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Local Church Code

Today we'd like to ask you some questions about church.  
 Don't write your name on this survey.  
 All of your answers are private.  
 You don't have to do this survey if you don't want to.  
 Ask your leader if you have any questions.

**Put an X in the box next to your answer** Please use a pen.

Example: Do you eat fruit?

Yes     No



## About You

### 1. How old are you?

- |                                       |                                       |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> 8 years old  | <input type="checkbox"/> 12 years old |
| <input type="checkbox"/> 9 years old  | <input type="checkbox"/> 13 years old |
| <input type="checkbox"/> 10 years old | <input type="checkbox"/> 14 years old |
| <input type="checkbox"/> 11 years old |                                       |

### 2. Are you a boy or girl?

- Boy     Girl

### 3. Where were you born?

- In Australia
- In another English speaking country
- In a non-English speaking country

### 4. What sort of school do you go to?

- A public/state school
- A Catholic school
- An Anglican, Lutheran or Uniting Church school
- Another Christian school or church school
- Other independent school (e.g. Steiner, Montessori)
- Home school

### 5. How often do you do the following things?

(It can be in person or online)

	Every week	Most weeks	Some weeks	Hardly ever /Never
Go to church services or Mass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go to a separate children's program during church services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go to a church youth group or kids club	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## About Your Family and Church

### 6. Does anyone in your family do the following things?

- Have discussions with you about God or Christian faith     Often     Sometimes     Never
- Read the Bible or pray with you     Often     Sometimes     Never
- Ask you what you have learned about at church     Often     Sometimes     Never
- Talk with you about questions, doubts or worries about Christian faith     Often     Sometimes     Never

### 7. Do your parents go to church a lot?

- Yes, my parents both come a lot
- Yes, only mum does
- Yes, only dad does
- No

### 8. Which family members are good examples to you of people who follow Jesus?

(Cross all the boxes that are true)

- Mum
- Dad
- Grandmother
- Grandfather
- Sisters or brothers
- Other family adults (e.g. step-parents, aunts, uncles)
- None of them
- Not sure

**9. Think about some of the adults in your life who are not part of your family. Which ones are good examples to you of people who follow Jesus?**

(Cross all the boxes that are true)

- Sunday School teachers
- Youth leaders
- The minister/pastor/priest at your church
- Other adults at church
- School teacher or other school staff
- Other adults (e.g. sports coach, music teacher or others)
- None of them

**About God and Faith**

**10. Which of the following statements best reflect your beliefs about God?**

- I believe that God exists
- I am not sure if God exists
- I do not believe God exists

**11. Do you ever do the following things?**

- |                                                |                                |                                    |                                |
|------------------------------------------------|--------------------------------|------------------------------------|--------------------------------|
| Pray on your own                               | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Read the Bible on your own                     | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Give money to people who need it               | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Say thank you to God or Jesus                  | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Say sorry to God or Jesus                      | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Ask God or Jesus to help others                | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Ask God or Jesus to make the world better      | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Talk to your school friends about God or Jesus | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Help raise money for poor people               | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Do things to help the environment              | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Read Christian stories or books                | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Listen to Christian music (outside church)     | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |

**12. Would you call yourself a Christian?**

- Yes     Not sure     No

**13. Have you received your first Communion or Lord's Supper?**

- Yes     Not sure     No

**14. Do you participate in Holy Communion with others in your church?**

- Yes     Not sure     No

**15. Have you been baptised?**

- Yes     Not sure     No

**Read the next sentences carefully and think, 'Do I agree with it?'**

*If you Agree Strongly, cross the box 'AS'*

*If you Agree, cross the box 'A'*

*If you are Not Certain, cross the box 'NC'*

*If you Disagree, cross the box 'D'*

*If you Disagree Strongly, cross the box 'DS'*

**16. I know that Jesus helps me**

- AS    A    NC    D    DS

**17. I think going to church is a waste of my time**

- AS    A    NC    D    DS

**18. God helps me to lead a better life**

- AS    A    NC    D    DS

**19. God means a lot to me**

- AS    A    NC    D    DS

**20. Prayer helps me a lot**

- AS    A    NC    D    DS

**21. I know that Jesus is very close to me**

- AS    A    NC    D    DS

**22. I think the Bible is helpful to my life**

- AS    A    NC    D    DS

**About Church Services**

*These questions are about church worship services or Mass at this church - where the adults also go. You can answer even if you only go to part of the service or Mass.*

**23. Do you like going to church services or Mass at this church?**

- I always like it                       I like it sometimes  
 I like it most of the time         I don't like it

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**24. What about when church services or Mass is online? Do you like it then?**

- I always like it
- I like it most of the time
- I like it sometimes
- I don't like it
- I have not gone to church online

Think now just about the times when you have gone to church in person (not online).

**25. When you go to church services or Mass do you:**

- |                                       |                                |                                    |                                |
|---------------------------------------|--------------------------------|------------------------------------|--------------------------------|
| Feel God is there?                    | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Feel bored?                           | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Feel you are learning more about God? | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Feel you belong?                      | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Feel happy to see your friends?       | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |
| Feel safe?                            | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Never |

**Church Groups for Children and Youth**

These next questions are about the church groups or activities for children or youth. It might be Sunday School, kids club, or something else.

**26. What kinds of church groups or activities for children or youth do you attend (including online)?**

- Kids Club
- Youth Group
- Sunday children's program (e.g. Sunday School)
- A group at school
- Some other kind of church group
- There are no groups for children or youth at this church

**27. Do you like going to your church's group for children or youth?**

- I always like it
- I like it most of the time
- I like it sometimes
- I don't like it

**Being Involved at Your Church**

**28. Think about the adults at church not in your family. How many can you talk to about normal everyday things?**

- None
- One to five adults
- Six to ten adults
- More than ten adults

**29. Everyone has things they are specially good at doing. In this list, what do you think you are good at?**

You can put a cross in more than one box in the list.

- Standing up for what is fair and right
- Reading the Bible, praying or singing to God
- Helping lead others
- Being kind to people who don't have any friends yet
- Performing special items (e.g. singing, dancing, acting in a play)
- Having lots of new and different ideas
- Doing things up the front (e.g. doing readings, prayers etc)
- Talking to other people about God
- Taking care of God's earth
- Praying with others
- I don't think I'm good at any of these things

**30. Do you do any of the following things at your church? Would you like to do them in the future? (Put a cross in the boxes in each column if your answer is 'yes')**

	I do this at my church	I would like to do this at my church
Welcome people as they arrive at church	<input type="checkbox"/>	<input type="checkbox"/>
Do things up the front (e.g. doing readings, prayers etc)	<input type="checkbox"/>	<input type="checkbox"/>
Be part of the music team	<input type="checkbox"/>	<input type="checkbox"/>
Perform special items (e.g. singing, dancing, acting in a play)	<input type="checkbox"/>	<input type="checkbox"/>
Pray with others	<input type="checkbox"/>	<input type="checkbox"/>
Help with serving food	<input type="checkbox"/>	<input type="checkbox"/>
Help with technology (e.g. sound, website etc)	<input type="checkbox"/>	<input type="checkbox"/>
Give practical help to people who need food, clothes or other things	<input type="checkbox"/>	<input type="checkbox"/>
Taking care of God's earth (e.g. gardening, clean up etc)	<input type="checkbox"/>	<input type="checkbox"/>
Something else not listed above	<input type="checkbox"/>	<input type="checkbox"/>
I don't want to do any of these things	<input type="checkbox"/>	<input type="checkbox"/>

## About You

### 31. How happy are you in each of these areas of your life?

	Very Sad 1	Sad 2	Not Happy or Sad 3	Happy 4	Very Happy 5
How happy are you with your life as a whole?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you with yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you with your health?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you with the things you want to be good at?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you about getting on with the people you know?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you about the things you have? Like the money you have and the things you own?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you about how safe you feel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you with your school?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you about doing things away from your home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How happy are you about what may happen to you later on in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 32. Compared to the time before COVID-19 started, how often do you feel:

	More than before	About the same	Less than before
Happy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hopeful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worried?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sad?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Like you have your own space and time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bored (like you have nothing to do)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## About Technology

### 33. Do you have your own mobile phone, computer or tablet (even if it is owned by your parents or someone else)?

(Cross all the boxes that are true)

- Yes, I have a mobile phone
- Yes, I have a computer I can use
- Yes, I have a tablet (e.g. iPad)
- No

### 34. Which of these online social networking sites have you used in the last week?

(Cross all the boxes that are true)

- Facebook
- Twitter
- TikTok
- Youtube
- Zoom
- Discord
- Instagram
- Snapchat
- Another social networking site
- None, I have not used any social networking site in the last week
- Don't know

### 35. In the last month, have you used your computer, tablet or phone to do any of these things?

(Cross all the boxes that are true)

- Read the Bible (on a screen)
- Listen to people talk about God or Jesus (e.g. podcast)
- Listen to Christian music
- Watch videos about God or Jesus
- Connect with others from this church (e.g. on Facebook)
- No

**THANK YOU** for doing this survey.

Please hand it back to your leader now.

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