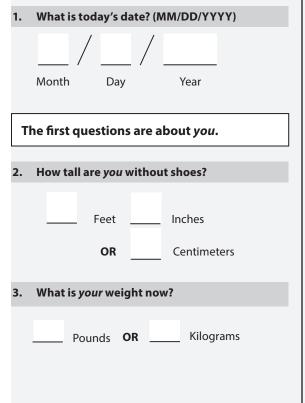
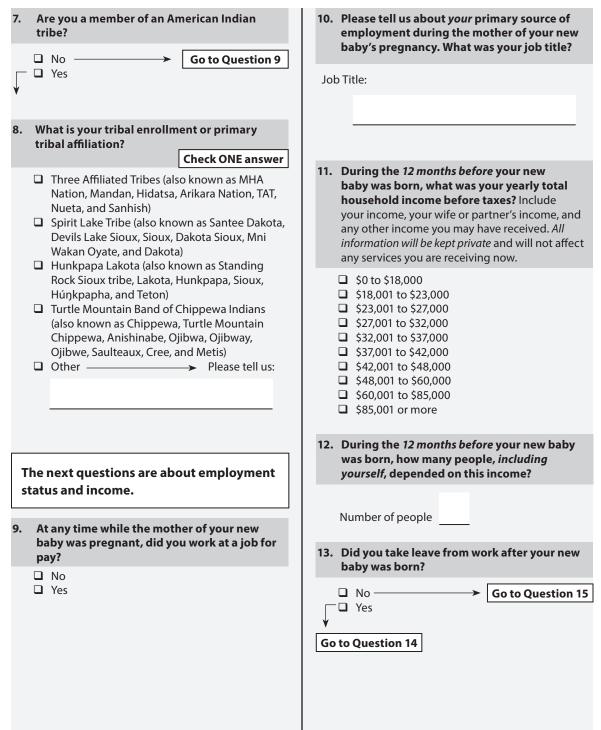
We are asking questions about your social, medical, and economic experiences and perspectives during your transition to fatherhood (the time before, during, and after your most recent child's birth). Your responses will help us to examine risks, benefits, and opportunities relating to parenthood and men's health which will help to inform future education and programs.

Please check the box next to your answer or follow the directions included with the question. You may be asked to skip some questions that do not apply to you.



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14. How many weeks or months of leave, in total, do you plan to take? Write ONE answer Less than 1 week week(s) **OR** month(s) 15. Which of the following affected your decision on whether or not to take leave from work after your new baby was born? Check ALL that apply □ I was able to take the amount of leave from work I wanted My employer supported my ability to take leave □ I was provided with or easily able to find the information I needed to understand the leave options I had □ I was provided or had access to someone who could tell me about my leave options □ I could not financially afford to take leave L was afraid I'd lose my job if I took leave or stayed out longer □ I had too much work to do to take leave or stay out longer My job does not have paid leave □ My job does not offer a flexible work schedule I had not built up enough leave time to take time off □ I wanted more work leave, but could not take more time off □ I wanted to return to work before my work leave ended □ It is unusual in my profession to take leave □ Other -➤ Please tell us:

16. Who currently spends the most time taking care of your new baby when you are in school or working? Check ONE answer The mother of my baby My baby's grandparent(s) Other close family member or relative Friend or neighbor Babysitter, nanny, or other childcare provider in my home Staff at a child care facility

- My baby is with me while I am at school or work
- □ Other Please tell us:

The transition to fatherhood can be overwhelming. The next questions are about resources you may have used or wanted around the time of the mother of your baby's pregnancy.

17. Do you feel that you have access to resources for information specific to fatherhood/ parenthood?

- No
- Yes

18. Which of the following are people or places you go to for information specific to fatherhood/parenthood?

Check ALL that apply

- □ Family and/or friends
- Reputable online resources (websites ending in: .gov, .org, or .edu)
- Other online resources
- Social media (such as Facebook, Twitter, TikTok, or Instagram)
- Parenting groups organized with the hospital or local government (North Dakota Nurturing Parenting Programs)
- Peer parenting groups (virtual or in-person groups specifically for fathers or parents, such as a Facebook "MeetUp" group, or group of friends)
- □ My healthcare provider(s) (such as primary care doctors, nurses, counselor, or therapist)
- My baby's healthcare provider(s) (such as a pediatrician)
- Birth preparation groups (such as hospitalbased birthing or parenting classes, Lamaze classes)
- □ Other Please tell us:
- I do not use any of these resources for information specific to fatherhood/parenthood

19. Which of the following topics on fatherhood did you want to receive information on when you found out you were going to be a father? For each topic, please indicate if you wanted the information and if you received it.

Wanted Received No Yes No Yes a. What to expect during pregnancy b. What to expect during delivery..... c. What to expect after delivery in the first days/weeks with the baby at home d. Information on family planning (having or preventing another pregnancy)..... e. Advice on how to care for a newborn (changing diapers, sleeping, feeding)..... f. Information on child development..... g. Other..... Please tell us:

20.	Which of the following topics support did you want to receiv on when you found out you w a father? For each topic, please wanted the information and if you	ve in f ere g indic	format oing t ate if y	o be ou
	<u>Wan</u> No	<u>ted</u> Yes	<u>Recei</u> No	<u>ved</u> Yes
a.	Finding a group of people in the same situation as me (other new fathers or parents)			
b.	Help with my mental or emotion health (depression, sadness, anxiety, managing my anger)	al		
c.	Help with the mother of my baby mental and emotional health (depression, sadness, anxiety, managing their anger)	y's		
d.	Help with my physical health (weight, blood pressure)			
e.	Help with my relationship with the mother of my baby (couples counseling, how to co-parent, change in sex drive)			
f.	Help with changing family dynamics (adjusting to a new baby or multiple children at home)			
g.	Guidance around my substance use (alcohol, tobacco, marijuana, opioids, or other drugs)			
h.	Guidance around the mother of my baby's substance use (alcoho tobacco, marijuana, opioids, or other drugs)			
i.	Finding support from profession who share and understand my culture, race, ethnicity, and/or language	als		
j.	Other			

21. Which of the following topics on economic stability and employment did you want to receive information on when you found out you were going to be a father? For each topic, please indicate if you wanted the information and if you received it. Wanted Received No Yes No Yes a. Help with time off from work (Family Medical Leave/FMLA, Paid Family Leave/PFML)...... b. Help finding or understanding legal aid (child support, custody, or personal legal concerns) c. Help finding or understanding health insurance related to having a child..... d. Help finding financial assistance, support, or resources (budgeting for a new baby, childcare, child support payments)..... e. Other..... Please tell us: The next questions are about smoking cigarettes and e-cigarettes. 22. After you found out the mother of your baby was pregnant, how many cigarettes did you smoke on an average day? A pack has 20 cigarettes. □ More than one pack (21 or more cigarettes) • One-half to one pack (11 to 20 cigarettes)

5

- Less than half a pack (1 to 10 cigarettes)
- I did not smoke then

- 23. Since your new baby was born, how many cigarettes did you smoke on an average day? A pack has 20 cigarettes.
 - □ More than one pack (21 or more cigarettes)
 - □ One-half to one pack (11 to 20 cigarettes)
 - Less than half a pack (1 to 10 cigarettes)
 - I didn't smoke then
- 24. After you found out the mother of your baby was pregnant, on average, how often did you use e-cigarettes ("vapes") or other electronic nicotine products?
 - Every day
 - Some days
 - I didn't use e-cigarettes or other electronic nicotine products then
- 25. Since your new baby was born, on average, how often did you use e-cigarettes ("vapes") or other electronic nicotine products?
 - Every day
 - Some days
 - I didn't use e-cigarettes or other electronic nicotine products then

The next questions are about drinking

alcohol. A drink can be 1 glass of wine, can or bottle of beer or hard seltzer, shot of liquor, or mixed drink.

26. After you found out the mother of your baby was pregnant, how many alcoholic drinks did you consume in an average week?

- □ 14 drinks or more a week
- □ 8 to 13 drinks a week
- 4 to 7 drinks a week
- 1 to 3 drinks a week
- Less than 1 drink a week
- I did not drink then

27. Considering all types of alcoholic drinks, how many times in the *past month* did you have 5 or more drinks on one occasion?

Number of times

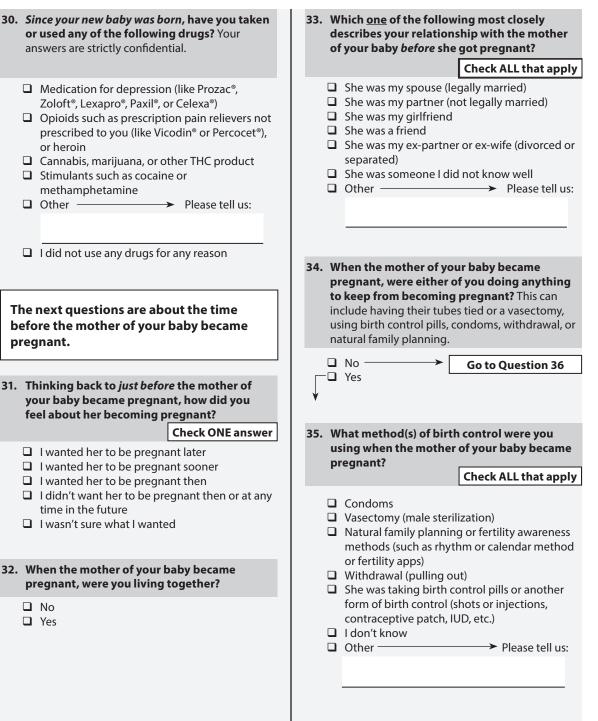
- I did not drink 5 or more drinks on one occassion
- 28. How many alcoholic drinks do you consume *now* in an average week?
 - □ 14 drinks or more a week
 - □ 8 to 13 drinks a week
 - 4 to 7 drinks a week
 - 1 to 3 drinks a week
 - Less than 1 drink a week
 - I do not drink now

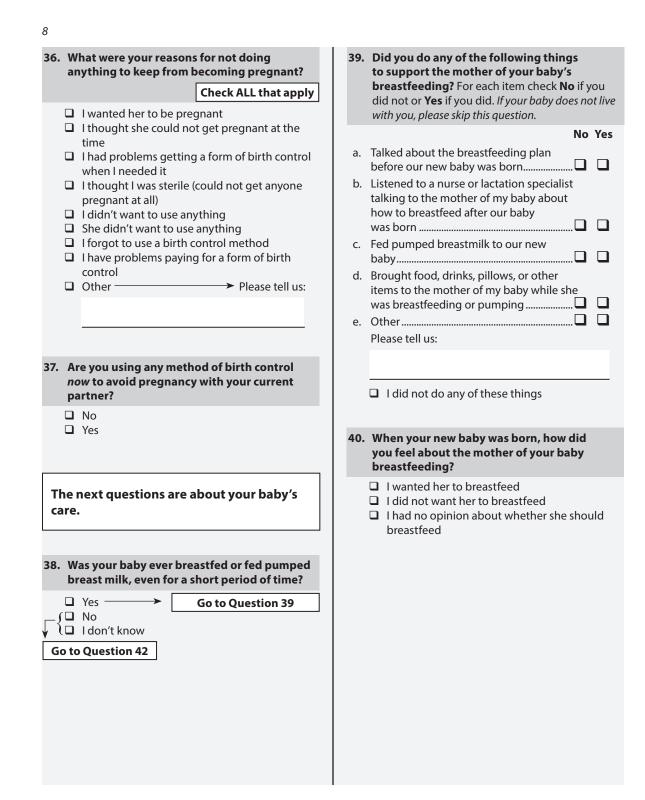
The next questions are about using drugs around the time of pregnancy.

29. When the mother of your baby was pregnant did you use any of the following drugs for any reason? Your answers are strictly confidential.

Check ALL that apply

- Medication for depression (like Prozac[®], Zoloft[®], Lexapro[®], Paxil[®], or Celexa[®])
- Opioids such as prescription pain relievers not prescribed to you (like Vicodin[®] or Percocet[®]), or heroin
- □ Cannabis, marijuana, or other THC product
- Stimulants such as cocaine or methamphetamine
- □ I did not use any drugs for any reason





41. What else could have been done by healthcare workers, clinics, or others to better help you support the mother of your baby's breastfeeding?

Check ALL that apply

- □ More information offered from the hospital or healthcare providers during pregnancy
- □ More information specific to fathers offered during pregnancy
- More community resources offered about breastfeeding
- □ More father-specific information offered once the baby was born
- □ Other ➤ Please tell us:
- Nothing could have been done to better help me support the mother of my baby's breastfeeding

42. Listed below are some statements about caring for your new baby. Do you have knowledge on the following topics? For each item, check No if you do not have knowledge of it or **Yes** if you do.

		No	Yes
a.	How to properly buckle my new baby into their car seat	🗖	
b.	How to safely store potentially dangerous items from my new baby (guns, cleaning products, choking hazards)		
c.	How to feed my new baby with a bottle		
d.	How to change my new baby's diaper		
e.	Where to go if my new baby needs regular medical care	🗖	
f.	Where to go if my new baby needs emergency medical care		
g.	The safest position to lay my new baby to sleep		
h.	The safest environment for infant sleep		

		No	Yes
a.	In a crib, bassinet, or pack and play	. 🗖	
b.	On a twin or larger mattress or bed	. 🗖	
c.	On a couch, sofa, or armchair	. 🗖	
d.	In an infant car seat or swing	. 🗖	
e.	In a sleeping sack or wearable blanket	. 🗖	
f.	With a blanket	. 🗖	
g.	With toys, cushions, or pillows, including nursing pillows	. 🗖	
h.	With crib bumper pads (mesh or non-mesh)	. 🗖	
i.	In the bed with me or with my partner	. 🗖	
j.	Other	. 🗖	
	Please tell us:		

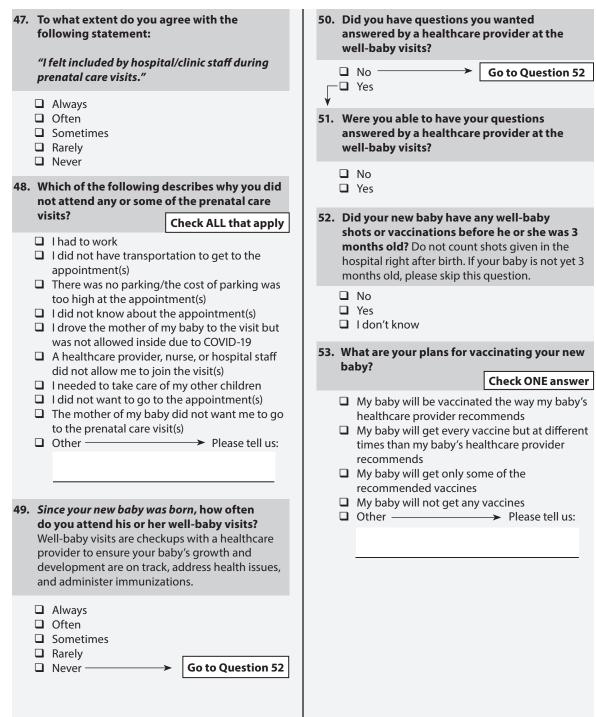
44. In which *one* position do you <u>most often</u> lay your baby down to sleep *now*?

Check ONE answer

- On their side
- On their back
- On their stomach
- I don't lay my baby down to sleep

The next questions are about your experience during healthcare visits during pregnancy and delivery.

45. During the mother of your baby's most recent pregnancy, how many prenatal care visits did you attend? **Check ONE answer** □ 1 to 3 □ 4 to 6 **7** to 9 Go to Question 48 10 or more I did not attend any prenatal care visits -The mother of my baby did not go for prenatal care Go to Question 49 46. What were the reasons that you attended prenatal care visits? Check ALL that apply □ I was excited to be a part of the prenatal care visits □ I wanted to support the mother of my baby □ The mother of my baby wanted me to support her □ I felt it was my responsibility or duty as a father □ I wanted to learn what the mother of my baby learned □ I had guestions that I wanted answered about pregnancy □ I had guestions that I wanted answered about fatherhood/parenthood □ To see the results of a prenatal test or ultrasound □ To ensure our baby is as healthy as possible To gain skills as a father □ To improve/understand my own health during the mother of my baby's pregnancy □ I provided transportation for the mother of my baby Other · ➤ Please tell us:



The next questions are about *your current* living situation and mental health.

54. During the past 12 months, did any of the following statements ever apply to you?

Check ALL that apply

- □ I did not have affordable, reliable transportation
- I skipped meals or ate less because there wasn't enough money to buy food
- I did not have safe housing
- □ I did not have consistent and stable housing
- My house or apartment was too crowded
- I did not have basic utility services (heat, water, lights)
- I did not have access to a telephone when I needed
- I had other basic needs that were not met Please tell us:

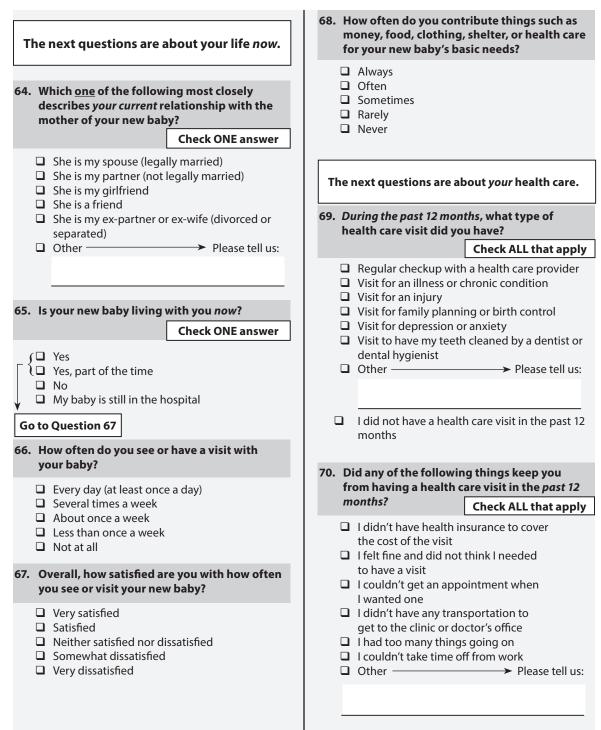
55. During the past 12 months, did any of the following statements ever apply to you?

Check ALL that apply

- A close family member was very sick and had to go to the hospital
- I was separated or divorced from my wife or partner
- I moved to a new address
- I was homeless or had to sleep outside, in a car, or in a shelter
- □ My wife or partner lost their job
- I lost my job even though I wanted to continue working
- My wife, partner, or I had a cut in work hours or pay
- I was apart from my wife or partner due to military deployment or extended work-related travel
- I argued with my wife or partner more than usual
- My wife or partner said they didn't want to be pregnant
- □ I had problems paying the rent, mortgage, or other bills
- □ My wife or partner went to jail
- I went to jail
- Someone very close to me had a problem with alcohol and/or drugs
- Someone very close to me died

56.	fo he sti ite	Uring the past 12 months, were any of Ilowing statements true for you? A ealth disorder could be anxiety, depre ress or some other mental illness. For em, check No if this was not true for you it was.	men ssior each	ital 1,
			No	Yes
a.	pr he	doctor, nurse, or other healthcare ovider told me I had a mental alth disorder	🗖	
b.	pro pro he	doctor, nurse, or other healthcare ovider recommended that I take a escription medication for a mental ralth disorder		
c.		ook medication for a mental alth disorder		
d.	pr co	doctor, nurse, or other healthcare ovider recommended that I get unseling for a mental health sorder		
e.	١re	eceived counseling for a mental Palth disorder		
57.		nce your new baby was born, how of ou felt down, depressed, or hopeles		have
		Rarely		
58.	yc	nce your new baby was born, how of ou had little interest or little pleasu bing things?		
		Often Sometimes Rarely		

- 59. Since your new baby was born, how often have you felt nervous, anxious, or on edge?
 - Always
 - Often
 - Sometimes
 - Rarely
 - Never
- 60. Since your new baby was born, how often have you experienced difficulty controlling your anger or temper?
 - Always
 - Often
 - Sometimes
 - Rarely
 - Never
- 61. Since your new baby was born, how often have you <u>not</u> been able to stop or control worrying?
 - Always
 - Often
 - Sometimes
 - Rarely
 - Never
- 62. Do you have difficulty caring for yourself or your new baby due to a physical, mental, or emotional condition?
 - 🛛 No
 - Yes
- 63. Since your new baby was born, how would you describe your overall mental and physical health?
 - Excellent
 - Very good
 - Good
 - 🛛 Fair
 - Poor



- 71. Do you *currently* take any prescription medications?
 - No
 - Yes
- 72. Do you *currently* have any of the following health conditions? For each option, check NO if you do not have the condition, and **YES** if you do.

		No	Yes
a.	Type 1 or Type 2 diabetes		
b.	High blood pressure or hypertension	. 🗖	
c.	High cholesterol		
d.	Chronic Obstructive Pulmonary		
	Disease (COPD)	. 🗖	
e.	Heart disease	. 🗖	
f.	Depression		
g.	Anxiety		
h.	Asthma		
i.	Anemia (poor blood, low iron)		
j.	Epilepsy (seizures)		
k.	Thyroid problems		
I.	Chronic pain	. 🗖	
m.	Sexually Transmitted Infection (STI)		
n.	Other		
	Please tell us:		

The last questions are about childcare.

73. How many children under 6 years of age are living in your household?

Number of children under 6

□ I do not have any children under 6 years of age living in my household

↓		No Go to Question 77 Yes I don't have any chidren under 6 years of age living with me Go to Question 77
75.	ch	the childcare paid by another person or a ildcare assistance program? Do not include yments or reimbursements that go directly to u.
Г		No Go to Question 77 Yes
¥		I don't know> Go to Question 77
76.	w	ho pays for the childcare services?
		Check ALL that apply
		A government agency such as for welfare, employment services, or child development A non-government organization such as a community group or religious institution The child's parent who lives outside of my household Other family or friend An employer Other I don't know

74. Do you use childcare services?

77. In general, how satisfied are you with the quality and cost of childcare and early education available to families with children in your community?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Somewhat dissatisfied
- Very dissatisfied

78. Which <u>one</u> of the following best describes your most recent employement in the *past 5* years?

- □ Private sector employee manufacturing
- □ Private sector employee wholesale trade
- D Private sector employee retail sale
- Private sector employee other Please tell us:
- Government employee
- □ Self-employed
- Unemployed

We would love to hear more about your story! Is there anything else you would like to share with us about your experiences around the time of your new baby's birth? Please use this space to tell us.

Thank you for answering our questions!

Your answers will help us work to improve the health and wellness of men, women, children, and families in North Dakota.