Other	Total
Primary Caregiver’s Education	Per cent				
Junior Certificate or less	82.0	13.0	3.9	1.1	100.0
Leaving Certificate	88.6	8.2	2.6	0.6	100.0
Certificate/Diploma	89.4	7.8	2.2	0.7	100.0
Degree	93.4	4.2	2.0	0.4	100.0
Family Type					
One-parent, one or two children	82.8	10.9	5.5	0.7	100.0
One-parent, three or more children	83.9	9.0	6.5	0.6	100.0
Two-parent, one or two children	88.5	8.8	2.2	0.5	100.0
Two-parent, three or more children	90.6	6.6	2.1	0.7	100.0
Family Social Class					
Professional/managerial	92.1	5.8	1.6	0.5	100.0
Other non-manual/skilled manual	86.4	9.7	3.1	0.8	100.0
Semi-skilled/unskilled manual	85.1	10.5	4.1	0.4	100.0
Never worked – no class assigned	80.2	12.8	6.7	0.2	100.0
Equivalised income quintile					
Quintile 1 (Low)	82.4	11.7	5.2	0.8	100.0
Quintile 2	87.9	8.2	3.4	0.6	100.0
Quintile 3	89.2	7.9	2.4	0.5	100.0
Quintile 4	91.5	6.5	1.6	0.5	100.0
Quintile 5 (High)	91.7	6.1	1.6	0.6	100.0
Total	88.9	7.9	2.6	0.6	100.0

Table 2.3 summarises details on the percentage of families participating at Wave 2 as well as the Odds Ratios of doing so, according to a broader range of Wave 1 background characteristics than are presented in Table 2.2. Column A presents the percentage of families completing in each group. Column B presents the unadjusted or bivariate Odds Ratio of participation in Wave 2 and Column C presents the adjusted Odds Ratios, simultaneously controlling for all variables in the table. From Column B one can see that on a bivariate basis almost all of the indicators of social advantage/disadvantage are significantly associated with participation in the study at Wave 2. Slightly older families in which the Primary Caregiver is better educated and in higher social class and income categories were more

likely to participate in Wave 2. For example, families in which the Primary Caregiver was 45 years or older were 2.53 times as likely to participate in Wave 2 as their younger counterparts in which the Study Child's main carer was less than 30 years of age. Families with a degree-educated Primary Caregiver were 3 times more likely to participate than those in which s/he had left school with a Junior Certificate or less.

The relationship between participation in Wave 2 and some of the respondent's characteristics deserves special mention. The figures show, for example, that families in which the Primary Caregiver was a non-smoker were 1.58 times more likely to participate in Wave 2 than smokers. Similarly, participation at Wave 2 was related to the Primary Caregiver's frequency (not volume) of alcohol consumption ('regular' drinkers were 2.83 times more likely to participate than non-drinkers or those who drank less than once a month). The relationships here are confounded with underlying measures of social advantage. In general, frequency of drinking alcohol is positively related to social advantage while smoking is negatively related to the same measures, including educational attainment. The underlying trends between smoking, drinking and participation at Wave 2 are related to social advantage, rather than to drinking or smoking per se. A characteristic of note is whether or not the Primary Caregiver had completed the sensitive questionnaire at Wave 1. This can be taken as a crude measure of the family's engagement with the project. Families in which the Primary Caregiver completed the Wave 1 sensitive questionnaire were over three times more likely than others to participate at Wave 2.

Column C of Table 2.3 presents comparable Odds Ratios, adjusted for all variables in the table. The most significant point to note is that only the Primary Caregiver's educational attainment and age retain a significant systematic relationship with participation in Wave 2. Other measures of social advantage/disadvantage cease to be significant. Completion of the Primary Caregiver's sensitive questionnaire at Wave 1 also continued to be significantly related to participation at Wave 2 (OR 1.77), albeit on a substantially attenuated basis relative to the bivariate relationship.

Table 2.3: Association between completing the survey at Wave 2 and background characteristics (A) Percentage of families participating in Wave 2; (B) Unadjusted Odds Ratio of completing the survey/(bivariate); (C) Adjusted Odds Ratio

Characteristic in Wave 1	Category	A Percentage Participating in Wave 2	B Unadjusted Odds Ratio (Bivariate)	C Adjusted Odds Ratio (Multivariate)
Child's gender	Boy	89.4	1.10	1.04
	Girl (Ref)	88.4	1.00	1.00
Family Type	One-parent, 1-2 children (Ref)	82.8	1.00	1.00
	One-parent, 3+ children	83.9	1.08	1.27
	Two-parent, 1-2 children	88.5	1.60**	1.05
	Two-parent, 3+ children	90.6	2.00**	1.28
Primary Caregiver's Age	<29 years (Ref)	79.1	1.00	1.00
	30 – 34 years	84.8	1.48*	1.25
	35 – 39 years	88.6	2.05**	1.45*
	40 – 44 years	90.7	2.57**	1.55**
	45+ years	90.6	2.53**	1.67**
Primary Caregiver Working Outside Home	Working	87.5	1.28**	0.98
	Not Working (Ref)	89.9	1.00	1.00
Primary Caregiver's Educational Attainment	Junior Certificate or less (Ref)	82.0	1.00	1.00
	Leaving Certificate	88.6	1.71**	1.37**
	Certificate/Diploma	89.4	1.85**	1.40*
	Degree	93.4	3.01**	1.98**
Family Social Class	Professional/managerial	92.1	2.87**	1.32
	Other non-manual/skilled manual	86.4	1.57**	0.98
	Semi-skilled/unskilled manual	85.1	1.41*	1.11
	Never worked – no class assigned (Ref)	80.2	1.00	1.00
	Location	Open country	90.3	1.23*
	Urban <10,000	88.1	0.98	1.05
	Urban 10,000+ (Ref)	88.3	1.00	1.00
Accommodation Tenure Status	Privately owned or purchasing	90.4	2.21**	1.15
	Local Authority Rented (Ref)	81.0	1.00	1.00
	Private Rental	80.1	0.94	0.67*
	Other	79.7	0.92	0.66
Primary Caregiver a smoker	Smoker (Ref)	85.3	1.00	1.00
	Non-smoker	90.2	1.58**	1.10
Primary Caregiver's frequency of drinking alcohol	None/less once/month (Ref)	86.8	1.00	1.00
	Infrequent	89.2	1.25*	1.15
	Moderately frequent	89.9	1.35**	1.07
	Regular	94.9	2.83**	1.96

Primary Caregiver Experienced Depression	Yes (Ref)	85.9	1.00	1.00
	No	90.2	1.51**	1.16
	Missing	78.3	0.60**	0.67*
Equivalised Income Quintile	Quintile 1 (Low) (Ref)	82.4	1.00	1.00
	Quintile 2	87.9	1.55**	1.23
	Quintile 3	89.2	1.77**	1.21
	Quintile 4	91.5	2.29**	1.39*
	Quintile 5 (High)	91.7	2.37**	1.20
	Quintile missing	84.4	1.15	0.80
PCG Sensitive questionnaire completed	Yes completed	89.2	3.45**	1.77*
	Not completed (Ref)	70.5	1.00	1.00

**significant at $p < 0.01$

*significant at $p < 0.05$

2.5 Reweighting the Data

To account for the differential attrition the data from Wave 2 of the survey were statistically adjusted or reweighted to ensure that they were fully representative of the population of children who were resident in Ireland at 9 years and who were still living here at 13 years.

The weighting is based on a standard iterative procedure for adjusting the completed sample to known population totals. The specific weighting system used is called GROSS. This is based on a minimum information loss algorithm which fits population marginals in a regression framework and adjusts the sample to ensure that it produces estimates which match known population parameters. It has been used extensively by the ESRI since 1996.⁴

The sample weights for Wave 2 of the Child Cohort were constructed by first excluding from the target sample the 103 families who were identified as being no longer resident in Ireland at the time of the second interview (see Table 2.1). This means that the valid target sample for Wave 2 was 8,465 respondents,⁵ of whom 7,525 were successfully interviewed. The first stage in reweighting the Wave 2 sample was to adjust the socio-demographic structure of these 7,525 responding families in the Wave 2 valid sample of 8,465 families⁶. This was an attrition weight which accounted for attrition between Waves 1 and 2. The final Wave 2 weight for each case was then calculated as the product of the attrition weight and the Wave 1 weight. This latter had been generated so as to adjust the distribution of the completed Wave 1 sample to known population figures

⁴ See, for example, Gomulka, J., 1992. "Grossing-Up Revisited", in R. Hancock and H. Sutherland (Eds.), *Microsimulation Models for Public Policy Analysis: New Frontiers*, STICERD, Occasional Paper 17, LSE.

Gomulka, J., 1994. "Grossing Up: A Note on Calculating Household Weights from Family Composition Totals." University of Cambridge, Department of Economics, Microsimulation Unit Research Note MU/RN/4, March 1994.

⁵ 8,568 respondents from Wave 1 minus 103 who were identified as having permanently moved outside the State between Waves 1 and 2.

⁶ Excluding the 103 families who were identified as having moved outside the State between Waves 1 and 2.

on 9-year-olds who were then resident in the country⁷. The first step in generating the Wave 2 weight takes account of differential attrition between Waves 1 and 2 and the second step takes account of design and differential response in the original sample at Wave 1. The main variables/family characteristics used to adjust for differential inter-Wave attrition included:

- Study Child's gender
- Family structure
- Primary Caregiver's age
- Mother's Principal Economic Status (if resident)
- Father's Principal Economic Status (if resident)
- Father's social class (if resident)
- Mother's social class (if resident)
- Family social class
- Ethnicity
- Accommodation tenure status

The above variables, inter alia, were also used to calculate the Wave 1 weights. In addition to these variables, some respondent characteristics which were recorded at Wave 1 were found to be associated with attrition at Wave 2 and so were also included in generating the first step of the Wave 2 weights (the attrition weight). These variables were:

- Regularity with which Primary Caregiver smoked cigarettes
- Regularity with which Primary Caregiver drank alcohol
- Size of location of the household
- Whether or not Primary Caregiver had ever experienced depression
- Equivalised family income quintile at Wave 1
- Whether or not the Primary Caregiver 'Sensitive Questionnaire' (self-completion module) had been completed at Wave 1. This was included as a measure of the respondent's commitment to or engagement with the study.

The final longitudinal weight which is applied to the data on the 13-year-olds is the product of the Study Child's statistical weight at Wave 1 and his/her attrition weight by Wave 2.

In summary, the completed sample at Wave 2 was adjusted so that its distribution according to the above variables was in line with that of the Wave 1 completed sample, having adjusted for the families who had left Ireland between Waves. This adjusts to the longitudinal population of

⁷ See *Guide to the Datasets Wave 1 of the Nine-Year Cohort of Growing Up in Ireland* at <http://www.ucd.ie/issda/static/documentation/esri/GUI-Guide9YearCohort.pdf> for details on how the Wave 1 weight was generated.

children who were living in Ireland at 9 years of age and who continued to be resident within the State at 13 years.

3. INSTRUMENT DEVELOPMENT AND PILOTING

3.1 Instrument Design

The questionnaires were developed by the Study Team at both the ESRI and TCD, in association with many other groups involved in the Study. These are outlined below.

The **Scientific and Policy Advisory Committee (SPAC)** is a non-executive group that provided scientific and policy advice on the content and best practice of the design, implementation and roll-out of the study. Its ten members were selected from a broad range of backgrounds in areas related to children and large-scale longitudinal surveys – substantive, technical and policy.

The Children’s Advisory Forum (CAF) was set up to advise the Study Team on how to ensure that the views and opinions of children were appropriately incorporated into the design and development of the study. Membership of the CAF was voluntary and children were free to withdraw from the CAF if they wanted to. A total of 84 children was selected for inclusion in the forum.

Four expert panels (containing just over 45 members) assembled by the Study Team also contributed to the design and instrumentation used in *Growing Up in Ireland*. The panels of experts were made up of specialists drawn from a wide range of backgrounds and were consulted throughout the development phase of the project and on an on-going basis. They were asked to suggest domains, topics and questions which were of particular relevance to their specific areas of expertise, and were also asked to provide references to other studies that had previously covered these areas, or for justification for the inclusion of innovative question topics.

Members of the Study Team also met with other relevant stakeholder groups and feedback from these meetings was incorporated into the development of the instrumentation and the design of the project in general.

In developing the instrumentation, the Study Team synchronised, as far as possible, with other longitudinal child cohort studies, in order to enable later comparison as well as to draw on their experiences and lessons learned by them.

3.2 Piloting the Instruments

Two distinct phases were involved in the testing and piloting of the Wave 2 instrumentation and procedures. The first pilot was conducted in the Study Child's home and school. It involved interviewing the young people in both locations (i.e. both a home and school setting). The purpose of the second pilot was principally to test the feasibility of undertaking all fieldwork with the 13-year-olds and their families in their homes, thus avoiding fieldwork in the Study Child's school. The second pilot was also used to test the feasibility of using two laptops in the home to administer questionnaires to the young people and their parents in parallel, thus effecting substantial savings in contact time with the family⁸.

⁸ See *Williams, J. And Thornton, M. (2014) Report on the Pilot and Pilot Extension phases of the Child Cohort (at thirteen years)* for more detail

4. SURVEY INSTRUMENTS

4.1 The School-Based Instruments

A four-page questionnaire for recording school-level information was self-completed by the Principal of each participating school.

The questionnaire modules are outlined in the table below, and the questionnaires are given in full in the *Questionnaires and Other Documents Relating to Fieldwork for Wave 2 of the Child Cohort (at 13 years)* document (available from <http://www.ucd.ie/issda/data/growingupinirelandgui/>).

School based instruments

Respondent	Mode	Summary of content
Principal	Self-completion (on paper)	Personal information in respect of the school principal: gender, age, experience, his / her sense of job satisfaction
		Basic information about the school: gender mix, religious ethos, type of school, DEIS status
		School resources: staff, learning support, school building
		Student body: pupils with difficulties, support to new students, over-subscription and entrance criteria, attendance and absence levels, ability-mix and social-mix
		School practices and policies: subjects offered, extra-curricular activities, parent-teacher meetings, bullying, student council, school climate, healthy eating

4.2 The Household Instruments

The home-based questionnaires used with child cohort in *Growing Up in Ireland* at 13 years were divided into modules of questions according to topic. Interviews were conducted with the Primary Caregiver – the person who provided most care to and who knew most about the young person (usually his/her mother or mother figure); the Secondary Caregiver – the spouse or partner of the Primary Caregiver (usually the young person's father or father figure) (where applicable) and the Study Child him- or herself. The various modules for the different questionnaires used in the home-based phase of the study are outlined in Table 4.1 below, and are given in full in *Questionnaires and Other Documents Relating to Fieldwork for Wave 2 of the Child Cohort (at 13 years)* document (available from <http://www.ucd.ie/issda/data/growingupinirelandgui/>).

Table 4.1: Summary of household-based instruments

Respondent	Mode	Summary of content
Primary Caregiver	CAPI Interview (Main questionnaire)	Module/Section
		A: Household Composition
		B: Child's Health
		C: Respondent's Health
		D: Child's Emotional Health and Well-Being
		E: Child's Education – Past and Present
		F: Family Context
		G: Socio-Demographics
		H: About You
		J: Neighbourhood/Community
		Self-completion (on CASI) (Sensitive questionnaire)
		Reasons for people leaving the household since Wave 1
		Relationship to child
Current marital status		
Relationship with partner		
Parental stressors scale		
Currently pregnant (women only)		
Current smoking and drinking		
Drug use		
Mental health		
Contact with the Criminal Justice System		
Information on non-resident parent (if relevant)		
Measurements	Height and weight	
Secondary Caregiver	CAPI Interview (Main questionnaire)	Module/Section
		A: Introduction
		B: Parental Health
		C: Family Context
		D: Socio-Demographics
		E: About You
		Self-completion (on CASI) (Sensitive questionnaire)
		Reasons for people leaving the household since Wave 1
		Relationship to child
		Current marital status
		Relationship with partner
		Parental stressors scale
		Currently pregnant (women only)
Current smoking and drinking		
Drug use		
Mental health		
Contact with the Criminal Justice System		
Information on non-resident parent (if relevant)		
Measurements	Height and weight	
Young Person	Self-completion (on CASI) (Main questionnaire)	School
		Activities
		Exercise and Sport

		Food
		Friends
		Bullying
		Body image and Dieting
		Parental discipline
		Self-concept (Piers Harris)
		Self-completion (on CASI) (Sensitive questionnaire)
		Relationships and Sexuality Education
		Maturation questions
		Delinquency and ever been in trouble with the Gardai
		Psychotic experiences
		Smoking, alcohol and drug use
		Parenting style
		Self-completion (on CASI)(Supplementary questionnaire)
		Getting along with [Mum]
		[Mum's] Parenting Style Inventory II (Adapted)
		Measurements
		Height and weight
		DRT Tests
		BAS Matrices Tests

The self-complete sensitive questionnaire contained some questions which could be deemed as very sensitive, therefore it was decided that it would be appropriate to ask the parent's permission for the young people to answer the questions. A copy of the blank questionnaire was made available to parents so that they could see the exact questions which would be asked of the young person, although it was made clear that the parents would not be able to see the information contained in the completed questionnaires. If the parents did not consent to the young people being asked these sensitive questions they did not appear on the Computer Aided Self-Completion Interview. A total of 96% of parents gave consent for the young person to complete the sensitive questionnaire.

Completion of the supplementary questionnaires (Parenting Style Questionnaires) by the 13-year-old in respect of non-resident parents is clearly a very sensitive issue and one which had to be handled with the highest regard to the Child Protection and ethical issues involved. In situations in which the young person's Mother or Father was in a new relationship (with a resident partner who was not the child's biological parent) it was important to be clear as to whom the 13-year-old was referring when he / she completed a questionnaire in respect of 'Mum' or 'Dad' i.e., whether or not the questionnaire was being completed in respect of the biological parent or, for example, the resident partner of the Study Child's Mum/Dad. The potential uncertainties surrounding this issue were exacerbated in situations where the young person resided with a biological parent and his/her partner but also maintained contact (possibly frequent contact) with the non-resident biological parent.

To eliminate any ambiguity about whom the young person was completing the questionnaire, the Young Person Supplementary Instrument was split into a number of separable sections – potentially four as follows:

- **Supplementary Questionnaire (Mum section)** – young person completed this questionnaire on his/her relationship with the *biological* Mum.
- **Supplementary Questionnaire (Dad section)** – young person completed this questionnaire in respect of his/her *biological* Dad.
- **Supplementary Questionnaire (Mum’s Partner section)** – young person completed this questionnaire on his/her relationship with *Mum’s partner* where latter is not the biological Dad.
- **Supplementary Questionnaire (Dad’s Partner section)** – young person completed the questionnaire on his/her relationship with *Dad’s partner* when latter was not the biological Mum.

This means that each 13-year-old completed the Young Person Main Questionnaire and the Sensitive Questionnaire (where parental consent was given). In addition, s/he completed the Mum (M), Dad (D), Mum’s Partner (MP) or Dad’s Partner (DP) sections of the sensitive supplement as appropriate to the family structure. The questionnaires in respect of non-resident biological Mum or biological Dad were administered if the child had had contact with the non-resident Mother/Father within the 12 months preceeding the interview. The following was used as a guideline for the possible combination of questionnaires applicable to the 13-year-old. It should also be noted that attempts to administer these questionnaires was made only with explicit permission from the Primary Caregiver.

Family composition	Questionnaire
A. Mother and father (biological/adoptive)	M and D
B. Mother and her partner (contact with biological father)	M, MP and D
C. Mother and her partner (no contact with biological father)	M and MP
D. Mother with no partner (contact with biological father)	M and D
E. Mother with no partner (no contact with biological father)	M
F. Father and his partner (contact with biological mother)	D, DP and M
G. Father and his partner (no contact with biological mother)	D and DP
H. Father with no partner (contact with biological mother)	D and M
I. Father with no partner (no contact with biological mother)	D

In order to achieve as inclusive a sample as possible the household questionnaires were also available in a number of different languages (for completion on paper). As well as Irish and English, all questionnaires (and other documentation) were available in Chinese, French, Lithuanian, Polish and Romanian.

In addition to the questionnaires which were administered to the Primary and Secondary Caregivers and Study Children, interviewers recorded the adults’ height and weight as well as the height and weight of the child. A medically approved mechanical SECA 761 weighing scales was used for the recording the weights and a Leicester measuring stick for recording the heights.

Children also undertook three standardised cognitive tests which were administered directly by the interviewer in the home. These tests were the Drumcondra Reasoning Tests in Verbal Reasoning and Numerical Ability and the Matrices Tests from the British Abilities Scales (Elliott, Smith & McCulloch, 1996).

5. FIELDWORK AND IMPLEMENTATION

5.1 Interviewer Training

Fieldwork was carried out by the ESRI's national panel of interviewers. All interviewers received in-depth training prior to beginning work on the project. This included the following modules:

1. Background and objectives of the study
2. Detailed review of the content of all questionnaires
3. Familiarisation with, and practice on, using the Computer Assisted Personal Interview system (CAPI)
4. Fieldwork procedures
5. Adult and child measurements (height and weight) and GPS co-ordinates
6. Instruction and practice in the administration of the direct child assessments (DRT and BAS tests)
7. Child protection guidelines and incident reporting
8. Ethics
9. Summary of other documentation used in the administration of the survey.

5.2 Vetting

Growing Up in Ireland was carried out under the Statistics Act (1993). This is the same legislation as is used, for example, to carry out the Census of Population. Interviewers were appointed as 'Officers of Statistics' for the purposes of this project. This included a confidentiality clause on non-disclosure of information which was recorded in respect of a family or child to any unauthorised person, for any purpose.

In addition to being appointed Officers of Statistics, all interviewers (as well as and all other staff involved in the project) were security vetted by An Garda Síochana (the Irish Police Force).

5.3 Interviewer Guidelines on Interviews with Adults and Children

Children and young people are clearly central to this project. Questionnaires completed by the parent(s)/guardian(s) recorded details (often sensitive) relating to the Study Child and his/her characteristics. A unique aspect of the project was the extent to which the children themselves were interviewed. The importance of privacy and confidentiality for both adults and children was impressed upon interviewers.

Strict guidelines were given in relation to interviewing young people. For example, interviewers were instructed to never allow themselves to be

alone with a child or young person under 18 years of age during any component of the interview.

5.4 Contacting a Household

Information about the second phase of the study was sent to the families who had taken part in Wave 1 in advance of the first contact from the interviewer. Interviewers then made a first face-to-face visit to the household to organise an appointment to carry out the interview at a time which was convenient for the family. Inclusion in the second Wave of the study was on an opt-out basis with consent forms being signed by the parent (s)/ guardian(s) prior to the start of the interview. A copy of the introductory letter, information leaflet and the consent forms are included in *Questionnaires and Other Documents Relating to Fieldwork for Wave 2 of the Child Cohort (at 13 years)* document (available from <http://www.ucd.ie/issda/data/growingupinirelandgui/>).

5.5 Follow Up / Tracing Information

On successful completion of the surveys, interviewers asked the Primary Caregiver to fill out a follow-up/tracing sheet. This recorded alternative contact details of someone from outside the household who would be able to assist the Study Team in contacting the family should it move between the current and subsequent interviews. The respondent's PPS number was also recorded, with a view to assisting the Study Team in tracing the respondent if he/she moved address.

5.6 Incidents

A detailed *Growing Up in Ireland* Child Welfare and Protection protocol was developed by the Study Team. One aspect of this involved an incident report system. All incidents were immediately reported by interviewers to their Field Support Contact at Head Office and a detailed Incident Report Form was completed. Given that interviews often took place outside office hours during the week and also at weekends, interviewers were provided with an emergency telephone number which could be used to contact the Study Team on a 24-hour, 7 day basis. Interviewers were instructed that in extreme circumstances, where a child or other vulnerable person was thought to be in immediate danger they should use their own discretion and contact the Gardai if necessary, without recourse to the Study Team.

6. STRUCTURE AND CONTENT OF THE DATA FILE

6.1 The Structure of the Household and School Data File

Both the Researcher Microdata File (RMF) and Anonymised Microdata File (AMF) are presented as a flat rectangular datafile based on a simple concatenation of all home-based questionnaires followed by the questionnaires completed by the school Principal. The case-base is the young person (the 13-year-old). This means that the user does not have to be concerned about matching questionnaires within the family.

The scores for the Drumcondra Reasoning Tests and the BAS Matrices test are appended at the end of the file – after the data from the school Principal.

6.2 Variable Naming

Variables for Wave 2 of the Child Cohort are prefixed with ‘pc2’ for Primary Caregiver ‘sc2’ for Secondary Caregiver; and or ‘cq2’ for Study Child. The ‘2’ indicates that the data come from the second wave of the project. For example, question B1 from the Primary Caregiver questionnaire Wave 2 of the Child Cohort has the variable name ‘pc2B1’.

Other variables from the second wave not directly referring to either caregiver (including derived variables) are prefixed ‘w2’.

The only exceptions to this convention are the household grid variables which are prefixed with the person number. For example, the variable for the sex of the person on line 1 of the grid is ‘P1sexW2’ where ‘W2’ indicates Wave 2 data.

Blocks of variables appear in the dataset in the following order (variable prefixes are shown in brackets):

- Household Grid (p1xxW2, p2xxW2 etc)
- Primary Caregiver Main Questionnaire (pc2)
- Primary Caregiver Sensitive Questionnaire (pc2S)
- Secondary Caregiver Main Questionnaire (sc2)
- Secondary Caregiver Sensitive Questionnaire (sc2S)
- Child Main Questionnaire (cq2q)
- Child Sensitive Questionnaire (cq2s)
- Child Supplementary (M,D,MP) Questionnaire (cq2m/d/mp)
- Standardised Scale Scores (w2)
- Physical Measurements (w2)

Derived Variables (w2)

The Study Team would advise that the data are used in conjunction with the Questionnaire Documentation. This is the most efficient way to get a broad overview of the topics included in the data file. The user should note, of course, that with a view to ensuring anonymisation of the data, not every question from the questionnaires is included in the datafile – particularly in the case of the *AMF* dataset. A list of variables included in each datafile is available via the appropriate summary data dictionary.

6.3 Identification Codes

There are two levels of identification codes on the file and both are anonymised. The first is at the level of the household, with a unique identification code for each case in the file. The second is at the level of the Study Child's second-level school. An anonymised school identification code is provided on the RMF to allow for analysis at the school level.

6.4 The Household Grid

The household grid contains the information on the members of the household, i.e. who lives in the household, their person number on the grid, gender, relationship to both the Primary Caregiver and the Study Child, age and principal economic status. This information (except for economic status) was collected at Wave 1 and fed forward for review and update (as appropriate) by the respondent in the course of the interview at Wave 2. Details were recorded such that the Primary Caregiver (usually the mother) was on line 1, the Study Child (young person who is the focus of the study) was on line 2, and (where relevant) the Secondary Caregiver was on line 3. The Study Child's twin or triplet etc was on lines 4,5 as appropriate, unless there was no Secondary Caregiver in the family, in which case the twin or triplet was included were on lines 3,4.

At Wave 2, the Primary Caregiver from Wave 1 was asked to check that the information recorded was correct and still valid, if not, to correct and/or update. New members of the household could be added to the grid and others removed (as relevant). The variables labelled 'P1xxW2' etc represent the information current at Wave 2 including any corrections. On the *RMF only*, the original line number for the person at Wave 1 can be found in the variables named 'origlineP1' etc. Note that individuals with an original line number from 21 onwards are new additions to the grid at Wave 2. The variables named 'pc2stillp3' etc. indicate whether or not the person on that line number (e.g. line 3) at Wave 1 is still resident in the household.

In families in which the Primary Caregiver at Wave 1 had become the Secondary Caregiver by Wave 2 (and hence would not be completing the Wave 2 Primary Caregiver Questionnaire), s/he was asked to review (and correct if necessary) the grid information which s/he had provided at the first interview and then to continue to fill out the Wave 2 Secondary Caregiver questionnaire. This was done to meet the guarantees of confidentiality of information which were given to respondents at Wave 1. At the first interview in Wave 1 respondents were told that no-one would have sight of the information which they provided in the course of their interview, including the information contained in the household grid. In a small number of families where the Primary Caregiver from Wave 1 was no

longer resident with the child in the household, a completely new household grid was filled out by the new Primary Caregiver at Wave 2. Whether or not the Primary Caregiver and Secondary Caregiver roles at Wave 2 were being taken by the same individual as in Wave 1 is indicated by the variables ‘**pcgstatph2**’ and ‘**scgstatph2**’.

As noted, where there is a Secondary Caregiver, s/he will be person 3 on the household grid. However, not all persons on line 3 of the household grid are Secondary Caregivers. For example, in a one-parent family the third person will be another household member (other than the Primary Caregiver or Study Child). A variable has been included in the database to highlight whether or not a partner of the Primary Caregiver (by definition the Secondary Caregiver) is resident in the household (**w2partner**).

Details obtained in the household grid, such as dates of birth, gender and relationships are very important in terms of derived variables. Consequently, some editing of the information took place where it was clear from relevant details on the body of the questionnaire that this was appropriate. There are, however, a few minor outstanding anomalies between the information given on the interviewer administered household grid and that given in the Primary Caregiver Sensitive questionnaire (self-completed on CASI).

The reader should note that (for anonymisation purposes) exact dates of birth have been removed from the archived file and replaced with age in years.

6.5 The Main Respondent – Primary Caregiver

The Primary Caregiver was self-identified within the home as the person who provided most care to the Study Child and who knew most about him/her. In most cases, this was the child’s mother though in a small proportion of cases the Study Child’s father identified himself as the Primary Caregiver even though the child’s mother lived in the household.

As noted above, in some cases the Primary and Secondary Caregiver from Wave 1 had swapped roles between waves. This is flagged by the variables ‘**pcgstatph2**’ and ‘**scgstatph2**’ (note that more detailed information on the inter-wave swapping of roles is provided in the *RMF*).

6.6 Twins

There is a data record for each child included in the sample. In households with resident non-singletons either two or three data records (for twins and triplets respectively) are included. All non-singleton children are coded as ‘**Nonsingleton**’ in the file.

6.5.1 *How many twins?*

There is a total of 227 non-singleton children included in the dataset. This is made up of 95 sets of twins where both children were successfully interviewed, a further 24 cases where just one twin was interviewed (the other twin refused/was unable to complete), three sets of triplets where all relevant children were successfully interviewed and two sets of triplets where only two of the three triplets were interviewed.

6.5.2 Interview Procedures for Non-singleton Births

In situations where there was a non-singleton in a family a full interview (with all relevant sensitive supplements) was administered in the normal way to each of the children in question. In addition, a core questionnaire was administered to the Primary and Secondary Caregivers (where relevant) in the normal way to record the characteristics of the informant him/herself. These core questionnaires included details on, for example, the informant's health status and lifestyle, socio-demographic characteristics etc. In addition, the Primary and Secondary Caregivers were asked to complete a questionnaire containing the relevant questions specific to *each of the non-singleton study children* – for example, in respect of the Primary and Secondary Caregiver's relationship with the child and so on. Subsequent to interview, a data record was constructed for each non-singleton child to include the common questions relating to the Primary and Secondary Caregiver him/herself as well as the *child-specific* questions in respect of each of the non-singletons in question.

6.7 Weighting Variables

In line with best practice in sample surveys the data have been re-weighted or statistically adjusted to ensure that the sample is wholly representative of the population from which it has been drawn. By doing this one ensures that the structure of the completed sample is in line with the structure of the population along key socio-demographic and other dimensions.

The datafile contains a weighting factor (**wgt_13yr**) as well as a grossing factor (**gross_13yr**). The weighting factor (**wgt_13yr**) incorporates the structural adjustment of the completed sample to the population, whilst maintaining the total completed sample size of 7,525 cases. The grossing factor (**gross_13yr**) calibrates to the estimated Wave 2 population total of 55,796 children aged 13 years who were resident in Ireland at Wave 1 and continued to be resident at Wave 2. Both **wgt_13yr** and **gross_13yr** provide the user with the same structural breakdown of the data. The former (which maintain the actual number of cases) can be used in significance testing and data modelling. More detail on the specifics of the weighting / grossing procedure is provided in Chapter Two above.

6.8 Derived Variables

In this section we discuss the derived variables included in the dataset which have been generated from information recorded in the original interview.

The derived variables are mostly included at the end of the household files, i.e., after the Child Supplementary questionnaires, and before the school Principal questionnaire, with the exception of the weighting variables (**wgt_13yr**; **gross_13yr**) and the variable relating to the number of Caregivers in the household (**w2partner**).

6.8.1 Variables derived from the Household Grid

6.8.1.1 Household type (w2hhtype4)

This is based on whether or not the primary caregiver is married/cohabiting or is living alone with children, and the number of children (under 18 years) in the household. This fourfold classification gives the number of parents (one or two) and children (< three; >= three).

6.8.2 Household income and social class

6.8.2.1 Equivalised income (w2equivinc; w2incquin; w2incdec)

In order to make meaningful comparisons across households of their income, household size and structure must be taken into account. This is done by creating an ‘equivalised’ household income. In *Growing Up in Ireland*, an equivalence scale was used to assign a “weight” to each household member. The equivalence scales assigned a weight of 1 to the first adult in the household, 0.66 to each subsequent adult (aged 14+ years living in the household) and 0.33 to each child (aged less than 14 years). The sum of these weights in each household gives the household’s equivalised size – the size of the household in adult equivalents. Disposable household income is recorded as total gross household income less statutory deductions of income tax and social insurance contributions. Household equivalised income is calculated as disposable household income divided by equivalised household size. This gives a measure of household disposable income which has been “equivalised” to account for the differences in size and composition of households in terms of the number of adults and/or children they contain.

Equivalised income is also given in quintiles and deciles in the AMF and RMF.

6.8.2.2 Household class (w2hsdclass)

Social Class of Primary and Secondary Caregiver is derived from their occupation. In the course of their interview, both caregivers (where relevant) were asked to provide details on their occupation, from current, or previous employment outside the home (the latter in situations in which the respondent was unemployed or retired at the time of their interview). On this basis it is possible to generate a social class classification for both Primary and Secondary Caregiver. The classification used was that adopted by the Irish Central Statistics Office (CSO) with 9 categories as follows:

- Professional managers
- Managerial and technical
- Non-manual
- Skilled manual
- Semi-skilled
- Unskilled
- All others gainfully occupied and unknown
- Employment status unknown
- Validly no social class

The “validly no social class” category refers to situations in which the Primary (and Secondary, if relevant) Caregiver has had no occupation outside the home and so cannot (by definition) be assigned a social class code. It does not refer to situations in which the information on occupation is missing or not recorded for any reason.

The *household's* Social Class (in contrast to Primary or Secondary Caregiver social class) is then taken as the higher Social Class category of both partners in the household (as relevant). This standard procedure of selecting the higher of two class categories is referred to as the dominance criterion.

6.8.3 Physical measurements – Height, weight and Body Mass Index (BMI)

Height and weight measurements were recorded by the interviewer in the course of the household interview for the Primary and Secondary Caregivers (where applicable) and the Study Child. Weight and height of the Primary and Secondary Caregivers and the Study Child were recorded at the end of the interview. Weight was recorded using medically approved weighing scales (SECA 761 flat mechanical scales). Height was recorded using a standard measuring stick (Leicester portable height measure). Measures of height were standardised – converted to inches and divided by 2.54 – to be recorded in centimetres, while weights were computed into kilograms.

6.8.3.1 Height

The heights recorded by the interviewer of Primary and Secondary Caregivers as well as the Study Child (**w2intpcgcms**, **w2intscgcms** and **w2intchildcms** respectively) were recorded electronically on the CAPI programme. These were edited to remove clearly implausible outliers arising from mis-recording.

6.8.3.2 Weight

The weights recorded by the interviewer for Primary and Secondary Caregivers as well as the Study Child (**w2intpcgkgms**, **w2intscgkgms** and **w2intchildkgms** respectively) were recorded electronically on the CAPI programme, and edited to remove clearly implausible outliers arising from mis-coding.

6.8.3.3 BMI

BMI scores for Primary and Secondary Caregivers were derived from the interviewer measures (**w2intpcgbmi** and **w2intscgbmi**) and were also recoded into categories – underweight, healthy, overweight and obese (**w2intpcgbmi_rec** and **w2intscgbmi_rec**). These correspond to Garrow-Webster cut-off points.

BMI scores for the Study Child were also derived from the interviewer measures (**w2intchildbmi**) and were recoded into categories – non-

underweight, overweight and obese (**w2intchildbmi_rec**), which correspond to the International Obesity Task Force (IOTF) cut-off points for children.

6.9 Scaled Measures Used in the Study

A number of scaled measures were used in the *Growing Up in Ireland* and scored by the research team using protocols provided by the authors. These are briefly described below.

6.9.1 *Piers-Harris II Children's Self-Concept Scale*

Children's self-concept was measured using the Second Edition of the Piers-Harris Children's Self-Concept Scale. This is a 60-item self-report scale completed by the Study Child (young person). It is used to generate a composite score as well as scores on six subscales. The raw score as well as the categorised score for each is provided on the data file:

- Total Score – 60 items with scores from 0 – 60 (**w2ph_totalscore**) and categories ranging from 'Very low' to 'Above average' (**w2rangetot**)
- Behavioural Adjustment – 14 items with scores from 0 - 14 (**w2ph_behaviour**) and categories ranging from 'Very low' to 'Above average' (**w2rangebeh**).
- Intellectual and School Status – 16 items with scores from 0 - 16 (**w2ph_intellectual**) and categories ranging from 'Very low' to 'Above average' (**w2rangeint**).
- Physical Appearance and Attributes – 11 items with scores from 0 - 11 (**w2ph_physical**) and categories ranging from 'Very low' to 'Above average' (**w2rangephy**).
- Freedom from Anxiety – 14 items with scores from 0 - 14 (**w2ph_free_anxiety**) and categories ranging from 'Very low' to 'Above average' (**w2rangefre**).
- Popularity – 12 items with scores from 0 - 12 (**w2ph_popularity**) and categories ranging from 'Very low' to 'Above average' (**w2rangepop**).
- Happiness and Satisfaction – 10 items with scores from 0 - 10 (**w2ph_happiness**) and categories ranging from 'Very low' to 'Above average' (**w2rangehap**).

6.9.2 *Strengths and Difficulties Questionnaire (Goodman, 1997)*

The young person's behaviour was measured by the Strengths and Difficulties Questionnaire (SDQ). The questionnaire was completed by the Primary Caregiver. It contains 25 items which are divided into four negative and one positive subscales. The four negative subscales sum together to produce a Total Difficulties score:

- Emotional symptoms (**w2pcd2_sdqemot**)
- Conduct problems (**w2pcd2_sdqcond**)
- Hyperactivity/inattention (**w2pcd2_sdqhyper**)
- Peer relationship problems (**w2pcd2_sdqpeer**)
- Prosocial behaviour (**w2pcd2_sdqpro**)
- Total Difficulties (**w2pcd2_sdqtot**)

These scores are derived from **pcd2** in the Primary Caregiver questionnaire.

6.9.3 Pianta Child-Parent Relationship Scale (Short Form, Pianta, 1992)

The Pianta measures positive and negative aspects of the child-parent relationship. It was completed by both the Primary and Secondary Caregivers. The scale contains 15 items and has two subscales measuring ‘positive aspects’ and conflict in the child-parent relationship:

- Positive aspects (**w2pianta_positive_pcg**;
w2pianta_positive_scg)
- Conflict (**w2pianta_conflict_pcg**; **w2pianta_conflict_scg**)

(Suffixes PCG and SCG denote Primary Caregiver and Secondary Caregiver).

These scores are derived from **pc2fl** in the Primary Caregiver questionnaire and **sc2c1** in Secondary Caregiver questionnaire.

6.9.4 The Dyadic Adjustment Scale (Completed by Primary and Secondary Caregivers)

The 7-item Dyadic Adjustment Scale (DAS) provides an assessment of dyadic satisfaction based on participants' self-report and is used as a means of categorising couple relationships as either ‘distressed’ or ‘adjusted’. A general satisfaction score is generated from the sum of all 7 items and this is given for the Primary Caregiver (PCG) and, if appropriate, the Secondary Caregiver (SCG) (**w2das_tot_pcg**; **w2das_tot_scg** respectively).

The original variables comprising the scale were included in the Primary Caregiver Sensitive questionnaire, questions **pc2s19** and **pc2s20** (dyadic adjustment score for the Primary Caregiver) and Secondary Caregiver Sensitive questionnaire, questions **sc2s19** and **sc2s20** (dyadic adjustment score for the Secondary Caregiver).

6.9.5 CES-D Depression Scale (Completed by Primary and Secondary Caregivers)

The Center for Epidemiological Studies Depression Scale (CES-D) is a widely used self-report measure that was developed specifically as a screening instrument for depression in the general population, as opposed to being a diagnostic tool that measures the presence of clinical depression. *Growing Up in Ireland* used the 8-item short version of the CES-D and provides a total score for both Primary (PCG) and Secondary (SCG) Caregivers (**w2ces_tot_pcg**; **w2ces_tot_scg**). These are the sum of the raw scores from **pc2s31** and **sc2s31** on the Primary and Secondary Sensitive questionnaires respectively.

Also included in the file are two variables (**w2cesd_pcg**; **w2cesd_scg**), which categorise respondents into ‘depressed’ or ‘not depressed’. It is again noted that this is based on the CES-D8 screening tool and does not purport to be a clinical measure.

6.9.9 Parenting Stress (Parental Stress Scale, Berry & Jones, 1995)

Both positive and negative aspects of parenting are measured by the parental stress scale. It is asked of both the Primary and Secondary Caregivers:

- PCG Parental Stressors Scale (**w2mparstress**)
- SCG Parental Stressors Scale (**w2dparstress**)

6.9.10 Hazardous Drinking (FAST Alcohol Screening Test)

The FAST alcohol screening test is a short screening tool for alcohol misuse. It consists of four items and is completed by both the Primary and Secondary Caregivers (slightly different questions are asked – females are asked how often they have six or more drinks on one occasion and males are asked how often they have eight or more drinks). It produces a total score and a categorisation of ‘hazardous’ or ‘not hazardous’:

- PCG drinking class according to FAST (**w2fastclasspcg**)
- PCG total on FAST for males (**w2fastotm**)
- PCG total on FAST for females (**w2fastotf**)
- SCG drinking class according to FAST (**w2fastclassscg**)
- SCG total on FAST for males (**w2fastotm2**)
- SCG total on FAST for females (**w2fastotf2**)

6.9.11 The Inventory of Parent and Peer Attachment (IPPA) (Armsden and Greenberg, 1987)

Perceptions of the positive and negative affective/cognitive dimensions of relationships with their parents and close friends – and particularly how well these figures serve as sources of psychological security – are measured by the Inventory of Parent and Peer Attachment. The full measure comprises 25 items. The 17 items making up the Trust and Alienation subscales were used in *Growing Up in Ireland* with the 13-year-olds. The instrument is a self-report, completed by the Study Child:

- IPPA alienation subscale (**w2alienation**)
- IPPA trust subscale (**w2trust**)

6.9.12 The Short Mood and Feelings Questionnaire (SMFQ) (Angold et al., 1995)

The Short Mood and Feelings Questionnaire (SMFQ) is a screening tool for childhood and adolescent low mood or depression. It is self-completed by the young person and contains 13 items. The datafile contains a total score for this measure:

- SMFQ Total Score (**w2depression_c**)

6.10 Measuring Cognitive Ability

The young person also completed three tests of cognitive ability – the Drumcondra Reasoning Tests (Verbal Reasoning and Numerical Ability) and the British Ability Scales Matrices test. These tests were administered by the interviewer with the Study Child in the home. For both of the Drumcondra Reasoning Tests the percentage of items answered correctly as well as a logit score and its associated standard error are provided. The logit scores were calculated for *Growing Up in Ireland* by the Educational Research Centre (ERC) in St Patrick's College, Drumcondra who also developed the tests. The logit scores adjust the percentage correct score using two parameters (difficulty and discrimination) for each item. A total test score is also provided on the datafile which is the average of the two tests scores.

The BAS Matrices test is made up of 33 items and measures the young person's non-verbal reasoning ability. A total score as well as an age equivalent score is provided on the datafile.

- Drumcondra Verbal Reasoning test - percentage correct **vrpct**
- Drumcondra Verbal Reasoning test - Logit score **vrls**
- Drumcondra Verbal Reasoning test - Logit score standard error **vrlsse**
- Drumcondra Numerical Ability test - percentage correct **napct**
- Drumcondra Numerical Ability test - Logit score **nals**
- Drumcondra Numerical Ability test - Logit score standard error **nalsse**
- Drumcondra Total Score test - percentage correct **totpct**
- Drumcondra Total Score test - Logit score **totls**
- Drumcondra Total Score test - Logit score standard error **totlsse**
- BAS - total ability score for matrices **matabscore**
- BAS - matrices age equivalent **matage**

6.11 Coding and Editing

6.11.1 Consistency Checks

The CAPI questionnaires principally contained closed questions, with an extensive set of range and cross-variable consistency checks (both hard and soft)⁹. This meant that much of the coding and data checking was effectively dealt with as the interview took place. In some situations open questions were needed to capture verbatim responses that would have been difficult to pre-code. Where relevant, these open-ended responses were coded into separate categorical variables after the interview. Many of the

⁹ 'Hard' edit consistency checks in a CAPI program refer to cross-variable consistency checks which must be resolved by the interviewer in the field at the time of administration. Until the inconsistency is resolved by the interviewer it will not be possible to continue administering the questionnaire. In contrast, a 'soft' edit consistency check is one which signals an apparent inconsistency or extreme value from a respondent's answer to a question or set of questions. The extreme value may or may not be correct. If the interviewer administering the survey feels that it is a valid value, albeit extreme, s/he can suppress the soft edit check and continue with administering the survey.

open-ended questions relate to an ‘other specify’ option provided with some otherwise closed questions. All verbatim text from the original responses has been removed from the AMF and RMF. In terms of overall editing of the data, regular checks were carried out on the data as they were returned from the field and inconsistencies dealt with on an on-going basis.

With a second wave of data there arise the possibility of longitudinal inconsistencies, as well as cross-sectional inconsistencies within wave. For some key variables such as marital status these were checked and edited to provide more consistency where appropriate. However, there remain a small number of inconsistencies where it was not possible to make a judgement on an appropriate edit. In such cases the data were recorded on the AMF/RMF as they were returned from the field, with a view to the analyst interpreting any such information as they saw fit, in the light of their analysis.

6.11.2 Forward-feed from Wave 1

To reduce interview time at Wave 2 some variables were fed forward from Wave 1 and not asked again in the course of the second interview unless, for example, they were missing or a new respondent was completing the interview for the first time¹⁰. Where the Primary Caregiver and Secondary Caregiver from Wave 1 had swapped roles, the appropriate information was exchanged. A summary of all the variables that were fed forward from Wave 1, and the rules for determining their administration at Wave 2 is provided in Table 6.1 below.

Table 6.1: Details on variables forward-fed from Wave 2 (excluding household grid)

Variable name	Variable description	Rules
pc2g4a/ sc2d2	Year of returning to work	If PCG/SCG had not been working at Wave 1 but was working (or on maternity leave) at Wave 2, or if missing at Wave 1
pc2h4-h7/sc2e3-e6	Literacy and numeracy	If literacy or numeracy problems indicated at Wave 1, or new respondent or missing
pc2h11-h12/sc2e10-e11	Citizenship	If not an Irish citizen at Wave 1, or new respondent or missing.
pc2h13-h15/sc2e12-e14	Country of birth and length of time living in Ireland ¹³	If new respondent or missing.

¹⁰ Information from the household grid and adult height was also fed forward.

6.11.3 Differences between the Anonymised (AMF) and Researcher (RMF) Microdata Files

To protect the anonymity of respondents names, dates of birth and open text variables were removed from both types of file. In addition, *for the AMF only*, some variables with a higher risk of being disclosive were either removed or had their values banded into larger groups so that frequencies with low cell counts are not visible. In some instances this was achieved by either bottom or top coding (or both) of outlying cases. In others, continuous scores have been grouped into categories. Information particularly likely to be sensitive in nature (i.e. the majority of the variables in the sensitive questionnaires) has been removed from the AMF.

6.12 Data Linkage

A selection of additional variables have been added to the Researcher Microdata File from a number of sources. Details of these linked variables are outlined below.

School characteristics - from administrative files from the Department of Education and Skills

There is a range of information about schools freely available from the Department of Education and Skills. The following variables on the characteristics of the young person's school have also been included on the file:

- w2schboys
 - Male enrolment
- w2schgirls
 - Female enrolment
- w2schsize
 - Total enrolment
- w2schsizegrp
 - <200 pupils
 - 200 – 399 pupils
 - 400 – 599 pupils
 - 600 + pupils
- w2schgender
 - Coed
 - Boys
 - Girls
- w2schreligion
 - Roman Catholic
 - Interdenominational
 - Church of Ireland
 - Multidenominational
 - Methodist
 - Quaker
- w2schsector
 - Secondary
 - Vocational
 - Comprehensive
 - Community School
 - Primary School

- Special School
- w2schsector2
 - Girls secondary
 - Boys secondary
 - Coeducational secondary
 - Vocational
 - Community / Comprehensive
 - Primary School
 - Special School
 - Other
- w2schdeis
 - Not DEIS
 - DEIS
- w2schgael
 - English medium
 - All taught through Irish
 - Some taught through Irish
- w2schpriv
 - Not fee-paying
 - Fee-paying

Regional Identifier

A regional identifier has been added to the file. The regional classifications are based on the NUTS3 (Nomenclature of Territorial Units) classification used by Eurostat. The NUTS3 regions correspond to the eight Regional Authorities established under the Local Government Act, 1991 (Regional Authorities)(Establishment) Order, 1993, which came into operation on 1 January, 1994.

- w2region8_code Region code - 8 fold classification - NUTS 3
 - Border
 - Dublin
 - Mid-East
 - Midland
 - Mid-West
 - South-East
 - South-West
 - West

7. ETHICAL CONSIDERATIONS

In undertaking research with families and children ethical considerations assumed primary importance. Procedures relating to child protection were informed by the Children First: National Guidance for the Protection and Welfare of Children (Department of Children and Youth Affairs, 2011) as well as the relevant Acts in Irish legislation. Three acts are of particular relevance for this Study: the Data Protection Acts 1988, 2003 and the Statistics Act, 1993. All interviewers, as well as other staff working on *Growing Up in Ireland*, were security vetted by An Garda Síochána (the Irish Police Service).

All work in Wave 2 of the infant cohort was carried out under ethical approval granted by a dedicated and independent Research Ethics Committee (REC) convened by the Department of Children and Youth Affairs, specifically for the *Growing Up in Ireland* project.

REFERENCES

Berry, J.O. & Jones, W.H. (1995) *The Parental Stress Scale: Initial Psychometric evidence*. Journal of Social and Personal Relationships, 12(3), 463-472.

Collins, C. (2001) *Design of the National Children's Strategy Longitudinal Study of Children*. Unpublished report submitted to the Health Research Board by the consortium represented by S.Greene, A.Hyland, C.Kelleher, S.Mennell, B.Whelan and J.Wilde.

Elliott, C.D., Smith, P, & McCulloch, K (1996). *British Ability Scales Second Edition (BAS II): Administration and Scoring Manual*. London: NFER-Nelson.

Goodman, R (1997) *The Strengths and Difficulties Questionnaire: A Research Note*. Journal of Child Psychology and Psychiatry, 38, 581-586.

Greene S. et al., (2010) *Growing Up in Ireland, Background and Conceptual Framework*. Office of the Minister for Children and Youth Affairs.

Pianta, R.C. (1992) *Child-parent relationship scale*. Unpublished measure, University of Virginia.

APPENDIX

Appendix Table 1: Structure and composition of Wave 1 sample, interwave adjustments and exits from the longitudinal population and unweighted and grossed sample from Wave 2.

	A		B		C		D		E	
	Wave 1 pop ¹¹		Wave 1 - Wave 2 adjustments (exits)		Estimated Wave 2 pop ¹²		Unweighted Wave 2 sample		Grossed Wave 2 sample	
Characteristic Variable	No of Children	% of Children	No of Children	% of Children	No of Children	% of Children	No of Children	% of Children	No of Children	% of Children
Child's sex										
Boys	28865	51.1	299	42.8	28565	51.2	3679	48.9	28386	50.9
Girls	27632	48.9	401	57.2	27231	48.8	3846	51.1	27410	49.1
Total	56497	100	700	100	55796	100	7525	100	55796	100
Family Structure										
Cohabiting, 3 persons	513	0.9	7	1	506	0.9	84	1.1	499	0.9
Cohabiting, 4 persons	1119	2	5	0.7	1114	2	154	2	1111	2
Cohabiting, 5+ persons	1429	2.5	19	2.7	1410	2.5	182	2.4	1424	2.6
Husband, wife, 3 persons	1934	3.4	26	3.7	1908	3.4	254	3.4	1924	3.4
Husband, wife, 4 persons	12941	22.9	148	21.1	12793	22.9	2008	26.7	12775	22.9
Husband, wife, 5 persons	15233	27	254	36.3	14979	26.8	2341	31.1	15236	27.3
Husband, wife, 6 persons	8157	14.4	87	12.4	8070	14.5	1192	15.8	8063	14.5
Husband, wife, 7+ persons	4279	7.6	37	5.3	4242	7.6	476	6.3	4232	7.6
Lone father, 2 or 3 persons	407	0.7			407	0.7	16	0.2	408	0.7
Lone father, 4+ persons	412	0.7	20	2.8	393	0.7	23	0.3	370	0.7

¹¹ The Wave 1 population figures are derived from the grossed Wave 1 sample. See *Sample Design and Response in Wave 1 of the Child Cohort (at 9 years) of Growing Up in Ireland* document for details on how the Wave 1 weight was generated (<http://www.ucd.ie/t4cms/GUI-SampleDesign9YearCohort.pdf>).

¹² The Wave 2 population is derived from the Wave 1 population, minus those identified as having left the country or as having deceased (Exits).

Lone mother, 2 persons	1550	2.7	19	2.7	1531	2.7	180	2.4	1534	2.7
Lone mother, 3 persons	2902	5.1	21	3	2881	5.2	259	3.4	2782	5
Lone mother, 4 persons	2328	4.1	27	3.8	2302	4.1	187	2.5	2272	4.1
Lone mother, 5+ persons	2296	4.1	31	4.4	2265	4.1	133	1.8	2207	4
Non family unit	995	1.8			995	1.8	36	0.5	958	1.7
Total	56497	100	700	100	55796	100	7525	100	55796	100
Mother's Age										
Mother, 30 yrs or less	5004	8.9	108	15.4	4896	8.8	420	5.6	4652	8.3
Mother, 31-39 yrs	23072	40.8	392	55.9	22681	40.6	2825	37.5	22541	40.4
Mother, 40-49 yrs	25967	46	181	25.9	25786	46.2	4039	53.7	26119	46.8
Mother, 50 yrs or more	1634	2.9			1634	2.9	202	2.7	1705	3.1
Mother, not resident	820	1.5	20	2.8	800	1.4	39	0.5	779	1.4
Total	56497	100	700	100	55796	100	7525	100	55796	100
Mother's Principal Economic Status (PES)										
Mother, work outside home	29462	52.1	389	55.6	29073	52.1	4352	57.8	29103	52.2
Mother, retired	88	0.2			88	0.2	11	0.1	89	0.2
Mother, home duties	21062	37.3	288	41.1	20774	37.2	2831	37.6	20971	37.6
Mother, other PES	4069	7.2	3	0.4	4066	7.3	256	3.4	3896	7
Mother not resident	820	1.5	20	2.8	800	1.4	39	0.5	779	1.4
Non family unit	995	1.8			995	1.8	36	0.5	958	1.7
Total	56497	100	700	100	55796	100	7525	100	55796	100
Father's Principal Economic Status (PES)										
Father, work outside home	41506	73.5	513	73.2	40993	73.5	6391	84.9	41381	74.2
Father unemployed	2471	4.4	45	6.4	2426	4.3	132	1.8	2322	4.2
Father retired	221	0.4	8	1.1	213	0.4	27	0.4	219	0.4
Father Student	163	0.3			163	0.3	41	0.5	142	0.3
Father, other PES	1110	2	27	3.9	1083	1.9	79	1	1041	1.9
Father home duties	955	1.7	10	1.5	945	1.7	60	0.8	937	1.7
Father not	9076	16.1	97	13.9	8978	16.1	759	10.1	8795	15.8

resident										
Non family unit	995	1.8			995	1.8	36	0.5	958	1.7
Total	56497	100	700	100	55796	100	7525	100	55796	100
Mother's education										
Mother, Primary educ. or none	3481	6.2	24	3.4	3457	6.2	209	2.8	3482	6.2
Mother, inter Cert or equivalent	12744	22.6	141	20.1	12603	22.6	987	13.1	12456	22.3
Mother, Leaving Cert o equivalent	19243	34.1	147	20.9	19097	34.2	2315	30.8	19024	34.1
Mother, non-degree	7740	13.7	137	19.6	7602	13.6	1818	24.2	7647	13.7
Mother, primary degree	5483	9.7	185	26.4	5298	9.5	1246	16.6	5400	9.7
Mother, post-grad. Degree	3154	5.6	47	6.7	3106	5.6	766	10.2	3350	6
Mother, other education	4652	8.2	20	2.8	4632	8.3	184	2.4	4436	7.9
Total	56497	100	700	100	55796	100	7525	100	55796	100
Father's Social Class										
Father Professional	3812	6.7	54	7.6	3759	6.7	766	10.2	3963	7.1
Father, Managerial	14113	25	238	34	13874	24.9	2076	27.6	14174	25.4
Father, Other Non Manual	4606	8.2	48	6.9	4557	8.2	1021	13.6	4581	8.2
Father, Skilled Manual	13380	23.7	160	22.8	13220	23.7	1762	23.4	13101	23.5
Father, Semi-skilled Manual	6174	10.9	41	5.8	6133	11	763	10.1	6052	10.8
Father, Unskilled Manual	2113	3.7	25	3.6	2088	3.7	162	2.2	2050	3.7
Father does not have a class	2228	3.9	38	5.4	2191	3.9	180	2.4	2120	3.8
Not family unit	995	1.8			995	1.8	36	0.5	958	1.7
Father, not resident	9076	16.1	97	13.9	8978	16.1	759	10.1	8795	15.8
Total	56497	100	700	100	55796	100	7525	100	55796	100
Mother' Social Class										
Mother Professional	2920	5.2	74	10.5	2846	5.1	730	9.7	3004	5.4
Mother, Managerial	15867	28.1	199	28.3	15668	28.1	2830	37.6	16059	28.8
Mother, Other	13235	23.4	170	24.3	13065	23.4	1764	23.4	12950	23.2

Non Manual										
Mother, Skilled Manual	8045	14.2	112	16	7932	14.2	912	12.1	8005	14.3
Mother, Semi-skilled Manual	6819	12.1	53	7.6	6766	12.1	703	9.3	6554	11.7
Mother, Unskilled Manual	2081	3.7	30	4.3	2051	3.7	191	2.5	1965	3.5
Mother does not have a class	5717	10.1	42	6	5675	10.2	321	4.3	5524	9.9
Not family unit	995	1.8			995	1.8	36	0.5	958	1.7
Mother, not resident	818	1.4	20	2.8	799	1.4	38	0.5	777	1.4
Total	56497	100	700	100	55796	100	7525	100	55796	100
Household's Social Class										
Household Professional	4628	8.2	83	11.8	4545	8.1	1073	14.3	4745	8.5
Household, Managerial	18783	33.2	279	39.8	18504	33.2	3000	39.9	18835	33.8
Household, Other Non Manual	10644	18.8	111	15.8	10533	18.9	1448	19.2	10412	18.7
Household, Skilled Manual	9436	16.7	143	20.4	9293	16.7	1019	13.5	9278	16.6
Household, Semi-skilled Manual	5203	9.2	43	6.1	5160	9.2	507	6.7	5028	9
Household, Unskilled Manual	969	1.7			969	1.7	115	1.5	939	1.7
Household does not have a class	5839	10.3	42	6	5797	10.4	327	4.3	5601	10
Not family unit	995	1.8			995	1.8	36	0.5	958	1.7
Total	56497	100	700	100	55796	100	7525	100	55796	100
Mother's ethnicity										
Mother, Irish	50782	89.9	369	52.7	50413	90.4	6856	91.1	50375	90.3
Mother, Other White	3202	5.7	137	19.6	3065	5.5	421	5.6	3112	5.6
Mother, African, Other Black	719	1.3	25	3.6	694	1.2	99	1.3	698	1.3
Mother, Asian/Chinese	552	1	19	2.6	533	1	98	1.3	567	1
Mother, Other ethnicity	423	0.7	131	18.7	292	0.5	12	0.2	266	0.5
Mother not resident	820	1.5	20	2.8	800	1.4	39	0.5	779	1.4
Total	56497	100	700	100	55796	100	7525	100	55796	100

Household tenure										
Owner Occupier	43474	77.4	458	65.4	43290	77.6	6412	85.2	43467	77.9
Local Authority Purchaser	805	1.4	30	4.3	774	1.4	53	0.7	734	1.3
Local Authority Rental	7044	12.5	108	15.4	6936	12.4	573	7.6	6731	12.1
Private Rental	4535	8	103	14.7	4432	7.9	455	6	4452	8
Occupied Rent Free	365	0.6	1	0.2	364	0.7	32	0.4	412	0.7
Total	56497	100	700	100	55796	100	7525	100	55796	100
EXTRA VARIABLES USED IN WAVE 2 WEIGHTS										
Do you currently smoke daily, occasionally or not at all?										
Daily	14328	25.4	148	21.1	14181	25.4	1434	19.1	14162	25.4
Occasionally	3735	6.6	60	8.6	3675	6.6	468	6.2	3770	6.8
Not at all	38433	68	492	70.3	37941	68	5623	74.7	37863	67.9
Total	56497	100	700	100	55796	100	7525	100	55796	100
How often you drink alcohol										
drink never, less than once a month	19226	34	355	50.6	18871	33.8	2268	30.1	18721	33.6
drink 1-2times a month, 1-2 times a week	31637	56	303	43.3	31334	56.2	4313	57.3	31261	56
drink 3-4 times a week, 5-6 times a week, everyday	5634	10	43	6.1	5591	10	944	12.5	5814	10.4
Total	56497	100	700	100	55796	100	7525	100	55796	100
Location of household										
open	17766	31.4	112	16	17654	31.6	2485	33	17614	31.6
village	5831	10.3	76	10.9	5755	10.3	705	9.4	5621	10.1
town	16548	29.3	313	44.7	16235	29.1	2115	28.1	16172	29
water	553	1			553	1	72	1	524	0.9
galway	538	1	4	0.5	534	1	71	0.9	473	0.8
limerick	933	1.7	5	0.7	928	1.7	120	1.6	979	1.8
cork	1806	3.2	22	3.2	1784	3.2	266	3.5	1838	3.3

dubcity	12175	21.6	168	23.9	12008	21.5	1640	21.8	12261	22
dubco	250	0.4			250	0.4	33	0.4	218	0.4
Not recorded	96	0.2			96	0.2	18	0.2	96	0.2
Total	56497	100	700	100	55796	100	7525	100	55796	100
PCG Depression status										
not depressed	46051	81.5	501	71.5	45550	81.6	6458	85.8	45810	82.1
depressed	4730	8.4	106	15.2	4624	8.3	528	7	4602	8.2
Not recorded	5716	10.1	93	13.3	5623	10.1	539	7.2	5384	9.6
Total	56497	100	700	100	55796	100	7525	100	55796	100
Household income quintile										
Lowest	10535	18.6	141	20.1	10394	18.6	855	11.4	10212	18.3
2nd	10603	18.8	77	11.1	10525	18.9	1196	15.9	10412	18.7
3rd	10597	18.8	138	19.8	10458	18.7	1394	18.5	10340	18.5
4th	10506	18.6	177	25.2	10330	18.5	1639	21.8	10312	18.5
Highest	10558	18.7	136	19.5	10421	18.7	1918	25.5	10843	19.4
Not recorded	3698	6.5	31	4.4	3667	6.6	523	7	3677	6.6
Total	56497	100	700	100	55796	100	7525	100	55796	100
Primary Caregiver Sensitive Q Completed Wave 1										
Not completed	1148	2	30	4.3	1117	2	86	1.1	998	1.8
Completed	55349	98	670	95.7	54679	98	7439	98.9	54797	98.2
Total	56497	100	700	100	55796	100	7525	100	55796	100