

# Pilates for the Military Opening Survey

Thank you for taking the time to join this research Programme.

My aim, in conducting this Programme is to establish whether a series of specifically designed Pilates exercises can enhance the fitness of serving Military personnel who are considered fit and well. The starting assumption is that to have reached your level of professional qualification and experience you may have sustained some form of injury or training fatigue. The after effects of such injuries do not interfere with your ability to perform your job. If, however, we were able to enhance your fitness so as to alleviate some of those after effects of injury, I would expect that we can make you more effective at training for and in performing your role.

This survey is intended to establish a baseline understanding of your physical comfort and it is therefore important that you answer as you are actually feeling today, not as you may like to feel.

1. How old are you?

- 16-19
- 20-29
- 30-39
- 40-49
- 50+

2. Are you currently fit for duty?

- Yes
- No

3. Which of the following best describes your primary job?

- Sedentary
- Active

4. What level of physical readiness does your job demand?

- High
- Intermediate
- Low

5. In doing your main job, how would you say that you have to exert yourself physically?

- All of the time
- Occasionally
- Not very often

6. Rate your current Fitness:

**Very Fit**

**Moderately Fit**

**Not very Fit**

**Unfit**

7. Rate your posture:

**I know I have  
excellent  
posture**

**I don't notice  
my posture**

**I know I have  
poor posture**

8. What were your last scores for Press Ups and Sit Ups in the Personal Fitness Assessment?

Press Ups

Sit Ups

9. How does this score compare with your expectations?

- As expected
- Higher than expected
- Lower than expected

You may have different roles in doing your job, with different operational and peacetime duties or part time and full time duties. The following questions relate to the part of your job which affects your physique the most.

You might be very physical in one aspect and more sedentary in another. Please consider the aspect which affects you more if this is the case. For example, You spend a lot of time outdoors carrying weight, but administrative duties at a desk hurt your back. Or, you perform your normal duties without much weight, but your operational duties require you to carry more equipment and this sometimes hurts your knees.

10. How much sitting do you do (this includes car journeys)

- Less than 1 hour per day
- 1-3 hours per day
- 3-6 hours per day
- 6-10 hours per day
- More than 10 hours per day

11. How much walking do you do

- Less than 1 hour per day
- 1-3 hours per day
- 3-6 hours per day
- 6-10 hours per day
- More than 10 hours per day

12. In order to do your main job, what is the weight of the equipment that you wear on your person and carry?

13. How often do you wear and carry this equipment?

- Daily
- Several times a week
- Several times a month
- Several times a year

14. What Physical Exercise do you do each week and for how long?

Running	<input type="text"/>
Swimming	<input type="text"/>
Weights	<input type="text"/>
Martial Arts/Boxing	<input type="text"/>
Pilates/Yoga	<input type="text"/>
Cycling	<input type="text"/>
Pack Marching	<input type="text"/>
Other (please state)	<input type="text"/>

15. Please specify your Affected Areas

- None
- Neck
- Upper Back
- Mid Back
- Lower Back
- Stomach Muscles
- Shoulders
- Arms
- Hips
- Thighs
- Knees
- Calves
- Ankles
- Feet

Other (please specify)

16. Rank in order of severity three injuries which still niggle:

Most noticeable

Next noticeable

Least noticeable

This list contains sentences that people have used to describe themselves when they are bothered by their Affected Area. When you read them, you may find that some stand out because they describe you today.

When you read a sentence that describes you today, put a tick against it. If the sentence does not describe you, then leave the space blank and go on to the next one. Remember, only tick the sentence if you are sure it describes you today.

#### 17. How I notice my Affected Area

- 1. I change position frequently to try to get comfortable
- 2. My Affected Area stops me from carrying on with normal training
- 3. I move more slowly than usual because of my Affected Area
- 4. Because of my Affected Area I am not doing any of the jobs that I usually do at home
- 5. My Affected Area doesn't stop me at all
- 6. I only stand for short periods of time because of my Affected Area
- 7. I feel my Affected Area after exercise
- 8. Because of my Affected Area, I try to avoid certain movements
- 9. I notice my Affected Area when I have been sitting
- 10. Because of my Affected Area, I try not to bend or kneel down
- 11. My Affected Area is noticeable almost all the time
- 12. I find it difficult to turn over in bed because of my Affected Area
- 13. I notice my Affected Area when walking with weight on my back
- 14. I only walk short distances because of my Affected Area
- 15. I sleep less well because of my Affected Area
- 16. I notice my Affected Area when I wake up in the morning
- 17. I avoid heavy jobs around the house because of my Affected Area
- 18. When I notice my Affected Area, I can still carry on as normal
- 19. When I wearing and carry my personal equipment I notice my Affected Area
- 19. I feel my Affected Area during exercise
- 20. Because of my Affected Area, I am more irritable and bad tempered with people than usual
- 21. My Affected Area interrupts my concentration
- 22. Because of my Affected Area, I go uphill or upstairs more slowly than usual

18. Thinking about today please rate how much you have felt your Affected Area from Bad to Good

**Bad**

**Good**

19. Would you be interested in taking part in our Online 8 Week Fitness Programme for free?

- No Thanks
- Yes

20. If you want to take part in our Online 8 Week Fitness Programme, please write your first name and your email address below

First Name

Email Address