



Family No.:

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P8 Sweep

Growing Up in Québec study – 2025 Sweep Consent Form

Study partners

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



Growing Up
in Québec

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

1. The study and its objective

This consent form relates to the *Growing Up in Québec* study conducted by the Institut de la statistique du Québec (ISQ). The overall objective of this study is to collect data that will help us better understand the development and well-being of children until they reach adulthood (longitudinal study).

2. Confidentiality

This study is conducted in accordance with the *Act respecting the Institut de la statistique du Québec*. Your answers will be kept **confidential** and will only be used for statistical purposes.

3. Voluntary participation

- 3.1 My participation and that of my child are voluntary. We are therefore free to participate or not in the study, and we can withdraw at any time without penalty to us in any way.
- 3.2 The authorizations granted to the ISQ in previous years remain in effect. I can withdraw them by making a request in writing to the ISQ.

4. This year's process

4.1 Participation in the study this year consists in:

- 4.1.1 Allowing an ISQ interviewer to administer a questionnaire to my child (on my child's relationship with his or her teacher, school and recreational preferences, etc.), to perform activities with my child to measure various aspects of his or her development, and to measure my child's height and weight. Administering the questionnaire takes about 10 minutes, and the activities presented in the form of games last about 40 minutes. During the call to schedule an appointment, I will be asked if the meeting with my child can take place at school, or if I prefer for it to take place at home;
- 4.1.2 Meeting with the interviewer so that he or she can complete a computerized questionnaire with me or the other parent about the development and environment of my child who is participating in the study (family, overall health, school experience, etc.). If the activities with my child take place at school, the meeting with me or the other parent will take place remotely (via phone call or video conference). If I want the activities with my child to take place at home, then the meeting with me or the other parent will also take place at home;
- 4.1.3 Completing an online questionnaire (one for each parent) about lifestyle habits, activities done with my child, etc.

4.2 The 2025 sweep also includes a questionnaire for my child's teacher. During the call to schedule an appointment, I will be asked to give my consent for the ISQ to share my child's information with this person so that they can complete the questionnaire.

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

By signing this form, I authorize the ISQ to:

- 6.1 Send the data collected in this study in a de-identified manner (meaning without any name, address or telephone number) to the partners and collaborating researchers who will have committed to respecting the ISQ's data security and privacy standards. I can obtain the list of these partners and researchers upon request;

6.2 Collect additional information from departments and agencies (such as Retraite Québec, the Régie de l'assurance maladie du Québec and the Ministère de l'Éducation) in order to keep in touch with me and my child and carry out statistical work related to the general objective of the study;

6.3 Match the answers provided this year with all the de-identified information (meaning without any name, address or telephone number) collected in the study in order to carry out statistical and research work. This work must be related to the general objective of the study.

7. I hereby certify that I have read and understood this consent form. All my questions have been answered, and I have been given enough time to make my own decision. Consequently, by signing this form, I give my consent for my child and myself to participate in the study.

The meeting with my child will take place:

at school.

at home.

CHILD

<input type="text"/>	<input type="text"/>
Child's first name (in capital letters)	Child's last name (in capital letters)

PARENT 1

<input type="text"/>	<input type="text"/>	
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) _____		
<input type="text"/>	<input type="text"/>	
Respondent's signature	YYYY / MM / DD Date	

PARENT 2

<input type="text"/>	<input type="text"/>	
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) _____		
<input type="text"/>	<input type="text"/>	
Respondent's signature	YYYY / MM / DD Date	