SOEP-Core – 2021: Mother and Child (Newborns)
Running since 1984, the German Socio-Economic Panel study (SOEP) is a wide-ranging representative longitudinal study of private households, located at the German Institute for Economic Research, DIW Berlin.

The aim of the SOEP Survey Papers Series is to thoroughly document the survey’s data collection and data processing. The SOEP Survey Papers is comprised of the following series:
Series A – Survey Instruments (Erhebungsinstrumente)
Series B – Survey Reports (Methodenberichte)
Series C – Data Documentation (Datendokumentationen)
Series D – Variable Descriptions and Coding
Series E – SOEPmonitors
Series F – SOEP Newsletters
Series G – General Issues and Teaching Materials

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

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

Please cite this paper as follows:

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ISSN: 2193-5580 (online)

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

soeppapers@diw.de
SOEP-Core – 2021: Mother and Child (Newborns)

infas

2022

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

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

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

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

Your participation is, of course, completely voluntary.

We cordially invite you to
– provide our staff member with an interview,
– or carefully complete the questionnaire yourself.

Please answer all of the questions in this questionnaire in relation to the following child (may also be filled out by Interviewer):

Child’s first name:  

Birth date:  

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

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

Your personal access code is:

If you completed the questionnaire online, you don’t need to return this printed questionnaire.
How should the questionnaire be filled out?

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

Example:

Yes
No

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

Example:

Yes
No

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

Example:

Please select one answer only.

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

Example:

Number: 150

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

Example:

Yes → Continue with question 11

Please make sure:

☐ that you fill out the questionnaire in black pen only.
☐ that your answers are clearly legible.
☐ and that your answers are inside the boxes.

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

Further information

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

You can call us during normal business hours at our toll-free number, 0800–6677876, or send us an e-mail at LiD@infas.de. We will respond to e-mails as quickly as possible. For more information on the study, please see the infas homepage at: www.leben-in-deutschland.de
Please remember to answer the following questions solely with regard to the child whose name is listed on the cover of the questionnaire.

1. What is your relationship to the child: Are you the...

   Please select one answer only.

   Biological mother 1
   Biological father 2
   In same-sex partnerships:
   Second, social mother / second, social father 3
   Adoptive or foster mother / Adoptive or foster father 4
   Stepmother / stepfather 5
   Grandmother / grandfather / aunt / uncle 6
   None of the above, other relationship to the child 7

2. How were you feeling physically and mentally during the last third of your pregnancy and during the first three months after giving birth?

   Please select one answer only per line.

   Physically...
   ... in the last third of my pregnancy
   ... in the first three months after giving birth
   Mentally...
   ... in the last third of my pregnancy
   ... in the first three months after giving birth

3. Is the newborn baby your first, second, third, etc. child? Please specify:

   He/she is my 1... child

4. Does the child’s biological father live in this household?

   Yes 1
   No 2

5. Was the pregnancy / parenthood more or less planned, or was it more or less unplanned?

   More planned 1
   More unplanned 2

6. How did you / the mother become pregnant?

   Naturally 1
   With medical assistance (for example, through hormone treatment, IVF) 2
   Through the use of alternative methods, without medical assistance 3
Where was the baby delivered?

- At the hospital
- At home
- Elsewhere

Was the baby delivered by caesarean section?

- Yes
- No

At what week of pregnancy was the baby born?

- [ ]

What did your baby weigh and measure at birth?

- Weight in grams
- Length in centimeters
- Head circumference in centimeters

Was your baby breastfed, and if so, for how long?

- Baby is still being breastfed
- Only breastfed for the first four weeks
- Was breastfed for a longer period
- No, baby was not breastfed

Did your baby experience any serious health problems in the first three months after birth that necessitated a hospital stay?

- Yes
- No

After giving birth, mothers are given a booklet called “Your Child’s Medical Records” (Kinder-Untersuchungsheft) to keep track of their baby’s medical examinations (the second is referred to as “U2”, the third as “U3”, etc.). What was your baby’s last medical examination?

- [ ]

Have doctors found any indications of developmental delays, impairments, or disabilities in the child?

- Yes, in the “U” examination
- Yes, in a different examination
- No
Which of the following developmental delays, impairments, or disabilities has your child been diagnosed with?

Please select all answers that apply.

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

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

Please select one answer only per line.

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>My life has changed significantly</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>Raising my child brings me joy and happiness</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>I often feel like I'm running out of energy</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>I feel very satisfied in my role as a parent</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>I often don't feel up to the new tasks and demands of parenthood</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>I am meeting different people and making new acquaintances through my child</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>I am having a hard time being restricted to my role as a parent</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>Showing my child plenty of affection is important to me</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
<tr>
<td>I'm worried about my child's health</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
<td>□ □ □ □</td>
</tr>
</tbody>
</table>

Are you the child’s main caregiver?

- Yes | □ |
- No | □ |

How much do you feel your partner helps you in looking after the child?

- A lot | □ |
- Quite a bit | □ |
- Not much | □ |
- Not at all | □ |
- Not applicable, no partner | □ |
If you think about a normal week, is there anybody else who regularly spends time looking after the child? If so, who is it, and how many hours do they spend per week looking after the child?

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Spouse / partner
- Child’s father / mother (if not your spouse / partner)
- Child’s grandparents
- Child’s older siblings
- Other relatives
- Home daycare provider (outside your home)
- Nursery school / childcare center
- Other (e.g., babysitter, neighbor)
- No, nobody

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

*Please select one answer only per line.*

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

- My child is generally cheerful and happy
- My child gets upset easily and cries a lot
- My child is difficult to comfort when upset
- My child is curious and active
- My child tends to be shy
What is the sex of the child?

- Male 1
- Female 2
- Divers 3

When did you finish filling out the questionnaire?

Date: [ ] Day [ ] Month
Time: [ ] Hour [ ] Minute

Approximately how long did it take you to complete this questionnaire?

[ ] Minutes

Were other persons present while you were filling out the questionnaire?

- Yes, spouse / partner
- Yes, other person who is living in the same household
- Yes, other person who does not live in the same household

Did any of the aforementioned people bother you while you were filling out the questionnaire?

- Yes 1
- No 2

Thank you for taking part.

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

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