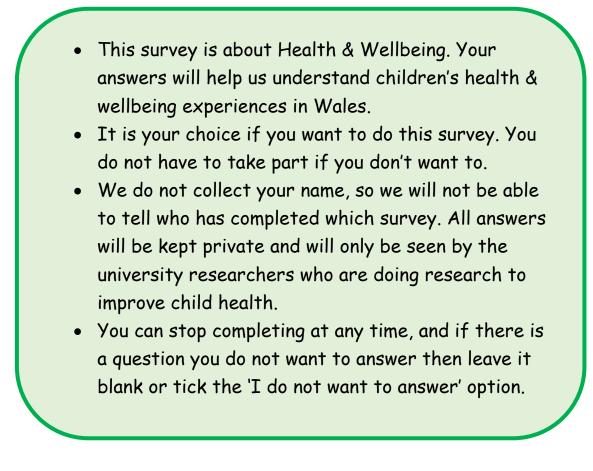


Children's Health & Wellbeing Survey 2022/23

Thank you for considering helping Cardiff University with this important survey.

Please read the following points before deciding if you would like to do the survey:



Thank you for considering taking part in this research project. If you would like to participate, please press the "Next" button below to complete a consent form on the next page.

Back	Next



This section is about you....

Remember that if there are any questions you don't want to answer, you can select 'I do not want to answer'.

Q1 What school year are you in?

Vear 3
Vear 4
🗌 Year 5
Vear 6
Q2 Are you a?
Воу
Girl
I do not want to answer
Neither word describes me
Q3 Which row includes the month you were born?
🔵 December, January, February
March, April, May
🗌 June, July, August
September, October, November
I do not want to answer
Q4 What year were you born?
2009
2010
2011



2012
2013
2014
2015
2016
I do not want to answer

This section is about your home...

Remember that if there are any questions you don't want to answer, you can select 'I do not want to answer'.

- Q5 Think of the home <u>where you live all or most of the time</u>. Which <u>adults</u> do you live with? (Please tick one answer)
 - 📃 My Mum & Dad
 - ____ My Mum only
 - My Dad only
 - My Mum and her partner
 - My Dad and his partner
 - My two Mums
 - My two Dads
 - My Grandparents
 - My Foster parents
 -] I do not want to answer



Other adults

Q6	What language	does vour	family	normally	speak at	home?
4.0			1/			

- 📙 English
-] Welsh
- 📃 Both English & Welsh
- I do not want to answer
- 🔵 Other language

If other language, please write this down _____ (20 characters)

Q7 Do you have your own bedroom?

- 🗌 Yes
- _ No
- 📙 I do not want to answer

Q8 Does your family own a car, van or truck?

- __ No
- J Yes, one
- Yes, more than one
-] I do not want to answer
- Q9 How many bathrooms (with a bath or shower in them) are in your home?



P_SHRN Children's Health & Wellbeing Survey



2

More than 2

I do not want to answer

Q10 Does your family own a dishwasher?

Yes
No
I do not want to answer

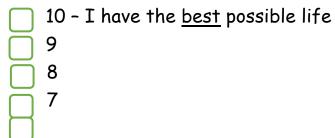
Q11 How many computers (e.g. PCs, laptops, tablets - but NOT games consoles / smartphones) **does your family own?**

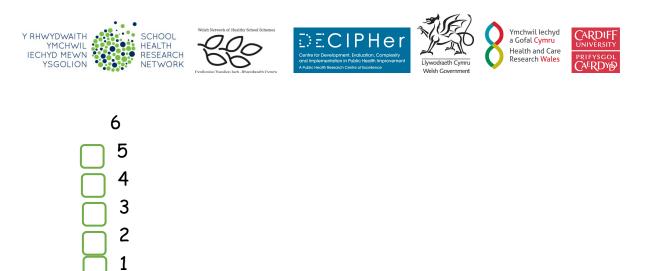
0
1
2
More than 2
I do not want to answer

These questions ask you about your feelings.

Remember, if there are any questions you don't want to answer, you can pick 'I do not want to answer'.

Q12 On a scale of 0-10, how would you rate your life at the moment?





- 0 I have the <u>worst</u> possible life
- I do not want to answer
- Q13 Below are some questions about how you feel. There are no

right or wrong answers. You should just pick the answer which is best for you.

Place a tick in each row.

	Never	Sometimes	Always	I do not want to answer
I feel lonely				
I cry a lot				
I am unhappy				
Nobody likes me				
I worry a lot				
I have problems sleeping				
I wake up in the night				
I am shy				
I feel scared				
I worry when I am at				
school				
I get very angry				
I lose my temper				



I hit out when I am angry		
I do things to hurt		
people		
I am calm		
I break things on purpose		

Q14 In the last 6 months, how often have you...?

Place a tick in each row.

	About every day	More than once a week	About every week	About once a month	Rarely	Never	I do not want to answer
Felt low							
Felt irritable or bad tempered							
Felt nervous							
Had difficulty getting to sleep							

Q15 Please tick one of the boxes to say how happy you feel with things in your life

These questions use a scale from 0 to 10. On this scale:

- 0 means 'very unhappy'
- 5 means 'not happy or unhappy'



10 means 'very happy'

Place in tick in each row.

How happy are you with	Ve	Very unhappy Not happy or unhappy Very happy						I do not want to answer				
	0	1	2	3	4	5	6	7	8	9	10	
Your relationships with your family?												
Your life overall?												
The home that you live in?												
How much choice you have in life?												
Your relationships with your friends?												
The things that you have (like money and the things you own)?												
Your health?												
Your appearance (the way that you look)?												
What may happen to you later in your life (in the future)?												
The school that you go to?												
The way that you use your time?												

These questions are about your feelings towards school.

Remember that if there are any questions you don't want to answer, you can select 'I do not want to answer'.



Q16 How do you feel about school?

- 🔵 I like it a lot
- 🗍 I like it a bit
- I don't like it very much
- ___ I don't like it at all
- I do not want to answer
- Q17 Thinking about the <u>children in your class</u>, how much do you agree or disagree with the following sentences...?

Place a tick in each row.

	Strongly agree	Agree	Neither agree / disagree	Disagree	Strongly disagree	I do not want to answer
Children enjoy being together						
Most children are kind & helpful						
Other children accept me as I am						

Q18 Thinking about <u>children in your school</u>, how much do you agree or disagree with the following sentences...?



Place a tick in each row.

	Strongly agree	Agree	Neither agree / disagree	Disagree	Strongly disagree	I do not want to answer
Children have a say in planning school activities						
Children have a chance to help plan school projects						
Children's ideas are treated seriously						
I feel like I belong at this school						

Q19 Thinking about <u>adults in your school</u>, how much do you agree or disagree with the following sentences...?

Place a tick in each row.

	Strongly agree	Agree	Neither agree / disagree	Disagree	Strongly disagree	I do not want to answer
My teachers accept me as I am						
My teachers care about me as a person						



I trust my teachers			
There is at least one adult at this school I can talk to about things that worry me			

The next questions are about bullying.

We say a person is BEING BULLIED when:

- another person or a group of people repeatedly say or do nasty and unpleasant things to them or
- a person is teased in a way they do not like or
- they are left out of things on purpose.

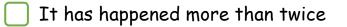
Remember, if there are any questions you don't want to answer, you can pick 'I do not want to answer' and move on.

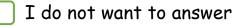
Q20 How often have you taken part in bullying another person(s) at school in the past couple of months?



I have not bullied anyone

It has happened once or twice





Q21 How often have you been bullied at school in the past couple of months?



I have not been bullied

] It has happened once or twice

] It has happened more than twice



I do not want to answer

These questions are about electronic devices & social media.

Q22 Do you have your own ...? Tick <u>ALL</u> that you have.

- Smartphone (such as an iphone)
- Computer or laptop

Tablet (such as an ipad or kindle)

None of the above

-] I do not want to answer
- Q23 How often do you use <u>portable electronic devices</u> to do the following...? (such as smartphones, tablets etc - any screens you can easily move around the house of perhaps use outside)

Place a tick in each row.

	Every day	A few times a week	Once a week	Once every two weeks	Monthly	Never	I do not want to answer
Watch videos							
Watch TV/films							



Play computer games Read books				
Speak to your family online				
Speak to your friends online				
Use social media sites or apps (such as Facebook, Tiktok, Instagram etc)				

These questions are about what you usually do each day.

- Q24 When do you usually go to bed if you have to go to school the next morning?
 - Before 7pm
 7pm
 7.30pm
 8pm
 8.30pm
 9pm



9.30pm
10pm
10.30pm
11pm
11.30pm
Midnight or later
I do not want to answer

Q25 How many times a week do you have...?

Place a tick in each row.

	Never	Less than once a week	Once a week	2-4 days a week	5-6 days a week	Once a day, every day	Every- day, more than once	I do not want to answer
Fruits								
Vegetables								
Coke / soft drinks (which contain sugar)								
Energy drinks (eg Red Bull / Monster)								
Tap or bottled water (NOT								



flavoured or				
squash)				

Q26 How often do you have <u>school dinners</u> at lunch time?

🗌 Everyday
4 days a week
🔲 3 days a week
2 days a week
🗌 1 day a week
Never
I do not want to answer

Q27 How often do you have <u>packed lunch</u> at school lunch time?

🗌 Everyday
🗌 4 days a week
🔲 3 days a week
🗌 2 days a week
🗌 1 day a week
Never
I do not want to answer



Q28 Outside of school, how often do you usually exercise so much that you get out of breath and sweaty?

🗌 Everyday
4-6 times a week
2-3 times a week
Once a week
Once a month
Less than once a month
Never
I do not want to answer

Q29 In the summer holidays, some schools run holiday clubs that include meals and activities, did you attend a summer holiday club <u>at</u> your school?

No
Yes, I went to club for 1- 5 days
Yes, I went to club for 6-10 days
Yes, I went to club for more than 10 days
I do not want to answer

Thank you for completing the survey, please ensure your press the 'Finish the survey' button below to submit your response.

If you have any questions please speak to your teacher. You can also contact Childline on 0800 1111.