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**A QUALITATIVE STUDY ON
DIETARY AND EXERCISE PRACTICES OF
PEOPLE IN HONG KONG**

Main Report

Commissioned by

**Central Health Education Unit
Department of Health**



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Executive Summary

Introduction

Background

The Department of Health (DH) has a leading role in providing health education to the general public for promoting healthy lifestyle. In light of this, the DH has commissioned the Social Sciences Research Centre (SSRC) to conduct a qualitative study to examine the dietary and exercise practices of people in Hong Kong as healthy eating and engaging in sufficient exercise are two important components of healthy lifestyle. The objectives of this study are:

- a) to examine people of different age groups their knowledge of and attitudes towards having a healthy diet and doing sufficient exercise;
- b) to understand the dietary and exercise practices among different age groups;
- c) to identify the perceived barriers, enabling factors and motivators of healthy dietary and exercises practices of people of different age groups; and
- d) to examine public awareness of related health information and their perception of effective delivery channels for related health messages.

Research Methodology

This fieldwork was conducted in October to November, 2004. There were 8 target groups for this study, namely parents of pre-primary school students, parents of primary school students, parents of secondary school students, primary school students, secondary school students, working males, working females and the elderly. Information on these target groups' eating and exercise practices were obtained through focus groups interviews. A total of 24 focus group interviews were conducted, 3 for each target group. There were at least 18 participants in each target group. They were recruited from kindergartens, primary schools, secondary schools, community centre, the university and the Telephone Survey Unit of the Social Sciences Research Centre.

Eight Chinese semi-structured interview guidelines and demographic questionnaires were designed to collect the information. The focus group interviews were conducted in Cantonese and each interview lasted for about 1.5 hours. All of the interviews were audio-taped and transcribed, with 30% of the transcribed discussions double-checked by an independent team of SSRC staff who had not participated in the transcription work.

Descriptive Results

Demographic Information of Participants in Each Target Group

Table 1 is a summary of each target group participants' demographic information.

Table 1 Summary of participants' demographic information in each target group

Group no.	Target groups	Percentage of female participants	Age range of participants	Education level of participants	Classes of index child* / students [^]
1	Parents of pre-primary school students	92%	28-57	58% secondary level	K1-K3*
2	Parents of primary school students	100%	32-64	77% secondary level	P1-P6*
3	Parents of secondary school students	95%	33-55	71% secondary level	F1-F5*
4	Primary school students	61%	6-11	N/A	P2-P6 [^]
5	Secondary school students	70%	11-16	N/A	F1-F3 [^]
6	Working males	N/A	24-53	68% tertiary or above	N/A
7	Working females	100%	23-58	55% tertiary or above	N/A
8	Elderly	82%	66-84	All primary or below	N/A

Dietary and Exercise Information of Participants in Each Target Group

Table 2 summarises the dietary and exercise information of different target groups participants.

Table 2 Summary of participants' dietary and exercise information in each target group

Group no.	≥ 2 serv. of fruits	≥ 3 serv. of vegetables	Usual snack consumption ≥ 1 time daily	3 regular meals daily	Breakfast daily	Home prepared lunch	Weekly 20-minute exercise ≥ 3 times
1	25%	8%	70%	91%	82%	46%	37%
2	13%	4%	43%	71%	43%	50%	13%
3	14%	9%	58%	72%	47%	24%	15%
4	31%	26%	56%	69%	57%	36%	61%
5	20%	10%	75%	40%	25%	10%	16%
6	27%	5%	64%	50%	64%	36%	27%
7	17%	11%	28%	71%	89%	50%	17%
8	41%	18%	12%	59%	88%	76%	27%

Findings from the Focus Groups

Dietary Practices, Exercise Practices and Health Information

Target groups of parents

Parents generally had knowledge about healthy dietary practices. Teaching of healthy dietary practices usually took place during meals, food shopping time and T.V. time. Bread, rice, noodles, milk and soymilk were common breakfast selections for students. Lunch and dinner usually contained rice, noodles, meat, vegetables, egg, etc. Pre-primary and primary schools students who attended half-day school were likely to have lunch at home. Secondary school students were more likely to take school lunches or eat outside. For this reason, secondary school students' dietary practices were seen as less healthy than younger children's. Many students had breakfast daily or at least most of the time. Small meals before dinner were common for almost all of the students.

Children's consumption of fruit was about 1/2 to 1 piece of medium-sized fruit daily and it was usually taken after dinner. Many of them were passive fruit consumers, with a higher consumption of fruit if someone served them. Preference was given to fruit and not vegetables, especially for pre-primary school students who disliked vegetables with hard stalks. In order to increase vegetables consumption and to tackle other food selection problems, parents would cut those foods in different shapes or chop them into tiny pieces and mix them with other food without children's notice. Persuasion, praises, incentives, punishment, teaching, parents being the role model, parents' control, cooperation with schools, peer influence, etc. were commonly used to induce proper eating behaviour. Parents suggested that healthy dietary practices should be part of the family practices and introduced to children at a young age since their control on children's diet and snack consumption decreases with children's age.

Parents' perception of sufficient amount of exercise ranged from 2 hours weekly to 15 minutes-1 hour daily. Common exercise included playing football, playing badminton, swimming, hiking, running, cycling, playing with other children, etc. and their exercise partners included parents, friends and classmates. Younger children would also do exercise with domestic helper. Parents would teach their child about the safety issues to avoid injuries. Parents of pre-primary school students believed that their child had enough exercise but only a few of the primary and secondary schools students' parents made that claim. Heavy school work, lack of time, lack of interest and lack of facilities, etc. were some of the hindrances for doing sufficient exercise. Laziness and spending too much time on computer were also barriers for secondary school students. Making exercise an enjoyable activity, parents' and schools' involvement, holding competitions, accessibility of facilities, having an exercise partner, rewarding children for doing exercise, less school work, etc. would increase children's participation in physical activity.

Parents received health messages from T.V., newspaper, magazines, pamphlets, milk formula companies, Maternal & Child Health Centres, schools, internet, etc. Children's sources of information included schools, parents, books, doctors, pamphlets, etc.

Perceived effective channels for delivering health messages would be T.V., schools, internet, advertisement on transportations, etc.

Target groups of students

Students learned about the food pyramid in schools but not all of them identified the different levels correctly. Primary school students had difficulty in distinguishing different categories of food. Some students wondered whether BBQ fried dough and potatoes were vegetables. Most primary school students and male secondary school students had 3 or more meals daily. However, many secondary school girls rarely took breakfast. A small meal before dinner was common among students. Bread and milk were regular breakfast selections. Lunch and dinner usually included rice, noodles, vegetables, meat, etc. Most of the secondary school students took school lunches or ate outside.

Fruit consumption for students varied from 1-2 pieces weekly to 2 pieces daily. Students had a higher preference for fruits than vegetables because fruits were tastier. Yet fruit consumption was passive. Some secondary school boys needed to be forced by parents in order to have some fruits. Most of the secondary school students preferred meat over vegetables and stated that they had poor dietary practices. Major hindrances were having no breakfast, consuming too much snacks, heavy school work, etc. On the contrary, many primary school students reported to have healthy dietary practices because they consumed more vegetables than meat. To improve or promote healthy dietary practices, students suggested that schools' and parents' involvement, encouragement and cooperation were important. Attractive packages of healthy food, selling healthy food in the tuck shop, using healthy school lunch providers and education through the mass media would help as well.

Most students stated that the optimal amount of exercise should be 1/2 to 1 hour daily. Students had knowledge of the benefits and precautions for doing exercise. Secondary school students also realised that the amount of exercise needed varied for different people. Apart from regular P.E. lessons, many primary school students and secondary school boys said they had sufficient exercise for the last 2 weeks. Common exercise for these students included running, swimming, hiking, cycling, playing badminton and ball games, etc. They usually exercised with parents, friends and schoolmates. A few primary students reported two interesting reasons for maintaining sufficient exercise were due to their good time management and good keeping of their timetable. Most of boys did exercise regularly. In comparison, only a few secondary school girls who had interest and fixed exercise partners did exercise regularly. Barriers for students to have sufficient exercise were demanding school work, no time for exercise, lack of interest in exercise, poor weather, no invitation from others, getting up late, etc. Parents' and schools' involvement, encouragement and promotions, rewards for doing exercise, arranging competitions, having an exercise partner and less school work, using creative dramas would increase students' participation in physical activity.

Both primary and secondary school students usually obtained health information from T.V., radio, internet, books, magazines, teachers, schools and parents. Secondary school

students also received health messages through health talks, the DH hotlines, advertisements and medical clinics. Effective delivery of health information should be done through the mass media, emails, health talks, APIs, etc. and be creative and funny to enhance recall of health messages. Some secondary school students considered the use of pamphlets as a waste of paper.

Target groups of working adults

Working adults had knowledge about healthy eating but working females seemed to have better knowledge of healthy diets and better dietary practices than working males. They suggested that the amount of food intake should depend on individual's age, gender, body type, etc. There were more females than males who had 3 regular meals daily and who preferred fruits and vegetables over meat. Working females were less likely to overeat and were more control of their diet. In comparison, many of the working males did not have breakfast daily and often overate. Many working adults did not have the practice of packing lunch to work because they found that the taste was not good after reheating or that it was too troublesome to do so. Some stated that eating out with other colleagues was a social function. For those who packed lunch to work, it was because there were not many restaurant selections nearby and it would be healthier. Saving money was also a reason for packing lunch to work. Working females considered that packing lunch allowed them to have more control on the food and serving size.

Working females generally preferred fruits over vegetables because of fruits' tastiness and naturalness. Fruit consumption was about 1 to 2 pieces daily for many of the female participants. Males' consumption of fruits was much lower because they were too tired, too lazy, or not interested in fruits. Higher fruit consumption was found for those working adults who had someone served them the fruits. Half of the females and very few males said that they had healthy dietary practices. Moreover, health consciousness, the threat of illnesses and family coordination were their reasons for eating healthily. Older males reported to have healthier practices than younger males. Major hindrances for many working participants to have healthy dietary practices were irregular working hours, heavy workload, business meals, temptation and tastiness of unhealthy food, snack consumption, eating outside frequently, etc. They would like to change their eating habits but stated that it would be very difficult to make the change. They believed that dietary practices could be influenced by people around, like family members, friends, colleagues, etc. Making healthy dietary practices a habit, making healthy food, vegetables and fruits more easily accessible, family education and coordination, reference to a sick friend's experience, Government's promotion, etc. were seen as ways to promote healthy eating.

For the working groups, they believed that doing exercise for 15-30 minutes daily to 3 times weekly should be sufficient for a normal adult. Doing warm-ups, no overeating, paying attention to one's condition and limits, etc. were reported as important precautions for doing exercise safely. Doing exercise alone was more common among the working groups as gathering people to meet up after work could be difficult. Older males tended to have better exercise practices than younger males. They were more likely to exercise regularly. Some common exercise among those who said they had maintained sufficient

exercise included walking, climbing stairs, getting off at earlier stations, playing badminton, playing squash, cycling, jogging, hiking, etc. They were able to exercise regularly because it had become a habit and a health investment for them. They also set goals for themselves. Fear of getting fat and proximity of facilities were other enabling factors reported by the working females. Other working adults who claimed themselves as not having good exercise practices said that they had no interest in exercise or that they were too busy or tired to do exercise because of heavy workload. Some said that unavailability of public facilities also hindered them for doing exercise. Working adults believed that other people's negative comments, employers' offering incentives for doing exercise, desire to be healthier and stronger, friends' cooperation, etc. would increase people's participation in physical activity.

Working adults usually obtained health information through the mass media, internet and friends. Working males also received health-related messages from the DH and Hospital Authority whilst working females stated that they obtained health messages from MTR stations, special topics on T.V., doctors, health talks, etc. Some working females considered that there were insufficient health-related programmes on T.V. They suggested that the Government should broadcast health-related shows and APIs more frequently in order to increase people's awareness on healthy eating and doing sufficient exercise. They also suggested that contents of pamphlets and talks should be target-specific. In general, working adults considered putting up posters in offices, internet and the mass media as effective channels for disseminating health messages.

The elderly

The elderly were aware that healthy eating would lead to better health and they had knowledge about healthy dietary practices. Most of the elderly had 3 regular meals daily and they also took a small tea before dinner. Common breakfast selections included rice, noodles, oatmeal, milk, congee, leftover food from the previous night, etc. For lunch and dinner, diets usually included rice, meat, vegetables, fish and fruits. Most had at least one piece of fruit per day and fruits were preferred over meat and vegetables. However, they would not overeat fruits because of high sugar content in fruits. Many elderly were satisfied with their current dietary practices as they always ate at home and rarely consumed unhealthy foodstuff. Barriers for the elderly to have healthy dietary practices were overeating when eating out and having a preference for fried food, fatty meat and salted fish, etc. The elderly suggested that healthy dietary practices could be promoted through health talks, community centres, clinics, etc.

The elderly participants in the study had maintained good exercise practices in the last 2 weeks. The frequency of exercise ranged from once daily to 3 times a week. They usually did exercise alone in the morning unless they had enrolled in exercise classes. Common exercise for them included stretching, walking, stepping, cycling, doing housework, morning promenade, Tai Chi, etc. They were used to exercise regularly and as a result, their health was improved. They said that vigorous exercise was not suitable for them and they must consider their own ability when doing exercise. Half an hour to one hour of exercise per day should be sufficient. Barriers to doing exercise were having to take care of their family and being distracted by other people or things when

doing exercise at home.

The elderly received health information from T.V., newspapers, radio, health talks and community centres. They believed that these should be the most effective ways to deliver health messages to the elderly. Some said more health promotion should be targeted to the males because they believed that the males generally had poorer dietary and exercise practices.

Conclusion and Recommendations

Focus groups participants in this study had knowledge about healthy eating and the benefits of having good dietary practices. However, only 9 people out of all 171 participants had achieved the DH's recommended levels of consumption, at least 2 servings of fruits and 3 servings of vegetables per day. It was found that the dietary and exercise practices of younger children and the elderly were generally better than those of secondary school students and working adults. As eating healthily and doing sufficient exercise are two important factors of healthy lifestyles and development, effective delivery of health information and education programmes are needed to enhance people's proper dietary and exercise practices.

For the students, schools should select healthier school lunch providers and healthier snacks should be made available in tuck shops. Moreover, schools' promotion and encouragement are important to increase students' knowledge, awareness and practices as students spend one-third of their time in schools and teachers are often seen as role models. Family education and coordination are also significant in motivating students to develop good dietary and exercise practices. Parents should enrich their own knowledge to educate their children and live as their teaching. As students attending the afternoon session are difficult to do exercise after school, community centres could arrange activity classes in the morning to cater those students' needs.

Great demand from work is the major barrier to healthy eating and doing sufficient exercise for the working groups. To promote good practices among the working adults, employers can offer incentives, arrange activities, do more promotion, make health pamphlets available and make healthy lifestyles as part of their companies' culture to enable their employees to engage in healthy eating and exercise. Some light exercise after lunch, like going for a walk, can be introduced to the employees. Making recreation centres and facilities more available and accessible to the public can increase people's participation in physical activities.

The mass media is a good channel to publicise and disseminate health information to all levels of people in Hong Kong. The health information should be creative for students. For the elderly, promotion campaigns and health talks should be carried out in community centres and local clinics as the elderly rarely go far from their community. Snack consumption is common among all groups of people, except for the elderly. The Government can advertise and educate the public to control snack consumption and introduce healthier snacks selections.

Chapter 1 Introduction

Background

The Department of Health has a leading role in providing health education to the general public in Hong Kong. It gives expert advice, arranges workshops, implements evidence-based health promotions programmes, etc. to achieve desired health goals. Healthy eating and engaging in sufficient exercise are two important components of healthy lifestyle. In order to develop effective interventions for promoting healthy lifestyle, the Department of Health has commissioned the Social Sciences Research Centre (SSRC) of the University of Hong Kong to conduct a qualitative study to examine people's dietary and exercise practices in Hong Kong.

This study aims to explore and assess the knowledge, attitudes, practices, perceived barriers, and enabling factors of healthy eating and exercise among different age groups in Hong Kong. The information collected from this study will be used to develop appropriate interventions and programmes for promoting healthy dietary and exercise practices for people of different age groups. Channels for obtaining health information and their perceived effectiveness are also examined. The objectives of this study are:

- a) to examine people of different age groups on their knowledge of and attitudes towards having a healthy diet and doing sufficient exercise;
- b) to understand the dietary and exercise practices among different age groups;
- c) to identify the perceived barriers, enabling factors and motivators of healthy dietary and exercise practices of people of different age groups; and
- d) to examine public awareness of related health information and their perception of effective delivery channels for related health messages.

Research Methodology

Research Method

Focus group interviews were used to obtain information on the target populations' knowledge, practices, barriers, and motivating factors of healthy eating and physical activity.

There were 8 target groups for this study. For each target group, 3 focus group interviews were conducted. A total of 24 focus group interviews were completed. The focus group interviews were conducted in Cantonese and each interview lasted about 1.5 hours. All of the focus group interviews were audio-taped.

Target Group Composition and Recruitment

The 8 target groups of this study included parents of pre-primary school students, primary school students, parents of primary school students, secondary school students, parents of secondary school students, working females, working males and the elderly. The areas of focus for the parent groups were on their child instead of the parents themselves.

There were at least 18 participants for each target group. They were recruited in several ways according to selection criteria approved by the Department of Health. Students and parents were recruited from kindergartens, primary schools, secondary schools, community centre and university. Working females and males were recruited from respondents of the Telephone Survey Unit of the Social Sciences Research Centre. The elderly were recruited with the cooperation of a community centre.

Instruments for Data Collection

Eight Chinese semi-structured interview guidelines and demographic questionnaires, one for each target group, were designed for this study. All the interview guidelines covered the following areas:

- a) Participants' knowledge of a healthy diet, the benefits of maintaining a healthy and balanced diet, and the consequences of an unhealthy diet;
- b) Participants' attitudes towards healthy eating, including their perceived ability, barriers, enabling factors and motivators of maintaining a healthy diet, and the perceived need to improve or change their current eating habit;
- c) Participants' dietary habits within 3 days before the focus group interview;
- d) Participants' knowledge of the benefits of doing sufficient exercise, the consequences of doing insufficient exercise, the amount of exercise necessary to maintain good health, and the precautions for doing exercise;
- e) Participants' attitudes towards physical activity, including their perceived ability, barriers, enabling factors and motivators of doing sufficient exercise, and the perceived need to improve or change their physical activity levels or habits;
- f) Participants' exercise habits within 2 weeks before the focus group interview; and
- g) Channels where participants obtain health information and messages, and which participants perceive as most effective.

The demographic questionnaires included questions on age, gender, occupation, lunch information, snack consumption, exercise information, etc. The demographic questionnaires, dietary practices questionnaire and interview guidelines are included in Appendices A, B, and C respectively.

Pilot Focus Group Interview

A pilot focus group interview was conducted with secondary school students to pre-test the above scope of the interview guideline and the demographic questionnaire and to identify any difficulties participants might have during the discussion. Students from a secondary school in Chai Wan participated in the pilot interview. There were 7 students in the group, ranging from Form 1 to Form 5. The group consisted of 1 male and 6 females. The discussion finished in 90 minutes. Based on the findings from the pilot study, suggestions and amendments were made with the approval of the Department of Health, including changing or rewording some questions and refining the contents of the interview guideline, the demographic questionnaire, and the dietary practices questionnaire. The pilot interview was not counted as part of the main study.

Process

There were two SSRC staff conducting the focus groups. The facilitator was responsible for leading the discussion and monitoring the interactions between participants. The observer took field notes and provided support to the facilitator, including ensuring the audio equipment was working properly. For some of the focus groups, representatives from the Department of Health came to observe and check the quality and the flow of the focus groups.

All recorded discussions were transcribed and 30% of the transcribed discussions were rechecked by an independent team of the SSRC staff who did not participate in the transcription work to make sure that all the relevant information of the focus group discussions was included and transcribed properly. There were 6 staff who transcribed the discussions. One transcription from each of these staff was selected for rechecking. One more transcribed work was rechecked for the two staff who did more than 5 transcriptions.

Schedule for the Focus Groups

Table 1.1 shows the schedule for the 24 focus group interviews.

Table 1.1 Schedule for the focus groups

Target Groups		Group 1		Group 2		Group 3		Total no. of participants
		Date	Time	Date	Time	Date	Time	
1	Parents of pre-primary school students	Nov. 10, 2004	2:30 p.m.	Nov. 10, 2004	10:30 a.m.	Nov.10, 2004	2:30 p.m.	24
2	Parents of primary school students	Nov. 13, 2004	2:30 p.m.	Nov. 15, 2004	9:00 a.m.	Nov. 15, 2004	4:00 p.m.	23
3	Primary school students	Nov. 10, 2004	3:10 p.m.	Nov. 10, 2004	3:10 p.m.	Nov. 13, 2004	2:30 p.m.	23
4	Parents of secondary school students	Nov. 12, 2004	5:30 p.m.	Nov. 13, 2004	2:00 p.m.	Nov. 15, 2004	2:00 p.m.	21
5	Secondary school students	Nov. 15, 2004	4:15 p.m.	Nov. 15, 2004	4:15 p.m.	Nov. 19, 2004	4:30 p.m.	21
6	Working group (Female)	Oct. 26, 2004	7:00 p.m.	Nov. 6, 2004	2:00 p.m.	Nov. 11, 2004	7:00 p.m.	18
7	Working group (Male)	Oct. 26, 2004	7:00 p.m.	Nov. 6, 2004	7:00 p.m.	Nov. 11, 2004	7:00 p.m.	23
8	The elderly	Nov. 10, 2004	11:00 a.m.	Nov. 10, 2004	11:00 a.m.	Nov. 10, 2004	11:00 a.m.	18
Total participants:								171

Chapter 2 Descriptive Results

This chapter reports the descriptive findings for each target group. For three target groups, namely the groups of secondary school students, working males and elderly, the number of returned questionnaires was 1 less than the total number of participants because 1 participant from each of these groups left immediately after the discussion without completing the questionnaire. The statistics for these target groups were based solely on the information given in the returned questionnaires, which were self-reported by the participants.

Demographic Information

Part 1: Target Groups of Parents

Parents of Pre-Primary School Students

Twenty four parents completed the demographic questionnaire. Table 2.1 shows the background information on the parents of pre-primary school students and their index child. There were more mothers than fathers who participated in the focus group interviews. The ages of parents ranged from 28 to 57 years old (median 35). More than half of the parents (58.3%) were homemakers.

Most of the parents had a male index child. The ages of the index child ranged from 3 to 6, studying K1 to K3. There were slightly more children who had lunch provided by school than lunch prepared by home.

One-third of the pre-primary school students engaged in 20-minute aerobic exercise three times or more per week. More than half of the children had a medium level of physical energy output.

Table 2.1 Background information on the parents of pre-primary school students and their index child (n=24)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Gender of participants</u>			<u>Gender of the child</u>		
Male	2	8	Male	16	70
Female	22	92	Female	7	30
			(Missing)	(1)	
<u>Age of participants</u>			<u>Age of the child</u>		
26-30	5	21	3	5	21
31-35	7	29	4	6	25
36-40	7	29	5	10	42
41-45	4	17	6	3	12
46	1	4			

<u>Education level of participants</u>			<u>Class of the child</u>		
Primary or below	4	21	Kindergarten 1	7	29
Secondary	11	58	Kindergarten 2	7	29
Tertiary or above	4	21	Kindergarten 3	10	42
(Missing)	(5)				
<u>Occupation of participants</u>			<u>Lunch</u>		
Service workers & shop sales workers	1	5	Prepared by home	11	46
Self-employed	2	11	Provided by school	13	54
Homemakers	14	74			
Refuse to answer	2	10			
(Missing)	(5)				
<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	3	13	Minimal level	2	8
Once a week	5	21	Low level	8	34
Twice a week	7	29	Medium level	13	54
≥ Three times a week	9	37	High level	1	4

Parents of Primary School Students

All 23 parents were mothers, aged 32 to 64 years. Table 2.2 shows the background information on the parents of primary school students and their index child. About half of the parents were homemakers.

Half of the index children were boys. The ages of the index child ranged from 6 to 12, studying P1 to P6. Half of the children had home-prepared lunch. Only 13% of the children engaged in 20-minute aerobic exercise three times a week or more and slightly more than half of the children were thought to have a medium level of physical energy output.

Table 2.2 Background information on the parents of primary school students and their index child (n=23)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Gender of participants</u>			<u>Gender of the child</u>		
Female	23	100	Male	12	52
			Female	11	48
<u>Age of participants</u>			<u>Age of the child</u>		
31-35	6	26	6	2	9
36-40	5	22	7	4	17
41-45	8	35	8	3	13
46-50	3	13	9	4	18

≥51	1	4	10 11 12	6 3 1	26 13 4
<u>Education level of participants</u>			<u>Class of the child</u>		
Primary or below	2	9	Primary 1	1	4
Secondary	17	77	Primary 2	7	31
Tertiary or above	3	14	Primary 3	3	13
(Missing)	(1)		Primary 4	6	26
			Primary 5	2	9
			Primary 6	4	17
<u>Occupation of participants</u>			<u>Lunch</u>		
Managers & administrators	1	5	Prepared by home	11	50
Clerks	5	23	Prepared by school	10	45
Service workers & shop sales workers	1	4	Purchased from school tuck shop	1	5
Elementary occupations	1	5	(Missing)	(1)	
Skilled agricultural & fishery workers & occupation unclassifiable	1	4			
Self-employed	2	9			
Homemakers	11	50			
(Missing)	(1)				
<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	5	22	Minimal level	4	18
Once a week	4	17	Low level	5	23
Twice a week	11	48	Medium level	13	59
≥ Three times a week	3	13	(Missing)	(1)	

Parents of Secondary School Students

There were 1 father and 20 mothers in the group of secondary school students' parents. Table 2.3 shows the background information on the parents of secondary school students and their index child. The ages of parents ranged from 33 to 55 (median 45). 60% of the parents were homemakers.

Half of the index children were boys. The ages of the index child ranged from 13 to 17 and studying in F1 to F5. Less than a quarter of the index children had home-prepared lunch.

Only 15% of the children participated in 20-minute aerobic exercise three times a week or more and about half of the children only had a minimal level of physical energy output.

Table 2.3 Background information on the parents of secondary school students and their index child (n=21)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Gender of participants</u>			<u>Gender of the child</u>		
Male	1	5	Male	9	50
Female	20	95	Female (Missing)	9 (3)	50
<u>Age of participants</u>			<u>Age of the child</u>		
31-35	1	5	13	7	33
36-40	4	19	14	5	24
41-45	10	47	15	3	14
46-50	4	19	16	5	24
51-55	2	10	17	1	5
<u>Education level of participants</u>			<u>Class of the child</u>		
Primary or below	6	29	Form 1	2	10
Secondary	15	71	Form 2	9	43
			Form 3	5	24
			Form 4	2	9
			Form 5	3	14
<u>Occupation of participants</u>			<u>Lunch</u>		
Managers & administrators	1	5	Prepared by home	5	24
Clerks	4	19	Provided by school	4	19
Elementary occupations	3	14	Purchased from school tuck shop	6	28
Homemakers	13	62	Eating out	6	29
<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	10	50	Minimal level	10	48
Once a week			Low level	3	14
Twice a week	4	20	Medium level	7	33
≥ Three times a week	3	15	High level	1	5
(Missing)	(1)				

Part 2: Target Groups of Students

Primary School Students

There were 23 primary school students. Table 2.4 shows the background information on the primary school students. 61% of them were females. The ages of the children ranged from 6 to 11 and they were studying in classes from P2 to P6. Around one-third of them had home-prepared lunch.

A majority of the parents were in the working population (92% for fathers and 70% for mothers). 61% of the students engaged in 20-minute aerobic exercise 3 times or more a week. More than half of them had a medium level of physical energy output.

Table 2.4 Background information on the primary school students (n=23)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Gender of the child</u>			<u>Class of the child</u>		
Male	9	39	Primary 2	2	9
Female	14	61	Primary 4	2	9
			Primary 5	5	21
			Primary 6	14	61
<u>Age of the child</u>			<u>Lunch</u>		
6	1	4	Prepared by home	8	36
9	2	9	Prepared by school	10	46
10	5	22	Purchased from school tuck shop	4	18
11	14	61	(Missing)	(1)	
12	1	4			
<u>Occupation of father</u>			<u>Education level of father</u>		
Employed	19	83	Primary or below	1	4
Self-employed	2	9	Secondary	3	13
Others	2	8	Tertiary or above	7	31
			Not sure	12	52
<u>Occupation of mother</u>			<u>Education level of mother</u>		
Employed	15	65	Primary or below	2	9
Homemakers	5	22	Secondary	5	21
Self-employed	1	5	Tertiary or above	4	18
Others	2	8	Not sure	12	52
<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	2	9	Low level	3	13
Once a week	3	13	Medium level	13	57
Twice a week	4	17	High level	7	30
≥ Three times a week	14	61			

Secondary School Students

There were 21 secondary school students who participated in the discussion but only 20 students returned the demographic questionnaires. Quantitative results were based on these 20 students only. Table 2.5 shows the background information on the secondary school students.

70% of the participating students were females. The students ranged from 11 to 16 years old and all of them were studying in F1 to F3. Only 10% of them had lunch prepared at home.

16% of the secondary school students stated that they participated in aerobic exercise three times or more a week. More than 40% of them had a minimal physical energy output.

Table 2.5 Background information on the secondary school students (n=21, one did not return the demographic questionnaire)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Gender of the child</u>			<u>Class of the child</u>		
Male	6	30	Form 1	9	45
Female	14	70	Form 2	4	20
			Form 3	7	35
<u>Age of the child</u>			<u>Lunch</u>		
11	1	5	Prepared by home	2	10
12	8	40	Prepared by school	7	35
13	2	10	Purchased from school tuck shop	4	20
14	6	30	Eating out	7	35
15	1	5			
16	2	10			
<u>Occupation of father</u>			<u>Education level of father</u>		
Employed	18	90	Primary or below	6	30
Not sure	2	10	Secondary	11	55
			Not sure	3	15
<u>Occupation of mother</u>			<u>Education level of mother</u>		
Employed	11	55	Primary or below	4	20
Homemaker	7	35	Secondary	13	65
Not sure	2	10	Not sure	3	15
<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	8	42	Minimal level	8	42
Once a week	4	21	Low level	5	26
Twice a week	4	21	Medium level	4	21
≥ Three times a week	3	16	High level	2	11
(Missing)	(1)		(Missing)	(1)	

Part 3: Working Groups

Working Males

Of the 23 working males who participated in the discussions, 22 of them completed the questionnaires. Table 2.6 shows the background information on the working males.

The ages of participants ranged from 24 to 53 (median 28.5). 75% of the male participants were single and had no children. Two-thirds of the male participants had received tertiary education. Eating out for lunch was more common than packing lunch to work.

A quarter of the participants engaged in 20-minute aerobic exercise 3 times a week or more. More than two-thirds of participants had a minimal level of physical energy output.

Table 2.6 Background information on the working males (n=23, one did not return the demographic questionnaire)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Age of the participants</u>			<u>Marital status</u>		
21-25	2	9	Never married	17	77
26-30	12	54	Married	5	23
31-35	1	4			
36-40	1	5			
41-45	4	18			
46-50	1	5			
51-55	1	5			
<u>Education level of participants</u>			<u>Number of children</u>		
Secondary	7	32	0	17	77
Tertiary or above	15	68	1	2	9
			2	3	14
<u>Occupation of participants</u>			<u>Lunch practice</u>		
Managers & administrators	3	13	Prepared by home	8	36
Professionals	6	27	Eating out	14	64
Associate professionals	4	18			
Clerks	5	23			
Service workers & shop sales workers	1	5			
Craft & related workers	1	5			
Self-employed	2	9			

<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	8	37	Minimal level	15	68
Once a week	4	18	Low level	3	14
Twice a week	4	18	Medium level	4	18
≥ Three times a week	6	27			

Working Females

There were 18 participants in the group of working females. Table 2.7 shows the background information on the working females. The ages of participants ranged from 23 to 58 (median 30.5). Two-thirds of them were single. All 18 participants had received secondary level education. Half of the participants prepared lunch to work and the other half went out for lunch.

17 % of the participants engaged in 20-minute aerobic exercise 3 times a week or more. About two-thirds of participants' work required a minimal level of physical energy output.

Table 2.7 Background information on the working females (n=18)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Age</u>			<u>Marital status</u>		
21-25	2	12	Never married	11	61
26-30	7	42	Married	4	22
31-35	2	12	Others	3	17
36-40	2	12			
41-45	2	12			
≥46	2	2			
(Missing)	(1)				
<u>Education level</u>			<u>Number of children</u>		
Secondary	8	45	0	13	72
Tertiary or above	10	55	1	2	11
			2	1	6
			4	2	11
<u>Occupation</u>			<u>Lunch practice</u>		
Managers & administrators	3	17	Prepared by home	9	50
Professionals	2	11	Eating out	9	50
Associate professionals	3	17			
Clerks	5	28			
Service workers & shop sales workers	1	5			
Self-employed	3	17			
Refuse to answer	1	5			

<u>Engagement in 20-minute aerobic exercise</u>			<u>Usual physical energy output</u>		
< Once a week	10	55	Minimal level	11	65
Once a week			Low level	6	35
Twice a week	3	17	(Missing)	(1)	
≥ Three times a week	2	11			
	3	17			

Part 4: The Elderly

Eighteen elderly people were recruited from a community centre. As one participant left immediately after the discussion, there were 17 completed sets of questionnaires returned. Table 2.8 shows the background information on the elderly.

Female participants comprised 82% of this sample. The ages of participants ranged from 66 to 84. All participants had primary school level education or below. 71% were retired and the others were homemakers. 75% of the elderly had home prepared lunches.

About a quarter of the elderly engaged in 20-minute aerobic exercise 3 times or more a week. 60% said they usually had a medium level of physical energy output.

Table 2.8 Background information on the elderly (n=18, one did not return the demographic questionnaire)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Gender of participants</u>			<u>Marital status</u>		
Male	3	18	Never married	1	6
Female	14	82	Married	11	65
			Widowed	5	29
<u>Age of participants</u>			<u>Number of children</u>		
66-70	4	23	0	1	6
71-75	6	35	1	2	12
76-80	4	24	2	1	6
81-85	3	18	3	2	12
			4	3	17
			5	2	12
			6	3	17
			7	2	12
			12	1	6
<u>Occupation of participants</u>			<u>Education level of participants</u>		
Retired	12	71	Primary or below	17	100
Homemakers	5	29			

<u>Usual physical energy output</u>			<u>Engagement in 20-minute aerobic exercise</u>		
Minimal level	3	18	< Once a week	7	46
Low level	4	23	Once a week	4	27
Medium level	10	59	≥ Three times a week (Missing)	4 (2)	27
<u>Lunch practice</u>					
Prepared by home	13	76			
Eating out	1	6			
Prepared by home or eating out	3	18			

Dietary Information

Part 1: Target Groups of Parents

Parents of Pre-Primary School Students

Table 2.9 shows the information on dietary practices of pre-primary school students as reported by parents. Only 25% of children had at least 2 serving of fruits per day and 8% of children had at least 3 serving of vegetables per day. About two-thirds of parents said their child's consumption of fried food and sugary food was less than once a day.

91% of the children had 3 regular meals and 82% had breakfast daily.

Table 2.9 Information on dietary practices of pre-primary school students given by the parents (n=24)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u>			<u>Daily fruit juice consumption</u>		
< 1 serving	4	17	< 1 glass	17	71
1 serving	14	58	1 glass	4	17
≥ 2 servings	6	25	≥ 2 glasses	3	12
<u>Daily vegetable consumption</u>			<u>Daily vegetable juice consumption</u>		
< 1 serving	1	4	< 1 glass	16	67
1 serving	12	50	1 glass	5	21
2 servings	9	38	≥ 2 glasses	3	12
≥ 3 servings	2	8			
<u>Daily meat and egg consumption</u>			<u>Daily bean products consumption</u>		
1 to 2 tael	16	76	< Half a serving	7	33
3 to 4 tael	5	24	Half a serving	6	29
(Missing)	(3)		1 serving	4	19
			≥ 2 servings	4	19
			(Missing)	(3)	

<u>Daily dairy products consumption</u>			<u>Daily stir-/deep-fried food consumption</u>		
1 glass	17	81	< Once	14	67
≥ 2 glasses	4	19	Once	5	24
(Missing)	(3)		Twice	2	9
			(Missing)	(3)	
<u>Daily dessert/sugary food consumption</u>			<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u>		
< Once	13	62	3 regular meals	21	91
Once	7	33	1 to 2 meals at regular hours	2	9
Twice	1	5	(Missing)	(1)	
(Missing)	(3)				
<u>Daily snack consumption</u>			<u>Breakfast</u>		
< Once	7	30	No breakfast most of the time	2	9
Once	9	39	Take breakfast most of the time	2	9
≥ Twice	7	31	Take breakfast daily	19	82
(Missing)	(1)		(Missing)	(1)	

Parents of Primary School Students

Table 2.10 shows the information on dietary practices of primary school students as reported by parents. Only 13% of children had at least 2 servings of fruits per day and 4% of children had at least 3 servings of vegetables per day. More than 80% of the children had fried food less than once a day and more than two-thirds consumed sugary food less than once a day. About 60% of children had snacks less than once a day. More than 70% of primary school students had 3 regular meals per day and more than 80% of them took breakfast every day or at least most of the time.

Table 2.10 Information on dietary practices of primary school students given by the parents (n=23)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u>			<u>Daily fruit juice consumption</u>		
< 1 serving	6	26	< 1 glass	15	68
1 serving	14	61	1 glass	4	18
≥ 2 servings	3	13	≥ 2 glasses	3	14
			(Missing)	(1)	
<u>Daily vegetable consumption</u>			<u>Daily vegetable juice consumption</u>		
< 1 serving	1	4	< 1 glass	17	74
1 serving	10	44	1 glass	5	22
2 servings	11	48	≥ 2 glasses	1	4
≥ 3 servings	1	4			

<u>Daily meat and egg consumption</u>			<u>Daily bean products consumption</u>		
< 1 tael	3	14	< Half a serving	4	18
1 to 2 taels	10	45	Half a serving	12	55
≥ 3 taels	9	41	≥ 1 serving	6	27
(Missing)	(1)		(Missing)	(1)	
<u>Daily dairy products consumption</u>			<u>Daily stir-/deep-fried food consumption</u>		
< 1 glass	4	18	< Once	18	82
1 glass	17	77	Once	3	14
≥ 2 glasses	1	5	≥ Twice	1	4
(Missing)	(1)		(Missing)	(1)	
<u>Daily dessert or sugary food consumption</u>			<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u>		
< Once	15	68	3 regular meals	15	71
Once	6	27	3 meals but at irregular hours	3	14
≥ Twice	1	5	1 to 2 meals at regular hours	2	10
(Missing)	(1)		Irregular meals	1	5
			(Missing)	(2)	
<u>Daily snack consumption</u>			<u>Breakfast</u>		
< Once	12	57	No breakfast at all	1	5
Once			No breakfast most of the time	3	14
(Missing)	9	43	Take breakfast most of the time	8	38
	(2)		Take breakfast daily	9	43
			(Missing)	(2)	

Parents of Secondary School Students

Table 2.11 shows the information on dietary practices of secondary school students as reported by parents. Consuming 2 or more servings of fruits and 3 or more servings of vegetables per day was reported by 14% and 9% of students respectively. More than 75% of parents said their child had fried food less than once a day. 58% of children had snacks at least once a day. More than 70% of students had 3 regular meals per day and 84% had breakfast every day or most of the time.

Table 2.11 Information on dietary practices of secondary school students given by the parents (n=21)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u> < 1 serving 1 serving ≥ 2 servings	7 11 3	33 53 14	<u>Daily fruit juice consumption</u> < 1 glass 1 glass (Missing)	14 6 (1)	70 30
<u>Daily vegetable consumption</u> < 1 serving 1 serving 2 servings ≥ 3 servings	2 11 6 2	10 52 29 9	<u>Daily vegetable juice consumption</u> < 1 glass 1 glass	15 6	71 29
<u>Daily meat and egg consumption</u> 1 to 2 taels 3 to 4 taels ≥ 5 taels	 12 8 1	 57 38 5	<u>Daily bean products consumption</u> < Half a serving Half a serving 1 serving ≥ 2 servings	 8 9 2 2	 38 43 9 10
<u>Daily dairy products consumption</u> < 1 glass 1 glass ≥ 2 glasses	 6 13 2	 29 62 9	<u>Daily stir-/deep-fried food consumption</u> < Once Once ≥ Twice	 16 3 2	 76 14 10
<u>Daily dessert or sugary food consumption</u> < Once Once Twice ≥ Three times	 9 8 3 1	 43 38 14 5	<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u> 3 regular meals 3 meals but at irregular hours Irregular meals (Missing)	 13 4 1 (3)	 72 22 6
<u>Daily snack consumption</u> < Once Once ≥ Twice (Missing)	 8 7 4 (2)	 42 37 21	<u>Breakfast</u> No breakfast at all No breakfast most of the time Take breakfast most of the time Take breakfast daily (Missing)	 1 2 7 9 (2)	 5 11 37 47

Part 2: Target Groups of Students

Primary School Students

Table 2.12 shows the information on dietary practices of primary school students. 31% of students had 2 or more servings of fruits per day and 26% consumed 3 or more servings of vegetables every day. Half of the primary school students reported that they had fried food less than once a day and 30% had it once a day. More than two-thirds of students said they had 3 regular meals daily. Taking breakfast daily or most of the time was reported by 87% of students.

Table 2.12 Information on dietary practices of primary school students (n=23)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u>			<u>Daily fruit juice consumption</u>		
< 1 serving	1	4	< 1 glass	10	43
1 serving	15	65	1 glass	8	35
≥ 2 servings	7	31	≥ 2 glasses	5	22
<u>Daily vegetable consumption</u>			<u>Daily vegetable juice consumption</u>		
<1 serving	7	30	< 1 glass	15	65
2 servings	10	44	1 glass	7	31
≥ 3 servings	6	26	≥ 2 glasses	1	4
<u>Daily meat and egg consumption</u>			<u>Daily bean products consumption</u>		
1 to 2 taels	13	57	< Half a serving	3	13
3 to 4 taels	9	39	Half a serving	6	26
≥ 5 taels	1	4	1 serving	5	22
			≥ 2 servings	9	39
<u>Daily dairy products consumption</u>			<u>Daily stir-/deep-fried food consumption</u>		
< 1 glass	3	13	< Once	12	52
1 glass	15	65	Once	7	30
≥ 2 glasses	5	22	Twice	2	9
			≥ Three times	2	9
<u>Daily dessert or sugary food consumption</u>			<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u>		
< Once	6	27	3 regular meals	16	69
Once	12	55	3 meals but at irregular hours	3	13
Twice	4	18	1 to 2 meals at regular hours	2	9
(Missing)	(1)		Irregular meals	2	9

<u>Daily snack consumption</u>			<u>Breakfast</u>		
< Once	10	44	No breakfast at all	3	13
Once	10	43	Take breakfast most of the time	7	30
≥ Twice	3	13	Take breakfast daily	13	57

Secondary School Students

Table 2.13 shows the information on dietary practices of secondary school students. 20% and 10% of students consumed 2 or more servings of fruits and 3 or more servings of vegetables per day respectively. 40% of the secondary school students took 3 regular meals daily. 55% of the students took breakfast every day or most of the time.

Table 2.13 Information on dietary practices of secondary school students (n=21, one did not return the dietary practices questionnaire)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u>			<u>Daily fruit juice consumption</u>		
< 1 serving	8	40	< 1 glass	12	60
1 serving	8	40	1 glass	5	25
≥ 2 servings	4	20	≥ 2 glasses	3	15
<u>Daily vegetable consumption</u>			<u>Daily vegetable juice consumption</u>		
< 1 serving	2	10	< 1 glass	14	70
1 serving	12	60	1 glass	4	20
2 servings	4	20	≥ 2 glasses	2	10
≥ 3 servings	2	10			
<u>Daily meat and egg consumption</u>			<u>Daily bean products consumption</u>		
1 to 2 tael	11	55	< Half a serving	3	15
3 to 4 tael	6	30	Half a serving	11	55
≥ 5 tael	3	15	1 serving	4	20
			≥ 2 servings	2	10
<u>Daily dairy products consumption</u>			<u>Daily stir-/deep-fried food consumption</u>		
< 1 glass	7	35	< Once	5	25
1 glass	10	50	Once	11	55
≥ 2 glasses	3	15	Twice	2	10
			≥ Three times	2	10

<u>Daily dessert or sugary food consumption</u>			<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u>		
<Once	6	30	3 regular meals	8	40
Once	11	55	3 meals but at irregular hours	4	20
≥ Twice	3	15	1 to 2 meals at regular hours	5	25
			Irregular meals	3	15
<u>Daily snack consumption</u>			<u>Breakfast</u>		
< Once	5	25	No breakfast at all	4	20
Once	10	50	No breakfast most of the time	5	25
≥ Twice	5	25	Take breakfast most of the time	6	30
			Take breakfast daily	5	25

Part 3: Working Groups

Working Males

Table 2.14 shows the information on dietary practices of working males. 27% of working males consumed 2 or more servings of fruits per day. However, only 5% of working males consumed 3 or more servings of vegetables per day. Half of the male participants had 3 regular meals per day. 72% took breakfast daily or most of the time. Snack consumption was common among working males as more than 60% of them consumed snacks at least once a day.

Table 2.14 Information on dietary practices of working males (n=23, one did not return the dietary practices questionnaire)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u>			<u>Daily fruit juice consumption</u>		
< 1 serving	6	27	< 1 glass	19	90
1 serving	10	46	1 glass	2	10
≥ 2 servings	6	27	(Missing)	(1)	
<u>Daily vegetable consumption</u>			<u>Daily vegetable juice consumption</u>		
<1 serving	2	10	< 1 glass	20	91
1 serving	11	52	1 glass	2	9
2 servings	7	33			
≥ 3 servings	1	5			
(Missing)	(1)				

<u>Daily meat and egg consumption</u>			<u>Daily bean products consumption</u>		
1 to 2 taels	7	32	< Half a serving	7	32
3 to 4 taels	12	54	Half a serving	12	54
≥ 5 taels	3	14	1 serving	1	5
			≥ 2 servings	2	9
<u>Daily dairy products consumption</u>			<u>Daily stir-/deep-fried food consumption</u>		
< 1 glass	14	64	< Once	12	57
1 glass	8	36	Once	6	29
			Twice	3	14
			(Missing)	(1)	
<u>Daily dessert or sugary food consumption</u>			<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u>		
< Once	7	33	3 regular meals	11	50
Once	10	48	3 meals but at irregular hours	7	32
Twice	4	19	1 to 2 meals at regular hours	4	18
(Missing)	(1)				
<u>Daily snack consumption</u>			<u>Breakfast</u>		
< Once	8	36	No breakfast at all	1	4
Once	12	55	No breakfast most of the time	3	14
≥ Twice	2	9	Take breakfast most of the time	4	18
			Take breakfast daily	14	64

Working Females

Table 2.15 shows the information on dietary practices of working females. 17% of the female participants had 2 or more servings of fruits per day, while only 11% had 3 or more servings of vegetables per day. 75% of working females consumed snacks less than once a day. More than 71% female participants had 3 regular meals per day. Nearly 90% of working females took breakfast daily.

Table 2.15 Information on dietary practices of working females (n=18)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u>			<u>Daily fruit juice consumption</u>		
<1 serving	1	5	< 1 glass	17	94
1 serving	14	78	1 glass	1	6
≥ 2 servings	3	17			

<u>Daily vegetable consumption</u> <1 serving 2 servings ≥ 3 servings	6 10 2	33 56 11	<u>Daily vegetable juice consumption</u> <1 glass	18	100
<u>Daily meat and egg consumption</u> < 1 tael 1 to 2 taels 3 to 4 taels ≥ 5 taels (Missing)	2 5 7 3 (1)	12 29 41 18	<u>Daily bean products consumption</u> < Half a serving Half a serving 1 serving (Missing)	7 4 6 (1)	41 24 35
<u>Daily dairy products consumption</u> < 1 glass 1 glass (Missing)	10 7 (1)	59 41	<u>Daily stir-/deep-fried food consumption</u> <Once Once (Missing)	12 5 (1)	71 29
<u>Daily dessert or sugary food consumption</u> < Once Once (Missing)	8 9 (1)	47 53	<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u> 3 regular meals 3 meals but at irregular hours 1 to 2 meals at regular hours (Missing)	12 4 1 (1)	71 23 6
<u>Daily snack consumption</u> < Once Once	13 5	72 28	<u>Breakfast</u> Take breakfast most of the time Take breakfast daily	2 16	11 89

Part 4: The Elderly

Table 2.16 shows the information on dietary practices of the elderly. No elderly participant had the habit of having fruit juice or vegetable juice. 41% of them had 2 or more servings of fruits daily and 18% of them had 3 or more servings of vegetables daily. Consumption of fried food, snacks and sugary food was rare among the elderly participants. 59% of the elderly had 3 regular meals per day. 88% of them had breakfast daily.

Table 2.16 Information on dietary practices of the elderly (n=18, one did not return dietary practices questionnaire)

	Frequency	Valid Percentage (%)		Frequency	Valid Percentage (%)
<u>Daily fruit consumption</u> <1 serving 1 serving ≥ 2 servings	3 7 7	18 41 41	<u>Daily fruit juice consumption</u> < 1 glass	17	100
<u>Daily vegetable consumption</u> < 1 serving 1 serving 2 servings ≥ 3 servings	1 7 6 3	6 41 35 18	<u>Daily vegetable juice consumption</u> <1 glass	17	100
<u>Daily meat and egg consumption</u> < 1 tael 1 to 2 taels 3 to 4 taels ≥ 5 taels	3 6 6 2	18 35 35 12	<u>Daily bean products consumption</u> < Half a serving 1 serving	16 1	94 6
<u>Daily dairy products consumption</u> <1 glass 1 glass	12 5	71 30	<u>Daily stir-/deep-fried food consumption</u> < Once Twice	16 1	94 6
<u>Daily dessert or sugary food consumption</u> > Once	17	100	<u>Daily dietary practices (excl. snacks, tea time and night snacks)</u> 3 regular meals 3 meals but at irregular hours 1 to 2 meals at regular hours	10 4 3	59 23 18
<u>Daily snack consumption</u> < Once Once	15 2	88 12	<u>Breakfast</u> No breakfast most of the time Take breakfast daily	2 15	12 88

Disclaimer

The participants are not selected in a random sampling fashion; therefore, the statistics should **not** be extrapolated to the general population.

Chapter 3 Findings from the Focus Groups

Dietary Practices

Part 1: Target Groups of Parents

Parents of Pre-Primary School Students

To parents, having a healthy diet meant having 3 regular meals and having a balanced diet. Meals should include vegetables, grains and cereals (rice, noodles, bread, etc.), meat, milk (diary products), fruits, etc. One should consume more water, vegetables and fish, but less meat, oil and salt.

Parents generally had some knowledge about the food pyramid, especially the top and the bottom levels of the pyramid. Parents claimed that they always tried to follow the food pyramid for the benefit of their child but their child did not behave the same way as they wished. Most parents explained to their child about healthy dietary practices and the teaching usually took place during meals. Some parents used food shopping time to teach their child about healthy eating. Benefits of balanced and healthy diets were better immune system, better quality of health, better mental and physical development. Children who ate properly and healthily had better looks. In contrast, poor dietary practices would lead to poor health, poor physical and mental development, poor immune system and poor respiratory system. The child would feel tired easily.

All pre-primary school students had at least 3 meals per day. Children who were attending whole-day kindergarten had lunch and tea time in school. There were 10 children attending whole-day kindergarten and 9 attending half-day kindergarten. For those children who had 3 meals at home, they usually had milk and bread for breakfast. For lunch and dinner, they usually had noodles/rice, meat and vegetables in the past 2 weeks. For children who went to whole-day kindergarten, the school usually had a lunch menu and a tea menu for parents to select the food, soup, and snacks for their child. These menus included a variety of combinations and each lunch set included vegetables, carbohydrates, protein (from egg and meat), etc.

Regarding fruit consumption, children usually had fruits after dinner. Those who had lunch at home also had fruits after lunch. On average, the amount was usually half of a medium- or large-sized fruit, like orange, apple, banana, etc. Similar serving of fruits was offered in school lunches sometimes. Therefore, most children had more than 1 medium-sized fruit per day. Most children preferred fruits over vegetables because fruits were more delicious, sweeter, juicier, and had better texture while vegetables had too much dietary fibre. Many parents pointed out that their child did not like vegetables with hard stalks, e.g. Chinese kale (芥蘭). They had to chop the stalks into small pieces. Some children had more vegetables and fruits than meat whilst others preferred meat over vegetables and fruits. The relative proportion of meat and vegetable consumption mostly depended on the family eating habits and preferences. Parents in general wanted their child to consume more vegetables than meat.

Mothers or the ones who cooked at home were usually the decision-makers on food choices in the family. Decision-makers also asked family members about their preferences and tried to cook something they liked. When children refused to eat healthy foods, parents would try to chop those foods into tiny pieces and mix them with other food so that the children would not notice. Other methods dealing with children's refusal included persuasion, competition, using attractive kitchenware (e.g. with designs of cartoon characters), cutting food into different shapes (e.g. stars, triangles, squares, etc.), explaining to children the benefits of eating those healthy foodstuffs, storytelling, offering incentives and praise, punishment, cooperation with school and teachers, etc. Parents suggested that the school and teachers should take their child's food selection problems seriously and give their child more education, but they also admitted that parents needed to be role models themselves as well. Apart from some minor food selection problems, parents generally thought that their child had maintained a healthy and balanced diet because they had control over their child's diets. However, many parents still hoped their child could improve their dietary practices by having less snacks, being less picky on food, eating faster, consuming a variety of foods, having proper behaviour when eating, having more time for meals and fruits, drinking more water, etc.

Children liked snacks but they did not take snacks very often because parents had control over the type and the amount of snacks consumed. Some parents gave biscuits and candies to their children as snacks. A parent suggested that replacing candies with dried fruits was healthier and more natural. Parents believed that the greatest barrier to healthy dietary practices was snack consumption. Attractive packages and advertisements of snacks were appealing to children. Moreover, children were affected by and compared themselves with their peers and classmates. When classmates showed or treated them some candies, biscuits, chocolate, etc., they would also like to have some of their own to show or treat others.

In general, most parents agreed that they must be good role models in order to promote healthy dietary practices in their children. Parents taught their children patiently about the benefits of healthy eating. For example, "Vegetables help resolve constipation", and "A balanced and healthy diet makes you (the child) look better and stronger". Praise and encouragement helped enhance children's healthy eating behaviour and these should be used more often than punishment. Promoting positive eating atmosphere and environment also facilitated healthy dietary practices. School education was considered to be important too. Parents thought that children would listen more to their teachers than to parents. All parents agreed that healthy dietary practices should be part of the family practices and should be introduced to children at a young age.

Parents of Primary School Students

Parents stated that children learned the food pyramid in school at a young age. Some parents were familiar with food pyramid but some identified the levels incorrectly. To them, a healthy diet meant having a balanced diet, drinking more water and consuming more vegetables, dietary fibre, etc. Diet should include grain, protein, meat, fruits, etc. and children should not be choosy about food. Parents usually taught their child about healthy dietary practices (e.g. consume more vegetables, water, fruits, etc.) during meals. They explained to their children the benefits of a balanced diet and asked them to eat

different kinds of food but not to overeat. Some parents stated that their child always forgot their teaching. A few parents pointed out that their child took the lead to teach them about healthy eating because their child learned about it in school.

Parents believed that children with healthy dietary practices would be healthier, better developed, taller, etc., and get sick less easily. Healthy children would have better digestive system, better immune system, good body shape, etc. Bowel openings would be easier if children had healthy dietary practices. In contrast, their immune system, digestive system, stomach, throat, development, concentration, energy, etc. would be negatively affected if children did not eat healthily. They might become either skinny or fat.

Not all children had 3 regular meals per day. A few of them did not take breakfast. Some parents claimed that there was no time for breakfast in the morning since the school was too far away. Some children only had milk for breakfast. Some parents complained that their child's irregular diet was due to the school system because their child was attending the afternoon school and early lunch was then the first meal of the day. For those children who had breakfast, bread, milk, soymilk and noodles were common selections.

For lunch and dinner, children usually had rice, noodles, vegetables, egg, meat, soup, etc. Before dinner, many children had a small meal because they usually got hungry after school or a few hours after lunch. Children who went to half-day school had lunch at home, while children who attended whole day school had lunch in school. Parents usually allowed their child to select from the school's lunch set menu (3 choices to choose from) because they were afraid that their child would not like the food they selected for the child.

Parents and domestic helpers made decisions on family food choices. Many parents stated that they also allowed their child to make some decisions as long as their selections were reasonable. Parents said that their child had more say in lunch selection but food selection for dinner was usually solely under parents' control. Parents would try to satisfy everyone in the family and select food with nutritional values. Parents tried various ways to deal with children's refusal of healthy foods. Chopping those foods into small pieces and mixing them with other food was one possible way but parents generally agreed that this method only worked when the child was still young. Parents would also cook those foods in different styles, make those foods more attractive, use praise and treats, explain to the child about the benefits of those foods, etc. Parents would ask their child to try just a small piece first and then generally increase the amount. A few parents would force their child to eat those foods but the majority said that they would not do so because the child would dislike those foods even more than before.

About half of the parents said that their child ate more meat than vegetables, whereas others claim that their child preferred vegetables. Fruits were usually taken after meal, but not every child had 1 piece of fruit per day. Parents said fruit consumption depended on the types of fruits and whether the fruits were served by parents. Snacks were part of the children's diet. About half of the children liked snacks. These children usually had snacks during recess, after school, at night, etc. Chips, biscuits,

prawn crackers, chocolates, candies, dried fruits, etc. were common snacks taken by primary school students. Parents sometimes used snacks as reinforcements for good behaviour. Parents had more control on their child's snack consumption when their child was still young as the child could not buy their own snacks. If the child got older, parents' control would be reduced.

Some parents said that their child's diet was generally acceptable. There were only minor dietary problems like preferences on fried food or snacks. Their child's diet contained fish, meat, rice, vegetables and fruits. Their child often ate at home and they thought that their child was having healthy dietary practices. They believed that having good practices was the result of parents' teaching, parents' control, the culture, education from school, T.V., recent education on smart eating, etc. In contrast, other parents were not happy with their child's diet because their child loved snacks, had no breakfast, overate, ate little vegetables and fruits, etc. Parents claimed that major barriers for unhealthy dietary practices were snack consumption and the attractive packages of snacks. Besides, time was also a major concern because both parents and children had no time left after work and schoolwork. Nowadays, many families are dual breadwinner families. Both parents needed to work and many needed to work overtime. As a result, parents had little time for the family. On the children side, heavy schoolwork, like homework, exams, revisions, other activities, etc., already took up a lot of their time. Focus was put on schoolwork and not on healthy eating. Some parents complained about the p.m. school session system. In general, parents believed that the school and parents were important in promoting healthy dietary practices and vegetable/fruit consumption to children. Decreasing the workload in school (e.g. fewer exams and homework), having more promotion in school, using creative activities and games, praising the child, parents' teaching on the benefits of having a healthy diet and consequences of unhealthy eating, cooking meat with vegetables, etc. all helped children establish healthy dietary practices. In addition, the media also played a role in this area.

Many parents thought that there was a need to change or improve their child's diet. For example, their child should at least have 3 balanced and regular meals. Some parents hoped that their child could eat more fish and/or vegetables and fruits. Eating habits on weekends were usually different from regular school days because of getting up late and delaying the eating schedule. Parents would also like their child to have fewer snacks. Parents believed that children were very conscious about body shape and image nowadays because of mass media projections and other people's comments. Primary school students considered that being fat did not look good and they wanted to be slim. Some primary school students had told their parents that they would like to skip breakfast because of this reason but their suggestion was rejected by parents.

Parents of Secondary School Students

Parents' concepts of healthy eating were having a balanced diet and consuming more grains and cereals, vegetables, milk, dietary fibre, calcium, iron, and less meat. Some parents were able to identify the different levels of the food pyramid correctly. Healthy dietary practices also meant not to be picky about food choices. Parents suggested that there are too many attractions for children nowadays. Parents would talk to their children about healthy dietary practices during dinner and T.V. time. Parents would tell

them the benefits of healthy eating and would advise them to take less meat, fast food, deep-fried food, oily food, soft drinks, etc. and consume more vegetables, fish and water instead. Parents believed that healthy dietary practices could improve their child's digestion, health and concentration. Children would be more energetic too. Unhealthy dietary practices would lead to lots of diseases, obesity, pimples, bad moods, poor digestive system and stomach, etc.

Most of the children had 3 regular meals. Some of them had 4 or more meals per day because having a small meal was common among secondary school students. Parents pointed out that their child was unable to have regular meals on the weekends because of getting up late and an irregular time schedule. Bread, soymilk, milk and noodles were common choices for breakfast. Many parents said they were not sure about what their child had for lunch as almost all children had school lunches or ate outside. Sometimes they wondered if their child had eaten anything for lunch because their child seemed to be very hungry when they came home from school. Some parents said that their child's lunch was not healthy at all because the child always had deep-fried food and very few vegetables. Because of that, many parents prepared a lighter dinner with more vegetables at night. Dinner usually included rice, soup, vegetables, meat, fish, etc. Parents claimed that controlling children's diets was easier at home because they had the control over the food selections. However, they could not do anything about the food children ate outside the family. Parents suggested that continual education about the benefits of healthy food is a must. Mixing healthy food with other food that children like, preparing those foods in different styles, sweet-talking the children, using praise, using children's favourite food as incentives, etc. were methods parents used to tackle children's refusal of healthy food.

Having snacks and desserts when doing homework or watching T.V. was common among secondary school students. Only a few parents said that their child rarely took snacks. Some parents would buy snacks for their child. Parents who did not buy snacks for their child believed that snacks were unhealthy. Parents always tried to tell their child the bad effects of taking snacks but their child would not listen until some symptoms, like pimples, sore throat, putting on weight, etc., occurred. Parents claimed that their child had no self-control on snack consumption. Many students used their pocket money to buy snacks for themselves. "Fish balls", chips, candies, fast food, cakes, biscuits, desserts, etc. were common snacks consumed by students. Parents suggested that controlling their children's pocket money would help to reduce their consumption of snacks.

Apart from the unhealthy foodstuffs, parents were worried about their child not having enough nutrition for healthy development. They believed that their child should consume more meat since their child was a teenager. Many children disliked all types of fish. Many parents would cook vegetables with meat to get a balance. However, there were more children who preferred meat than those who liked vegetables and fruits. When fruits were eaten, most students had it at night. A few students who really liked fruits had fruits when they came back from school, when they wanted to have snacks, and whenever they felt hungry. Many students rarely took fruits themselves unless someone served them, like serving in small pieces, peeled, pitted, etc. When the types of fruits

were students' favourites, they would eat more. Most students had at least half to 1 piece of medium-sized fruit per day. A few students who disliked fruits took only 1 piece of medium-sized fruit once a week.

Many parents said that their child did not have healthy dietary practices because their child had no breakfast and had too many instant or fast food. Other major hindrances included taking too many snacks, deep-fried food, unhealthy lunch in school and outside, consuming an insufficient amount of fruits, vegetables and water, eating too little, having meals in front of the computer, peer influence, being too selective on food, having night snacks, etc. These were things that many parents hoped that their child could change for better dietary practices. For parents who believed that their child had healthy dietary practices, the reasons were that their child had regular meals and always ate at home. Moreover, they always provided their child with healthy food and educated them about the benefits of healthy eating. Giving less pocket money helped reduce the chance of buying unhealthy food from outside. Some parents suggested that as their child became older, they cared about their image and body shape (especially for the girls). This helped the child maintain a healthy diet. However, some children ate no rice or only consumed a small bowl of rice because they wanted to reduce starch intake. Parents suggested that telling the child about the benefits of healthy eating (e.g. getting slimmer, healthier skin, etc.) and preparing more attractive vegetable dishes could promote healthier diets and vegetable/fruit consumption. Parents as role models, siblings' influence, professional advice, school and T.V. education, peer and family influence, etc. also helped change the child's diet.

Part 2: Target Groups of Students

Primary School Students

Primary school students defined good dietary practices as having less snacks, deep-fried food, oil, salt and sugar. Healthy eating also included having more vegetables, grains, cereals and drinking more water. They thought that fruits should be taken before meals. Students learned about healthy eating and food pyramid in school. Yet, some students were confused if potatoes and barbequed fried dough (齋鴨) were considered vegetables or not. They pointed out that having balanced and healthy diets would lead to better health. People would have good immune system, become more energetic and get taller if they ate healthily and properly. In contrast, unhealthy diets would lead to pimples, obesity, skinniness (due to poor nutrition), coronary and heart diseases, diabetes, etc.

Some students claimed that their diet followed the food pyramid. Most students had at least 3 meals a day, except for a few who did not eat breakfast. A reason for not having breakfast was that the food prepared by mother was not tasty. Those who had breakfast usually had it at home, while a few took breakfast in school. Primary school students most commonly took bread/sandwich and milk for breakfast. Students who went to half-day school all had lunch at home. Those who enrolled in whole-day school must have lunch in school and most of them ordered lunches from school. There are usually 3 choices for school lunches. One of them was a healthy lunch set, including meat,

vegetables, rice, noodles, corn, etc. Students commented that the healthy lunch set was not tasty at all, so they rarely chose it. Other lunch sets had sausages, meat, fried rice, dessert, etc. Fruits were uncommon in school lunch menus. Most students liked fruits more than vegetables because fruits were tastier, sweeter, juicier, and had vitamin C. A few students liked both vegetables and fruits because they were healthy foods. Fruits were usually taken after dinner. Some students who had lunch at home ate fruits after lunch as well. A few students had fruits at tea time or whenever they were hungry or thirsty. Students' consumption of fruits ranged from 1-2 pieces of medium-sized fruits per week to 2-3 pieces per day but most students had at least 1 piece of fruit a day. One student stated that he only had fruits when his mother was at home. Some students said they had fruits more than snacks. Most students did not take snacks very often. Only a few students had snacks frequently. Snack selections included candies, fast food, chips, etc.

Parents, usually the mother, were the ones who decided on food choices in the family but students would also express their food preferences. Most students believed that they had healthy dietary practices because they liked vegetables and ate different kinds of food. Some of them had more vegetables and fruits than meat in their daily diets, while others struck a balance between the two, but all of them claimed that they seldom had snacks. Boys were more likely than girls to think they had healthy dietary practices. For those who believed that their dietary practices were not good, some said it was because they took no breakfast and/or had afternoon tea. The greatest barrier for healthy dietary practices was the temptation of snacks. Children pointed out that it was especially difficult to resist when people around them, like classmates, friends and family members, had snacks or treated them with snacks. Eating out was another barrier because of the unhealthy ingredients used for cooking. Half of the students believed that they needed to improve their diet. Some said that they should take breakfast and fewer snacks, and should not be too picky on food. Others suggested that they should eat more grain and drink more water. Students suggested that schools, teachers, parents, T.V., magazines, internet, tastiness of healthy food, less pocket money, keeping snacks away, etc. could motivate students to have healthy diets.

Secondary School Students

To secondary school students, healthy eating means to maintain a balanced and nutritional diet. Their knowledge of the food pyramid was that they should eat more vegetables, fruits, fish and high calcium food, and drink more water. Deep-fried food, meat, oil, salt, fat and snacks etc. should be consumed less. Eating healthily could reduce the rate of getting fat and getting sick. It could make people stronger and more alert. Students said healthy dietary practices could help teenagers grow better, while unhealthy diets would lead to poor skin quality, obesity, poor nutrition, poor development and illnesses like diabetes, high blood pressure, etc.

Almost all of the boys had at least 3 meals per day, while only a few girls had 3 meals per day. The girls' reason was that they have no time for breakfast. A few girls lived far away from school. One girl sometimes had dinner only because she claimed that sometimes she had no appetite or she was busy. Bread was the most common choice for breakfast. One male student said his mother prepared eggs, sausages and instant

noodles for him every morning. Some of the students had breakfast at home, while others took breakfast in school. Students generally had dinner at home. Only 2 out of 21 students packed lunch to school. The rest of them ordered school lunch, purchased from school's tuck shop, or ate outside. Students commented that lunches and food purchased in school were not tasty at all. Having small meals was common among the boys but not the girls. The boys often went to fast food shops or other places for this small meal. Both boys and girls frequently took snacks. Ice-cream, French fries, cookies, candies, chips, etc. were popular snacks for students.

All boys said that they consumed more meat than vegetables and fruits and half of the girls had this habit as well. Some girls consumed about the same amount of meat and vegetables. A few liked vegetables and fruits better. If students were to choose between fruits and vegetables, almost all the students would choose fruits because fruits were sweeter, juicier, tastier, and smelt better. Those who preferred vegetables over fruits said they could add dressings or sauce to vegetables and they had no preference for fruits. Some boys would not have fruits unless their mother told or forced them to do so. Mothers were the decision-maker for food in the family though they also took their family members' preferences into consideration. Two boys claimed that they were the ones who made the decisions for the family.

Only a few girls said that they had healthy dietary practices because they liked vegetables and their diets contained a variety of foods. Other girls described their diets as unhealthy because they did not take breakfast, consumed lots of snacks, had night snacks and consumed more meat than vegetables. Their barriers for healthy dietary practices included too many exams and homework, which left them no time and too tired. School started early in the morning and finished at 4:15 p.m. Each lesson lasted for 70 minutes. They needed to spend a lot of time on homework, as well as preparing for tests and exams. Besides, they needed to stay after school for other training. The situation was even worse for students who lived far away from school. They needed to spend about two hours on travelling each day. The girls believed that fewer exams and homework would help promote healthy dietary practices and vegetable/fruit consumption. Many would like to keep their current dietary practices. All the boys claimed that they did not have healthy dietary practices because they always ate fast food and snacks. Among those students who believed they should change their dietary habits, a few said they needed to eat more because they were too skinny. Some needed to eat less. Some students also said that they should eat more vegetables and less meat. A boy hoped that there would be a health consultant to monitor his diet and give him advice. Students generally agreed that they should take fewer snacks.

Students said alternative diets, like eating only white meat, not eating any spices or seasoning, eating half of one's regular intake every day, Atkins' Diet, etc. were unreasonable and none of them had tried alternative diets. They made lots of suggestions on how to promote healthy eating instead. Selling healthy food in school tuck shops would help promote healthy eating although the girls thought that it would be strange to do so. For example, it would be funny to sell vegetables in tuck shop. The boys in another school suggested that continuing to tell oneself that vegetables were very tasty and healthy would make one eat more vegetables. The girls recommended that the

school lunch provider should offer more vegetables in the menus. Other students suggested that if there were incentives, such as money for eating vegetables and fruits, people would consume more healthy foodstuffs. Attractive appearance of vegetables and healthy food, tastiness of the food, cooking meat with vegetables, making a variety of cooking styles, setting out the rules that vegetables must be eaten before eating other food, family cooperation, having teachers as role model, school's promotion, reducing the price of healthy food, peers' and parents' encouragement, etc. were ways suggested by students to promote vegetable and healthy food consumption. Most thought that they should consume fewer snacks. The way suggested by students to deal with the snack consumption problem was to reduce the amount of pocket money so that they would not have enough money for snacks but they hoped this would not happen to them.

Part 3: Working Groups

Working Males

Working males defined healthy eating as having a balanced diet. One should eat more vegetables, less meat, a variety of food and should not overeat or be picky about food. Participants agreed that oil, fat, sugar and fast food should be taken less frequently. Male participants had heard about the food pyramid but not all of them knew exactly its different levels. Some correctly identified all levels of the pyramid but others thought that fruits and vegetables were at the bottom level; grains, cereals and sugar occupied the second level, and meat filled the top level. Benefits of healthy eating included having fewer pimples, fewer toxins inside the body, better body shape and better digestive, immune and circulation systems. One would live longer and be more alert. On the other hand, unhealthy diets would result in constipation, obesity, poor skin quality, unpleasant breath, heart disease, stomach ache, etc.

Not all working males had the habit of taking breakfast. Some did not have breakfast at all. Some only took breakfast occasionally. Some stated that they had no habit of taking breakfast since a young age. Others stated that they needed to rush to work in the morning because they wanted to sleep until the last minute. There were more working males who ate outside for lunch than males who packed lunch. Some stated that it was too inconvenient to prepare lunch to work and that eating outside with other colleagues was a kind of social gathering. Also, packed lunch did not taste good on the following day, especially after reheating. Although knowing that eating outside was not healthy because the food would contain very few vegetables and too much oil, monosodium glutamate (MSG), etc., some said that they had no choice. Other male participants stated that they would try to choose from healthier menus or eat healthier in the morning or at night, for example, having vegetables, rice vermicelli, tofu, fish, steamed food, soymilk, oatmeal, etc. For those who packed lunch to work, they believed doing so was healthier and more convenient. They pointed out that there were not many options in restaurants and too many people during lunch hours. Packing lunch to work saved money as well. All the male participants reported that mothers or wives were the ones who prepared food or made decisions on food selection for the family.

Having dinner at home was uncommon for many working males, especially for younger ones, due to long and/or irregular working hours and business meetings. Having a regular dinner was almost impossible. Others claimed that they had regular meals for the past 7 days. Participants usually had more meat than vegetables for lunch but more vegetables for dinner. There were more males who liked meat better than vegetables. Males knew that they should consume more vegetables and fruits but sometimes it was hard to do so. Apart from those who worked at home, very few males had fruits at lunch time. Often, they had fruits after dinner or when watching T.V. at night. However, not all of them had 1 piece of fruit per day. They were lazy to take fruits because they did not like to peel and cut the fruits. Sometimes, they were just too tired to have fruits at night after a long day of work. Many would not take the initiative to eat fruits unless they were served by other family members. About half of the male participants liked vegetables better than fruits because there were various cooking styles for vegetables. Others preferred fruits because of the naturalness, tastiness and sweetness of fruits.

There were more males who claimed that they had not had healthy dietary practices. Some of them had too much coffee and others always ate outside. Some stated that they would eat anything they wanted disregarding health issues. A few claimed that they always thought about their work when they were eating; therefore, they could not concentrate on the food when having meals. Some claimed that the barrier of healthy eating was the problem with work. They worked irregular and long hours. They often needed to eat with and entertain their clients; therefore, eating outside, eating lots of meat and drinking heavily were inevitable. The tastiness and attractiveness of the “unhealthy” food (like deep-fried food, bacon, dim sum, hairy crabs, sushi, etc.) and food served in restaurants made it difficult to resist the temptation. Afternoon tea and/or night snacks were also quite common for some participants. Besides, most male participants took snacks. They usually had snacks in the office because of colleagues around and/or trying to stay awake. Chewing gums, biscuits, chips, candies, etc. were common selection. A few said that the culture of their companies was that all colleagues contributed a small amount of money each month for buying snacks. These participants pointed out that they had a snack cabinet in the office. Some said that they wanted to eat less oily and deep-fried food, consume more fruits and water, eat at home more often, have more regular and balanced meals, etc. They claimed that on the rational side, they really wanted to change their diets, but adopting healthy dietary practices was something really difficult to achieve. Peers, colleagues, and people around were also influencing factors. Self-control was thought to be a very important factor.

In contrast, older working males tended to have healthier dietary practices than younger working males. They had 3 regular and balanced meals per day and consumed more vegetables than meat. They often ate at home and rarely took snacks. They were able to do so because they wanted to be healthy. Moreover, they claimed that after maintaining healthy dietary practices, their health and body improved. When they got used to these healthy dietary practices, their stomach or body would feel very uncomfortable if they tried something unhealthy. Some participants suggested that they always used friends’ or other people’s health problems to remind themselves to have healthy diets. When it was unavoidable to eat outside, they would try to choose from healthier restaurants or

choose more vegetables and less meat. They pointed out that one needed to set goals and work towards the goals for healthy dietary practices.

To promote healthy eating, people around them, like colleagues, friends and family members were thought to be influential. If the people around also had healthy dietary practices, their diets would likely to be healthy as well. Making oneself the role model of others could help too. They also suggested that by keeping in mind that illnesses caused by unhealthy diets would affect their loved ones, they would be reminded to try more balanced and healthier diets. They said that the Government needed to do more promotion of healthy dietary practices. They also suggested that the Government should have courses or programmes on healthy cooking for chefs. They believed that if there was a person who could always prepare and serve the fruits in a convenient manner, people's consumption of fruits would definitely increase. They thought that it was easier to motivate females to have healthy dietary practices because one only needed to tell the ladies that they would look more pretty and slim by practising healthy dietary habits, but this would not work on males.

Working Females

To working females, having a healthy diet meant to consume less sugar, oil, salt, artificial colours, fast food, MSG and deep-fried food, and consume more vegetables, dietary fibre, fruits and water. Participants also realised that one should consume a variety of food and not to overeat or eat too fast. One should also eat simple and eat the right amount of food suitable for oneself, depending on the age, gender, body type, etc., and no eating should be allowed 3 hours before sleeping. Most female participants knew the food pyramid. Benefits of having healthy dietary practices included having better health, moods, digestive system and immune system. One would look younger and prettier. If one could eat healthily, one would serve as the role model for children in the family. If one ate unhealthily, one would have poor skin quality, bad temper, exhaustion, bad moods, poor digestion, chronic diseases (e.g. heart diseases, high cholesterol, etc.), obesity, etc.

Most had 3 meals per day and ate at regular hours. They often had bread, biscuits, egg, soymilk and coffee for breakfast. Dinner usually contained meat, fish, vegetables, rice, etc. Some said that they needed to have rice every day but there were some who would consume less carbohydrates at night. They considered it a bit difficult to have vegetables at lunch, so they would try to consume more vegetables at night. Only about one-third of the participants would pack lunch to work. Their reasons were that it was convenient and they would not have to think about what to eat every day. Doing so also saved them the time and money. Food served in restaurants was often unhealthy. Some said that packing lunch allowed them to control the serving size of their lunchboxes since they always had leftovers when eating outside. Some participants packed lunch to work because their mother asked them to do so. They often had meat, vegetables and rice. For those who ate outside, a few claimed that it was because they worked irregular hours. Some said they were too lazy to bring the prepared lunch to work. Reheating food by microwave was considered no good. Others considered that eating out with colleagues allowed a time for social gathering and communication. No microwave in the office and no other colleagues packed lunch were also reasons named by participants for not bringing lunch to work. They agreed that controlling diets was difficult when

eating outside because the food usually had too much oil.

Not many participants had fruits at lunch. They usually had fruits before or after dinner. About half of them said that they had 1 to 2 pieces of fruits per day. A participant said she would feel disappointed if she found no fruit at home. However, there were also female participants who did not like fruits. These participants would take fruit juices instead. Some said they liked fruits but they did not have fruits every day or regularly. In general, participants would eat more fruits if the types of fruits were those they liked. Many participants preferred fruits over vegetables because of the tastiness, naturalness and varieties of fruits.

About half of the participants believed that they had healthy dietary practices because healthy eating had become a habit for them. Health consciousness, the threat of illnesses, family coordination, having a sick family member, getting old, etc. were reasons of maintaining healthy diets identified by participants. Those who did not have healthy dietary practices said the barriers were snack and dessert consumption, temptation of unhealthy food, social gatherings and functions, overeating for psychological fulfilment after busy working schedule, irregular working hours and meals, pickiness on food, unhealthy dietary habits of other family members, etc. Many female participants loved snacks. Some participants tried to eat less or choose healthier snacks or eat fruits instead. For those who claimed they wanted to improve or change their diets, they wished they could eat regularly, reduce the amount of desserts taken, have earlier dinner, control the amount taken, eat less fast food and snacks, consume more fruits and vegetables, etc. They suggested that change should be natural and gradual.

Participants believed that family education, taking other people's comments (e.g. on appearance, body shape, health, etc.), peers, family cooperation, working environment, using sick cases and symptoms as reminders, health information, etc. would encourage healthier eating and more consumption of vegetables and fruits. If there was someone in the family who could always serve fruits actively, this would also increase fruit consumption.

Part 4: The Elderly

The elderly participants seemed to have good knowledge of healthy dietary practices. They mentioned the food pyramid, stating that one should consume less oil/fat, salts and sugar. Meat should be eaten less but one could eat more fish and vegetables. To these elderly participants, milk, oatmeal, soup and rice were considered healthy foods. One should have a balanced diet. Overeating would affect the digestive system. If one had a healthy and balanced diet, one would be healthier and would fall sick less easily. On the contrary, unhealthy diets would cause obesity, coronary diseases, high blood pressure, high cholesterol and poor stomach.

Most of the elderly participants had 3 or more meals per day. They usually had a small tea between lunch and dinner. Not all of them had breakfast. Those who did usually had it regularly and included oatmeal, noodles, congee, rice, milk, etc. Sometimes, they

had leftover food from the previous night. The types of food for lunch and dinner were similar, including rice, meat, vegetables, fish and fruits. Some preferred fatty meat and salted fish (preserved food). The diets of the participants usually had more vegetables and fruits than meat. Most of the participants had at least one piece of fruit per day and had it after dinner. A few of them said they knew that it was better to have fruits before a meal. Oranges and bananas were common types of fruits eaten by the elderly. There were more elderly participants who liked fruits better than vegetables because fruits were sweeter, more convenient and tastier. However, they were also aware that they should not over consume fruits due to the high sugar content in fruits. A few elderly people took biscuits, nuts and candies as snacks.

The food taken in the family was usually decided by the elderly themselves or their children/grandchildren. Most of the elderly were satisfied with their diet and thought that no change was needed. They believed that they were quite healthy because they did not drink or smoke, and they rarely had desserts and oily/fried food. Also, they usually consumed water and tea, and ate at home. Barriers for not having a healthy diet included preferences for fried food, consuming no or very few fruits, self-control problem and overeating when eating out. A participant said she would like to have a lighter diet and have less fried food.

The elderly suggested that healthy dietary practices could be promoted through health talks, clinics, community centres, doctors and nurses.

Exercise Practices

Part 1: Target Groups of Parents

Parents of Pre-Primary School Students

Parents believed that doing sufficient exercise would make children strong, healthy, agile and physically well-developed. Exercise was good for the heart, lungs, muscles, and also helped children to have better concentration, better appetite, increase metabolism, and release extra energy. Lack of exercise would cause obesity. Some parents suggested that half an hour to one hour per day was sufficient for children, while others proposed that about 2 hours a week should be enough for maintaining a healthy body. Parents would talk to their child about the advantages of doing exercise but they said their child learned about most of those in school.

Since their children were still very young, safety issues were a main concern for these parents. Parents would suggest their child to play with well-behaved children and avoid dangerous exercise. They would also tell their child not to drop any objects from the windows when playing at home and the child should play with children of similar ages when playing outside. Parents would explain to their child that they should not do exercise after eating.

In the past two weeks, apart from daily school exercise, children usually engaged in cycling, running, soccer games, playing badminton, working on hula hoop, playing with

other children in the playground, etc. They often did exercise after school and before dinner. On weekends, parents would take them to the countryside. Teachers, domestic helpers, parents, siblings, classmates and other children of similar ages were pre-primary school students' exercise partners. Parents said that they were not sure whether the above activities should be counted as their exercise practices since they were just playing around.

Children attending whole-day kindergarten would take a nap in school after lunch. For children attending half-day school, a few would sleep after finishing their lunch because their parents wished them to do so, while some parents said their child would play, watch T.V., practise origami, read books, draw, etc.

In general, parents believed that their child had sufficient exercise because their child always moved around. Sometimes the children had so much energy that they could not be stopped. Making exercise as enjoyable activities, choosing the exercise the children like, school's involvement, pleasant feelings after exercising, allowing children to try different kinds of exercise would help them to release their extra energy. Parents pointed out that a lack of time, inaccessibility of facilities, problems with the surrounding areas, schoolwork, children's health condition, etc., are all hindrances for children to have sufficient exercise. To encourage young children to exercise, parents' involvement and teaching, having more and better facilities around the living area, making exercise a pleasant activity, holding sports competitions, having siblings as role models, parents' encouragement and school's participation would help.

Parents suggested climbing stairs, walking to school, helping with housework, playing with parents at home, etc., were activities that could be easily integrated into daily life as exercise. Jumping ropes, swimming, cycling, playing hide-and-seek, playing table-tennis, running, going to the countryside are suitable exercise for young children. Parents would like their child to make exercise as one of his/her interests, to participate in activities arranged by community centres more frequently, to do more outdoor exercise and to avoid doing dangerous exercise.

Parents of Primary School Students

Parents of primary school students believed that being taller, getting stronger, having better immune and digestive systems, having better development, being more energetic and having better moods were benefits of doing sufficient exercise. Children not doing sufficient exercise would get fat and sick easily. Some parents believed that 2-4 hours of exercise a week would be sufficient. Other parents suggested that at least 15 minutes to an hour of exercise should be done every day. Parents would teach their child about the benefits of doing sufficient exercise and that safety must be taken seriously to avoid injuries. Safety precaution included doing warm-ups and no overeating before doing exercise, wearing shoes when playing soccer, being careful during exercise, right posture, etc.

The exercise practices for children in the last two weeks were generally satisfactory. Apart from a few children who seldom exercised, many of them had engaged in different kinds of exercise, like badminton, ball games, hiking, cycling, walking, jumping, running,

track and field, playing with other children and dancing. Some children usually did this after school or on weekday evenings, while others exercised on weekends. Parents, schoolmates, friends of similar ages, siblings, cousins, etc. were children's usual partners for exercising, except for a few children who sometimes did it alone. Many children would take the initiative to invite parents or friends to do exercise together, whereas some children were more passive and rarely invited others.

About half of the parents said their child could maintain healthy exercise practices. Some of these parents believed it was because their child liked exercising and playing with others. Some had joined dancing and tennis classes also. Other parents said their child's health improved after having more and/or regular exercise. Some believed that their child should have enough exercise as they would take their child to the playground every day or make their child walk to and back from school. Those parents who claimed that their child's exercise practices were not good believed it was because their child attended the afternoon session of schools. There was too much homework, leaving their child no time for exercise. Other barriers for maintaining healthy exercise practices included children being too lazy, limited time of parents, bad weather and air pollution, child having other interests (e.g. watching T.V.), inadequate facilities nearby and quiet personality of the child. Inadequate facilities meant having no warm water pool around the living area for swimming during autumn and winter, and no facilities for cycling. Parents complained that community centres' courses were unable to meet the schedule of afternoon schools' students as there was no morning training class. Some parents stated that they would like their child to improve current exercise practices by having more workouts and being more active.

Parents believed that having less schoolwork, more P.E. classes in schools, joining more school activities, allowing children to try a variety of sports and activities to find out what they like, having friends or exercise partners, schools' involvement and parents' encouragement, etc. would help children do more exercise. Jumping ropes, playing hula-hoop, swimming, playing table-tennis, running and cycling were forms of exercise parents believed suitable for children. Swimming was highly recommended because it involved whole body movements and it was good for heart and lungs. Parents suggested housework, walking to school, climbing stairs, etc. as simple physical activities that could be easily incorporated into daily lives.

Parents of Secondary School Students

Parents of secondary school students pointed out many advantages of doing exercise, including having better health, circulation, digestion, attention and physical development. Exercise could increase children's confidence and satisfaction through winning and meeting the challenges. Exercise could also improve children's interpersonal cooperation and communication skills because many exercises are group activities. Parents believed that their child would become fat or skinny, and would also be slow in response, if the child did not have enough exercise. The optimal amount of exercise should be half an hour to one hour per day. Apart from school education, many parents did talk to and discuss with their child the benefits of doing exercise. Parents also emphasised the precautions for doing exercise, and considered it important to do warm-ups before doing any exercise, to drink lots of water afterwards and to wear safety

helmets for protection if needed.

Children's participation in exercise in the last two weeks varied. Some parents complained that their child did little exercise because the child spent too much time on the computer. Some parents complained about the large amount of schoolwork and after-school activities their child needed to take up and the insufficient number of P.E. lessons in school. They considered their child as having poor exercise practices. Two other barriers were a lack of interest in exercise or sports and laziness. Only a few parents said their child did exercise regularly mainly after school and on weekends. For those children who exercise regularly, it was often due to their participation in a school sports team (e.g. basketball team) or sports training classes. Parents believed that having an interest in sports and doing exercise, friends and exercise partners, personality, parents' involvement, etc. encouraged children's participation in exercising, and helped their children maintain sufficient exercise. Students usually did exercise with friends, schoolmates, relatives and parents. Examples were badminton, basketball, table-tennis and swimming. A few students preferred to do exercise by themselves, like cycling, jumping ropes, dancing, playing basketball alone, etc. Many parents said their child rarely took the initiative to invite other people to do exercise together, and only a few children would do so. Children would take a nap, chat with other people, walk around, watch T.V. and use the computer after having meals. Parents would like their children to do more exercise and enrol in exercise classes.

To make children engage in more exercise, parents' involvement was crucial. Some parents would invite their child to do exercise together. Other parents used incentives and rewards, like buying beautiful running shoes, for their participation in sports and exercise. Negotiation, education and encouragement were essential. Having companions or exercise partners, peer influence, having a sense of competence, schools' cooperation, professional advice etc. were things suggested by parents as useful means for encouraging children to do more exercise. They believed one should avoid forcing children to do something they dislike. Exercise like jumping ropes, walking to school and using stairs could be easily done in children's daily lives. Many parents suggested swimming as a very good exercise for children, and hoped that their child could do more exercise for better health and physical development. They also suggested that the school should be more responsible for promoting physical activities and encouraging students to do more exercise, and should have more P.E. lessons in the curriculum.

Part 2: Target Groups of Students

Primary School Students

Primary school students stated that doing exercise is fun. It could enable one to have better health, circulation, digestive system, muscles, cardiovascular functioning, etc. It could also prevent one from having cancer. They claimed that participation in exercise could help you get to know more people. Students claimed that insufficient exercise would make one fat and get sick and increase the risk of getting heart diseases. The bone would also fracture easily. Most students suggested that half to one hour of exercise

every day should be enough, but some said it should be at least 2 hours per day. Students knew that one should wear suitable clothes when doing exercise. Too tight or bulky clothes would not be a good choice for exercise. Warm-ups should be done before exercising. One should not eat too much and had to drink enough water after exercise.

Apart from physical education (P.E.) lessons in school, many students engaged in 1 to 2 hours of physical activities for 3 to 4 times a week. These students generally exercised after school or during recess. A few did it in the morning. Some students only exercised on weekends. Running, swimming, playing with other friends, playing badminton, hiking, ball games, etc. were common exercise done by primary school students in the last two weeks. Students usually did exercise with other people. Parents, friends and schoolmates were usual exercise partners. Getting up late, having no invitation to do exercise together, undesirable weather, homework, exams, etc. were barriers identified by students for not being able to maintain good exercise practices. Sometimes they needed to do homework until late night. Students who attended morning school have more flexibility because they could have a walk or do other things after lunch. Exercise time for afternoon school students was limited. For students who believed that they had good exercise practices, they claimed it was because they kept a good timetable and had good time management.

In order to promote healthy exercise practices, students said that parents' involvement and encouragement, competitions, prizes for winning competitions, etc. would be effective means for achieving the goals. Students suggested that some exercise could be easily done in daily lives, like housework, walking, climbing stairs, etc. Students also recommended running, baseball, badminton and rope jumping for primary school students. They suggested that running could improve respiratory system, while baseball and badminton trained limbs coordination.

Secondary School Students

Secondary school students identified benefits of doing sufficient exercise as having better immune system, appetite, body mechanism, physical development, interpersonal relationship (through group activities), being slimmer and more energetic etc. Insufficient exercise would lead to obesity, fewer muscles and less energy, illnesses, jerking easily and lack of agility. Some students suggested that one should do exercise whenever time allows. Many said half to one hour a day of exercise was the optimal level. The amount of exercise needed varied for different individual. Students recommended that one should not over-exercise or do very intensive exercise. Before doing exercise, one should do warm-ups and should not eat too much. One should stop gradually and have enough water after exercise.

Female secondary school students had insufficient exercise in the past two weeks. Apart from schools' P.E. lessons or walking to school for some students, few girls exercised regularly. Some only did exercise during summer vacation. These girls were summer swimmers and cyclists. Some played badminton with parents and went swimming with friends on weekends. Only a few students invited others to exercise actively. One of the two students who claimed to be able to maintain sufficient exercise

was because she walked to school and often used stairs in school. Another girl said that she had interests in sports and had fixed exercise partners. Barriers identified were too much homework and no time or interest in doing exercise. The girls wanted to change and do more exercise if possible.

The boys' exercise practices were much better than the girls. Except for one boy who rarely did exercise, others exercised frequently in the last two weeks. They usually played football, basketball and table-tennis, went hiking, running, swimming and cycling. One of the students needed to use stairs every day as there was no elevator in the building which he lived. The boys usually did exercise with other people and many would invite other people to do exercise together. Their exercise partners included schoolmates, friends and cousins. No one mentioned doing exercise with parents. The boys in this age group believed that they could maintain healthy exercise practices because the school encouraged them to engage in physical activities. They earned points for presents if they participated in physical activities in school. Also, they always played basketball and had football training in school. Nothing to do at home was also a reason for them to do more exercise. Although the boys already did lots of exercise, they would still like to improve their exercise practices. They believed they needed to spend more time on running, playing ball games, jumping, cycling, etc. Demanding schoolwork was a barrier for the boys to do exercise.

Students suggested that trying out different sports would help people to spend time and develop interests in sports. Schools' promotion and involvement, like having a reward system, doing compulsory exercise, arranging competitions, assigning projects or assignments on related issues, etc., were considered by students as important to encourage them to do more exercise. They suggested that schools should give fewer exams and homework in order to allow students to have more time for exercise. Having exercise partners, using creative and funny dramas, enlarging school playgrounds, etc. could also help to achieve such goal.

Part 3: Working Groups

Working Males

Working male participants identified that doing sufficient amount of exercise would increase the metabolic rate. Although muscles would be a bit tired after the exercise, improved blood circulation would carry more oxygen to the brain, which would make one more awake and have a clear mind. Doing exercise could also release stress and decrease the chance to get sick. Participants suggested that if one did not do enough exercise, not only would the concentration and immune system be affected, one would also look pale and weak. The body would become fat and accumulate lots of toxins. Some suggested that 15 to 30 minutes of aerobic exercise should be done every day. They believed that doing exercise on weekends only would increase the chance of injuries. Others claimed that there was no need to do exercise daily. Exercise 1 to 3 times weekly and for longer hours each time would be enough. They said that simple exercise like stretching exercises and more intensive exercise like cycling and playing

ball games were all good for the body. Participants advised that when doing exercise, one should eat properly, monitor heart rate, do warm-ups, be careful about the suitability of the environment and surrounding, consider his/her age and ability, increase intensity gradually, and have an exercise partner for safety reasons. Some participants suggested that it would be better to do exercise in the morning as plants released carbon dioxide at night.

Participants usually would go for a walk or take a nap after lunch. Older male participants tended to have better exercise practices than younger ones. The older ones had regular exercise practices, like walking, climbing lots of stairs, getting off public vehicles a few stations prior to the destination and doing Tai Chi for 30 minutes daily. In the past two weeks, some younger participants played squash, boxing, badminton, and went for cycling and jogging. A participant said he maintained some level of exercise because he rushed to work almost every day due to waking up late. Another participant pointed out that his company required all staff to do a few minutes of exercise before work. Those who did exercise on weekends usually did so for two hours. Weekend afternoon, evening and night were also their times for exercise. Some participants said they were too busy in these two weeks and did not engage in any physical activity. Many participants engaged in physical activity by themselves because sometimes it could be very difficult to meet up with others who had the same schedule of doing exercise, and doing exercise should not be a habit that was dependent on other people. Many forms of exercise could be done alone and hence they did not need a companion. Some would do exercise with others depending on the nature of the activity.

Some participants stated that they could maintain a certain level of exercise because doing exercise had become part of their daily routine and they felt good after doing exercise. They set goals for themselves to achieve in order to keep the good exercise practices. Other participants claimed they were unable to do sufficient amount of exercise because they were too busy and tired after work. Some participants said that they had no extra time for exercise because of work, school, and dating. There were participants who had no interest in exercise or had difficulties in booking suitable facilities. Gathering other people for group activities (e.g. basketball) was also not easy. Apart from a few participants who exercised regularly, others wanted to improve their current exercise practices. They really hoped that they could do more exercise but they said it would be very hard for them to do so because of time constraint and the great demand from work. Participants said they were trying to learn about the benefits of doing exercise and making it as an interest or habit would help them to increase the frequency. They also believed that negative comments from other people (e.g. you are fat), the whole culture, employers giving out incentives for doing exercise, the desire to be healthy and stronger, friends' cooperation in booking facilities, etc. would increase people's participation in physical activities. As working people were always busy, simple exercise like stretching exercises and climbing the stairs should be introduced. Asking boyfriends or girlfriends to do exercise together instead of watching movies could be a good way to motivate people to exercise. Exercise recommended by participants included jogging (for improved cardiovascular functioning), Tai Chi (suitable for all ages), hiking (for breathing fresh air), swimming (for whole body training), badminton (for family involvement) and windsurfing (for burning the energy). Participants also

added that one must be persistent in order to have good exercise practices.

Working Females

Many working females suggested that doing exercise for 15 to 30 minutes for 3 to 4 times a week should be sufficient to maintain a healthy body. The exercise should be aerobic exercise, like jogging, and not just simple stretching or relaxation exercises. They realised that doing sufficient exercise would help to improve blood circulation, cardiovascular functioning, digestion, the backbone and the physical appearance, and dispel negative emotions. Other benefits included burning fat, releasing stress, relaxing joints and tendons, and feeling younger, more energetic and awake. If a person did not do enough exercise, one would feel tired and get sick easily. Also, one would be clumsy and become fat. One had to do warm-up exercise and not to eat too much before exercise. Eating should be avoided within the first 2 hours after the exercise; otherwise, one would become fat. Participants pointed out that one should pay attention to the weather and should not exceed one's limits.

Some female participants rarely did exercise in the past 2 weeks because they either had no interest in exercise or were too busy. They needed to take care of their children and had a heavy workload. Another barrier was inadequate facilities near the living area. Some complained that the recreation centres run by the Government were often unavailable due to heavy demands of the community. Other participants generally engaged in some sort of physical activities. Jumping ropes, getting off public vehicles a few stations prior to the destination, hiking, walking, doing yoga, etc. were common examples. Some participants climbed stairs every day and some did aerobic exercise 3 to 4 times a week. They usually did exercise after work or on weekends and most of them did exercise by themselves unless they went for ball games or hiking. Some would walk in the afternoon but others started working immediately after lunch. They pointed out that their persistence in doing exercise was an investment on health and they also wanted to be slim. Other participants reported that their enabling factors for doing exercise included proximity of sports facilities to their working or living areas and encouragement from boss. The fear of getting fat was a factor influencing female participants as well.

Many female participants expressed the hope that they could do more exercise. However, like working males, they stated that persistence in doing regular exercise was difficult. They suggested that walking, doing housework, using stairs, etc., would be incorporated into daily lives as exercise.

Part 4: The Elderly

The elderly identified many advantages of having sufficient exercise. They knew that exercise could make one more agile, more relaxed, and have better circulation. Exercise is good for the joints and tendon too. A participant said she had no arthritis or pain problems after her daily cycling practice. She also felt being lighter. Not doing sufficient exercise would increase the rate of ageing and deterioration. One would have

a big belly as well. The elderly realised that caution was necessary when doing exercise. One should consider one's own ability and not overwork one's body. Vigorous exercise is not suitable for the elderly because falling down and twisting are dangerous for them. Participants said that it is important to have a coach for doing exercise properly. They suggested that half to one hour of exercise per day should be sufficient for the elderly.

These elderly participants generally had good exercise practices in the last 2 weeks. They usually did exercise regularly in the morning. The frequency of exercise ranged from daily to 3 times a week. Participants said they usually did exercise by themselves and rarely invited friends to do exercise together. The types of exercise they did alone were walking, stretching, stepping, cycling, housework, a stroll along the promenade in the morning, etc. Yet, a few of these participants also actively enrolled in exercise classes (e.g. Tai Chi classes) and did exercise with other people in the same community centre. Participants would not have a nap after lunch. They would go for a walk instead. They claimed themselves as having maintained good exercise practices. A few said they would like to do more exercise. The barriers of doing exercise were distraction by other people or things when doing exercise at home, and the time needed for taking care of the family.

The elderly suggested that doing exercise was not something difficult to achieve. Exercises like twisting the towel and stretching a rubber band, housework, walking, food shopping, Tai Chi, yoga, cycling, hiking, etc. are all good exercise for the aged and some of them are easy to do at home. Some participants also warned that the elderly must exercise slowly and should not do stairs climbing since it is not good for the knees.

Health Messages and Information

Part 1: Target Groups of Parents

Parents of Pre-Primary School Students

Health messages and information received by parents usually came from newspaper, magazines, pamphlets, milk formula companies, Maternal and Child Health Centres, friends, schools, libraries, internet, etc. Their children also obtained such information from pamphlets, schools, teachers, doctors and parents. Parents suggested that T.V. (especially during dinner time), schools, direct mails, internet, supermarkets and advertisements on transportations would be the most effective channels to deliver health messages. Promotion to children should be lively and creative to arouse children's interest.

Parents of Primary School Students

Parents learned about health messages and information from the pamphlets their child brought back from school. Other sources were newspapers, food and health magazines, T.V., radio, hospital, clinics, internet and books. Children usually obtained such information through their parents, schools, and T.V. Parents believed that teachers and schools would be more effective for delivering health information to children. Using

cartoon idols as role models would work on children as well. T.V., media, advertisements on transportation, clinics and doctors are good channels.

Parents of Secondary School Students

Parents received health messages and information mostly from T.V., books, newspapers, pamphlets from school, community centres, nurses and doctors, health talks, internet, magazines, friends, etc. They also received related health information from their children. A few parents said their child would “teach” them the knowledge after learning it from school. Their child usually obtained health messages and information from friends, schoolmates, parents, internet, schools, and T.V. Parents believed that idols like actors and pop stars, T.V., radio, health talks organised in schools, schools’ curriculum and activities, parents, multimedia advertising on buses, etc. are useful channels for delivering health messages and information to students. Parents did not think that current promotions were sufficient. Health education should be done when children were still very young and approaches adopted must be creative to catch their attention. Using project learning in school for health-related topics and having health series on T.V. would be effective for increasing students’ knowledge and awareness.

Part 2: Target Groups of Students

Primary School Students

T.V. (ETV), internet, radios, clinics, doctors, parents, teachers and school were channels where students obtained health messages and information. Students believed that emails, radios, T.V., pamphlets and health talks should be effective channels to deliver health-related information.

Secondary School Students

Secondary school students received health information from a variety of channels, including T.V., radio, internet, books, magazines, advertisements, pamphlets, games, schools, health talks, the Department of Health hotlines, clinic, parents and Home Economics lessons. Students stated that slogan, advertisements, health talks, dramas, lessons, multimedia advertising on buses and T.V. are effective channels for students. The use of T.V. to deliver health messages should include humorous idols, like comedians, in order to enhance memory of the content. Delivery of health messages must be done in a creative way. Boring presentation, especially health talks, would scare students away. Students recommended the Department of Health to use APIs instead of pamphlets because APIs are lively and vivid. Using pamphlets was a waste of paper.

Part 3: Working Groups

Working Males

Internet, emails, online discussion forum, the mass media, the Department of Health, pamphlets, Hospital Authority, posters, friends and newspapers were channels where working males obtained health information. They suggested that company involvement, for example, arranging intra- and inter-company competitions, would be a useful means for delivering messages to working people because many people devoted a lot of time in their work. Emails and posters circulated in the office were also useful means for disseminating health messages. Information promoted through the mass media (e.g. T.V., radio) could reach people of all levels. Civic education should also be done at a young age.

Working Females

Working females obtained health information from various means, including MTR stations, books, magazines, newspapers, special topics on T.V., friends, doctors, health talks, websites, etc. They complained about not having enough health-related programmes on T.V. If the Government would like to increase people's awareness on healthy eating and doing sufficient exercise, it should broadcast related shows and APIs more frequently. The internet would also be a good channel. To attract more attention, actors or singers could be used to do the promotion. Different pamphlets and talks should be used for different target audiences. Displaying posters in community centres, offices and government departments should yield desirable results.

Part 4: The Elderly

The elderly usually obtained health messages and information from community centres, radio, health talks, T.V., newspapers, etc. They believed that dissemination through the mass media, community centres for the elderly, talks and functions organised by the Department of Health, etc. would be most effective for promoting health information. A few also suggested that more promotion should be arranged for males since they were likely to be the ones with poor dietary and exercise practices.

Chapter 4 Conclusion and Recommendations

Conclusion

Dietary Practices

Quantitative Findings

This study found that the participants daily consumption of fruits and vegetables were less than the level recommended by the Department of Health, which is 2 servings of fruits and 3 servings of vegetables. Only 9 people (5.3%) out of all 171 participants had achieved these recommended levels.

Pre-primary school students were most likely to have 3 regular meals per day. Over 90% of parents claimed that their child had this practice. In contrast, secondary school students were less likely to have 3 meals regularly and take breakfast every day. Nearly half of them (45%) skipped breakfast or had no breakfast most of the time.

Pre-primary school students and primary school students either had lunch prepared by their school or their parents, while secondary school students usually had school lunch or ate out. Half of the working females would pack lunch to work but there were more working males who chose to eat outside than those who brought lunch to work. The elderly usually had lunch at home.

In general, the elderly were having healthier dietary practices than participants of other target groups. The elderly were more likely to eat at home and have a lower consumption of sugary food, snacks and deep-fried food. They always had breakfast and 3 regular meals per day.

Qualitative Findings

Parents, students and the elderly generally had good knowledge about the benefits of healthy eating and consequences of poor dietary practices. Homework and exams, temptation of snacks and unhealthy food, passive consumption of fruits, bad living habits, peer's influence, irregular meals and skipping breakfast, food preference, etc. seemed to be the barriers to having healthy dietary practices for students. Parents would talk to their child about healthy eating but they also said they had less control over their child's diet when the child got older. Older students in general had more dietary problems. Many of them would like to change or improve their dietary practices. Parents and students generally agreed that encouragement and praise, incentives, schools' promotion, parents' education and involvement, healthy dietary practices of the family, creative cooking styles, promotion through the mass media, etc. would help to promote and motivate students to eat healthily.

For the working adults, they also had general knowledge of healthy dietary practices although some of them mixed up the levels of the food pyramid. The problems of unhealthy eating were usually linked to irregular working hours, long working hours, skipping breakfast, eating out for lunch, not consuming enough vegetables, passive

consumption of fruits, colleagues' and peer's influence, snack consumption, having business meals, overeating, etc. Older working participants tended to have a healthier diet than younger ones. Females were also more health-conscious and healthier in their dietary habits than males. Packing lunch to work was more common among working females than males but many participants did not have this practice. Half of the females believed that they had good dietary practices and they suggested that family cooperation and coordination were important. Other females and many males hoped to improve their eating habits by eating regularly and properly, having earlier dinner, reducing snack consumption and consuming more fruits and vegetables, etc. However, they said it would be very hard for them to achieve such a goal. Working adults suggested that family, friends and colleagues could positively affect their dietary practices. Also, making healthy dietary practices a habit, using friends' sickness as a reminder, the Government's promotion, employers' involvement, etc. were thought to be useful for promoting good dietary practices.

The elderly usually had 3 regular meals a day and always ate at home. Most of them believed that their dietary practices were good because they rarely overate and seldom had sugary food, snacks and fried food. They realised that they should not overeat fruits because of the high sugar content of fruits. Many believed that retaining their current dietary practices should be appropriate. A few said they would like to change because they preferred fried food, preserved food and fatty meat, overate when eating out and consumed few fruits. They suggested that health talks, community centres, clinics, doctors and nurses were effective means to promote healthy dietary practices.

Exercise Practices

Quantitative Findings

More than 80% of pre-primary school students and primary school students engaged in 20-minute aerobic exercise at least once a week. However, secondary school students' participation in exercise was much less. Only about half of them did that level of exercise. A similar pattern was found for students' usual energy output. Over half of the pre-primary school students and primary school students had a medium level of physical energy output but for many secondary school students, their physical energy output was at a low level.

Compared to pre-primary and primary school students, working males and females exercised much less. Over two-thirds of the working groups had usual physical energy output at a minimal level. Working males in general were a little better than working females in terms of their exercising habits. They attributed the problem to the long and/or irregular working hours.

Over 50% of the elderly participants had 20-minute aerobic exercise at least once a week. Their usual physical energy output was greater than that of the working group and secondary school students. Almost 60% had a medium level of energy output in their daily lives.

Qualitative Findings

Apart from the P.E. lessons in schools, parents of pre-primary school and primary school students would try to let their child engage in more physical activities after school, before or after dinner and on weekends. Some parents suggested that schools' P.E. lessons were not sufficient. Other parents complained that their child was lazy or used computers for long time. Parents of secondary school students were less likely to do exercise with their child because children at this stage preferred to exercise alone or with their friends. Most parents and students agreed that 20 to 30 minutes of exercise a day should be enough for maintaining a healthy body. The barriers for having good exercise practices were heavy schoolwork, laziness of children, limited interests in sports, lack of time of parents and inaccessibility of facilities. Pre-primary school students and primary school students usually exercised regularly throughout the week but many secondary school students only exercised on weekends unless they were members of the schools' sports team. Many believed that more exercise should be needed for health. Fewer exams and homework, more facilities near the living area, parents' involvement, schools' promotion, sports competitions, more P.E. lessons, friends' influence, encouragement, incentives, exercise partners, creative promotions, etc. were enabling factors to increase the amount of exercise of students.

For the working adults, some believed that doing 15 to 30 minutes of exercise daily was sufficient, while others suggested that doing exercise 3 times a week and doing it for a longer period each time should be enough. They suggested that the exercise should be aerobic exercise instead of simple stretching or relaxation exercises. Working adults tended to do exercise by themselves after work. Sometimes they exercised with other people but that would usually be on weekends. Older working participants had better exercise practices than younger ones. Some working participants could maintain a sufficient amount of exercise but many were unable to do so due to long working hours, tiredness after work, time allocated to other things, unavailability of facilities, etc. Many would like to exercise more frequently but they agreed that it was difficult to achieve. They believed that less demand from work, employers' involvement and encouragement, setting goals, making exercise a habit, Government's promotion, having exercise partners, availability and proximity of facilities, incentives, friends' cooperation, etc. would increase participation in physical activities.

The elderly usually did exercise because of health reasons. Many said exercise could resolve their pain problems. The elderly usually exercised alone in the morning and in the afternoon. Some enrolled in exercise classes and exercised with other elderly. The elderly realised that they should not do vigorous exercise and the amount should not exceed the limit of which their bodies could stand to avoid injuries. Many claimed that they had good exercise practices because some of them exercised daily and others exercised 3 times a week. Even so, a few of the elderly participants still wanted to do more exercise. The barriers of exercising included distractions by other people when doing exercise at home and the time spent on taking care of their family. Pleasure and health improvement were the motivators.

Health Messages and Information

Participants generally obtained health messages and information from T.V., radio, newspapers, books, magazines, internet, pamphlets, clinics, doctors, government departments, health talks, multimedia advertising on buses, community centres, etc. Parents also received health messages from schools, whereas children got such information from parents, schools and teachers as well. Participants believed that mass media, the internet, health talks, civic education, schools, creative health series and APIs, project learning for students, advertisements on transportation, etc. would be good means to achieve desirable results. The messages should be target-specific.

Recommendations

1. In view of poor dietary practices of students, especially secondary school students, schools should select healthier school lunch providers that provide healthier food. Lunch sets should include more fruits and vegetables. Less oil, salt and sugar should be used. Healthier snacks like dried fruits should be available in schools' tuck shop.
2. School promotion and encouragement are important as students spend one-third of their time in schools and teachers are significant role models to many students. Schools should arrange more programmes, activities and competitions to increase students' knowledge, awareness and practices in the behaviours for healthy living.
3. Community centres should have more activity classes in the morning to cater for the needs of primary school students attending afternoon schools.
4. Besides school education, family education and coordination are also important. Parents should enrich their own knowledge and be the role models for their child.
5. Great demand from work is the major hindrance for the working groups to have healthy dietary and exercise practices. If employers can offer incentives to employees, do more promotions in the workplace, for example, displaying related posters in the workplace, making health pamphlets available to staff, arranging hiking activities, etc., and make healthy practices to be part of the corporate culture, employees would be more likely to develop healthy dietary and exercise practices. Light exercise, like going for a walk, simple stretching exercises, Tai Chi, etc., is suitable after eating.
6. The elderly rarely go far from their living community. Promotion campaigns and health talks for the elderly should be carried out in community centres and local clinics.
7. The mass media, including T.V., radio, newspaper, internet, etc., is a good way to publicise and disseminate health information to the public because it can easily reach all levels of people in Hong Kong. In fact, many people did obtain health information from these channels.
8. Consumption of snacks is common for all groups of people, except for the elderly. The Government can advertise and educate the public to control snack consumption and introduce them to healthier snack selections.



THE UNIVERSITY OF HONG KONG
SOCIAL SCIENCES RESEARCH CENTRE

香港大學
社會科學研究中心



**A QUALITATIVE STUDY ON
DIETARY AND EXERCISE PRACTICES OF
PEOPLE IN HONG KONG**

Appendices

Commissioned by

**Central Health Education Unit
Department of Health**



July 2005

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Appendix A Demographic Questionnaires

Target Groups of Parents

香港人的飲食和運動習慣 – 幼稚園學生家長背景問卷

1. 請問你的性別是:

1. 男
2. 女

2. 請問你的年齡是: _____歲

3. 請問你小朋友的性別是:

1. 男
2. 女

4. 請問你小朋友的年齡是: _____歲

5. 請問你小朋友的年級是:

1. 幼稚園一年級
2. 幼稚園二年級
3. 幼稚園三年級

6. 請問你的教育程度?

1. 無受過任何正規教育/幼稚園
2. 小學
3. 初中(中一至中三)
4. 高中(中四至中五)
5. 預科(中六至中七/工業學院)
6. 大專: 非學士學位
7. 大學或以上
8. 不清楚

7. 請問你的職業是:

1. 經理及行政人員
2. 專業人士
3. 輔助專業人士
4. 文員
5. 服務工作及商店銷售人士
6. 工藝及有關人士
7. 機台及機器操作員及裝配員
8. 非技術工人
9. 漁農業熟練工人及不能分類的職業
10. 自僱人士
11. 失業／待業
12. 退休人士
13. 家庭主婦
14. 學生
15. 拒絕回答
16. 如不能分類，填上職業_____

8. 請問你是否為你小朋友預備校內的午餐/茶點還是學校會預備?

1. 我預備午餐
2. 學校預備午餐
3. 在學校小食部購買

9. 請問你小朋友有沒有食零食的習慣?

1. 經常
2. 間中
3. 很少
4. 沒有

10. 請問你小朋友每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次
2. 每星期一次
3. 每星期兩次
4. 每星期三次或以上

11. 請問你小朋友的體力運動量是:

1. 極少體力活動
2. 輕微體力活動
3. 中等體力活動
4. 大量體力活動

12. 請問你小朋友有否每年檢查身體?

1. 有
2. 無

香港人的飲食和運動習慣 – 小學生家長背景問卷

1. 請問你的性別是:

1. 男
2. 女

2. 請問你的年齡是: _____歲

3. 請問你小朋友的性別是:

1. 男
2. 女

4. 請問你小朋友的年齡是: _____歲

5. 請問你小朋友的年級是:

- | | |
|-----------------------------------|-----------------------------------|
| 1. <input type="checkbox"/> 小學一年級 | 5. <input type="checkbox"/> 小學五年級 |
| 2. <input type="checkbox"/> 小學二年級 | 6. <input type="checkbox"/> 小學六年級 |
| 3. <input type="checkbox"/> 小學三年級 | |
| 4. <input type="checkbox"/> 小學四年級 | |

6. 請問你的教育程度?

1. 無受過任何正規教育/幼稚園
2. 小學
3. 初中(中一至中三)
4. 高中(中四至中五)
5. 預科(中六至中七/工業學院)
6. 大專: 非學士學位
7. 大學或以上
8. 不清楚

7. 請問你的職業是:

1. 經理及行政人員
2. 專業人士
3. 輔助專業人士
4. 文員
5. 服務工作及商店銷售人士
6. 工藝及有關人士

7. 機台及機器操作員及裝配員
8. 非技術工人
9. 漁農業熟練工人及不能分類的職業
10. 自僱人士
11. 失業／待業
12. 退休人士
13. 家庭主婦
14. 學生
15. 拒絕回答
16. 如不能分類，填上職業_____

8. 請問你是否為你小朋友預備校內的午餐還是學校會預備？

1. 我預備午餐
2. 學校預備午餐
3. 在學校小食部購買

9. 請問你小朋友有沒有食零食的習慣？

1. 經常
2. 間中
3. 很少
4. 沒有

10. 請問你小朋友每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次
2. 每星期一次
3. 每星期兩次
4. 每星期三次或以上

11. 請問你小朋友的體力運動量是:

1. 極少體力活動
2. 輕微體力活動
3. 中等體力活動
4. 大量體力活動

12. 請問你小朋友有否每年檢查身體？

1. 有
2. 無

香港人的飲食和運動習慣 – 中學生家長背景問卷

1. 請問你的性別是:

1. 男
2. 女

2. 請問你的年齡是: _____歲

3. 請問你小朋友的性別是:

1. 男
2. 女

4. 請問你小朋友的年齡是: _____歲

5. 請問你小朋友的年級是:

- | | |
|-----------------------------------|-----------------------------------|
| 1. <input type="checkbox"/> 中學一年級 | 5. <input type="checkbox"/> 中學五年級 |
| 2. <input type="checkbox"/> 中學二年級 | 6. <input type="checkbox"/> 中學六年級 |
| 3. <input type="checkbox"/> 中學三年級 | 7. <input type="checkbox"/> 中學七年級 |
| 4. <input type="checkbox"/> 中學四年級 | |

6. 請問你的教育程度?

1. 無受過任何正規教育/幼稚園
2. 小學
3. 初中(中一至中三)
4. 高中(中四至中五)
5. 預科(中六至中七/工業學院)
6. 大專: 非學士學位
7. 大學或以上
8. 不清楚

7. 請問你的職業是:

1. 經理及行政人員
2. 專業人士
3. 輔助專業人士
4. 文員
5. 服務工作及商店銷售人士
6. 工藝及有關人士

7. 機台及機器操作員及裝配員
8. 非技術工人
9. 漁農業熟練工人及不能分類的職業
10. 自僱人士
11. 失業／待業
12. 退休人士
13. 家庭主婦
14. 學生
15. 拒絕回答
16. 如不能分類，填上職業_____

8. 請問你是否為你小朋友預備校內的午餐還是學校會預備？

1. 我預備午餐
2. 學校預備午餐
3. 在學校小食部購買
4. 外出用膳(如到校外餐廳、快餐店等)

9. 請問你小朋友有沒有食零食的習慣？

1. 經常
2. 間中
3. 很少
4. 沒有

10. 請問你小朋友每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次
2. 每星期一次
3. 每星期兩次
4. 每星期三次或以上

11. 請問你小朋友的體力運動量是:

1. 極少體力活動
2. 輕微體力活動
3. 中等體力活動
4. 大量體力活動

12. 請問你小朋友有否每年檢查身體?

1. 有
2. 無

Target Groups of Students

香港人的飲食和運動習慣 – 小學生背景問卷

1. 請問你的性別是:

- 1. 男
- 2. 女

2. 請問你的年齡是: _____歲

3. 請問你的年級是:

- 1. 小學一年級
- 2. 小學二年級
- 3. 小學三年級
- 4. 小學四年級
- 5. 小學五年級
- 6. 小學六年級

4. 請問你父親的教育程度是:

- 1. 無受過任何正規教育/幼稚園
- 2. 小學
- 3. 初中(中一至中三)
- 4. 高中(中四至中五)
- 5. 預科(中六至中七/工業學院)
- 6. 大專: 非學士學位
- 7. 大學或以上
- 8. 不清楚

5. 請問你父親現時的工作狀況是:

- 1. 受僱人士
- 2. 打理家務
- 3. 自僱人士
- 4. 失業人士
- 5. 退休人士
- 6. 其他 (請註明: _____)
- 7. 不清楚

6. 請問你母親的教育程度是:

1. 無受過任何正規教育/幼稚園
2. 小學
3. 初中(中一至中三)
4. 高中(中四至中五)
5. 預科(中六至中七/工業學院)
6. 大專：非學士學位
7. 大學或以上
8. 不清楚

7. 請問你母親現時的工作狀況是:

1. 受僱人士
2. 打理家務
3. 自僱人士
4. 失業人士
5. 退休人士
6. 其他 (請註明: _____)
7. 不清楚

8. 請問你的家人是否為你預備午餐還是學校為你預備午餐?

1. 家人預備午餐
2. 學校預備午餐
3. 在學校小食部購買

9. 請問你有沒有食零食的習慣?

1. 經常
2. 間中
3. 很少
4. 沒有

10. 請問你每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次
2. 每星期一次
3. 每星期兩次
4. 每星期三次或以上

11. 請問你的體力運動量是:

1. 極少體力活動
2. 輕微體力活動
3. 中等體力活動
4. 大量體力活動

12. 請問你有否每年檢查身體?

1. 有
2. 無

香港人的飲食和運動習慣 – 中學生背景問卷

1. 請問你的性別是:

1. 男
2. 女

2. 請問你的年齡是: _____ 歲

3. 請問你的年級是:

- | | |
|-----------------------------------|-----------------------------------|
| 1. <input type="checkbox"/> 中學一年級 | 5. <input type="checkbox"/> 中學五年級 |
| 2. <input type="checkbox"/> 中學二年級 | 6. <input type="checkbox"/> 中學六年級 |
| 3. <input type="checkbox"/> 中學三年級 | 7. <input type="checkbox"/> 中學七年級 |
| 4. <input type="checkbox"/> 中學四年級 | |

4. 請問你父親的教育程度是:

1. 無受過任何正規教育/幼稚園
2. 小學
3. 初中(中一至中三)
4. 高中(中四至中五)
5. 預科(中六至中七/工業學院)
6. 大專: 非學士學位
7. 大學或以上
8. 不清楚

5. 請問你父親現時的工作狀況是:

1. 在職
2. 打理家務
3. 自僱人士
4. 失業人士
5. 退休人士
6. 其他 (請註明: _____)
7. 不清楚

6. 請問你母親的教育程度是:

1. 無受過任何正規教育/幼稚園
2. 小學
3. 初中(中一至中三)
4. 高中(中四至中五)
5. 預科(中六至中七/工業學院)
6. 大專：非學士學位
7. 大學或以上
8. 不清楚

7. 請問你母親現時的工作狀況是:

1. 在職
2. 打理家務
3. 自僱人士
4. 失業人士
5. 退休人士
6. 其他 (請註明:_____)
7. 不清楚

8. 請問你(或家人)是否自己預備午餐還是吃外面的食物?

1. 自己/家人預備午餐
2. 學校預備午餐
3. 在學校小食部購買
4. 外出用膳(如到校外餐廳、快餐店等)

9. 請問你有沒有食零食的習慣?

1. 經常
2. 間中
3. 很少
4. 沒有

10. 請問你每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次
2. 每星期一次
3. 每星期兩次
4. 每星期三次或以上

11. 請問你的體力運動量是:

1. 極少體力活動
2. 輕微體力活動
3. 中等體力活動
4. 大量體力活動

12. 請問你有否每年檢查身體?

1. 有
2. 無

Working Groups

香港人的飲食和運動習慣 – 在職男性背景問卷

1. 請問你的年齡是: _____歲

2. 請問你的教育程度是:

1. 無受過正規教育
2. 小學或幼稚園
3. 初中程度(中一至中三)
4. 高中程度(中四至中五)
5. 預科程度(中六至中七/香港專業教育學院/其他職業訓練機構)
6. 大專：非學士學位
7. 大專：學士學位或以上(包括碩士/博士等)
8. 拒絕回答

3. 請問你現在的婚姻狀況是:

1. 未婚 (請跳答問題 5)
2. 已婚
3. 分居/離婚
4. 鰥寡
5. 同居
6. 拒絕回答

4. 請問你有多少個子女? _____個

5. 請問你的職業是:

1. 經理及行政人員
2. 專業人士
3. 輔助專業人士
4. 文員
5. 服務工作及商店銷售人士
6. 工藝及有關人士
7. 機台及機器操作員及裝配員
8. 非技術工人
9. 漁農業熟練工人及不能分類的職業
10. 自僱人士
11. 失業/待業
12. 退休人士

- 13. 學生
- 14. 拒絕回答
- 15. 如不能分類，填上職業_____

6. 請問你(或家人)是否自己預備午餐還是吃外面的食物?

- 1. 自己/家人預備午餐
- 2. 外出用膳
- 3. 不吃午餐

7. 請問你每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

- 1. 少於每星期一次
- 2. 每星期一次
- 3. 每星期兩次
- 4. 每星期三次或以上

8. 請問你的職業的體力運動量是:

- 1. 靜止體力活動 (如: 常坐於辦公室的工作)
- 2. 輕微體力活動 (如: 推銷員)
- 3. 中等體力活動 (如: 技術人員、餐廳服務員)
- 4. 大量體力活動 (如: 地盤工人)

9. 請問你有否每年檢查身體?

- 1. 有
- 2. 無

香港人的飲食和運動習慣 – 在職女性背景問卷

1. 請問你的年齡是: _____歲

2. 請問你的教育程度是:

1. 無受過正規教育
2. 小學或幼稚園
3. 初中程度(中一至中三)
4. 高中程度(中四至中五)
5. 預科程度(中六至中七/香港專業教育學院/其他職業訓練機構)
6. 大專：非學士學位
7. 大專：學士學位或以上(包括碩士/博士等)
8. 拒絕回答

3. 請問你現在的婚姻狀況是:

1. 未婚 (請跳答問題 5)
2. 已婚
3. 分居/離婚
4. 鰥寡
5. 同居
6. 拒絕回答

4. 請問你有多少個子女? _____個

5. 請問你的職業是:

1. 經理及行政人員
2. 專業人士
3. 輔助專業人士
4. 文員
5. 服務工作及商店銷售人士
6. 工藝及有關人士
7. 機台及機器操作員及裝配員
8. 非技術工人
9. 漁農業熟練工人及不能分類的職業
10. 自僱人士
11. 失業/待業
12. 退休人士
13. 家庭主婦
14. 學生

15. 拒絕回答

16. 如不能分類，填上職業_____

6. 請問你(或家人)是否自己預備午餐還是吃外面的食物?

1. 自己/家人預備午餐

2. 外出用膳

3. 不吃午餐

7. 請問你每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次

2. 每星期一次

3. 每星期兩次

4. 每星期三次或以上

8. 請問你的職業的體力運動量是:

1. 靜止體力活動 (如: 常坐於辦公室的工作)

2. 輕微體力活動 (如: 推銷員)

3. 中等體力活動 (如: 技術人員、餐廳服務員)

4. 大量體力活動 (如: 地盤工人)

9. 請問你有否每年檢查身體?

1. 有

2. 無

The Elderly

香港人的飲食和運動習慣 – 長者背景問卷

1. 請問你的性別是:

1. 男
2. 女

2. 請問你的年齡是: _____歲

3. 請問你的教育程度是:

1. 無受過正規教育
2. 小學或幼稚園
3. 初中程度(中一至中三)
4. 高中程度(中四至中五)
5. 預科程度(中六至中七/香港專業教育學院/其他職業訓練機構)
6. 大專：非學士學位
7. 大專：學士學位或以上(包括碩士/博士等)
8. 拒絕回答

4. 請問你現在的婚姻狀況是:

1. 未婚 (請跳答問題 6)
2. 已婚
3. 分居/離婚
4. 鰥寡
5. 同居
6. 拒絕回答

5. 請問你有多少個子女? _____個

6. 請問你的職業是:

1. 經理及行政人員
2. 專業人士
3. 輔助專業人士
4. 文員
5. 服務工作及商店銷售人士
6. 工藝及有關人士
7. 機台及機器操作員及裝配員

8. 非技術工人
9. 漁農業熟練工人及不能分類的職業
10. 自僱人士
11. 失業／待業
12. 退休人士
13. 家庭主婦
14. 學生
15. 拒絕回答
16. 如不能分類，填上職業_____

7. 請問你(或家人)通常是否自己預備午餐還是吃外面的食物?

1. 自己/家人預備三餐
2. 外出用膳
3. 一半一半

8. 請問你有沒有食零食的習慣?

1. 經常
2. 間中
3. 很少
4. 沒有

9. 請問你每星期會做多少次 20 分鐘或以上的帶氧運動 (如: 跑步、打網球、游泳等)?

1. 少於每星期一次
2. 每星期一次
3. 每星期兩次
4. 每星期三次或以上

10. 請問你的的體力運動量是:

1. 極少體力活動
2. 輕微體力活動
3. 中等體力活動
4. 大量體力活動

11. 請問你有否每年檢查身體?

1. 有
2. 無

Appendix B Dietary Practices Questionnaire

飲食問卷

請在各題中選擇一個最適合形容你最近的日常飲食習慣的答案，並加上“✓”號

(甲) 水果及蔬菜

1. 你平均每天會進食多少份量的水果（包括各種新鮮、雪藏、罐裝水果或果乾，但不包括果汁及以水果作材料的甜品，如芒果班戟和蘋果批等）？

1 份 相等於 1 個中型的水果（如橙、蘋果及梨）
或 1/2 個大型的水果（如香蕉、西柚及楊桃）
或 1 杯切粒或其他類形的水果（如哈密瓜、士多啤梨、車厘子）
或 1/4 杯果乾（如提子乾、西梅乾）

- 不吃水果 或 少於每天 1 份
 每天 1 份
 每天 2 份 或 以上

2. 你每天平均會喝多少杯鮮榨果汁（不包括加有糖份的果汁飲品）？

1 杯 相等於 6 安士(180 毫升)的鮮榨果汁（如鮮榨橙汁、鮮榨西瓜汁）

- 不喝鮮榨果汁 或 少於每天 1 杯
 每天 1 杯
 每天 2 杯 或 以上

3. 你平均每天會吃多少份量的蔬菜（包括各種新鮮、雪藏和罐裝的蔬菜，但不包括蔬菜汁）？

1 份 相等於 1 碗(容量約為 250 毫升)未經煮熟的蔬菜（如沙律中的西生菜、青瓜）
或 1/2 碗煮熟的蔬菜、瓜和根莖類（如菜心、節瓜、蕃茄、蘿蔔）
或 1/2 碗煮熟的菇類和豆類（如磨菇、眉豆、腰豆）

- 不吃蔬菜 或 少於每天 1 份
 每天 1 份
 每天 2 份
 每天 3 份 或 以上

4. 你每天會喝多少杯鮮榨蔬菜汁?

1 杯 相等於 6 安士(180 毫升)的鮮榨蔬菜汁 (如鮮榨甘筍汁)

- 不喝鮮榨蔬菜汁 或 少於每天 1 杯
- 每天 1 杯
- 每天 2 杯 或 以上

(乙) 其他食品

5. 你每天會進食多少份量的肉、魚和蛋類 ?

1 兩 相等於 1 個乒乓球般大小的肉、家禽、魚或海鮮 (如牛、豬、雞、
蝦、蟹)
或 1 隻雞蛋

- 不吃 或 少於每天 1 兩
- 每天 1 至 2 兩
- 每天 3 至 4 兩
- 每天 5 兩或以上

6. 你每天平均會進食多少豆類製品?

1 份 相等於 1/2 碗煮熟的豆類(如黃豆、眉豆、腰豆)
或 1 磚豆腐
或 1 杯豆漿(8 安士或 240 毫升)

- 不吃 或 少於每天 1/2 份
- 每天 1/2 份
- 每天 1 份
- 每天 2 份 或 以上

7. 你每天會吃多少奶類製品?

1 杯 相等於 8 安士(240 毫升)的鮮奶或乳酪
或 2 片芝士

- 不吃 或 少於每天 1 杯
- 每天 1 杯
- 每天 2 杯 或 以上

8. 你每天會吃多少煎炸或用大量油份炒的食物(如炸薯條,各式炒粉麵飯,咕嚕肉,天婦羅等)?

- 不吃 或 少於每天 1 次
- 每天 1 次
- 每天 2 次
- 每天 3 次 或 以上

9. 你每天會進食多少甜品或加入糖份的食品和飲品(如:汽水,雪糕,朱古力,糖果,蛋糕,菠蘿包或加糖的咖啡或奶茶)?

- 不吃 或 少於每天 1 次
- 每天 1 次
- 每天 2 次
- 每天 3 次 或 以上

(丙) 其他飲食習慣

10. 以下那一項最適合形容你吃正餐的習慣(不包括零食,下午茶及宵夜)?

- 每天定時吃早、午、晚三餐
- 每天都吃早、午、晚餐,但不定時
- 每天都定時進食,但只吃一至兩餐
- 每天進食正餐的次數都不同,且食無定時

11. 除正餐以外,你每天會進食多少次小食(包括零食,下午茶及宵夜)?

- 不吃 或 少於每天 1 次
- 每天 1 次
- 每次 2 次 或 以上

12. 以下那一項最適合形容你吃早餐的習慣?

- 不吃早餐
- 大部份時間都不吃早餐
- 大部份時間都吃早餐
- 每天都會吃早餐

13. 你平均每天有多少餐(包括早、午、晚餐、下午茶和宵夜) 是由自己或家人煮食的?

- 少於每天 1 餐
- 每天 1 餐
- 每天 2 餐
- 每天 3 餐 或 以上

Appendix C Interview Guidelines

Target Groups of Parents

香港人的飲食和運動習慣 — 幼稚園學生家長小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?請問你有否教你的小朋友有關健康的飲食習慣?
- 1.2 請問你知不知道小朋友有一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你的小朋友在過去七日的飲食習慣是怎樣?你可否描述一下?他是否會吃齊早午晚三餐?誰安排他在校內的食物(學校/父母預備)?通常(學校/你)會預備甚麼食物?
- 1.4 你的小朋友飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?你會怎樣處理小朋友拒絕吃健康的食物?
- 1.6 請問你有否要你的小朋友有健康的飲食習慣,而你認為你的小朋友是否能做到有健康的飲食習慣?如有,請問你覺得有甚麼可以令他保持健康的飲食習慣(如你選擇/控制他所有的飲食)?如沒有,請問你覺得有甚麼阻礙他去有健康的飲食習慣和食蔬菜生果的習慣(如偏食)?
- 1.7 請問你的小朋友覺得蔬菜和生果哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你的小朋友有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你的小朋友是否有需要改變或改善現有的飲食習慣?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處和對你的小朋友有甚麼影響?要做幾多運動才為之適量及能保持身體健康?請問你有否教你的小朋友有關做適量運動的好處?如不做適量的運動會有甚麼後果?
- 2.2 請問你認為小朋友做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期你的小朋友的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放學後/上學前/午飯時段/週末等)?
- 2.4 請問你的小朋友通常會和誰一起做運動(家人/同學/朋友/同輩)?
- 2.5 平日小朋友午飯後會做甚麼(行一陣、睡覺、玩)?
- 2.6 請問你有否要你的小朋友做適量運動,而你的小朋友是否能保持做適量運動的習慣?如可以,請問有甚麼可令你的小朋友保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙他做運動的習慣?
- 2.7 請問你認為有甚麼可以推動你的小朋友去做運動?

2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動給幼童(如游泳、做體操、踩單車等)?為什麼?

2.9 請問你覺得你的小朋友是否有需要改變或改善現在的運動習慣或運動量?

III. 健康資訊

3.1 請問你會從哪裡獲得有關小朋友的健康資訊和訊息(如電視宣傳短片、網站、海報、醫院、診所等)?你的小朋友會從哪裡獲得有關的健康資訊和訊息(家長、學校)?

3.2 請問你覺得哪種宣傳健康資訊的渠道會是最有效?

香港人的飲食和運動習慣 — 小學生家長小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)? 請問你有否教你的小朋友有關健康的飲食習慣?
- 1.2 請問你知不知道小朋友有一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你的小朋友在過去七日的飲食習慣是怎樣?你可否描述一下?他是否會吃齊早午晚三餐?誰安排他在校內的午餐(學校/父母帶午餐到學校/父母預備,自己帶返學)?
- 1.4 你的小朋友飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?小朋友有幾大的「話事權»? 你會怎樣處理小朋友拒絕吃健康的食物?
- 1.6 請問你認為你的小朋友是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令他保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙他去有健康的飲食習慣和食蔬菜生果的習慣?
- 1.7 請問你的小朋友覺得蔬菜和生果哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你的小朋友有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你的小朋友是否有需要改變或改善現有的飲食習慣?
- 1.10 請問你的小朋友曾否進行另類的飲食習慣(如食肉減肥法、高纖(低熱量)飲食、無糖飲食等)?請說明那種?為甚麼會有這樣的飲食習慣(因減肥)?(如因減肥,問參與者有關他和他的小朋友對自我形象(self-image)的看法)?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處和對你的小朋友有甚麼影響?要做幾多運動才為之適量及能保持身體健康?請問你有否教你的小朋友有關做適量運動的好處?如不做適量的運動會有甚麼後果?
- 2.2 請問你認為小朋友做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期你的小朋友的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放學後/上學前/午飯時段/週末等)?
- 2.4 請問你的小朋友通常會和誰一起做運動(家人/同學/朋友/同輩)?你的小朋友是否會主動約人做運動?
- 2.5 平日小朋友午飯後會做甚麼(行一陣、睡覺)?
- 2.6 請問你的小朋友是否能保持做適量運動的習慣?如可以,請問有甚麼可令你的小朋友保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙他做運動的習慣?
- 2.7 請問你認為有甚麼可以推動你的小朋友去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動給小學生(如游泳、做體操、踩單車等)?為甚麼?

2.9 請問你覺得你的小朋友是否有需要改變或改善現在的運動習慣或運動量?

III. 健康資訊

3.1 請問你會從哪裡獲得有關小朋友的健康資訊和訊息 (如電視宣傳短片、網站、海報、醫院、診所等)?你的小朋友會從哪裡獲得有關的健康資訊和訊息 (家長、學校)?

3.2 請問你覺得哪種宣傳健康資訊的渠道對小學生會是最有效?

香港人的飲食和運動習慣 — 中學生家長小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?請問你有否同你的小朋友講及/討論有關健康的飲食習慣?
- 1.2 請問你知不知道小朋友有一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你的小朋友在過去七日的飲食習慣是怎樣?你可否描述一下?他是否會吃齊早午晚三餐?誰安排他在校內的午餐(學校/父母帶午餐到學校/父母預備,自己帶返學/外出用膳)?
- 1.4 你的小朋友飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?小朋友有幾大的「話事權»?你會怎樣處理小朋友拒絕吃健康的食物?
- 1.6 請問你認為你的小朋友是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令他保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙他去有健康的飲食習慣和食蔬菜生果的習慣?
- 1.7 請問你的小朋友覺得蔬菜和生果哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你的小朋友有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你的小朋友是否有需要改變或改善現有的飲食習慣?
- 1.10 請問你的小朋友曾否進行另類的飲食習慣(如食肉減肥法、高纖(低熱量)飲食、無糖飲食等)?請說明那種?為甚麼會有這樣的飲食習慣(因減肥)?(如因減肥,問參與者有關他和他的小朋友對自我形象(self-image)的看法)?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處和對你的小朋友有甚麼影響?要做幾多運動才為之適量及能保持身體健康?請問你有否同你的小朋友有講及/討論有關做適量運動的好處?如不做適量的運動會有甚麼後果?
- 2.2 請問你認為小朋友做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期你的小朋友的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放學後/上學前/午飯時段/週末等)?
- 2.4 請問你的小朋友通常會和誰一起做運動(家人/同學/朋友/同輩)?你的小朋友是否會主動約人做運動?
- 2.5 平日小朋友午飯後(未開始上課之前)會做甚麼(行一陣、睡覺)?
- 2.6 請問你的小朋友是否能保持做適量運動的習慣?如可以,請問有甚麼可令你的小朋友保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙他做運動的習慣?
- 2.7 請問你認為有甚麼可以推動你的小朋友去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動給中學生(如游泳、做體操、踩單車等)?為甚麼?

2.9 請問你覺得你的小朋友是否有需要改變或改善現在的運動習慣或運動量?

III. 健康資訊

3.1 請問你會從哪裡獲得有關中學生的健康資訊和訊息 (如電視宣傳短片、網站、海報、醫院、診所等)?你的小朋友會從哪裡獲得有關的健康資訊和訊息 (家長、學校)?

3.2 請問你覺得哪種宣傳健康資訊的渠道對中學生會是最有效?

Target Groups of Students

香港人的飲食和運動習慣 — 小學生小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?
- 1.2 一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你在過去七日的飲食習慣是怎樣?你可否描述一下?是否會吃齊早午晚三餐?誰安排你校內的午餐(學校/父母帶午餐到學校/父母預備,自己帶返學)?
- 1.4 你的飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?
- 1.6 請問你認為你是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令你保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙你去有健康的飲食習慣和食蔬菜生果的習慣?
- 1.7 請問你認為蔬菜和生果比較,哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你是否有需要改變或改善你現有的飲食習慣?
- 1.10 請問你會否進行另類的飲食習慣(如食肉減肥法、高纖(低熱量)飲食、無糖飲食等)?請說明那種?為甚麼會有這樣的飲食習慣(因減肥)?(如因減肥,問參與者有關自我形象(self-image)的看法)?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處?如不做適量的運動會有甚麼後果?請問要做幾多運動才為之適量及能保持身體健康?
- 2.2 請問你認為做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放學後/上學前/午飯時段/週末等)?
- 2.4 請問你通常會是單獨或是會一大班人做運動?通常和誰一起做運動(家人/同學/朋友/同輩)?你是否會主動約人做運動?
- 2.5 平日午飯後(未開始上課之前)會做甚麼(行一陣、暗一陣)?
- 2.6 請問你是否能保持做適量運動的習慣?如可以,請問有甚麼可令你保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙你做運動的習慣?
- 2.7 請問你認為有甚麼可以推動你去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動(如游泳、做體操、踩單車等)?為甚麼?
- 2.9 請問你覺得你是否有需要改變或改善你現在的運動習慣或運動量?

III. 健康資訊

3.1 請問你會從哪裡獲得健康資訊和訊息（如電視宣傳短片、網站、海報、醫院、診所等）？

3.2 請問你覺得哪種宣傳健康資訊的渠道會是最有效？

香港人的飲食和運動習慣 — 中學生小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?
- 1.2 一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你在過去七日的飲食習慣是怎樣?你可否描述一下?你會否自備午餐返學?
- 1.4 你的飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?
- 1.6 請問你認為你是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令你保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙你去有健康的飲食習慣和食蔬菜生果的習慣?
- 1.7 請問你認為蔬菜和生果比較,哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你是否有需要改變或改善你現有的飲食習慣?
- 1.10 請問你會否進行另類的飲食習慣(如食肉減肥法、高纖(低熱量)飲食、無糖飲食等)?請說明那種?為甚麼會有這樣的飲食習慣(因減肥)?(如因減肥,問參與者有關自我形象(self-image)的看法)?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處?如不做適量的運動會有甚麼後果?請問要做幾多運動才為之適量及能保持身體健康?
- 2.2 請問你認為做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放學後/上學前/午飯時段/週末等)?
- 2.4 請問你通常會是單獨或是會一大班人做運動?你是否會主動約人做運動?
- 2.5 平日午飯後(未開始上課之前)會做甚麼(行一陣、暗一陣)?
- 2.6 請問你是否能保持做適量運動的習慣?如可以,請問有甚麼可令你保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙你做運動的習慣?
- 2.7 請問你認為有甚麼可以推動你去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動(如游泳、做體操、踩單車等)?為甚麼?
- 2.9 請問你覺得你是否有需要改變或改善你現在的運動習慣或運動量?

III. 健康資訊

- 3.1 請問你會從哪裡獲得健康資訊和訊息(如電視宣傳短片、網站、海報、醫院、診所等)?
- 3.2 請問你覺得哪種宣傳健康資訊的渠道會是最有效?

Working Groups

香港人的飲食和運動習慣 — 在職男性小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?
- 1.2 一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你在過去七日的飲食習慣是怎樣?你可否描述一下?是否每日都會食齊三餐?如不是,為甚麼?你會否自備午餐返工,為甚麼?如不吃午餐,為甚麼?
- 1.4 你的飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?
- 1.6 請問你認為你是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令你保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙你去有健康的飲食習慣和食蔬菜水果的習慣?
- 1.7 請問你認為蔬菜和生果比較,哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你是否有需要改變或改善你現有的飲食習慣?
- 1.10 請問你會否進行另類的飲食習慣(如食肉減肥法、高纖(低熱量)飲食、無糖飲食等)?請說明那種?為甚麼會有這樣的飲食習慣(因減肥/健康)?(如因減肥,問參與者有關自我形象(self-image)的看法)?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處?如不夠運動會有甚麼後果?請問要做幾多運動才為之適量及能保持身體健康?
- 2.2 請問你認為做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放工後/上班前/午飯時段/週末等)?
- 2.4 請問你通常會是單獨或是會一大班人做運動?你是否會主動約人做運動?
- 2.5 平日午飯後(未開始工作之前)會做甚麼(行一陣、暗一陣)?
- 2.6 請問你是否能保持做適量運動的習慣?如可以,請問有甚麼可令你保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙你做運動的習慣(如:加班(OT)、疲累等)?
- 2.7 請問你認為有甚麼可以推動你去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動(如游泳、做體操、踩單車等)?為什麼?
- 2.9 請問你覺得你是否有需要改變或改善你現在的運動習慣或運動量?

III. 健康資訊

3.1 請問你會從哪裡獲得健康資訊和訊息（如電視宣傳短片、網站、海報、醫院、診所等）？

3.2 請問你覺得哪種宣傳健康資訊的渠道會是最有效？

香港人的飲食和運動習慣 — 在職女性小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?
- 1.2 一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你在過去七日的飲食習慣是怎樣?你可否描述一下?是否每日都會食齊三餐?如不是,為甚麼?你會否自備午餐返工,為甚麼?如不吃午餐,為甚麼?
- 1.4 你的飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類?
- 1.6 請問你認為你是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令你保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙你去有健康的飲食習慣和食蔬菜水果的習慣?
- 1.7 請問你認為蔬菜和生果比較,哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你是否有需要改變或改善你現有的飲食習慣?
- 1.10 請問你會否進行另類的飲食習慣(如食肉減肥法、高纖(低熱量)飲食、無糖飲食等)?請說明那種?為甚麼會有這樣的飲食習慣(因減肥/健康)?(如因減肥,問參與者有關自我形象(self-image)的看法)?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處?如不夠運動會有甚麼後果?請問要做幾多運動才為之適量及能保持身體健康?
- 2.2 請問你認為做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動(放工後/上班前/午飯時段/週末等)?
- 2.4 請問你通常會是單獨或是會一大班人做運動?你是否會主動約人做運動?
- 2.5 平日午飯後(未開始工作之前)會做甚麼(行一陣、暗一陣)?
- 2.6 請問你是否能保持做適量運動的習慣?如可以,請問有甚麼可令你保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙你做運動的習慣(如:加班(OT)、疲累、照顧家庭等)?
- 2.7 請問你認為有甚麼可以推動你去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動(如游泳、做體操、踩單車等)?為什麼?
- 2.9 請問你覺得你是否有需要改變或改善你現在的運動習慣或運動量?

III. 健康資訊

- 3.1 請問你會從哪裡獲得健康資訊和訊息(如電視宣傳短片、網站、海報、醫院、診所等)?

3.2 請問你覺得哪種宣傳健康資訊的渠道會是最有效?

The Elderly

香港人的飲食和運動習慣 — 長者小組討論訪問大綱

I. 飲食習慣

- 1.1 請問你知不知道甚麼是健康飲食?你認為健康飲食包含了甚麼(食物金字塔)?
- 1.2 一個均衡和健康飲食習慣有甚麼好處?不健康飲食會有甚麼後果?
- 1.3 請問你在過去七日的飲食習慣是怎樣?你可否描述一下?是否每日都會食齊三餐?如不是,為甚麼?
- 1.4 你的飲食習慣中是肉類還是蔬菜生果較多?通常會是甚麼時候吃生果(早、午、晚餐、小食時間等)?每次大概份量多少?零食佔的份量有多少?
- 1.5 在家中誰會決定家庭的食物種類(你/子女/孫)?
- 1.6 請問你認為你是否有健康的飲食習慣?如有,請問你覺得有甚麼可以令你保持健康的飲食習慣?如沒有,請問你覺得有甚麼阻礙你去有健康的飲食習慣和食水果的習慣?
- 1.7 請問你認為蔬菜和生果比較,哪樣較好味?
- 1.8 請問你認為有甚麼可以推動你有一個健康的飲食習慣和食蔬菜生果的習慣?
- 1.9 請問你覺得你是否有需要改變或改善你現有的飲食習慣?

II. 運動習慣

- 2.1 請問你知不知做適量運動的好處?如不夠運動會有甚麼後果?請問要做幾多運動才為之適量及能保持身體健康?
- 2.2 請問你認為做運動有甚麼要注意及提防?
- 2.3 請問你過去兩星期的運動習慣是怎樣?是否常做運動?通常會在甚麼時候做運動?
- 2.4 請問你通常會是單獨或是會一大班人做運動?你是否會主動約人做運動?
- 2.5 平日午飯後(未開始工作(如家務)之前)會做甚麼(行一陣、睡一陣)?
- 2.6 請問你是否能保持做適量運動的習慣?如可以,請問有甚麼可令你保持做運動的習慣?如不可以,請問你覺得有甚麼會阻礙你做運動的習慣(如:風濕/行動不便)?
- 2.7 請問你認為有甚麼可以推動你去做運動?
- 2.8 請問你認為怎樣可以將運動融入日常生活中?你會推介哪種運動(如游泳、做體操、踩單車等)?為什麼?
- 2.9 請問你覺得你是否有需要改變或改善你現在的運動習慣或運動量?

III. 健康資訊

- 3.1 請問你會從哪裡獲得健康資訊和訊息(如電視宣傳短片、網站、海報、醫院、診所等)?
- 3.2 請問你覺得哪種宣傳健康資訊的渠道會是最有效?

Appendix D Frequency Tables

Target Groups of Parents

Parents of pre-primary school students

Gender of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	2	8.3	8.3	8.3
	Female	22	91.7	91.7	100.0
	Total	24	100.0	100.0	

Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	28	2	8.3	8.3	8.3
	30	3	12.5	12.5	20.8
	31	2	8.3	8.3	29.2
	32	2	8.3	8.3	37.5
	33	1	4.2	4.2	41.7
	34	2	8.3	8.3	50.0
	36	1	4.2	4.2	54.2
	37	3	12.5	12.5	66.7
	38	2	8.3	8.3	75.0
	39	1	4.2	4.2	79.2
	45	4	16.7	16.7	95.8
	57	1	4.2	4.2	100.0
	Total	24	100.0	100.0	

Gender of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	16	66.7	69.6	69.6
	Female	7	29.2	30.4	100.0
	Total	23	95.8	100.0	
Missing	99	1	4.2		
Total		24	100.0		

Age of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3	5	20.8	20.8	20.8
	4	6	25.0	25.0	45.8
	5	10	41.7	41.7	87.5
	6	3	12.5	12.5	100.0
	Total	24	100.0	100.0	

Class of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Kindergarten 1	7	29.2	29.2	29.2
	Kindergarten 2	7	29.2	29.2	58.3
	Kindergarten 3	10	41.7	41.7	100.0
	Total	24	100.0	100.0	

Education level of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary level	4	16.7	21.1	21.1
	Lower secondary level	6	25.0	31.6	52.6
	Upper secondary level	3	12.5	15.8	68.4
	Matriculation level	2	8.3	10.5	78.9
	Tertiary (non-degree) level	1	4.2	5.3	84.2
	Tertiary (degree) level or above	3	12.5	15.8	100.0
	Total	19	79.2	100.0	
Missing	99	5	20.8		
Total		24	100.0		

Occupation of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Service workers and shop sales workers	1	4.2	5.3	5.3
	Self-employed	2	8.3	10.5	15.8
	Housewife	14	58.3	73.7	89.5
	Refused to answer	2	8.3	10.5	100.0
	Total	19	79.2	100.0	
Missing	99	5	20.8		
Total		24	100.0		

School lunch

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Home prepares school lunch	11	45.8	45.8	45.8
	The school prepares school lunch	13	54.2	54.2	100.0
	Total	24	100.0	100.0	

Frequency of snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Often	2	8.3	8.3	8.3
	Sometimes	14	58.3	58.3	66.7
	Rarely	5	20.8	20.8	87.5
	Never	3	12.5	12.5	100.0
	Total	24	100.0	100.0	

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	3	12.5	12.5	12.5
	Once a week	5	20.8	20.8	33.3
	Twice a week	7	29.2	29.2	62.5
	Three times a week	9	37.5	37.5	100.0
	Total	24	100.0	100.0	

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy output	2	8.3	8.3	8.3
	Low level of physical energy output	8	33.3	33.3	41.7
	Medium level physical energy output	13	54.2	54.2	95.8
	High level of physical energy output	1	4.2	4.2	100.0
	Total	24	100.0	100.0	

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	13	54.2	54.2	54.2
	No	11	45.8	45.8	100.0
	Total	24	100.0	100.0	

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	4	16.7	16.7	16.7
	1 serving per day	14	58.3	58.3	75.0
	2 servings (or more) per day	6	25.0	25.0	100.0
	Total	24	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	17	70.8	70.8	70.8
	1 glass per day	4	16.7	16.7	87.5
	2 glasses (or more) per day	3	12.5	12.5	100.0
	Total	24	100.0	100.0	

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 serving per day	1	4.2	4.2	4.2
	1 serving per day	12	50.0	50.0	54.2
	2 servings per day	9	37.5	37.5	91.7
	3 servings per day	2	8.3	8.3	100.0
	Total	24	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	16	66.7	66.7	66.7
	1 glass per day	5	20.8	20.8	87.5
	2 glasses (or more) per day	3	12.5	12.5	100.0
	Total	24	100.0	100.0	

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 to 2 tael per day	16	66.7	76.2	76.2
	3 to 4 tael per day	5	20.8	23.8	100.0
	Total	21	87.5	100.0	
Missing	99	3	12.5		
Total		24	100.0		

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	7	29.2	33.3	33.3
	half serving per day	6	25.0	28.6	61.9
	1 serving per day	4	16.7	19.0	81.0
	2 servings (or more) per day	4	16.7	19.0	100.0
	Total	21	87.5	100.0	
Missing	99	3	12.5		
Total		24	100.0		

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 glass per day	17	70.8	81.0	81.0
	2 glasses per day	4	16.7	19.0	100.0
	Total	21	87.5	100.0	
Missing	99	3	12.5		
Total		24	100.0		

Daily stir-/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	14	58.3	66.7	66.7
	Once a day	5	20.8	23.8	90.5
	Twice a day	2	8.3	9.5	100.0
	Total	21	87.5	100.0	
Missing	99	3	12.5		
Total		24	100.0		

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	13	54.2	61.9	61.9
	Once a day	7	29.2	33.3	95.2
	Twice a day	1	4.2	4.8	100.0
	Total	21	87.5	100.0	
Missing	99	3	12.5		
Total		24	100.0		

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	21	87.5	91.3	91.3
	1 to 2 meals daily at regular hours	2	8.3	8.7	100.0
	Total	23	95.8	100.0	
Missing	99	1	4.2		
Total		24	100.0		

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	7	29.2	30.4	30.4
	Once a day	9	37.5	39.1	69.6
	Twice (or more) a day	7	29.2	30.4	100.0
	Total	23	95.8	100.0	
Missing	99	1	4.2		
Total		24	100.0		

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast most of the time	2	8.3	8.7	8.7
	Take breakfast most of the time	2	8.3	8.7	17.4
	Take breakfast daily	19	79.2	82.6	100.0
	Total	23	95.8	100.0	
Missing	99	1	4.2		
Total		24	100.0		

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 1 meal per day	2	8.3	8.7	8.7
	1 meal per day	3	12.5	13.0	21.7
	2 meals per day	6	25.0	26.1	47.8
	3 meals (or more) per day	12	50.0	52.2	100.0
	Total	23	95.8	100.0	
Missing	99	1	4.2		
Total		24	100.0		

Parents of primary school students

Gender of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	23	100.0	100.0	100.0

Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	32	1	4.3	4.3	4.3
	33	1	4.3	4.3	8.7
	35	4	17.4	17.4	26.1
	36	2	8.7	8.7	34.8
	38	1	4.3	4.3	39.1
	39	1	4.3	4.3	43.5
	40	1	4.3	4.3	47.8
	41	5	21.7	21.7	69.6
	42	1	4.3	4.3	73.9
	45	2	8.7	8.7	82.6
	48	3	13.0	13.0	95.7
	64	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Gender of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	12	52.2	52.2	52.2
	Female	11	47.8	47.8	100.0
	Total	23	100.0	100.0	

Age of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	6	2	8.7	8.7	8.7
	7	4	17.4	17.4	26.1
	8	3	13.0	13.0	39.1
	9	4	17.4	17.4	56.5
	10	6	26.1	26.1	82.6
	11	3	13.0	13.0	95.7
	12	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Class of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary 1	1	4.3	4.3	4.3
	Primary 2	7	30.4	30.4	34.8
	Primary 3	3	13.0	13.0	47.8
	Primary 4	6	26.1	26.1	73.9
	Primary 5	2	8.7	8.7	82.6
	Primary 6	4	17.4	17.4	100.0
	Total	23	100.0	100.0	

Education level of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary level	2	8.7	9.1	9.1
	Lower secondary level	8	34.8	36.4	45.5
	Upper secondary level	8	34.8	36.4	81.8
	Matriculation level	1	4.3	4.5	86.4
	Tertiary (degree) level or above	3	13.0	13.6	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Occupation of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Managers and administrators	1	4.3	4.5	4.5
	Clerks	5	21.7	22.7	27.3
	Service workers and shop sales workers	1	4.3	4.5	31.8
	Elementary occupations	1	4.3	4.5	36.4
	Skilled agricultural & fishery workers & occupation not classifiable	1	4.3	4.5	40.9
	Self-employed	2	8.7	9.1	50.0
	Housewife	11	47.8	50.0	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

School lunch

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Home prepares school lunch	10	43.5	45.5	45.5
	The school prepares school lunch	9	39.1	40.9	86.4
	The child purchases lunch from school tuckshop	1	4.3	4.5	90.9
	The child eats out	1	4.3	4.5	95.5
	5	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Frequency of snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Often	4	17.4	18.2	18.2
	Sometimes	17	73.9	77.3	95.5
	Rarely	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	5	21.7	21.7	21.7
	Once a week	4	17.4	17.4	39.1
	Twice a week	11	47.8	47.8	87.0
	Three times a week	3	13.0	13.0	100.0
	Total	23	100.0	100.0	

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy output	4	17.4	18.2	18.2
	Low level of physical energy output	5	21.7	22.7	40.9
	Medium level physical energy output	13	56.5	59.1	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	21	91.3	95.5	95.5
	No	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	6	26.1	26.1	26.1
	1 serving per day	14	60.9	60.9	87.0
	2 servings (or more) per day	3	13.0	13.0	100.0
	Total	23	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	15	65.2	68.2	68.2
	1 glass per day	4	17.4	18.2	86.4
	2 glasses (or more) per day	3	13.0	13.6	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 serving per day	1	4.3	4.3	4.3
	1 serving per day	10	43.5	43.5	47.8
	2 servings per day	11	47.8	47.8	95.7
	3 servings per day	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	17	73.9	73.9	73.9
	1 glass per day	5	21.7	21.7	95.7
	2 glasses (or more) per day	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 tael per day	3	13.0	13.6	13.6
	1 to 2 taels per day	10	43.5	45.5	59.1
	3 to 4 taels per day	9	39.1	40.9	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	4	17.4	18.2	18.2
	half serving per day	12	52.2	54.5	72.7
	1 serving per day	6	26.1	27.3	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	4	17.4	18.2	18.2
	1 glass per day	17	73.9	77.3	95.5
	2 glasses per day	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily stir-/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	18	78.3	81.8	81.8
	Once a day	3	13.0	13.6	95.5
	Twice a day	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	15	65.2	68.2	68.2
	Once a day	6	26.1	27.3	95.5
	Twice a day	1	4.3	4.5	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	15	65.2	71.4	71.4
	3 meals daily but taken irregularly	3	13.0	14.3	85.7
	1 to 2 meals daily at regular hours	2	8.7	9.5	95.2
	Irregular meals	1	4.3	4.8	100.0
	Total	21	91.3	100.0	
Missing	99	2	8.7		
Total		23	100.0		

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	12	52.2	57.1	57.1
	Once a day	9	39.1	42.9	100.0
	Total	21	91.3	100.0	
Missing	99	2	8.7		
Total		23	100.0		

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast at all	1	4.3	4.8	4.8
	No breakfast most of the time	3	13.0	14.3	19.0
	Take breakfast most of the time	8	34.8	38.1	57.1
	Take breakfast daily	9	39.1	42.9	100.0
	Total	21	91.3	100.0	
Missing	99	2	8.7		
Total		23	100.0		

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 meal per day	5	21.7	23.8	23.8
	2 meals per day	2	8.7	9.5	33.3
	3 meals (or more) per day	14	60.9	66.7	100.0
	Total	21	91.3	100.0	
Missing	99	2	8.7		
Total		23	100.0		

Parents of secondary school students

Gender of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	1	4.8	4.8	4.8
	Female	20	95.2	95.2	100.0
	Total	21	100.0	100.0	

Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	33	1	4.8	4.8	4.8
	36	1	4.8	4.8	9.5
	37	1	4.8	4.8	14.3
	39	1	4.8	4.8	19.0
	40	1	4.8	4.8	23.8
	41	2	9.5	9.5	33.3
	42	2	9.5	9.5	42.9
	43	4	19.0	19.0	61.9
	44	1	4.8	4.8	66.7
	45	1	4.8	4.8	71.4
	46	1	4.8	4.8	76.2
	47	1	4.8	4.8	81.0
	48	1	4.8	4.8	85.7
	50	1	4.8	4.8	90.5
	52	1	4.8	4.8	95.2
55	1	4.8	4.8	100.0	
Total		21	100.0	100.0	

Gender of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	9	42.9	50.0	50.0
	Female	9	42.9	50.0	100.0
	Total	18	85.7	100.0	
Missing	99	3	14.3		
Total		21	100.0		

Age of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	13	7	33.3	33.3	33.3
	14	5	23.8	23.8	57.1
	15	3	14.3	14.3	71.4
	16	5	23.8	23.8	95.2
	17	1	4.8	4.8	100.0
Total		21	100.0	100.0	

Class of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Secondary 1	2	9.5	9.5	9.5
	Secondary 2	9	42.9	42.9	52.4
	Secondary 3	5	23.8	23.8	76.2
	Secondary 4	2	9.5	9.5	85.7
	Secondary 5	3	14.3	14.3	100.0
Total		21	100.0	100.0	

Education level of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary level	6	28.6	28.6	28.6
	Lower secondary level	6	28.6	28.6	57.1
	Upper secondary level	7	33.3	33.3	90.5
	Matriculation level	2	9.5	9.5	100.0
	Total	21	100.0	100.0	

Occupation of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Managers and administrators	1	4.8	4.8	4.8
	Clerks	4	19.0	19.0	23.8
	Elementary occupations	3	14.3	14.3	38.1
	Housewife	13	61.9	61.9	100.0
	Total	21	100.0	100.0	

School lunch

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Home prepares school lunch	5	23.8	23.8	23.8
	The school prepares school lunch	4	19.0	19.0	42.9
	The child purchases lunch from school tuckshop	6	28.6	28.6	71.4
	The child eats out	6	28.6	28.6	100.0
	Total	21	100.0	100.0	

Frequency of snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Often	5	23.8	23.8	23.8
	Sometimes	13	61.9	61.9	85.7
	Rarely	3	14.3	14.3	100.0
	Total	21	100.0	100.0	

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	10	47.6	50.0	50.0
	Once a week	4	19.0	20.0	70.0
	Twice a week	3	14.3	15.0	85.0
	Three times a week	3	14.3	15.0	100.0
	Total	20	95.2	100.0	
Missing	99	1	4.8		
Total		21	100.0		

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy output	10	47.6	47.6	47.6
	Low level of physical energy output	3	14.3	14.3	61.9
	Medium level physical energy output	7	33.3	33.3	95.2
	High level of physical energy output	1	4.8	4.8	100.0
	Total	21	100.0	100.0	

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	17	81.0	81.0	81.0
	No	4	19.0	19.0	100.0
	Total	21	100.0	100.0	

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	7	33.3	33.3	33.3
	1 serving per day	11	52.4	52.4	85.7
	2 servings (or more) per day	3	14.3	14.3	100.0
	Total	21	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	14	66.7	70.0	70.0
	1 glass per day	6	28.6	30.0	100.0
	Total	20	95.2	100.0	
Missing	99	1	4.8		
Total		21	100.0		

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 serving per day	2	9.5	9.5	9.5
	1 serving per day	11	52.4	52.4	61.9
	2 servings per day	6	28.6	28.6	90.5
	3 servings per day	2	9.5	9.5	100.0
	Total	21	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	15	71.4	71.4	71.4
	1 glass per day	6	28.6	28.6	100.0
	Total	21	100.0	100.0	

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 to 2 tael per day	12	57.1	57.1	57.1
	3 to 4 tael per day	8	38.1	38.1	95.2
	5 tael (or more) per day	1	4.8	4.8	100.0
	Total	21	100.0	100.0	

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	8	38.1	38.1	38.1
	half serving per day	9	42.9	42.9	81.0
	1 serving per day	2	9.5	9.5	90.5
	2 servings (or more) per day	2	9.5	9.5	100.0
	Total	21	100.0	100.0	

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	6	28.6	28.6	28.6
	1 glass per day	13	61.9	61.9	90.5
	2 glasses per day	2	9.5	9.5	100.0
	Total	21	100.0	100.0	

Daily stir-/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	16	76.2	76.2	76.2
	Once a day	3	14.3	14.3	90.5
	Twice a day	2	9.5	9.5	100.0
	Total	21	100.0	100.0	

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	9	42.9	42.9	42.9
	Once a day	8	38.1	38.1	81.0
	Twice a day	3	14.3	14.3	95.2
	Three times (or more) a day	1	4.8	4.8	100.0
	Total	21	100.0	100.0	

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	13	61.9	72.2	72.2
	3 meals daily but taken irregularly	4	19.0	22.2	94.4
	Irregular meals	1	4.8	5.6	100.0
	Total	18	85.7	100.0	
Missing	99	3	14.3		
Total		21	100.0		

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	8	38.1	42.1	42.1
	Once a day	7	33.3	36.8	78.9
	Twice (or more) a day	4	19.0	21.1	100.0
	Total	19	90.5	100.0	
Missing	99	2	9.5		
Total		21	100.0		

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast at all	1	4.8	5.3	5.3
	No breakfast most of the time	2	9.5	10.5	15.8
	Take breakfast most of the time	7	33.3	36.8	52.6
	Take breakfast daily	9	42.9	47.4	100.0
	Total	19	90.5	100.0	
Missing	99	2	9.5		
Total		21	100.0		

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 1 meal per day	1	4.8	5.3	5.3
	1 meal per day	3	14.3	15.8	21.1
	2 meals per day	7	33.3	36.8	57.9
	3 meals (or more) per day	8	38.1	42.1	100.0
	Total	19	90.5	100.0	
Missing	99	2	9.5		
Total		21	100.0		

Target Groups of Students

Primary school students

Gender of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	9	39.1	39.1	39.1
	Female	14	60.9	60.9	100.0
	Total	23	100.0	100.0	

Age of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	6	1	4.3	4.3	4.3
	9	2	8.7	8.7	13.0
	10	5	21.7	21.7	34.8
	11	14	60.9	60.9	95.7
	12	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Class of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary 2	2	8.7	8.7	8.7
	Primary 4	2	8.7	8.7	17.4
	Primary 5	5	21.7	21.7	39.1
	Primary 6	14	60.9	60.9	100.0
	Total	23	100.0	100.0	

Education level of father

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary level	1	4.3	4.3	4.3
	Lower secondary level	1	4.3	4.3	8.7
	Upper secondary level	2	8.7	8.7	17.4
	Tertiary (non-degree) level	2	8.7	8.7	26.1
	Tertiary (degree) level or above	5	21.7	21.7	47.8
	Not sure	12	52.2	52.2	100.0
	Total	23	100.0	100.0	

Occupation of father

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed	19	82.6	82.6	82.6
	Self-employed	2	8.7	8.7	91.3
	Not sure	2	8.7	8.7	100.0
	Total	23	100.0	100.0	

Education level of mother

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No formal schooling/kindergarten	2	8.7	8.7	8.7
	Lower secondary level	1	4.3	4.3	13.0
	Upper secondary level	3	13.0	13.0	26.1
	Matriculation level	1	4.3	4.3	30.4
	Tertiary (degree) level or above	4	17.4	17.4	47.8
	Not sure	12	52.2	52.2	100.0
	Total	23	100.0	100.0	

Occupation of mother

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed	15	65.2	65.2	65.2
	Homemakers	5	21.7	21.7	87.0
	Self-employed	1	4.3	4.3	91.3
	Not sure	2	8.7	8.7	100.0
	Total	23	100.0	100.0	

School lunch

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Home prepares school lunch	8	34.8	36.4	36.4
	The school prepares school lunch	10	43.5	45.5	81.8
	The child purchases lunch from school tuckshop	4	17.4	18.2	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Frequency of snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Often	3	13.0	13.0	13.0
	Sometimes	10	43.5	43.5	56.5
	Rarely	7	30.4	30.4	87.0
	Never	3	13.0	13.0	100.0
	Total	23	100.0	100.0	

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	2	8.7	8.7	8.7
	Once a week	3	13.0	13.0	21.7
	Twice a week	4	17.4	17.4	39.1
	Three times a week	14	60.9	60.9	100.0
	Total	23	100.0	100.0	

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Low level of physical energy output	3	13.0	13.0	13.0
	Medium level physical energy output	13	56.5	56.5	69.6
	High level of physical energy output	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	22	95.7	95.7	95.7
	No	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	1	4.3	4.3	4.3
	1 serving per day	15	65.2	65.2	69.6
	2 servings (or more) per day	7	30.4	30.4	100.0
	Total	23	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	10	43.5	43.5	43.5
	1 glass per day	8	34.8	34.8	78.3
	2 glasses (or more) per day	5	21.7	21.7	100.0
	Total	23	100.0	100.0	

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 serving per day	7	30.4	30.4	30.4
	2 servings per day	10	43.5	43.5	73.9
	3 servings per day	6	26.1	26.1	100.0
	Total	23	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	15	65.2	65.2	65.2
	1 glass per day	7	30.4	30.4	95.7
	2 glasses (or more) per day	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 to 2 taels per day	13	56.5	56.5	56.5
	3 to 4 taels per day	9	39.1	39.1	95.7
	5 taels (or more) per day	1	4.3	4.3	100.0
	Total	23	100.0	100.0	

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	3	13.0	13.0	13.0
	half serving per day	6	26.1	26.1	39.1
	1 serving per day	5	21.7	21.7	60.9
	2 servings (or more) per day	9	39.1	39.1	100.0
	Total	23	100.0	100.0	

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	3	13.0	13.0	13.0
	1 glass per day	15	65.2	65.2	78.3
	2 glasses per day	5	21.7	21.7	100.0
	Total	23	100.0	100.0	

Daily stir/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	12	52.2	52.2	52.2
	Once a day	7	30.4	30.4	82.6
	Twice a day	2	8.7	8.7	91.3
	Three times (or more) a day	2	8.7	8.7	100.0
	Total	23	100.0	100.0	

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	6	26.1	27.3	27.3
	Once a day	12	52.2	54.5	81.8
	Twice a day	4	17.4	18.2	100.0
	Total	22	95.7	100.0	
Missing	99	1	4.3		
Total		23	100.0		

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	16	69.6	69.6	69.6
	3 meals daily but taken irregularly	3	13.0	13.0	82.6
	1 to 2 meals daily at regular hours	2	8.7	8.7	91.3
	Irregular meals	2	8.7	8.7	100.0
	Total	23	100.0	100.0	

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	10	43.5	43.5	43.5
	Once a day	10	43.5	43.5	87.0
	Twice (or more) a day	3	13.0	13.0	100.0
	Total	23	100.0	100.0	

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast at all	3	13.0	13.0	13.0
	Take breakfast most of the time	7	30.4	30.4	43.5
	Take breakfast daily	13	56.5	56.5	100.0
	Total	23	100.0	100.0	

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 1 meal per day	1	4.3	4.3	4.3
	1 meal per day	2	8.7	8.7	13.0
	2 meals per day	8	34.8	34.8	47.8
	3 meals (or more) per day	12	52.2	52.2	100.0
	Total	23	100.0	100.0	

Secondary school students

Gender of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	6	30.0	30.0	30.0
	Female	14	70.0	70.0	100.0
	Total	20	100.0	100.0	

Age of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	11	1	5.0	5.0	5.0
	12	8	40.0	40.0	45.0
	13	2	10.0	10.0	55.0
	14	6	30.0	30.0	85.0
	15	1	5.0	5.0	90.0
	16	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Class of the child

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Secondary 1	9	45.0	45.0	45.0
	Secondary 2	4	20.0	20.0	65.0
	Secondary 3	7	35.0	35.0	100.0
	Total	20	100.0	100.0	

Education level of father

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No formal schooling/kindergarten	1	5.0	5.0	5.0
	Primary level	5	25.0	25.0	30.0
	Lower secondary level	5	25.0	25.0	55.0
	Upper secondary level	5	25.0	25.0	80.0
	Matriculation level	1	5.0	5.0	85.0
	Not sure	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Occupation of father

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed	18	90.0	90.0	90.0
	Not sure	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Education level of mother

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary level	4	20.0	20.0	20.0
	Lower secondary level	4	20.0	20.0	40.0
	Upper secondary level	9	45.0	45.0	85.0
	Not sure	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Occupation of mother

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed	11	55.0	55.0	55.0
	Homemakers	7	35.0	35.0	90.0
	Not sure	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

School lunch

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Home prepares school lunch	2	10.0	10.0	10.0
	The school prepares school lunch	7	35.0	35.0	45.0
	The child purchases lunch from school tuckshop	4	20.0	20.0	65.0
	The child eats out	7	35.0	35.0	100.0
	Total	20	100.0	100.0	

Frequency of snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Often	6	30.0	31.6	31.6
	Sometimes	11	55.0	57.9	89.5
	Rarely	2	10.0	10.5	100.0
	Total	19	95.0	100.0	
Missing	99	1	5.0		
Total		20	100.0		

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	8	40.0	42.1	42.1
	Once a week	4	20.0	21.1	63.2
	Twice a week	4	20.0	21.1	84.2
	Three times a week	3	15.0	15.8	100.0
	Total	19	95.0	100.0	
Missing	99	1	5.0		
Total		20	100.0		

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy output	8	40.0	42.1	42.1
	Low level of physical energy output	5	25.0	26.3	68.4
	Medium level physical energy output	4	20.0	21.1	89.5
	High level of physical energy output	2	10.0	10.5	100.0
	Total	19	95.0	100.0	
Missing	99	1	5.0		
Total		20	100.0		

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	17	85.0	85.0	85.0
	No	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	8	40.0	40.0	40.0
	1 serving per day	8	40.0	40.0	80.0
	2 servings (or more) per day	4	20.0	20.0	100.0
	Total	20	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	12	60.0	60.0	60.0
	1 glass per day	5	25.0	25.0	85.0
	2 glasses (or more) per day	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 serving per day	2	10.0	10.0	10.0
	1 serving per day	12	60.0	60.0	70.0
	2 servings per day	4	20.0	20.0	90.0
	3 servings per day	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	14	70.0	70.0	70.0
	1 glass per day	4	20.0	20.0	90.0
	2 glasses (or more) per day	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 to 2 taels per day	11	55.0	55.0	55.0
	3 to 4 taels per day	6	30.0	30.0	85.0
	5 taels (or more) per day	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	3	15.0	15.0	15.0
	half serving per day	11	55.0	55.0	70.0
	1 serving per day	4	20.0	20.0	90.0
	2 servings (or more) per day	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	7	35.0	35.0	35.0
	1 glass per day	10	50.0	50.0	85.0
	2 glasses per day	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Daily stir-/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	5	25.0	25.0	25.0
	Once a day	11	55.0	55.0	80.0
	Twice a day	2	10.0	10.0	90.0
	Three times (or more) a day	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	6	30.0	30.0	30.0
	Once a day	11	55.0	55.0	85.0
	Twice a day	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	8	40.0	40.0	40.0
	3 meals daily but taken irregularly	4	20.0	20.0	60.0
	1 to 2 meals daily at regular hours	5	25.0	25.0	85.0
	Irregular meals	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	5	25.0	25.0	25.0
	Once a day	10	50.0	50.0	75.0
	Twice (or more) a day	5	25.0	25.0	100.0
	Total	20	100.0	100.0	

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast at all	4	20.0	20.0	20.0
	No breakfast most of the time	5	25.0	25.0	45.0
	Take breakfast most of the time	6	30.0	30.0	75.0
	Take breakfast daily	5	25.0	25.0	100.0
	Total	20	100.0	100.0	

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 meal per day	2	10.0	10.0	10.0
	2 meals per day	9	45.0	45.0	55.0
	3 meals (or more) per day	9	45.0	45.0	100.0
	Total	20	100.0	100.0	

Working Groups

Working males

Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	24	1	4.5	4.5	4.5
	25	1	4.5	4.5	9.1
	26	3	13.6	13.6	22.7
	27	4	18.2	18.2	40.9
	28	1	4.5	4.5	45.5
	29	3	13.6	13.6	59.1
	30	1	4.5	4.5	63.6
	31	1	4.5	4.5	68.2
	40	1	4.5	4.5	72.7
	43	1	4.5	4.5	77.3
	45	3	13.6	13.6	90.9
	48	1	4.5	4.5	95.5
	53	1	4.5	4.5	100.0
	Total	22	100.0	100.0	

Education level of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Upper secondary level	4	18.2	18.2	18.2
	Matriculation level	3	13.6	13.6	31.8
	Tertiary (non-degree) level	4	18.2	18.2	50.0
	Tertiary (degree) level or above	11	50.0	50.0	100.0
	Total	22	100.0	100.0	

Marital status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never married	17	77.3	77.3	77.3
	Married	5	22.7	22.7	100.0
	Total	22	100.0	100.0	

Number of children

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	17	77.3	77.3	77.3
	1	2	9.1	9.1	86.4
	2	3	13.6	13.6	100.0
	Total	22	100.0	100.0	

Occupation of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Managers and administrators	3	13.6	13.6	13.6
	Professionals	6	27.3	27.3	40.9
	Associate professionals	4	18.2	18.2	59.1
	Clerks	5	22.7	22.7	81.8
	Service workers and shop sales workers	1	4.5	4.5	86.4
	Craft and related workers	1	4.5	4.5	90.9
	Self-employed	2	9.1	9.1	100.0
	Total	22	100.0	100.0	

Lunch practice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I/my family prepare(s) my lunchbox	8	36.4	36.4	36.4
	I eat out	14	63.6	63.6	100.0
	Total	22	100.0	100.0	

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	8	36.4	36.4	36.4
	Once a week	4	18.2	18.2	54.5
	Twice a week	4	18.2	18.2	72.7
	Three times a week	6	27.3	27.3	100.0
	Total	22	100.0	100.0	

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy output	15	68.2	68.2	68.2
	Low level of physical energy output	3	13.6	13.6	81.8
	Medium level physical energy output	4	18.2	18.2	100.0
	Total	22	100.0	100.0	

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	6	27.3	27.3	27.3
	No	16	72.7	72.7	100.0
	Total	22	100.0	100.0	

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	6	27.3	27.3	27.3
	1 serving per day	10	45.5	45.5	72.7
	2 servings (or more) per day	6	27.3	27.3	100.0
	Total	22	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	19	86.4	90.5	90.5
	1 glass per day	2	9.1	9.5	100.0
	Total	21	95.5	100.0	
Missing	99	1	4.5		
Total		22	100.0		

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 serving per day	2	9.1	9.5	9.5
	1 serving per day	11	50.0	52.4	61.9
	2 servings per day	7	31.8	33.3	95.2
	3 servings per day	1	4.5	4.8	100.0
	Total	21	95.5	100.0	
Missing	99	1	4.5		
Total		22	100.0		

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	20	90.9	90.9	90.9
	1 glass per day	2	9.1	9.1	100.0
	Total	22	100.0	100.0	

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 to 2 taels per day	7	31.8	31.8	31.8
	3 to 4 taels per day	12	54.5	54.5	86.4
	5 taels (or more) per day	3	13.6	13.6	100.0
	Total	22	100.0	100.0	

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	7	31.8	31.8	31.8
	half serving per day	12	54.5	54.5	86.4
	1 serving per day	1	4.5	4.5	90.9
	2 servings (or more) per day	2	9.1	9.1	100.0
	Total	22	100.0	100.0	

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	14	63.6	63.6	63.6
	1 glass per day	8	36.4	36.4	100.0
	Total	22	100.0	100.0	

Daily stir-/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	12	54.5	57.1	57.1
	Once a day	6	27.3	28.6	85.7
	Twice a day	3	13.6	14.3	100.0
	Total	21	95.5	100.0	
Missing	99	1	4.5		
Total		22	100.0		

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	7	31.8	33.3	33.3
	Once a day	10	45.5	47.6	81.0
	Twice a day	4	18.2	19.0	100.0
	Total	21	95.5	100.0	
Missing	99	1	4.5		
Total		22	100.0		

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	11	50.0	50.0	50.0
	3 meals daily but taken irregularly	7	31.8	31.8	81.8
	1 to 2 meals daily at regular hours	4	18.2	18.2	100.0
	Total	22	100.0	100.0	

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	8	36.4	36.4	36.4
	Once a day	12	54.5	54.5	90.9
	Twice (or more) a day	2	9.1	9.1	100.0
	Total	22	100.0	100.0	

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast at all	1	4.5	4.5	4.5
	No breakfast most of the time	3	13.6	13.6	18.2
	Take breakfast most of the time	4	18.2	18.2	36.4
	Take breakfast daily	14	63.6	63.6	100.0
	Total	22	100.0	100.0	

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 1 meal per day	3	13.6	13.6	13.6
	1 meal per day	5	22.7	22.7	36.4
	2 meals per day	4	18.2	18.2	54.5
	3 meals (or more) per day	10	45.5	45.5	100.0
	Total	22	100.0	100.0	

Working females

Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	23	1	5.6	5.9	5.9
	24	1	5.6	5.9	11.8
	27	1	5.6	5.9	17.6
	28	3	16.7	17.6	35.3
	29	2	11.1	11.8	47.1
	30	1	5.6	5.9	52.9
	31	1	5.6	5.9	58.8
	35	1	5.6	5.9	64.7
	36	1	5.6	5.9	70.6
	39	1	5.6	5.9	76.5
	42	1	5.6	5.9	82.4
	44	1	5.6	5.9	88.2
	55	1	5.6	5.9	94.1
	58	1	5.6	5.9	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total	18	100.0			

Education level of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Lower secondary level	4	22.2	22.2	22.2
	Upper secondary level	3	16.7	16.7	38.9
	Matriculation level	1	5.6	5.6	44.4
	Tertiary (non-degree) level	2	11.1	11.1	55.6
	Tertiary (degree) level or above	8	44.4	44.4	100.0
	Total	18	100.0	100.0	

Marital status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never married	11	61.1	61.1	61.1
	Married	4	22.2	22.2	83.3
	Separated/Divorced	1	5.6	5.6	88.9
	Widowed	1	5.6	5.6	94.4
	Cohabiting	1	5.6	5.6	100.0
	Total	18	100.0	100.0	

Number of children

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	13	72.2	72.2	72.2
	1	2	11.1	11.1	83.3
	2	1	5.6	5.6	88.9
	4	2	11.1	11.1	100.0
	Total	18	100.0	100.0	

Occupation of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Managers and administrators	3	16.7	16.7	16.7
	Professionals	2	11.1	11.1	27.8
	Associate professionals	3	16.7	16.7	44.4
	Clerks	5	27.8	27.8	72.2
	Service workers and shop sales workers	1	5.6	5.6	77.8
	Self-employed	3	16.7	16.7	94.4
	Refuse to answer	1	5.6	5.6	100.0
	Total	18	100.0	100.0	

Lunch practice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I/my family prepare(s) my lunchbox	9	50.0	50.0	50.0
	I eat out	9	50.0	50.0	100.0
	Total	18	100.0	100.0	

Engagement in at least 20-minute aerobic exercises

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	10	55.6	55.6	55.6
	Once a week	3	16.7	16.7	72.2
	Twice a week	2	11.1	11.1	83.3
	Three times a week	3	16.7	16.7	100.0
	Total	18	100.0	100.0	

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy input	11	61.1	64.7	64.7
	Low level of physical energy input	6	33.3	35.3	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	7	38.9	38.9	38.9
	No	11	61.1	61.1	100.0
	Total	18	100.0	100.0	

Daily fruits consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	1	5.6	5.6	5.6
	1 serving per day	14	77.8	77.8	83.3
	2 servings (or more) per day	3	16.7	16.7	100.0
	Total	18	100.0	100.0	

Daily fruit juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	17	94.4	94.4	94.4
	1 glass a day	1	5.6	5.6	100.0
	Total	18	100.0	100.0	

Daily vegetable consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 serving a day	6	33.3	33.3	33.3
	2 servings a day	10	55.6	55.6	88.9
	3 servings a day	2	11.1	11.1	100.0
	Total	18	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	18	100.0	100.0	100.0

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 tael per day	2	11.1	11.8	11.8
	1 to 2 taels per day	5	27.8	29.4	41.2
	3 to 4 taels per day	7	38.9	41.2	82.4
	5 taels (or more) per day	3	16.7	17.6	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Daily bean product consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	7	38.9	41.2	41.2
	half serving per day	4	22.2	23.5	64.7
	1 serving per day	6	33.3	35.3	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Daily dairy product consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	10	55.6	58.8	58.8
	1 glass per day	7	38.9	41.2	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Daily stir/deep fry food consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	12	66.7	70.6	70.6
	Once a day	5	27.8	29.4	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Daily dessert or sugary food consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	8	44.4	47.1	47.1
	Once a day	9	50.0	52.9	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Daily dietary practices (excl. snacks, tea time, and supper)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	12	66.7	70.6	70.6
	3 meals daily but irregular hours	4	22.2	23.5	94.1
	1 to 2 meals daily at regular hours	1	5.6	5.9	100.0
	Total	17	94.4	100.0	
Missing	99	1	5.6		
Total		18	100.0		

Daily snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	13	72.2	72.2	72.2
	Once a day	5	27.8	27.8	100.0
	Total	18	100.0	100.0	

Breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Take breakfast most of the time	2	11.1	11.1	11.1
	Take breakfast daily	16	88.9	88.9	100.0
	Total	18	100.0	100.0	

Number of meals (incl. tea time and supper) a day

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 1 meal per day	2	11.1	11.1	11.1
	1 meal per day	3	16.7	16.7	27.8
	2 meals per day	6	33.3	33.3	61.1
	3 meals (or more) per day	7	38.9	38.9	100.0
	Total	18	100.0	100.0	

The Elderly

Frequency Table

Gender of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	3	17.6	17.6	17.6
	Female	14	82.4	82.4	100.0
	Total	17	100.0	100.0	

Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	66	1	5.9	5.9	5.9
	67	1	5.9	5.9	11.8
	68	2	11.8	11.8	23.5
	71	1	5.9	5.9	29.4
	72	1	5.9	5.9	35.3
	73	2	11.8	11.8	47.1
	74	1	5.9	5.9	52.9
	75	1	5.9	5.9	58.8
	76	1	5.9	5.9	64.7
	78	1	5.9	5.9	70.6
	79	1	5.9	5.9	76.5
	80	1	5.9	5.9	82.4
	83	1	5.9	5.9	88.2
	84	2	11.8	11.8	100.0
	Total	17	100.0	100.0	

Number of children

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	1	5.9	5.9	5.9
	1	2	11.8	11.8	17.6
	2	1	5.9	5.9	23.5
	3	2	11.8	11.8	35.3
	4	3	17.6	17.6	52.9
	5	2	11.8	11.8	64.7
	6	3	17.6	17.6	82.4
	7	2	11.8	11.8	94.1
	12	1	5.9	5.9	100.0
	Total	17	100.0	100.0	

Education level of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No formal schooling/kindergarten	13	76.5	76.5	76.5
	Primary level	4	23.5	23.5	100.0
	Total	17	100.0	100.0	

Occupation of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Retired	12	70.6	70.6	70.6
	Housewife	5	29.4	29.4	100.0
	Total	17	100.0	100.0	

Marital status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never married	1	5.9	5.9	5.9
	Married	11	64.7	64.7	70.6
	Widowed	5	29.4	29.4	100.0
	Total	17	100.0	100.0	

Lunch practice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I/my family prepare(s) my lunchbox	13	76.5	76.5	76.5
	I eat out	1	5.9	5.9	82.4
	I eat out half of the time	3	17.6	17.6	100.0
	Total	17	100.0	100.0	

Frequency of snacks consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Often	1	5.9	6.7	6.7
	Sometimes	3	17.6	20.0	26.7
	Rarely	5	29.4	33.3	60.0
	Never	6	35.3	40.0	100.0
	Total	15	88.2	100.0	
Missing	99	2	11.8		
Total		17	100.0		

Engagement in 20-minute aerobic exercises weekly

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than once a week	7	41.2	46.7	46.7
	Once a week	4	23.5	26.7	73.3
	Three times a week	4	23.5	26.7	100.0
	Total	15	88.2	100.0	
Missing	99	2	11.8		
Total		17	100.0		

Usual physical energy output

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Minimal level of physical energy output	3	17.6	17.6	17.6
	Low level of physical energy output	4	23.5	23.5	41.2
	Medium level physical energy output	10	58.8	58.8	100.0
	Total	17	100.0	100.0	

Yearly check-up

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	11	64.7	73.3	73.3
	No	4	23.5	26.7	100.0
	Total	15	88.2	100.0	
Missing	99	2	11.8		
Total		17	100.0		

Daily fruit consumption (incl. fresh, frozen, canned fruits or dried fruits but not incl. fruit juice and fruit desserts like apple pie)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No fruit or less than 1 serving per day	3	17.6	17.6	17.6
	1 serving per day	7	41.2	41.2	58.8
	2 servings (or more) per day	7	41.2	41.2	100.0
	Total	17	100.0	100.0	

Daily fruit juice consumption (not incl. sugar-added fruit juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	17	100.0	100.0	100.0

Daily vegetable consumption (incl. fresh, frozen and canned vegetables but not incl. vegetable juice)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 serving per day	1	5.9	5.9	5.9
	1 serving per day	7	41.2	41.2	47.1
	2 servings per day	6	35.3	35.3	82.4
	3 servings per day	3	17.6	17.6	100.0
	Total	17	100.0	100.0	

Daily vegetable juice consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	17	100.0	100.0	100.0

Daily meat and egg consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 tael per day	3	17.6	17.6	17.6
	1 to 2 taels per day	6	35.3	35.3	52.9
	3 to 4 taels per day	6	35.3	35.3	88.2
	5 taels (or more) per day	2	11.8	11.8	100.0
	Total	17	100.0	100.0	

Daily bean products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than half serving per day	16	94.1	94.1	94.1
	1 serving per day	1	5.9	5.9	100.0
	Total	17	100.0	100.0	

Daily dairy products consumption

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than 1 glass per day	12	70.6	70.6	70.6
	1 glass per day	5	29.4	29.4	100.0
	Total	17	100.0	100.0	

Daily stir-/deep-fried food consumption (incl. french fries, fried rice/noodles, tempura, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	16	94.1	94.1	94.1
	Twice a day	1	5.9	5.9	100.0
	Total	17	100.0	100.0	

Daily dessert or sugary food consumption (e.g. soft drinks, ice-cream, chocolate, candies, cake, sugar-added coffee or tea, etc.)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	17	100.0	100.0	100.0

Daily dietary practices (excl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3 regular meals daily	10	58.8	58.8	58.8
	3 meals daily but taken irregularly	4	23.5	23.5	82.4
	1 to 2 meals daily at regular hours	3	17.6	17.6	100.0
	Total	17	100.0	100.0	

Daily snacks consumption (incl. snacks, tea time and night snack)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None or less than once a day	15	88.2	88.2	88.2
	Once a day	2	11.8	11.8	100.0
	Total	17	100.0	100.0	

Practice of taking breakfast

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No breakfast most of the time	2	11.8	11.8	11.8
	Take breakfast daily	15	88.2	88.2	100.0
	Total	17	100.0	100.0	

Number of home prepared meals (incl. breakfast, lunch, dinner, tea time and night snack) taken daily

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 meal per day	2	11.8	11.8	11.8
	2 meals per day	5	29.4	29.4	41.2
	3 meals (or more) per day	10	58.8	58.8	100.0
	Total	17	100.0	100.0	