



SONC Health Questionnaire

Thank you for taking the time to fill out this short questionnaire. Special Olympics North Carolina wants to learn how athletes, caregivers and others view access to health and wellness resources in their communities. Your responses will help SONC in their effort to increase access as they work to improve the lives of athletes. This form can also be filled out online by following this [link](#). All answers are anonymous.

Demographics

Please, let us know a little bit about who you are and how you are/aren't involved with Special Olympics NC.

What is your gender?

Female Male
Other

What is your age?

17 or younger
18-24
25-34
35-44
45-54
55-64
65-74
75 or older

How are you involved with Special Olympics?

Athlete
Unified Partner
Coach
General volunteer
Family member Caregiver
Local program staff
Medical volunteer
I'm not involved with SO
Other _____

What county do you live in?

What county do you work in?



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Healthcare

This section is to help us learn more about the healthcare resources available in your community, specifically for those with intellectual disabilities.

Do you have a primary care doctor?

Yes No

Who is your primary care doctor?

How long does it take you to get to your primary care doctor?

10 minutes or less

15 - 20 minutes

20 - 25 minutes

25 - 30 minutes

30 - 45 minutes

45 minutes - 1 hour

1 - 1.5 hours

1.5 - 2 hours

more than 2 hours

Where do you go for medical care when you become sick?

Emergency room

Health Department

Primary care doctor

Local health clinic

I don't go anywhere

Other _____

How long does it take you to get to a specialist?

10 minutes or less

15 - 20 minutes

20 - 25 minutes

25 - 30 minutes

30 - 45 minutes

45 minutes - 1 hour

1 - 1.5 hours

1.5 - 2 hours

more than 2 hours

What are the three biggest barriers to healthcare that people with an intellectual disability face in your county?

1. _____

2. _____

3. _____



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Health & Wellness

This section is to help us learn more about the health and wellness resources available in your community, specifically for those with intellectual disabilities.

What opportunities are in place for physical activity in your community, outside of Special Olympics?

Parks for outdoor activities

Fitness classes

Gyms

There aren't other opportunities

Other: _____

List the top three types of opportunities for physical activity you would like to see in your community.

1. _____
2. _____
3. _____

What are the top three barriers to being physically active for people with intellectual disabilities?

1. _____
2. _____
3. _____

What opportunities are in place for promoting healthy eating and nutrition education in your community?

Healthy cooking classes

Nutrition classes at a local organization

Nutrition education in schools

There aren't opportunities

Other _____

What are the top three barriers to eating healthy for people with intellectual disabilities?

1. _____
2. _____
3. _____



SONC Local Health Committee

We are looking to form a local Special Olympics health committee in your county! We are looking for community members and leaders who are dedicated and passionate about improving the health of people with intellectual disabilities. If you or someone you know would be interested and would like more information, please fill out the information in this section. This information will not be associated with your answers to the previous questions.

Name (First & Last): _____

**Company/Organization/School
you are associated with:** _____

Phone: _____

Email: _____

Address: _____

