Get Active Glasgow – Participant Survey

This survey is for people taking part in this project to measure the difference that this project has made for you. It is completely anonymous. We don't ask for your name or any contact details at all.

The survey will be seen by Glasgow Life, **sport**scotland and London Marathon Foundation who evaluate the Fund.

We will not share your survey response with anyone else and will delete it after a report summarising findings has been produced.

If you have any questions about the survey, please contact: research@sportscotland.org.uk

1. **Please confirm that you are happy to take part in this survey:**
   - Yes
   - No

2. **Which organisation/group/club organised the activities you attended?**

3. **What sports / activities did you take part in?**

4. **Since taking part in these activities, have your physical activity levels changed?**
   - Yes, I'm a **lot** more active than I was before
   - Yes, I'm a **little** more active than I was before
   - My activity levels have not increased or decreased
   - No, I'm **less** active than I was before

5. **Which of the below statements feels most accurate for you?**
   - I **enjoy** taking part in physical activity
   - I **mostly enjoy** taking part in physical activity
   - Unsure
   - I **don't** enjoy taking part in physical activity

6. **Do you enjoy taking part in physical activity now more than you did before attending these sessions?**
    - Yes
    - No
    - Unsure

7. **Please describe your experience while taking part in physical activity during these sessions?**

About you

We are asking for a bit of information about you so that we can understand the profile of the people involved in the project. The form is voluntary, and completely anonymous. You can choose not to answer any question – just click 'prefer not to say' or leave the box blank if you do want to complete a question.

8. **What is your postcode?**

9. **What is your sex**?
    - Male
    - Female
    - Prefer not to say

10. **What age are you?**
    - 5 to 12 years
    - 13 to 17 years
    - 18 to 24 years
    - 25 to 64 years
    - 65+ years

11. Do you think any of the following applies to you? (Tick all that apply)

- I have a physical disability
- I have a sensory disability (e.g. hearing or sight loss)
- I have a learning difficulty (e.g. dyslexia)
- I have another disability or difficulty
- No
- Don't know
- Prefer not to say

If you selected 'I have another disability or difficult, please feel free to add more information about your disability / difficult in the box below

12. What is your ethnic group?

- White Scottish
- White other British
- White other Asian, Asian Scottish or Asian
- British African, Scottish African or British African
- Caribbean or Black
- Mixed or multiple ethnic origin
- Prefer not to say
- Other ethnic origin