

4.7 Parent Survey on Health Education

Please circle the correct details for your student:

GENDER:

MALE

FEMALE

YEAR LEVEL at school (not age):

1	2	3	4	5	6	7
8	9	10	11	12		

Curriculum

1. Does your child receive Health Education at school?

Yes No Don't know

2. Overall, do you believe Health Education in school is important?

Yes No Don't know

3. Indicate the level of importance you attach to each of the topic areas below:

Tick one box only for each area

	Essential	Very important	Somewhat important	Not important
Resilience Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Road Safety Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sun Safety Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Health Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nutritional Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Health and Wellbeing Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Does your child's school advise you of their areas of focus in Health Education?

Yes No Don't know

5. Do you know what Drug Education is happening in your child's classroom?

Yes No Don't know

4.7 Parent Survey on Health Education cont.

Ethos and Environment

6. Does your child's school have guidelines for Road Safety Education?

Yes No Don't know

7. Does your child's school have guidelines for Drug Education?

Yes No Don't know

8. Does your child's school have procedures for managing drug use incidents?

Yes No Don't know

9. Do you know what support services are provided for students at your child's school?

Yes No

Tick one box only for each area

10. I think my child feels:

	Always	Usually	Sometimes	Never
Close to people at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Like he/she is part of the school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Happy to be at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fairly treated by the teachers at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safe in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Do you know what happens if your child breaks the school rules?

Yes No Don't know

12. Do you feel road safety practices are well thought out and well managed around the school?

Yes No Don't know

Tick one box only

13. Do you feel comfortable contacting the school about issues of concern?

Always	Usually	Sometimes	Never
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4.7 Parent Survey on Health Education cont.

Parents and Community

Tick one box only for each question

14. How would you rate your understanding of road safety issues as a concern in relation to young people?
15. How would you rate your understanding of drug and alcohol issues in relation to young people?

Very high
Above average
Average
Below average
Limited

Tick as many boxes as needed

16. Have you been actively involved in developing or implementing the schools health policies or guidelines?

Involved in writing policies and/or guidelines
Consulted on content of policies and/or guidelines
Received copies of policies and/or guidelines

Tick one box only

17. How important do you think this involvement is for parents?

Extremely important
Moderately important
A little important
Not important

Tick as many boxes as needed

18. Have you received ideas from the school on how to talk to your child about these issues?

Resilience
Drug issues
Road safety issues

19. Do you receive regular updates from your school on current areas of focus in the Health Education curriculum eg through the school newsletter?

Yes No Don't know

20. Do you feel the school provides a range of opportunities to invite your involvement and participation in your child's Health Education?

Yes No Don't know