**QUESTIONNAIRE #1**

**Personal goals of women living with breast cancer**

**Please write down your alias or code name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please enter today’s date (YY/MM/DD):** \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

#

# Your personal goals

Thank you for volunteering to take part in this study. We have asked you to take part because we are interested in learning more about your goals and priorities while you also deal with a recent breast cancer diagnosis.

Many things in your life may be or feel different than before your diagnosis. We are interested in understanding you and your experiences at this time, based on the things that you plan to do that are important to you. We call these your “**personal goals**”. We all have personal goals, from the grandiose to the mundane. Our goals define how we spend our time and energy. Goals may be related to any aspect of your daily life, from the very common things that most people do, to the very specific things that perhaps only you do! They can be related to your health, work, home, and community, among others. Please think of goals in this broad way and in relation to the next 3 to 4 months.

The personal goalsthat we’re interested in are the **goals that you’re planning on undertaking over the next 3-4 months**. They may be new goals and/or ongoing ones that you have been pursuing for a while. We are also interested in finding out what you think and feel about these personal goals.

## Some examples of personal goals

Personal goals may be focused on:

* Something you want to achieve “*Increase my* *exercise to 3 times a week”*
* Something new “*Approach life with the happiness I feel today”*
* Something you have been doing for years “*Walk my dog every morning*”
* Something you want to avoid “*Stay away from sugar*”
* Something you want to do *“Enjoying a night out with friends”*
* Something you feel you ought to do “*Call my brother more often*”

**Please turn the page to start.**

# What are your personal goals?

To start, please take 10 minutes and write down, *in your own words,* **up to 12 personal goals that you want to pursue in your daily life over the next 3 – 4 months**.

***What if I can’t think of 12 personal goals?*** Although we ask for 12 at the most, you can list fewer if you want – it’s OK to list one or two if those are the goals that define what you will be up to over the next 4 months.

***What if I can’t think of ANY goals?*** That is OK. It’s helpful for us to know that. Please don’t feel any pressure to write down goals just because there is space. **Skip the next few pages and turn to page 7.**

**Goal # Goal Description (in your own words – there are no right or wrong answers!)**

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NEXT**: From your list, please **circle 6 goals** that are the most important to you.If you listed *exactly* or *fewer than* 6 goals, please circle all 6.

**How do you think and feel about your personal goals?**

On the following page, we would like you to consider how you think and feel about your goals.

On page 6 is a list of the dimensions and a more detailed explanation of what each one means. Please **detach the list for easy reference** and refer to it as needed while you rate your goals.

**Follow the instructions** at the top of the next page (page 5).

**INSTRUCTIONS:**

**Step 1: Copy** your 6 most important goals from your list on to the table in the column on the left.

**Step 2: Please rate from 0 to 10** how you think and feel about each of your 6 most important goals in the dimensions along the top.Please use the definitions of each dimension on page 6. If you feel a dimension is **not relevant** to one of your goals, you may put an “X” in the space instead of a number, but **please try to rate each goal on all dimensions if possible**.

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| --- | --- | --- |
|  | **What do you think about what you will be doing?** | **How do you feel about what you will be doing?** |
|  | **Personal goals** | **Challenge** | **Likelihood of Success** | **Autonomy** | **Intention** | **Attention** | **Support** | **Time adequacy** | **Self-identity** | **Hopeful** | **Scared** | **Sad** | **Happy** | **Stressed** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## Goal Dimension Definitions

### 1. Challenge

**How challenging do you think this goal will be?**

(Use **10** if you think it will be extremely challenging, perhaps more than you can handle, and **0** if you think it will be not at all challenging – almost boring.)

### 2. Likelihood of Success

**How successful do you believe this goal will be?**

(Use **10** if you expect the goal to be entirely successful, and **0** if you think the goal will turn out to be a total failure.)

### 3. Autonomy

**How much is this goal one which you feel you will pursue autonomously, that is, you will be engaged of your own free will in the goal, not because anyone else wants you to do it.**

(Use **10** if you will be engaged in this goal entirely of your own free will, and **0** if this goal is one that you feel totally obliged to complete because of or for someone else.)

### 4. Intention

**How much do you intend to pursue this goal, that is, how much do you want to pursue this goal?**

(Use **10** if you fully intend to pursue the goal, and **0** if you do not intend to pursue it at all.)

### 5. Attention

**How much attention do you think you can give to this goal?**

(Use **10** for a goal that you plan to give your full attention, and **0** for one that you plan to give no attention at all.)

### 6. Support

**To what extent do you feel this goal will be supported by other people?** Support may come in different forms, e.g. emotional (encouragement, approval), financial (money, material possessions) or practical (active assistance).

(Use **10** if you feel other people will give full support for the goal, and **0** if there will be no support at all.)

### 7. Time Adequacy

**Do you have enough time to spend working on this goal?**

(Use **10** if you feel the amount of time you have will be perfectly adequate, and **0** if you feel that the amount of time you will have to spend working on the goal will not be at all adequate.)

### 8. Self-Identity

All of us have things we do that we feel are typical or truly expressive of us. These things can be thought of as our "trade marks". For example, some people engage in sports every chance they get, others prefer to read, others prefer to socialize. **Think of what your own personal "trade marks" are, and then rate this goal on the extent to which it is typical of you.**

(Use **10** if a goal is very typical of you, and **0** if it is not typical at all.)

### 9 – 13.  Feelings (hopeful, scared, sad, happy, stressed)

**To what extent do you feel each emotion while thinking about doing each goal?**

(Use **10** if you experience the emotion very strongly, and **0** if you don’t feel it at all.)

**If you did not list any goals on page 2, please complete this page.**

**Otherwise, please go ahead to page 8.**

**Could you tell us more about why you did not list any personal goals** (for example, “I’ve got too much on my mind right now”, “I didn’t understand the word ‘goal’, I don’t want to focus on goals”)? **All feelings are natural and normal, and all answers are valid.**

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**A little more about you**

We hope to learn more about women who are interested in integrative oncology. All of the information you share with us will be reported for the group as a whole, and will not be used to identify you.

1. **What is your age, as of today?**

\_\_\_\_\_\_ years old

1. **What is your current living situation? *Please select one.***

[ ]  Living alone (with or without pets)

[ ]  Living with one or more non-family members (you can define who you think of as family

[ ]  Living with one or more family members you can define who you think of as family)

[ ]  I prefer not to say

1. **What is the highest level of education that you have completed? *Please select one.***

[ ]  Some high school

[ ]  High school diploma

[ ]  Some post-secondary school (for example, college, trade school, or university)

[ ]  Post-secondary certificate or diploma

[ ]  Undergraduate university degree (for example, B.A., B. Sc.)

[ ]  Post-graduate university degree (for example, M.A., Ph.D., M.D.)

[ ]  I don’t know

[ ]  I prefer not to say

1. **What was your *household* income, before taxes, in 2016? *Please select one.***

[ ]  Less than $30,000

[ ]  Between $30,000 and $50,000

[ ]  Between $50,001 and $90,000

[ ]  Between $90,001 and $150,000

[ ]  $150,001 or above

[ ]  I don’t know

[ ]  I prefer not to say

1. **What was the date of your breast cancer diagnosis? If you don’t remember the exact date, enter the year and month.**

(YY/MM/DD) \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_

1. **What is your breast cancer stage (if known):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you!**

This is the end of the first of three questionnaires that you will be asked to complete for this study. Thank you very much for sharing this information about your personal goals and how you think and feel about them. It is truly appreciated.

As always, please don’t hesitate to ask if you have questions at any time.

Thank you again,

Andrea