

Office Use Only:

Randomisation Number:

Allocation: Full Booster

This survey asks you questions about physical activity you may have taken part in the **last three months**. It also asks you your thoughts about your **one-to-one booster sessions**. Please place the survey into the envelope provided and seal it before you come in for your appointment.

Please try and answer every question as honestly as possible, and do not spend too much time on any one question.

1. Over the last three months have you taken part in any of the following?

Recreational/leisure activities (e.g. gardening, cycling)

please state _____

Competitive sports/exercise

please state _____

Structured exercise (e.g. exercise class)

please state _____

Active commuting (e.g. walking/cycling to work)

please state _____

2. Please specify the places where you have done your chosen activities over the last three months (e.g. home, Ponds Forge)

Home

Local open space (e.g. park)

Facility (e.g. gym, pool, community centre, track) – please state _____

As part of daily activities (e.g. in work, shopping, walking the dog, commuting)

Other – please state _____

3. Why have you chosen to stay physically active? (Please tick one box per reason to indicate how much each reason relates to you personally)

	Not at all	Not really	Neutral	Slightly	Very much
To improve my health					
To get fitter/stay fit					
To lose weight					
To look better					
To encourage my family to be more active					
To make new friends					
To have fun/ enjoyment					
To spend time with my family					
To spend time with my friends					
For competition/to win					
It's part of my job					
It gives me a sense of achievement					
Reduce risks of health problems e.g. diabetes, heart disease					
I haven't stayed active					
A health professional recommended I should – who was that?					
.....					
Other					
.....					

4. What influences whether or not you are able to perform your chosen activity? (Please tick one box per reason to indicate how much each reason relates to you personally)

	Not at all	Not really	Neutral	Slightly	Very much
Value for money					
Activity is available when I want					
Childcare available					
Within walking distance/home/work					
Within easy reach on public transport					
If I feel I'm getting something out of it					
Whether there is someone else to do it with					
It's a habit					
Whether I can make time to do it					
My own health					
Other					

5. Do you do physical activity with anyone else?

- Yes
- No

If you answered yes, who do you usually do physical activity with? (Please tick all that apply)

- Spouse/partner
- Other family member/s
- Friend/s
- Other adult/s
- Child/children under 16 years
- As part of a group/class (including walking group)
- Other (please state) _____

If you answered yes, how useful do you find this support in helping you to stay active? (please tick one)

Very Useful	Fairly useful	Neither useful nor useless	Fairly useless	Very useless	Not applicable

Questions on the “booster” advice or counselling you received

6. Why did you decide to take part in this project? (Please write in the space below)

7. If you were to receive further physical activity “booster” counselling/advice in the future, how would you prefer it to be delivered?

- Over the telephone
- In person (face to face)

Written advice

8. Before you received the “booster” physical activity counselling/advice, what did you expect to gain from the two sessions? (Please write in the space below)

9. Did the “booster” counselling/advice sessions meet the expectations you described above?

Yes

No

Questions 10-14 – please indicate your agreement with the following statements.

10. The “booster” counselling/advice sessions fitted easily into my daily schedule (Please tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

11. The face to face “booster” counselling/advice sessions were conducted at a convenient location (please only tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

12. Throughout the “booster” counselling/advice sessions I feel I wasn't being judged by the project worker (please tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

13. The “booster” counselling/advice sessions were non-confrontational in nature (please tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

14. Throughout the “booster” counselling/advice sessions I thought the project worker understood what I was saying (please tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

15. How involved did you feel in the “booster” counselling advice sessions? (Please tick one)

- I spoke more than the project worker
- I spoke less than the project worker
- I spoke roughly the same amount as the project worker

16. How do you feel about the amount of contact time that occurred between you and the project worker? (Please tick one)

Too long	Slightly too long	About right	Slightly too short	Too short

17. During the “booster” counselling/advice sessions I was encouraged to set my own goals for physical activity (please tick one)

Not Discussed	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree

18. As a result of the “booster” counselling /advice sessions I feel I have been able to resolve my barriers towards physical activity (please tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

19. As a result of the “booster” counselling/advice sessions I now know more about the benefits of physical activity (please tick one)

Not Discussed	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree

20. As a result of the “booster” counselling/advice sessions I now know more about the risks associated with living an inactive lifestyle (please tick one)

Not Discussed	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree

21. As a result of the “booster” counselling/advice sessions, I am now more aware of available physical activity facilities and opportunities (please tick one)

Not Discussed	Strongly Disagree	Disagree	Neutral	Agree	Strongly agree

22. As a result of the “booster” counselling/advice sessions my confidence to stay active has increased (please tick one)

Strongly disagree	Disagree	Neutral	Agree	Strongly agree

23. If you are more physically active now than you were before taking part in this study, what helped you? (Please write in the space below)

--

Finally, would you be happy to discuss some of the things mentioned in this questionnaire further in an interview with a different person to the person you have been in contact with about this study so far, either face-to-face or on the telephone?

Yes – face to face

Yes – over the telephone

No

If you would like us to contact you by telephone, please give a telephone number we can contact you on:

Thank you very much for your help.