When you take this survey, we will ask you questions about how you and your family use technology. You will ask one of your children to also fill out a survey. When we ask you questions about your child, we would like you to think only about your child who is also filling out this survey. Before we get started, please tell us your relationship to your child who is also filling out this survey.

**Your first name:**

**The first name of your child also filling out this survey is:**

**The child also filling out this survey is your:** [Son/Daughter/Step-Son/Step-Daughter/Other]

**How old is your child filling out this survey?**

## Family Technology Use

We would like to learn about how often you use technology throughout the day. In these questions, the word “devices” refers to computers, tablets, or mobile phones. For each part of the day listed, choose the device that you use *most often* during that time of day for your response.

1. **How often do you use at least one of these devices:**

[Several times a day/About once a day/3-5 days a week/1-2 days a week/Every few weeks/Every few months than every few weeks/Never/Don’t Know]

* When you wake up in the morning
* During the day
* In the evening after school and before dinner
* During dinner
* After dinner before bed
* In bed before going to sleep
* In the middle of the night
* On the weekends
1. **How often does your [child] use at least one of these devices?**

[Several times a day/About once a day/3-5 days a week/1-2 days a week/Every few weeks/Every few months than every few weeks/Never/Don’t Know]

* At home when they wake up in the morning
* During the day at school
* In the evening after school and before dinner
* During dinner
* After dinner before bed
* In bed before going to sleep
* In the middle of the night
* On the weekends
1. **Which device, if any, do you use most often during each of these times?**

[computer/tablet/mobile phone/gaming console/something else/I don’t use devices during this time]

* At home when they wake up in the morning
* During the day at school
* In the evening after school and before dinner
* During dinner
* After dinner before bed
* In bed before going to sleep
* In the middle of the night
* On the weekends

We would like to learn about whether your family feels it is okay to use your devices at different times throughout the day. In these questions, the word “devices” refers to computers, tablets, or mobile phones. For each part of the day listed, choose the device that is used most often for your response.

1. **Do you think it is okay for you to use your devices in the following settings? This question is asking what YOU think, not what anyone else thinks.**

[Absolutely not okay/Mostly not okay/Somewhat not okay/Somewhat okay/Mostly okay/Absolutely okay]

* When I wake up in the morning
* During the day
* In the evening after school and before dinner
* During dinner
* After dinner before bed
* In bed before going to sleep
* In the middle of the night
* On the weekends
1. **Do you think it is okay for your [child] to use [his/her] devices in the following settings? This question is asking what YOU think, not what anyone else thinks.**

[Absolutely not okay/Mostly not okay/Somewhat not okay/Somewhat okay/Mostly okay/Absolutely okay]

* When [he/she] wakes up in the morning
* During the day at school
* In the evening after school and before dinner
* During dinner
* After dinner before bed
* In bed before going to sleep
* In the middle of the night
* On the weekends

In these questions, the word “devices” refers to computers, tablets, or mobile phones. **These questions are asking what YOU think, not what anyone else thinks.** Rate your level of agreement with the following questions.

1. **The amount of time I spend on my devices is:**

[Far too much/Somewhat too much/About right/Somewhat too little/Far too little]

1. **The amount of time my [child] spends on [his/her] devices is:**

[Far too much/Somewhat too much/About right/Somewhat too little/Far too little]

In these questions, the word “devices” refers to computers, tablets, or mobile phones. **This question is asking what YOUR [CHILD] thinks.** If you are not sure, make your best guess. Rate your level of agreement with the following questions.

1. **My [child] thinks the amount of time I spend on my devices is:**

[Far too much/Somewhat too much/About right/Somewhat too little/Far too little]

1. **My [child] thinks that the amount of time [he/she] spends on [his/her] devices is:**

[Far too much/Somewhat too much/About right/Somewhat too little/Far too little]

Think about a time yesterday or the day before when your child was using a device for something and you got upset or annoyed with [him/her] about it.

1. **What was your [child] doing?**
2. **Why were you upset?**
3. **Do you think it was fair that you were upset?**

## Technology Rules

In the next questions, we would like to learn about what kinds of expectations or rules your family has related to technology use. These might be rules that all knows about, or just preferences you have for how your family uses technology.

1. **Think about the difference expectations, or even rules, that your family has about how your [child] should use technology on an everyday basis. List three expectations or rules about how your [child] should use technology.**
2. **Does your[child] know about these expectations or rules?**

[Definitely/Sort of/Not really/Not at all]

1. **How often does your [child] follow these expectations or rules?**

[Always/Usually/Sometimes/Rarely/Never]

1. **How difficult or easy do you find it to enforce these expectations or rules with your [child]?**

[Very difficult/Somewhat difficult/Neither difficult nor easy/Somewhat easy/Very easy]

1. **What challenges, if any, do you experience in trying to enforce these expectations or rules with your [child]?**
2. **Do you think that your [child] not following these expectations or rules is:**

[Absolutely okay/Mostly okay/Somewhat okay/Somewhat not okay/Mostly not okay/Absolutely not okay]

1. **Does your [child] think [him/her] not following these expectations or rules is:**

[Absolutely okay/Mostly okay/Somewhat okay/Somewhat not okay/Mostly not okay/Absolutely not okay]

1. **How fair do you think these expectations or rules are?**

[Very fair/Somewhat fair/Neither fair nor unfair/Somewhat unfair/Very unfair]

1. **How much input did your [child] have in setting these expectations or rules?**

[A lot/Some/A little/None]

1. **Think about the difference expectations, or even rules, that your family has about how YOU should use technology on an everyday basis. List three expectations or rules about how you should use technology.**
2. **How often do you follow these expectations or rules?**

[Always/Usually/Sometimes/Rarely/Never]

1. **How difficult or easy do you find it to follow these expectation or rules?**

[Very difficult/Somewhat difficult/Neither difficult nor easy/Somewhat easy/Very easy]

1. **What challenges, if any, do you experience in trying to follow these expectations or rules?**
2. **Do you think you not following these expectations or rules is:**

[Absolutely okay/Mostly okay/Somewhat okay/Somewhat not okay/Mostly not okay/Absolutely not okay]

1. **Does your [child] think you not following these expectations or rules is:**

[Absolutely okay/Mostly okay/Somewhat okay/Somewhat not okay/Mostly not okay/Absolutely not okay]

1. **How much input did your [child] have in setting these expectations or rules?**

[A lot/Some/A little/None]

Think about how your own family and other families use technology.

1. **List three rules about technology use that you think parents should follow.**
2. **List three rules about technology use that you think children should follow.**

## Online Behavior

1. **Which of the following social media sites or chat applications has your child used in the past month? If you don’t know all of them, list the ones that you do know.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| FacebookTwitterInstagramSnapchatYik Yak | Kik MessengerTumblrGoogle+VineWanelo | Ask.fmWhatsAppOmegleYoWhisper | RedditPheed4ChanWeChatSecret | OovooPinterestOther (list all)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. **Which social media sites or chat applications have you used in the past month?**

[Free response]

1. **Which social media sites or chat applications do you approve of your [child] using?**

[Free response]

1. **Which social media sites or chat applications do you NOT approve of your [child] using? This could include ones that you [he/she] uses now or does not use now.**

[Free response]

## You Posting about Child

This set of questions asks about your online behavior.

In the next two questions, we ask about things you write about your child online. This refers to things that you write about your [child], such as Facebook statuses, but not photos or videos that you post of [him/her].

1. **How often do you write about your [child] online?**

[Several times a day/About once a day/3-5 days a week/1-2 days a week/Every few weeks/Every few months/Never]

1. **When you post statuses or messages about your [child] online, how often do you ask their permission before posting?**

[Never/Rarely/Sometimes/Often/Always]

In the next two questions, we ask about photos or videos that you post of your [child] online but not things that you write about [him/her].

1. **How often do you post photos or videos of your [child] online?**

[Several times a day/About once a day/3-5 days a week/1-2 days a week/Every few weeks/Every few months/Never]

1. **When you post photos or videos about your [child] online, how often do you ask their permission before posting?**

[Never/Rarely/Sometimes/Often/Always]

This set of questions asks what you think about your online behavior.

1. **The amount of information I post about my [child] online is:**

[Far too much/Somewhat too much/About right/Somewhat too little/Far too little]

1. **In general, I should ask my [child] for permission before posting something about [him/her] online.**

 [Strongly disagree/Disagree/Somewhat disagree/Neither agree nor disagree/Somewhat agree/Agree/Strongly agree]

Think about the times that your [child] has done something online that you didn’t like or that even made you feel upset. This could include things that have made you feel angry, embarrassed, sad, etc. Tell us about three of these times.

1. **What did your [child] do?**
2. **How did it make you feel?**
3. **What did your [child] do?**
4. **How did it make you feel?**
5. **What did your [child] do?**
6. **How did it make you feel?**

Think about the times that your [child] has done something online that you didn’t mind, or that even made you feel good. This could include things that have made you feel proud, happy, etc. Tell us about three of these times.

1. **What did your [child] do?**
2. **How did it make you feel?**
3. **What did your [child] do?**
4. **How did it make you feel?**
5. **What did your [child] do?**
6. **How did it make you feel?**

In the next two questions, we would like you to think about the different kinds of things that you have posted online or have seen or heard about other parents posting online.

1. **What are the top 5 kinds of things that you think are okay for parents to say about their children online?**

[free response]

1. **What are the top 5 kinds of things that you think are NOT okay parents to say about their children online?**

[free response]

## Parent Satisfaction

[Strongly Agree/Agree/Somewhat Agree/Somewhat Disagree/Disagree/Strongly Disagree]

1. The problems of taking care of a child are easy to solve once you know how your actions affect your child, an understanding I have acquired.

2. Even though being a parent could be rewarding, I am frustrated now while my child is at his/her present age.

3. I go to bed the same way I wake up in the morning, feeling I have not accomplished a whole lot.

4. I do not know why it is, but sometimes when I’m supposed to be in control, I feel more like the one being manipulated.

5. My mother/father was better prepared to be a good mother/father than I am.

6. I would make a fine model for a new mother/father to follow in order to learn what she/he would need to know in order to be a good parent.

7. Being a parent is manageable, and any problems are easily solved.

8. A difficult problem in being a parent is not knowing whether you’re doing a good job or a bad one.

9. Sometimes I feel like I’m not getting anything done.

10. I meet my own personal expectations for expertise in caring for my child.

11. If anyone can find the answer to what is troubling my child, I am the one.

12. My talents and interests are in other areas, not in being a parent.

13. Considering how long I’ve been a mother/father, I feel thoroughly familiar with this role.

14. If being a mother/father of a child were only more interesting, I would be motivated to do a better job as a parent.

15. I honestly believe I have all the skills necessary to be a good mother/father to my child.

16. Being a parent makes me tense and anxious.

17. Being a good mother/father is a reward in itself.

## Demographics

**Are you currently married, living with a partner, divorced, separated, widowed, or have you never been married?**

[Married/Living with a partner/Divorced/Separated/Widowed/Never been married]

**Please list all of your children**

[First name/Age/Gender/Relationship]

**What is your gender?**

[Female/Male]

**What is your race?**

[White/Hispanic or Latino/Black or African American/Native American or American Indian/Asian/Pacific Islander/Other]

**What is your current employment status?**

[Employed full-time/Employed part-time/Out of work and looking for work/Out of work but not currently looking for work/Stay-at-home-parent/A student/Military/Retired/Unable to work]

**What is your household income?**

[<$20,000/$20,000-$39,999/$40,000-$64,999/$65,000-$94,999/$95,000-$139,999/$140,000-$199,999/>$200,000]

**What is the highest level of school you have completed or the highest degree you have received?**

[High school graduate or less/Some college or two-year associate’s degree/Bachelor’s degree/Some graduate school/Master’s or professional degree/PhD]

**In politics today, do you consider yourself a:**

[Republican/Democrat/Independent/Something else, please specify]

**In general, would you describe your political views as:**

[Very conservative/Conservative/Moderate/Liberal/Very liberal]

**What is your present religion, if any?**

[Protestant (Baptist, Methodist, Non-denominational, Lutheran, Presbyterian, Pentecostal, Episcopalian, Reformed, Church of Christ, Jehovah’s Witness, etc.)/Roman Catholic (Catholic)/Mormon (LDS/Church of Jesus Christ of Latter-day Saints)/Orthodox (Greek, Russian, or some other orthodox church)/Jewish (Judaism)/Muslim (Islam)/Buddhist/Hindu/Atheist (do not believe in God)/Agnostic (not sure if there is a God)/Something else (SPECIFY) \_\_\_\_\_\_\_\_\_\_\_\_\_ /Nothing in particular]

**[If married or living with a partner]**

**What is your spouse or partner’s current employment status?**

[Employed full-time/Employed part-time/Out of work and looking for work/Out of work but not currently looking for work/A homemaker/A student/Military/Retired/Unable to work]

**What is your spouse or partner’s highest level of school completed or highest degree received?**

[High school graduate or less/Some college or two-year associate’s degree/Bachelor’s degree/Some graduate school/Master’s or professional degree/PhD]

**What is your spouse or partner’s gender?**

[Male/Female]