

PARENT SURVEY: RESILIENCE, ROAD SAFETY AND DRUG EDUCATION

Please tick :

GENDER:

Male

Female

Please tick the correct details for your student:

YEAR LEVEL at school (not age):

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

CURRICULUM

Please tick correct response.

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.	Essential	Very Important	Somewhat Important	Not Important
	Resilience Education				
	Alcohol and Other Drugs Education				
	Road Safety Education				
	Physical Education				
	Sun Safety Education				
	Sexual Health Education				
	Nutritional Education				
	Emotional Health and Wellbeing Education				
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 Alcohol and Other Drugs Education is happening in your child's classroom?	Yes	No	Don't know	

ETHOS AND ENVIRONMENT

6.	Does your child's school have a whole-school plan for Road Safety Education?			
	Yes	No	Don't know	
7.	Does your child's school have a whole-school plan for Alcohol and Other Drugs Education?			
	Yes	No	Don't know	
8.	Does your child's school have procedures for managing alcohol and other drugs incidents?			
	Yes	No	Don't know	
9.	Do you know what support services are provided for students at your child's school?			
	Yes	No	Don't know	
10.	I think my child feels:			
	Close to people at school			
	Always	Usually	Sometimes	Never
	Like he/she is part of the school			
	Always	Usually	Sometimes	Never
	Happy to be at school			
	Always	Usually	Sometimes	Never
	Connected to the teachers at school			
	Always	Usually	Sometimes	Never
	Safe in school			
	Always	Usually	Sometimes	Never
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	
13.	Do you feel comfortable contacting the school about issues of concern?			
	Always	Usually	Sometimes	Never

PARENTS AND COMMUNITY

14. How would you rate your understanding of road safety issues as a concern in relation to young people? Tick **one** box only.

Very Above Average Below Limited

15. How would you rate your understanding of alcohol and other drug issues in relation to young people? Tick **one** box only.

Very Above Average Below Limited

16. Have you been actively involved in developing or implementing the school's health policies or guidelines? Tick **as many boxes as needed**.

Involved in writing policies and/or guidelines

Consulted on content of policies and/or guidelines

Received copies of policies and/or guidelines

17. In relation to question 16, how important do you think this involvement is for parents? Tick **one** box only.

Extremely important

Moderately important

A little important

Not important

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 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

Thank you for your response.