

Young People's Survey: Module 4

Physical Health This survey is part of the Born in Bradford Age of Wonder research project. We will be asking you questions about physical health. This will take about 10-20 minutes to complete.

You should first watch the video linked below giving some information about why physical health is important, and what this information will help us to find out.

You do not have to take part in this questionnaire. You also do not have to answer any questions you don't want to. If you don't want to answer a question, just leave it blank and move on to the next question.

By completing this questionnaire, you are agreeing to us using the information you provide for our research. We will keep your information completely confidential and will not pass on any of the responses to the questions to anyone. We will write reports based on the data we collect but no-one will ever be able to identify you from anything we publish.

If the answers to any of the questions upset you or you would like to talk about anything that is worrying you, please speak to the member of the research team or the teacher that is doing the survey with you.

The study has been reviewed and approved by Bradford Leeds Research Ethics Committee [Ref 21/YH/0261 date 22.12.21]. Research ethics committees think about the study from the point of view of a person taking part and make sure their rights and privacy are fully respected.

Physical Health

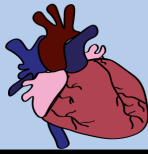
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PHYSICAL HEALTH

WHAT IS IT?

PHYSICAL HEALTH IS...

--- THE STATE OF OUR BODY AND HOW WELL IT IS FUNCTIONING.



SIGNS OF GOOD PHYSICAL HEALTH

---BEING FREE FROM=

ILLNESS

DISEASE

PAIN

WHAT AFFECTS PHYSICAL HEALTH?

THESE INCLUDE=

FOOD & DIET

WE'D LIKE TO ASK YOU A FEW QUESTIONS ABOUT THESE TOPICS

PHYSICAL ACTIVITY

SLEEP



WHY IS IT IMPORTANT?

TEENAGERS WITH POOR PHYSICAL HEALTH BECOME ADULTS WITH POOR PHYSICAL HEALTH (HARGREAVES ET AL., 2015).



MANY TEENAGERS ARE NOT AS HEALTHY AS THEY COULD BE.



ONLY 1 IN 12 YOUNG PEOPLE AGED 11-18 EAT 5 PORTIONS OF FRUIT AND VEGETABLES A DAY.

(ASSOCIATION FOR YOUNG PEOPLE'S HEALTH 2019)

46% OF 15 YEAR OLDS HAVE DECAY IN THEIR PERMANENT TEETH.

(ASSOCIATION FOR YOUNG PEOPLE'S HEALTH 2019)



3.2 MILLION CHILDREN AND YOUNG PEOPLE DO NOT MEET THE RECOMMENDED AVERAGE OF 60 ACTIVE MINUTES A DAY.

(SPORT ENGLAND 2021)

TOGETHER WE CAN...

1. UNDERSTAND

YOUNG PEOPLE'S PHYSICAL HEALTH IN BRADFORD, AND HOW DIFFERENT ATTITUDES AND SITUATIONS AFFECT THIS.



2. EDUCATE

PROMOTE AND SPREAD POSITIVE HEALTH BEHAVIOURS TO EMPOWER TEENAGERS TO MAKE HEALTHY LIFESTYLE DECISIONS.



3. IMPROVE THE HEALTH OF OUR CITY

UPTAKE OF PHYSICAL ACTIVITY

RATES OF MALNUTRITION AND OBESITY



IMPROVE THE QUALITY OF LIFE FOR EVERYONE.

HELP AND SUPPORT IS AVAILABLE ONLINE:
JUMPTHOME.ORG/ (BRADFORD)
WWW.HEALTHFORTEENS.CO.UK/ (NATIONWIDE)

General health

Year Group:

How good is your health in general?

- ☐ Very good
 - ☐ Good
 - ☐ Fair
 - ☐ Bad
 - ☐ Very Bad
-

Hearing and Sight

In this part of the survey, you will be asked questions about your hearing and sight. Remember, if you do not want to answer a question you can skip it.

Do you wear glasses or contact lenses?

- ☐ Yes
 - ☐ No
-

Do you have any difficulty seeing?

- ☐ Yes
 - ☐ No
-

Do you have any difficulty hearing or use a hearing aid, including if you cannot hear at all?

- ☐ Yes
 - ☐ No
-

Have you ever had your eyes tested outside of school?

- ☐ No
 - ☐ Not sure
 - ☐ Yes
-

Food and Diet

In this part of the survey, you will be asked questions about your diet. Remember, if you do not want to answer a question you can skip it.

How often do you and your family usually have meals together?

- ☐ Every day
 - ☐ Most days
 - ☐ About once a week
 - ☐ Less often
 - ☐ Never
-

How often do you eat breakfast over a week?

- ☐ Every day
- ☐ Most days
- ☐ About once a week
- ☐ Less often
- ☐ Never

How often do you eat at least 2 portions of fruit per day?

- ☐ Every day
- ☐ Most days
- ☐ About once a week
- ☐ Less often
- ☐ Never

How often do you eat at least 2 portions of vegetables per day?

- ☐ Every day
- ☐ Most days
- ☐ About once a week
- ☐ Less often
- ☐ Never

How often, if at all, do you drink diet drinks or sugar free drinks like diet cola or sugar-free squash?

- ☐ Every day
- ☐ Most days
- ☐ About once a week
- ☐ Less often
- ☐ Never

How often, if at all, do you drink sugary drinks like regular cola or squash?

- ☐ Every day
- ☐ Most days
- ☐ About once a week
- ☐ Less often
- ☐ Never

How often, if at all, do you eat fast food such as McDonalds, Burger King, KFC or other fast food like that?

- ☐ Every day
- ☐ Most days
- ☐ About once a week
- ☐ Less often
- ☐ Never

How would you describe your diet?

- ☐ Very unhealthy
- ☐ Unhealthy
- ☐ Neither healthy nor unhealthy
- ☐ Healthy
- ☐ Very healthy

When choosing what to eat, do you consider your health?

- ☐ Never
- ☐ Sometimes
- ☐ Quite often
- ☐ Always

Where do you normally eat your meals?

- ☐ At a table
- ☐ In front of the television
- ☐ Somewhere else (please describe)

Please describe:

Oral Health

In this part of the survey, you will be asked questions about your oral health. Remember, if you do not want to answer a question you can skip it.

How often do you brush your teeth?

- ☐ More than once a day
- ☐ Once a day
- ☐ At least once a week but not daily
- ☐ Less than once a week
- ☐ Never

How many times did you clean your teeth yesterday?

- ☐ None
- ☐ Once
- ☐ Twice
- ☐ Three times or more

Do you have a dentist that you see every six months or so?

- ☐ No
- ☐ Not sure
- ☐ Yes

Why did you go to the dentist last time?

- ☐ I have never been
- ☐ I was having trouble with my teeth
- ☐ I went for a check up
- ☐ Other reason (please describe)

Please describe:

Physical Activity

We are trying to find out about your level of physical activity from the last 7 days (in the last week). This includes sports or dance that make you sweat or make your legs feel tired, or games that make you breathe hard, like tag, skipping, running, climbing, and others.

In the last 7 days, on how many mornings did you actively travel to school?

For example walking, cycling, scootering, and skateboarding

- ☐ None
- ☐ 1 time last week
- ☐ 2 or 3 times last week
- ☐ 4 times last week
- ☐ 5 times last week

In the last 7 days, during your physical education (PE) classes, how often were you very active (playing hard, running, jumping, throwing)?

- ☐ I don't do PE
- ☐ Hardly ever
- ☐ Sometimes
- ☐ Quite often
- ☐ Always

In the last 7 days, what did you normally do at lunch (besides eating lunch)?

- ☐ Sat down (talking, reading, doing schoolwork)
- ☐ Stood around or walked around
- ☐ Ran or played a little bit
- ☐ Ran around and played quite a bit
- ☐ Ran and played hard most of the time

In the last 7 days, what did you normally do at break time?

- ☐ Sat down (talking, reading, doing schoolwork)
- ☐ Stood around or walked around
- ☐ Ran or played a little bit
- ☐ Ran around and played quite a bit
- ☐ Ran and played hard most of the time

In the last 7 days, on how many afternoons did you actively travel (for example, walking, cycling, scootering, and skateboarding) from school?

- ☐ None
- ☐ 1 time last week
- ☐ 2 or 3 times last week
- ☐ 4 times last week
- ☐ 5 times last week

In the last 7 days, on how many days right after school, did you do sports, dance, or play games in which you were very active?

- ☐ None
- ☐ 1 time last week
- ☐ 2 or 3 times last week
- ☐ 4 times last week
- ☐ 5 times last week

In the last 7 days, on how many evenings did you do sports, dance, or play games in which you were very active?

- ☐ None
- ☐ 1 time last week
- ☐ 2 or 3 times last week
- ☐ 4 or 5 times last week
- ☐ 6 or 7 times last week

On the last weekend, how many times did you do sports, dance, or play games in which you were very active?

- ☐ None
- ☐ 1 time
- ☐ 2 - 3 times
- ☐ 4 - 5 times
- ☐ 6 or more times

Were you sick last week, or did anything prevent you from doing your normal physical activities?

- ☐ Yes
- ☐ No

What prevented you?

Sedentary Activity

These questions ask about your sedentary activities out of school. Sedentary activity usually involves sitting or lying down and includes things like watching TV, playing video games, and using a mobile phone.

Watching TV outside of school time

This includes time spent watching TV programmes, movies or sports but NOT time spent playing video games

- ☐ Did not do
- ☐ Less than 1 hour per day
- ☐ 1 to 2 hours per day
- ☐ 2 to 3 hours per day
- ☐ 3 hours per day or more

Playing video games outside of school time

This includes games on things like Nintendo DS, wii, Xbox, PlayStation, iPod Touch, iPad, or games on your PC and phone

- ☐ Did not do
- ☐ Less than 1 hour per day
- ☐ 1 to 2 hours per day
- ☐ 2 to 3 hours per day
- ☐ 3 hours per day or more

Using Computers or tablets outside of school time

This doesn't include homework time and playing online video games or computer games, but does include time on things like Instagram and Facebook, as well as time spent on the internet, and messaging like whatsapp

- ☐ Did not do
- ☐ Less than 1 hour per day
- ☐ 1 to 2 hours per day
- ☐ 2 to 3 hours per day
- ☐ 3 hours per day or more

Using a mobile phone after school

This includes time spent talking, texting, or using things like social media but does not include playing games

- ☐ Did not do
- ☐ Less than 1 hour per day
- ☐ 1 to 2 hours per day
- ☐ 2 to 3 hours per day
- ☐ 3 hours per day or more

Which of the following best describes your typical sedentary habits at home?

Try to think about a typical week and not just last week

- ☐ I spend almost none of my free time sitting
- ☐ I spend little time sitting during my free time
- ☐ I spend about half of my free time sitting
- ☐ I spend a lot of time sitting during my free time
- ☐ I spend almost all of my free time sitting

Sleep

We would like to know about the time you go to sleep and wake up. Please think of the last 7 days (last week) when answering the questions

On a weekday, what time do you normally switch your lights off to go to sleep?

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On a weekday, what time do you normally wake up?

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On a weekend day, what time do you normally switch your lights off to go to sleep?

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On a weekend day, what time do you normally wake up?

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Did you go to sleep last night soon after going to bed?

- ☐ Yes
- ☐ No

If not, why didn't you soon go to sleep last night?

Please tick all that apply.

- ☐ I was worried
- ☐ It was noisy
- ☐ I was hungry/thirsty
- ☐ I never sleep well
- ☐ Watching TV/videos
- ☐ I was reading
- ☐ Playing on tablet or phone
- ☐ I was too cold/too hot
- ☐ Other (please describe)

Please describe:

Puberty

In this part of the survey you will be asked questions about your experience of going through puberty and some of the changes you experiences or are currently experiencing. Remember, if you do not want to answer a question, you can skip it.

What is your sex?

The biological sex on your birth certificate

- ☐ Female
- ☐ Male
- ☐ Do not wish to answer
- ☐ Wish to enter own response

Space to self describe

During puberty you may experience a growth spurt. How would you describe your growth spurt?

By "growth spurt" we mean a rapid increase in your height. Most children have a growth spurt as they approach and during their teens.

- ☐ My growth spurt has not yet begun
- ☐ My growth spurt has barely started
- ☐ My growth spurt has definitely started
- ☐ My growth spurt seems completed

During puberty you may begin to grow body hair. How would you describe the growth of your body hair?

By "Body hair" we mean hair any place other than your head or face, such as under your arms.

- ☐ My body hair has not yet begun to grow
- ☐ My body hair has barely started to grow
- ☐ My body hair has definitely started to grow
- ☐ My body hair growth seems completed

During puberty you may notice changes to your skin such as spots. How would you describe the changes to your skin?

- ☐ My skin has not yet started changing
- ☐ My skin has barely started changing
- ☐ My skin has definitely started changing
- ☐ My skin changes seem completed

During puberty you may notice your voice getting deeper. How would you describe your voice?

- ☐ My voice has not yet started getting deeper
- ☐ My voice has barely started getting deeper
- ☐ My voice has definitely started getting deeper
- ☐ My voice change seems completed

During puberty you may begin to grow facial hair. How would you describe the growth of your facial hair?

By facial hair we mean hair on your face, such as on your top lip or chin.

- ☐ My facial hair has not yet started to grow
- ☐ My facial hair has barely started to grow
- ☐ My facial hair has definitely started to grow
- ☐ My facial hair growth seems completed

During puberty you may notice your breasts begin to grow. How would you describe the growth of your breasts?

- ☐ My breasts have not yet started to grow
- ☐ My breasts have barely started to grow
- ☐ My breasts have definitely started to grow
- ☐ My breast growth seems completed

Have you started your periods?

- ☐ Yes
- ☐ No

How old were you when you had your first period?

Please enter your age in years

If you could ask every teenager in Bradford any question about their physical health, what would it be?
