



Family No.:

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P6 Sweep

Growing Up in Québec study – 2023 Sweep Consent Form



Growing Up
in Québec

Québec Longitudinal Study
of Child Development, 2nd edition
QLSCD 2 | COHORT 2018

Study partners

The Lucie and André Chagnon Foundation, the Ministère de la Famille, the Ministère de la Santé et des Services sociaux, the Ministère de l'Éducation, the Ministère de l'Emploi et de la Solidarité sociale, the Conseil de gestion de l'assurance parentale, and the Institut de la statistique du Québec (Statistique Québec).

1. The study and its objective

This form relates to your participation in the *Growing Up in Québec* study carried out by Statistique Québec. The overall objective of this study is to collect data that will help us better understand the factors that can affect the development and well-being of children until adulthood (longitudinal study).

2. Confidentiality

The data collected in this study will be treated as CONFIDENTIAL in accordance with the *Act respecting the Institut de la statistique du Québec* (CQLR, chapter I-13.011) and the *Act respecting Access to documents held by public bodies and the Protection of personal information*.

3. Voluntary participation

- 3.1 My participation in this study is voluntary. This means that I am free to participate in it or not and can withdraw from the study at any time without penalty to me in any way;
- 3.2 The authorizations granted to Statistique Québec in previous years remain in effect. I can withdraw them by making a request in writing to Statistique Québec.

4. Participation in this year's sweep

- 4.1 Participation in the study this year consists in:
 - receiving a home visit from a specially trained Statistique Québec interviewer to complete a computerized questionnaire with me or the other parent about the development and environment of my child participating in the study (family, general health, childcare setting, etc.);
 - allowing the interviewer to carry out activities (direct measures of development) with my child and to measure and weigh him or her. It takes about 45 minutes to do the various activities, which are presented in a game format;
 - filling out a paper questionnaire on my child's overall development;
 - completing an online questionnaire (one for each parent).
- 4.2 The 2023 sweep also includes a questionnaire to be completed by my child's educator¹ or teacher, if applicable. During the call to schedule an appointment, I will be asked to consent to Statistique Québec contacting my child's educator or teacher.

5. Benefits and drawbacks

My family will contribute to a better understanding of the processes underlying children's development, thus enabling more children to reach their full potential. The only drawback is the time spent answering the questionnaires.

6. Communication and matching of responses

- 6.1 The responses provided by myself or by my child will be sent, in a de-identified manner (i.e. not revealing any names, addresses or telephone numbers), to the partners and collaborating researchers who will have committed to respecting Statistique Québec's data security and confidentiality standards. I can obtain the list of these partners and researchers upon request;
- 6.2 The responses provided this year will be matched with all of the de-identified information collected in the study in order to carry out statistical and research work. This work must be related to the study's overall objective.

1. Anyone who cares for the child on a regular basis can complete the questionnaire.

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7. I have read this consent form. All my questions have been answered, and I have been given enough time to make my own decision. Therefore, I agree to participate in this study under the terms and conditions set out in this document.

CHILD

Child's first name (in capital letters)	Child's last name (in capital letters)

PARENT 1

Respondent's first name (in capital letters)	Respondent's last name (in capital letters)	
Relationship to the child :		
<input type="checkbox"/> Biological or legal mother	<input type="checkbox"/> Biological or legal father	<input type="checkbox"/> Legal representative
<input type="checkbox"/> Other (specify) _____		
	YYYY / MM / DD	
Respondent's signature	Date	

PARENT 2

Respondent's first name (in capital letters)	Respondent's last name (in capital letters)	
Relationship to the child:		
<input type="checkbox"/> Biological or legal mother	<input type="checkbox"/> Biological or legal father	<input type="checkbox"/> Legal representative
<input type="checkbox"/> Other (specify) _____		
	YYYY / MM / DD	
Respondent's signature	Date	