

# BABY BEHAVIOR STUDY SURVEY

FOR STUDY USE ONLY:

Date:			Weeks Gestation:								
Appointment type:			FP:					Accept		Decline	
Class                  Voucher                  BF Support			P                  IB                  IF                  IC                  IT								
Reason for Decline:		Too busy		Not interested			Too difficult			Other children	
		Privacy		Refuse to answer			Too tired			Other:_____	

WELCOME TO OUR STUDY!

This WIC site is participating in a study with UC Davis. You have been asked to fill out this survey because you are expecting a baby. Please answer all of the questions thinking about this new baby even if you care for other children. The answers to these questions will be completely confidential and only shared with the UC Davis study staff.

PART 1: Questions about you:

1. What is your age? _____				2. Are you (circle one)				Male		Female		
3. Is this your first baby?				Yes				No				
4. How many children (under 18 years old) live in your home including your baby? _____												
5. How much education did you finish? (circle one )												
Less than High School			High school			Some college			College degree			
6. What is your race/ethnicity? (circle all that apply)												
Asian/Pacific Islander		Black		Latino		Native American		White/Caucasian		Other		
7. What languages are spoken in your home other than English? (circle all that apply)												
Arabic		Chinese		Korean		Punjabi		Russian		Spanish		
Vietnamese		Other										
8. In what country were you born? (circle one)				United States		Mexico		Other_____				
9. How are you planning on feeding your baby? (circle one)												
Breast milk only			Formula only			Both breast milk and formula			I am not sure		Not applicable	
10. If you plan on breastfeeding your baby, how old do you think your baby will be when you completely stop breastfeeding or giving breast milk? _____												
11. Are you confident that you will be able to breastfeed for as long as you want to?								Yes		No		
12. If you are planning on giving your baby any formula, how old will your baby be when he/she starts getting formula? (Please answer in days, weeks, or months, whichever is easier)												
_____ Days				_____ Weeks				_____ Months				
13. How old do you think babies should be when they are fed something other than formula or breast milk? _____												
14. How old do you think babies should be when they start sleeping through the night? _____												
15. Are you currently employed outside the home?				Yes				No				
				If yes, how many hours do you work per week? _____								

Turn the page over to finish the survey

16. Will you go to work after your baby is born?		Yes	No	If yes, how old do you expect your baby to be when you go to work? _____
				How many hours do you expect to work per week? _____
17. In the past 12 months, how many times have you visited this WIC clinic? _____				
18. In the past 6 months, how many WIC classes have you attended? _____				
19. Have you learned anything about baby behavior from WIC?			Yes	No
20. Who will watch your baby during the day? (circle all that apply)				
Mother	Father	Grandparent	Other family member	Babysitter/ daycare
Other _____				

**PART 2: Please circle the best answer for each statement.**

21. I am confident that I will be able to tell what my baby needs by the way he/she acts.	Always	Almost Always	Sometimes	Never
22. I am confident that I will know what to do when my baby cries.	Always	Almost Always	Sometimes	Never
23. I will feed my baby to get him/her to go to sleep.	Always	Almost Always	Sometimes	Never
24. If my baby cries, the first thing I will do is feed him/her.	Always	Almost Always	Sometimes	Never
25. I feel comfortable asking questions about my baby at WIC.	Always	Almost Always	Sometimes	Never
26. I get good advice from WIC.	Always	Almost Always	Sometimes	Never
27. I will follow the infant feeding advice I get at WIC.	Always	Almost Always	Sometimes	Never
28. I exercise 3 or more times per week.	Always	Almost Always	Sometimes	Never
29. I like going to WIC classes.	Always	Almost Always	Sometimes	Never
30. I will feed my baby more when he/she is already full.	Always	Almost Always	Sometimes	Never

**PART 3: Please circle the best answer for each statement.**

31. Babies less than 3 months old need to be active.	Agree	Disagree	Not Sure
32. Babies need to be big to be healthy.	Agree	Disagree	Not Sure
33. Babies dream more than adults.	Agree	Disagree	Not Sure
34. Formula is just as good as breast milk.	Agree	Disagree	Not Sure
35. I am confident that I will be able to breastfeed my baby.	Agree	Disagree	Not Sure
36. I am happy with my current weight.	Agree	Disagree	Not Sure
37. Babies have cues to show parents what they need.	Agree	Disagree	Not Sure
38. I am confident that I know how much to feed my baby.	Agree	Disagree	Not Sure
39. I am interested in learning about my baby's behavior.	Agree	Disagree	Not Sure
40. Crying babies are calmed by repeated sounds or movements.	Agree	Disagree	Not Sure

**Thank You!** Please turn this survey in to receive your raffle ticket!