

# SuNDiAL 2019 Enrolment Questionnaire

Thank you for showing an interest in this project. Please read the information about SuNDiAL project carefully. This can be found on our website [www.otago.ac.nz/sundial](http://www.otago.ac.nz/sundial). Take time to think about it and talk with family or friends before you decide whether to take part or not. If you decide to take part we thank you. If you decide not to take part that won't disadvantage you and we thank you for considering it.

Who are we seeking to take part in the project?

We are looking for female high school students who are 15 to 18 years old. To be eligible to take part, your high school must have agreed to take part in the study, you must speak and understand English, and be able to complete the questionnaires.

If you take part, what will you be asked to do?

If you agree to take part in this study you will be asked to do three things:

- 1) Complete an online questionnaire with three parts to it: (i) health & demographics; (ii) why you choose the food you eat; and (iii) your dietary habits.
- 2) Attend a session at your school with our research team. This visit will take about 60 minutes and you will be asked to recall the food and drink you've consumed over the last day. You will also have your height, weight, and length of your lower arm measured. These measurements will be done twice to make sure they are as accurate as possible. This will be done in a private space and you may ask for the measurements if you want them.
- 3) In the next week or two we'll ring or video call you to do a second food and drink recall.

Any questions?

Contact Jill (ph 03 479 5683) or Meredith (ph 03 479 8157) or email us on: [sundial@otago.ac.nz](mailto:sundial@otago.ac.nz)

This study has been approved by the University of Otago Human Ethics Committee (Health). If you have any concerns about the ethical conduct of the research you may contact the Committee through the Human Ethics Committee Administrator (phone +64 3 479 8256 or email [gary.witte@otago.ac.nz](mailto:gary.witte@otago.ac.nz)). Any issues you raise will be treated in confidence and investigated and you will be informed of the outcome.

Electronic consent

Click on the "agree" button below if:

You have had all your questions answered about the study and understand that you can ask for more information at any stage

You know that when the project is completed all personal information that could be linked to you will be removed from the paper records and electronic files for the project, and that these will be placed in secure storage and kept for at least ten years.

You are a young woman who is 15 to 18 years old and isn't pregnant

You know you can pull out of the study anytime before it finishes in October 2019.

If you don't want to take part in the SuNDiAL project, please click on the "disagree" button.

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- AGREE
- DISAGREE

**Thank you for agreeing to taking part in the SuNDiAL project! If you are female, aged 15-18 years of age and not pregnant, please answer the following two questions:**

What age are you as of today?

- 15
- 16
- 17
- 18
- None of the above

What high school do you attend?

- Tauraroa Area School
- Mt Maunganui College
- Spotswood College
- Wellington Girls College
- Waimea College
- Hornby High School
- Columba College
- Kaikorai Valley College
- Queens High School
- Mt Aspiring College
- None of the above

**Thank you! You are eligible to take part in the SuNDiAL project!**

**There are three other parts to the SuNDiAL project that are optional. Please read the following information carefully before you decide whether to take part in these optional bits of the study. For each one of these that you do, you will receive a \$5 gift voucher from New World or PaknSave.**

**If you agree to do these, but change your mind later, that's OK - there is no disadvantage to not you if you decide not to do these.**

**Once all of the analysis has been completed the samples will be disposed of using standard biohazard protocols. On the consent form (below) you can tell us if you would like your blood sample disposed of with a Karakia (Māori Prayer).**

## Electronic consent

Click on the "AGREE" button below if:

- You have read the information on the website
- You want to take part in these parts of the study

If you don't want to take part in these parts of the study, please click on the "DISAGREE" button.

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BLOOD SAMPLE:

We would like you to provide a blood sample (which would be collected by someone with extensive training in how to collect blood), but we understand that not everyone feels comfortable about this so it is entirely up to you if you do this. If you do provide a blood sample, we can tell you whether you're iron deficient or not. You can still take part in the rest of the study even if you don't do this bit.

Click on the agree button below if:

You understand the risks of discomfort involved in providing a blood sample

- AGREE  
 DISAGREE

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Please click here if you want your samples disposed of with a Karakia (Māori Prayer)

- Yes  
 No

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URINE SAMPLE:

We would also like you to give a urine sample ("pee or wee") - which is easy for you collect yourself with the equipment we give you. You can still take part in the rest of the study even if you don't do this bit.

Click on the 'AGREE' button below if:

- AGREE  
 DISAGREE

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**ACCELEROMETER:**

We would also like you to wear a small red box called an accelerometer on an elastic belt 24 hours a day for seven days. This will tell us how much time you spend sitting down, moving around, and sleeping. If you choose to wear the accelerometer you will be asked to complete a little diary about the times you took the device off, and what time you went to bed each night on the days that you wear it.

One of our research team will return to your school the week after this visit to collect the accelerometer. You can still take part in the rest of the study even if you don't do this bit.

- AGREE
- DISAGREE

**Contact Information**

What is your name?

\_\_\_\_\_  
(Preferred first name, Last name)

What is your date of birth?

\_\_\_\_\_

Age

\_\_\_\_\_

Phone number (mobile would be best - so we can text you reminders)

\_\_\_\_\_

What is your home address?  
(This will be the address where we will send your voucher)

\_\_\_\_\_  
(number & street, suburb, city, postcode)

Do you live at this address during school term?

- Yes  
 No

Do you live in a boarding house during school term?  
(Don't include private boarding)

- Yes  
 No

Please put the name and/or address of the boarding house

\_\_\_\_\_  
(number & street, suburb, city, postcode)

What is the address that you live at during school term?

\_\_\_\_\_  
(number & street, suburb, city, postcode)

**Health Information**

If you know your height, please write it here:

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What unit is this measurement in?

- centimetres
- metres
- feet and inches

If you know your weight (in kg) please write it here:

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Have you been diagnosed with diabetes?

- Yes  
 No

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If so, which type?

- Type 1 diabetes  
 Type 2 diabetes  
 Don't know

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Do you avoid eating gluten?

- Yes  
 No

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Have you been diagnosed with either coeliac disease or gluten intolerance?

- Yes - coeliac disease  
 Yes - gluten intolerant  
 No diagnosis but suspected intolerance or coeliac  
 No

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Have you been diagnosed with a food allergy or intolerance? (not gluten)

- Yes  
 No

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Which foods are you allergic or intolerant to?  
(Select as many as apply)

- Eggs  
 Dairy  
 Nuts  
 Shellfish  
 Other

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Other: please specify \_\_\_\_\_

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Are you vegetarian or vegan?

- Yes  
 No

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Which foods do you eat? (Select as many as apply)

- Egg  
 Milk (not plant milk like soy milk)  
 Fish or seafood  
 Chicken or poultry  
 Meat/red meat occasionally  
 None of the above

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Are you vegan?

- Yes  
 No

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How long have you been following this way of eating?

- Less than a month  
 Between 1 and 6 months  
 Between 6 months and 1 year  
 Between 1 and 2 years  
 More than 2 years  
 My whole life

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The following questions are a bit sensitive, but it is necessary for us to ask them because they can help us understand what nutrients are important for the health of young women your age

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How old were you when you had your first period?

- 11 years or younger  
 12-14 years  
 15 years or older  
 I haven't had a period yet

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How long do you usually have from the start of one period to the start of the next?

- Less than a week  
 1-2 weeks  
 3-4 weeks  
 4-5 weeks  
 More than 5 weeks  
 I haven't had a period for 3 months  
 The timing of my periods is not regular

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How many days does your period usually last? (count your light days as well as your heavy ones)

- Less than 4 days  
 4-6 days  
 7-9 days  
 10 days or more

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Are your periods so heavy that they make it hard for you to go to school?

- Yes - often  
 Yes - sometimes  
 No

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Have you donated blood?

- Yes  
 No

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When did you last donate blood?

- In the last 4 months  
 Between 4 and 12 months ago  
 More than a year ago

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Have you had a nosebleed in the last year?

- Yes  
 No

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Do you have nosebleeds regularly?

- Yes  
 No

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Over the last year, on average how often did you get nose bleeds?

- More than once a week  
 Once a week  
 Every couple of weeks  
 Once a month  
 Every few months  
 Every 6 months  
 Once a year  
 Less than once a year

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Do you use any of the following contraceptives:

- Oral contraceptive (eg 'the pill' or 'the mini-pill')
- Depo Provera injection
- Implant (eg Jadelle)
- Hormonal IUD (eg Mirena)

- No - I don't use those contraceptives  
 Yes - I use one of those contraceptives

**Other information**

Which ethnic group do you belong to? (Mark those that apply)

- New Zealand European
- Māori
- Samoan
- Cook Island Maori
- Tongan
- Niuean
- Chinese
- Indian
- Other such as Dutch, Japanese, Tokelauan, please state..

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Other: please state

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Please let us know which type of gift card you would prefer:

- New World
- PaknSave

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Thank you for enrolling in the SuNDiAL project!

What happens next?

We are now going to ask you to complete a questionnaire about why you eat the food you do. If you want to complete it at a later time, please click the Save and Return button at the bottom of this page (don't forget to make a note of your code so that you can return to this survey). Or, click the "Submit" button to continue.

You will also get an email and/or text to tell you when you can visit the SuNDiAL clinic at your school to complete the other measurements.