

National Diet and Nutrition Survey

Physical Activity Questionnaire (NDNS PAQ)

Is the participant 16 and over?

- ☐ Yes
- ☒ No

Click "Next" to continue

What is the participant's age in years (at date of main visit)?

Does your child go to school (not including pre-school)?

☒ Yes

☐ No

Introduction

Physical Activity Questionnaire: 4/5 – 10 years of age

This questionnaire asks about your child's physical activity **in the last 7 days** covering 3 sections:

A: Travel to and from school and activity at school.

B: Activity outside of school.

C: Time spent sitting.

Please note some questions may not apply as this questionnaire is designed to cover different school routines. For some questions you may find it useful to complete with your child present.

Click "Next" to continue

A: School-related activity

Did your child go to school in the last 7 days?

☒ Yes

☐ No

A: School-related activity

Thinking about the **last 7 days**, how did your child **travel to and from school**?

*Record how many days your child did an activity (for all or part of the way) and for how long **per day**.*

Please scroll down and leave boxes blank if not done.

Walk to school:

How many days? Hours Minutes

per day

Walk from school:

How many days? Hours Minutes

per day

Cycle or use scooter to school:

How many days? Hours Minutes

per day

Cycle or use scooter from school:

How many days? Hours Minutes

per day

Used **motorised transport to** school:

(e.g. Bus, car, taxi, train, tube, metro)

How many days? Hours Minutes

per day

Used **motorised transport from** school:

How many days? Hours Minutes

per day

Attention!**Attention!**

Please note the following questions ask you to report the TOTAL time your child spent in each activity, across ALL weekdays or ALL weekend days.

E.g. if your child played football out of school for 1 hour on Monday and Wednesday you would answer...

B: Activity outside school

Football / Rugby / Hockey / Lacrosse (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

☐ 0

☐ 1 day

☒ 2 days

☐ 3 days

☐ 4 days

☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

2 hrs-2 hrs 59 mins ▼

A: School-related activity

Has your child done any **PE lessons** in school in the last 7 days?

We will ask you to report school sports matches later in the questionnaire.

☒ Yes

☐ No

A: School-related activity

PE lessons in school on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

3 hrs or more: enter below ▼

Please enter time

Hours Minutes

A: School-related activity

PE lessons in school on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

3 hrs or more: enter below ▼

Please enter time

Hours

Minutes

3

30

A: School-related activity

Did your child do any of these activities in the last 7 days **in school but not in PE lessons**?

Please include any activities your child has done in breakfast, lunchtime or after-school clubs, or in school sports matches.

We will then ask about each selected activity on the following screens.
*Please scroll through the FULL list of 16 activities and select **all** that apply.*

- ☒ Hopscotch
- ☒ Bouncing on trampoline
- ☒ Playing around, e.g. kicking a ball around, catch, hide and seek
- ☒ Skating / Skateboarding / Using a scooter
- ☒ Skipping rope
- ☒ Football / Rugby / Hockey / Lacrosse
- ☒ Netball / Basketball / Handball
- ☒ Cricket / Rounders
- ☒ Dancing, including any dance lessons
- ☒ Running, jogging, athletics
- ☒ Gymnastics
- ☒ Aerobics
- ☒ Tennis / Badminton / Squash
- ☒ Swimming – laps/lengths
- ☒ Swimming – splash about
- ☐ None of the above

You will get the chance to report any other activities your child has done that are not listed here at the end of the questions.

A: School-related activity

Hopscotch on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did you child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Hopscotch on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did you child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

A: School-related activity

Bouncing on trampoline on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

15-29 mins



A: School-related activity

Bouncing on trampoline on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

15-29 mins



A: School-related activity

Playing around, e.g. kicking a ball around, catch, hide and seek on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

30-44 mins



A: School-related activity

Playing around, e.g. kicking a ball around, catch, hide and seek on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

30-44 mins



A: School-related activity

Skating / Skateboarding / Using a scooter on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

45-59 mins



A: School-related activity

Skating / Skateboarding / Using a scooter on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

45-59 mins



A: School-related activity

Skipping rope on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1 hr-1 hr 29 mins ▼

A: School-related activity

Skipping rope on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1 hr-1 hr 29 mins



A: School-related activity

Football / Rugby / Hockey / Lacrosse on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1 hr 30 mins-1 hr 59 mins ▼

A: School-related activity

Football / Rugby / Hockey / Lacrosse on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1 hr 30 mins-1 hr 59 mins ▼

A: School-related activity

Netball / Basketball / Handball on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

2 hrs-2 hrs 59 mins



A: School-related activity

Netball / Basketball / Handball on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

2 hrs-2 hrs 59 mins ▼

A: School-related activity

Cricket / Rounders on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

3 hrs or more: enter below ▼

Please enter time

Hours Minutes

3

30

A: School-related activity

Cricket / Rounders on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

3 hrs or more: enter below ▼

Please enter time

Hours Minutes

3 30

A: School-related activity

Dancing, including any dance lessons on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Dancing, including any dance lessons on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

A: School-related activity

Running, jogging, athletics on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Running, jogging, athletics on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



A: School-related activity

Gymnastics on **WEEKDAYS** in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Gymnastics on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

A: School-related activity

Aerobics on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Aerobics on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



A: School-related activity

Tennis / Badminton / Squash on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Tennis / Badminton / Squash on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



A: School-related activity

Swimming - laps/lengths on WEEKDAYS in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Swimming - laps/lengths on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



A: School-related activity

Swimming - splash about on **WEEKDAYS** in the last 7 days (in school but not PE lessons)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



A: School-related activity

Swimming - splash about on WEEKEND DAYS in the last 7 days (in school but not PE lessons)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

Attention!**Attention!**

Please note the following questions ask you to report the TOTAL time your child spent in each activity, across ALL weekdays or ALL weekend days.

E.g. if your child played football out of school for 1 hour on Monday and Wednesday you would answer...

B: Activity outside school

Football / Rugby / Hockey / Lacrosse (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

☐ 0

☐ 1 day

☒ 2 days

☐ 3 days

☐ 4 days

☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

2 hrs-2 hrs 59 mins ▼

B: Activity outside school

We are now going to ask about activities your child has done **outside school** in the last 7 days.

Do not include activities that you have already reported such as transport to or from school, or activities in PE lessons, school breaks, breakfast, lunch, or after-school clubs or school sports matches.

You will get the chance to report any other activities your child has done that are not listed at the end of the questions.

Click "Next" to continue

B: Activity outside school

Did your child do any of these activities **outside school** in the last 7 days?

We will then ask about each selected activity on the following screens.

*Please scroll through the FULL list of 19 activities below and select **all** that apply.*

- ☒ Cycling
- ☒ Walking
- ☒ Soft play
- ☒ Hopscotch
- ☒ Bouncing on trampoline
- ☒ Playing around, e.g. kicking a ball around, catch, hide and seek
- ☒ Skating / Skateboarding / Using a scooter
- ☒ Skipping rope
- ☒ Football / Rugby / Hockey / Lacrosse
- ☒ Netball / Basketball / Handball
- ☒ Cricket / Rounders
- ☒ Dancing, including any dance lessons
- ☒ Running, jogging, athletics
- ☒ Gymnastics
- ☒ Aerobics
- ☒ Tennis / Badminton / Squash
- ☒ Swimming – laps/lengths
- ☒ Swimming – splash about
- ☐ None of the above

You will get the chance to report any other activities your child has done that are not listed here at the end of the questions.

B: Activity outside school

Cycling (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Cycling (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Walking (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

15-29 mins



B: Activity outside school

Walking (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

15-29 mins



B: Activity outside school

Soft play (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

30-44 mins



B: Activity outside school

Soft play (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

30-44 mins



B: Activity outside school

Hopscotch (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

45-59 mins



B: Activity outside school

Hopscotch (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

45-59 mins



B: Activity outside school

Bouncing on trampoline (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1 hr-1 hr 29 mins



B: Activity outside school

Bouncing on trampoline (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1 hr-1 hr 29 mins



B: Activity outside school

Playing around, e.g. kicking a ball around, catch, hide and seek (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1 hr 30 mins-1 hr 59 mins ▼

B: Activity outside school

Playing around, e.g. kicking a ball around, catch, hide and seek (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1 hr 30 mins-1 hr 59 mins ▼

B: Activity outside school

Skating / Skateboarding / Using a scooter (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

2 hrs-2 hrs 59 mins



B: Activity outside school

Skating / Skateboarding / Using a scooter (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

2 hrs-2 hrs 59 mins



B: Activity outside school

Skipping rope (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

3 hrs or more: enter below ▼

Please enter time

Hours Minutes

B: Activity outside school

Skipping rope (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

3 hrs or more: enter below ▼

Please enter time

Hours Minutes

B: Activity outside school

Football / Rugby / Hockey / Lacrosse (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Football / Rugby / Hockey / Lacrosse (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Netball / Basketball / Handball (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Netball / Basketball / Handball (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Cricket / Rounders (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Cricket / Rounders (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Dancing, including any dance lessons (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Dancing, including any dance lessons (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Running, jogging, athletics (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Running, jogging, athletics (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Gymnastics (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Gymnastics (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

B: Activity outside school

Aerobics (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Aerobics (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Tennis / Badminton / Squash (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Tennis / Badminton / Squash (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Swimming - laps/lengths (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Swimming - laps/lengths (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins



B: Activity outside school

Swimming - splash about (outside school) on WEEKDAYS (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



B: Activity outside school

Swimming - splash about (outside school) on WEEKEND DAYS (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

In or out of school: Other activities

In the last 7 days, did your child do any other physical activities that you have **not already reported**?

☒ Yes

☐ No

Other activities

Other Activity 1:

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



Other activities

Other Activity 1:

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
☒ 1 day
☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

15-29 mins



Did your child do any other physical activities that you have not already reported?

- ☒ Yes ☐ No

Other activities

Other Activity 2:

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

30-44 mins



Other activities

Other Activity 2:

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

45-59 mins



Did your child do any other physical activities that you have not already reported?

- ☒ Yes ☐ No

Other activities

Other Activity 3:

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1 hr-1 hr 29 mins



Other activities

Other Activity 3:

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
☒ 1 day
☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1 hr 30 mins-1 hr 59 mins ▼

Did your child do any other physical activities that you have not already reported?

- ☒ Yes ☐ No

Other activities

Other Activity 4:

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

2 hrs-2 hrs 59 mins



Other activities

Other Activity 4:

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
☒ 1 day
☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

3 hrs or more: enter below ▼

Please enter time

Hours Minutes

3 30

Did your child do any other physical activities that you have not already reported?

☒ Yes ☐ No

Other activities

Other Activity 5:

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-14 mins



Other activities

Other Activity 5:

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

1-14 mins ▼

C: Time spent sitting

We are now going to ask about the time your child spent **sitting down** in the last 7 days **outside school lesson hours**.

Please include time spent sitting in breakfast, lunch or after school clubs.

Each period of sitting down should only be entered once.

E.g. if your child spent one hour sitting doing homework while you were listening to music, count this time as one hour doing homework if this was the main focus. Do not also count as one hour listening to music.

Click "Next" to continue

C: Time spent sitting

How did your child spend **time sitting** in last 7 days **outside school lessons**?

Select **all** that apply.

We will then ask about each selected activity on the following screens.

- ☒ Sitting doing **homework and/or reading**. Include any homework done using a screen or online here.
- ☒ Sitting while using a **screen**. E.g. televisions, tablets, mobile phones, computers and game consoles (for non-active games only).
- ☒ Sitting down doing any **other activity** - E.g. include meal times, socialising, listening to music.
- ☐ None of the above

C: Time spent sitting

Sitting doing homework and/or reading on a WEEKDAY (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1-29 mins ▼

C: Time spent sitting

Sitting doing homework and/or reading on a WEEKEND DAY (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

30-59 mins ▼

C: Time spent sitting

Sitting while using a screen on a WEEKDAY (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

1 hr-1 hr 59 mins



C: Time spent sitting

Sitting while using a screen on a WEEKEND DAY (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

2 hrs-2 hrs 59 mins ▼

C: Time spent sitting

Sitting down doing any other activity on a WEEKDAY (last 7 days)

How many **WEEKDAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days
- ☐ 3 days
- ☐ 4 days
- ☐ 5 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKDAYS**

17 hrs-18 hrs 59 mins ▼

C: Time spent sitting

Sitting down doing any other activity on a WEEKEND DAY (last 7 days)

How many **WEEKEND DAYS** did your child do this activity?

- ☐ 0
- ☒ 1 day
- ☐ 2 days

Please add up the **TOTAL time** spent doing this activity on **ALL WEEKEND DAYS**

19 hours or more: enter below ▼

Please enter time

Hours

Minutes

19

30

In the last 7 days, was your child

- ☐ **more active** than usual?
- ☐ **less active** than usual?
- ☒ **about as active** as usual?

How involved was your child in answering this questionnaire?

- ☒ Child was **not present**
- ☐ Child was present but did **not** help answer any questions
- ☐ Child was present and helped you answer a **few** questions
- ☐ Child was present and helped you answer **some** questions
- ☐ Child was present and helped you answer **most or all** questions

Comments

Please do NOT close your browser before you press the SUBMIT button otherwise your questionnaire will not be received. Please note that it might take a few seconds for your answers to be saved, so please wait until you see a message that you have completed the questionnaire.

Would you like to add any comments? You can leave this blank.

Please make sure that you have logged out before closing the browser

Thank you

You have now completed the Physical Activity Questionnaire.

Please click the logout button.