

Lifestyle Survey Follow Up Questions

These are follow up questions to help assist athletes to understand the questions in the Lifestyle Survey.

1. **Your Name:**
 - a. What is your name?
 - b. What are your first and last names?
2. **Program Name:** Program staff should fill this question out
3. **Today's Date:** Program staff should fill this question out
4. **What is the date you were born?**
 - a. When is your birthday?
 - b. What year were you born?
5. **Are you male or female?**
 - a. Are you a boy or girl?
 - b. Man or Woman?
6. **Is anyone helping you to complete all of these forms?**
7. **I am a(n):**
 - a. What do you do at Special Olympics?
8. **I describe myself as:** give examples
9. **I live:**
 - a. Who do you live with?
 - b. Where do you live?
 - c. Do you live with other people?
 - d. Or do you live by yourself?
10. **I communicate by:**
 - a. How do you tell people what you want?
 - b. How do you tell others what you are thinking/feeling?
11. **I move around:**
 - a. Are you able to move by yourself or do you need help?
12. **Do you work?**
 - a. Do you have a job?
13. **When you work:**
 - a. How long do you work?
 - b. What days do you work?
 - c. Do you work all day?
 - d. Do you just work mornings/afternoons?
14. **My health is:**
 - a. How do you feel most of the time?
 - b. How does your body feel most days?

15. Yesterday, how many times did you eat vegetables?

- a. Go through each meal and snacks with the person to help figure this out:
 - i. Do you remember what you ate for breakfast? for lunch? for dinner? Any snacks?
 - ii. Did you eat vegetables yesterday, how many times do you think you ate vegetables?

16. Yesterday, how many times did you eat fruits?

- a. Go through each meal and snacks with the person to help figure this out:
 - i. Do you remember what you ate for breakfast? for lunch? for dinner? Any snacks?
- b. Did you eat fruits yesterday, how many times do you think you ate fruits?

17. Yesterday, how many cups of water did you drink?

- a. Did you drink water yesterday, how many cups do you think you drank?
- b. Do you drink water every day?
- c. When do you drink water?
- d. In other words, there may be some routine with this that may be explored before talking about yesterday specifically

18. Last week on what days did you exercise/play sports that made you heart beat fast?

- a. Think about what you did last week. Did you do anything that made you breathe hard or heart beat fast? what days did that happen?
- b. Are there sports/exercises that you do each week?
- c. Determine a routine before you ask about last week—this can give context. i.e.. Oh, you go bowling every Friday night—so you went last Friday?
 - i. Once you check out the routine stuff you can ask about other things.

19. How much time do you usually spend exercising on the days you circled above?

- a. How long did you exercise on those days?
- b. If it is an organized sport: What time does ____ start? And what time does ____ end?
- c. If it is on their own exercise: How long does it take you to do your jogging/walking/exercise they mentioned?

20. Do you have a goal as a Special Olympics athlete?

- a. Do you have anything you want to get better at as a Special Olympics athlete?

- 21. On a regular day, do you eat or drink the following sweet snacks?**
- a. Do you eat sweets?
 - b. Do you eat candy?
 - c. Do you eat them every day?
 - d. Do you eat them one time a week?
 - e. Do you eat them many times a week?
 - f. How many times in the week do you eat sweet snacks? Eat candy?
- 22. On a regular day, do you drink the following, salty snacks?**
- a. Do you eat salty snacks?
 - b. Do you eat them every day?
 - c. Do you eat them one time a week?
 - d. Do you eat them many times a week?
 - e. How many times in the week do you eat salty snacks?
- 23. On a regular day, do you eat or drink the following, sports drinks?**
- a. Do you drink sports drinks?
 - b. Do you drink them every day?
 - c. Do you drink them one time a week?
 - d. Do you drink them many times a week?
 - e. How many times in the week do you drink sports drinks, like Gatorade or Powerade?
- 24. On a regular day, do you eat or drink the following, soda or pop?**
- a. How many times in the week do you have soda, like Coke or Sprite?
 - b. Do you drink sports drinks?
 - c. Do you drink them every day?
 - d. Do you drink them one time a week?
 - e. Do you drink them many times a week?
- 25. On a regular day, do you eat or drink the following, fast food meals or drive-thru meals?**
- a. How many times in the week do you have fast food, like McDonalds or Taco Bell?
 - b. Do you eat at fast food restaurants such as _____?
 - c. Is there a day each week that you go out to _____?