

Walking leads to good health. The Walk _____ County program is part of the Heart Health Coalition. Our goal is to encourage community members to use the _____ walking track in _____, MO. If you will provide your address, we want to send you a personalized walking report with information just for you.

Name: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

*****For the next 12 questions, please check ONE response only*****

1. How did you first hear about this program?

- From my health care provider
- From a friend
- From the Heart Health Coalition
- At my church
- At a health fair
- From the radio or newspaper
- Other _____

2. Where did you get this survey?

- At my doctor's office or community clinic
- At my church
- From a friend or family member
- At a coalition event
- Other

3. Have you attended heart health coalition events?

- Yes
- No

4. Are you...

- Male?
- Female?

5. Are you...

- Single?
- Married or a member of an unmarried couple?
- Separated or divorced?
- Widowed?

6. Are you...

- African American?
- White?
- Hispanic / Latino?
- Other?

7. How old are you? _____ years

8. Do you provide care for any other adults living in your home?

- Yes
- No

9. On average, about how many days per week do you walk for exercise for a total of at least 30 minutes per day?

- Every day
- 5-6 times per week
- 3-4 times per week
- 1-2 times per week
- less than once per week

10. Complete the sentence below to choose a walking goal you'd like to achieve.

In the next month, I'd like to use the walking track _____ days per week, for at least _____ minutes each day.

11. What is the main reason you want to reach your walking goal? (Check one.)

- To control my weight.
- To improve my overall health.
- To relieve stress.
- To socialize with friends.
- Because my friends/neighbors are doing it.
- Because my doctor told me to.
- Because my church leader told me to.
- To look and feel better.
- For fresh air.
- Other

12. Which of these statements is most true for you?

- I prefer to walk on the track by myself.
- I prefer to walk on the track with a buddy, and have someone who will walk with me.
- I prefer to walk on the track with a buddy, but don't have anyone to walk with me.

*****For the remaining questions, please check ALL responses that apply*****

13. What might keep you from reaching this goal?
(Check all that apply.)

- Bad weather would keep me from going.
- I don't have enough time to walk.
- I don't have the will power to keep it up.
- I'm afraid of becoming injured or sore.
- It's boring.
- Family and friends won't support me.
- I can't get to the walking track.
- The track is too crowded.
- I'm concerned about my safety at the track.

14. How confident are you that you'll be able to walk on the track when...

	Very confident	Somewhat confident	Not at all confident
...you're under stress?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...you're feeling sad?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...you're too busy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...you're in a bad mood?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... the weather is bad?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... there is less daylight?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Which of the following recreational activities do you enjoy doing?

	I enjoy A LOT.	I enjoy SOMEWHAT	I do NOT enjoy.
Bicycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fishing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gardening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Golfing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hunting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pet care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sewing / crafts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Swimming	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Team sports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Watching TV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Which of the following do you prefer for getting information about walking? (Check all that apply.)

- Audio tapes
- Books
- Clubs or support groups
- Magazines
- The Internet

17. Do you or others in your family have...
(Check all that apply.)

	This is a problem for me.	This is a problem for others in my family.
...sugar diabetes?	<input type="radio"/>	<input type="radio"/>
...heart disease?	<input type="radio"/>	<input type="radio"/>
...cancer?	<input type="radio"/>	<input type="radio"/>
...high blood pressure?	<input type="radio"/>	<input type="radio"/>
...high cholesterol?	<input type="radio"/>	<input type="radio"/>
...chronic back pain?	<input type="radio"/>	<input type="radio"/>
...bad knees?	<input type="radio"/>	<input type="radio"/>
...arthritis?	<input type="radio"/>	<input type="radio"/>

18. In your family do you have children living at home who are between...

(Check all that apply.)

	none	1	2 or more
...the ages of 0-5 years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...the ages of 6-12 years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...the ages of 13-18 years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

