Healthy Eating Questionnaire

**How many portions of fruit did you eat yesterday?** (A portion of fruit would be something like 1 banana or 1 apple or 1 slice of melon or 2 satsumas. A glass of fresh fruit juice also counts as one portion).

0 [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6+ [ ]

**How many portions of vegetable or salad (not potatoes) did you eat yesterday?** (A portion of vegetables would be something like 3 tablespoons of carrots or sweet corn and includes fresh, frozen or tinned vegetables).

0 [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6+ [ ]

**Yesterday, how many non diet fizzy drinks / high energy drinks did you have?**

0 [ ] 1-2 [ ] 3-4 [ ] 5+ [ ]

**Yesterday, how many cakes, sweets, chocolate or crisps did you eat?**

0 [ ] 1-2 [ ] 3-4 [ ] 5+ [ ]

**In the last week, how often did you have fast food or take aways?** (pizza’s curry’s, chippy)

0 [ ] 1-2 [ ] 3-4 [ ] 5+ [ ]

Physical Activity Questionnaire

Moderate physical activity is any activity that makes your heart beat faster and makes you get out of breath some of the time. You may also sweat a little. Physical activity can be done in sports, school activities, playing with friends or walking to school. Some examples of physical activity are running, walking quickly, cycling, dancing, skateboarding, swimming, football, gymnastics. (practitioner only guidance note)

**In the past week, on how many minutes of each day have you been moderately physically active for?**

<table>
<thead>
<tr>
<th>Day</th>
<th>Minutes Exercised</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td></td>
</tr>
<tr>
<td>Sunday</td>
<td></td>
</tr>
</tbody>
</table>

**Total number of minutes:**

**Do you know what the recommended amount of moderate or strenuous physical activity is for someone of your age?**

Yes [ ] No [ ]

**How many minutes are recommended each day**
Motivation

How important is it for you to manage your weight? (mark on ruler, 1 being less important and 10 being most important)

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

How confident are you about losing or stabilising your weight? (mark on scale below and 10 being confident)

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

How important is it for you to change your physical activity levels? (mark on ruler, 1 being less important and 10 being most important)

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

How confident are you about increasing your physical activity level? (mark on scale below and 10 being confident)

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

Thinking about the goal(s) that you set yourself at week 1, have you:
(please tick only one in each category)

Weight management
- Fully achieved your goal
- Made a lot of progress
- Made a little progress
- Made no progress
- I don’t have a goal for this

Physical Activity
- Fully achieved your goal
- Made a lot of progress
- Made a little progress
- Made no progress
- I don’t have a goal for this

Personal Goal
- Fully achieved your goal
- Made a lot of progress
- Made a little progress
- Made no progress
- I don’t have a goal for this

Thinking about your goals (above), what do you think:

- Has been challenging or difficult?
- What has helped/supported you?
- What would help you further?
Rosenberg Self Esteem Score
Below is a list of statements dealing with your general feelings about yourself. PLEASE CIRCLE ONE RESPONSE ON EACH LINE

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel that I am a person of worth, at least on an equal plane with others</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I feel that I have a number of good qualities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>All in all, I am inclined to feel that I am a failure</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I am able to do things as well as most other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I feel I do not have much to be proud of</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I take a positive attitude toward myself</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>On the whole, I am satisfied with myself</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I wish I could have more respect for myself</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I certainly feel useless at times</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>At times I think I am no good at all</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Which of the following best describes you?
I am attracted to the opposite sex □ I am attracted to the same sex □
I am attracted to both sexes equally □ I am not attracted to either sex □
I prefer not to say □

Type of physical activity

_____