

Readiness for Change

Will I Be Ready?



Thinking about your physical activity and eating over the past **three months**, please answer the following questions. Please circle one number to indicate how strongly you **agree** or **disagree** with the following statements. Check “Don’t know or refused” if you do not know or do not want to answer.

Where am I now?

	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree	Don't Know or Refused
I eat healthily.	5	4	3	2	1	
I get enough physical activity.	5	4	3	2	1	
I want to eat more healthily.	5	4	3	2	1	
I want to be more physically active.	5	4	3	2	1	

How confident are you that you can make changes now?

Please circle one number to indicate how confident you are that you can make the following changes. Check “Don’t know or refused” if you do not know or do not want to answer.

Physical Activity:	Sure I can	Think I can	Not sure I can	Don't think I can	Don't know or refused
Get physical activity more often	4	3	2	1	
Be physically active for longer time	4	3	2	1	

Eating:	Sure I can	Think I can	Not sure I can	Don't think I can	Don't know or refused
Eat more healthful foods	4	3	2	1	
Overeat less often	4	3	2	1	