BaBBLeS ID



First questionnaire for BaBBLeS study

Optionally, this questionnaire can be completed online via the link:

https://www.tinyurl.com/babbles1

When prompted, please enter your unique code shown on the top right corner of this page and follow the instructions given.

We would be really grateful if you could complete this questionnaire about you as a future parent, your use of technology, your support networks, confidence and well-being.

Others have found that it takes about 15 minutes to complete.

❖ If you make a mistake, just cross out the wrong answer and give a new answer.

Everything you tell us will be treated as confidential.

Please return the questionnaire in the envelope provided. You can choose to receive a

£5 voucher when you send back the completed questionnaire.

If you would like help to complete the questionnaire please contact:

Toity Deave or Trudy Goodenough

Tel: 0117 3314085

Email: babblesteam@uwe.ac.uk

Your answers are really important to us. They will help us understand the needs of mothers like you and help develop better ways to support them.

We will contact you again nearer to the birth of your baby with a shorter questionnaire.

1. When is your baby due? Please write in day (DD), month (MM)	D M M and year (YYYY)	YY	YY	
2. How do you think you will feed y	our baby: <i>Please</i> Breast feed <u>only</u>	e tick one box o Formula milk <u>only</u>	Both breast feed and formula milk	Not sure
a. in the first week				
b. by the end of the first month				
c. by the end of three months				
d. at six months				
Section 2: Your use of technology and	d how you look	for informat	ion	
Please tick one box only on each	row, YES or NO		Y	ES NO
3. Do you use a mobile phone?	?			
4. Do you use a tablet (e.g. iPa	nd/ Android)?			
5. Do you access the internet of	on your mobile p	hone or on yo	our tablet?	
6. Do you access the internet a	at home?			

7. The next question is about your us Please indicate how often you do each		•	•	•		
	Never/ Not applicable	Less than once a week	Once a week	Several times a week	Once a day	Several times a day
a. Send and receive text messages on a mobile phone or tablet						
b. Make and receive calls on a mobile phone or tablet						
c. Browse the web on a mobile phone or tablet						
d. Use apps (for any purpose) on a mobile phone or tablet						
e. Search the internet for news on any device						
f. Search the internet for information on any device						
g. Check your Facebook page or other social networks on any device						
h. Post photos on Facebook or other social networks						
i. Comment on postings, status updates, photos, etc. on Facebook or other social networks.						
8. Did you or do you use any app specomputer)? Please tick one box only, Y	•	out pregnan	cy (on a p	hone, table	et or	
Yes Please name:			No			
a)				re answered to question		
b)						
c)						

a. Midwife
c. GP
d. Other health professional(s)
Please say which one(s): e. Partner
e. Partner
f. Friends, other mothers-to-be or new mothers
g. Posters at GP surgery, clinic or hospital
h. Through other apps that I have used before
Please say which one(s): i. Internet search
i. Internet search
j. Books or magazines
k. Other. Please specify:
10. Where do you look or who do you ask for information about pregnancy and parenthood? Please tick all that apple a. Midwife
a. Midwife
a. Midwife
b. Health Visitor
c. GP
<u> </u>
d. Other health and recipied (A)
d. Other health professional(s)
Please say which one(s):
e. Partner
f. Friends, other mothers-to-be or new mothers
g. Posters at GP surgery, clinic or hospital
h. Apps
i. Internet search
i. Internet search

Section 3 – About how you might feel when your baby is born

11. We would like to know how you are feeling now, while you are pregnant, about becoming a mother. We understand that it might be difficult for you to imagine how you will interact with your baby, but we would be grateful if you can complete each of the questions as best as you can.

We would also like to know about the support you receive from other people, and how you feel emotionally.

	following	section i	s about	emotion a	and affec	ction -							
	the scale pletely disa												
	0	1	2	3	4	5	6	7	8	9	10		
	Comp	letely dis	agree		N	Moderately	/ agree		C	completel	y agree		
	l be able t												
з. I am	ı confiden	t my bal	by will b	e able to	come to	me if he	e/she is u	nhappy					
4. Wh	en my bab	y is sad	l will ur	nderstand	l why								
5. I wil	l have a g	ood rela	ationship	with my	baby								
6. I wil	I find it ha	rd to cu	ddle my	baby									
	e following												
Using	e following the scale oletely disa	below², p	olease ei	nter in the	boxes	how muc							
Using	the scale	below², p	olease ei	nter in the	boxes	how muc							
Using	the scale pletely disa	below ² , p agree) to	olease ei 10 (comp 2	nter in the oletely agr	e boxes ee). You 4	how muc may use	any numb	er betwee	en 0 and ² 8	10. Pleas	e answe		
Using	the scale pletely disa	below², ¢ igree) to 1	olease ei 10 (comp 2	nter in the oletely agr	e boxes ee). You 4	how muc may use 5	any numb	er betwee	en 0 and ² 8	10. Pleas	e answe		
Using (comp	the scale pletely disa	below ² , p gree) to 1 letely dis	olease ei 10 (comp 2 agree	nter in the oletely agr	e boxes ee). You 4	how muc may use 5 /loderately	any numb 6 / agree	er betwee	en 0 and 1	9 Completel	e answe 10 y agree	r all stater	
Using (comp	the scale bletely disa 0 Comp	below ² , p agree) to 1 letely dis	olease ei 10 (comp 2 agree	nter in the bletely agr 3 my baby	e boxes ee). You 4	how muc may use 5 /loderately	any numb 6 / agree	er betwee	en 0 and 1	9 Completel	e answe	r all stater	
Using (comp	the scale bletely disa Comp	below ² , p agree) to 1 letely dis	olease end 10 (compage 2) agree fun with each sta	my baby	e boxes ee). You 4 N	how muc may use 5 Moderately	any numb 6 / agree ment	er betwee	en 0 and 6	9 Completel	e answer	r all state	
7. I wil 8. I wil 9. I wil	the scale bletely disard O Comp	below ² , r agree) to 1 letely dis to have for enjoy to have i	olease end to the company of the com	my baby age of my	e boxes ee). You 4 N y baby's y baby	how muc may use 5 Moderately	any numb 6 / agree ment	7	en 0 and 6	9 Completel	e answer	r all state	
7. I wil 8. I wil 9. I wil	the scale bletely disard O Comp	below ² , r agree) to 1 letely dis to have f to enjoy to have i to plan	olease end to the company of the com	my baby age of my s with my	e boxes ee). You 4 N y baby's y baby w	how muc may use 5 Moderately develop	any numb 6 / agree ment	er betwee	en 0 and 1	9 Completel	e answer	r all state	

- The	following	g section	is about	empathy	and und	erstandir	ng -					
											e scale ranç answer all	ges from 0 statements.
	0	1	2	3	4	5	6	7	8	9	10	
	Comp	letely dis	agree		М	oderately	agree		1	Completely	agree	
13. I wil	ll be able	to expla	in thing:	s patientl	y to my l	baby						
14. I wil	ll be able	to get m	ny baby	to listen t	to me							
15. I wil	ll be able	to comf	ort mv b	abv								
			,	,								
16. I wil	ll be able	to listen	to my b	aby								
17. I wil	ll be able	to put m	nyself in	my baby	's shoes	.						🔲
18. l wil	ll underst	tand mv	babv's n	needs								
		,	,									
- The	following	section	is about	pressure	s -							
											e scale rang answer all	ges from 0 statements.
	0	1	2	3	4	5	6	7	8	9	10	
	Comp	letely dis	agree		М	loderately	agree		(Completely	agree	
19. It w i	ill be diffi	cult to co	ope with	other pe	ople's ex	xpectatio	ons of me	as a par	ent			
20. I wil	ll not be a	able to a	ssert my	self whe	n other r	people te	ell me wh	at to do v	vith mv	baby		
_0			,	,	•	- o o p . o				, , , , , , , , , , , , , , , , , , ,		
21. List	ening to	other pe	ople's a	dvice will	make it	hard for	me to de	cide wha	it to do.			🗀
22. I wil	ll be able	to say 'ı	no' to otl	her peop	le if I dor	n't agree	with ther	n				
23. I wil	ll be able	to ignor	e pressı	ure from o	other pe	ople to d	o things	their way				
24. I wil	ll not feel	a need	to comp	are myse	elf to oth	er paren	ts					🔲

-	The following	g section	is about	self-acce	eptance -							
											ne scale range e answer all st	
	0	1	2	3	4	5	6	7	8	9	10	
	Comp	oletely dis	sagree		М	loderately	/ agree		C	completely	/ agree	
25. l	know I will	be a go	od enoug	gh parent	t							
26. l	will manag	e the pre	essures o	of parent	ing as w	ell as oth	ner paren	its do				
~ ~	ما النبيد	that wall		rant								
27. I	will not do	tnat well	i as a pai	rent								
28. <i>i</i>	As a parent	I will be	able to ta	ake mos	t things i	n my stri	ide					
29. l	will be able	e to be st	trong for	my baby	/							
30. l	My baby will	l feel saf	fe around	d me								
-	The following	g section	is about	learning	and know	wledge -						
											ne scale range e answer all st	
(00	0	1	2	3	4	5	6	7	8	9	10	atements.
	Comp	oletely dis	sagree		M	loderately	/ agree		C	Completely	/ agree	
31. l	will be able	e to reco	gnise de	velopme	ntal char	nges in r	my baby					
32. l	will be able	e to shar	e ideas v	with othe	r parents	S						
33. I	will be able	e to learr	n and use	e new wa	ays of de	aling wit	h my bab	у				
34. l	will be able	e to mak	e the cha	anges ne	eded to	improve	my baby	's behav	iour			
35. l	will be able	e to over	come mo	ost proble	ems with	a bit of	advice					
36. l	Knowing tha	at other p	people ha	ave simil	ar difficu	lties with	n their bal	bies will ı	make it e	easier for	me	

12. About the support you receive from other people - We are interested in how you feel about the following statements³. Read each statement carefully. Indicate how you feel about each statement by **ticking one box only for each row**.

	Very Strongly Agree	Strongly Agree	Mildly Agree	Neutral	Mildly Disagree	Strongly Disagree	Very Strongly Disagree
a. There is a special person who is around when I am in need.							
b. There is a special person with whom I can share my joys and sorrows.							
c. My family really tries to help me.							
d. I get the emotional help and support I need from my family.							
e. I have a special person who is a real source of comfort to me.							
f. My friends really try to help me.							
g. I can count on my friends when things go wrong.							
h. I can talk about my problems with my family.							
i. I have friends with whom I can share my joys and sorrows.							
j. There is a special person in my life who cares about my feelings.							
k. My family is willing to help me make decisions.							
I. I can talk about my problems with my friends.							



13. About how you feel emotionally - Below are some statements about feelings and thoughts.⁴ Please **circle the number** that best describes your experience of each of the statements over the **last 2 weeks**.

	None of the time	Rarely	Some of the time	Often	All of the time
a. I've been feeling optimistic about the future	1	2	3	4	5
b. I've been feeling useful	1	2	3	4	5
c. I've been feeling relaxed	1	2	3	4	5
d. I've been feeling interested in other people	1	2	3	4	5
e. I've had energy to spare	1	2	3	4	5
f. I've been dealing with problems well	1	2	3	4	5
g. I've been thinking clearly	1	2	3	4	5
h. I've been feeling good about myself	1	2	3	4	5
i. I've been feeling close to other people	1	2	3	4	5
j. I've been feeling confident	1	2	3	4	5
k. I've been able to make up my own mind about things	1	2	3	4	5
I. I've been feeling loved	1	2	3	4	5
m. I've been interested in new things	1	2	3	4	5
n. I've been feeling cheerful	1	2	3	4	5



14. What is your date of birth?
Please write in day (DD), month (MM) and year (YYYY)
15. What is your ethnic group? Please tick one box only
White:
a. British b. Irish c. Other White European
d. Other Please specify:
Asian or Asian British:
e. Pakistani f. Bangladeshi g. Indian h. Chinese
i. Other Please specify:
Black or Black British:
j. Caribbean k. African
I. Other Please specify:
Mixed background:
m. White & Black Caribbean n. White & Black African
o. White & Asian
p. Other Please specify:
q. Any other ethnic group Please specify:
r. I do not wish to say

6. What is the highest level of education that you reached? Please tick one box only
a. Left school before completing GCSEs
c. A Levels/Scottish Highers or International Baccalaureate
d. Apprenticeship
e. Professional qualifications
f. First Degree
g. Higher degree or above
7. What best describes your current status? Please tick one box only
a. Married or living with your partner
b. Single
c. Have a partner but not living together
d. Other
8. What best describes your current employment? Please tick one box only
a. In paid Full Time employment
b. In paid Part Time employment
c. Self-employed or freelance
d. Studying or in training
e. On Maternity Leave or Sick Leave from Full Time employment
f. On Maternity Leave or Sick Leave from Part-Time employment
g. Not in paid employment
19. Date when you finished completing this questionnaire: Please write in day (DD), month (MM) and year (YYYY)

20. Please feel free to leave any comments in the box below relating to any of your answers to th questionnaire or suggestions for improvement:
21. What are the first three or four digits of your postcode?
Thank you very much for filling in this questionnaire.
Please check that you have answered all the questions.
Please send this back to us in the envelope provided together with the consent form completed
and signed by you, and the completed contact details form . Don't forget to tick the box if you
would like to receive a £5 voucher!
Our address: BaBBLeS,
University of the West of England, Bristol
Centre for Child & Adolescent Health
Oakfield House, Oakfield Grove
Clifton

Bristol BS8 2BN

This project is a collaboration between:















Sources of questions (superscripts):

- 1. Adapted from the Media and Technology Usage and Attitudes Scale, Rosen et al. 2013
- 2. Adapted from the TOPSE, a tool to measure Parenting Self-Efficacy, Kendall S. & Bloomfield L. 2005, available on www.topse.org.uk
- 3. Zimet et al. (1988), The multidimensional scale of perceived social support (MCSDS).
- 4. Warwick-Edinburgh Mental Well-being Scale (WEMWBS), NHS Health Scotland, University of Warwick and University of Edinburgh, 2006