I. PURPOSE

The purpose of the self administered physical activity interview checklist (SAPAC) is to collect information from students about their physical activities and selected sedentary activities occurring during the previous school day.

II. STUDY SAMPLE AND ADMINISTRATION

All grade 5 students enrolled in a CATCH school during the Spring 1994 follow-up administration are eligible to participate in SAPAC. The SAPAC will be administered in the classroom by a trained CATCH measurement staff person. The day before the administration of SAPAC should have been a normal (no other CATCH measurements) school day.

III. ADMINISTRATION PROTOCOL

A. STAFFING NEEDS

1. Two CATCH measurement staff (one to serve as administrator, the other to assist)
2. If there are Spanish-only speaking students in the class, there must be a bilingual instructor present.

B. EQUIPMENT:

1. SAPAC Protocol
2. SAPAC forms
3. pencils (one per student plus extras)
4. overhead projector
5. transparencies (clock and 15, 30, 60 minute paper pieces, pages 1 & 2 of SAPAC)
6. pen for overhead projector
7. poster of N-S-M (None - Some - Most)
C. PREPARATION:

1. Contact school 1-2 days prior to administration to confirm schedule with office and teachers.
2. Check with school to determine availability of an overhead projector.
3. Check in at the school office and locate the classrooms.
4. Introduce yourself to the classroom teacher.
5. Get previous day's schedule from all 5th grade teachers (school start, end, recess, PE, lunch).
6. Set up overhead project and poster of N-S-M.
7. Introduce yourself and other staff to students.
8. Make sure all students have pencils and are in a good position to see the overhead and hear instructions.
9. Tell students that you will be asking questions about things they did yesterday.
10. Distribute SAPAC forms to students.

NOTE: Instructions to be read aloud to the students are in bold type. Instructions for the CATCH staff administrators are in plain type.

D. INSTRUCTIONS TO CLASS:

Introductory Dialogue to Students:

GOOD MORNING (TEACHER'S NAME), BOYS AND GIRLS. MY NAME IS (NAME). I AM THE (JOB TITLE) OF THE CATCH PROJECT AND THE INSTRUCTOR OF TODAY'S CLASS. MY ASSISTANT'S NAME IS (NAME). THANK YOU FOR PARTICIPATING IN THIS PROJECT TODAY. WE'RE HERE TO HELP YOU FILL OUT A SPECIAL FORM.

TO TELL US ABOUT THE PHYSICAL ACTIVITY THAT YOU DID YESTERDAY, YOU HAVE A CHECKLIST OF ACTIVITIES TO HELP YOU REMEMBER. LET'S START BY COMPLETING PAGE ONE OF THE FORM.
1. COMPLETION OF PAGE 1 OF SAPAC FORM:

Section A, Items A1 - A5, should be completed by the CATCH Administrator prior to questionnaire administration.

Items A6 - A9 should be read aloud by the CATCH Administrator and completed by the students

(Use a blank form on an overhead projector to lead students.)

   a. **DID YOU PARTICIPATE IN PHYSICAL EDUCATION CLASS YESTERDAY? CIRCLE "1" FOR NO OR "2" FOR YES.**
   b. **IF YOU CIRCLED YES, HOW MANY MINUTES LONG WAS PHYSICAL EDUCATION CLASS? (Use the schedule information obtained from the teacher to assist children in completing this question.)**
   c. **DID YOU PARTICIPATE IN RECESS YESTERDAY? CIRCLE "1" FOR NO AND "2" FOR YES.**
   d. **IF YOU CIRCLED YES HOW MANY MINUTES OF RECESS DID YOU HAVE? IF YOU HAD MORE THAN ONE RECESS PERIOD, LIST THEM SEPARATELY. (Use the schedule information obtained from the teacher to assist children in completing this question.)**

2. INSTRUCTIONS FOR PAGE 2 OF THE FORM; RECORDING PHYSICAL ACTIVITIES, DURATION AND INTENSITY

A. DEFINING PHYSICAL ACTIVITY

*One thing we want to learn in CATCH is the amount and type of physical activity fifth graders do in a day. Today we're going to talk about the physical activity that you did yesterday. What day was yesterday?*

*Physical activity is bodily movement such as when you move your arms and legs. You do some physical activities to move from place to place, like running or walking. What are some other physical activities like that? Some physical activities you do in one place, like jumping jacks or sit ups. Can you tell me any other physical activities that you can do in one place?*
B. TIME ESTIMATION (USE CLOCK TRANSPARENCY)

We’re going to ask you how long you did physical activity yesterday. The clock will help you tell us. This whole clock is 60 minutes. What lasts 60 minutes? This is 30 minutes. What lasts 30 minutes? This is 15 minutes. What lasts 15 minutes? This is 5 minutes. We want you to tell us the physical activities that you did yesterday for 5 minutes or more. Let’s see if we have an idea of what lasts for 5 minutes or more.

Commercial (more or less than 5 minutes?)
Brush Teeth (more or less than 5 minutes?)
Recess (more or less than 5 minutes?)
Eating Lunch (more or less than 5 minutes?)

You may do a physical activity for 5, 10, 20 or more than 60 minutes.

C. ACTUAL TIME ACTIVE

Sometimes during games or physical activities you may stop and do something else, like resting or waiting in line. We want to know about the time you were actually active. We want you to write down how much time you were actually doing an activity. So, if you played basketball for 60 minutes, but you rested for 10 minutes, how many minutes did you actually play? (Answer is 50 minutes.)

D. CHECKLIST OF ACTIVITIES

Now turn to the second page, but do not write anything yet. This is a list of different types of physical activity, and I am going to ask you about whether you did any of them before school, during school, and after school yesterday.

For each activity, you will write the number of minutes you were actually doing the activity, but only if you did the activity for 5 minutes or more. (Demonstrate on the overhead recording 10 minutes of bicycling before school.)

None - Some - Most (N-S-M)

In addition, for each activity you did yesterday, we want to know whether it made you breathe hard or feel tired, none, some, or most of the time. You will put an N for none, S for some, or M for most of the time in the box next to the number of minutes. (Demonstrate putting S next to the 10 minutes of bicycling.)
Probably no one did all these activities yesterday, and it's OK if you did not do any of them. For every activity you do not do yesterday, or did for less than 5 minutes, put a zero in the box. (Demonstrate putting a zero for swimming laps before school.)

Do not count the same activity in two different places. For example, if you were running while playing soccer for 20 minutes, you would put 20 next to soccer. Do not list that same 20 minutes again next to running.

Remember, there are no right or wrong answers. We just want to know what physical activities you actually did yesterday. It is important to be very honest.

Do not look at the papers of people sitting around you. Do not worry if someone looks at your paper.

If you have a question, if you need help, or if you get behind, do not say anything. Raise your hand and someone will help you.

Do you have any questions?

Pick up your pencils and get ready to start.

E. Completing the SAPAC Form

We're going to go through this list of activities three different times. We want you to think about what you did yesterday. We'll divide the day into three parts; before school, during school and after school. Please listen to instructions and do not work ahead.

1. Before School

Think about before school yesterday. This is the time from when you woke up until the bell rang for school to start. It includes any before school program in which you participate. What did you do before school? Did you do anything special? How did you get to school? Think about the physical activities you did for 5 minutes or more yesterday before school. Now we will go down the list of activities for before school together.

Go through the checklist from top to bottom. Read the number of each activity to help students follow along. Periodically remind them to put a zero if they did not do the activity. For the first couple of activities and the first activity in each block, use the complete prompts:

a. Did you do ___ for 5 minutes or more yesterday before school?
b. **If you did,** write the number of minutes and a letter (N, S or M), if you were breathing hard or felt tired for none, some or most of the time.

c. After a couple of activities, just say "**Did you?**"

Before asking about "mixed walking and running", explain the following:

**We walk and run many times during the day. You might do this in a game or to get somewhere. Most of those times are less than 5 minutes, so you will not write those down.**

**Sometimes we do a mixture of walking and running, so we walk a little and run a little.**

**Did you do 5 minutes or more of mixed walking and running before school yesterday?**

**If you did,** write the number of minutes and whether you breathed hard or felt tired none, some, or most of the time.

Before asking about "walking", explain the following:

**Think about times when you might have walked 5 minutes or more at one time before school yesterday. Did you take a walk, walk to school, or walk your dog?**

Before asking about "Running", explain the following:

**Did you run 5 minutes or more at one time yesterday before school started?**

Explain about "Other":

Ask about physical activity classes, lessons, teams before school. Ask if they did any other physical activities before school yesterday that were not on the list. Ask them to write the name of the class or lesson, the number of minutes, and none, some or most.

Demonstrate with overhead how to list something in "other". Include name of activity, number of minutes, and the letter N, S or M

2. **During School**

**Now we are going to talk about physical activities you did during school yesterday. During school means between the morning bell and the last afternoon bell. Think about what**
YOU DID IN SCHOOL YESTERDAY. DID YOU DO ANY SPECIAL ACTIVITIES? THINK ABOUT PE, RECESS, AND AFTER LUNCH. NOW WE WILL GO DOWN THE LIST OF ACTIVITIES FOR DURING SCHOOL TOGETHER.

Go through the checklist from top to bottom. Read the number of each activity to help them follow along. Periodically remind them to put a zero if they did not do the activity. For the first couple of activities use the complete prompts:

a. **DID YOU DO ___ FOR 5 MINUTES OR MORE YESTERDAY DURING SCHOOL?**

b. **IF YOU DID, WRITE THE NUMBER OF MINUTES AND A LETTER (N-S-M) IF YOU WERE BREATHING HARD OR FELT TIRED FOR NONE, SOME OR MOST OF THE TIME.**

c. After a couple of activities, just say "**DID YOU ___?**"

At the end of the list of activities done during school, ask students if they put down what they did during recess, PE or after lunch. This is very important. Give them time to think and answer.

**IF YOUR PHYSICAL ACTIVITY IS NOT ON THE LIST, PUT THE NAME OF YOUR ACTIVITY UNDER "OTHER" AND INCLUDE NUMBER OF MINUTES AND THE LETTER N, S OR M.**

3. **AFTER SCHOOL**


Go through the checklist from top to bottom. Read the number of each activity to help students follow along. Periodically remind them to put a zero if they did not do the activity. For the first couple of activities use the complete prompts:

a. **DID YOU DO ___ FOR 5 MINUTES OR MORE YESTERDAY AFTER SCHOOL?**

b. **IF YOU DID, WRITE THE NUMBER OF MINUTES AND A LETTER (N-S-M) IF YOU WERE BREATHING HARD OR FELT TIRED FOR NONE, SOME OR MOST OF THE TIME.**
c. After a couple of activities, just say "DID YOU ?"

If your physical activity is not in the list, put the name of your activity under "other". Include the number of minutes and the letter N, S or M.

4. TV AND VIDEO; VIDEO AND COMPUTER GAMES BEFORE SCHOOL:

Now I'm going to ask you about TV watching, video games and computer games before school yesterday. Look at the box at the bottom of the page.

a. TV and Video

Think about whether you watched any TV or videos before school yesterday. You can record this as hours, minutes, or both. Let me show you an example. Let's say I woke up early and watched cartoon shows before coming to school. I watched two whole shows, so that would be one hour. Then, I watched about half of another show, so that would be another 15 minutes. So the total I would write down would be 1 hour, 15 minutes. Write these on the overhead.

If you watched 5 minutes or more of TV before school yesterday, write the hours or minutes. If you watched less than 5 minutes, write zero.

b. Video/Computer Games

Now think if you played any video or computer games before school yesterday. What are some examples of video or computer games? (Answer: Nintendo, Game Boy, Wheel of Fortune, etc.) Write the hours or minutes you played video games or computer games before school yesterday.

If you played 5 minutes or more of video or computer games before school yesterday, write the hours or minutes. If you played less than 5 minutes, write zero.
5. TV, VIDEO GAMES, COMPUTER GAMES AFTER SCHOOL:

a. TV

Think about the shows you watched after school, including the time before dinner, during dinner or after dinner. If you watched three 1/2 hour shows, what would you write? If you watched 3 minutes of TV, what would you write? Now write the hours or minutes of TV you watched yesterday after school. If you need to add several different times you watched TV for more than 5 minutes, please use the back of the page.

If you watched 5 minutes or more of TV after school YESTERDAY, write the hours or minutes. If you watched less than 5 minutes, write zero.

b. Video /Computer Games

Did you play any video or computer games after school yesterday? Write the hours or minutes you played these games yesterday after school.

If you played 5 minutes or more of video or computer games after school YESTERDAY, write the hours or minutes. If you played less than 5 minutes, write zero.

END OF CHECKLIST: Now you are finished with this form. Turn back to the first page and make sure your name is on it. Thank you very much.
**SECTION A. GENERAL INFORMATION**

(CATCH STAFF USE ONLY)

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<td>A1.</td>
<td><strong>FORM VERSION:</strong></td>
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<td>A2.</td>
<td><strong>TODAY’S DATE:</strong></td>
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<td>A3.</td>
<td><strong>ADMINISTRATOR’S INITIALS:</strong></td>
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<td>A4.</td>
<td><strong>SCHOOL STARTING TIME:</strong></td>
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<td>A5.</td>
<td><strong>SCHOOL ENDING TIME:</strong></td>
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**A6.** DID YOU PARTICIPATE IN PHYSICAL EDUCATION CLASS YESTERDAY?

- **NO** .................. 1
- **YES** .................. 2

**A7.** IF YES, HOW MANY MINUTES LONG WAS PHYSICAL EDUCATION CLASS?

- | Minutes |

**A8.** DID YOU PARTICIPATE IN RECESS YESTERDAY?

- **NO** .................. 1
- **YES** .................. 2

**A9.** IF YES, HOW MANY MINUTES OF RECESS DID YOU HAVE?

- Minutes First Recess |   |   | Minutes Second Recess |   |   |
# Section B. Activities

<table>
<thead>
<tr>
<th>A. Activity</th>
<th>B. Before School</th>
<th>C. None, Some, Most N</th>
<th>D. During School</th>
<th>E. None, Some, Most N</th>
<th>F. After School</th>
<th>G. None, Some, Most N</th>
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<tbody>
<tr>
<td>1. Bicycling</td>
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<td>2. Swimming Laps</td>
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<td>3. Gymnastics: bars, beam, tumbling, trampoline</td>
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<td>4. Exercise: push-ups, sit-ups, jumping jacks</td>
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<td>5. Basketball</td>
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<td>6. Baseball/Softball</td>
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<td>7. Football</td>
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<td>8. Soccer</td>
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<td>9. Volleyball</td>
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<td>10. Racket Sports: badminton, tennis</td>
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<td>11. Ball Playing: Four Square, dodge ball, kickball</td>
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<td>12. Games: chase, tag, hopscotch</td>
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<td>13. Outdoor Play: climbing trees, hide and seek</td>
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<td>14. Water Play: (swimming pool, ocean or lake)</td>
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<td>15. Jump Rope</td>
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<td>16. Dance</td>
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<td>17. Outdoor Chores: mowing, raking, gardening</td>
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<td>18. Indoor Chores: mopping, vacuuming, sweeping</td>
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<td>19. Mixed Walking/ Running</td>
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<td>20. Walking</td>
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<td>21. Running</td>
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<td>22. Other: (physical activity classes, lessons or teams)</td>
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<table>
<thead>
<tr>
<th>Before School</th>
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<td>T.V./Video</td>
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