

**WALK WITH EASE
Participant Post-Program Survey**



**Oregon State University
Extension Service**

GENERAL INFORMATION

First Name:	Last Name:
Class Location:	Leader Name:

SURVEY

1) In general, would you say your health is:

- Excellent
 Very Good
 Good
 Fair
 Poor

2) How sure are you that you can manage your condition(s) so you can do the things you need and want to do? *(Circle an option)*

- 0 (Totally Unsure) 1 2 3 4 5 6 7 8 9 10 (Totally Sure)

3) How often do you feel lonely or isolated from those around you?

- Always
 Often
 Sometimes
 Rarely
 Never

4) How many days during a typical week do you go for a walk/s? (1-7 days)
_____ day(s)

5) On average how many minutes do you walk on each of those days?
_____ minutes

6) How confident are you at maintaining or increasing your physical activity? *(circle an option)*

- 0 (Totally Unsure) 1 2 3 4 5 6 7 8 9 10 (Totally Sure)

For the following set of questions, please check the option that best describes your answer.

	Very Well	Fairly Well	A Little	Not at all
To what extent did you learn basic information about arthritis?				
To what extent did you increase your understanding of the rationale and principles of exercise for people with chronic conditions?				
To what extent did you increase your knowledge about walking in a safe and comfortable manner?				
To what extent do you feel knowledgeable about how to do a warm-up and cool-down exercises before and after walking?				
To what extent were the problem-solving strategies useful to you?				
To what extent were the self-test tools useful to you?				
To what extent were the problem-solving strategies useful to you?				

Thank you for completing this survey!