

Survey

1. Please choose your gender.

- A) Male
- B) Female

2. Please select your approximate age.

- A) 60 – 70
- B) 70 – 80
- C) 80 – 90
- D) 90 – 100

3. Do you consider yourself to be healthy or have a healthy lifestyle?

- A) Yes
- B) No
- C) Unsure
- D) My health is compromised

4. Do you regularly exercise?

- A) Yes
- B) No

5. When working out do you prefer exercising in groups or individually?

- A) Individual
- B) Group
- C) Both

6. Do you prefer individual activities or group activities?

- A) Individual
- B) Group
- C) Both

7. Do you have regular appointments for mental health?

- A) Yes
- B) No

8. When you have appointments and activities you want to participate in, how do you schedule and reserve them?

- A) Calling
- B) Website
- C) Application

9. How often do you use the internet and applications?

- A. Never before
- B. Once Before
- C. More than once (not regularly)
- D. Regularly (Primarily)

10. Do you use a smart Phone?

- A) Yes
- B) No

11. Do you reside in an assisted living center?

- A) Yes
- B) No

12. Do you have family, a partner or a support system?

- A) Yes
- B) No,
- C) Yes but with limitations (distance, etc)

13. Have you ever had difficulty involving transportation, driving, and general mobility issues?

- A) Never
- B) Once
- C) Multiple times but not regularly
- D) It is a regular challenge

14. Do you take any medication

- A) Yes
- B) No

15. How many prescriptions do you take?

- A) 0
- B) 0 – 5
- C) 5 – 10
- D) 10 +

16. How often do you miss taking a medication?

- A) Never
- B) Sometimes
- C) Often