Walking Survey

The survey may take up to an hour and a half to complete.

Remember…

• we want to know what you think,
• there are no right or wrong answers,
• your participation in each survey question is optional,
• everything you tell us will be kept strictly confidential (secret), and
• you can stop at any time

And please let us know…

• if a question is unclear or confusing,
• if you need a question repeated, or
• if you would prefer to leave the answer blank.

A. Quality of Life

In general, would you say your health is:

☐ Excellent
☐ Very Good
☐ Good
☐ Fair
☐ Poor
☐ Don’t Know

B. Neighborhood Definition

1. Please tell me what you consider to be your neighborhood.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

2. Please draw this area on the provided map.
For the purpose of the survey questions I’m about to ask, please think of your neighborhood as:

- the area within a 20 minute walk or,
- 1 mile in all directions around your home.

### C. Social Cohesion of Neighborhood

How much do you agree or disagree with the following statements? Please only give one answer or each statement.

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. People around my neighborhood are willing to help their neighbors.</td>
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<tr>
<td>2. This is a close-knit neighborhood.</td>
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<tr>
<td>3. People in this neighborhood can be trusted.</td>
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<tr>
<td>4. People in this neighborhood generally don’t get along with each other.</td>
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<td>5. People in this neighborhood do not share the same values.</td>
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</tbody>
</table>

### D. Social Life in Your Neighborhood

These questions are about interaction with your neighbors. Neighbors are people who live nearby. They do not have to live on your street, but they should live within a short (20-minute) walking distance. Do not consider neighbors who are also relatives and do not count neighbors who are children.

1. How many days in the past month have you:
   
   If none, say “0”.
   
   a. ________ days Waved to a neighbor
   b. ________ days Said hello to a neighbor
   c. ________ days Stopped and talked with a neighbor
   d. ________ days Gone to a neighbor’s house to socialize
   e. ________ days Had a neighbor at your house to socialize
   f. ________ days Gone somewhere (restaurant, shopping, ball game) with a neighbor
   g. ________ days Asked a neighbor for help
   h. ________ days Sought advice from a neighbor
   i. ________ days Borrowed things and exchanged favors with a neighbor

Please listen to the following statements carefully and then choose the answer that best applies to you.

2. I would be willing to work together with others on something to improve the living environment of my neighborhood.
   
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Neutral
   - [ ] Somewhat Agree
   - [ ] Strongly Agree
3. Living in my neighborhood gives me a sense of community.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

4. It is easy to make friends in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

How likely could your neighbors be counted on to take action if:

5. Children were skipping school and hanging out on a street corner.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

6. Children were spray-painting graffiti on a local building.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

7. Children were showing disrespect to an adult.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

8. A fight broke out in front of their house/home.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree
9. The fire station closest to home was threatened with budget cuts.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

E. Types of residences in your neighborhood

Among the residences in your neighborhood…

1. How common are detached single-family residences in your immediate neighborhood?
   - None  •  A few  •  Some  •  Most  •  All

2. How common are townhouses or row houses of 1-3 stories in your immediate neighborhood?
   - None  •  A few  •  Some  •  Most  •  All

3. How common are apartments or condos 1-3 stories in your immediate neighborhood?
   - None  •  A few  •  Some  •  Most  •  All

4. How common are apartments or condos 4-6 stories in your immediate neighborhood?
   - None  •  A few  •  Some  •  Most  •  All

5. How common are apartments or condos 7-12 stories in your immediate neighborhood?
   - None  •  A few  •  Some  •  Most  •  All

6. How common are apartments or condos more than 13 stories in your immediate neighborhood?
   - None  •  A few  •  Some  •  Most  •  All

F. Stores, facilities, and other things in your neighborhood

About how long would it take to get from your home to the nearest businesses or facilities listed below if you walked to them? Feel free to follow along with a check mark (√) for each business or facility as they are read aloud.

<table>
<thead>
<tr>
<th>example: gas station</th>
<th>1-5 min</th>
<th>6-10 min</th>
<th>11-20 min</th>
<th>21-30 min</th>
<th>31+ min</th>
<th>don’t know</th>
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</thead>
<tbody>
<tr>
<td>1. convenience/small grocery store</td>
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<td>2. supermarket</td>
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<td>3. hardware store</td>
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<td>4. fruit/vegetable market</td>
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<td>5. laundry/dry cleaners</td>
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<td>6. clothing store</td>
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<td>7. post office</td>
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<td>9. elementary school</td>
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<td>10. other schools</td>
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<td>11. book store</td>
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<td>12. fast food restaurant</td>
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<td>13. coffee place</td>
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<td>1-5 min</td>
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<td>21-30 min</td>
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**G. Access to services**

Please choose the answer that best applies to you and your neighborhood. Both local and within walking distance mean within a 20 minute walk from your home.

1. I can do most of my shopping at local stores.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

2. Stores are within easy walking distance of my home.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

3. Parking is difficult in local shopping areas.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

4. There are many places to go within easy walking distance of my home.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

5. It is easy to walk to a transit stop (bus, train) from my home.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree
6. The streets in my neighborhood are hilly, making my neighborhood difficult to walk in.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

H. Streets in my neighborhood

Please choose the answer that best applies to you and your neighborhood.

1. The streets in my neighborhood do not have many culs-de-sac (dead-end streets).
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

2. There are walkways in my neighborhood that connect culs-de-sac to streets, trails, or other culs-de-sac.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

3. The distance between intersections in my neighborhood is usually short (100 yards or less; the length of a football field or less).
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

4. There are many four-way intersections in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

5. There are many alternative routes for getting from place to place in my neighborhood. (I don’t have to go the same way every time.)
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree
I. Places for walking and cycling

Please indicate the answer that best applies to you and your neighborhood.

1. There are sidewalks on most of the streets in my neighborhood.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

2. The sidewalks in my neighborhood are well maintained (paved, even, and not a lot of cracks).
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

3. There are bicycle or pedestrian trails in or near my neighborhood that are easy to get to.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

4. Sidewalks are separated from the road/traffic in my neighborhood by parked cars.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

5. There is a grass/dirt strip that separates the streets from the sidewalks in my neighborhood.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

J. Neighborhood surroundings

Please choose the answer that best applies to you and your neighborhood.

1. There are trees along the streets in my neighborhood.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

2. Trees give shade for the sidewalks in my neighborhood.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Somewhat Agree
   - [ ] Strongly Agree
3. There are many interesting things to look at while walking in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

4. My neighborhood is generally free from litter.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

5. There are many attractive natural sights in my neighborhood (such as landscaping, views).
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

6. There are attractive buildings/homes in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

K. Safety from traffic

Please choose the answer that best applies to you and your neighborhood.

1. There is so much traffic along the street I live on that it makes it difficult or unpleasant to walk in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

2. There is so much traffic along nearby streets that it makes it difficult or unpleasant to walk in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

3. The speed of traffic on the street I live on is usually slow (30 mph or less).
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree
4. The speed of traffic on most nearby streets is usually slow (30 mph or less).
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

5. Most drivers exceed the posted speed limits while driving in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

6. There are crosswalks and pedestrian signals to help walkers cross busy streets in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

7. The crosswalks in my neighborhood help walkers feel safe crossing busy streets.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

8. When walking in my neighborhood there are a lot of exhaust fumes (such as from cars, buses).
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

L. Safety from crime

Please choose the answer that best applies to you and your neighborhood.

1. My neighborhood streets are well lit at night.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

2. Walkers and bikers on the streets in my neighborhood can be easily seen by people in their homes.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree
3. I see and speak to other people when I am walking in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

4. There is a high crime rate in my neighborhood.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

5. The crime rate in my neighborhood makes it unsafe to go on walks during the day.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

6. The crime rate in my neighborhood makes it unsafe to go on walks at night.
   - Strongly Disagree
   - Somewhat Disagree
   - Somewhat Agree
   - Strongly Agree

**M. Neighborhood satisfaction**

Below are things about your neighborhood with which you may or may not be satisfied. Please be open and honest with your answer. You may choose the following answers:

1 = strongly dissatisfied
2 = somewhat dissatisfied
3 = neither satisfied nor dissatisfied
4 = somewhat satisfied
5 = strongly satisfied

**How satisfied are you with...**

(example) ____3__ the number of pedestrian cross-walks in your neighborhood?

a. ______ the highway access from your home?

b. ______ the access to public transportation in your neighborhood?

c. ______ your commuting time to school/work?

d. ______ the access to shopping in your neighborhood?

e. ______ how many friends you have in your neighborhood?

f. ______ the number of people you know in your neighborhood?

g. ______ how easy and pleasant it is to walk in your neighborhood?

h. ______ how easy and pleasant it is to bicycle in your neighborhood?

i. ______ the quality of schools in your neighborhood?
j. ______ access to entertainment in your neighborhood (restaurants, movies, clubs, etc.)?
k. ______ the safety from the threat of crime in your neighborhood?
l. ______ the amount and speed of traffic in your neighborhood?
m. ______ the noise from traffic in your neighborhood?
n. ______ the number and quality of food stores in your neighborhood?
o. ______ the number and quality of restaurants in your neighborhood?
p. ______ your neighborhood as a good place to raise children?
q. ______ your neighborhood as a good place to live?

N. Home Environment
Please indicate which items you have in your home, yard, or apartment complex. Please give one answer for each item.

1. stationary aerobic equipment (e.g. treadmill, cycle) Yes No Don’t Know
2. bicycle Yes No Don’t Know
3. dog Yes No Don’t Know
4. trampoline for jogging in place Yes No Don’t Know
5. running shoes Yes No Don’t Know
6. swimming pool Yes No Don’t Know
7. weight lifting equipment (e.g. free weights, Nautilus®, Universal®) Yes No Don’t Know
8. skis (snow or water) Yes No Don’t Know
9. toning devices (e.g. exercise balls, ankle weights Dynabands®, Thighmaster®), Yes No Don’t Know
10. aerobic workout video or audiotapes Yes No Don’t Know
11. step aerobics, slide aerobics Yes No Don’t Know
12. skates (roller, in-line, or ice) Yes No Don’t Know
13. sports equipment (balls, racquets) Yes No Don’t Know
14. surf board, boogie board, windsurf board Yes No Don’t Know
15. canoe, row boat, kayak Yes No Don’t Know

O. Convenient Facilities
For each of these places where you can exercise, please indicate if it is on a frequently traveled route (e.g., to and from work) or within a 5-minute drive or 10-minute walk from your work or home.

1. aerobic dance studio Yes No Don’t Know
2. basketball court Yes No Don’t Know
3. beach, lake, river, or creek Yes No Don’t Know
4. bike lane or trails Yes No Don’t Know
5. golf course Yes No Don’t Know
6. health spa/gym Yes No Don’t Know
7. martial arts studio Yes No Don’t Know
8. playing field (soccer, football, softball, etc) Yes No Don’t Know
9. public park Yes No Don’t Know
10. public recreation center Yes No Don’t Know
11. racquetball/squash court Yes No Don’t Know
12. running track
13. skating rink
14. sporting goods store
15. swimming pool
16. walking/hiking trails
17. tennis courts
18. dance studio
19. My neighborhood has several free or low cost recreation facilities, such as parks, walking trails, bike paths, recreation centers, playgrounds, public swimming pools, etc.

P. Reasons for moving here

Please rate how important each of the following reasons was in your decision to move to your neighborhood. For each reason, please choose a number between 1 and 5, with 1 = Not at All Important and 5 = Very Important.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Not at all important</th>
<th>Somewhat important</th>
<th>Very important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordability/Value</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Closeness to open space (e.g. parks)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Closeness to job or school</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Closeness to public transportation</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Desire for nearby shops and services</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Ease of walking</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Sense of community</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>Safety from crime</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>Quality of schools</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>Closeness to recreational facilities</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>Access to freeways</td>
<td>1</td>
<td>2</td>
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We are interested in finding out about the kinds of physical activities that people do as part of their everyday lives. The questions will ask you about the time you spent being physically active in the last 7 days. Please answer each question even if you do not consider yourself to be an active person.

Think about all the vigorous and moderate activities that you did in the last 7 days.

Vigorous physical activities refer to activities that take hard physical effort and make you breathe much harder than normal.

Moderate activities refer to activities that take moderate physical effort and make you breathe harder than normal.

Part1: Job-Related Physical Activity

The first section is about your work. This includes paid jobs, farming, volunteer work, course work, and any other unpaid work that you did outside your home. Do not include unpaid work you might do around your home, like housework, yard work, general maintenance, and caring for your family. These are asked in Part 3.

1. Do you currently have a job or do any unpaid work outside your home?
   - Yes
   - No [Skip to PART 2: TRANSPORTATION]
These questions are about all the physical activity you did in the last 7 days as part of your paid or unpaid work. This does not include traveling to and from work.

2. During the last 7 days, on how many days did you do vigorous physical activities like heavy lifting, digging, heavy construction, or climbing up stairs as part of your work? Think about only those physical activities that you did for at least 10 minutes at a time.
   - _________ day(s) per week
   - No vigorous job-related physical activity [Skip to question 4]

3. How much time did you usually spend on ONE of those days doing vigorous physical activities as part of your work?
   - _________ hour(s) per day
   - _________ minutes per day

4. Again, think about only those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate physical activities like carrying light loads as part of your work? Please do not include walking.
   - _________ day(s) per week
   - No moderate job-related physical activity [Skip to question 6]

5. How much time did you usually spend on ONE of those days doing moderate physical activities as part of your work?
   - _________ hour(s) per day
   - _________ minutes per day

6. During the last 7 days, on how many days did you walk for at least 10 minutes at a time as part of your work? Please do not count any walking you did to travel to or from work.
   - _________ day(s) per week
   - No job-related walking [Skip to PART 2: TRANSPORTATION]

7. How much time did you usually spend on ONE of those days walking as part of your work?
   - _________ hour(s) per day
   - _________ minutes per day

Part 2: Transportation Physical Activity

These questions are about how you traveled from place to place, including to places like work, stores, movies, and so on.

8. During the last 7 days, on how many days did you travel in a motor vehicle like a train, bus, or car?
   - _________ day(s) per week
   - No traveling in a motor vehicle [Skip to question 10]

9. How much time did you usually spend on ONE of those days traveling in a train, bus, car, or other kind of motor vehicle?
   - _________ hour(s) per day
   - _________ minutes per day

Now think only about the bicycling and walking you might have done to travel to and from work, to do errands, or to go from place to place.
10. During the **last 7 days**, on how many days did you use a **bicycle** for **at least 10 minutes at a time** to go **from place to place**?
   - _______ day(s) per week
   - No bicycling from place to place   [Skip to question 12]

11. How much time did you usually spend on ONE of those days **bicycling from place to place**?
   - _______ hour(s) per day
   - _______ minutes per day

12. During the **last 7 days**, on how many days did you **walk** for **at least 10 minutes at a time** to go from place to place?
   - _______ day(s) per week
   - No walking from place to place   [Skip to PART 3: HOUSEWORK, HOUSE MAINTENANCE, AND CARING FOR FAMILY]

13. How much time did you usually spend on ONE of those days **walking from place to place**?
   - _______ hour(s) per day
   - _______ minutes per day

**Part 3: Housework, House Maintenance, and Caring for Family**

This section is about some of the physical activities you might have done in the **last 7 days** in and around your home, like housework, gardening, yard work, general maintenance work, and caring for your family.

14. Think about only those physical activities that you did for **at least 10 minutes at a time**. During the **last 7 days**, on how many days did you do **vigorous** physical activities like heavy lifting, chopping wood, shoveling snow, or digging **in the garden or yard**?
   - _______ day(s) per week
   - No vigorous activity in garden or yard   [Skip to question 16]

15. How much time did you usually spend on ONE of those days doing **vigorous** physical activities **in the garden or yard**?
   - _______ hour(s) per day
   - _______ minutes per day

16. Again, think about only those physical activities that you did for **at least 10 minutes at a time**. During the **last 7 days**, on how many days did you do **moderate** activities like carrying light loads, sweeping, washing windows, and raking **in the garden or yard**?
   - _______ day(s) per week
   - No moderate activity in garden or yard   [Skip to question 18]

17. How much time did you spend on ONE of those days doing **moderate** physical activities **in the garden or yard**?
   - _______ hour(s) per day
   - _______ minutes per day

18. Once again, think about only those physical activities that you did for at least 10 minutes at a time. During the **last 7 days**, on how many days did you do moderate activities like carrying light loads, washing windows, scrubbing floors and sweeping **inside your home**?
   - _______ day(s) per week
   - No moderate activity inside home   [Skip to PART 4: RECREATION, SPORT & LEISURE-TIME PHYSICAL ACTIVITY]

19. How much time did you usually spend on ONE of those days doing **moderate** physical activities **inside your home**?
   - _______ hours per day
   - _______ minutes per day
Part 4: Recreation, Sport, and Leisure-Time Physical Activity

This section is about all the physical activities that you did in the last 7 days solely for recreation, sport, exercise, or leisure. Please do not include any activities you have already mentioned.

20. Not counting any walking you have already mentioned, during the last 7 days, on how many days did you walk for at least 10 minutes at a time in your leisure time?
   - _______ day(s) per week
   - No walking in leisure time [Skip to question 22]

21. How much time did you usually spend on ONE of those days walking in your leisure time?
   - _______ hour(s) per day
   - _______ minutes per day

22. Think about only those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do vigorous physical activities like aerobics, running, fast bicycling, or fast swimming in your leisure time?
   - _______ day(s) per week
   - No vigorous activity in leisure time [Skip to question 24]

23. How much time did you usually spend on ONE of those days doing vigorous physical activities in your leisure time?
   - _______ hour(s) per day
   - _______ minutes per day

24. Again, think about only those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate physical activities like bicycling at a regular pace, swimming at a regular pace, or playing doubles tennis in your leisure time?
   - _______ days per week
   - No moderate activity in leisure time [Skip to PART 5: TIME SPENT SITTING]

25. How much time did you usually spend on ONE of those days doing moderate physical activities in your leisure time?
   - _______ hour(s) per day
   - _______ minutes per day

Part 5: Time Spent Sitting

These questions are about the time you spend sitting while at work, at home, while doing course work, and during leisure time. This may include time spent sitting at a desk, visiting friends, reading or sitting or lying down to watch television. Do not include any time spent sitting in a motor vehicle that you have already told me about.

26. During the last 7 days, how much time did you usually spend sitting on a weekday?
   - _______ hour(s) per day
   - _______ minutes per day

27. During the last 7 days, how much time did you usually spend sitting on a weekend day?
   - _______ hour(s) per day
   - _______ minutes per day
Q. Activity Checklist
This part of the survey is about your activities over the past 7 days, not including time you might spend doing these activities for work. There is no right or wrong answer.

For each activity listed, answer two questions:
1. On how many days did you do the activity in the past 7 days? If none, say “0”.
2. On average, how many minutes did you do the activity on the days that you did it?

<table>
<thead>
<tr>
<th>LEISURE ACTIVITY [NOT FOR WORK]</th>
<th>How many days in last 7 days?</th>
<th>On average, how many minutes did you do this activity each day?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Computer /Internet for leisure</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
<tr>
<td>2. Video games</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
<tr>
<td>3. Reading</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
<tr>
<td>4. Sitting and talking with friends (not on phone); or listening to music</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
<tr>
<td>5. Talking on the phone</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
<tr>
<td>6. Television or video watching</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
<tr>
<td>7. Driving or riding in a car</td>
<td>_____ days</td>
<td>_____ minutes per day</td>
</tr>
</tbody>
</table>

R. Everyday Commuting Activity
By everyday commuting activity we mean going to work, going shopping, taking a child to daycare or to school, or running other errands. Please count only commuting that you do entirely or partially (such as, to and from a bus stop or a park-and-ride) on foot or by bicycle and that lasts at least 10 minutes each time.

Which of these statements fits you best at the present moment in time?
1. I never commute on foot or by bicycle and it would be out of the question in my case.
2. I hardly ever commute on foot or by bicycle and I have never really thought about doing it.
3. I hardly ever commute on foot or by bicycle, but I might start doing it within the next 6 months.
4. I occasionally commute on foot or by bicycle and I expect to continue like this.
5. I occasionally commute on foot or by bicycle, but I intend to start commuting more regularly this way within the next month.
6. I have been commuting mainly on foot or by bicycle, but only in the last 6 months.
7. I have been commuting mainly on foot or by bicycle for longer than 6 months, but less than 2 years.
8. I have been commuting mainly by foot or by bicycle for longer than 2 years.

S. Vigorous Exercise
“Vigorous” exercise includes activities like jogging, running, fast cycling, aerobics classes, swimming laps, singles tennis, and racquetball. These types of activities usually increase your heart rate, make you sweat, and you get out of breath. (Do not count weight lifting.)
Do you perform **vigorous exercise regularly**? In this context, **regularly means 3 times or more per week for 20 minutes or longer each time. Please choose only one answer.**

- Yes, I **have been** exercising vigorously for **more than 6 months**.
- Yes, I **have been** exercising vigorously for **less than 6 months**.
- No, but I **intend** to start exercising vigorously in the **next 30 days**.
- No, but I **intend** to start exercising vigorously in the **next 6 months**.
- No, and I **do not intend** to start exercising vigorously in the **next 6 months**.

**T. Self Confidence for Vigorous Exercise**

This section is about doing vigorous exercise in different situations. For each item, please say how sure you are that you could exercise vigorously in that situation.

<table>
<thead>
<tr>
<th>I'm Sure I Cannot</th>
<th>Maybe I Can</th>
<th>I'm Sure I Can</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

1. Exercise vigorously even though I am feeling sad or highly stressed
2. Stick to my vigorous exercise program even when family or social life takes a lot of time
3. Set aside time for regular vigorous exercise

**U. Enjoyment of Vigorous Exercise**

1. I enjoy doing vigorous physical activities.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

2. I enjoy the feeling I get **while** doing vigorous activities.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree

3. I enjoy the feeling I get after doing vigorous activities.
   - Strongly Disagree
   - Somewhat Disagree
   - Neutral
   - Somewhat Agree
   - Strongly Agree
### V. Self Confidence for Moderate Physical Activity

<table>
<thead>
<tr>
<th>I’m Sure I Cannot</th>
<th>Maybe I Can</th>
<th>I’m Sure I Can</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

1. Do moderate physical activity even though I am feeling sad or highly stressed.

2. Stick to my program of moderate physical activity even when family or social life takes a lot of time.

3. Set aside time for regular moderate physical activity.

### W. Enjoyment of Moderate Physical Activities

1. I enjoy doing moderate physical activities.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Neutral
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

2. I enjoy the feeling I get while doing moderate physical activities.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Neutral
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

3. I enjoy the feeling I get after doing moderate physical activities.
   - [ ] Strongly Disagree
   - [ ] Somewhat Disagree
   - [ ] Neutral
   - [ ] Somewhat Agree
   - [ ] Strongly Agree

### X. Benefits of Regular Physical Activity

You can get "regular physical activity" by either:

- Doing vigorous exercise, like jogging or aerobics class, at least 3 times per week for at least 20 minutes each time
- OR
- Doing moderate exercise, like brisk walking or slow biking, at least 5 times a week for at least 30 minutes each time
This section is about some possible effects of regular physical activity. Please tell us a number to indicate your level of agreement.

<table>
<thead>
<tr>
<th>If I participate in regular physical activity or sports, then:</th>
<th>Strongly Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I will feel less depressed and/or bored</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. I will improve my self-esteem</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. I will meet new people</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. I will lose weight or improve my shape</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. I will build up my muscle strength</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. I will feel less tension and stress</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. I will improve my health or reduce my risk of disease</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. I will do better at my job</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9. I will feel more attractive</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10. I will improve my heart &amp; lung fitness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Y. Barriers to Regular Physical Activity

How often do the following prevent you from getting regular physical activity? Please tell choose one answer for each item.

<table>
<thead>
<tr>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Self conscious about my looks when I exercise</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. Lack of interest in exercise or physical activity</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3. Lack of self-discipline</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4. Lack of time</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5. Lack of energy</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6. Lack of company</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7. Lack of enjoyment from exercise or physical activity</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>8. Discouragement</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>9. Lack of equipment</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>10. Lack of good weather</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>11. Lack of skills</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>12. Lack of facilities or space</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>13. Lack of knowledge on how to exercise</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>14. Lack of good health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>15. Fear of injury</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
Z. Social Support
Please state your answers once for family and once for friends for each of the following statements. During the past three months my family or friends:

<table>
<thead>
<tr>
<th>Statements</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did physical activity with me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAMILY:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>FRIENDS:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Offered to do physical activity with me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAMILY:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>FRIENDS:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Gave me encouragement to do physical activity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAMILY:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>FRIENDS:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Your Demographic Information
1. Do you live in a...
   - Detached single house
   - Duplex
   - Row house, townhouse
   - Apartment, condominium
   - Mobile home or trailer
   - Dorm Room
   - Other [Specify] __________________________
   - Don’t Know

2. How long have you lived at this address?
   - ________ Months
   - ________ Years
   - Don’t Know

3. Is your home owned or rented?
   - Owned
   - Rented
   - Provided by Job or Military
   - Other [Specify] __________________________
   - Don’t Know

4. Including yourself, how many people live in your household? Please do not include anyone who usually lives somewhere else or is just visiting, such as a college student away at school.
   - ________ Number of People
   - Don’t Know
5. Are any of these people related to each other?
   - Yes
   - No
   - Don’t Know

6. What is your age? ________ years

7. Are you:
   - Female
   - Male
   - Other

8. Are you of Hispanic, Latino, or Spanish origin?
   - Yes
   - No
   - Don’t Know

9. Please tell me which best describes your race? Are you… [Answer all that apply]
   - White
   - African American, Black
   - Asian
   - American Indian, Alaskan Native
   - Native Hawaiian, or other Pacific Islander?
   - Hispanic/Mexican
   - Multiracial
   - Other [Specify] __________________________
   - Don’t Know

10. Education: Years of school completed [Answer only one answer]
    - Less than high school diploma
    - Completed high school diploma (or GED)
    - Vocational training (beyond high school)
    - Some college (less than 4 years)
    - College/University degree
    - Graduate or Professional degree
    - Don’t Know

11. What is your marital status?
    - Never married
    - Married/Certified Domestic Partners
    - Separated
    - Divorced
    - Widowed
    - Don’t know
12. Are you a parent, foster parent, or legal guardian for children that live with you?

- Yes
- No
- Don’t Know

If yes:
Please specify the number of the children for whom you are a parent, foster parent, or legal guardian: _____

Please specify the ages of the children for whom you are a parent, foster parent, or legal guardian:

_____  _____  _____  _____  _____  _____  _____  _____

13. During most of last week, were you...

- Working
- Temporarily absent from a job or business
- Looking for work
- Homemaker
- Going to school
- Retired
- Other [Specify] __________________________
- Don’t Know

14. Last week, did you do any work for either pay or profit?

- Yes
- No
- Don’t Know

If not working, please skip to question 25

15. Do you work... (You may give more than one answer)

- Full Time
- Part-time
- Multiple Jobs
- Don’t Know

16. I am going to read four categories of occupations. Please tell me which one your primary job falls under.

- Sales or service
- Clerical or administrative support
- Manufacturing, construction, maintenance, or farming
- Professional, managerial, or technical
- Other [Specify] __________________________
- Don’t Know

17. Not including getting to and from work, do you work at any job that requires you to drive a licensed motor vehicle as part of the job?

- Yes
- No
- Don’t Know
If you answered yes to the previous question:
What is that job or occupation?

- Occupation __________________________________________
- Don’t Know

18. What is the street address of your primary workplace?

- STREET NUMBER
- STREET NAME
- CITY
- STATE
- ZIP CODE
- Don’t Know

If you don’t know:
Would you please provide a landmark that is close to your workplace? This could be a well-known building, park, monument, or school.

- NAME OF A LANDMARK
- Don’t Know

- What is the one-way distance from your home to your primary workplace?

- Distance _____________ (miles)
- Don’t Know

19. How many minutes did it usually take you to get from home to work last week?

- Minutes _____________
- Did Not Work In Usual Workplace Last Week
- Did Not Work Last Week
- Don’t Know

20. How did you usually get to work last week? (You may pick more than one)

- Automobile
- Bus Travel
- Bicycle
- Walk
- Taxicab
- Limousine
- Hotel/Airport Shuttle
- Air Travel
- Other (Specify) _________________________________________
- Don’t Know

21. On any day in the past two months, did you work from home instead of traveling to your usual workplace?

- Yes [Worked At Home INSTEAD of at Work]
- No [Never Worked Solely From Home]
- Don’t Know
22. If you do work from home, about how often do you do this?
   - Almost Every Day
   - Once a Week or More
   - Once a Month or More
   - A Few Times a Year
   - Once a year
   - Don’t Know

23. Do you own a dog? (If no, skip to question 27)
   - Yes
   - No
   - Don’t know

24. Do you walk your dog?
   - Yes
   - No
   - Don’t know

If you answered ‘yes’ that you do walk your dog:

25. How often do you walk your dog?
   - More than 1 time daily
   - One time daily
   - Less than 1 time daily
   - Don’t know

26. How much time does it usually take for you to walk your dog?
   - 1 hour or longer
   - 45 minutes to 1 hour
   - 30 to 45 minutes
   - 15 to 30 minutes
   - 0 to 15 minutes
   - Don’t know

27. How many vehicles are owned, leased, or made available for regular use by the people who live in your household? Be sure to include motorcycles, mopeds, RVs and any vehicle that is company-owned.
   - Number of Vehicles ____________
   - None
   - Don’t Know
28. I have a few questions about each of these vehicles. Let’s start with the newest vehicle. What is the make, model and year?

<table>
<thead>
<tr>
<th>Vehicle #</th>
<th>Make</th>
<th>Model</th>
<th>Year</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
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<tr>
<td>3.</td>
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<tr>
<td>4.</td>
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<tr>
<td>5.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Possible Types of Vehicles Include:
Automobiles: Car / Van (Mini, Cargo, Passenger)
Sport Utility (Bronco, Pathfinder, 4Runner, Blazer)
Recreational Vehicle (RV)
Motorcycle / Scooter

29. Are these all of the vehicles that are available to the people that currently live in your household?

- Yes
- No

30. How many adult-size bicycles (any bike large enough for an adult) does your household have in working order?

- Number of Bicycles ____________
- Don’t Know

We would like to ask you some questions regarding your experience of biking in your neighborhood. But first, we need to establish whether you have ever biked in your neighborhood.

31. Have you ridden a bicycle in your neighborhood in the past 2 years?

- Yes
- No (Skip to #41)
- Don’t Know (Skip to #41)

If you answered yes to the previous question 31:

32. Please recall the most recent time you rode your bicycle in your neighborhood. When was that?

- Within the past day
- Within the past week
- Within the past month
- Within the past year
- Within the past 2 years

33. Did you feel threatened for your personal safety at any time when you rode your bike that day?

- Yes
- No (Skip to #38)
- Don’t Know (Skip to #38)
34. Did you feel threatened for your personal safety because of any of the following?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motorists</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The potential for crime</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uneven walkways or roadway surfaces</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dogs or other animals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Too much bicycle or pedestrian traffic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Something else?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(If you answered that motorists made you feel threatened, please continue on to question 36; Otherwise, please skip to question 38)

35. What did the motorists do to make you feel threatened? *(Allow three responses)*

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cut me off</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entered intersection without looking</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drove very close to me</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Honked at me</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Almost hit me/near miss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Just the presence of the motorist was frightening</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Too fast</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (list)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

36. In the past two years, were you ever injured while you were riding a bike? Only count injuries that required attention by a medical professional.

- Yes
- No (Skip to #38)
- Don’t Know/Not sure (Skip to #38)

If you answered yes to the previous question 36:

37. Was this injury a result of being hit by a motor vehicle?

- Yes
- No
- Don’t Know

38. How satisfied are you with how your local community is designed for making bike riding safe?

- Very satisfied
- Somewhat satisfied
- Neither satisfied nor dissatisfied
- Somewhat dissatisfied
- Very dissatisfied
- Don’t Know

39. Are there any changes you would like made in your community for bicyclists?

- Yes
- No (Skip to #41)
- Don’t Know (Skip to #41)
If you answered yes in the previous question 39:

40. What changes would you like to see made in your community for bicyclists? *(Three responses allowed)*

- More bike paths/trails
  - Yes
  - No
  - Don’t Know

- More bike lanes
  - Yes
  - No
  - Don’t Know

- Allow bikes on sidewalks
  - Yes
  - No
  - Don’t Know

- Don’t allow bikes on sidewalks
  - Yes
  - No
  - Don’t Know

41. What changes would you like to see made in your community for walkers? *(Three responses allowed)*

- More crosswalks
  - Yes
  - No
  - Don’t Know

- More sidewalks
  - Yes
  - No
  - Don’t Know

- More lights on streets
  - Yes
  - No
  - Don’t Know

- More lights on paths/trails
  - Yes
  - No
  - Don’t Know

42. How many of your close friends are professionals, such as doctors, lawyers, professors, executives and scientists?

- Most of them
- Some
- A few
- None

**Household Income**

In surveys like these, households are sometimes grouped according to income. Please stop me when I get to the category that best describes your total household income, before taxes, in the past 12 months.

We want to include income from sources such as wages and salaries, income from a business or a farm, Social Security, pensions, dividends, interest, rent, and any other income received.

43. Approximate annual household income (please give only one response)

- $10,000 or less
- $10,001 to $20,000
- $20,001 to $30,000
- $30,001 to $40,000
- $40,001 to $50,000
- $50,001 to $60,000
- $60,001 to $70,000
- $70,001 to $80,000
- $80,001 to $100,000
- $More than $100,000
- Don’t Know

**You are Finished!**

Thank you for your time and effort.

This Walking Survey is provided courtesy of The Twin Cities Walking Study at the University of Minnesota and was originally developed in 2003 through a grant from The Robert Wood Johnson Foundation for activelivingresearch.org. Sources: Authors Kathryn H. Schmitz, PhD, MPH and DESIGN FOR HEALTH Principal Investigator Ann Forsyth, with Kathryn Schmitz and J. Michael Oakes of Public Health. For more information about the Twin Cities Walking Survey and results, visit: [http://www.activelivingresearch.org/node/10619](http://www.activelivingresearch.org/node/10619)
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