

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome
www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=...Wz5wZDdlGhrRfU%2F%2bWVbK00HvrdwF3agYkuDHAU%3d

Cancer Risk Perceptions

OMB No: 0925-0645
Expiration Date: 12/31/2014

Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0645). Do not return the completed form to this address.

Risk Perceptions Study
Consent Form

Purpose:
This study is being conducted by the National Cancer Institute. In this study, we are interested in learning more about whether and how much people believe they are at risk for disease (risk perceptions).

Procedure:
If you agree to be in this study, you will be asked to answer questions about your risk perceptions and health behaviors.

The total time required to complete the study should be approximately 25 minutes. You will receive \$1 as an incentive to thank you for participating in this study.

Benefits/Risks to Participant:
Participants will help contribute to the body of knowledge in psychology. Minor risks include any discomfort you may feel while thinking about your disease risk perceptions.

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome
www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=...Wz5wZDdlGhrRfU%2F%2bWVbK00HvrdwF3agYkuDHAU%3d
risk_perceptions.

Voluntary Nature of the Study
Your participation in this study is entirely voluntary and you may refuse to complete the study at any point, or refuse to answer any questions with which you are uncomfortable. Your name and other identifying information will not be collected. The data will be accessible only to those working on the project. The information you provide will be kept secure to the extent provided by law.

Contacts and Questions:
If you have questions about this study, you may contact Rebecca Ferrer at rebecca.ferrer@nih.gov

Statement of Consent
I have read the above information, and I consent to participate in this study.

Please click to continue to the studies. Clicking to continue indicates your consent to participate in this study.

Thanks for your participation!

Next

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome

www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=%2b8Yq7XNFxjPjYeD7BT4RIB5OGeWmZQcJ5eezaUEmX0%3d

Cancer Risk Perceptions

1. Please select the best answer choice for the following questions:

| | 1 Very low | 2 | 3 | 4 Neither high nor low | 5 | 6 | 7 Very high |
|--|-----------------------|-----------------------|-----------------------|------------------------|-----------------------|-----------------------|-----------------------|
| How would you rate your chance of developing cancer in the future? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The way I look after my health means that my odds of getting cancer are: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| When I think about it rationally, my chances of getting of cancer are: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Overall, my chances of getting of cancer feel: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| My feelings tell me that my chances of getting of cancer are: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Next

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome

www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=%2b8Yq7XNFxjPjYeD7BT4RIB5OGeWmZQcJ5eezaUEmX0%3d

Cancer Risk Perceptions

2. Please select the best answer choice for the following questions:

| | 1 Very unlikely | 2 | 3 | 4 Neither unlikely nor likely | 5 | 6 | 7 Very likely |
|---|-----------------------|-----------------------|-----------------------|-------------------------------|-----------------------|-----------------------|-----------------------|
| How likely is it that you will get cancer at some point in your lifetime? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

3. On a scale from 0% to 100%, how would you rate the probability that you will develop cancer in the future?

4. Please select the best answer choice for the following questions:

| | 1 Much Lower | 2 | 3 | 4 About the Same | 5 | 6 | 7 Much Higher |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| How do you think your chance of developing cancer in the future compares to the average person of your gender and your age? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Compared to the other people just like me (same gender and age), I believe that my risk of getting cancer is: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome

www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=%2b8Yq7KNfxjPyeDj7BT4RIB50GeWmZQcJ5eezaUEmX0%3d

Cancer Risk Perceptions

5. Please select the best answer choice for the following questions:

| | 1 Strongly disagree | 2 | 3 | 4 Neither disagree nor agree | 5 | 6 | 7 Strongly agree |
|---|-----------------------|-----------------------|-----------------------|------------------------------|-----------------------|-----------------------|-----------------------|
| When I think carefully about my lifestyle, it does seem possible that I could get cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| If I look at myself as if I was a doctor, I realize that my behavior puts me at risk of getting cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I feel very vulnerable to cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| My gut feeling is that I am going to get cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I'm confident that I won't get cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I suspect that getting cancer is something that could happen to me. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| My first thought about cancer is 'that could happen to me one day.' | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I would be lying if I said "There is no chance of me getting cancer." | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| If I'm honest, cancer is a possibility for me. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| My first reaction when I hear of someone getting cancer is "that could be me someday." | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Even low cancer risks happen to someone. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| When it comes to things that might cause cancer, it's better to be safe than sorry. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| It is better to have fun and enjoy life than to think about your risk of cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| If I had cancer, I wouldn't want to know. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I feel anxious about learning my chances of getting cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome

www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=%2b8Yq7KNfxjPyeDj7BT4RIB50GeWmZQcJ5eezaUEmX0%3d

I feel anxious about learning my chances of getting cancer.

| | | | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| I am afraid to find out whether I have cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I feel it would be better not to know whether I had cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Learning my chances of getting cancer would make me feel vulnerable. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I'd rather not know my chances of getting cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I know all I need to know about getting cancer | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I would like to know more about how a person gets cancer | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to start trying to lose weight in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to exercise more in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to eat a healthier diet in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to cut down on the amount of alcohol I drink in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Cancer Risk Perceptions

6. Please select the best answer choice for the following questions:

| | 1 Not at all | 2 | 3 | 4 | 5 | 6 | 7 Extremely |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| How worried are you about developing cancer in your lifetime? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How fearful are you about developing cancer in your lifetime? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How anxious are you about developing cancer in your lifetime? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How concerned are you about developing cancer in your lifetime? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How nervous are you about developing cancer in your lifetime? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How often do you worry about your risk of getting cancer? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How easy is it for you to imagine yourself developing cancer? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| How interested are you in seeking out additional information about your chances of getting cancer? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

Cancer Risk Perceptions

7. Think about cancer for a moment. When you hear the word "cancer," what is the first word or image that comes to mind? How does that make you feel?

| | 1 Not at all | 2 | 3 | 4 | 5 | 6 | 7 Extremely |
|------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Negative | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Positive | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Fearful | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Angry | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Disgusted | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Upset | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Sad | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hopeful | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Worried | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Displeased | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Anxious | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions Survey - Google Chrome
 www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=%2b8Yq7K9FxpYD37BT4RIBSOGeWm2QcJ5eezaUEmX0%3d

Cancer Risk Perceptions

8. I feel like I could easily develop cancer in the future

1 I feel strongly this will not happen
 2
 3
 4
 5
 6
 7 I feel strongly that this could easily happen

9. How optimistic are you that you will avoid getting cancer in the future?

1 Extremely pessimistic
 2
 3
 4
 5
 6
 7 Extremely optimistic

Powered by [SurveyMonkey](#)
 Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions 2 Survey - Google Chrome
 www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=EUT8H51JAMIItn5MKHrht22L5fNaizkG4Lk%2bLOVA%3d

Cancer Risk Perceptions 2

1. Please select the best answer choice for the following questions:

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | Not at all | | | | | | To a great extent |
| I intend to protect myself against cancer. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Avoiding getting cancer is a key priority for me. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Powered by [SurveyMonkey](#)
 Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions 2 Survey - Google Chrome
 www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=EUT8H51JAMIITh5MKHrthT2L5rNalzdG4LjK%2bLOVA%3d

Cancer Risk Perceptions 2

2. Please select the best answer choice for the following questions:

| | 1 Not at all | 2 | 3 | 4 | 5 | 6 | 7 To a great extent | 8 Not applicable to me |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|
| To what extent do you think you will actually try to lose weight in the next six months? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent do you think you will actually quit smoking in the next six months? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent do you think you will actually cut your alcohol consumption in the next six months? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent do you think you will actually be tested for colorectal cancer the next time you are due for a test? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent do you think you will actually get a mammogram next time you are due for a test? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent do you think you will actually get a pap screen next time you are due for a test? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent are you seriously considering quitting smoking in the next six months? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Powered by **SurveyMonkey**
 Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions 2 Survey - Google Chrome
 www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=EUT8H51JAMIITh5MKHrthT2L5rNalzdG4LjK%2bLOVA%3d

Cancer Risk Perceptions 2

3. Please select the best answer choice for the following questions:

| | 1 Strongly disagree | 2 | 3 | 4 Neither agree nor disagree | 5 | 6 | 7 Strongly agree | 8 Not applicable to me |
|---|-----------------------|-----------------------|-----------------------|------------------------------|-----------------------|-----------------------|-----------------------|------------------------|
| I intend to start trying to lose weight in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to stop smoking in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to cut down on the amount of alcohol I drink in the next six months. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to get tested for colorectal cancer when I am due for my next test. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to get a mammogram sometime in the next year. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I intend to get a pap test sometime in the next three years. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Powered by **SurveyMonkey**
 Check out our [sample surveys](#) and create your own now!

Cancer Risk Perceptions 2

4. Please select the best answer choice for the following questions:

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 To a great extent |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| To what extent do you think you will actually exercise more in the next six months? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To what extent do you think you will actually eat healthier in the next six months? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Prev Next

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

Cancer Risk Perceptions 3

1. A vaccine to prevent the human papillomavirus or HPV infection is recommended for girls aged 11-12 and is called the cervical cancer vaccine, HPV shot, or GARDASIL®. If you had a daughter that age, would you have her get it?

- 1 Definitely would not
- 2
- 3
- 4
- 5
- 6
- 7 Definitely would

2. Has any of your children had the HPV vaccination?

- Yes
- No
- Not sure
- None of my children are old enough for the vaccine
- My children were too old for the vaccine when it was released
- I don't have children

Prev Done

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

[SURVEY PREVIEW MODE] Cancer Risk Perceptions 2 Survey - Google Chrome
 www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=EUT8H51JAMIIITn5MKHrht22L5rNaizkG4Lk%2bLOVA%3d

Cancer Risk Perceptions 2

5. Please select the best answer choice for the following questions:

| | Yes | No | Does not apply to me |
|---|-----------------------|-----------------------|-----------------------|
| At any time in the past year, have you intentionally tried to lose weight? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Was this weight loss attempt successful? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| At any time in the past year, have you intentionally tried to exercise more? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Was this exercise attempt successful? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| At any time in the past year, have you intentionally tried to eat healthier? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Was this healthy eating attempt successful? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| At any time in the past year, have you intentionally tried to stop smoking? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Was this smoking cessation attempt successful? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| At any time in the past year, have you intentionally tried to cut down on your alcohol consumption? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Was this attempt to cut down alcohol consumption successful? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

6. What is your height in feet and inches? (Remove shoes before measuring.)

Feet

Inches

[SURVEY PREVIEW MODE] Cancer Risk Perceptions 2 Survey - Google Chrome
 www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=EUT8H51JAMIIITn5MKHrht22L5rNaizkG4Lk%2bLOVA%3d

7. What is your current weight in pounds?

8. Have you smoked at least 100 cigarettes in your entire life?

Yes

No

9. How often do you smoke cigarettes now?

Every day

Some days

Not at all

Powered by **SurveyMonkey**
 Check out our [sample surveys](#) and create your own now!