



Parent Report

# TEDS-21 Study

Please answer all questions as best you can even if you are unsure or if the question seems repetitive.

Please indicate your answers with a cross

If you make a mistake, shade out and cross the appropriate box, e.g.   →

Please remember to complete this questionnaire using BLACK ink only.

Thank you for taking part in this study. Your contribution is very important to us.

## **Confidentiality**

We understand that your thoughts and feelings are private. Please be assured that all responses will remain confidential, and will only be read by the researcher. All responses will be kept in accordance with the Data Protection Act 1998.

What best describes the living arrangement of you and your twins?

- Both twins have a permanent residence with me
- Only the elder twin has a permanent residence with me
- Only the younger twin has a permanent residence with me
- Neither twin lives permanently at home

If either twin no longer lives permanently at home, when did s/he move out?  
(Skip if not applicable)

	During the last 12 months	1-2 years ago	2-3 years ago	3-4 years ago	More than 4 years ago
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We are interested in your feelings towards your twins. Please answer the following.

	Strongly agree	Slightly agree	Neither agree nor disagree	Slightly disagree	Strongly disagree
1 I feel impatient with ...					
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 I feel happy about my relationship with ...					
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 I am amused by ...					
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 My twin makes me angry					
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 I feel close to ...					
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 I feel frustrated by ...					
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Which of the following best describes the **type of work** done by the male and female parents in the household (mother, father, step-parents, foster parents, etc.)?

Please **tick one option for each parent**.

If there is only one parent figure present in the household, please skip the relevant column.

	Female parent	Male parent
Not working (unemployed, retired, studying, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Manager, director or senior official	<input type="checkbox"/>	<input type="checkbox"/>
Science, engineering or IT professional	<input type="checkbox"/>	<input type="checkbox"/>
Teacher, lecturer, research or education professional	<input type="checkbox"/>	<input type="checkbox"/>
Qualified professional such as doctor, accountant, solicitor, architect, clergy	<input type="checkbox"/>	<input type="checkbox"/>
Technician	<input type="checkbox"/>	<input type="checkbox"/>
Nurse or qualified therapist	<input type="checkbox"/>	<input type="checkbox"/>
Armed forces, police or protective services	<input type="checkbox"/>	<input type="checkbox"/>
Artistic or literary, design or media, or sports occupation	<input type="checkbox"/>	<input type="checkbox"/>
Business or finance worker	<input type="checkbox"/>	<input type="checkbox"/>
Public services	<input type="checkbox"/>	<input type="checkbox"/>
Administrator	<input type="checkbox"/>	<input type="checkbox"/>
Secretary, PA, receptionist, clerical work	<input type="checkbox"/>	<input type="checkbox"/>
Agricultural or horticultural trades	<input type="checkbox"/>	<input type="checkbox"/>
Skilled trades or crafts (building, electrical, mechanical, printing, chef, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Childcare, healthcare or veterinary assistant	<input type="checkbox"/>	<input type="checkbox"/>
Leisure or travel services	<input type="checkbox"/>	<input type="checkbox"/>
Hairdressing, housekeeping and other personal services	<input type="checkbox"/>	<input type="checkbox"/>
Retail, sales and customer services	<input type="checkbox"/>	<input type="checkbox"/>
Factory work or machine operator	<input type="checkbox"/>	<input type="checkbox"/>
Driver or transport operator	<input type="checkbox"/>	<input type="checkbox"/>
Labourer	<input type="checkbox"/>	<input type="checkbox"/>
Postal worker, courier or messenger	<input type="checkbox"/>	<input type="checkbox"/>
Goods handling, porter, shelf-filling, storage	<input type="checkbox"/>	<input type="checkbox"/>
Security guard, attendant, school patrol, traffic warden	<input type="checkbox"/>	<input type="checkbox"/>
Cleaning, laundering, refuse collection	<input type="checkbox"/>	<input type="checkbox"/>
Kitchen worker, bar staff, waiter or waitress	<input type="checkbox"/>	<input type="checkbox"/>

What is the **highest level of qualifications** reached by the male and female parents in the household (mother, father, step-parents, foster parents, etc.)?

Please **tick one option for each parent**.

If there is only one parent figure present in the household, please skip the relevant column.

	Female parent	Male parent
No qualifications	<input type="checkbox"/>	<input type="checkbox"/>
GCSEs with grades D - G	<input type="checkbox"/>	<input type="checkbox"/>
O-levels with grades D or E (or grades 7 - 9)	<input type="checkbox"/>	<input type="checkbox"/>
CSEs with grades 2 - 5	<input type="checkbox"/>	<input type="checkbox"/>
1 to 4 GCSEs with grades A - C	<input type="checkbox"/>	<input type="checkbox"/>
1 to 4 O-levels with grades A - C (or grades 1 - 6)	<input type="checkbox"/>	<input type="checkbox"/>
1 to 4 CSEs with grade 1	<input type="checkbox"/>	<input type="checkbox"/>
5 or more GCSEs with grades A - C	<input type="checkbox"/>	<input type="checkbox"/>
5 or more O-levels with grades A - C (or grades 1 - 6)	<input type="checkbox"/>	<input type="checkbox"/>
5 or more CSEs with grade 1	<input type="checkbox"/>	<input type="checkbox"/>
School Certificate (pre-1951)	<input type="checkbox"/>	<input type="checkbox"/>
1 A-level pass (grades A - E)	<input type="checkbox"/>	<input type="checkbox"/>
2 or more A-level passes (grades A - E)	<input type="checkbox"/>	<input type="checkbox"/>
Higher School Certificate (pre-1951)	<input type="checkbox"/>	<input type="checkbox"/>
First degree (e.g. BA or BSc)	<input type="checkbox"/>	<input type="checkbox"/>
Higher degree (e.g. MA, PhD)	<input type="checkbox"/>	<input type="checkbox"/>
Postgraduate certificate or diploma (e.g. PGCE)	<input type="checkbox"/>	<input type="checkbox"/>

What is your approximate total **household income** per year, before tax? This should include the income of yourself and your partner (if any), but not your twins or other children.

Under £5,000	<input type="checkbox"/>	£30,000 to £39,999	<input type="checkbox"/>
£5,000 to £9,999	<input type="checkbox"/>	£40,000 to £49,999	<input type="checkbox"/>
£10,000 to £14,999	<input type="checkbox"/>	£50,000 to £74,999	<input type="checkbox"/>
£15,000 to £19,999	<input type="checkbox"/>	£75,000 to £100,000	<input type="checkbox"/>
£20,000 to £24,999	<input type="checkbox"/>	Over £100,000	<input type="checkbox"/>
£25,000 to £29,999	<input type="checkbox"/>		

We are interested in everyday risk-taking by your twins. To what extent do you think each of your twins takes the following risks in his/her life?

	Never	Rarely	Quite often	Often	Very often
1 Recreational risks (e.g. skiing, skateboarding, cliff-jumping/tombstoning)					
Elder twin	<input type="checkbox"/>				
Younger twin	<input type="checkbox"/>				
2 Health risks (e.g. smoking, poor diet, high alcohol consumption)					
Elder twin	<input type="checkbox"/>				
Younger twin	<input type="checkbox"/>				
3 Career risks (e.g. quitting a job without another to go to)					
Elder twin	<input type="checkbox"/>				
Younger twin	<input type="checkbox"/>				
4 Financial risks (e.g. gambling, risky investments)					
Elder twin	<input type="checkbox"/>				
Younger twin	<input type="checkbox"/>				
5 Safety risks (e.g. fast driving, cycling without a helmet, being in a car without a seat belt)					
Elder twin	<input type="checkbox"/>				
Younger twin	<input type="checkbox"/>				
6 Social risks (e.g. standing for election, publicly challenging a rule or decision)					
Elder twin	<input type="checkbox"/>				
Younger twin	<input type="checkbox"/>				

To what extent do you agree with the following statements about each twin?

		Not true	Quite true	Very true
1	S/he is nice to other people. S/he cares about their feelings			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	S/he is restless and cannot stay still for long			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	S/he gets a lot of headaches, stomach aches or sickness			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	S/he usually shares with others			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	S/he gets very angry and often loses her/his temper			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	S/he is usually on her/his own and generally keeps to her/himself			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	S/he usually does what is instructed			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	S/he worries a lot			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	S/he is helpful if someone is hurt, upset or feeling ill			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	S/he is constantly fidgeting or squirming			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	S/he has one good friend or more			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	S/he gets into fights a lot and can make other people do what s/he wants			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Not true	Quite true	Very true
13	S/he is often unhappy, down-hearted or tearful			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Other people her/his age generally like her/him			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	S/he is easily distracted and finds it difficult to concentrate			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	S/he is nervous in new situations and easily loses confidence			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	S/he is kind to others			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	S/he is often accused of lying or cheating			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	Other people tend to pick on or bully her/him			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	S/he often volunteers to help others			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	S/he thinks before s/he does things			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	S/he steals			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23	S/he gets on better with older adults than with people her/his own age			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	S/he has many fears, s/he is easily scared			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	S/he finishes the work s/he is doing. Her/his attention is good.			
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please rate below how true the statements are in relation to each twin.

		Not at all true	Somewhat true	Mainly true	Definitely true
1	Has a lack of energy and motivation				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Often does not have much to say for himself/herself				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Usually gives brief, one word replies to questions, even if encouraged to say more				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Is often inattentive and appears distracted				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Seems emotionally "flat", for example, rarely changes the emotions he/she shows				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Often sits around for a long time doing nothing				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Has very few interests or hobbies				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Often does not pay attention when being spoken to				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Often fails to smile or laugh at things others would find funny				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Has few or no friends				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thinking about your twins' behaviour over the **last six months**, please read each statement and decide how well it describes your twins.

		Not at all true	Somewhat true	Mainly true	Definitely true
1	Doesn't pay attention to details; makes careless mistakes				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Has trouble keeping his/her mind on work or on other tasks for long				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Does not seem to listen to what is being said to him/her				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Does not follow through on instructions and fails to complete academic assignments (even when he/she understands and is trying to cooperate)				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Has trouble organizing tasks or activities				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Avoids or dislikes things that take a lot of effort and are not fun				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Loses things (for example, pencils, books, tools or keys)				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Is easily distracted by external stimuli (for example, sights or sounds)				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Is forgetful in daily activities				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Fidgets or squirms in seat				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Not at all true	Somewhat true	Mainly true	Definitely true
11	Leaves seat when he/she should stay seated				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Restless or overactive				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Finds it difficult to be quiet when engaging in leisure activities				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Acts as if driven by a motor, constantly on the go				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Talks too much				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Blurts out answers before the question has been completed				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Has difficulty waiting for his/her turn				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	Interrupts others (for example, butts into conversations or games)				
	Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Children of your twins

TEDS is launching a new study called Children of TEDS (CoTEDS). The aim is to collect data on the development of the TEDS twins' children. In order to invite TEDS twins to join CoTEDS, we are gathering information about which of them have children. If either of your twins have or are expecting children, and if you think that they might be interested in joining CoTEDS, please answer the questions below.

1. Do either of your twins have children?

	Yes	No
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>

2. If yes, and if you are prepared to give details, please tell us about the children below.

- (a) Elder twin's children:

Child's full name	Child's birth date (dd/mm/yyyy)	Child's gender (M or F)
Child 1		
Child 2		
Child 3		

- (b) Younger twin's children:

Child's full name	Child's birth date (dd/mm/yyyy)	Child's gender (M or F)
Child 1		
Child 2		
Child 3		

3. Are either of your twins currently expecting a baby? If yes, and you are prepared to give details, please also tell us the approximate expected due date.

	Yes	No	Expected due date (dd/mm/yyyy)
Elder twin	<input type="checkbox"/>	<input type="checkbox"/>	
Younger twin	<input type="checkbox"/>	<input type="checkbox"/>	

4. If there is anything that you think we should know before inviting either of your twins to join CoTEDS, please let us know in the space below.

**Thank you for answering our questions.  
We really appreciate your help.**

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