You can obtain 3 CEU's for reading the article **"ASSOCIATIONS BETWEEN NUTRITION KNOWLEDGE AND OBESITY-RELATED ATTITUDES AND PHYSICAL ACTIVITY AMONG YOUNG ADULTS FROM KENYA, SOUTH AFRICA, AND THE UNITED KINGDOM"** and answering ALL the accompanying questions with a pass mark of 70% or more.

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1) Register at **https://www.mpconsulting.co.za/medical-cpd**.
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6) Select relevant issue.
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10) Answer ALL the accompanying questions in the CPD questionnaire.
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Only online questionnaires will be accepted.

## Activity 176

1. The following statement best describes the primary aim of the study:
   a. To compare nutrition knowledge among adults from Kenya, South Africa, and the United Kingdom.
   b. To test whether age influences nutrition knowledge.
   c. To test relationships between nutrition knowledge, obesity-related attitudes, and physical activity.

2. The following was true about physical activity in the study:
   a. It was self-reported.
   b. It was measured objectively.
   c. It was reported in minutes.

3. When comparing gender, there were NO differences in any of the three countries, in the following:
   a. Physical activity.
   b. Dietary Recommendation Knowledge Score.
   c. Household asset score.

4. Nutrition knowledge was reported to differ by:
   a. Age group.
   b. Country.
   c. Socio-economic status.

5. The study sample was targeted to include the following respondents:
   a. 18- to 35-year-olds with internet access.
   b. Any adult who was available to participate.
   c. Children and adolescents residing in Kenya, South Africa, and the United Kingdom.

6. The following was used as proxy for socio-economic status:
   a. Household asset score.
   b. Employment status.
   c. Personal income.

7. The main hypothesis of the study was that:
   a. The relationship between nutrition knowledge and obesity-related attitudes is mediated by physical activity.
   b. The relationship between nutrition knowledge and physical activity is mediated by obesity-related attitudes.
   c. The relationship between physical activity and obesity-related attitudes is mediated by nutrition knowledge.

8. Concerning obesity beliefs:
   a. Most respondents believed that there is no reason to worry about being a bit overweight.
   b. Most respondents believed that most people gain weight because of low metabolism.
   c. Most respondents believed that being overweight is something one inherits from own parents.

9. Regarding attitudes towards obesity policies, most participants were against:
   a. Putting a tax on high fat foods.
   b. Reducing the standard size of unhealthy snacks or drinks.
   c. Raising taxes on fuel and parking.

10. Regarding the relationship between nutrition knowledge and beliefs about obesity, higher nutrition knowledge was associated with:
    a. Greater odds of disagreeing that there is no reason to worry about being a bit overweight.
    b. Greater odds of disagreeing that overweight is caused by exercising too little.
    c. Greater odds of agreeing that being overweight is something one inherits from own parents.

11. In the following country, no evidence of association between nutrition knowledge and physical activity was reported:
    a. Kenya.
    b. South Africa.
    c. The United Kingdom.

12. In the combined sample, the following relationship was fully mediated by the belief that being overweight is mainly caused by exercising too little:
    a. Association between nutrition knowledge and moderate physical activity.
    b. Association between nutrition knowledge and vigorous physical activity.
    c. No relationship was moderated by this belief.

13. The strength of the study included:
    a. Being able to provide causal links in the observed relationships.
    b. Inclusion of countries at different levels of economic development.
    c. Using a nutrition knowledge tool that was validated in all countries.

14. One of the study limitations was:
    a. Including only women.
    b. Including a sample size that was too large.
    c. Not being able to account for the influence of the level of education.

15. The recommendation from the study was:
    a. Interventions from high income countries should always be implemented in low resource countries like Kenya and South Africa.
    b. Interventions from high income countries should first be evaluated before being implemented in low-resource settings.
    c. Interventions can be implemented in any country if they were tested in humans.