

Healthy Habits Retrospective Survey

Ages 9-12

Thank you very much for taking this survey today! Your opinion is important to us and we appreciate your time.

This survey is designed to find out about you, your opinions, and your experiences. Your answers will help make the Boys & Girls Clubs and Military Youth Centers more interesting and enjoyable for you and others like you. So please answer honestly.

You can answer honestly because your survey won't have your name on it, and nobody seeing the survey will know your name. This means your answers will never be shared with your parents, friends, or anyone in your Club. Your answers will be kept confidential and used to better understand Boys & Girls Clubs, Military Youth Centers and their members.

Instructions

- This is not a test. There are no right or wrong answers.
- If you don't find the answer that fits exactly, use the answer that comes closest.
- If you need help with a question, raise your hand and quietly ask the staff member helping you today so that you don't disturb others around you.
- If any question makes you feel uncomfortable, you don't have to answer it. Just skip it and go to the next question.
- Your participation is voluntary and will not affect your membership in the Club. Remember, there are no right or wrong answers – only your opinion and your experiences.

This survey first asks you to tell us how you felt at the BEGINNING of Healthy Habits and then it asks you how you are feeling right NOW. This is called reflection.

Example: Think back to the beginning of Healthy Habits.

- What shoes did you wear on the first day of Healthy Habits?
- What did it feel like to walk into Healthy Habits on the first day?

Example: Think about how you feel now.

- What shoes are you wearing right now?
- What does it feel like to walk into Healthy Habits now?

Thanks again for your time.

How you felt at the START of Healthy Habits

Please mark an X for how you felt at the START and how you feel TODAY

How you feel TODAY

How you felt at the START of Healthy Habits					How you feel TODAY				
Not true at all	Not very true	Sort of true	Very true		Not true at all	Not very true	Sort of true	Very true	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I think about how the choices I make now can affect my health in the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When I set health goals, I think about challenges that might get in my way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Strongly agree	Agree	Disagree	Strongly Disagree		Strongly agree	Agree	Disagree	Strongly Disagree	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It is easy for me to choose healthy foods in the Club.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It is easy for me to choose healthy foods outside of the Club.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I am confident in my abilities to choose healthy foods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	