



2018

ACT Year 6

Physical Activity and Nutrition Survey



ID number:

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Thank you for helping us with this survey. Your answers will help us to find out more about the way young people live in the ACT.

Your answers will be looked at by the survey team and no-one else. They will not be seen by your teachers or parents. There is no need to write your name on the questionnaire.

The following questions will be looking at different things about you and the things you do. Please read each question carefully and answer it as best you can. Please put your hand up at any time you have a question and the instructor will be happy to help you.

For each question there are a number of different answers you can mark. For most answers there will be a set of circles like this , which you should mark with a tick, like this .

ABOUT YOU



1. How old are you today? _____

2. What is the date of your birthday? _____
Day / Month / Year

3. Are you a boy or girl?

Boy Girl

4. Do you speak another language at home more than you speak English?

No, we speak English mostly

Yes, we speak _____

5. In what country were you born? _____

6. Are you an Aboriginal person?

Yes No Don't know

7. Are you a Torres Strait Islander person?

Yes No Don't know

8. What suburb do you live in? _____

(If you live in two suburbs write them both down)

THE FOODS YOU EAT

9. How often do you usually do the following... (Please put a tick in one circle on each row)

	Never	Less than once a week	About 1-3 times a week	About 4-6 times a week	Every day	If every day, how many times each day? (write number)
9a Drink fruit juice? (e.g. orange, apple, pineapple, grapefruit, tomato)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9b Eat pasta, rice or noodles?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9c Eat hot chips, french fries, wedges or fried potatoes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9d Eat potato chips or other salty snacks? (e.g. Twisties, Burger Rings, Corn Chips or pop corn)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9e Drink flavoured water (eg. Smart Water, Vitamin Water, iced tea)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9f Eat poultry including chicken, turkey or duck?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9g Eat fish, including canned fish?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9h Eat meat including lamb, beef, pork, goat, minced meat?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9i Eat processed meats (eg. sausages, hot dogs, chicken nuggets, bacon, ham, salami)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9j Eat energy or fruit bars? (e.g. muesli bars, LCMs, roll-ups, K-time bars)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9k Drink energy drinks (eg. Red Bull, Mother, V)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9l Eat chocolate, candy bars, lollies or gum?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9m Eat ice-cream or icy-poles?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9n Drink milk? (including soy milk)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9o Eat bread or bread rolls?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9p Drink soft drink or other sugar sweetened drinks? (eg. Coke, Pepsi, lemonade, cordial)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

9q Eat pies or sausage rolls?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9r Eat cakes, biscuits, sweet pastries or donuts?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9s Drink sports drinks (eg. Gatorade, Powerade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9t Eat food from a fast food outlet (e.g. McDonalds, KFC, Pizza, Hungry Jacks)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9u Drink water? (e.g. from a drinking fountain, glass, cup or bottle)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9v Eat cheese, yoghurt, custard (including frozen yoghurt)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9w Drink 'diet' soft drink or diet cordial	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

THE FOODS YOU EAT

10. How many serves of vegetables do you usually eat each day? (Please tick one circle only)

[a serve = ½ cup of cooked vegetables or 1 cup of salad]

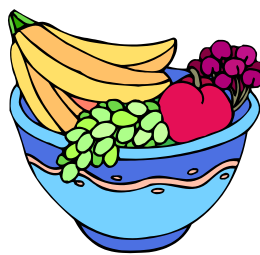
None	1 serve or less	2 serves	3 serves	4 serves	5 serves	6 serves or more
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



11. How many serves of fruit do you usually eat each day? (Please tick one circle only)

[a serve = an apple, or banana, or orange, or two mandarins, or a cup of diced fruit, or fruit salad]

None	1 serve or less	2 serves	3 serves	4 serves	5 serves	6 serves or more
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



THE FOODS YOU EAT

12. How often do you usually buy foods or drink from the school canteen? (Please tick one circle only)

Every day <input type="radio"/>	Most days <input type="radio"/>	Sometimes <input type="radio"/>	Hardly ever <input type="radio"/>	Never <input type="radio"/>	We don't have a canteen <input type="radio"/>
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If your school does not have a canteen please go to question 14.

13. How often did you buy these foods or drinks from the school canteen in the last week?

(Please tick one circle only on each row)

	Didn't buy this	Bought it 1-2 times	Bought it 3-4 times	Bought it every day	This is not offered at my canteen
13a Pies or fried food (e.g. pasties, sausage rolls, chicken nuggets, fish bites, dim sims, spring rolls) ?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13b Hot chips, french fries, wedges or fried potatoes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13c Sandwiches, bread rolls, wraps or Sushi rolls?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13d Hamburgers, veggie burgers, hot dogs or pizza?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13e Pasta, noodles or rice (e.g. spaghetti Bolognese, fried rice, two minute noodles)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13f Salad box?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13g Soup?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13h Potato chips or other salty snacks (e.g. Twisties, Burger Rings, Corn Chips or pop corn)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Continued...How often did you buy these foods or drinks from the school canteen in the last week?

(Please tick one circle only on each row)

	Didn't buy this	Bought it 1-2 times	Bought it 3-4 times	Bought it every day	This is not offered at my canteen
13i Nuts and eggs (e.g. hard boiled)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13j Chocolate, candy bars, lollies or gum (includes Ovalteenies, carob buds)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13k Ice-cream, icy-poles or jelly cups?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13l Fruit (e.g. apple, banana, fruit salad)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13m Cakes, biscuits, sweet pastries or donuts?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13n Energy or fruit bars? (e.g. muesli bars, LCMs, roll-ups, K-time bars)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13o Vegetables (e.g. carrot sticks)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13p Cheese, yoghurt, custard (including frozen yoghurt)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13q Dips or salsa (e.g. hummus)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13r Coke and other sugar sweetened drinks (e.g. lemonade, flavoured mineral water, Vitamin water)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13s Milk drinks (including Up and Go)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13t Water?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13u Fruit juice (including frozen fruit sticks)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

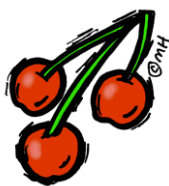


THE FOODS YOU EAT

14. How much do you agree with the following statements?

(Please tick one circle only on each row)

	Strongly agree	Agree	Neither	Disagree	Strongly disagree	Don't know
14a Eating vegetables makes me feel healthy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14b I enjoy the taste of many vegetables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14c In my home, vegetables are usually served with dinner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14d Eating fruit makes me feel healthy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14e I enjoy the taste of most fruit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14f In my home, fruit is available to eat at any time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



15. How much do you agree with the following statements?

(Please tick one circle only on each row)

	Strongly agree	Agree	Neither	Disagree	Strongly disagree	Don't know
15a I usually choose soft drinks instead of water or milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15b Soft drinks are usually available in my home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15c I choose the soft drink with the best TV adverts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



THE FOODS YOU EAT

16. How much do you agree with the following statements?

(Please tick one circle only on each row)

	Strongly agree	Agree	Neither	Disagree	Strongly disagree	Don't know
16a I never eat food from a fast food outlet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16b I go to fast food outlets because I like the taste of the food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16c At fast food outlets if I can 'upsized' I usually do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16d I go to fast food outlets with my family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16e I choose the fast food outlet with the coolest TV adverts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



17. How much do you agree with the following statements?

(Please tick one circle only on each row)

	Strongly agree	Agree	Neither	Disagree	Strongly disagree	Don't know
17a My parent/carer insists that I eat something for breakfast before school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17b I help prepare meals for my family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17c On school nights in my family, we eat dinner in front of the TV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17d On weekends in my family, we eat dinner in front of the TV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



YOUR PHYSICAL ACTIVITY

Physical activity is an activity that increases your heart rate and makes you get out of breath some of the time.

Physical activity can be done in sports, school activities, playing with friends, or walking to school.

Some examples of physical activity are running, brisk walking, biking, roller-blading, dancing, skateboarding, swimming, soccer, basketball, football, surfing and many other activities including nearly all sports.

18. Over the past 7 days on how many days were you physically active for a total of at least 60 minutes per day?

0 days	1	2	3	4	5	6	7 days
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Over a typical week on how many days are you physically active for a total of at least 60 minutes per day?

0 days	1	2	3	4	5	6	7 days
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



YOUR PHYSICAL ACTIVITY

When you are at school

20. When you are AT SCHOOL, how OFTEN do you usually exercise so much that you get out of breath or sweat?

(Including physical activity during PE classes, recess and lunchtime, NOT before or after school)

(Please tick one circle only)

Every day	4-5 times a week	2-3 times a week	Once a week	Once a month	Less than once a month	Never
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



21. When you are AT SCHOOL, how many HOURS A WEEK do you usually exercise so much that you get out of breath or sweat? (Including physical activity during PE classes, recess and lunchtime, NOT before or after school)

(Please tick one circle only)

None	About half an hour a week	About 1 hour a week	About 2-3 hours a week	About 4-6 hours a week	7 hours or more a week
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. About how many times a week do you participate in a PE class at school?

Physical Education class at school _____times per week

YOUR PHYSICAL ACTIVITY

Outside of School

23. OUTSIDE SCHOOL HOURS: Over a typical week in the current school term which of the following ORGANISED sporting activities – including training, games and matches – do you usually do? (Please put a *tick* in as many of the circles that are appropriate. Please write the number of times a week you do this activity.)

Activity/sport

- | | | | |
|------|--------------------------|---|----------------------|
| 23a | <input type="checkbox"/> | AFL / Australian Rules Football | _____ times per week |
| 23b | <input type="checkbox"/> | Baseball | _____ times per week |
| 23c | <input type="checkbox"/> | Basketball | _____ times per week |
| 23d | <input type="checkbox"/> | Cricket | _____ times per week |
| 23e | <input type="checkbox"/> | Cycling | _____ times per week |
| 23f | <input type="checkbox"/> | Dancing (eg. ballet/jazz/Calisthenics) | _____ times per week |
| 23g | <input type="checkbox"/> | Golf | _____ times per week |
| 23h | <input type="checkbox"/> | Gymnastics | _____ times per week |
| 23i | <input type="checkbox"/> | Hockey | _____ times per week |
| 23j | <input type="checkbox"/> | Horse-riding /equestrian events | _____ times per week |
| 23k | <input type="checkbox"/> | Ice or snow sports | _____ times per week |
| 23l | <input type="checkbox"/> | Little athletics | _____ times per week |
| 23m | <input type="checkbox"/> | Martial arts (eg. Taekwondo, Karate, Judo, Kung Fu) | _____ times per week |
| 23n | <input type="checkbox"/> | Netball | _____ times per week |
| 23o | <input type="checkbox"/> | Sailing | _____ times per week |
| 23p | <input type="checkbox"/> | Soccer / futsal | _____ times per week |
| 23q | <input type="checkbox"/> | Softball | _____ times per week |
| 23r | <input type="checkbox"/> | Squash | _____ times per week |
| 23s | <input type="checkbox"/> | Swimming | _____ times per week |
| 23t | <input type="checkbox"/> | Rowing | _____ times per week |
| 23u | <input type="checkbox"/> | Rollersports | _____ times per week |
| 23v | <input type="checkbox"/> | Rugby league / touch football / oz tag | _____ times per week |
| 23w | <input type="checkbox"/> | Rugby union | _____ times per week |
| 23x | <input type="checkbox"/> | Running or jogging | _____ times per week |
| 23y | <input type="checkbox"/> | Tennis | _____ times per week |
| 23z | <input type="checkbox"/> | Ten-pin bowling | _____ times per week |
| 23za | <input type="checkbox"/> | Volleyball | _____ times per week |
| 23zb | <input type="checkbox"/> | Waterpolo | _____ times per week |

Other organised sport or physical activity (Please specify below)

- | | | | |
|------|--------------------------|-------|----------------------|
| 23zc | <input type="checkbox"/> | _____ | _____ times per week |
| 23zd | <input type="checkbox"/> | _____ | _____ times per week |

YOUR PHYSICAL ACTIVITY

Outside of School

24. OUTSIDE SCHOOL HOURS: How OFTEN do you usually exercise so much that you get out of breath or sweat?

(Please tick one circle only)

Every day	4-6 times a week	2-3 times a week	Once a week	Once a month	Less than once a month	Never
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



25. OUTSIDE SCHOOL HOURS: How many HOURS A WEEK do you usually exercise so much that you get out of breath or sweat?

(Please tick one circle only)

None	About half an hour a week	About 1 hour a week	About 2-3 hours a week	About 4-6 hours a week	7 hours or more a week
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



YOUR PHYSICAL ACTIVITY

26. Over a typical week in the current school term, how many times do you go to and from school in the following ways?

(Write the number of times you travel to and from school)

Getting <u>to</u> school	Getting <u>from</u> school
Walk to school _____ times per week	Walk from school _____ times per week
Bicycle to school _____ times per week	Bicycle from school _____ times per week
Scoot or skateboard to school _____ times per week	Scoot or skateboard from school _____ times per week
Catch the bus to school _____ times per week	Catch the bus to school _____ times per week
Ride in a car to school _____ times per week	Ride in a car from school _____ times per week
Combination of two or more of the above _____ times per week	Combination of two or more of the above _____ times per week
Other (explain) _____ times per week	Other (explain) _____ times per week
Your total should add up to 5	Your total should add up to 5



27. About how many hours a day do you usually watch television (including videos and DVD's) in your free time?

Please tick one circle for weekdays and one circle for weekend

Weekdays	Weekend (Saturday and Sunday)
1) None at all <input type="radio"/>	1) None at all <input type="radio"/>
2) About half an hour a day <input type="radio"/>	2) About half an hour a day <input type="radio"/>
3) About 1 hour a day <input type="radio"/>	3) About 1 hour a day <input type="radio"/>
4) About 2 hours a day <input type="radio"/>	4) About 2 hours a day <input type="radio"/>
5) About 3 hours a day <input type="radio"/>	5) About 3 hours a day <input type="radio"/>
6) About 4 hours a day <input type="radio"/>	6) About 4 hours a day <input type="radio"/>
7) About 5 hours a day <input type="radio"/>	7) About 5 hours a day <input type="radio"/>
8) About 6 hours a day <input type="radio"/>	8) About 6 hours a day <input type="radio"/>
9) About 7 hours or more a day <input type="radio"/>	9) About 7 hours or more a day <input type="radio"/>



28. About how many hours a day do you usually spend doing school homework out of school hours?

Please tick one circle for weekdays and one circle for weekend

Weekdays	Weekend (Saturday and Sunday)
1) None at all <input type="radio"/>	1) None at all <input type="radio"/>
2) About half an hour a day <input type="radio"/>	2) About half an hour a day <input type="radio"/>
3) About 1 hour a day <input type="radio"/>	3) About 1 hour a day <input type="radio"/>
4) About 2 hours a day <input type="radio"/>	4) About 2 hours a day <input type="radio"/>
5) About 3 hours a day <input type="radio"/>	5) About 3 hours a day <input type="radio"/>
6) About 4 hours a day <input type="radio"/>	6) About 4 hours a day <input type="radio"/>
7) About 5 hours a day <input type="radio"/>	7) About 5 hours a day <input type="radio"/>
8) About 6 hours a day <input type="radio"/>	8) About 6 hours a day <input type="radio"/>
9) About 7 hours or more a day <input type="radio"/>	9) About 7 hours or more a day <input type="radio"/>



29. About how many hours a day do you usually use a computer for playing games, emailing, chatting or surfing the internet in your free time? (Excluding school-related work)

(Please tick one circle for weekdays and one circle for weekend)

Weekdays	Weekend (Saturday and Sunday)
1) None at all <input type="radio"/>	1) None at all <input type="radio"/>
2) About half an hour a day <input type="radio"/>	2) About half an hour a day <input type="radio"/>
3) About 1 hour a day <input type="radio"/>	3) About 1 hour a day <input type="radio"/>
4) About 2 hours a day <input type="radio"/>	4) About 2 hours a day <input type="radio"/>
5) About 3 hours a day <input type="radio"/>	5) About 3 hours a day <input type="radio"/>
6) About 4 hours a day <input type="radio"/>	6) About 4 hours a day <input type="radio"/>
7) About 5 hours a day <input type="radio"/>	7) About 5 hours a day <input type="radio"/>
8) About 6 hours a day <input type="radio"/>	8) About 6 hours a day <input type="radio"/>
9) About 7 hours or more a day <input type="radio"/>	9) About 7 hours or more a day <input type="radio"/>



YOUR PHYSICAL ACTIVITY

30. How much do you agree with the following statements?

(Please tick one circle only on each line)

	Strongly agree	Agree	Neither	Disagree	Strongly disagree	Don't know
29a I do a lot of physical activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29b I look funny when I am physically active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29c I don't have enough time for physical activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29d I prefer to watch TV or play electronic games	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29e I don't have anyone to be physically active with	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29f I don't like physical activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29g Other kids make fun of me when I am physically active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29h I don't think I am very good at physical activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29i I have a health problem that prevents me from being physically active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29j I have an injury that prevents me from being physically active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29k I am scared that I might get hurt if I played sport (eg. football, netball)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29l I don't like how being active physically makes me feel (eg. hot, sweaty, out of breath)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29m My parents/caregivers do a lot of physical activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29n My parents/caregivers encourage me to do physical activity/sports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



YOUR HEALTH AND WELLBEING

31. Would you say your health is...(Please tick one circle only)

Excellent <input type="radio"/>	Good <input type="radio"/>	Fair <input type="radio"/>	Poor <input type="radio"/>	Don't know <input type="radio"/>
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32. How strongly do you agree with the following statement? (Please tick one circle only)

“I feel good about myself”

Strongly agree <input type="radio"/>	Agree <input type="radio"/>	Neither agree or disagree <input type="radio"/>	Disagree <input type="radio"/>	Strongly disagree <input type="radio"/>
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33. How happy are you with your weight? (Please tick one circle only)

Extremely happy <input type="radio"/>	Fairly happy <input type="radio"/>	In between <input type="radio"/>	Fairly unhappy <input type="radio"/>	Extremely unhappy <input type="radio"/>
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34. Do you think that you are...(Please tick one circle only)

Underweight <input type="radio"/>	Slightly underweight <input type="radio"/>	About the right weight <input type="radio"/>	Slightly overweight <input type="radio"/>	Overweight <input type="radio"/>
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35. Have you ever been teased about your weight? (Please tick one circle only)

Never <input type="radio"/>	Hardly ever <input type="radio"/>	Sometimes <input type="radio"/>	Quite often <input type="radio"/>	Very often <input type="radio"/>
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36. How often have you been bullied at school in the past couple of months? (Please tick one circle only)

Never <input type="radio"/>	Once or twice <input type="radio"/>	2 or 3 times a month <input type="radio"/>	About once a week <input type="radio"/>	Several times a week <input type="radio"/>
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**THE END
THANK YOU!!**