



wise teacher
healthy child

WITH.CH.

EUROPEAN COMMISSION
LIFELONG LEARNING PROGRAMME
LEONARDO DE VINCI SUB-PROGRAMME



RESEARCH REPORT.

A study was performed as part of the development of the project named “Wise Teacher-Healthy Child-courses for teachers on dietetics and healthy nutrition of children and adolescents” (Acronym “WITH.CH”) approved in the context of the European Commission (programme Lifelong Learning, subprogramme Leonardo Da Vinci) where the Andalusian Health Service took part as a partner of the european committee. The purpose of the study was to assess the knowledge of the faculty belonging to the geographic area of the Agrigento and Palermo Province about food and healthy lifestyle both personally and in the work environment level.

The educational levels contained in the study went from pre-school education to high school, in public school as well as private. This study was carried out in January, February and March 2014.

The study was performed by survey that was developed by an auto administered questionnaire, not validated, adapted from the survey of public opinion “Polish OnBoard PR Ecco Network Research” carried out in Poland, the publication “EUROBAROMETER 64.3 Health and Food” of the European committee, “The National Survey of Health 2011-2012” (adult questionnaire) carried out in Spain and the questionnaire of “Eating Habits” (Perseo Programme) in Spain.

The population target of the study and the size of the sample (20-40 teachers) were determined in the proposal of the project by its coordinator.

The selection of the sample (40 surveyed), is not representative of the population. Some questionnaire were distributed during meeting with teachers interested in participating according to availability. A presentation of the project took place prior to the execution of the survey.

Others questionnaire were distributed individually, collected in groups at simplified measurements and completed without our participation (no possibilities additional ask questions regarding questionnaire by the respondent).

For the execution of the survey the following documents were developed:

- Guide of Management for the administration of questionnaires (ANNEX 1)
- Questionnaire WITH.CH. (ANNEX 2)
- Informed consent form (ANNEX 3)
- Control Sheet in the application of questionnaires (ANNEX 4)
- Database in Spreadsheet (Software Microsoft Excel) for the exploitation of results
- Guide of Management of the Database (ANNEX 5)

The questionnaire is divided in 5 parts: teacher's knowledge about healthy/lifestyle diet, the problem of obesity and metabolic disease in the civilization, promoting a healthy lifestyle, teacher's expectations towards the project and general information. It consists of 37 questions of which 36 are of multiple choices and 1 of open answer. The variables used in the study are classified in qualitative dichotomous (3), qualitative ordinal polytomous (15), qualitative nominal polytomous (13) and although the date of birth is reflected as day / month / year, the information was codified as "age" (quantitative discrete variable). The question of open answer was codified grouping the answers by tendency and giving each group a numerical value reflecting the information as qualitative nominal variable. The answer that could not be grouped was treated as a group itself giving it the numerical corresponding value.

The measurements were realized individually and the collection of the questionnaires by direct group technique that optimized resources and the time available of the survey respondents.

The analysis of the datas carry out by descriptive statistic: measure of central tendency and dispersion for the single variable, and measures of frequency and percentages for the cathegoric variables.

RESULTS.

The 5,0% of the sample corresponds to the male gender and the 95,0% to the female gender (Fig. 1).

The mean age is 38,72 years. The median and mode are 38 years.

The marital status of the 67,0% of the sample corresponds to married/with partner, the 28,0% to single and 2,0% to divorced and 3% widowed(Fig. 2).

The 100% of the sample was born in Eastern Europe.(Fig. 3) Regarding their partners (Fig. 4).

100% of the survey respondents teach in public institutions (Fig. 5).

The 12,0% of the sample teach in nursery, 8,0% in secondary school and the 43,0% in high level (Fig. 6), being 13,0% who teach children from 0-6 years, 43,0% from 7-12 years, 44,0% from 13-18 years (Fig. 7).

The 20% of the sample live in a town, 32,0% in a city and 43,50% in the metropolitan area and 5% in rural area (Fig. 8).

The **“Teacher's knowledge about healthy lifestyle/diet”** have been assessed by de following questions:

- **“We often hear people talking about the importance of eating a healthy diet. What do you think “eating healthy diet involves”?”.** 26,6% of the survey respondents think that is “eat a variety of different foods/balanced diet”, 8,6% “avoid/do not eat too much fatty food”, 8,6 % “avoid/do not eat too much sugary food”, 8,6% “avoid/do not eat too much salt”, 12,9% “eat more fruits and vegetables”, 0,0% “eat less fruit and vegetables”, 0,0% “eat more bread, rice, pasta and other carbohydrates”, 5% “eat less bread, rice, pasta and other carbohydrates”, 0,0% “eat more meat and less fish”, 9,4% “eat more fish and less meat”, 3,6% “do not eat too many calories”, 12,2% “ avoid/ do not food containing additives”, 4,3% “eat organic food” and 0,0% “others” (Fig.9).

To find the knowledge of the respondents, the answers are grouped according to their relationship in (ANNEX 5, Sub-annex B) :

- HEALTHY DIET
- UNHEALTHY DIET
- OTHER

The response rate of the respondents was compared with the percentage of responses if they had the ideal knowledge. So the ideal knowledge is detailed as 72% of the possible answers (Fig. 10.) and the respondents pointed 24% of them (Fig. 11.)

- **“What I eat is important to me”.** 0% said they were “Strongly disagree”, 2% “Disagree”, and 8% “Neither agree nor disagree”, 58,0% “Agree” and 33,0% “Strongly agree” (Fig. 12).
- **“Having a healthy lifestyle is important to me”.** 0% said they were “Strongly disagree”, “Disagree”, and 12% “Neither agree nor disagree”, 45% “Agree” and 43,0% “Strongly agree” (Fig. 13).
- **“Point the basic principles of healthy eating for children”.** 9,4% of the survey respondents tick “preferential consumption of fruits, vegetables, cereals (specially bread) legumes, fish and olive oil as the principal fat source”, 1,9% “low consumption of meat and meat products”, 10% “dairy products (preferably low-fat, skimmed milk, fermented milk)” and 18,1% with “drink water” (Fig. 14).
- **“I Know the dietary habits of my students”** 3% think they are “Strongly disagree”, 10% “Disagree”, 45% “Neither agree nor disagree”, 42% “Agree” and 0,0% “Strongly agree” (Fig. 15).
- **“Do the Children/teenagers eat lunch in your kindergarten/school?”** 32% of the sample think that “Yes” and 68% “No” (Fig. 16).
- **“What percentage of students regularly use the dining room?”.** 67% of the sample think that “Less than 25%”, 15% think that “Between 25-50%”, 6% think

that “Between 51-75%” and 12% think that “Over 76%” (Fig. 17). Twenty-four teachers didn’t answer.

- **“What kind of service they offer in the dining room?”**. 34% think serve they “Their own kitchen”, 45% “Catering, supplied raw and cooked there”, 13% “Catering, hot chain” and 8% “Catering, cold chain” (Fig.18).
- **“I think I have a good knowledge of the principles of good nutrition”**. 3% of the sample “Strongly disagree”, 2% “Disagree”, 22% “Neither agree nor disagree”, 73% “Agree” 0% “Strongly agree” (Fig. 19).
- **“Where did you acquire knowledge of the principles of good nutrition?”**. 37% of the sample answer than “Tradition”, 5% in the “College/University”, 50% in the “Massmedia” and 8,% in the “Course/Project/Trainings”(Fig. 20).
- The results of all the questions on Likert scale answers options in this part are detailed as: 20% think that “Strongly disagree”, 4% “Disagree”, 22% “Neither agree nor disagree”, 54% “Agree”, 0% “Strongly Agree” (Fig. 21).

The **“Problem of obesity and metabolic diseases in the civilization”** has been assessed by de following questions:

- **“I have noticed the problems of the obesity among the children/adolescents that I teach”**. 2% said to be “Strongly disagree”, 7% “Disagree”, 38% “Neither agree nor disagree”, 48% “Agree” and 5% “Strongly agree” (Fig. 22).
- **“I have noticed the increase of obesity in children at my school in recent years”**. 0% said to be “Strongly disagree”, 12% “Disagree”, 35% “Neither agree nor disagree”, 50% “Agree” and 3% “Strongly agree” (Fig. 23).
- **“I am familiar with eating disorders (anorexia/bulimia) and with metabolic diseases (diabetes)”**. 0% said to be “Strongly disagree”, 2%“Disagree”, 18% “Neither agree nor disagree”, 80% “Agree” and 0% “Strongly agree” (Fig. 24).
- **“I am able to recognize the signs of an eating disorder. Excessive weight loss, desire to thinning, performing continued excessive exercise, progressive isolation and loss of social ties, mood disturbances prone to depression and anxiety, low self-esteem, overweight, sedentary lifestyle, being very thirsty, feeling hungry, feeling tired or fatigued, have blurred vision,...”**. 0% said to be “Strongly disagree”, 7% “Disagree”, 28% “Neither agree nor disagree”, 65% “Agree” and 0% “Strongly agree” (Fig.25).
- The results of all the questions on Likert scale answers options in this part are detailed as: 1% think that “Strongly disagree”, 7% “Disagree”, 29% “Neither agree nor disagree”, 61% “Agree”, 2% “Strongly Agree” (Fig. 26).

The **“Promoting of a healthy lifestyle”** was assessed by de following questions:

- **“My workplace provides activities for children that promote healthy lifestyle. Lessons, all-year-long own programs, national programs, events, workshops ...”.** 65 % of the sample think that “Yes”, 17% that “No” and 18% “Don't know/ Not sure” (Fig. 27).
- **“My workplace provides activities for parents that promote healthy lifestyle. Discussions, workshops,...”.** 65% of the sample think that “Yes”, 17% that “No” and 18% “Don't know/ Not sure” (Fig. 28).
- **“I feel the need to include activities of health promotion for children and parents”.** 2% of the sample is “Strongly disagree”, 0,0% “Disagree”, 5% “Neither agree nor disagree”, 60% “Agree” and 33 % “Strongly agree” (Fig. 29).
- **“I think that children and teenagers are physically active”.** 0% of the sample is “Strongly disagree”, 17% “Disagree”, 43% “Neither agree nor disagree”, 35% “Agree” and 5% “Strongly agree” (Fig. 30).
- **“How many hours a week on average do students perform sport activities in school time?”.** 75% of the sample think that “1-2 hours/week”, 20% “2-3 hours/week”, 2% “3-4 hours/week” (Fig. 31).
- **“How many hours a week on average do students perform sport activities out of school time?”.** 47,5% of the sample think that “1-2 hours/week”, 30% “2-3 hours/week”, 8% “3-4 hours/week”, 3% “5 hours/week” and 10% “None” (Fig. 32).
- The results of all the questions on Likert scale answers options in this part are detailed as: 1% think that “Strongly disagree”, 9% “Disagree”, 24% “Neither agree nor disagree”, 47% “Agree”, 19% “Strongly Agree” (Fig. 33).

The **“Teacher’s expectations about the project”** was assessed by de following questions:

- **“I feel the need to attend courses/workshops on healthy eating”.** 0% of the sample is “Strongly disagree”, 2% “Disagree”, 8% “Neither agree nor disagree”, 85% “Agree” and 5% “Strongly agree” (Fig. 34).
- **“Are there currently in your country any offers of courses aimed at teachers about a healthy diet/healthy lifestyle? ”.** 28% of the sample think that “Yes”, 22% think that “No” and 50% “Don't know/Not sure” (Fig. 35).
- **“The offers of courses aimed at teachers about a healthy diet/lifestyle are ...?”** 12% think that “Free”, 13% think that “Paid” and 75% “Don't know/ Not sure” (Fig. 36).

- **“I would be willing to participate in such a course, if I had the opportunity”.** 2% of the sample is “Strongly disagree”, 0% “Disagree”, 7% “Neither agree nor disagree”, 68% “Agree” and 23% “Strongly agree” (Fig. 37).
- **“I would like the courses/workshops were accredited and included in my professional portfolio/curriculum”.** 3% of the sample is “Strongly disagree”, 0% “Disagree”, 10% “Neither agree nor disagree”, 58% “Agree” and 30% “Strongly agree” (Fig.38).
- **“My expectations towards the training are... to increase my theoretical knowledge on a healthy diet”.** 0% of the sample is “Strongly disagree”, 0% “Disagree”, 0% “Neither agree nor disagree”, 66% “Agree” and 34% “Strongly agree” (Fig. 39.1)
- **“My expectations towards the training are... to find out the dietary problems of children and adolescents”** 0% of the sample is “Strongly disagree”, 3% “Disagree”, 0% “Neither agree nor disagree”, 62% “Agree” and 35% “Strongly agree” (Fig. 39.2).
- **“My expectations towards the training are... to obtain the skills and tools to conduct lessons”.** 0% of the sample is “Strongly disagree”, 3% “Disagree”, 3% “Neither agree nor disagree”, 48% “Agree” and 46% “Strongly agree” (Fig 39.3).
- **“My expectations towards the training are... to be more confident about my knowledge when talking to children and parents”.** 0% of the sample is “Strongly disagree”, 0% “Disagree”, 3% “Neither agree nor disagree”, 44% “Agree” and 53% “Strongly agree” (Fig. 39.4).
- **“My expectations towards the training are... to obtain principal knowledge that could be use in relation to myself/my loved ones”.** 0% of the sample is “Strongly disagree”, 3% “Disagree”, 0% “Neither agree nor disagree”, 61% “Agree” and 36% “Strongly agree” (Fig. 39.5).
- The results of all the questions on Likert scale answers options in this part are detailed as: 3,4% think that “Strongly disagree”, 1% “Disagree”, 4% “Neither agree nor disagree”, 62% “Agree”, 32% “Strongly Agree” (Fig. 40).

“Do you think something could improve knowledge on healthy eating and physical activity?”. The answers were group by 25% tendency each (Fig. 41). Thirty teachers didn't answer.

CONCLUSIONS.

Female teachers were part of the sample more involved in completing the questionnaires. The average age is 41 years. Most of them are in a married/partner marital status and both were born in Eastern Europe. All of the teachers work in the public education system. About 95% of the sample lives in city or metropolitan

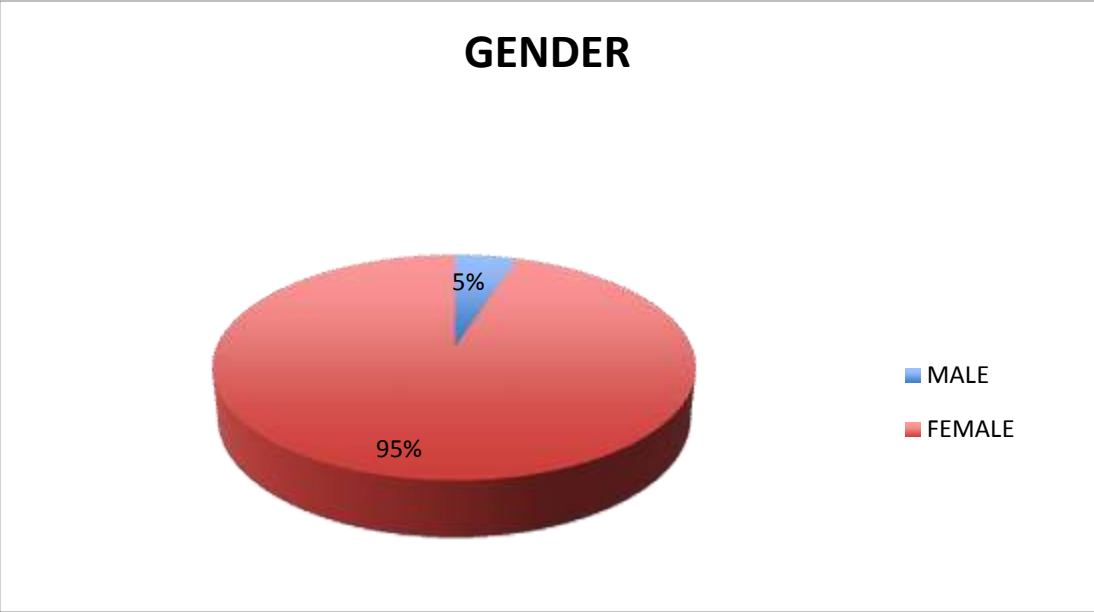


FIG. 1. GENDER.

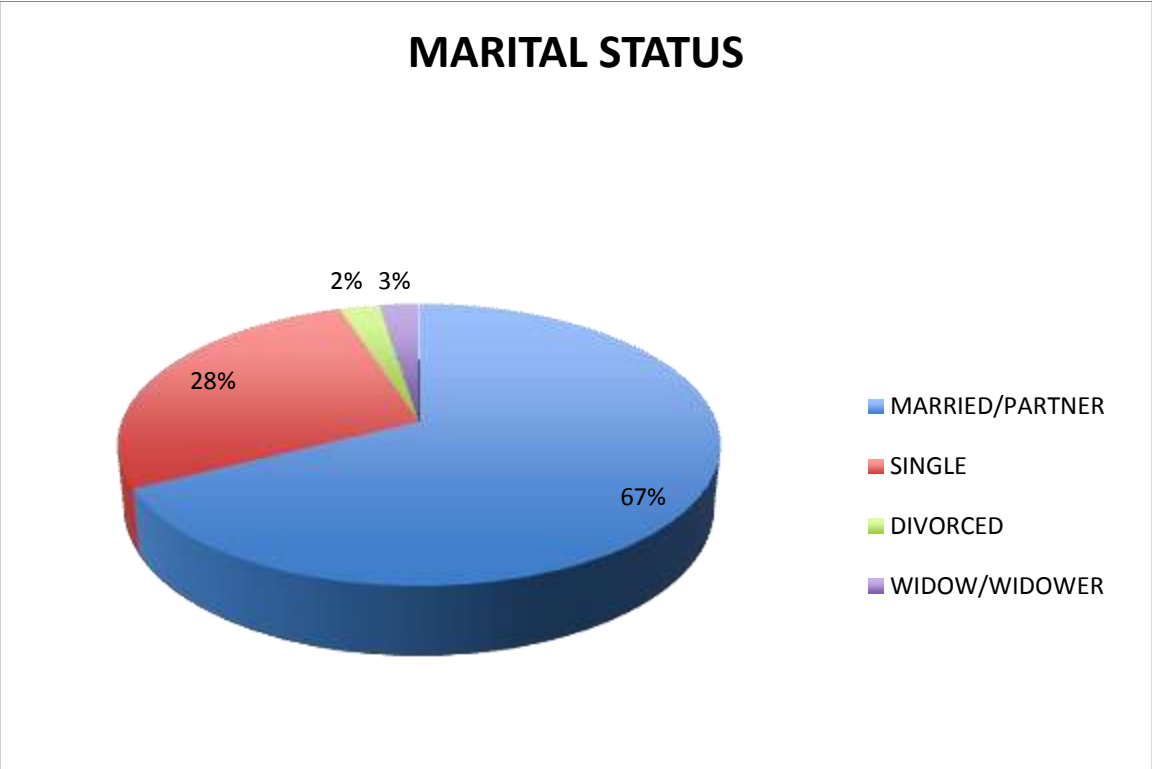


FIG. 2. MARITAL STATUS.

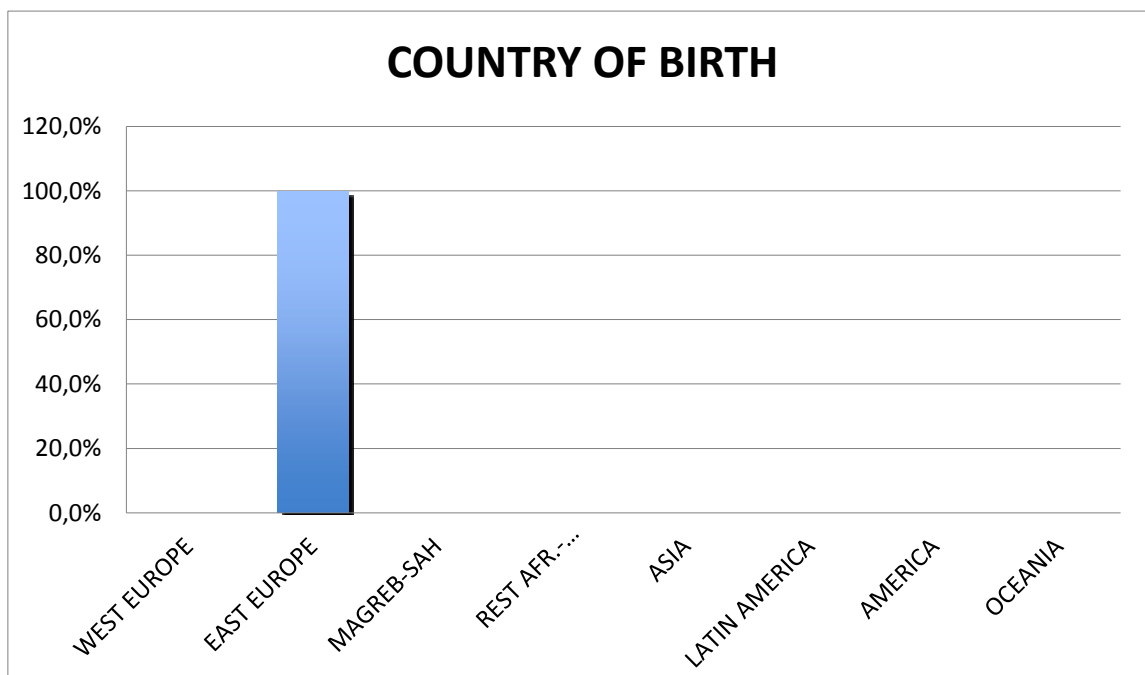


FIG. 3. COUNTRY OF BIRTH.

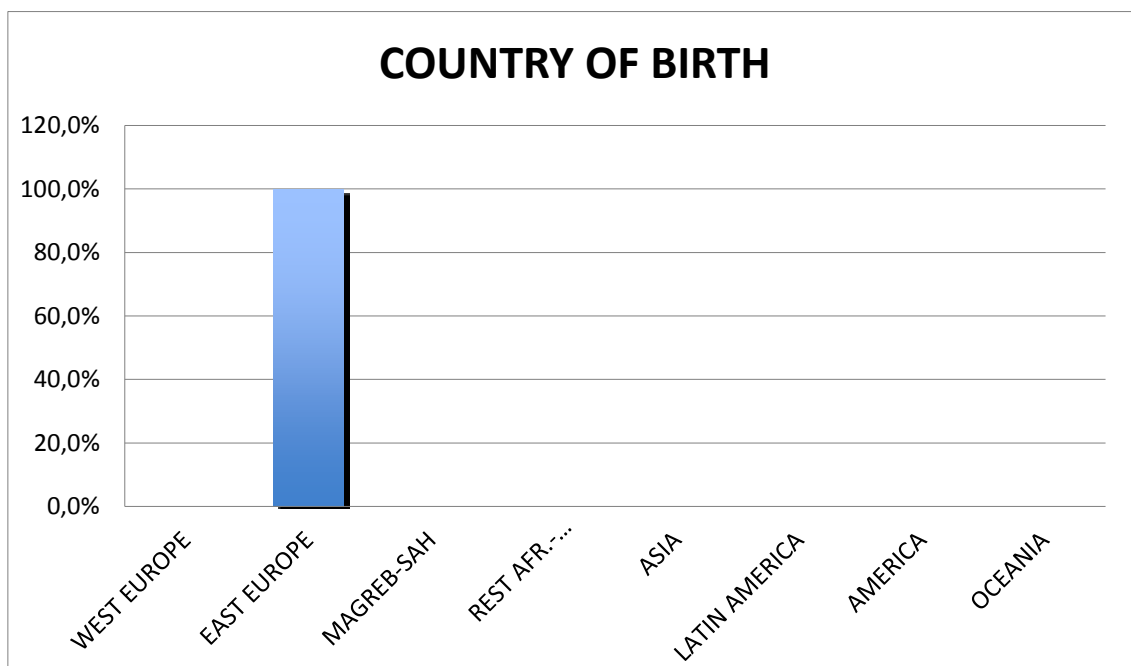


FIG. 4. YOUR PARTNER`S COUNTRY OF BIRTH.

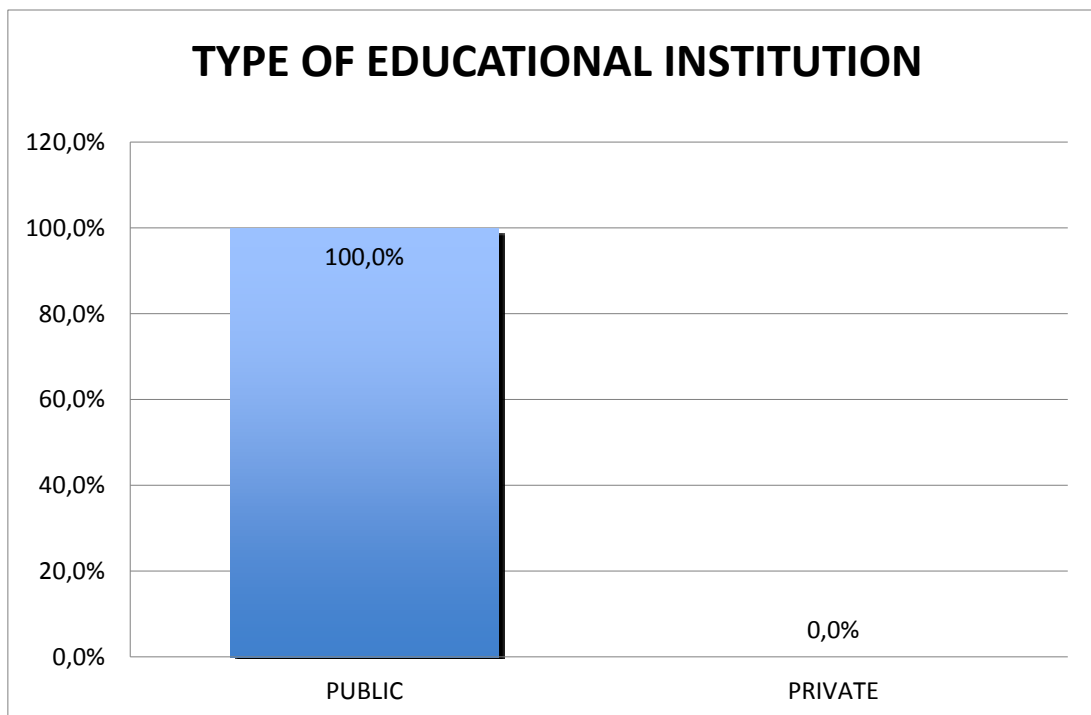


FIG. 5. TYPE OF EDUCATIONAL INSTITUTION.

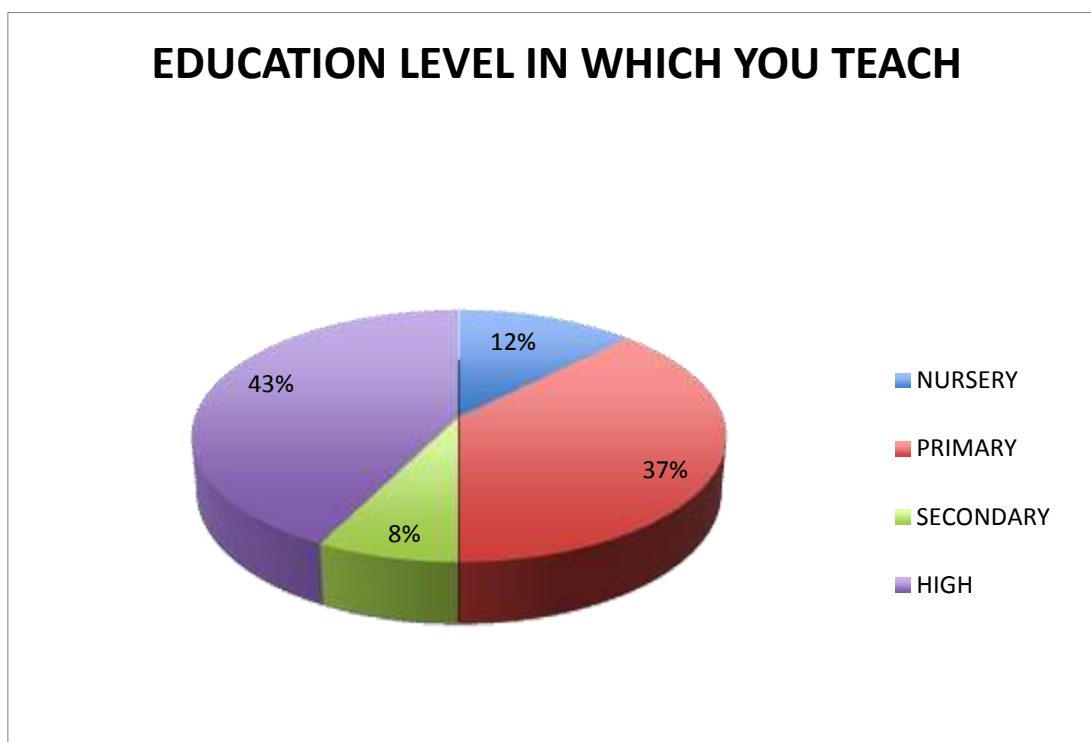


FIG. 6. EDUCATION LEVEL IN WICH YOU TEACH.

AGE OF THE CHILDREN YOU TEACH

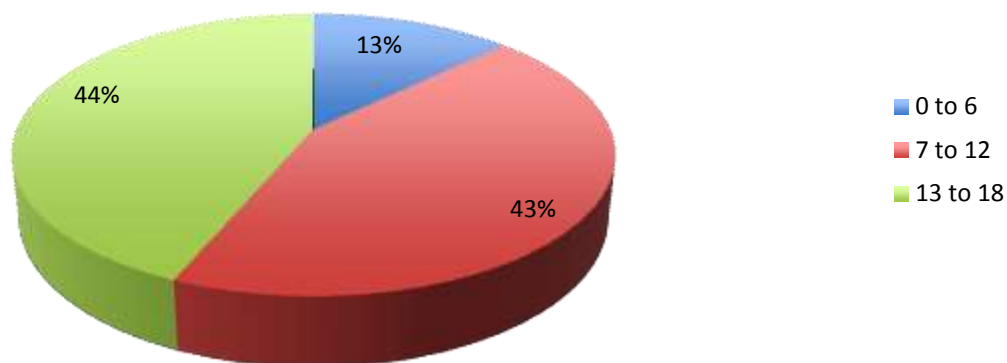


FIG. 7. AGE OF THE CHILDREN YOU TEACH.

PLACE OF RESIDENCE

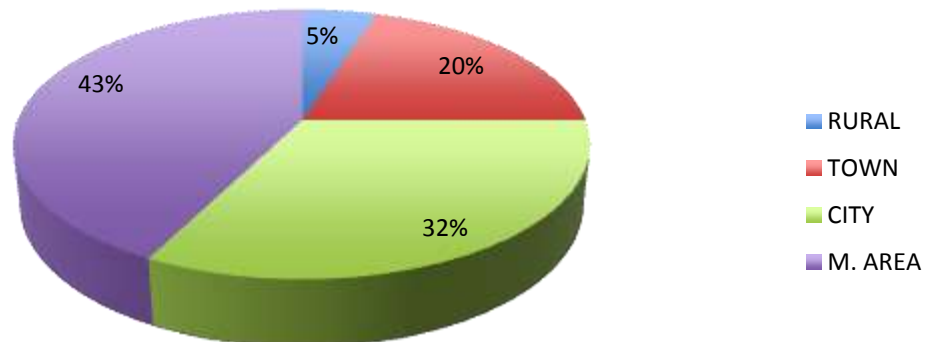


FIG. 8. PLACE OF RESIDENCE.

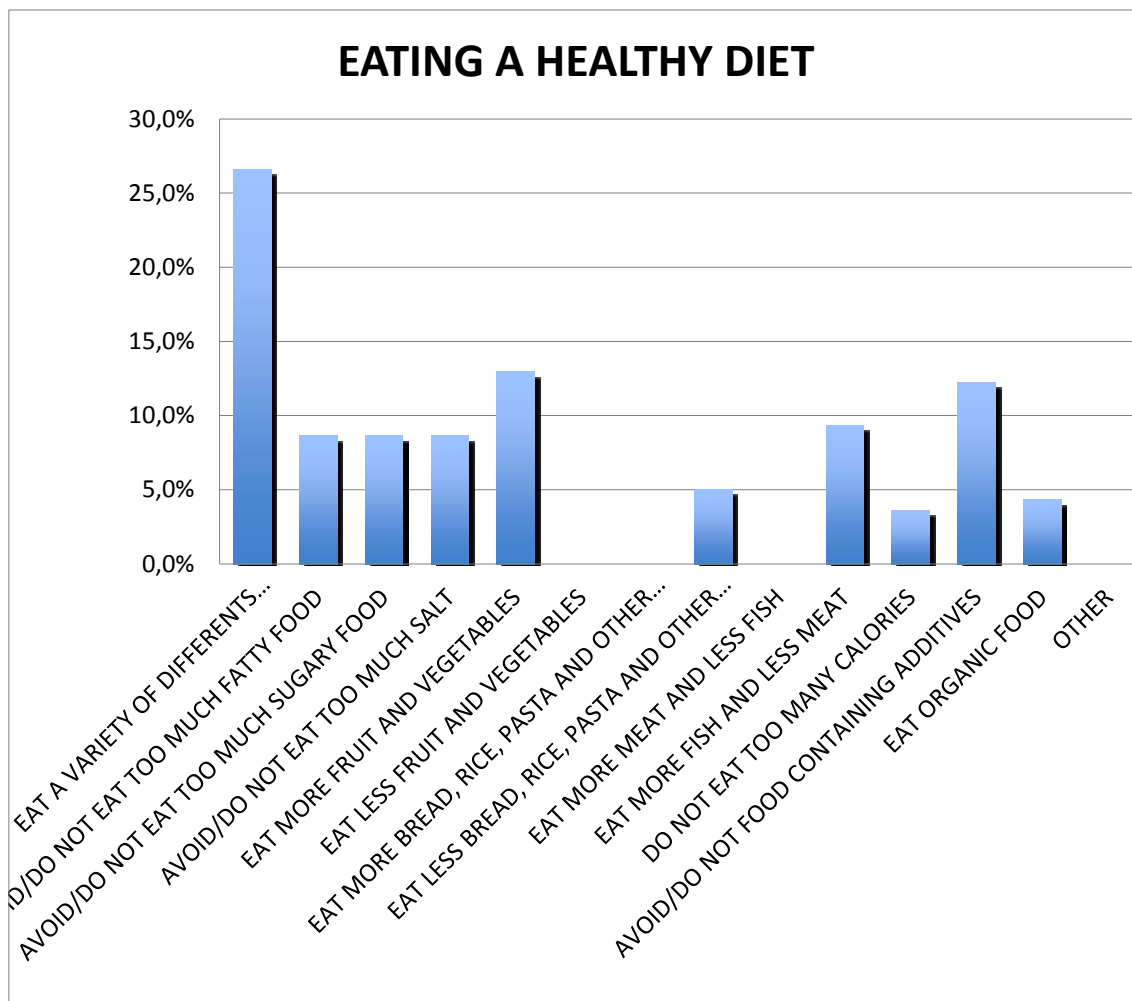


FIG. 9. WE OFTEN HEAR PEOPLE TALKING ABOUT THE IMPORTANCE OF EATING A HEALTHY DIET. WHAT DO YOU THINK “EATING A HEALTHY DIET” INVOLVES?

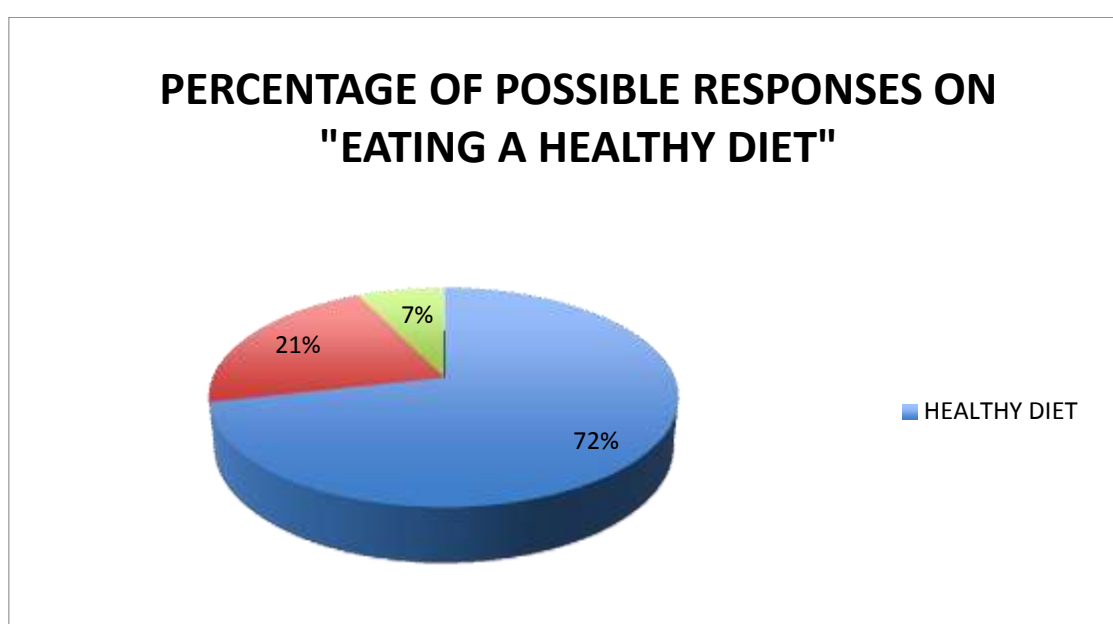


FIG. 10. PERCENTAGE OF POSSIBLE RESPONSES ON “EATING A HEALTHY DIET”.

TEACHERS KNOWLEDGE ON "EATING A HEALTHY DIET"

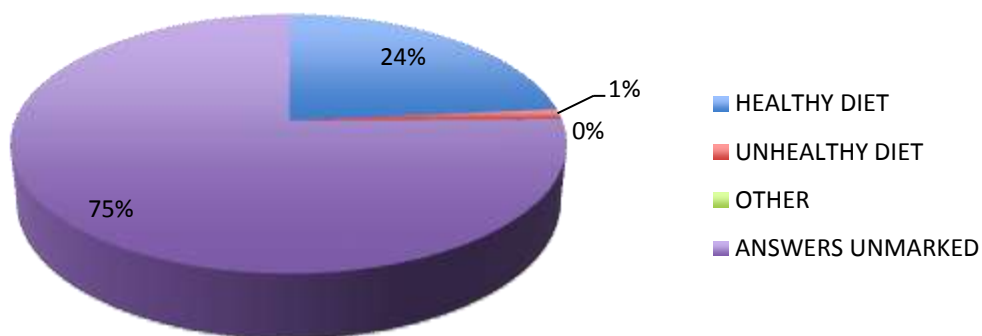


FIG. 11. TEACHERS KNOWLEDGE ON "HEALTHY DIET".

WHAT I EAT IS IMPORTANT TO ME

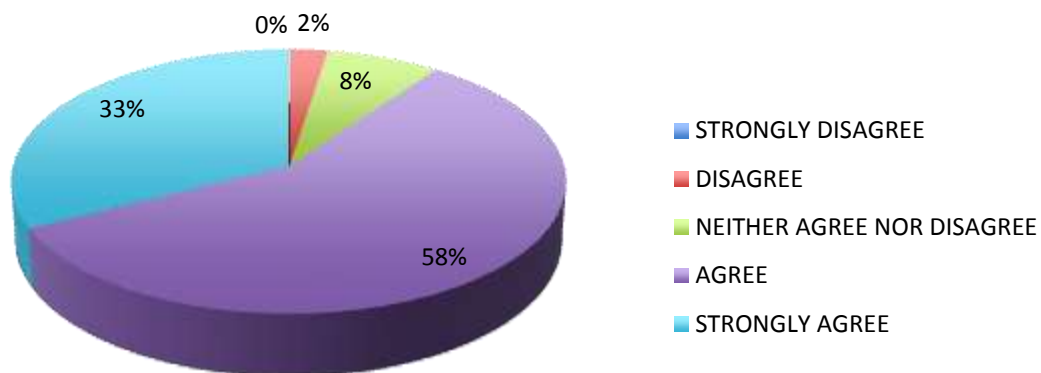


FIG. 12. WHAT I EAT IS IMPORTANT TO ME.

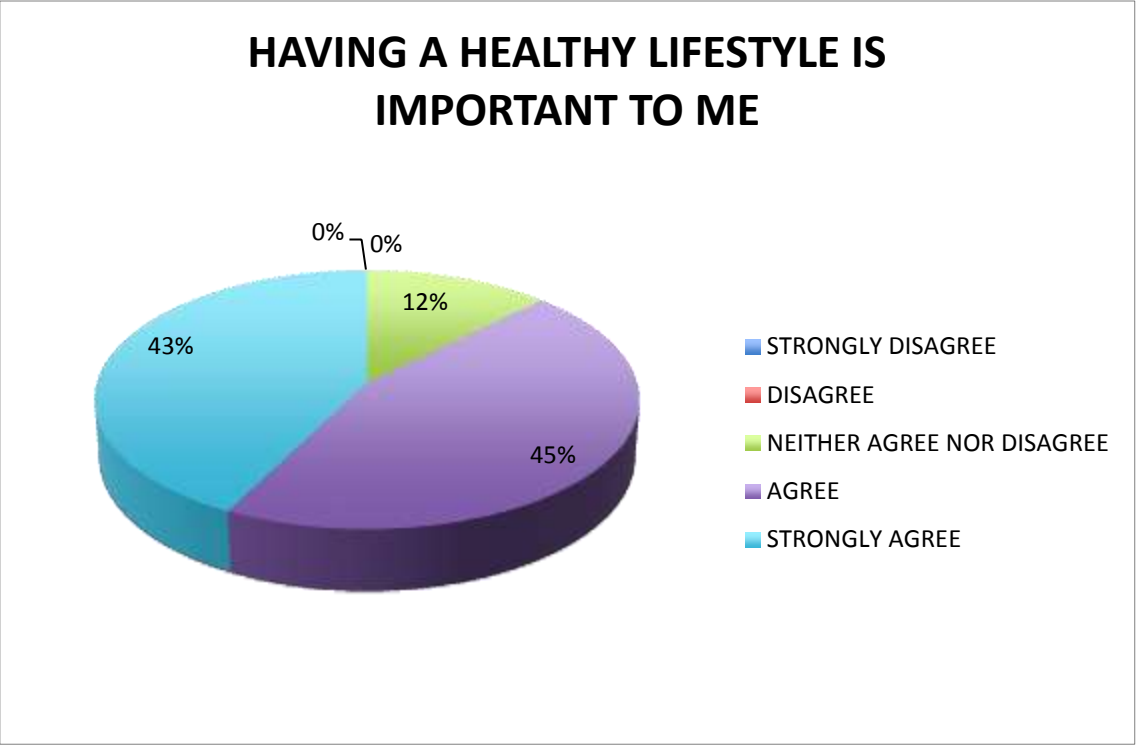


FIG. 13. HAVING A HEALTHY LIFESTYLE IS IMPORTANT TO ME.

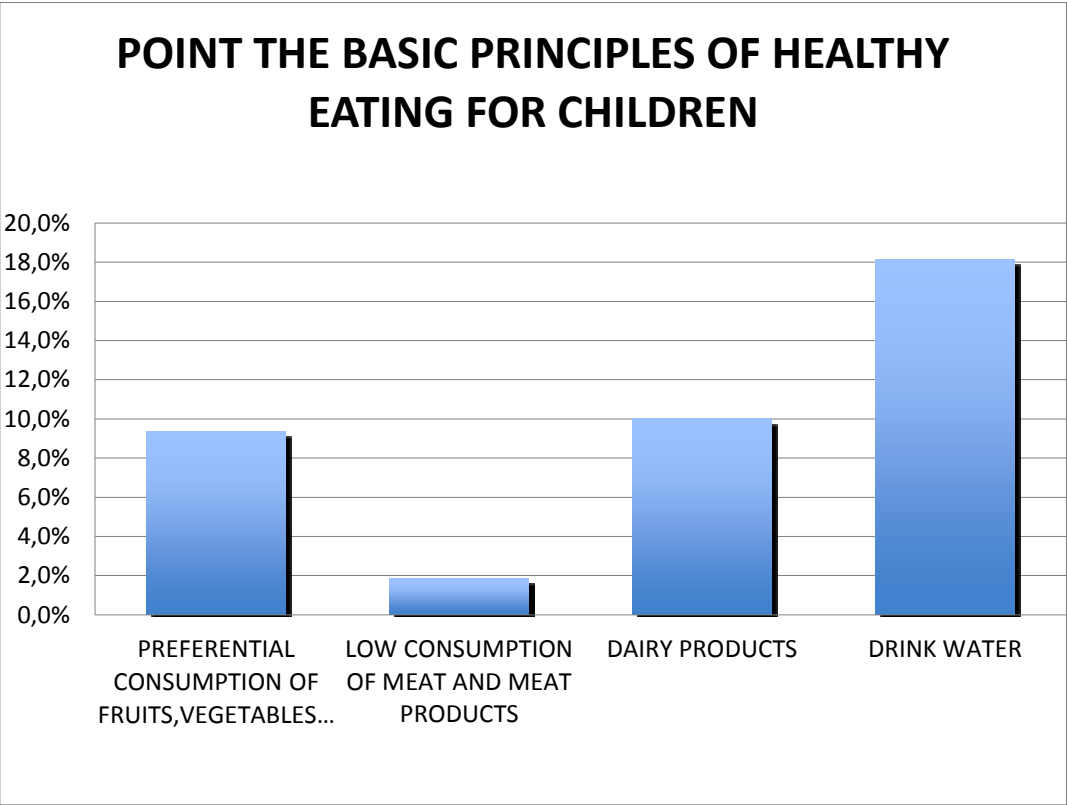


FIG. 14. POINT THE BASIC PRINCIPLES OF HEALTHY EATING FOR CHILDREN.

I KNOW THE DIETARY HABITS OF MY STUDENTS

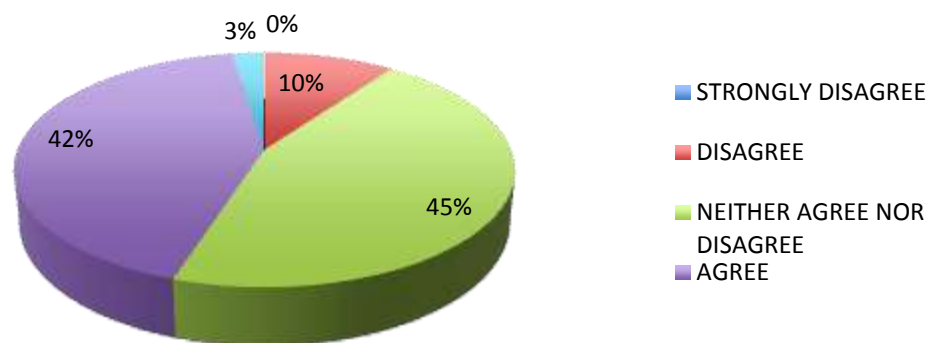


FIG. 15. I KNOW THE DIETARY HABITS OF MY STUDENTS.

DO THE CHILDREN/TEENAGERS EAT LUNCH IN YOUR KINDERGARTEN/SCHOOL?

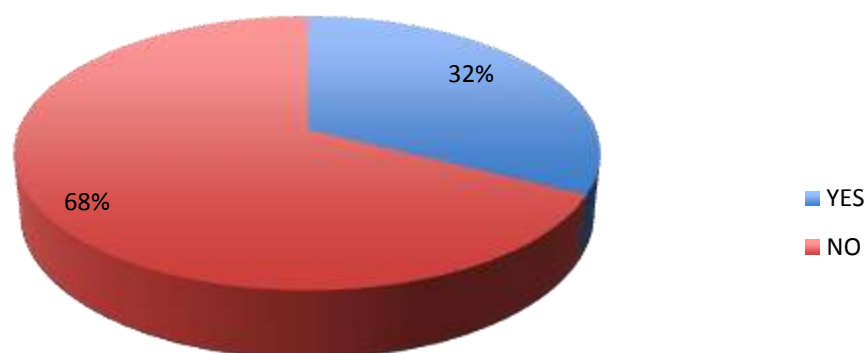


FIG. 16. DO THE CHILDREN/TEENAGERS EAT LUNCH IN YOUR KINDERGARTEN/SCHOOL?

WHAT % OF STUDENTS REGULARLY USE THE DINNING ROOM?

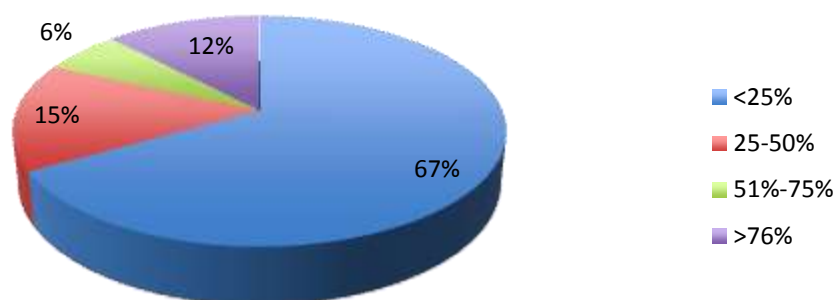


FIG. 17. WHAT PERCENTAGE OF STUDENTS REGULARLY USE THE DINNING ROOM?

WHAT KIND OF SERVICE THEY OFFER IN THE DINNING ROOM?



FIG. 18. WHAT KIND OF SERVICE THEY OFFER IN THE DINNING ROOM?

I THINK I HAVE A GOOD KNOWLEDGE OF THE PRINCIPLES OF A GOOD NUTRITION

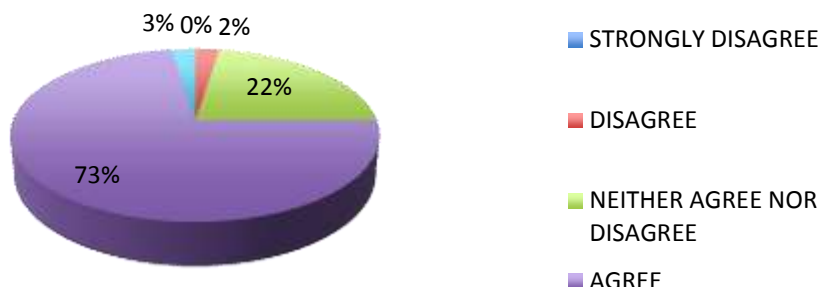


FIG. 19. I THINK I HAVE A GOOD KNOWLEDGE OF THE PRINCIPLES OF GOOD NUTRITION.

WHERE DID YOU ACQUIRE KNOWLEDGE OF THE PRINCIPLES OF GOOD NUTRITION?

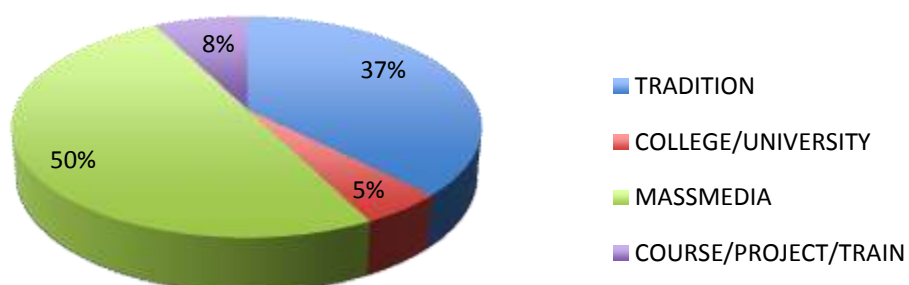


FIG. 20. WHERE DID YOU ACQUIRED KNOWLEDGE OF THE PRINCIPLES OF GOOD NUTRITION?

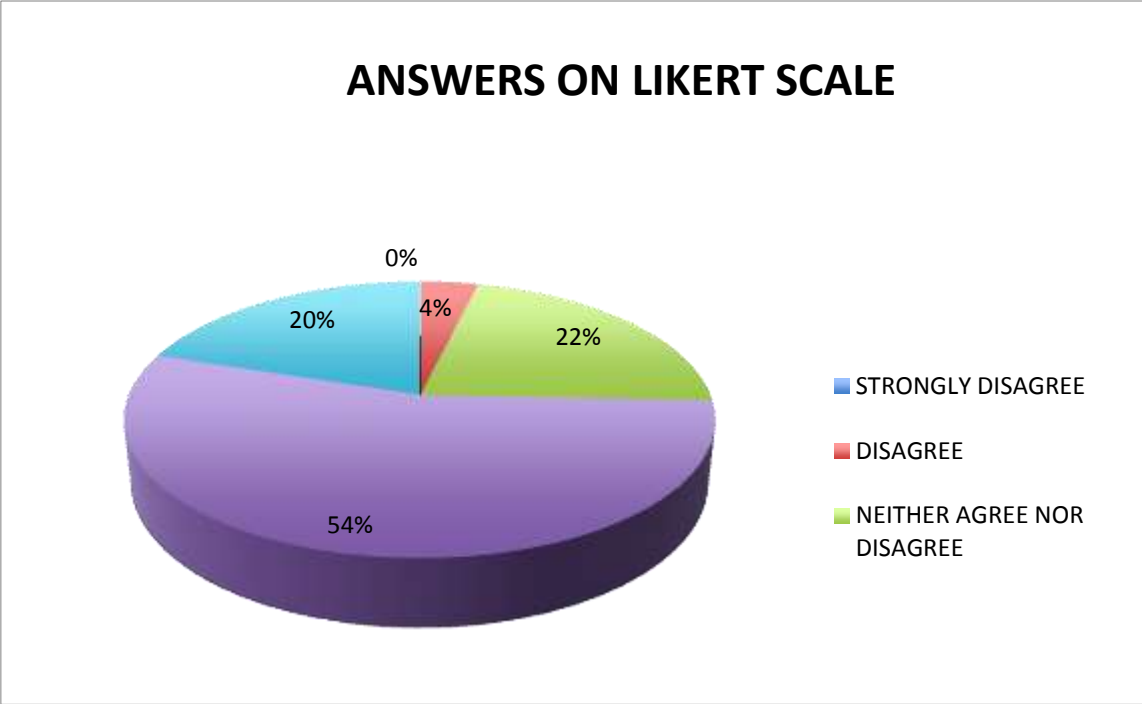


FIG. 21. RESULTS OF ALL THE QUESTIONS WITH LIKERT SCALE OPTIONS IN PART I.

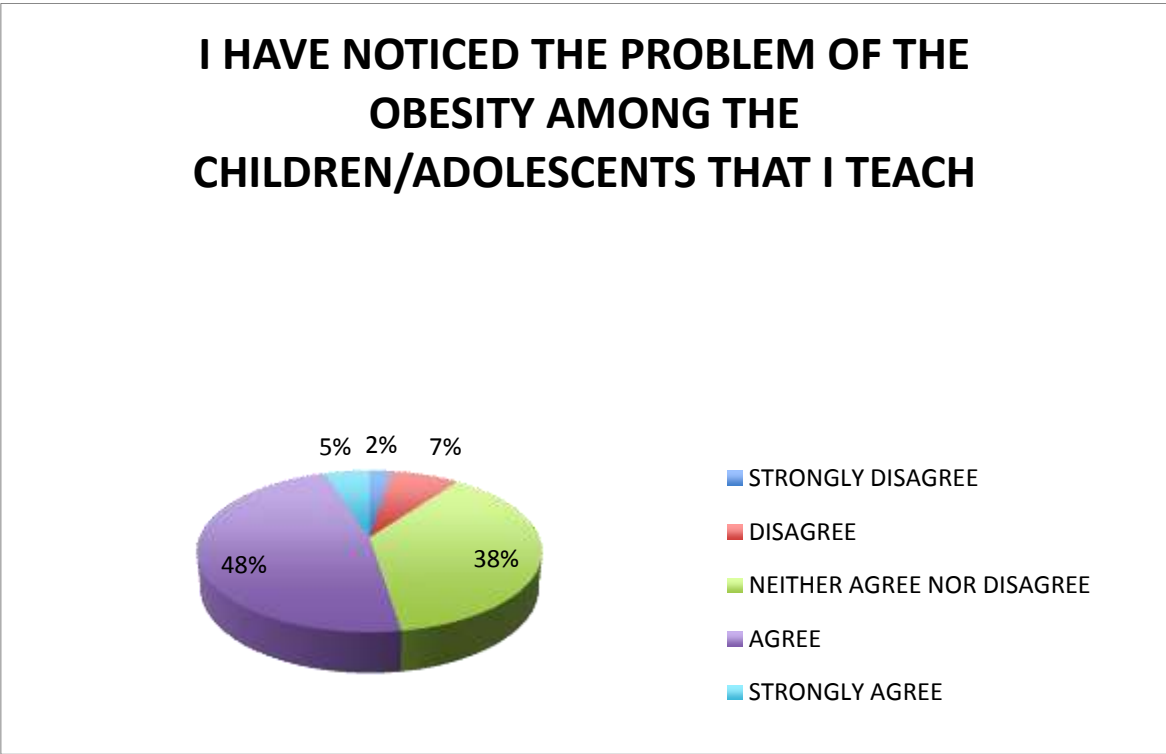


FIG. 22. I HAVE NOTICED THE PROBLEMS OF THE OBESITY AMONG THE CHILDREN/ADOLESCENTS WHO I TEACH.

I HAVE NOTICED THE INCREASE OF OBESITY IN CHILDREN AT MY SCHOOL IN RECENT YEARS

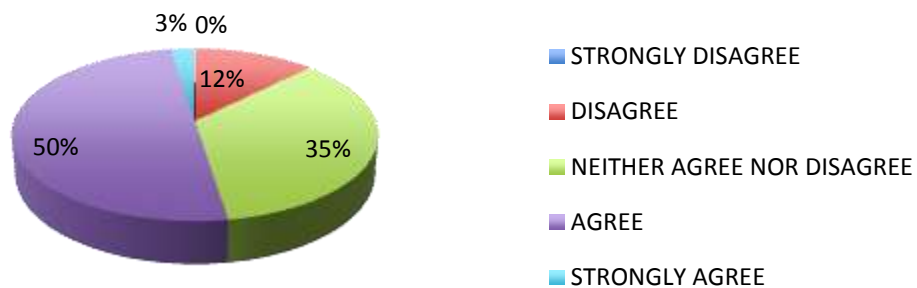


FIG. 23. I HAVE NOTICED THE INCREASE OF OBESITY IN CHILDREN AT MY SCHOOL IN RECENT YEARS.

I AM FAMILIAR WITH EATING DISORDERS (ANOREXIA/OBESITY) AND METABOLIC DISEASES (DIABETES)



FIG. 24. I AM FAMILIAR WITH EATING DISORDERS (ANOREXIA/BULIMIA) AND WITH METABOLIC DISEASES (DIABETES).

I AM ABLE TO RECOGNIZE THE SIGNS OF AN EATING DISORDER

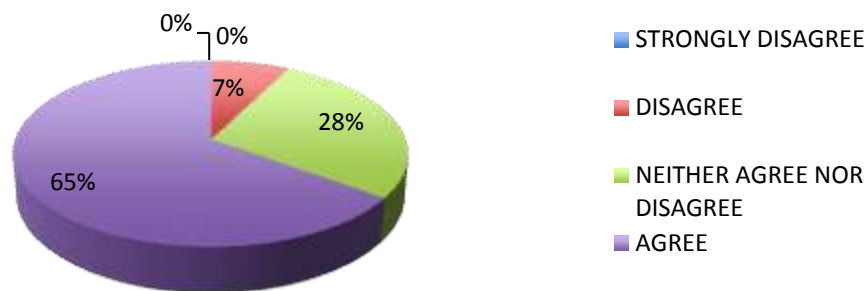


FIG. 25. I AM ABLE TO RECOGNIZE THE SIGNS OF AN EATING DISORDER. Excessive weight loss, desire to thinning, performing continued excessive exercise, progressive isolation and loss of social ties, mood disturbances prone to depression and anxiety, low selfesteem, overweight, sedentary lifestyle, been very thirsty, feeling hungry, feeling tired or fatigued, have blurred vision....

ANSWERS ON LIKERT SCALE

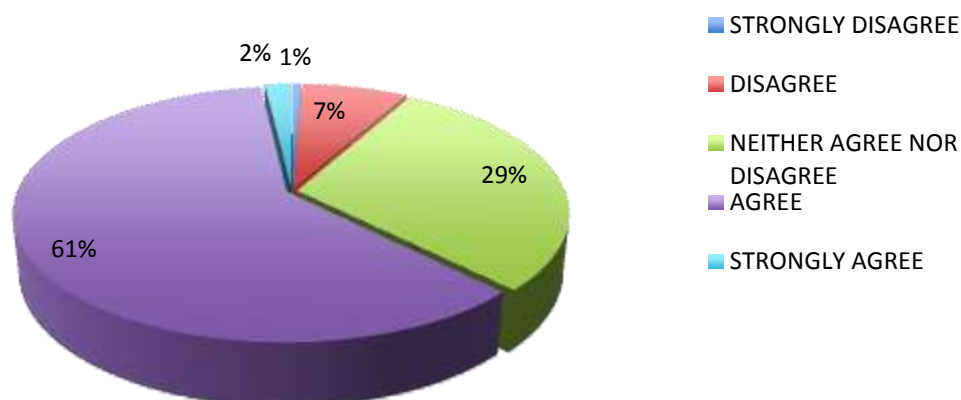


FIG. 26. RESULTS OF ALL THE QUESTIONS WITH LIKERT SCALE OPTIONS IN PART II.

MY WORK PLACE PROVIDES ACTIVITIES FOR CHILDREN THAT PROMOTE A HEALTHY LIFESTYLE.

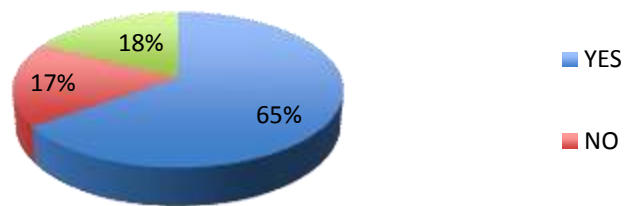


FIG. 27. MY WORK PLACE PROVIDES ACTIVITIES FOR CHILDREN THAT PROMOTE HEALTHY LIFESTYLE. LESSONS, ALL-YEAR-LONG OWN PROGRAMMES, NATIONAL PROGRAMMES, EVENTS, WORKSHOPS,...

MY WORK PLACE PROVIDES ACTIVITIES FOR CHILDREN THAT PROMOTE A HEALTHY LIFESTYLE.



FIG. 28. MY WORK PLACE PROVIDES ACTIVITIES FOR PARENTS THAT PROMOTE HEALTHY LIFESTYLE. DISCUSSIONS, WORKSHOPS,...

I FEEL THE NEED TO INCLUDE ACTIVITIES OF HEALTH PROMOTION FOR CHILDREN AND PARENTS

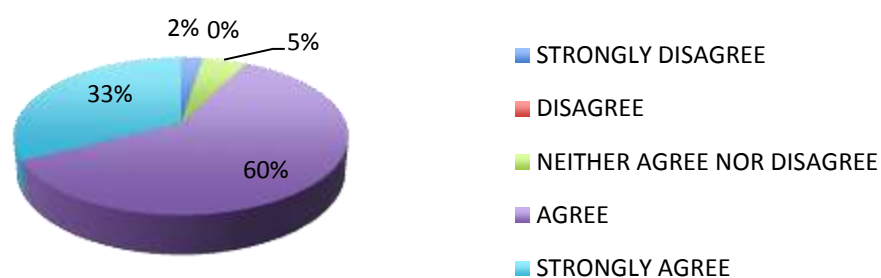


FIG. 29. I FEEL THE NEED TO INCLUDE ACTIVITIES OF HEALTH PROMOTION FOR CHILDREN AND PARENTS.

I THINK THAT CHILDREN AND TEENAGERS ARE PHYSICALLY ACTIVE

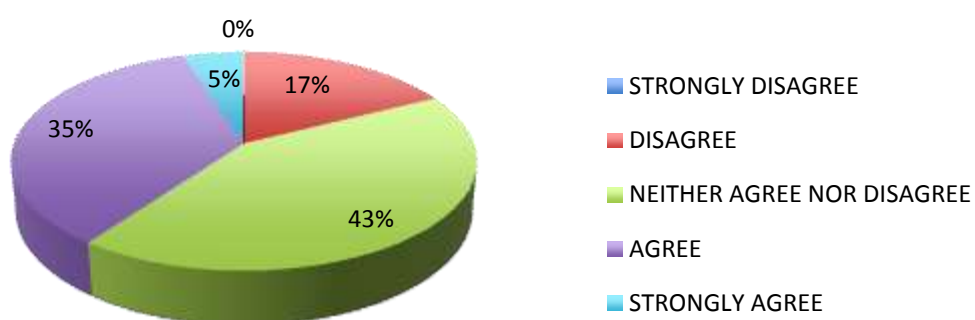


FIG. 30. I THINK THAT CHILDREN AND TEENAGERS ARE PHYSICALLY ACTIVE.

HOW MANY HOURS A WEEK ON AVERAGE DO STUDENTS PERFORM SPORTS ACTIVITIES IN SCHOOL TIME?

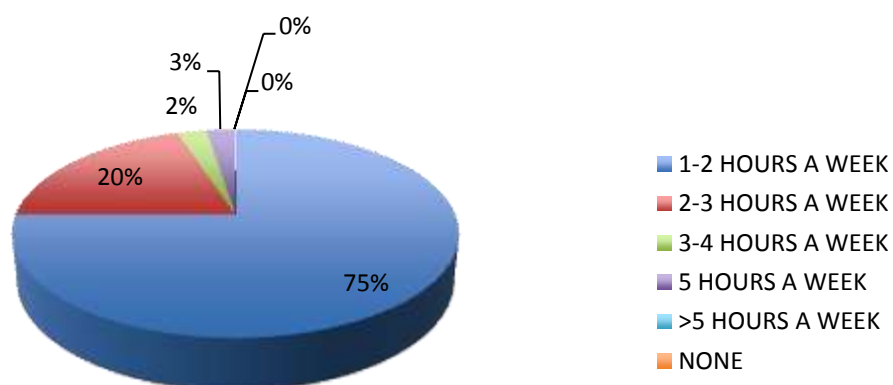


FIG. 31. HOW MANY HOURS A WEEK ON AVERAGE DO STUDENTS PERFORM SPORT ACTIVITIES IN SCHOOL TIME?

HOW MANY HOURS A WEEK ON AVERAGE DO STUDENTS PERFORM SPORTS ACTIVITY OUT OF SCHOOL TIME?

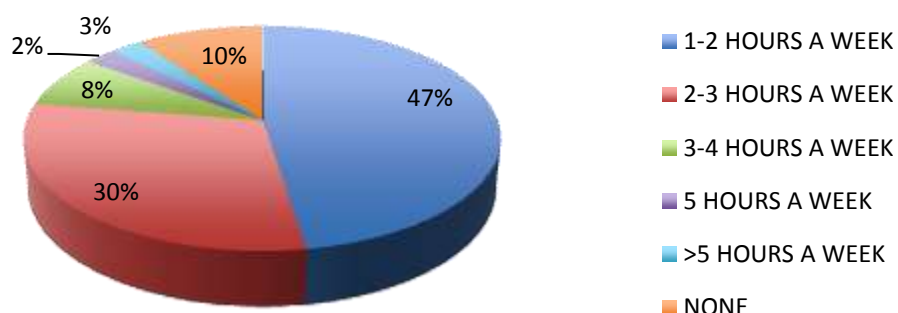


FIG. 32. HOW MANY HOURS A WEEK ON AVERAGE DO STUDENTS PERFORM SPORT ACTIVITIES OUT OF SCHOOL TIME?

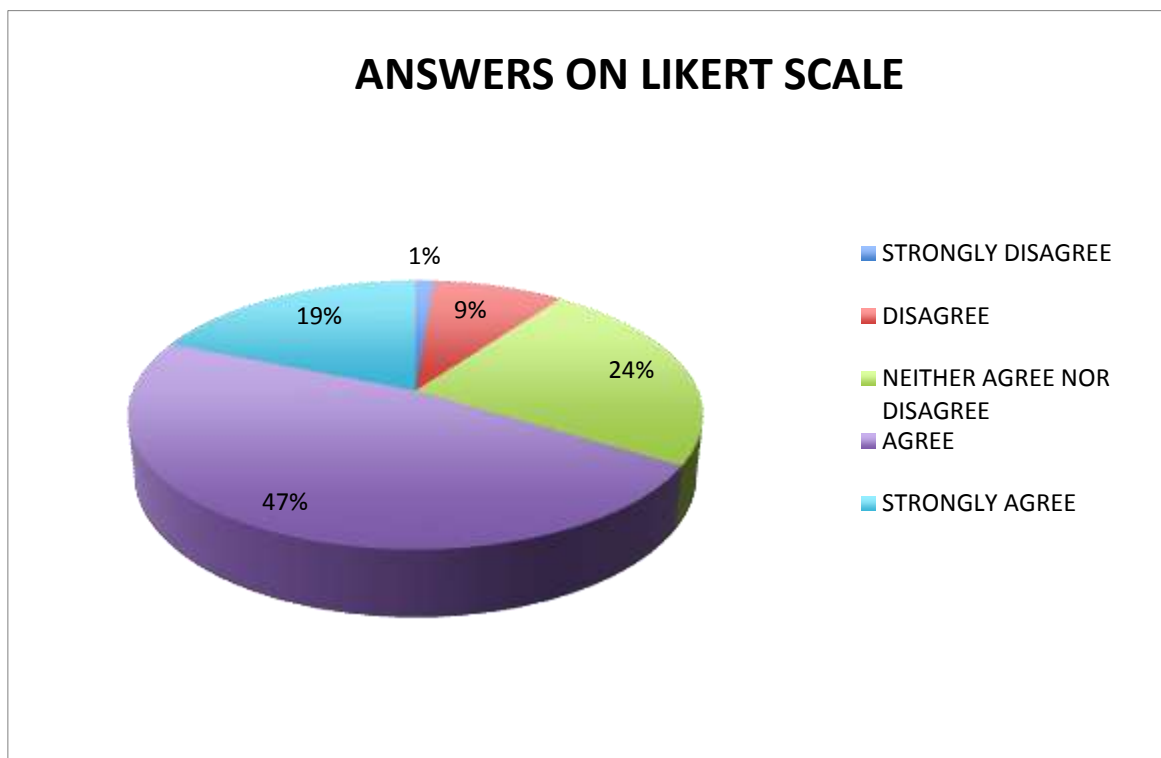


FIG. 33. RESULTS OF ALL THE QUESTIONS WITH LIKERT SCALE OPTIONS IN PART III.

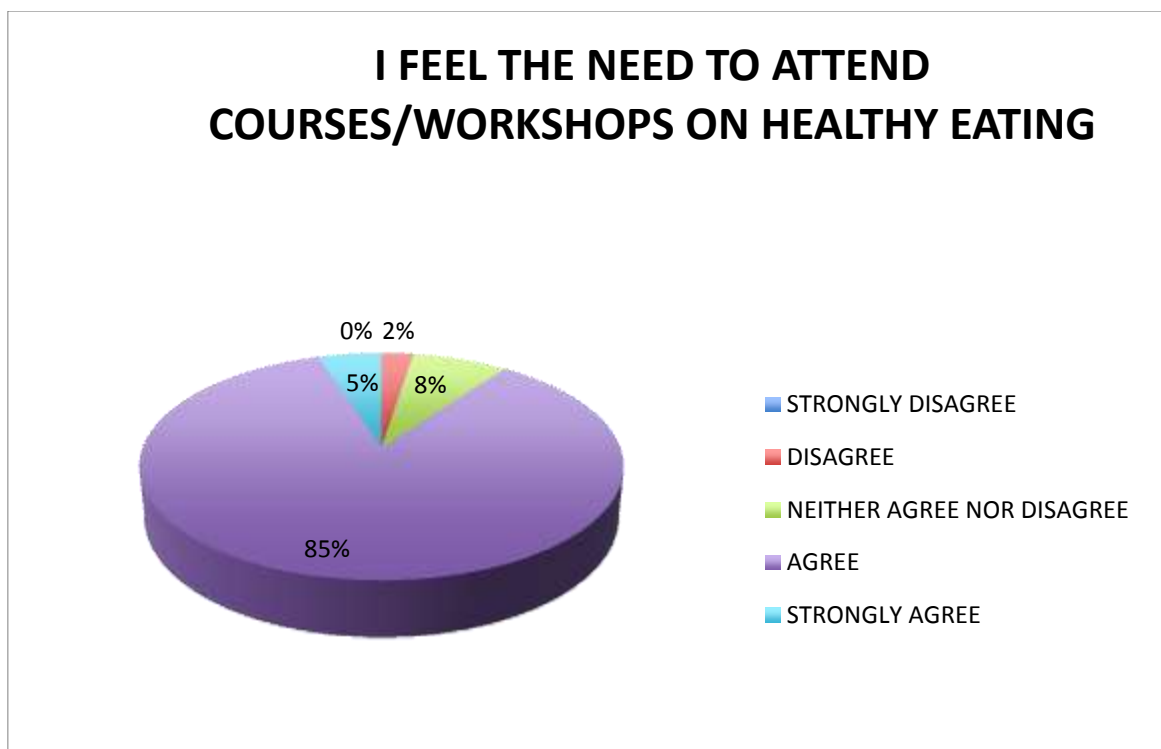


FIG. 34. I FEEL THE NEED TO ATTEND COURSES/WORKSHOPS ON HEALTHY EATING.

**ARE THERE CURRENTLY IN YOUR COUNTRY ANY
OFFERS OF COURSES AIMED AT TEACHERS ABOUT A
HEALTHY DIET/LIFESTYLE?**



FIG. 35. ARE THERE CURRENTLY IN YOUR COUNTRY ANY OFFERS OF COURSES AIMED AT TEACHERS ABOUT A HEALTHY DIET/LIFESTYLE?

**THE OFFERS OF COURSES AIMED AT TEACHERS
ABOUT A HEALTHY DIET/LIFESTYLE ARE...**

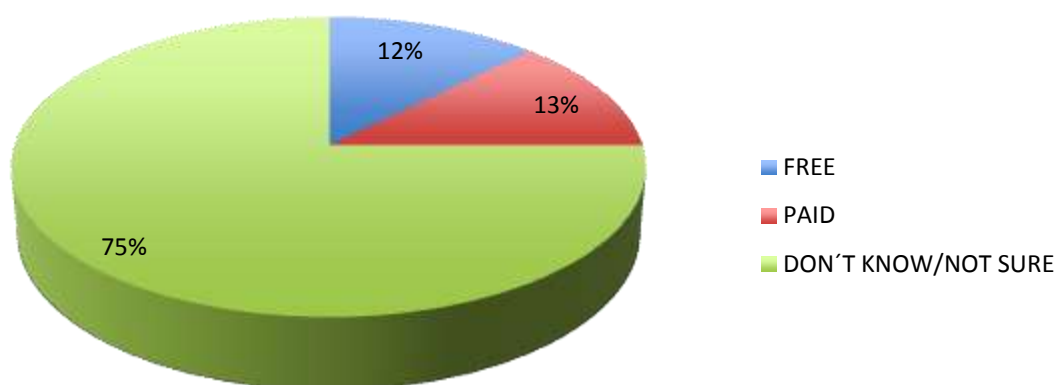


FIG. 36. THE OFFER OF COURSES AIMED AT TEACHERS ABOUT A HEALTHY DIET/LIFESTYLE ARE....?

I WOULD BE WILLING TO PARTICIPATE IN SUCH A COURSE IF I HAD THE OPPORTUNITY

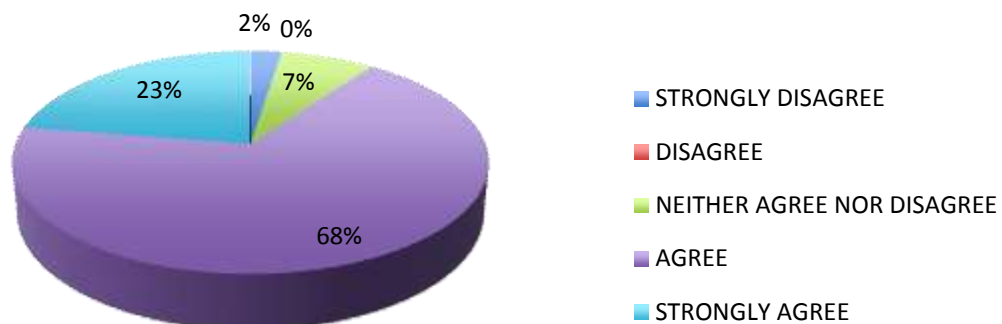


FIG. 37. I WOULD BE WILLING TO PARTICIPATE IN SUCH A COURSE IF I HAD THE OPPORTUNITY.

I WOULD LIKE THE COURSES/WORKSHOP WERE ACCREDITED AND INCLUDED IN MY PROFESIONAL PORTFOLIO/CURRICULUM

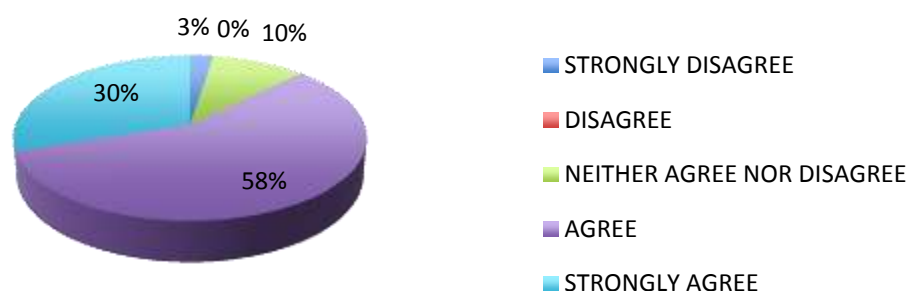


FIG. 38. I WOULD LIKE THE COURSES/WORKSHOPS WERE ACCREDITED AND INCLUDED IN MY PROFESSIONAL PORTFOLIO/CURRICULUM.

MY EXPECTATIONS TOWARDS THE TRAINING ARE... TO INCREASE MY THEORETICAL KNOWLEDGE ON A HEALTHY DIET

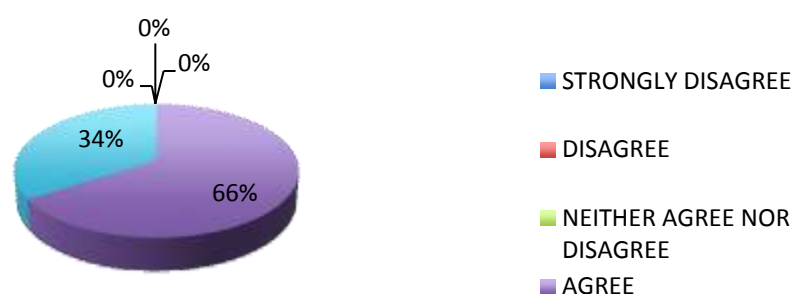


FIG. 39.1 MY EXPECTATIONS TOWARDS THE TRAINING ARE... TO INCREASE MY THEORETICAL KNOWLEDGE ON A HEALTHY DIET.

MY EXPECTATIONS TOWARDS THE TRAINING ARE... TO FIND OUT THE DIETARY PROBLEMS OF CHILDREN AND ADOLESCENTS

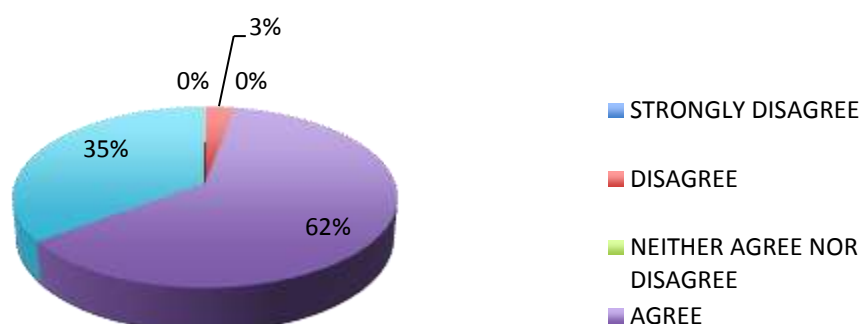


FIG. 39.2 MY EXPECTATIONS TOWARDS THIS TRAINING ARE... TO FIND OUT THE DIETARY PROBLEMS OF CHILDREN AND ADOLESCENTS.

MY EXPECTATIONS TOWARDS THE TRAINING ARE... TO OBTAIN THE SKILLS AND TOOLS TO CONDUCT LESSONS

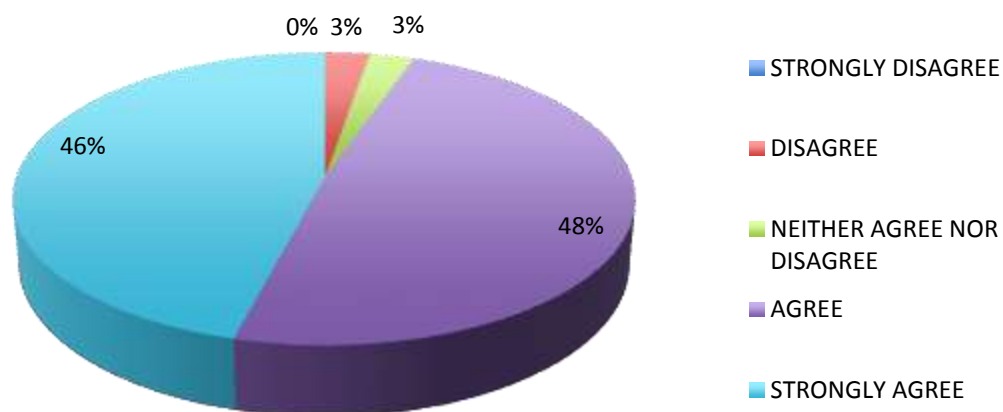


FIG. 39.3 MY EXPECTATIONS TOWARDS THIS TRAINING ARE... TO OBTAIN THE SKILLS AD TOOLS TO CONDUCT LESSONS.

MY EXPECTATIONS TOWARDS THE TRAINING ARE... TO BE MORE CONFIDENT ABOUT MY KNOWLEDGE WHEN TALKING TO CHILDREN AND PARENTS

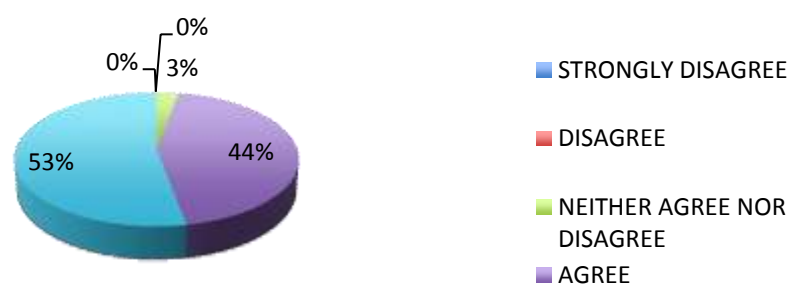


FIG. 39.4. MY EXPECTATIONS TOWARDS THIS TRAINING ARE... TO BE MORE CONFIDENT ABOUT MY KNOWLEDGE WHEN TALKING TO CHILDREN AND PARENTS.

**MY EXPECTATIONS TOWARDS THE TRAINING ARE... TO
OBTAIN PRINCIPAL KNOWLEDGE THAT COULD BE USED IN
RELATION TO MYSELF/MY LOVE DONES**

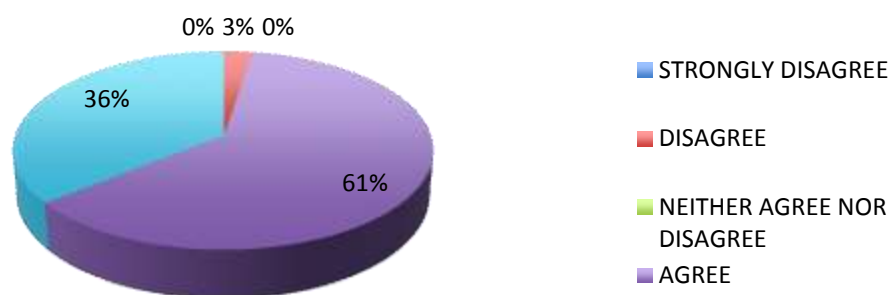


FIG. 39.5. MY EXPECTATIONS TOWARDS THIS TRAINING ARE... TO OBTAIN PRINCIPAL KNOWLEDGES THAT COULD BE USED IN RELATION TO MYSELF/MY LOVED ONES.

ANSWERS ON LIKERT SCALE

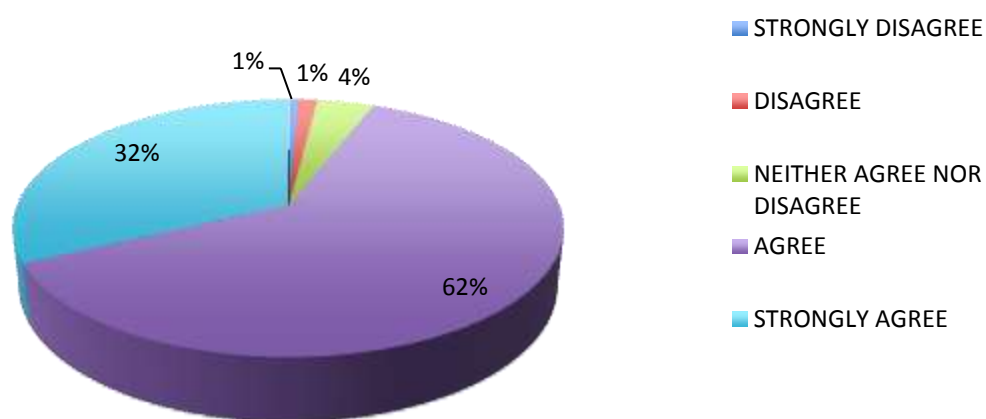


FIG. 40. RESULTS OF ALL THE QUESTIONS WITH LIKERT SCALE OPTIONS IN PART IV.

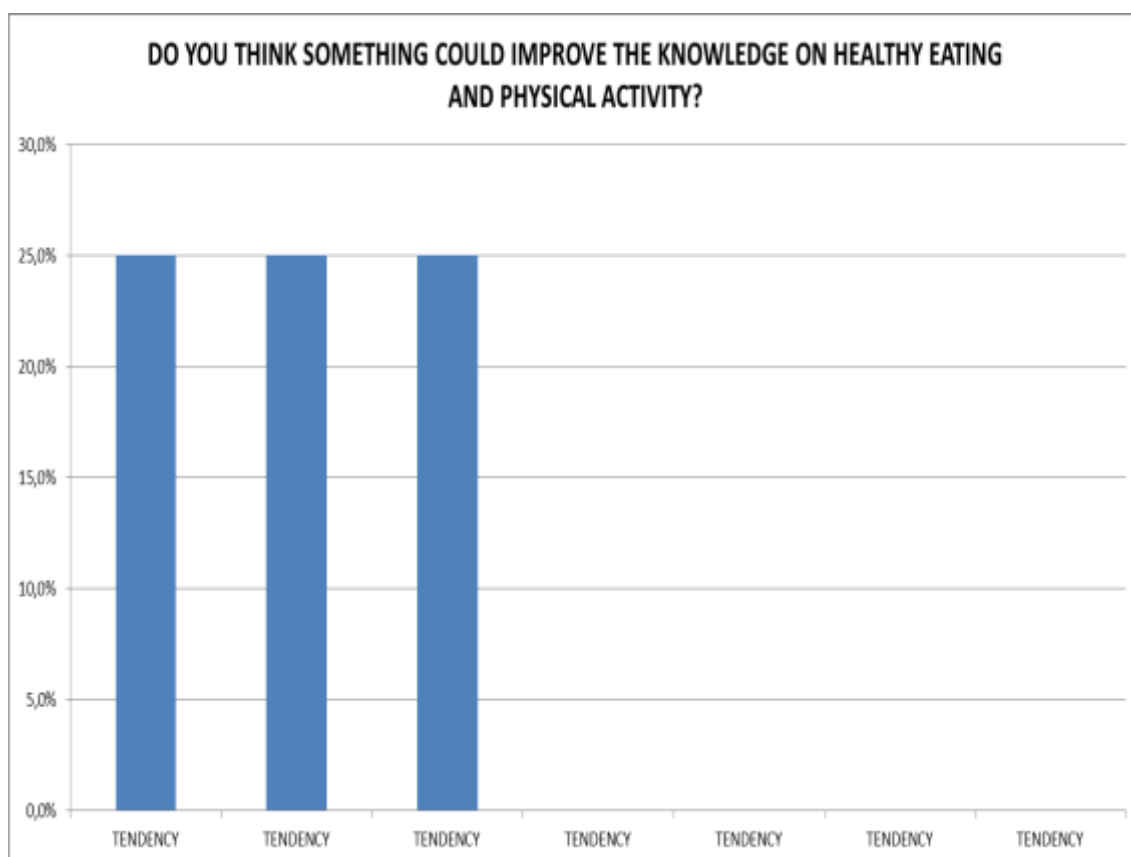


FIG. 41. DO YOU THINK SOMETHING COULD IMPROVE KNOWLEDGE ON HEALTHY EATING AND PHYSICAL ACTIVITY?

ANNEX 1.

WISE TEACHER-HEALTHY CHILD (WITH.CH). INSTRUCTIONS TO DELIVER THE QUESTIONNAIRES.

1 - The choice of context for administering the questionnaire should be very careful providing the place, date and time of the survey to all participants. It will also seek an appropriate atmosphere. Who responds to a survey should focus on the questions and be relaxed.

2 - We recommend to conduct the survey self-administered in a group. Its great advantage is the high response rate at low cost, with the additional possibility that the person delivering the survey may be available for any clarification needed.

3 - One or more supervisors should be present to verify that the questionnaires are correctly applied. The supervisor must be meticulous, interested in people, honest, have an average cultural level , general training on research, be kind and generating confidence in the participant .

4 - Questionnaires should be a number higher than necessary in case any of them are invalid.

5 - The person or persons who supervise the conduct of the survey should know how important is his/her speech to motivate the participants, indicating the importance of their opinions to the research team in order to know what can be improved in healthy eating and physical activity education.

6 - The person administering the questionnaires should remind the participants that participation is voluntary, the information they provide will be treated confidentially, that the information they provide is protected by law, they are guaranteed anonymity and the data they provide is used exclusively for this specific survey.

7 - The supervisor should read the instructions aloud to the whole group and each subject individually answer the questionnaire.

8 - The questionnaire will be hand delivered to the participant by one of the supervisors. The supervisor should be familiar with the contents of the questionnaire to solve possible doubts of the respondent.

9 - The questionnaire will be accompanied by an information document signed by the head of the research team.

10 - The questionnaire should carry identification number for easy recall and control of non-response bias.

11- The person or persons who supervise the implementation of the survey will fill in a control sheet for registration and control of the factors which influence the potential non-response bias.

12- Sections included in the questionnaire:

PART I. Teacher's knowledge about healthy lifestyle/diet.

PART II. The problem of obesity and metabolic diseases in civilization.

PART III. Promoting a healthy lifestyle.

PART IV. Teacher's expectations towards the Project.

PART V. General information.

13- Inclusion criteria of the population surveyed:

Educational institution: - Public
 - Private

Educational level: - Nursery
 - Primary
 - Secondary
 - High

ANNEX 2.**QUESTIONNAIRE**

Dear Teacher,

We appreciate your participation in the Project Wise Teacher-Healthy Child (WITH.CH) on healthy eating habits and physical activity in the school , which is currently taking place in six countries of the European environment . For this study we need your help .

We would like to know some aspects related to your views about healthy eating and physical activity, as well as food consumed and the physical activity the students perform in your school. Therefore, we should be very grateful if you could answer the following questions in this short questionnaire.

Like the rest of the survey data, your responses will remain confidential and it will not be possible to identify any particular individual or school in reports issued in regard to the project.

Please answer all questions as fully as possible and in the most sincere way.

Once completed , please give the questionnaire to your contact in the research team that has delivered it.

Thank you very much for you attention.

With regards,

The research team.

HOW TO COMPLETE THE QUESTIONNAIRE.

Before answering the questionnaire please read through the questions and response options.

To answer one must check a box (☒). Example:

3. Do you like to eat chocolate?

Strongly disagree	1
Disagree	<input checked="" type="checkbox"/>
Neither agree nor disagree	3
Agree	4
Strongly agree	5

When questions so indicate, you can check several options.

Part I.

1. We often hear people talking about the importance of eating a healthy diet. What do you think "eating a healthy diet" involves? (Multiple answers are possible).

Eat a variety of different foods/balanced diet.	1
Avoid/do not eat too much fatty food.	2
Avoid/do not eat too much sugary food.	3
Avoid/do not eat too much salt.	4
Eat more fruit and vegetables.	5
Eat less fruit and vegetables.	6
Eat more bread, rice, pasta and other carbohydrates.	7
Eat less bread, rice, pasta and other carbohydrates.	8
Eat more meat and less fish	9
Eat more fish and less meat	10
Do not eat too many calories.	11
Avoid/do not eat food containing additives.	12
Eat organic food.	13
Other.	14

2. What I eat is important to me.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

3. Having a healthy lifestyle is important to me.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

4. Point the basic principles of healthy eating for children. (Multiple answers are possible).

Preferential consumption of fruits, vegetables, cereals (especially bread), legumes, fish and olive oil as the principal fat source	1
Low consumption of meat and meat products	2
Dairy products (preferably low-fat, skimmed milk, fermented milk)	3
Drink water (preferably to sugary drinks or soft drinks)	4

5. I know the dietary habits of my students.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

6. Do the children/teenagers eat lunch in your kindergarten/school?

Yes	1
No	2

7. What percentage of students regularly use the dinning room?

Less than 25%	1
25-50%	2
51-75%	3
76-100%	4
Don't know/Don't sure	5

8. What kind of service they offer in the dining room?

Their own kitchen	1
Catering, supplied raw and cooked there	2
Catering hot chain	3
Catering cold chain	4

9. I think I have a good knowledge of the principles of good nutrition.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

10. Where did you acquire knowledge of the principles of good nutrition?

Tradition (home/eating habits in my country)	1
College/University	2
Mass media (TV, Internet, Newspapers)	3
Courses/Projects/Trainings	4

Part II.

11. I have noticed the problem of obesity among the children/adolescents that I teach.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

12. I have noticed the increase of obesity in children at my school in recent years.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

13. I am familiar with eating disorders (anorexia/obesity) and metabolic diseases (diabetes).

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

14. I am able to recognize the signs of an eating disorder. Excessive weight loss, desire to thinning, performing continued excessive exercise, progressive isolation and loss of social ties, mood disturbances prone to depression and anxiety, low self-esteem, overweight, sedentary lifestyle, being very thirsty, feeling hungry, feeling tired or fatigued, have blurred vision,

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

Part III.

15. My workplace provides activities for children that promote a healthy lifestyle. Lessons, all-year-long own programs, national programs, events, workshops,.....

Yes	1
No	2
Don't know/Not sure	3

16. My workplace provides activities for parents that promote a healthy lifestyle. Discussions, workshops,

Yes	1
No	2
Don't know/Not sure	3

17. I feel the need to include activities of health promotion for children and parents.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

18. I think that children and teenagers are physically active.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

19. How many hours a week on average do students perform sport activities in school time?

1-2 hours a week	1
2-3 hours a week	2
3-4 hours a week	3
5 hours a week	4
More than 5 hours a week	5
None	6

20. How many hours a week on average do students perform sport activities out of school time?

1-2 hours a week	1
2-3 hours a week	2
3-4 hours a week	3
5 hours a week	4
More than 5 hours a week	5
None	6

Part. IV.

21. I feel the need to attend courses/workshops on healthy eating.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

22. Are there currently in your country any offers of courses aimed at teachers about a healthy diet/healthy lifestyle?

Yes	1
No	2
Don't know/Don't sure	3

23. The offers of courses aimed at teachers about a healthy diet/healthy lifestyle are?

Free	1
Paid	2
Don't know/Don't sure	3

24. I would be willing to participate in such a course, if I had the opportunity.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

25. I would like the courses/workshops were accredited and included in my profesional portfolio/curriculum.

Strongly disagree	1
Disagree	2
Neither agree nor disagree	3
Agree	4
Strongly agree	5

26. My expectations towards the training are..... (You can select multiple answers).

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
.....to increase my theoretical knowledge on a healthy diet	1	2	3	4	5
.....to find out the dietary problems of children and adolescents	1	2	3	4	5
.....to obtain the skills and tools to conduct lessons	1	2	3	4	5
.....to be more confident about my knowledge when talking to children and parents	1	2	3	4	5
.....to obtain principal knowledge that could be used in relation to myself/my loved ones	1	2	3	4	5

Part V.

27. Gender.

Male	1
Female	2

28. Date of birth.

--	--	--

29. Marital status.

Married or living with partner	1
Single	2
Divorced	3
Widow/Widower	4

30. Country of birth.

--

31. Your partner's country of birth. (If applicable).

--

32. Type of educational institution.

Public	1
Private	2

33. Education level in which you teach.

Nursery	1
Primary	2
Secondary	3
High	4

34. Age of the children you teach.

0-6	1
7-12	2
13-18	3

35. Place of residence.

Rural	1
Town (up to 10k residents)	2
City (10-50k residents)	3
A large metropolitan area (>50k residents)	4

36. Country.

Poland	1
UK	2
Spain	3
Italy	4
Rumania	5
Turkey	6

37. Do you think something could improve knowledge on healthy eating and physical activity? If so, please explain briefly.

The questionnaire has finished.

THANK YOU VERY MUCH FOR YOUR TIME.

ANNEX 3.

WISE TEACHER HEALTHY CHILD (WITH.CH).

Request for the participation in a research project.

The research project in progress at (name of institution) is designed to provide teachers with knowledge and practical competencies in the field of dietetics, healthy nutrition and active lifestyle, to present different variations of balanced diets and to introduce simple sport activities. It intends to deliver various workshops for teachers in order to promote the importance of leading a healthy lifestyle, to explain the results of overfeeding, to support teachers with training and practical solutions related to active involvement in daily activities and nutrition, especially in understanding and respecting new methods and others views.

This is a European project carried on in several Countries (Poland, Italy, Turkey, Romania, England and Spain).

What does it mean to participate?

By participating in this research, you will be delivered a questionnaire addressing several topics related to your knowledge about healthy diet and healthy living habits. You will also be asked about your physical activity and the perception of a healthy diet.

There could not be immediate benefits for you to participate. However, we intend to produce practical workshops and thematic courses, which you could participate in case you were interested.

Data and privacy.

Reporting of results will be done so that no data will be traceable to any individual. Research Principal and responsible for personal information is (name of responsible person).

All data collected is encoded so that your name or your person cannot be detected when the results are published scientifically.

Questionnaires held by the participating researchers in their encoded computers requires password to open. It is partly (name of the person) at (name of institution) who is also your contact person at the address below. Prints are stored in a locked filing cabinet. This also applies to the form of consent that you fill out before you join the project. The documents are stored until the results are published, after which the material is destroyed in a shredder.

The result.

The results of the study will be published in the form of reports in Italian, Spanish, Polish, Turkish, Romanian and English, and scientific articles.

Voluntariness.

To participate in the study is completely voluntary and you can cancel your participation at any time without giving any reason and without any effect on your relation with (name of institution). The project will cover all expenses for your participation in the project i.e. travel and other expenses.

How do I apply?

If you are interested in participating, you may fill in a form of consent. Don't hesitate to contact us and ask questions. See contact persons below.

Contacts for the project are:

(Place and date)

Signature of the research person

Consent for participation in the research study.

Hereby I agree to participate in the study:

" Wise Teacher Healthy Child (WITH.CH)."

I am fully aware that:

- Participation is voluntary and that I may at any time terminate my participation whenever I find this desirable.
- I authorize the processing of personal data as described in the information I received about the project.
- The study has undergone ethical review and follow ethical requirements according to national legislations.
- The result cannot be attached to my person.
- The material will be stored in a locked archive at NAME OF INSTITUTION.

Contacts for the project are:

(Name. phone number, email).

(Name, phone number, email).

Signature of the research person.

Signature of the participant in the project.

ANNEX 4.

CONTROL SHEET.

Date	
-------------	--

Supervisor	
Supervisor	
Supervisor	
Supervisor	

Place

CONTROL SHEET.

RESPONDENTS:

Name	Place of work	Telephone	CODE N:	Comments

ANNEX 5.

MANAGEMENT GUIDE WITH.CH. DATABASE.

1. The data base is divided into 5 parts (" PART I-V ") as is the questionnaire (see tabs at the bottom of the screen).
2. At the top of the screen questions are listed. By placing the cursor over each of them you can see the corresponding label at responses.
3. In the PARTS I and V the "A" column is completed with the value " 1" for each participant in order to count the total respondents .
4. The " SUBJECT " column consists of 40 cells, numbered from 2 to 41, so that there is enough to note the number of respondents who recruits each partner of the project (20-40). The order number is growing .
5. The annotation of all answers, that are coded with a numeric value, are recorded with that value.
6. The question " AGE OF BIRTH " is expressed as follows : " day / month / year " and the program will automatically calculate the age .
7. The " COUNTRY OF BIRTH " and " COUNTRY OF BIRTH OF YOUR PARTNER " questions are coded according to Sub-annex A .
8. Question number 26 "MY EXPECTATIONS FOR THIS TRAINING IS ..." was divided into 26.1, 26.2, 26.3, 26.4 and 26.5 as possible responses and degrees of agreement or disagreement expressed in the questionnaire.
9. In the free response question "DO YOU THINK SOMETHING COULD IMPROVE KNOWLEDGE ON HEALTHY FOOD AND PHYSICAL ACTIVITY ? " Responses are grouped according to their tendency, giving a numerical value of 1-7 in each group. Questions that can not be grouped in a trend will be considered to be in a group of its own with its corresponding numerical value. The coding is entered in the question tag and replaces the name " TREND " with its own name. Likewise it will be replaced in the computation under the "O" column and in the calculation table.
10. At the bottom of the columns are the summations that indicate how many times each answer was selected.
11. The calculation in tables and graphs contained at the bottom of each part will automatically be according the values of each response are introduced. Calculation tables are numbered to indicate which question is being referred to.

12. An independent calculation, of the question N.1 (PARTE I) “EATING A HEALTHY DIET” is added. This calculation is intended to meet the real knowledge of the issue by the respondents. To do it the responses are grouped according to their relation (Sub-annex B):

- HEALTHY DIET
- UNHEALTHY DIET
- OTHER

The calculation is represented in their corresponding table and two graphics, one of this where the “Percentage of the possible responses on EATING A HEALTHY DIET” is represented and the other one is the “Teachers knowledge on EATING HEALTHY DIET” of the respondents.

13. An independent calculation, of the question N.4 (PARTE I) “BASIC PRINCIPLES OF HEALTHY DIET FOR CHILDREN” is added. This calculation is intended to meet the real knowledge of the issue by the respondents. The calculation is represented in their corresponding table and two graphics, one of this where the “Percentage of the possible responses on BASIC PRINCIPLES OF HEALTHY DIET FOR CHILDREN” is represented and the other one is the “Teachers knowledge on BASIC PRINCIPLES OF HEALTHY DIET FOR CHILDREN” of the respondents.

Sub-annex A.

PLACE OF BIRTH.

Western Europe: 1

Germany , Andorra , Austria , Belgium , Vatican City , Croatia , Denmark , Slovenia , Spain , Finland , France , Netherlands , Ireland , Iceland , Italy , Liechtenstein , Luxembourg , Malta , Monaco , Norway , Portugal , United Kingdom , San Marino ; Sweden , Switzerland.

Eastern Europe : 2

Belarus , Bulgaria , Slovakia , Georgia , Hungary , Moldova , Poland , Czech Republic , Romania , Russia , Serbia , Ukraine.

Maghreb – Saharan Africa : 3

Algeria , Egypt , Libya , Morocco , Mauritania , Tunisia.

Rest of Africa or sub-Saharan Africa : 4

Angola , Benin , Botswana , Burkina Faso , Burundi , Cape Verde , Cameroon , Ivory Coast , Chad , Eritrea , Ethiopia , Gabon , Gambia , Ghana , Guinea , Equatorial Guinea , Guinea- Bissau , Comoros , Seichelles Islands , Kenya , Lesotho , Liberia , Madagascar , Malawi , Mali , Mauritius , Mozambique , Namibia , Niger , Nigeria , Central African Republic , Republic of Congo , Democratic Republic of the Congo , Rwanda , Sao Tome and Principe , Senegal , Sierra Leone , Somalia , Swaziland , South Africa , Sudan , Tanzania , Togo , Uganda , Djibouti , Zambia , Zimbabwe .

Asia : 5

Afghanistan , Saudi Arabia , Armenia , Azerbaijan , Bahrain , Bangladesh , Burma , Brunei , Bhutan , Cambodia , Ceylon , North Korea , South Korea , China , United Arab Emirates , Philippines , Georgia ,

India , Indonesia, Iran , Iraq , Israel , Japan , Jordan, Kazakhstan , Kyrgyzstan , Kuwait , Laos , Lebanon , Malaysia, Maldives , Mongolia , Nepal, Oman , Pakistan , Qatar , Russia , Singapore, Syria, Thailand , Taiwan, Tajikistan , East Timor; Turqmenistán , Turkey , Uzbekistan ; Vietnam Yemen.

Latin America : 6

Antigua and Barbuda , Bahamas , Barbados, Belize , Bolivia, Brazil , Colombia , Costa Rica , Chile , Cuba , Dominica , Ecuador , El Salvador , Granada , Guatemala , Guyana, Haiti, Honduras , Jamaica , Mexico , Nicaragua , Panama , Paraguay ; Peru , Puerto Rico , Republic of Argentina , Dominican Republic , St. Kitts and Nevis , Saint Vincent and the Grenadines , St. Lucia , Suriname, Trinidad and Tobago , Uruguay , Venezuela .

America : 7

Canada, the United States.

Oceania : 8

Federated States of Micronesia , Fiji , Marshall Islands , Solomon Islands , Kiribati , Nauru , New Zealand , Palau , Papua New Guinea , Samoa , Tonga , Tuvalu , Vanuatu.

Sun-annex B.

Healthy Diet:

Eat a variety of different foods/balanced diet
Avoid/do not eat too much fatty food
Avoid/do not eat too much sugary food
Avoid/do not eat too much salt
Eat more fruit and vegetables
Eat more bread, rice, pasta and other carbohydrates
Eat more fish and less meat
Do not eat too many calories
Avoid/do not food containing additives
Eat organic food

Unhealthy Diet:

Eat less fruit and vegetables
Eat less bread, rice, pasta and other carbohydrates
Eat more meat and less fish

Other.