# PIRLS 2006 Home Questionnaire

## Identification Label

<table>
<thead>
<tr>
<th>Student ID:</th>
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<tbody>
<tr>
<td>Student Name:</td>
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<tr>
<td>School Name:</td>
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</table>

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**LEARNING TO READ SURVEY**

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Learning to Read Survey

Your child’s class has been selected to participate in the Progress in International Reading Literacy Study (PIRLS), a research study about how children learn to read. PIRLS is sponsored by the International Association for the Evaluation of Educational Achievement (IEA) and is being conducted in about 40 countries around the world.

This survey asks about your child’s experiences in learning to read. We are interested in what you and your child do and what you think about different things related to your child’s school. There are no right or wrong answers to these questions.

The information being collected will be extremely useful for helping understand how young children learn to read and for helping to improve the teaching and learning of reading for all children. We ask that you respond to all of the questions you feel comfortable answering. We would like to reassure you, however, that your responses to this survey are confidential.

This survey should be completed by the child’s parent or current <primary caregiver>, or jointly by both parents or <primary caregivers>.

PIRLS 2006
Before Your Child Began <i>ISCED Level 1</i>

2

Before your child began <i>ISCED Level 1</i>, how often did you or someone else in your home do the following activities with him or her?

Check <b>one</b> circle for each line.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never or almost never</th>
<th>Sometimes</th>
<th>Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Read books</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Tell stories</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Sing songs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Play with alphabet toys (for example, blocks with letters of the alphabet)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Talk about things you had done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Talk about what you had read</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g) Play word games</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h) Write letters or words</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Read aloud signs and labels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j) Visit a library</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k) &lt;i&gt;Country-specific&lt;/i&gt;</td>
<td></td>
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</tr>
</tbody>
</table>

3

In what language did most of the activities in Question 2 take place?

Check <b>one</b> circle only.

- Language of test
- Another language

4

What language did your child speak before he/she began school?

If your child spoke more than one language at the same time, you can check "Yes" for more than one language.

Check <b>one</b> circle for each line.

<table>
<thead>
<tr>
<th>Language</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Language of test</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) &lt;i&gt;Country-specific&lt;/i&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) &lt;i&gt;Country-specific&lt;/i&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) &lt;i&gt;Country-specific&lt;/i&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) &lt;i&gt;Country-specific&lt;/i&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5

Did your child attend <i>ISCED Level 0</i>?

Check <b>one</b> circle only.

- Yes
- No

(If No, go to #6)

If Yes...

a. How long was he/she in <i>ISCED Level 0</i>?

Check <b>one</b> circle only.

- 3 years or more
- Between 2 and 3 years
- 2 years
- Between 1 and 2 years
- 1 year or less

ASBHAL
### Beginning <i>ISCED Level 1</i>

6. How old was your child when he/she began <i>ISCED Level 1</i>?

Check one circle only:
- 5 years old or younger  
- 6 years old  
- 7 years old  
- 8 years old or older  

7. How well could your child do the following when he/she began <i>ISCED Level 1</i>?

Check one circle for each line.

- Very well
- Moderately well
- Not very well
- Not at all

a) Recognize most of the letters of the alphabet  

b) Read some words  

c) Read sentences  

d) Write letters of the alphabet  

e) Write some words  

### Activities With Your Child More Recently

8. How often do you or someone else in your home do the following things with your child?

Check one circle for each line.

- Every day or almost every day
- Once or twice a week
- Once or twice a month
- Never or almost never

a) Listen to my child read aloud  

b) Talk with my child about things we have done  

c) Talk with my child about what he/she is reading on his/her own  

d) Discuss my child’s classroom reading work with him/her  

e) Go to the library or a bookstore with my child  

f) Help my child with reading for school  

9. In what language do most of the activities in Question 8 take place?

Check one circle only:
- Language of test
- Another language
10   On average, how much time does your child spend on homework in a day?  

Check one circle only:

- My child does not have homework
- 15 minutes or less
- 16-30 minutes
- 31-60 minutes
- More than 60 minutes

11   What do you think of your child's school?

Check one circle for each line.  

- Agree a lot
- Agree a little
- Disagree a little
- Disagree a lot

a) My child's school includes me in my child's education
b) My child's school should make a greater effort to include me in my child's education
c) My child's school cares about my child's progress in school
d) My child's school does a good job in helping my child become better in reading
12. In a typical week, how much time do you usually spend reading for yourself at home, including books, magazines, newspapers, and materials for work?

Check one circle only.

- Less than one hour a week
- 1-5 hours a week
- 6-10 hours a week
- More than 10 hours a week

13. When you are at home, how often do you read for your own enjoyment?

Check one circle only.

- Every day or almost every day
- Once or twice a week
- Once or twice a month
- Never or almost never

14. Please indicate how much you agree with the following statements about reading.

Check one circle for each line.

- Agree a lot
- Agree a little
- Disagree a little
- Disagree a lot

a) I read only if I have to ____________________________

b) I like talking about books with other people

c) I like to spend my spare time reading

d) I read only if I need information____________________

e) Reading is an important activity in my home ____________

15. About how many books are there in your home?
(Do not count magazines, newspapers or children’s books.)

Check one circle only.

- 0 - 10
- 11 - 25
- 26 - 100
- 101 - 200
- more than 200
16. About how many children’s books are there in your home? (Do not count children’s magazines or school books.)

Check one circle only.

- 0 - 10
- 11 - 25
- 26 - 50
- 51 - 100
- more than 100

b. Are these books mainly in <language of test>?

Check one circle only.

- Yes
- No

17. When talking at home with your child, what language does the child’s father (or stepfather or male guardian) use most often? What language does the child’s mother (or stepmother or female guardian) use most often?

Check one circle in each column.

- a) <language of test>
- b) <country-specific>
- c) <country-specific>
- d) <country-specific>
- e) <country-specific>
- f) Other
- g) Not applicable

18. What is the highest level of education completed by the child’s father (or stepfather or male guardian) and mother (or stepmother or female guardian)?

Check one circle in each column.

- a) Some <ISCED Level 1 or 2> or did not go to school
- b) <ISCED Level 2>
- c) <ISCED Level 3>
- d) <ISCED Level 4>
- e) <ISCED Level 5B>
- f) <ISCED Level 5A, first degree>
- g) Beyond <ISCED Level 5A, first degree>
- h) Not applicable

19. Which best describes the employment situation of the child’s father (or stepfather or male guardian) and mother (or stepmother or female guardian)?

Check one circle in each column.

- a) Working at least full-time for pay (this could be one or more full-time jobs or several part-time jobs that add up to full-time work)
- b) Working part-time only for pay
- c) Not working for pay, but looking for a job
- d) Other
- e) Not applicable
**20. What kind of work do the child’s father (or stepfather or male guardian) and mother (or stepmother or female guardian) do for their main jobs?**

For each, check the box for the job category that best describes what he/she does. Each category has a few examples to help you decide the correct category. If the father or mother is not working now, think about the last job he/she had.

<table>
<thead>
<tr>
<th>Child’s father</th>
<th>Child’s mother</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Has never worked outside the home for pay</td>
<td></td>
</tr>
<tr>
<td>b) Small Business Owner</td>
<td></td>
</tr>
<tr>
<td>c) Clerk</td>
<td></td>
</tr>
<tr>
<td>d) Service or Sales Worker</td>
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<tr>
<td>e) Skilled Agricultural or Fishery Worker</td>
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<tr>
<td>f) Craft or Trade Worker</td>
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<tr>
<td>g) Plant or Machine Operator</td>
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<tr>
<td>h) General Laborers</td>
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<tr>
<td>i) Corporate Manager or Senior Official</td>
<td></td>
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<tr>
<td>j) Professional</td>
<td></td>
</tr>
<tr>
<td>k) Technician or Associate</td>
<td></td>
</tr>
<tr>
<td>l) Not applicable</td>
<td></td>
</tr>
</tbody>
</table>

Check one circle in each column.
21. Compared with other families, how well-off do you think your family is financially?

Check one circle only:
- Very well-off
- Somewhat well-off
- Average
- Not very well-off
- Not at all well-off

22. About how long did it take you to complete this survey?

_________ minutes

Write in a number.