

Identification Label



**TIMSS**  
LONGITUDINAL

2023–2024

TRENDS IN INTERNATIONAL  
MATHEMATICS AND SCIENCE STUDY

# Early Learning Survey

**<Grade 5>**

**<TIMSS National Research Center Name>**

**<Address>**



**TIMSS & PIRLS**  
International Study Center  
Lynch School of Education  
BOSTON COLLEGE

## Early Learning Survey

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Last year, your child's class was selected to participate in the Trends in International Mathematics and Science Study (TIMSS) 2023 Longitudinal Study.

TIMSS is an international research study about how children learn to do mathematics and science. TIMSS 2023 Longitudinal is an important follow-up study that follows students for one year (from 2023 to 2024) to measure children's learning gains in mathematics and science achievement. The study is sponsored by the International Association for the Evaluation of Educational Achievement (IEA).

This survey is similar to a survey you were asked to complete last year, but focuses on information that can help explain learning gains. We are interested in what you and your child do together 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 to understand how children learn and for helping to improve the teaching and learning for all children. We ask that you respond to all of the questions you feel comfortable answering. We would like to reassure you that your responses to this survey are confidential.

**This survey should be completed by the child's <parent/guardian>, or jointly by both <parents/guardians>.**

**TIMSS 2023**  
**LONGITUDINAL**

## 1

### 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        |
|----------|---------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| ASBLH01A | a) My child's school does a good job including me in my child's education ----                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01B | b) My child's school provides a safe environment -----                                            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01C | c) My child's school cares about my child's progress in school -----                              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01D | d) My child's school does a good job informing me of his/her progress -----                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01E | e) My child's school promotes high academic standards -----                                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01F | f) My child's school does a good job in helping him/her become better in <u>reading</u> ----      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01G | g) My child's school does a good job in helping him/her become better in <u>mathematics</u> ----- | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH01H | h) My child's school does a good job in helping him/her become better in <u>science</u> -----     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## 2

Please estimate how many of the parent-teacher meetings scheduled by your child's school that you or someone else in your home have attended over the past school year.

ASBLH02

Check **one** circle only.

All meetings--- ☐

Most of the meetings--- ☐

About half of the meetings--- ☐

Fewer than half of the meetings-- ☐

No meetings--- ☐

### 3

**How often have you or someone else in your home initiated a meeting with your child's teacher in the past school year?**

ASBLH03

Check **one** circle only.

- More than 5 times--- ☐
- 3 to 5 times--- ☐
- Once or twice--- ☐
- Never--- ☐

### 4

**Have you or someone else in your home done the following over the past school year?**

Check **one** circle for each line.

- |          |                                                                                                                               | Yes                   | No                    |
|----------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|
| ASBLH04A | a) Helped with organizing school or class events (e.g., field trips, celebrations) -----                                      | <input type="radio"/> | <input type="radio"/> |
| ASBLH04B | b) Attended a school or class event (e.g., concert, play) -----                                                               | <input type="radio"/> | <input type="radio"/> |
| ASBLH04C | c) Contacted a representative about decision-making at the school (e.g., <elected parent representative, school board>) ----- | <input type="radio"/> | <input type="radio"/> |
| ASBLH04D | d) Spoken with other parents about the school -----                                                                           | <input type="radio"/> | <input type="radio"/> |

## 5

**How often have you or someone else in your home done the following with your child over the past school year?**

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 |
|----------|----------------------------------------------------------------------------------------------------|-------------------------------|-----------------------|-----------------------|-----------------------|
| ASBLH05A | a) Talked about your child's school day-----                                                       | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH05B | b) Practiced reading, math, or other skills-----                                                   | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH05C | c) Done creative activities (e.g., <crafts, drawing>)-----                                         | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH05D | d) Taken your child to places where they have opportunities to learn (e.g., <museum, library>)---- | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## 6

**How often have you or someone else in your home done the following when your child is assigned homework?**

Check **one** circle for each line.

|          |                                                              | Often                 | Sometimes             | Never or almost never |
|----------|--------------------------------------------------------------|-----------------------|-----------------------|-----------------------|
| ASBLH06A | a) Made sure the homework was completed ----                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH06B | b) Helped your child with his/her homework when needed ----- | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## 7

**How often do you or someone else in your home do these things with your child?**

Check **one** circle for each line.

|          |                                                                                                              | Every day             | Almost every day      | Sometimes             | Never                 |
|----------|--------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| ASBLH07A | a) Discuss environmental problems (e.g., <climate change, endangered animals>) -----                         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH07B | b) Read or watch information about environmental problems (e.g., <climate change, endangered animals>) ----- | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH07C | c) Show him/her how to use less resources (e.g., <water, energy>) to help the natural environment -----      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH07D | d) Spend time in nature (e.g., <forest, parks, deserts>) -----                                               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASBLH07E | e) Encourage him/her to take action to protect the natural environment -----                                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## 8

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

ASBLH08

Check **one** circle only.

- 0-10--- ☐
- 11-25--- ☐
- 26-100--- ☐
- 101-200--- ☐
- More than 200--- ☐

9

ASBLH09

About how many **children's** books are there in your home? (Do not count children's ebooks, magazines, or school books.)

Check **one** circle only.

- 0–10--- ☐
- 11–25--- ☐
- 26–50--- ☐
- 51–100--- ☐
- More than 100--- ☐

10

Do you have any of these digital resources in your home?

Check **one** circle for each line.

- |          |                                  | Yes                   | No                    |
|----------|----------------------------------|-----------------------|-----------------------|
| ASBLH10A | a) A computer or laptop -----    | <input type="radio"/> | <input type="radio"/> |
| ASBLH10B | b) A tablet or e-reader -----    | <input type="radio"/> | <input type="radio"/> |
| ASBLH10C | c) Reliable internet access----- | <input type="radio"/> | <input type="radio"/> |

The following questions are about the child's <Parent/Guardian A> and <Parent/Guardian B>. <If the child has only one parent/guardian, answer for Parent/Guardian A. If there are two parents/guardians, choose one for Parent/Guardian A and the other for Parent/Guardian B.>

**11**

**Do the child's <parents/guardians> talk with the child in the following languages?**

Check **all** that apply.

|           |                             | <Parent/<br>Guardian A> | <Parent/<br>Guardian B> |           |
|-----------|-----------------------------|-------------------------|-------------------------|-----------|
| ASBLH11AA | a) <language of test> ----- | <input type="radio"/>   | <input type="radio"/>   | ASBLH11AB |
| ASBLH11BA | b) <country-specific> ----- | <input type="radio"/>   | <input type="radio"/>   | ASBLH11BB |
| ASBLH11CA | c) <country-specific> ----- | <input type="radio"/>   | <input type="radio"/>   | ASBLH11CB |
| ASBLH11DA | d) <country-specific> ----- | <input type="radio"/>   | <input type="radio"/>   | ASBLH11DB |
| ASBLH11EA | e) <country-specific> ----- | <input type="radio"/>   | <input type="radio"/>   | ASBLH11EB |
| ASBLH11FA | f) Other -----              | <input type="radio"/>   | <input type="radio"/>   | ASBLH11FB |
| ASBLH11GA | g) Not applicable -----     | <input type="radio"/>   | <input type="radio"/>   | ASBLH11GB |

**12**

**How often does your child speak <language of test> at home?**

ASBLH12

Check **one** circle only.

- Always--- ☐
- Almost always--- ☐
- Sometimes--- ☐
- Never--- ☐

# 13

**What is the highest level of education completed by the child's <parents/guardians>?**

ASBLH13A

Check **one** circle in each column.

ASBLH13B

<Parent/  
Guardian A>

<Parent/  
Guardian B>

- |                                                                                                   |                       |                       |
|---------------------------------------------------------------------------------------------------|-----------------------|-----------------------|
| a) Did not go to school -----                                                                     | <input type="radio"/> | <input type="radio"/> |
| b) Some <Primary education—<br>ISCED Level 1 or Lower secondary<br>education—ISCED Level 2> ----- | <input type="radio"/> | <input type="radio"/> |
| c) <Lower secondary education—<br>ISCED Level 2> -----                                            | <input type="radio"/> | <input type="radio"/> |
| d) <Upper secondary education—<br>ISCED Level 3> -----                                            | <input type="radio"/> | <input type="radio"/> |
| e) <Post-secondary, non-tertiary<br>education—ISCED Level 4> -----                                | <input type="radio"/> | <input type="radio"/> |
| f) <Short-cycle tertiary<br>education—ISCED Level 5> -----                                        | <input type="radio"/> | <input type="radio"/> |
| g) <Bachelor's or equivalent<br>level—ISCED Level 6> -----                                        | <input type="radio"/> | <input type="radio"/> |
| h) <Postgraduate degree:<br>Master's—ISCED Level 7<br>or Doctor—ISCED Level 8> -----              | <input type="radio"/> | <input type="radio"/> |
| i) Not applicable -----                                                                           | <input type="radio"/> | <input type="radio"/> |

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ASBLH14

### How far in his/her education do you expect your child to go?

Check **one** circle only.

Finish <Lower secondary education—ISCED Level 2> --- ☐

Finish <Upper secondary education—ISCED Level 3> --- ☐

Finish <Post-secondary, non-tertiary education—ISCED Level 4> --- ☐

Finish <Short-cycle tertiary education—ISCED Level 5> --- ☐

Finish <Bachelor's or equivalent level—ISCED Level 6> --- ☐

Finish <Postgraduate degree: Master's—ISCED Level 7 or Doctor—ISCED Level 8> --- ☐

15

### What kind of work do the child's <parents/guardians> do for their main jobs?

For each, check the circle 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 <parent/guardian> is not working now, think about the last job that he/she had.

ASBLH15A

Check **one** circle in each column.

ASBLH15B

|                                                                                                                                                                             | <Parent /<br>Guardian A> | <Parent/<br>Guardian B> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------|
| a) Has never worked for pay -----                                                                                                                                           | <input type="radio"/>    | <input type="radio"/>   |
| b) Small Business Owner -----<br>Includes owners of small businesses (fewer than 25 employees) such as retail shops, services, restaurants                                  | <input type="radio"/>    | <input type="radio"/>   |
| c) Clerical Worker -----<br>Includes office clerks; secretaries; typists; data entry operators; customer service clerks                                                     | <input type="radio"/>    | <input type="radio"/>   |
| d) Service or Sales Worker -----<br>Includes travel attendants; restaurant service workers; personal care workers; protective service workers; salespersons; street vendors | <input type="radio"/>    | <input type="radio"/>   |
| e) Skilled Agricultural or Fishery Worker -----<br>Includes farmers; forestry workers; fishery workers; hunters and trappers                                                | <input type="radio"/>    | <input type="radio"/>   |

Check **one** circle in each column.

|                                                                                                                                                                                                                                                                                                                                     | <Parent /<br>Guardian A> | <Parent /<br>Guardian B> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| <b>f) Craft or Trade Worker</b> -----<br>Includes builders, carpenters, plumbers, electricians,<br>metal workers; machine mechanics; handcraft workers                                                                                                                                                                              | <input type="radio"/>    | <input type="radio"/>    |
| <b>g) Plant or Machine Operator</b> -----<br>Includes plant and machine operators;<br>assembly-line operators; motor-vehicle drivers                                                                                                                                                                                                | <input type="radio"/>    | <input type="radio"/>    |
| <b>h) General Laborers</b> -----<br>Includes domestic helpers and cleaners; building caretakers;<br>messengers, porters, and doorkeepers; farm, fishery,<br>agricultural, and construction workers                                                                                                                                  | <input type="radio"/>    | <input type="radio"/>    |
| <b>i) Corporate Manager or<br/>Senior Official</b> -----<br>Includes corporate managers such as managers of large<br>companies (25 or more employees) or managers of<br>departments within large companies; legislators or senior<br>government officials; senior officials of special-interest<br>organizations; military officers | <input type="radio"/>    | <input type="radio"/>    |
| <b>j) Professional</b> -----<br>Includes scientists; mathematicians; computer scientists;<br>architects; engineers; life science and health professionals;<br>teachers; legal professionals; police officers; social scientists;<br>writers and artists; religious professionals                                                    | <input type="radio"/>    | <input type="radio"/>    |
| <b>k) Technician or Associate<br/>Professional</b> -----<br>Includes science, engineering, and computer associates and<br>technicians; life science and health technicians and assistants;<br>teacher aides; finance and sales associate professionals;<br>business service agents; administrative assistants                       | <input type="radio"/>    | <input type="radio"/>    |
| <b>l) Not applicable</b> -----                                                                                                                                                                                                                                                                                                      | <input type="radio"/>    | <input type="radio"/>    |

# Thank You

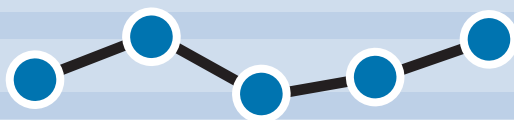
Thank you for taking the time  
to fill out this survey.





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