

Project Name: \_\_\_\_\_  
Portfolio: \_\_\_\_\_



## 65+ Questionnaire

### Big Lottery Fund Evaluation

We would like to invite you to participate in an evaluation project. We want to know if the Big Lottery Fund has helped people improve their well-being. Your answers will help us to find out.

You do not have to answer the questions if you do not want to. If you cannot answer a question just leave it, and go on to the next question.

We would like to assure you that your responses will remain confidential. If you have any questions about the questionnaire, please ask a project worker or anyone else. Thank you!

### Before we begin, a few administrative questions:

Is this questionnaire being completed:

- At the start of the project/service?
- During the project/service?
- On completion of the project/service?
- At least *three months* after the end of the project/service?

If so, please indicate when involvement ended:   /   /

When did you first become involved in this activity/start using the service?

/   /   (provide a rough date if you are not certain)

Today's date:   /   /

Please tick one of the below:

- I am filling in the questionnaire about myself
- I am a project worker or carer reading out the questions to the participant and filling in their responses.
- I am a carer/guardian completing the questionnaire on behalf of someone else (*some questions in Section B may be difficult to answer; please just complete as many as you can*)

## SECTION A

Firstly, we would like to ask some questions on your eating habits:

- 1) **On average how many portions of FRUIT do you eat a day?**  
 (examples include a handful of grapes, an orange, apple or banana, a glass of fruit juice, or a handful of dried fruits)

\_\_\_\_\_ per day on average

- 2) **And how many portions of VEGETABLES do you eat a day?**  
 (one portion is a side salad, or 3 heaped tablespoons of vegetables, beans or pulses either raw, cooked, frozen or tinned. Please do not include potatoes)

\_\_\_\_\_ per day on average

- 3) **In a normal week, how often do you eat a meal that has been prepared and cooked from basic ingredients, either by yourself or someone else?** For example Shepherd's Pie made starting with raw mince and potatoes? *(please circle one answer only)*

Never	Less than once a week	Once a week	2-3 times a week	4-6 times a week	Daily
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- 4) **Please indicate how much you agree with the following statements**  
*(please circle one number for each statement)*

		Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
a)	<b>I enjoy putting effort and care into the food I eat.</b>	1	2	3	4	5
b)	<b>Healthy food often tastes nicer than unhealthy food</b>	1	2	3	4	5

**Next we are interested in physical activity:**

**5) During the last 7 days, on how many days did you do physical activities that made you breathe somewhat harder than normal, not including walking:**

Think about the activities you do at work, as part of your house or garden work, to get from place to place, and in your spare time for recreation, exercise or sport. Think only about those physical activities that you did for at least 10 minutes at a time. Please answer this question even if you do not consider yourself to be an active person.

**days per week**

No physical activities *(if you tick this box, skip to question 7)*

**6) How much time did you usually spend doing physical activities on one of those days?** (please circle one answer only)

less than 20 minutes	more than 20, but less than 30 minutes	more than 30, but less than 40 minutes	more than 40 minutes, but less than an hour	over an hour (please write in): _____
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Next think about walking.

**7) During the last 7 days, on how many days did you walk for at least 10 minutes at a time:**

**days per week**

No walking *(if you tick this box, skip to question 9)*

**8) How much time did you usually spend walking on one of those days?** (please circle one answer only)

less than 20 minutes	more than 20, but less than 30 minutes	more than 30, but less than 40 minutes	more than 40 minutes, but less than an hour	over an hour (please write in): _____
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Lastly, think about the time you spent **sitting** on weekdays during the **last 7 days**. Include time spent at work, at home, in a car or on public transport, while studying and during leisure time. This may include time spent sitting at a desk, visiting friends, reading, or sitting down to watch television.

9) During the **last 7 days**, how much time did you spend **sitting** on a typical **week day**? (please circle one answer only)

less than 5 hours	between 5 and 8 hours	between 8 and 11 hours	between 11 and 13 hours	over 13 hours
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10) And in the **past month**, on how many days have you done a total of **30 minutes or more** of physical activity which was enough to raise your breathing rate?

This may include sport, exercise, and brisk walking or cycling for recreation or to get to and from places, but should not include housework or physical activity that may be part of your job.

days

11) Now read the following statements and indicate on the sliding scale the point that best describes your feelings around physical activity: (please circle one number only)

I wish I didn't have to do physical activity, but I know it's important for my health	1	2	3	4	5	6	7	As well as being important for my health, physical activity is something I enjoy

12) The following questions ask you to indicate how confident you are at doing a number of activities. On a scale of 1 to 7, with 1 having no confidence at all, and 7 being extremely confident, how confident are you at...

		Please circle one number No confidence ← → Extremely confident						
a)	<b>Walking around the house</b>	1	2	3	4	5	6	7
b)	<b>Doing light housekeeping</b>	1	2	3	4	5	6	7
c)	<b>Doing simple shopping</b>	1	2	3	4	5	6	7
d)	<b>Preparing a meal</b> (not requiring heavy or hot objects)	1	2	3	4	5	6	7

## SECTION B

We would now like to ask some questions about your recent thoughts and feelings:

13) All things considered, how satisfied are you with your life as a whole nowadays? *(please circle one number only)*

Extremely Dissatisfied	0	1	2	3	4	5	6	7	8	9	10	Extremely Satisfied
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14) Below are a number of things people might say that they feel. Please circle the number that best describes how often during the past week each description would have applied to you?

		Never	At least once	On a few days	Most days	Every day
a)	<b>You felt happy or contented</b>	1	2	3	4	5
b)	<b>You felt depressed</b>	1	2	3	4	5
c)	<b>You felt engaged or focused in what you were doing</b>	1	2	3	4	5
d)	<b>You felt energised or lively</b>	1	2	3	4	5
e)	<b>You felt lonely</b>	1	2	3	4	5
f)	<b>You felt everything you did was an effort</b>	1	2	3	4	5
g)	<b>Your sleep was restless</b>	1	2	3	4	5

**15) Below are some statements about feelings and thoughts. Please circle the number that best describes your experience of each over the past four weeks.**

	None of the time	Rarely	Some of the time	Often	All of the time
a) <b>I've been feeling optimistic about the future</b>	1	2	3	4	5
b) <b>I've been feeling useful</b>	1	2	3	4	5
c) <b>I've been feeling relaxed</b>	1	2	3	4	5
d) <b>I've been dealing with problems well</b>	1	2	3	4	5
e) <b>I've been thinking clearly</b>	1	2	3	4	5
f) <b>I've been feeling close to other people</b>	1	2	3	4	5
g) <b>I've been able to make up my own mind about things</b>	1	2	3	4	5
h) <b>I've felt like I belong to something I would call a community</b>	1	2	3	4	5
i) <b>I've been feeling good about myself</b>	1	2	3	4	5

**16) The next question is about your contact with your family and friends.** *(please circle one answer in each row)*

**Family.** Consider the people to whom you are related either by birth or marriage.

<b>How many relatives do you...</b>				
a)	<b>...see or hear from at least once a month?</b>	None	One	Two or More
b)	<b>...feel at ease with that you can talk about private matters?</b>	None	One	Two or More
c)	<b>...feel close to such that you could call on them for help?</b>	None	One	Two or More

**Friendships.** Consider all of your friends, including those who live in your neighbourhood.

<b>How many of your friends do you...</b>				
d)	<b>...see or hear from at least once a month?</b>	None	One	Two or More
e)	<b>...feel at ease with that you can talk about private matters?</b>	None	One	Two or More
f)	<b>...feel close to such that you could call on them for help?</b>	None	One	Two or More

**Lastly, we would like to ask you some questions about yourself:**

17) Are you  Male  Female

18) What is your date of birth?   /   /

19) What is your ethnic group? (please tick only one box)

<b>White</b>		<b>Mixed</b>	
British	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>
Irish	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>
Other White:	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>
	please write in	Other Mixed background:	<input type="checkbox"/>
			please write in
<b>Asian or Asian British</b>		<b>Black or Black British</b>	
Indian	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	African	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Other Black:	<input type="checkbox"/>
Other Asian background:	<input type="checkbox"/>		please write in
	please write in		
<b>Chinese</b>	<input type="checkbox"/>	<b>Any Other:</b> (please write in)	

I do not wish an ethnic background to be recorded:

20) Do you have any long-term illness, health problem or disability which limits your daily activities? (include problems due to old age)

No  Yes

21) What is your postcode?

22) So that we can match up your responses before and after the project, please write down your initials in the boxes below:

First name:  Surname:

That's all! Thank you very much for taking the time to fill in this form.

This survey was designed for the Big Lottery Fund by nef (the new economics foundation). Use of this survey must be appropriately acknowledged. © The Big Lottery Fund, 2008.