

Lifestyle survey

Answer for a normal week. There are no right answers, and you can skip any question.

Group or program

Date

For each statement, tick one box from 1 (strongly disagree) to 5 (strongly agree).

1 In the past 7 days, on how many days were you active enough to breathe harder for 30 minutes or more?

- ☐ None ☐ 1 or 2 days ☐ 3 or 4 days ☐ 5 or 6 days ☐ Every day

2 How many hours a day do you spend sitting, counting work, travel and screens?

- ☐ Under 4 ☐ 4 to 6 ☐ 6 to 8 ☐ 8 to 10 ☐ Over 10

3 On a typical night, how many hours of sleep do you get?

- ☐ Under 5 hours ☐ 5 to 6 hours ☐ 6 to 7 hours ☐ 7 to 8 hours ☐ Over 8 hours

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
4 Most mornings I wake up feeling rested.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

5 How many portions of fruit and vegetables do you eat on a typical day? (A portion is about 80 g.)

- ☐ None ☐ 1 or 2 ☐ 3 or 4 ☐ 5 or more

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
6 I eat my meals at fairly regular times.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
7 When stress builds up, I have ways to calm down that work for me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
8 Most weeks I make time for things I enjoy.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
9 There are people I can count on when I need help.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

10 How often do you drink alcohol?

- ☐ Never ☐ Under once a month ☐ A few times a month ☐ 1 or 2 times a week
☐ 3 or more times a week

11 Do you smoke or vape?

- ☐ No, never ☐ I used to, but I quit ☐ Now and then ☐ Every day

12 What one change to your daily routine would make the biggest difference to how you feel?

Optional questions (1 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Movement and sitting

13 Which of these did you do in the past 7 days? (tick all that apply)

- ☐ Walked or cycled to get somewhere ☐ A sport or exercise class ☐ Running or a gym workout
☐ Weights or body-weight exercises ☐ Active hobbies like gardening or dancing ☐ None of these

14 On how many of the past 7 days did you do exercises that work your muscles, such as weights or push-ups?

- ☐ None ☐ 1 day ☐ 2 days ☐ 3 days or more

15 When you sit for a long stretch, how often do you get up and move?

- ☐ Every half hour or so ☐ About every hour ☐ Every two hours or so ☐ Rarely

16 What gets in the way of being more active? (tick all that apply)

- ☐ Not enough time ☐ Too tired ☐ Cost ☐ No safe or pleasant place ☐ Health or injury
☐ Nothing gets in the way

Sleep and screens

17 On nights before work, when do you usually turn the light out?

- ☐ Before 10 pm ☐ Between 10 and 11 pm ☐ Between 11 pm and midnight ☐ After midnight
☐ It varies a lot

STATEMENT

STRONGLY
DISAGREE

STRONGLY
AGREE

18 I keep similar sleep times on weekends.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

19 How often are you on a phone, tablet or TV in the hour before sleep?

- ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Always

20 Outside work or study, how many hours a day do you spend on screens?

- ☐ Under 2 hours ☐ 2 to 4 hours ☐ 4 to 6 hours ☐ Over 6 hours

Food and drink

21 On how many days a week do you eat a meal cooked at home?

- ☐ 0 or 1 ☐ 2 or 3 ☐ 4 or 5 ☐ 6 or 7

Optional questions (2 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Food and drink (continued)

22 How often do you have sugary drinks like soda, energy drinks or sweetened coffee?

☐ Rarely or never ☐ A few times a week ☐ Once a day ☐ Twice a day or more

23 How many glasses of water do you drink on a typical day?

☐ 0 to 2 ☐ 3 or 4 ☐ 5 or 6 ☐ 7 or more

24 How often do you eat takeout or fast food meals?

☐ Rarely or never ☐ Once a week ☐ 2 or 3 times a week ☐ 4 or more times a week

25 On a day when you drink alcohol, how many drinks do you usually have?

☐ I do not drink ☐ 1 ☐ 2 ☐ 3 or 4 ☐ 5 or more

Stress, rest and connection

26 How often does stress get in the way of your day?

☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Always

27 What do you usually do to unwind? (tick all that apply)

☐ Walk or exercise ☐ Time with friends or family ☐ A hobby ☐ TV or scrolling
☐ Meditation or breathing ☐ Food or a drink ☐ Something else

28 How often do you see friends or family in person?

☐ Most days ☐ A few times a week ☐ About once a week ☐ A few times a month ☐ Rarely

STATEMENT	STRONGLY DISAGREE					STRONGLY AGREE				
29 Outside my home, I belong to a group I care about, such as a team, club or faith group.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
30 My work leaves me energy for the rest of my life.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Optional questions (3 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

About you (optional)

31 Which age group are you in?

☐ 18 to 29 ☐ 30 to 44 ☐ 45 to 59 ☐ 60 to 74 ☐ 75 or older

32 Which best describes what you do most days?

☐ Work full time ☐ Work part time ☐ Study ☐ Care for family at home ☐ Retired or not working

Thank you. Your answers are anonymous.

poll-maker.com/lifestyle-questions