

The Adolescent Sedentary Activity Questionnaire (ASAQ)

Thank you for helping us today. Many students are helping us by completing this questionnaire. By answering these questions you will help us understand more about the health of young people like yourself.

Your answers are confidential and will be looked at by the survey team and no-one else. No-one at your school will see your answers.
Take your time to read each question in turn and answer it as best you can.

Thanks again for being part of this important survey!

HOW TO COMPLETE THIS FORM

Most questions can be answered by placing a tick in a box or writing your answer in a box.

- ❖ Read each question carefully
- ❖ Write your answers clearly in the box
- ❖ Fully erase any mistakes
- ❖ Do not make any stray marks on this form
- ❖ Ask one of the staff if you need help

Name _____

Year _____

School _____

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First, a few questions about you...

1 What is your date of birth?

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year	

2 Are you a boy or a girl?

Boy	<input type="checkbox"/>
Girl	<input type="checkbox"/>

3 What language do you speak most at home?

English	<input type="checkbox"/>
Another language	<input type="checkbox"/>

(please write it here) _____

4 Are you an Aboriginal or Torres Strait Islander?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

5 What suburb do you live in? _____

6 What is the postcode where you live? _____

Following are some questions about the things you do sitting or lying down

14. Think about a normal *school week*, and write down how long you spend doing the following activities before and after school each day

Activity	Monday		Tuesday		Wednesday		Thursday		Friday	
	Hours	Minutes	Hours	Minutes	Hours	Minutes	Hours	Minutes	Hours	Minutes
Watching TV?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Watching videos /DVDs?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Using the computer for fun?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Using the computer for doing homework?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Doing homework not on the computer?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Reading for fun?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Being tutored?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Travel (car/bus/train)?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Doing crafts or hobbies?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sitting around (chatting with friends/ on the phone/chilling)?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Playing/practicing a musical instrument?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

15. Think about a *normal weekend*, and write down how long you spend doing the following activities on the weekend

Activity	Saturday		Sunday	
	Hours	Minutes	Hours	Minutes
Watching TV?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Watching videos/DVDs?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Using the computer for fun?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Using the computer for doing homework?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Doing homework not on the computer?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Reading for fun?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Being tutored?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Travel (car/bus/train)?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Doing crafts or hobbies?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sitting around (chatting with friends/on the phone/chilling)?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Playing/practicing a musical instrument?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Going to church or Saturday school?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Thank you for completing this questionnaire.