



The Physical Activity Questionnaire is one of three questionnaires that will describe your past and current health as you begin to participate in The Tomorrow Project cancer research study.

The questions are about your physical activities in the past 12 months, including:

- **Employment & Volunteer** activities
- Household & Do-it-yourself activities
- **Recreation & Leisure** activities

This questionnaire may take about 15-20 minutes to answer.

If you are not sure of how to answer a question, please feel free to contact us:

- Call our toll free number: 1.877.919.9292
- Email us: tomorrow@cancerboard.ab.ca

Physical Activity Questionnaire

Directions:

- First, record the types of activities you took part in over the past 12 months.
- Next, record how often you took part in each activity, for how long, and at what intensity level.
- The timing and intensity of your activities may have varied over the 12 months. Do your best to estimate your average or usual activity pattern.
- Do not "double-count" hours your total activity hours should add up to no more than the hours you are awake.
- In each section, the top pages provide examples of how to fill in the charts. Read through the examples and then fill in your activities on the bottom pages.
- If a whole page does not apply to you, please write NA in the first column. We will then know you did not miss the page.



ALBERTA CANCER FOUNDATION

v4.1

Employment & Volunteer Activities

PHYSICAL INTENSITY LEVELS: Choose the <u>one</u> that best describes <u>your</u> experience.

- 1 = Activities done mainly sitting down
- 2 = Activities done mainly standing, that do not increase your heart rate & cause no sweating
- 3 = Activities that cause your heart rate to increase slightly & cause some light sweating
- 4 = Activities that cause your heart rate to increase substantially & cause heavy sweating

EXAMPLE:

Activity 1

- In the past 12 months, Joe's job has been **farming. He took 2** weeks of holidays.
- His main physical activities = drive equipment, walk & shovel.
- He farms 11.5 months a year, 6 days a week, 9.5 hours a day
- He drives and walks 8.5 hours a day and rates his physical intensity level for those activities as 2.
- He **shovels 1.0** hours a day and rates his physical intensity level for shoveling as **4**.

Activity 2

- In the past 12 months Joe has been volunteering for a 4H Club.
- His physical activities are sitting and standing.
- He volunteers **10** months a year, **1** day a week, **2** hours a day. He rates his physical intensity level as **1** because his main activity is sitting.

Job Title Employment and volunteer work	Main Physical Activities List up to 3 main activities that you did on the job in the past 12 months e.g. sit, stand, walk, carry loads	Months per Year	Days per Week	Hours per Day	Physical Intensity Level 1,2,3,4 Choose the level for you	OFFICE USE ONLY
Farmer	Drive, walk	11.5	6	8.5	2	
Farmer	Shovel	11.5	6	1.0	4	
4H Club volunteer	Sit, stand	10	1	2	1	



Your Employment & Volunteer Activities

- (1) Start a new line for each job that you did in the past 12 months (paid or volunteer).
- (2) Start a new line when the pattern changed, such as when the activities, intensity level, or the number of months, days or hours of the job changed.
- (3) Remember to <u>deduct weeks or months you were on vacation</u>.
- (4) If you are involved in a volunteer or work activity less than once a week, record the days and the appropriate interval in the "Days per week" column, e.g. "Bingo 1 day/month".

	Main Physical Activities								
	Main Physical Activities				Physical				
Job Title	List up to 3 main activities that	Mantha	Devre		Intensity Level				
Employment and	you did on the job in the past 12	Months	Days	Hours	1,2,3,4	OFFIC			
volunteer work	months	per	per Week	per			EUSE	JINL	
	monuis	Year	ллеек	Day	Choose the				
	e.g. sit, stand, walk, carry loads				level for you				
				1					



Walking, biking to and from employment & volunteer activities



PHYSICAL INTENSITY LEVELS: Choose the <u>one</u> that best describes <u>your</u> experience.

- 2 = Activities (walking, biking etc.) that do not increase your heart rate & cause no sweating
- 3 = Activities that cause your heart rate to increase slightly & cause some light sweating
- 4 = Activities that cause your heart rate to increase substantially & cause heavy sweating

EXAMPLE:

Activity 1

- Sandra works part-time as a **nurse** in a community health centre near her home.
- She walks to and from work 5 months of the year, 3 days a week, (<u>15 minutes each way</u>); the rest of the year she drives.
- She rates her physical intensity level for walking as 2

Activity 2

- Sandra also volunteers 1 day a week at her children's school 10 months per year.
- 4 months of the year she bikes to and from the school (30 minutes each way); the rest of the year she drives.
- She rates her physical activity level for biking as 3.

Nurse Walk 5 3 30 min 2	
Nurse Walk 5 3 30 min 2	
School Volunteer Bike 4 1 60 min 3	

Your walking, biking to and from employment & volunteer activities

- (1) Start a new line for each job from page 3 (paid or volunteer) that involves walking or biking to and/or from work in the past 12 months.
- (2) Do not include walking that is part of your job at work. (Walking at work should be recorded on page 3.)
- (3) Include any other means of transportation you use for getting to work, like in-line skating etc.
- (4) Include the time you walk to and from the bus or your car.
- (5) Record your time in <u>minutes</u>. (This is the only section that asks for your answer in minutes continue to enter your time in hours in the rest of the questionnaire.)
- (6) OR: If this section does not apply to you, please write NA on the first line.

Job Title Employment and volunteer work from page 3	Type of ActivityTo go to and from workor volunteer activitye.g. walk, bike, in-line skate etc.	Months Days per per Year Week	<u>Minutes</u> per Day	Physical Intensity Level 2,3,4 Choose the level for you	OFFICE USE ONLY
			min		

Household, Childcare & Do-It-Yourself Activities

INCLUDING:

HOUSEWORK (e.g. cook, clean, do laundry, iron, vacuum, shop for groceries) CHILDCARE (e.g. dress, feed, play with own children)

YARD WORK (e.g. cut grass, shovel snow, wash the car, garden)

DO-IT-YOURSELF JOBS (e.g. do renovations & repairs at home or at a cabin

For this category, <u>DO NOT</u> include activities that are done <u>SEATED</u> (e.g. sewing, paying bills).

PHYSICAL INTENSITY LEVELS: Choose the <u>one</u> that best describes <u>your</u> experience.

- 2 = Activities done mainly standing, that do not increase your heart rate & cause no sweating
- 3 = Activities that cause your heart rate to increase slightly & cause some light sweating
- 4 = Activities that cause your heart rate to increase substantially & cause heavy sweating

EXAMPLE:

Activities 1 and 2

- Sandra shares the housework (meals, dishes and laundry) and childcare (feeding, dressing, playing) with her family.
- She does housework 12 months a year, 7 days a week for an average of 2 hours a day at an intensity level of 2.
- She cares for her children 12 months a year, 7 days a week for an average of 3 hours a day at an intensity level of 3.
- Activity 3
- Sandra also shares the yard work with her husband (gardening, cutting grass).
- She does yard work **5** months a year, **3** days a week, and averages about **1.5** hours a day.
- She rates her physical intensity level for yard work as 3.

Type of Activity	Months per Year	Days per Week	Hours per Day	Physical Intensity Level 2,3,4 Choose the level for you
Meals, dishes, laundry	12	7	2	2
Feed, dress, play with kids	12	7	3	3
Garden, cut grass	5	3	1.5	3



Your Household, Childcare & Do-It-Yourself Activities

- (1) Start a new line when the pattern changed, such as when the intensity level, or the number of months, days or hours changed in the past 12 months.
- (2) Report seasonal activities like gardening or snow shoveling separately from year round activities.
- (3) If you are being paid to provide childcare, report this activity on page 3.

Type of Activity	Months per Year	Days per Week	Hours per Day	Physical Intensity Level 2,3,4 Choose the level for you
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Recreation & Leisure Activities

For this category, **<u>DO NOT</u>** include activities that are done **<u>SEATED</u>** (playing cards, reading, etc.).

PHYSICAL INTENSITY LEVELS: Choose the one that best describes your experience.

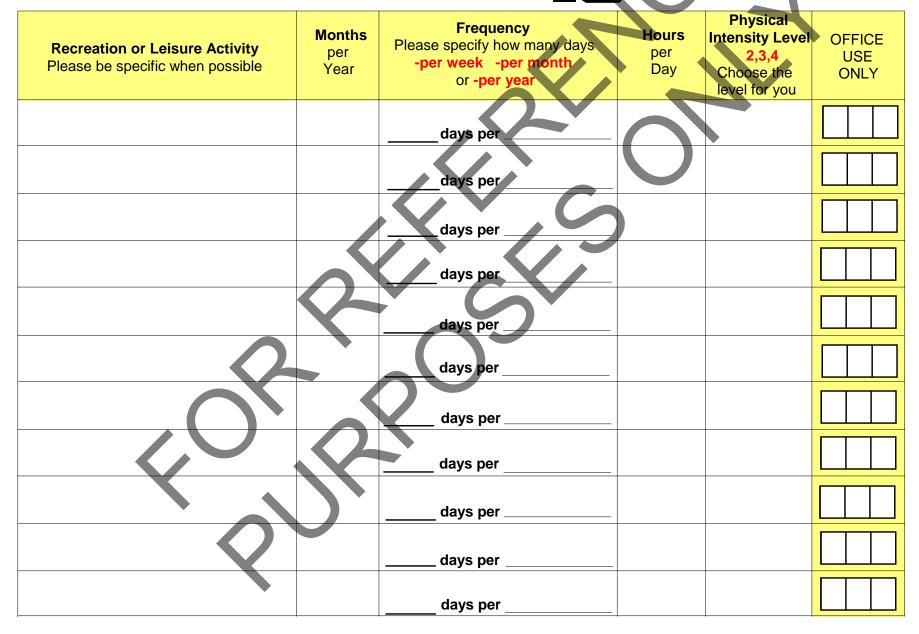
- 2 = Activities done mainly standing, that do not increase your heart rate & cause no sweating
- 3 = Activities that cause your heart rate to increase slightly & cause some light sweating
- 4 = Activities that cause your heart rate to increase substantially & cause heavy sweating

EXAMPLE:

Activity 1 Activity Activity 3 - Greg went on a **fishing** trip this - Greg also walks regularly, - Greg also cycles regularly. past year. - He walks for 6 months of the year. - He cycles 8 months of the year. - He went on a **10** day trip. He walks 4 days a week, for 30 - He cycles 4 days a month, for 3 - He fished about 4 hours each day. minutes. hours. - For him, fishing is a level 2. For him, walking is a level 3, - For him, cycling is a level **4**. Physical Frequency Hours Months Intensity Level OFFICE Please specify how many days **Recreation or Leisure Activity** per per 2,3,4 USE -per week -per month Please be specific when possible Day Year ONLY Choose the or -per year level for you Fishing 10 Year 4 2 days per 0.5 Walking Week 3 days per Cycling 3 8 4 Month 4 davs per

Your Recreation & Leisure Activities

- (1) Start a new line when the pattern changed, such as when the activity, intensity level, or the number of months, days or hours of your recreational activities in the past 12 months changed.
- (2) Do not include walking that you did as part of your job or volunteer activities this type of walking should be recorded on page 3.
- (3) Before you start, see next page for examples of activities...





Examples of Recreation & Leisure Activities

Aerobics Aquacize Archery Backpacking **Badminton Basketball** Bicycling Billiards Boating Bowling Boxing Broomball Calisthenics Canoeing Circuit training Climbing (rock, wall) Coaching Cricket Curling Dancing Darts Deepwater running Diving Fishing Football Frisbee Golf **Gymnastics**

Handball Hang gliding Hikina Hockey Horseback riding Horseshoe pitching Hunting Ice-skating Jogging Judo Jujitsu Karate Kayaking Lacrosse Motor cross Orienteering Paddleball Ping-pong Racquetball Rowing Rugby Running Sailing Scuba diving Shuffleboard Skateboarding Skiing, downhill Skiing, cross-country

Sledding Snorkeling Snow shoeing Snowboarding Soccer Softball Squash Stair climber Stationary bicycling Stretching Surfing Swimming Tai chi Telemarking Tennis Tobogganing Track & field Treadmill Volleyball Walking Water polo Water volleyball Water skiing Weight lifting Whitewater rafting Wrestling Yoga

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Tell us what you think!

Your feedback is important to us and will be used as a tool to streamline and improve this survey. In the space below, please record your comments or concerns. If your comment is about a specific question, please refer to it by page number.

As a whole, how easy wa	is this survey to complete?
Not easy 01 02 03 0 at all	4 O.5 O 6 O 7 Very Easy
Comments (optional):	
	1.2
	2 *
Date Survey Completed:	Your Current Age:
Please fill in the corresponding bubble for	r your gender: OMale OFemale
Thank you very much for answering the	e Physical Activity Questionnaire!
Please return the questionnaire in the postage p	aid envelope at your earliest convenience