

Appendix 5

Healthy Kids: The Family Way study correspondence and questionnaires



FLINDERS UNIVERSITY
ADELAIDE • AUSTRALIA

Department of Public Health
School of Medicine
Faculty of Health Sciences



Dear Principal,

“Healthy Kids” The Family Way, is a study supported by CSIRO Human Nutrition, Department of Public Health at Flinders University and Department of Education and Children’s Services (CS/06/0116-2.8), examining the family environment and its impact on children’s physical activity levels, dietary behaviour and growth. This letter requests your support for family’s of your school community to be involved in the study. We are particularly interested in promoting healthy behaviours within the family and weight maintenance in young children. We are collecting information about parent’s activity and dietary behaviour, parenting styles, the household food environment, and parent’s knowledge of health related recommendations.

We are collecting baseline measures in Term 1, 2007.

Who will be involved?

Parents of children in Years 1 to Year 5 at your school will be invited to participate. Questionnaires are to be completed by parents only but both parents and children will have anthropometric measurements taken.

What will be measured?

1. Height, weight and waist circumference of parents and their children.

We recognise the sensitivities associated with taking these measures on children, and will implement the following safeguards, in accordance with DECS guidelines:

- Measures will be taken by a qualified researcher.
- Children will be within full line of sight of their parents or another adult.
- A child’s measurements will be taken in full line of sight of a parent but results not visible by the parent.

2. Three family environment questionnaires

A paper based questionnaire to be completed by parent(s) on site at the time of measurement and then two questionnaires received in the mail to be completed at home.

What will be asked of the school?

- Classroom teachers (Years 1 to 5) will be asked to distribute an information letter about the study to parents, and collate returned expressions of interest.
- A classroom or hall made available immediately *after school hours* for parents to complete the questionnaire and have measurements taken.

Please note: the school’s involvement is minimal. The research team will conduct all measurement sessions and supervise the completion of questionnaires.

What are the benefits to the school?

The school will be supporting the promotion of health in South Australian children by collecting important information about their school community's family environments. A summary of all measurements by age and gender will be provided on request. On completion of the study, a summary report of the family environmental factors which support, encourage and promote healthy behaviours and the maintenance of a healthy weight status in children will be provided to the parents and the school.

Please note;

- All information collected as part of this study will be locked securely in the CSIRO Human Nutrition building for a period of 7 years following the study.
- While we are likely to publish the findings of this study, no school will be identified in the reporting of the findings.

Your school's support for this study will provide valuable and important information about the development of healthy children on South Australia. I will follow-up this letter with a telephone call in approximately two weeks. If you have any questions, please contact Gilly Hendrie on 83038936 or Gilly.Hendrie@csiro.au.

Yours sincerely



Gilly Hendrie

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee and the Department of Education and Children's Services.



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Dear Class Teacher,

This letter is to inform you about a research study your principal has agreed to participate in during Term 1. The study is called "**Healthy Kids**" **The Family Way** and is supported by your school principal, CSIRO Human Nutrition, Department of Public Health at Flinders University and Department of Education and Children's Services. We are collecting information about the family environment, in particular related to food and activity behaviours. We are interested in what influences South Australian children's growth and weight changes. We are collecting information, by questionnaire, about family rules, parenting styles, the household food environment, and parent's knowledge of health related recommendations.

We are requesting your assistance to facilitate the collection of this valuable information about young South Australian children (School Years 1-5) and the influences within the family home environment. **We are visiting Highgate Primary School during the week of March 5th to March 9th, 2007.**

What is required?

- You will be asked to hand out an information sheet to all children in your class (see attached).
- You will be asked to encourage children to return the participation form and collect the returned forms and pass onto Peter Hansberry, on behalf of the researcher.

All the measurements and other data collection will be done by the researcher, during after school hours, in the week assigned to your school.

Please read the information sheet attached for more information about the study and what family participation involves. Your support in this study is valued. If you have any further questions please contact Gilly Hendrie on 83038936 or Gilly.Hendrie@csiro.au.

Yours sincerely

Gilly Hendrie



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Dear parent or caregiver,

This letter invites your family to participate in the “*Healthy Kids*” *The Family Way*. This study is supported by your school principal, CSIRO Human Nutrition, Department of Public Health at Flinders University and Department of Education and Children’s Services. We are collecting information about the family environment, in particular related to food and activity behaviours. We are interested in what influences South Australian children’s growth and weight changes. We are collecting information, by questionnaire, about family rules, parenting styles, the household food environment, and parent’s knowledge of health related recommendations.

We are requesting your participation in collecting this valuable information about young South Australian children (School Years 1-5) and the influences within the family home environment. **We are visiting Highgate Primary School from Monday 5th of March to Friday 9th of March, 2007.**

What is required?

You and your child(ren) will be required to attend one afternoon session during the assigned week. This will be immediately after school and take approximately 30 minutes.

Three types of information will be collected:

- Height, weight and waist circumference of yourself and your child(ren). These measures will be taken in strict privacy, such that children will not be able to see each others results.
- One questionnaire to be completed by the parent, about your child’s dietary and physical activity habits, and other health related recommendations.
- Two questionnaires about the family home environment will follow, by mail.
- Children will have follow-up measurements in Term 1, 2008.

Please note;

- All information collected as part of this study will be locked securely at CSIRO Human Nutrition for a period of 7 years following the study.
- While we are likely to publish the findings of this study, no person or school will be identified in the reported findings.
- You and your child(ren) are free to withdraw at any stage of the research, without penalty.
- A summary of the findings will be available.

This is an important study to examine the family environment and how it relates to the maintenance and promotion of a healthy growth in South Australian school children. Your participation would be highly valued. If you are willing to participate please complete and return the attached form indicating the session you and your child(ren) will attend.

If you have any further questions please contact Gilly Hendrie on 83038936 or Gilly.Hendrie@csiro.au.

Yours sincerely

Gilly Hendrie



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*Department of Public Health
School of Medicine
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“Healthy Kids” The Family Way

Where: Highgate Primary School

Location: School Hall

When: Immediately after school, approximately 3:20 – 4:00pm

We will be attending (please tick one of the following):

- Monday 5thnd March
- Tuesday 6th March
- Wednesday 7th March
- Thursday 8th March
- Friday 9th March

(keep this copy as a record)

(return this copy to class teacher)

“Healthy Kids” The Family Way

- Monday 5th March
- Tuesday 6th March
- Wednesday 7th March
- Thursday 8th March
- Friday 9th March

Signed: _____

Child’s Name: _____ School Year: _____



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CSIRO

Are you ready to see how much you have grown?

To the family,

It has been a year already and we would like to follow up your growth as part of your family's involvement in the *Healthy Kids: The Family Way* Study. This follow up will take approximately 5 minutes and involves taking the height and weight measurements of your child(ren). At this time you will receive the measurements of your child(ren) from last year.

We hope it is convenient to attend one of the following sessions:

- **Wednesday 5th March, between 3:15 and 4.00pm in the Performing Arts Room**

OR

- **Thursday 6th March, between 3:15 and 4.00pm in the Performing Arts Room.**

If you are unable to attend either session we have arranged with Peter Hansberry to weigh your child(ren) during school hours on Friday 7th March. If you do not want your children to take part in this follow up please contact the researcher, Gilly Hendrie, on 83038936 or Gilly.Hendrie@csiro.au before March 5th.

Your continued support of this research is highly valued and you will receive a summary of findings on promoting a healthy growth in South Australian children, at the completion of this study.

Yours sincerely,

Gilly Hendrie

ID _____

“Healthy Kids” The Family Way

Family Information

Anthropometric Measurements



Researcher: **Gilly Hendrie**
Gilly.Hendrie@csiro.au



About this study

Thank you for agreeing to participate in this study. I appreciate your time to be part of this research

This study is being undertaken to contribute to an understanding of the **family environment and how parents influence the food and physical activity habits of children.**

Your participation will provide valuable and important information about the family factors that have a positive influence on children's health. This research aims to find out about many different household environments and your honesty in responding will be much appreciated. Whilst you may not personally benefit from the study your responses to this survey are very important as they will assist in the **understanding and promoting of healthy lifestyles in South Australia.**

This booklet collects some personal information as well as records your and your child's height, weight and waist circumference.

All the information you give us will be treated in the strictest confidence. We do ask you for some background information (such as age, education level, etc), to allow us to assess whether people of different ages or backgrounds have different views and feelings. No personal details will be revealed to anyone other than the project coordinator and the identifying information will not be attached to the results. You are free to withdraw from the study at anytime.

If you have any queries please contact the study coordinator, Gilly Hendrie 8303 8936 (email: Gilly.Hendrie@csiro.au). Please return this questionnaire to the coordinator on completion.

Thank you in advance for your help.

Yours sincerely



Gilly Hendrie

General Parent Information

Today's Date: _____

FAMILY SURNAME: _____

Parent (1) Name: _____

To mail out Part 2 of the questionnaire

Home Address: _____

Gender: Female Male

Age Group (a) less than 18
 (b) 18 - 24
 (c) 25 - 34
 (d) 35 - 44
 (e) 45 - 54
 (f) 55 - 64
 (g) 65 - 74
 (h) more than 75

Measurements to be taken by the Researcher

Anthropometric Information

Weight: _____ kg _____ kg

Height: _____ cm _____ cm

Waist circumference: _____ cm _____ cm

(If applicable)

Parent (2) Name: _____

Gender: Female Male

Age Group (a) less than 18
 (b) 18 - 24
 (c) 25 - 34
 (d) 35 - 44
 (e) 45 - 54
 (f) 55 - 64
 (g) 65 - 74
 (h) more than 75

Anthropometric Information

Weight: _____ kg _____ kg

Height: _____ cm _____ cm

Waist circumference: _____ cm _____

Child's Information

Child's Name: _____

Gender: Female Male

School Name: _____

Date of Birth: _____ School Year: _____

Anthropometric Information

Weight: _____ kg _____ kg

Height: _____ cm _____ cm

Waist circumference: _____ cm _____

“Healthy Kids” The Family Way

Questionnaire 1



Researcher: **Gilly Hendrie**
Gilly.Hendrie@csiro.au



About this study

Thank you for agreeing to participate in this study. I appreciate your time to be part of my research

This study is being undertaken to contribute to an understanding of the **family environment and how parents influence the food and physical activity habits of children.**

Your participation will provide valuable and important information about the family factors that have a positive influence on children's health. This research aims to find out about many different household environments and your honesty in responding will be much appreciated. Whilst you may not personally benefit from the study your responses to this survey are very important as they will assist in the **understanding and promoting of healthy lifestyles in South Australia.**

This questionnaire should take about 35 minutes to complete. We ask you to read each item and then to respond to each question.

All the information you give us will be treated in the strictest confidence. We do ask you for some background information (such as age, education level, etc), to allow us to assess whether people of different ages or backgrounds have different views and feelings. No personal details will be revealed to anyone other than the project coordinator and the identifying information will not be attached to the results. You are free to withdraw from the study at anytime.

If you have any queries please contact the study coordinator, Gilly Hendrie 8303 8936 (email: Gilly.Hendrie@csiro.au). Please return this questionnaire to the coordinator on completion.

Thank you in advance for your help.

Yours sincerely



Gilly Hendrie

Section 1

This section asks questions about your understanding of the food and physical activity recommendations that experts are giving us.

The first few items are about what advice you think experts are giving us.

1. Do you think the *Dietary Guidelines for Australians* recommends that people should be eating more, the same amount, or less of these foods? *(tick one box per food)*

	More	Same	Less	Not sure
Vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sugary foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Starchy foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fatty foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High fibre foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salty foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dairy products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How many servings of fruit and vegetables a day do you think experts recommend people eat? *(Examples of one serve are a piece of fruit or 1 cup of salad vegetables)*

Fruit.....
Vegetables.....

3. Which fat do experts say is most important for people to cut down on? *(tick one)*

- (a) monounsaturated fat
- (b) polyunsaturated fat
- (c) saturated fat
- (d) not sure

4. What version of dairy foods do experts say people should eat? *(tick one)*

- (a) full fat
- (b) low fat
- (c) both full fat and lower fat
- (d) none, dairy foods should be cut out
- (e) not sure

Experts classify foods into groups. We are interested to see whether people are aware of what foods are in these groups.

1. Do you think these are high or low in added sugar? *(tick one box per food)*

	High	Low	Not sure
Bananas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unflavoured yoghurt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice-cream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Orange 35% Juice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tomato Ketchup	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tinned fruit in natural juice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Do you think these are high or low in fat? *(tick one box per food)*

	High	Low	Not sure
Pasta (without sauce)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mayonnaise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baked beans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunch/sandwich meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetarian pastry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White bread	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cottage cheese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Polyunsaturated margarine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Do you think these are starchy/high carbohydrate foods group? *(tick one box per food)*

	Yes	No	Not sure
Cheese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pasta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Butter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porridge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Do you think these are high or low in salt? *(tick one box per food)*

	High	Low	Not sure
Sausages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pasta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anchovies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Red meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frozen vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Do you think these are high or low in protein? (*tick one box per food*)

	High	Low	Not Sure
Chicken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baked beans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Butter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Do you think these are high or low in fibre/roughage? (*tick one box per food*)

	High	Low	Not sure
Cornflakes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bananas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eggs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Red meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Broccoli	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baked potatoes with skins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chicken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baked beans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Do you think these fatty foods are high or low in saturated fat? (*tick one per box*)

	High	Low	Not sure
Tuna	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whole milk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Olive oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Red meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunflower margarine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chocolate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Some foods contain a lot of fat but no cholesterol. (*tick one*)

- (a) agree
- (b) disagree
- (c) not sure

9. Do you think experts call these a healthy alternative to red meat? (*tick one box per food*)

	Yes	No	Not sure
Liver pate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunch meats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baked beans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low fat cheese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quiche	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mushrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. A glass of unsweetened (100%) fruit juice counts as one serve of fruit. (*tick one*)

- (a) agree
- (b) disagree
- (c) not sure

11. Saturated fats are mainly found in: (*tick one*)

- (a) vegetable oil
- (b) dairy products
- (c) both (a) and (b)
- (d) not sure

12. Brown sugar is a healthy alternative to white sugar. (*tick one*)

- (a) agree
- (b) disagree
- (c) not sure

13. There is more protein in a glass of whole milk than in a glass of skim milk. (*tick one*)

- (a) agree
- (b) disagree
- (c) not sure

14. Polyunsaturated margarine contains less fat than butter. (*tick one*)

- (a) agree
- (b) disagree
- (c) not sure

15. Which of these bread contain the most vitamins and minerals? (*tick one*)

- (a) white bread
- (b) wholemeal bread
- (c) wholegrain bread
- (d) not sure

16. Which do you think is higher in kilojoules: butter or regular margarine? (*tick one*)

- (a) butter
- (b) regular margarine
- (c) both the same
- (d) not sure

17. A type of oil which contains mostly monounsaturated fat is: *(tick one)*

- (a) coconut oil
- (b) sunflower oil
- (c) olive oil
- (d) palm oil
- (e) not sure

18. There is more calcium in a glass of whole milk than a glass of skim milk. *(tick one)*

- (a) agree
- (b) disagree
- (c) not sure

19. Which one of the following has the most kilojoules for the same weight? *(tick one)*

- (a) sugar
- (b) carbohydrate
- (c) fibre/roughage
- (d) fat
- (e) not sure

20. Harder fats contain more: *(tick one)*

- (a) monounsaturated fat
- (b) polyunsaturated fat
- (c) saturated fat
- (d) not sure

21. Polyunsaturated fats are mainly found in: *(tick one)*

- (a) vegetable oils
- (b) dairy products
- (c) both (a) and (b)
- (d) not sure

The next few items are about choosing foods.

Please answer what is being asked and not whether you like or dislike the food. For example, suppose you were asked.....

'If a person wanted to cut down on fat, which cheese would be best to eat?'

- (a) cheddar cheese
- (b) camembert
- (c) cream cheese
- (d) cottage cheese

If you *didn't like* cottage cheese but knew it was the right answer, you would still tick cottage cheese.

1. Which would be the best choice for a low fat, high fibre snack? *(tick one)*

- (a) diet strawberry yoghurt
- (b) sultanas
- (c) muesli bar
- (d) wholemeal crackers and cheese

2. Which would be the best choice for a low fat, high fibre light meal? *(tick one)*

- (a) grilled chicken
- (b) cheese on wholemeal toast
- (c) baked beans on wholemeal toast
- (d) quiche

3. Which kind of sandwich do you think is healthier? *(tick one)*

- (a) two thick slices of bread with a thin slice of cheddar cheese
- (b) two thin slices of bread with a thick slice of cheddar cheese

4. Many people eat spaghetti bolognese (pasta with a tomato and meat sauce). Which do you think is healthier? *(tick one)*

- (a) a large amount of pasta with a little bit of sauce on top
- (b) a small amount of pasta with a lot of sauce on top

5. If a person wanted to reduce the amount of fat in their diet, which would be the best choice? *(tick one)*

- (a) steak, grilled
- (b) sausages, grilled
- (c) turkey, grilled
- (d) pork chop, grilled

6. If a person wanted to reduce the amount of fat in their diet, but didn't want to give up chips, which one would be the best choice? *(tick one)*

- (a) thick cut 'chunky' chips
- (b) thin cut 'french fries' chips
- (c) crinkle cut chips

7. If a person felt like something sweet, but was trying to cut down on sugar, which would be the best choice? *(tick one)*

- (a) honey on toast
- (b) a cereal snack bar
- (c) plain sweet biscuit
- (d) banana with plain yoghurt

8. Which of these would be the healthiest dessert? (*tick one*)

- (a) baked apple
- (b) strawberry yoghurt
- (c) wholemeal crackers and cheese
- (d) carrot cake with cream cheese topping

If yes, what diseases or health problems do you think are related to fibre?

.....

.....

.....

9. Which cheese would be the best choice as a lower fat option? (*tick one*)

- (a) plain cream cheese
- (b) edam
- (c) cheddar
- (d) brie

3. Are you aware of any major health problems or diseases that are related to how much sugar people eat?

- (a) yes
- (b) no
- (c) not sure

If yes, what diseases or health problems do you think are related to sugar?

.....

.....

.....

10. If a person wanted to reduce the amount of salt in their diet, which would be the best choice? (*tick one*)

- (a) ready made frozen shepherd's pie
- (b) ham steak with pineapple
- (c) mushroom omelette
- (d) stir fry vegetables with soy sauce

This section is about health problems or diseases.

1. Are you aware of any major health problems or diseases that are related to a low intake of fruit and vegetables?

- (a) yes
- (b) no
- (c) not sure

If yes, what diseases or health problems do you think are related to a low intake of fruit and vegetables?

.....

.....

.....

2. Are you aware of any major health problems or diseases that are related to a low intake of fibre?

- (a) yes
- (b) no
- (c) not sure

(continue on the next page)

4. Are you aware of any major health problems or diseases that are related to how much salt or sodium people eat?

- (a) yes
- (b) no
- (c) not sure

If yes, what diseases or health problems do you think are related to salt?

.....

.....

.....

5. Are you aware of any major health problems or diseases that are related to the amount of fat people eat?

- (a) yes
- (b) no
- (c) not sure

If yes, what diseases or health problems do you think are related to fat?

.....

.....

.....

6. Do you think these help to reduce the chances of getting certain kinds of cancer? (answer each one)

	Yes	No	Not sure
eating more fibre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less sugar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less fruit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less salt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating more fruit and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less preservatives/additives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Do you think these help prevent heart disease? (answer each one)

	Yes	No	Not sure
eating more fibre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less saturated fat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less salt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating more fruit and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eating less preservatives/additives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Which one of these is more likely to raise people's blood cholesterol level? (tick one)

(a) antioxidants	<input type="checkbox"/>
(b) polyunsaturated fats	<input type="checkbox"/>
(c) saturated fats	<input type="checkbox"/>
(d) cholesterol in the diet	<input type="checkbox"/>
(e) not sure	<input type="checkbox"/>

9. Have you heard of antioxidant vitamins?

(a) yes	<input type="checkbox"/>
(b) no	<input type="checkbox"/>

10. If YES to question 9, do you think these are antioxidant vitamins? (answer each one)

	Yes	No	Not sure
Vitamin A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B Complex vitamins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin E	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin K	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PHYSICAL ACTIVITY MESSAGES

To what extent do you agree or disagree with the following statements about physical activity and health. Please answer by circling the appropriate box.

1. Taking the stairs at work or generally being more active for at least 30 minutes each day is enough to improve your health.

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
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2. Half an hour of brisk walking on most days is enough to improve your health.

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
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3. To improve your health it is essential for you to do vigorous exercise for at least 20 minutes each time, three times a week.

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
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4. Exercise doesn't have to be done all at the one time – blocks of 10 minutes are okay.

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
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5. Moderate exercise that increases your heart rate slightly can improve your health.

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
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The following questions refer to what advice you think experts are giving us about **CHILDREN'S PHYSICAL ACTIVITY**. Please answer by ticking the appropriate box.

6. It is recommended children participate in vigorous activity.

True False

7. How many hours per day should children spend using electronic equipment (this includes television, computer games, playstation games and the like)?

- Less than 30minutes
- 1 hour
- 2 hour
- 3 hours
- 4 hours
- Not sure

8. It is recommended children are active for at least..... ?

- 10minutes per day
- 20 minutes per day
- 30 minutes per day
- 60 minutes per day
- Not sure

The following questions refer to the classification and benefits of different types of activities. Please answer by ticking the appropriate box.

Please rate the intensity of the following activities. *Classify them as moderate intensity, vigorous intensity or not sure.*

	Moderate	Vigorous	Not sure
Mowing the lawn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aerobics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking the dog	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jogging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playing team sports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Circuit training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fast cycling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playing the piano	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lap swimming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Which of the following physical activities do you believe will provide a physical health benefit? *Tick the appropriate box.*

	Yes	No	Not sure
Walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aerobics class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bike riding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dancing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gardening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jogging/running	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playing a musical instrument	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moving furniture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparing meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raking leaves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational team sport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swimming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weight lifting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 2

In this section we are interested in your child's physical activity habits and food intake.

This section below refers to your child's physical activity habits. Please think about your child's usual activity habits and respond in the table below.

Question 1

Which of the following physical activities does your child usually do during a typical week? (from the start of the year, and not including school holidays)

During a typical week what activities does your child usually do?	Does your child usually do this activity?		Monday to Friday		Saturday and Sunday		Comment
	Yes	No	How many times?	How long?	How many times?	How long?	
<i>Eg: cricket</i>	✓		1	45 mins	1	1 hour	Seasonal sports
Aerobics							<i>Term 1 and 4 only</i>
Dance							
Calisthenics/gymnastics							
Tennis/bat tennis							
Aussie Rules Football							
Soccer							
Basketball							
Cricket							
Skip rope							
Baseball/softball							
Netball							
Jog/run							
Swim laps							

	Yes	No	How many times?	How long?	How many times?	How long?	Seasonal sports
Swim for fun							
Tag/chasey							
Bike riding							
Playgroup equipment							
Sports class at school							
Physical education class at school							
Scooter							
Household chores							
Play with pets							
Trampoline							
Play in cubby house							
Walk for exercise							
Walk to school (to and from school = 2)							
Walk the dog							
Skateboard							
Rollerblade							
Downball/4 square							
Bike to school (to and from school = 2)							
Other (please state)							