Domain: Impact on Parenting

Breastfeeding

- What method do you plan to use to feed your new baby in the first few weeks?[^40]
  - Breastfeed only (baby will not be given formula)
  - Formula feed only
  - Both breast and formula feed
  - Don’t know yet

[^34]: [JHU Community Response](#)
[^35]: [Environmental Influences on Child Health Outcomes (ECHO) COVID-19 Questionnaire](#)
[^36]: Psychosocial Working Group Recommendation
[^37]: Psychosocial Working Group Recommendation
[^38]: Psychosocial Working Group Recommendation
[^39]: [JHU Community Response](#)
[^40]: [Infant Feeding Practices Study II](#)
• Were you ever advised you should not breastfeed your new baby(ies), for example if you have a health condition that prevents it?\textsuperscript{41}
  
  o Yes
  o No
  o Don’t know

\textit{Postpartum only}

• Did you ever breastfeed or pump breast milk to feed your new baby (or babies if you had twins or more) after delivery, even for a short period of time?\textsuperscript{42} (If mother has multiple babies, direct the mother to answer based on the baby they breastfeed the most)
  
  o Yes
  o No

Feelings of Attachment to Newborn

\textit{Postpartum Only}

• Please indicate how often the following are true for you. There are no 'right' or 'wrong' answers. Choose the answer which seems right in your recent experience:\textsuperscript{43}

<table>
<thead>
<tr>
<th>Feeling</th>
<th>Always</th>
<th>Very often</th>
<th>Quite often</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel close to my baby</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I wish the old days when I had no baby would come back</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>The baby doesn’t seem to be mine</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>My baby winds me up</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>I love my baby to bits</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I feel happy when my baby smiles or laughs</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>My baby irritates me</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>My baby cries too much</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>I feel trapped as a mother</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>I resent my baby</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>My baby is the most beautiful baby in the world</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I wish my baby would somehow go away</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Impact of Pandemic on Children’s Education (Tier 2)

• Do you have children living in your home that you are responsible for?\textsuperscript{44}
  
  o No
  o Yes

  ➤ \textit{If yes, please answer the following questions. If no, move on to next question.}

  How many? __________
  What is the age of the youngest child? _________ Years
  What is the age of the oldest child? _________ Years

\textsuperscript{41} Psychosocial Working Group Recommendation

\textsuperscript{42} PhenX: Pregnancy Risk Assessment Monitoring System (PRAMS)

\textsuperscript{43} Postpartum Bonding Questionnaire

\textsuperscript{44} Study of Pregnancy and Neonatal Health (SPAN) – Attained measures via personal communication
• What is your household’s current situation for childcare and/or schooling? (select all that apply)\textsuperscript{45} 
  o I or someone in my household care for my child(ren) full-time 
  o I or someone in my household care for my child(ren) part-time 
  o I or someone in my household try to balance childcare/home schooling and work/telework responsibilities at home 
  o Someone from outside my household (friend, family, nanny) cares for my child(ren) in my home 
  o My child(ren) goes to a childcare center or someone else’s home for childcare 
  o My child(ren) does not need childcare; they take care of themselves 
  o My child(ren) goes to school in-person 
  o My child(ren) goes to school virtually (online) 

Distress About Impact of Pandemic on Children’s Education (Tier 2) 
• How bothersome or distressful is the current situation for childcare and/or schooling?\textsuperscript{46} 
  o Not at all 
  o A little bit 
  o Somewhat 
  o Quite a bit 
  o Very much 

Impact of Pandemic on Childcare 
• How has the COVID-19 outbreak affected your regular childcare? (Mark all that apply)\textsuperscript{47} 
  o I had difficulty arranging for childcare 
  o I had to pay more for childcare 
  o My spouse/partner or I had to change our work schedule to care for our children ourselves 
  o My regular childcare has not been affected by the COVID-19 outbreak 
  o I do not have a child in childcare.

Distress About the Impact of the Pandemic on Childcare (Tier 2) 
• How bothersome or distressful have the changes to your regular childcare been?\textsuperscript{48} 
  o Not at all 
  o A little bit 
  o Somewhat 
  o Quite a bit 
  o Very much 
  o My regular childcare has not been affected by the COVID-19 outbreak 
  o I do not have a child in childcare