

# Walking Befriending 3 month Review Form



**LOTTERY FUNDED**

Walking Befriending is funded by Sport England and provided by Age UK Milton Keynes. We hope you enjoy walking with us on a regular basis. As part of the agreement with our funders we need to collect information from you at different stages of the project.

Please tell us if any of your contact details have changed since we last heard from you. Please complete in block capitals.

Charitylog ID: \_\_\_\_\_ (office use only)

Name .....

Address .....

.....

.....

.....

Telephone no .....

email.....

Date .....

1. How often do you feel that you lack companionship? (Please circle)

hardly ever    some of the time    often

2. How often do you feel left out? (Please circle)

hardly ever    some of the time    often

3. How often do you feel isolated from others? (Please circle)

hardly ever    some of the time    often

4. How often do you feel lonely (please circle)

often            some of the time            occasionally

                  hardly ever                    never

5. In the past 7 days, have you done a continuous walk lasting at least 10 minutes?  
 Yes    No  
 If yes,  
 a. In the past 7 days, on how many days did you do a walk lasting at least 10 minutes? (Please circle)  
 0 1 2 3 4 5 6 7

b. How much time did you usually spend walking on each day that you did activity?  
 \_\_\_\_ hours \_\_\_\_ minutes per day

c. Was the effort you put into walking usually enough to raise your breathing rate?  
 Yes    No

6. In the past 7 days, have you done a cycle ride?  
 Yes    No  
 If yes,  
 a. In the past 7 days, on how many days did you do a cycle ride? (Please circle)  
 0 1 2 3 4 5 6 7

b. How much time did you usually spend cycling on each day that you did the activity?  
 \_\_\_\_ hours \_\_\_\_ minutes per day

c. Was the effort you put into cycling usually enough to raise your breathing rate?  
 Yes    No

7. In the past 7 days, have you done sport, fitness activity (such as gym or fitness class) or dance?  
 Yes    No  
 If yes,  
 a. In the past 7 days, on how many days did you do a sport, fitness activity (such as gym or fitness class) or dance? (Please circle)  
 0 1 2 3 4 5 6 7

b. How much time did you usually spend doing sport, fitness activities or dance on each day that you did the activity?  
 \_\_\_\_ hours \_\_\_\_ minutes per day

c. Was the effort you put into doing sport, fitness activities or dance usually enough to raise your breathing rate?  
 Yes    No

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8. Below are some statements about feelings and thoughts

Please tick the box that best describes your experience of each over the last two weeks

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling good about myself	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been feeling confident	1	2	3	4	5
I've been able to make up my own mind about things	1	2	3	4	5
I've been interested in new things	1	2	3	4	5

9. What has walking regularly done for you?

10. As a result of taking part in this walking befriending project, do you feel more supported?

11. To what extent do you agree with the statement ' I can achieve most of the goals I set myself'

- Strongly agree  
  Agree  
  Neither agree or disagree  
  Disagree  
  Strongly disagree  
 Prefer not to say

12. To what extent do you agree or disagree that most people in your local area can be trusted?

- Strongly agree  
  Agree  
  Neither agree or disagree  
  Disagree  
  Strongly disagree  
 Prefer not to say

13. Have you heard about or considered joining any activity groups in the local area?

- If yes,      a. Have you joined?      b. Do you attend regularly
- Yes     No                       Yes     No

14. Do you still feel any of the following stop you from walking regularly?

- Poor mobility  
  Feeling nervous when walking alone  
  Nervous of the local area  
  safety e.g. falls  
 Lack of motivation  
 Other .....

15. Do you have any comments you wish to add about the walking befriending project?