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## **APPENDICES**

## APPENDIX A

### Questionnaire for School with / without School Snack Program

Interviewer ID number \_\_\_\_\_

Student ID Number \_\_\_\_\_ School ID Number \_\_\_\_\_

Class.....grade.....

Date Survey.....

## Questionnaire for mother

### General Characteristics of children

1. Age :..... years

Birthday of the child : Day.....Month.....Year.....

2. Gender :  (1) Male  (2) Female

For each child		
Gender	Age	birthday

5. What is the total number of people in this household?.....people

6. Did the child have any illness within 4 weeks? How long did it persist?

(1) Diarrhea  yes  days  No

(2) Cough  yes  days  No

(3) Fever  yes  days  No

(4) Other (specify).....

**Fill in the blank spaces or please check (√) the appropriate boxes**

7. Age of mother .....years

8. Age of father .....years

9. Mother's education (check only one box)

(1)  No formal education, or attended primary school

(2)  Passed primary school (6<sup>th</sup> grade)

(3)  Passed secondary school (9<sup>th</sup> grade)

(4)  passed senior high school ((12<sup>th</sup> grade)

(5)  University or other higher education

10. Father's education (check only one box)

(1)  Less than primary school

(2)  Passed primary school (6<sup>th</sup> grade)

(3)  Passed secondary school (9<sup>th</sup> grade)

(4)  passed senior high school ((12<sup>th</sup> grade)

(5)  University or other higher education

11. Occupation of mother (check only one)

(1)  Housewife

(2)  Government official

(3)  Clerk

(4)  Employed

(5)  Labor

(6)  Trade

(7)  Other (specify.....)

## 12. Occupation of father

- (1)  Unemployed
- (2)  Government official
- (3)  Clerk
- (4)  Employed
- (5)  Labor
- (6)  Trade
- (7)  Other (specify .....)

13. Family income: how much money do you earn per month? \_\_\_\_\_ Rp per month

## 14. Religion

- (1)  Muslim
- (2)  Christian
- (3)  Buddhist
- (4)  Hindu
- (5)  Other

15. When your child was small did you breast-feed her/him?

- \_\_\_\_\_ No
- \_\_\_\_\_ Yes

16. If yes, for how long did you breast-feed this child? \_\_\_\_\_ Months

17. Household possessions (Check all that apply.)

- (1)  Radio
- (2)  Television
- (3)  Motor bike



(4)  Automobile(car)

(5)  Truck

### **Environment**

18. Do you have electricity in your house?

(1)  Yes

(2)  No

19. Sanitation facility in your home

(1)  Septic tank or a sewer (modern toilet)

(2)  Water sealed/slab latrine

(3)  Pit latrine

(4)  Hanging/open latrine

(5)  No facility in the house

20. How do you get information about health and nutrition?

(1)  Do not get

(2)  Listening to the radio

(3)  Watching television

(4)  Reading newspaper

(5)  From school

(6)  From people at your work place

(7)  From friends

(8)  Other

<b>Mothers' Food Practice</b>		<b>yes</b>	<b>no</b>	<b>Don't know</b>
21.	Do you always pay attention to the nutrients in all 3 meals per days?			
22.	Do you prepare balanced menu (health four, complete five) for children?			
23.	You usually allow child to choose the type of food eaten?			
24.	Do you sometimes skip one or two meals for your child within a day			
25.	Do you usually encourage your children to eat until finish his/her food?			
26.	Do you usually re-heat left-over food before serving?			
<b>Mother's food knowledge</b>				
27	Children who lack food (rice, bread, noodles) can develop malnutrition?			
28	Giving only junk food (Pop corn, potato cheap, Chicky- chikhy) for child can lead to malnutrition?			

## Questionnaire for children

1. Weight.....Kgs

2. Height.....cms

3. Have you breakfast before going to school every day?

.....yes

.....no

4. If the answer is no how do you manage for breakfast?

.....

5. Did you ever get school snack program

.....yes

.....no

6. If the answer is yes when?

.....

.....

And how long ?

.....

.....

7. During last 7 days, on how many days did you do vigorous physical activities like aerobics, play football, karate, judo or fast cycling? If yes, \_\_\_\_\_ days per week if no vigorous physical activities carried out, please proceed to question 8

8. How much time did you spend for vigorous physical activities on those days? \_\_\_\_\_ hours per day \_\_\_\_\_ minutes per day or don't know/not sure \_\_\_\_\_

9. During the last 7 days, on how many days did you do moderate physical activities like cycling at regular pace, playing badminton, brisk walking, swimming? Do not including walking, \_\_\_\_\_ days per week. If no moderate physical activities carried out, proceed to question 10

10. how much time did you spend doing moderate physical activities on those days? \_\_\_\_\_ hours per day, \_\_\_\_\_ minutes per day. Don't know /no sure \_\_\_\_\_

11. during the last 7 days, on how many days did you walk to school at least 10 minutes at a time? \_\_\_\_\_ days per week. If not walked, please proceed to question 15.

#### **About school Snack Program**

12. Does school give you snack every day ?

(1)  yes                      (2)  sometimes/not everyday                      (3)  no

13. If the school snack program do not give everyday how many times they give you a week?

.....times a wee

14. Does the school snack taste good ?

(1)  yes                      (2)  No

15. Do you always finish school snack?

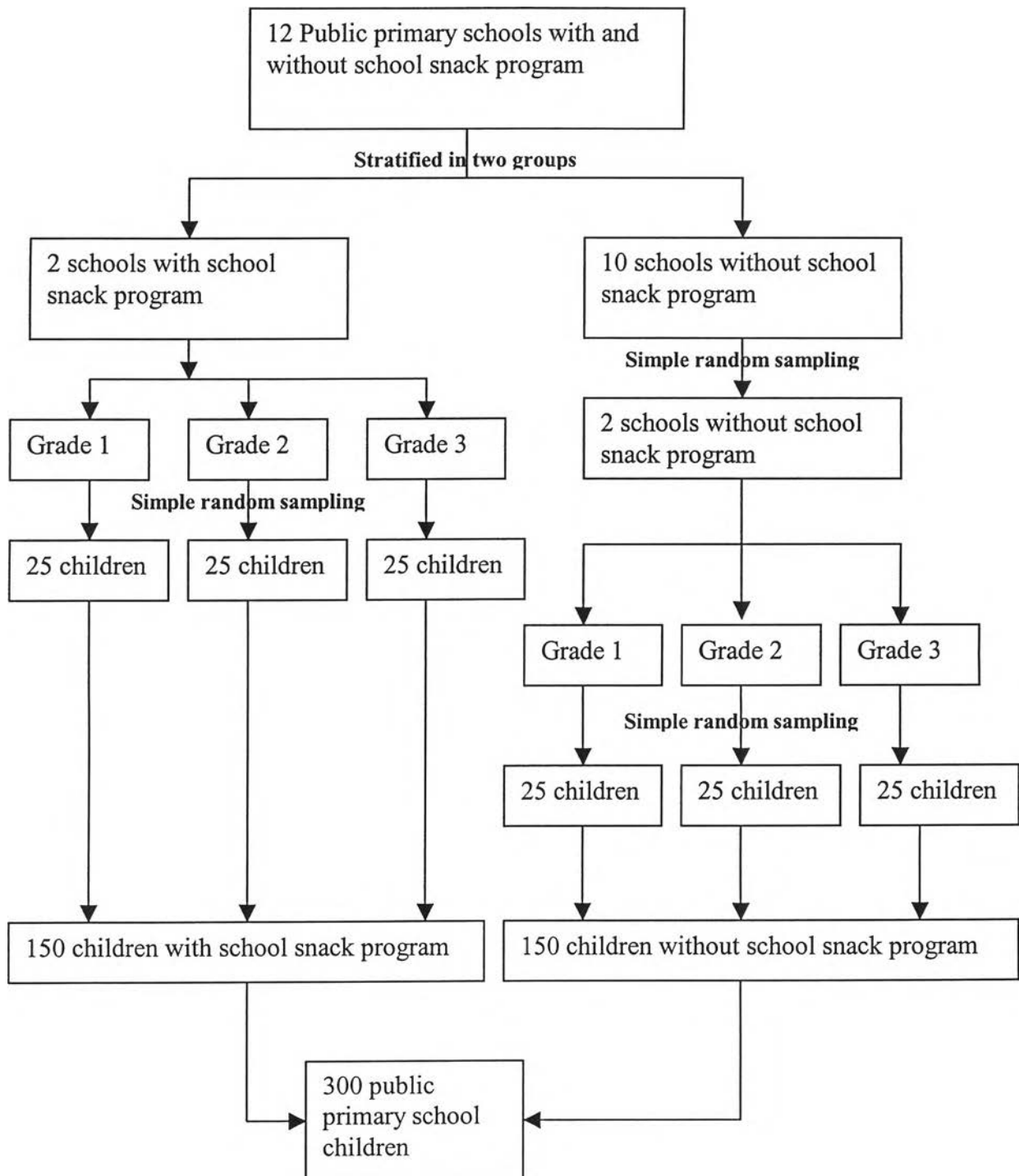
(1)  yes                      (2)  No

16. If the answer is no normally how many times you can finished that school snack?

.....times a week

## APPENDIX B

### Sampling Frame



## APPENDIX C

### Proposal for Advance Money

Thesis Title : Nutritional status among public primary school children with and without school snack program in Jati Asih sub district Indonesia.	
From	: Hasnita Scholar of DETEC
University	: Chulalongkorn, College of Public health
Course	: MPH (Health System Development)
Duration	: 2004-2005
Objective	: - Research proposal - Training of data collectors - Pretest of questionnaires - Data collection
Place of data collection	: Public primary schools in Jati Asih sub district Indonesia
Total sample	: 300 school children and their parents ( total 600 questionnaires)
Time	: 1 February 2005 – 28 February 2004

#### Description of expense for data collection

No	Item	Unit	Price (Baht)	Unit (Number)	Total Budget (Baht)
1	Train interviewers				
	<ul style="list-style-type: none"> <li>• Participant</li> <li>• Trainer</li> </ul>	Person Person	200/p 300/p	12p * 1 day 1p * 1 day	2.400 300
2	Pre testing				
	<ul style="list-style-type: none"> <li>• Interviewers</li> <li>• Photocopy</li> <li>• Data processing</li> </ul>	Person Page Person	300 1 200	2p * 4 days 100 2p * 2 days	2.400 100 800
	3	Data Collection :			
	<ul style="list-style-type: none"> <li>• Interviewers</li> <li>• Photocopy</li> <li>• Stationary</li> <li>• Data processing</li> </ul>	Person Set Set Person	200/p 10/p 50 200/p	12p * 10 days 600 set 50 2p * 10 days	24.000 3000 200 2.000
Grand Total					35.200

Representative of the College of Public Health  
Chulalongkorn University

(scholar)

## APPENDIX D

### Time Table

No	Activities	November				December				January				February				March				April				May			
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1	Writing proposal			x	x																								
2	Submit first draft					x	x																						
3	Revise first draft									x	x																		
4	Submit for proposal exam									x	x																		
5	Proposal exam										x																		
6	Revise proposal											x																	
7	Recruit and train interviewers													x															
8	Pretest questionnaire														x														
9	Revise questionnaire														x														
10	Conduct structure interviews															x	x												
11	Data management																	x											
12	Data analysis																		x	x	x								
13	Report writing																					x							
14	Submit for final defense																						x						
15	Thesis exam																							x	x				
16	Revision																									x			
17	Submit as a product																									x			

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