

IX. APPENDICES

A. King County Endorsement Letter

Dear King County Resident:

I am writing to urge your participation in a study that could help create healthier, safer communities for us and for our children.

I know that walking and other forms of physical activity are good for you, and I have an idea that where you live may impact how much physical activity you get. King County has formed a partnership with a National Institutes of Health Study to determine whether some neighborhoods are better for walking than others. We will use this information to help create better, healthier communities. Please be assured that all of the information you provide will be kept strictly confidential.

Our County has some of the most complete and up-to-date information about neighborhoods in the entire country, and I have given my commitment to cooperate with the researchers. This project needs your help and input to make that information even better. Please review the enclosed information for the details about this research project.

The National Institutes of Health is funding this research and this letter to you, because they are interested in finding out how your neighborhood affects your health and your quality of life. This study will help us learn more about the neighborhoods and communities of King County, and what is learned about these issues here will extend to other areas across our nation.

I strongly encourage you to consider taking part in this project. I believe that we all have a task to make our citizens healthier. Thank you in advance for your participation in this very important project.

Sincerely,

Ron Sims
King County Executive

Enclosure

B. Maryland Department of Planning Endorsement Letter

Mailed starting August 18th 2004.

Dear Maryland Resident:

We all want healthy, safe communities for our families. We are writing to urge you to participate in a National Institutes of Health study that would further this goal by looking at the connection between health and the ability to walk in your neighborhood.

The Maryland Departments of Planning and Health and Mental Hygiene have formed a partnership with the NIH to determine whether some neighborhoods are better for walking than others. Our region has some of the most complete and up-to-date information about neighborhoods in the entire country, but this research project needs your help to strengthen that information. Please review the enclosed materials for the details.

The NIH is funding this project to learn more about Maryland communities, and to find out how your neighborhood affects your health and your quality of life. We know that physical activity is good for your health, and we have an idea that where you live has an impact on activity levels. What is learned about these issues here will extend to other areas across our nation, and we hope the research results can be used to help create better, healthier communities.

While the state is not directly involved in this study, we have made a commitment to cooperate with the NIH researchers. Please be assured that all of the information you provide will be kept strictly confidential.

We strongly encourage you to consider taking part in this important project. Thank you in advance for your participation.

Sincerely,

Audrey E. Scott
Secretary
Maryland Department of Planning

Nelson J. Sabatini
Secretary
Maryland Department of Health and
Mental Hygiene

C. Telephone Household Introduction Letter

Dear Resident,

As health researchers from San Diego State University and the University of Cincinnati, we are contacting you because we need your help for a study about how people's neighborhoods are related to health and quality of life. It is called the Neighborhood Quality of Life Study.

You are one of 1200 individuals randomly selected from households in your area. You represent thousands of people and therefore your assistance and opinion are critical to us. People eligible for our study must be between 20 and 65 years old, English-speaking, able to walk, and able to complete a written, online, or phone survey.

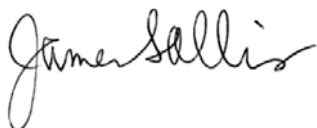
If eligible, you will complete a survey about your quality of life and how you perceive your neighborhood. The survey will take about 45 minutes to complete and includes questions on what you think of your neighborhood, your quality of life, health, and health behaviors, and demographic information such as your age and gender. You will also wear a small movement meter for seven days. The meter is about ½ the size of a pager, is attached to a belt, and measures general movement. After completing the survey and wearing the meter, you will receive a check for \$20 for participating. Six months later, you will fill out a different survey and wear the meter again for seven days, and we will send you another check, this time for \$30. This will be the extent of your participation.

We will mail you the meter and the survey can be completed through the mail or on-line. Our contact with you will be completely by phone, mail, or email. All information that you provide us will be kept strictly confidential and none of your information will be shared with anyone else.

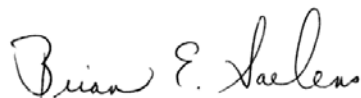
A staff member will call you soon to discuss the details of your participation. If you want to start now or if you have any questions, please call us at our toll-free number, 1-800-990-6757. You can also learn more about us on the web at www.nqls.org.

We look forward to you being a part of our study.

Sincerely,



James F. Sallis, PhD
Professor, San Diego State University



Brian Saelens, PhD
Assistant Professor, University of Cincinnati

D. Non-Telephone Household Introduction Letter

Dear Resident,

As health researchers from San Diego State University and the University of Cincinnati, we are contacting you because we need your help for a study about how people's neighborhoods are related to health and quality of life. It is called the Neighborhood Quality of Life Study.

You are one of 1200 individuals randomly selected from households in your area. You represent thousands of people and therefore your assistance and opinion are critical to us. People eligible for our study must be between 20 and 65 years old, English-speaking, able to walk, and able to complete a written, online, or phone survey.


If eligible, you will complete a survey about your quality of life and how you perceive your neighborhood. The survey will take about 45 minutes to complete and includes questions on what you think of your neighborhood, your quality of life, health, and health behaviors, and demographic information such as your age and gender. You will also wear a small movement meter for seven days. The meter is about ½ the size of a pager, is attached to a belt, and measures general movement. After completing the survey and wearing the meter, you will receive a check for \$20 for participating. Six months later, you will fill out a different survey and wear the meter again for seven days, and we will send you another check, this time for \$30. This will be the extent of your participation.

We will mail you the meter and the survey can be completed through the mail or on-line. Our contact with you will be completely by phone, mail, or email. All information that you provide us will be kept strictly confidential and none of your information will be shared with anyone else.

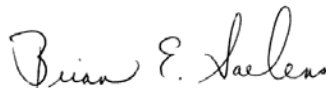
We have contacted you by mail because we do not have your phone number. If you or another eligible adult in your household is interested in learning more about our study, please complete the enclosed postcard and send it back to us. You can also submit this information on our website (www.nqls.org) while learning more about us. Or if you prefer, you may call our toll-free number, 1-800-990-6757 and tell us your name, address, and phone number. Again, this information will be kept strictly confidential. We would like to talk to you to make sure you are well informed about our study and so we can answer any questions.

We are only accepting a certain number of people per neighborhood. So please call us or send back the postcard soon! We look forward to hearing from you.

Sincerely,



James F. Sallis, PhD
Professor, San Diego State University



Brian Saelens, PhD
Assistant Professor, University of Cincinnati

E. Non-Telephone Household Postcard

We want you to have the opportunity to participate in this important study. The first step is to complete this card and send it back to us.

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Email address (optional) _____

Phone number () _____ - _____

Best days/times to call (circle the best times):

<i>Mondays</i>	<i>Tuesdays</i>	<i>Wednesdays</i>	<i>Thursdays</i>	<i>Fridays</i>
10am-noon	10am-noon	10am-noon	10am-noon	10am-noon
Noon-4pm	Noon-4pm	Noon-4pm	Noon-4pm	Noon-4pm
4-6 pm	4-6 pm	4-6 pm	4-6 pm	4-6pm
6-8 pm	6-8 pm	6-8 pm	6-8 pm	6-8pm

F. 2nd Postcard (Non-Telephone Households)

Dear King County Resident,

We recently sent you a letter about a study we are conducting to see how neighborhoods relate to people's health and quality of life. We want you to have the chance to participate in this important study, and we will pay you for participating.

Please call us on our toll-free line (xxx-xxx-xxxx) and let us know your name and telephone number. A member of our team will call you back promptly and give you more information about the study.

We look forward to hearing from you!

Sincerely,

The Neighborhood Quality of Life Study Staff

G. Consent Letter – Return Postcard Households

Dear Resident,

We recently received your phone contact information. Thank you for providing us with this. Enclosed is a consent form that provides more details about the Neighborhood Quality of Life Study. Please read and hold onto this form, as you will need it to participate.

If we have not already, a staff member will call you soon to discuss your participation, the consent form, and to ensure that you are eligible to participate.

If you have any questions before we call, feel free to call us at our toll-free number (toll free number). We look forward to talking with you soon.

Thank you again.

Sincerely,

The Neighborhood Quality of Life Study

H. Second Part Recruitment Letter

Dear (Participant's Name),

Your participation in the Neighborhood Quality of Life Study is helping us make great progress in examining how neighborhoods relate to health and quality of life. We are looking forward to having you take part in the second part of the study!

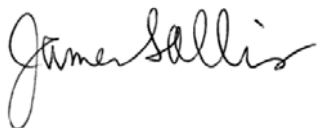
As you may remember, the second stage will be much like the first. You will wear the activity meter for seven consecutive days, and you will complete a different survey. When completed, we will send you a \$30 check.

Again, our contact with you will be completely by phone and mail. All of the information you provide will be kept strictly confidential.

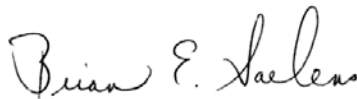
A staff member will be calling you soon to schedule a convenient time for you to begin the second half of your participation, and to answer any questions that you might have. **If you have moved, or if you have changed your phone number, please call us toll-free at (toll-free number), or email nqls@projects.sdsu.edu with your new contact information.**

We hope you have had a good few months, and we look forward to speaking with you soon. Thanks again for your participation.

Sincerely,



James F. Sallis, PhD
Professor
San Diego State University



Brian Saelens, PhD
Assistant Professor
University of Cincinnati

I. Conversion Letter

Dear Resident,

In recent months, hundreds of King County (Baltimore area) residents have agreed to take part in the Neighborhood Quality of Life Study, and we'd like *you* to join us! Thanks to their participation, we are making great progress in examining how neighborhoods are related to health and quality of life. The number of participants is steadily growing but we need you to help us reach our goal.

We recognize that your time is valuable, and that when we previously contacted you it may not have been a good time for you to participate. However, being a participant is a rewarding experience. Not only will you contribute to important scientific research on neighborhoods and health, but you also will receive a monetary compensation for your participation.

All of the study material will be sent to you, so our contact will be almost entirely by mail. All of the information you provide will be kept strictly confidential.

Please take a moment to read through the consent form and consider becoming a part of this important study. Someone will contact you soon with further information.

Sincerely,

The Neighborhood Quality of Life Study

J. Consent Form

San Diego State University
University of Cincinnati
Consent to Act as a Research Subject

The Neighborhood Quality of Life Study

You are being asked to participate in a research study. Before you give your consent to volunteer, it is important that you read the following information and ask as many questions as necessary to be sure you understand what you will be asked to do.

Principal Investigators

James F. Sallis, Ph.D., San Diego State University
Brian E. Saelens, Ph.D., University of Cincinnati
Lawrence D. Frank, Ph.D., Lawrence Frank & Company, Inc., Atlanta, GA

Purpose of the Study

This study is designed to see if the neighborhood where someone lives affects his/her quality of life and physical activity. About 2,400 people from different neighborhoods in the United States will be in this study. Participants will complete surveys about their neighborhood including questions about safety, the walking or biking environment, whether stores and other services are nearby, and other things in neighborhoods. Surveys will ask about things that can make people more or less active, such as how much they enjoy being active and what benefits they see from being active. Other questions will ask about your quality of life, social interactions, and psychological health. Physical activity will be measured, including time spent walking. The goal of the study is to examine if and how the neighborhood environment and individual factors relate to quality of life and physical activity.

Eligible participants will be:

- chosen at random from identified neighborhoods,
- between 20 to 65 years old,
- living in a house, apartment, or condo in identified neighborhoods,
- able to walk,
- English-speaking and reading, and able to complete the study surveys.

Description of the Study: After agreeing to be in this study, you will be mailed an activity meter, which is a small 2-inch by 2-inch by ¾-inch box, similar to but smaller than a pager, that is attached to a belt that you wear just above your right hip. The meter is worn under your clothing. It measures the amount and intensity of your movement. It does *not* measure type of activity, where you are, or anything else. You will be asked to wear the activity meter for the whole day (except for times when you would be getting wet, such as during showers or when swimming) on 7 consecutive days, preferably from the time you wake up until the time you go to bed. It takes less than 1 minute to put on and take off the activity meter each day.

During the week that you wear the activity meter, you will be mailed the first survey, which takes about 45 - 60 minutes to complete. The survey asks about:

- your neighborhood, including how safe it is, what things are close to your home (such as stores), and about the sidewalks and streets around where you live

- the benefits you see and if you like being active, and how confident you are in being active
- your satisfaction with your neighborhood and your life in general
- your physical activity and sedentary habits (such as television watching)
- support you get from people around you and other information such as your gender and ethnicity.

Six months after wearing the activity meter and completing the first survey, you will be asked to wear the activity meter again for a 7-day period and complete the second survey. Your participation in this study will be done completely by mail and phone. You will be provided with information on how to contact us toll-free by telephone or through the mail. You may be contacted by study staff to remind you to return the activity meter and the surveys.

What is Experimental in this Study: None of the procedures or surveys used in this study are experimental in nature. The only experimental aspect of this study is the gathering of information for the purpose of analysis.

Risks or Discomforts: There is some potential for social embarrassment while wearing the activity meter, although the meter is small and worn underneath clothing. There are no known health risks or problems associated with wearing the activity meter. It is commonly used to get a good measure of overall movement and physical activity.

Benefits of the Study: The current information about how different aspects of neighborhoods affect quality of life and physical activity is very limited. This study will help us find out about how an individual's neighborhood affects their level of physical activity and satisfaction with life overall. This information may lead to the design of better neighborhoods. We cannot guarantee, however, that you will personally receive any benefits from participation.

Confidentiality: Information that you provide will be kept strictly confidential to the extent allowed by law. Both the activity meter and survey information you provide will be coded by number and not by name. So, every participant will be given a number and your name will not be associated with any data. This consent form will be kept separately from the survey and activity meter information that you provide. In addition, survey and meter information will be kept in locked file cabinets in our laboratories at San Diego State University (3900 Fifth Avenue, Suite 310 San Diego, CA 92103) or University of Cincinnati, Children's Hospital Medical Center (3333 Burnet Avenue, Cincinnati, OH 45229). This consent form and other study materials are also available on the study website (<http://www.nqls.org>). If you choose, you may download and print this form. However, you must mail the form with your original signature to one of the addresses above.

The study surveys can also be completed and submitted electronically. If you choose to complete the survey(s) electronically (the other options are in written form or over the telephone), a staff member will send you detailed instructions about how to access and submit the survey using our study website. The survey information you submit is routed directly to our web server, but there is a possibility that the contents may be accessed and viewed by other Internet users without your knowledge or permission while in transit to us. However, only the coded answers to the survey questions are transmitted and your name will not be associated with the survey information. Upon receipt of an on-line survey, the information will be downloaded to a secure server on location in San Diego, CA. and deleted from the NQLS web server. Only the investigators and research assistants associated with this study and the

Human Subjects Committees of San Diego State University and the University of Cincinnati, Children’s Hospital Medical Center will have access to this information. Information will be computer-entered by code number. Information from you and other participants will be combined when presenting results.

Incentives to Participate: You will be sent a \$20.00 check after you have completed the initial 7 days of wearing the activity meter and completed the first part of the survey. You will be sent a \$30.00 check after you have completed the second part of the survey and the second 7 days of wearing the activity meter. Partial compensation will not be provided for partial participation.

Voluntary Nature of Participation: Participation in this study is voluntary. Your choice of whether or not to participate will not influence your future relations with San Diego State University or the University of Cincinnati. If you decide to participate, you are free to withdraw your consent and to stop participation at any time.

Questions about the Study: If you have any questions about the research, please ask. If you have questions later about the research, you may contact Dr. James Sallis (San Diego State University) at (619) 260-5535 (toll free at 800-990-6757) or Dr. Brian Saelens (University of Cincinnati) at (513) 636-4336 (toll free at 877-684-7874). Questions can also be submitted on-line at <http://www.nqls.org> or by E-mail: nqls@projects.sdsu.edu.

If you have any questions about your rights as a participant in this study, you may contact the Division of Research Administration San Diego State University (telephone: 619-594-6622; email: irb@mail.sdsu.edu ; standard mail: 5500 Campanile Drive, San Diego, CA 92182-1643).

Consent to Participate: The San Diego State University Institutional Review Board has approved this consent form as designated by the Board’s stamp. The consent form must be reviewed annually and expires on the date indicated on the stamp. This consent form has also been approved by the University of Cincinnati, Children’s Hospital Medical Center Institutional Review Board.

Your signature below indicates that you have read the information in this document and have had a chance to ask any questions you have about the study. Your signature also indicates that you agree to be in the study and have been told that you can change your mind and withdraw your consent to participate at any time. You will be mailed a copy of this consent form.

Name of Participant (please print)

Date

Signature of Participant

Date

Signature of Investigator

Date

K. Accelerometer Introduction Letter – First Part

Dear Participant,

Thank you for participating in the Neighborhood Quality of Life Study (NQLS). We appreciate your interest and hope that your involvement will be a positive experience.

Enclosed you will find a movement meter. You will wear it for seven complete days, beginning when you wake up tomorrow morning. Here are a few things you should know:

- **Please take care of the meter. It contains valuable information that is important to our study.**
- It is not waterproof, but is water resistant. So, it should not be immersed in water, so please don't wear the meter while showering, bathing, or swimming. If it gets slightly wet, please dry it off and it should be fine.
- **When you have completed wearing the meter, please send it back as soon as possible. The meter runs on a battery, and if not returned promptly, the data will be lost.**

Also in the package, you will find a log to record the dates and times that you put on and take off the meter. Please keep the log in a place where you will see it every day (perhaps next to where you put the meter when you are sleeping), to remind you to keep track daily.

If you chose to complete the survey in writing, you will receive it in a few days. If you chose to complete the survey online, you will receive an emailed link to the beginning of the survey in a few days. When you have completed the survey and finished wearing the meter, please return everything (meter, survey, and meter log) in the enclosed stamped envelope as soon as possible. It is important that we receive your materials in a timely manner, so that we can send you your \$20 check.

We will call you in a couple of days to answer any questions you might have. If you need any assistance, please call us at our toll-free number, (1-800-990-6757) or go to our website at www.nqls.org.

Please remember to start wearing the meter tomorrow morning.

Thank you,

The NQLS Project

L. Accelerometer Introduction Letter – Second Part

Dear Participant,

Thank you for participating in the second stage of the Neighborhood Quality of Life Study!
We appreciate your help.

Enclosed you will find a movement meter. You will wear it for seven complete days, beginning when you wake up tomorrow morning. Here are a few things you should know:

- **Please take care of the meter. It contains valuable information that is important to our study.**
- It is not waterproof, but is water resistant. So, it should not be immersed in water, so please don't wear the meter while showering, bathing, or swimming. If it gets slightly wet, please dry it off and it should be fine.
- **When you have completed wearing the meter, please send it back as soon as possible. The meter runs on a battery, and if not returned promptly, the data will be lost.**

Also in the package, you will find a log to record the dates and times that you put on and take off the meter. Please keep the log in a place where you will see it every day (perhaps next to where you put the meter when you are sleeping), to remind you to keep track daily.

If you chose to complete the second survey in writing, you will find it in the package. When you have completed the survey and finished wearing the meter, please return everything (meter, survey, and meter log) in the enclosed stamped envelope as soon as possible. It is important that we receive your materials in a timely manner, so that we can send you your \$30 check.

We will call you in a couple of days to answer any questions you might have. If you need any assistance, please call us at our toll-free number, 1-800-990-6757 or go to our website at www.nqls.org.

Please remember to start wearing the meter tomorrow morning.

Thank you,

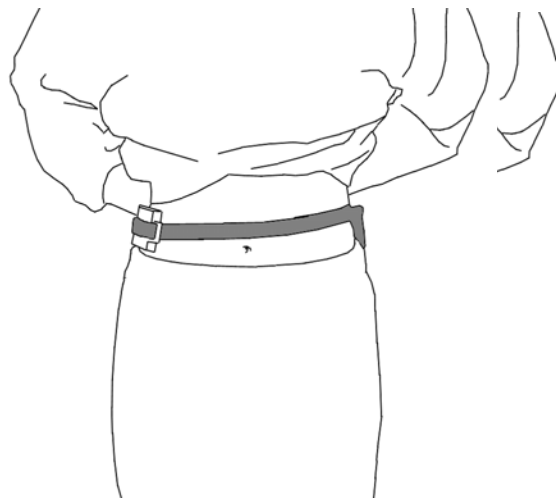
The Neighborhood Quality of Life Study

M. Accelerometer Instructions

METER INSTRUCTIONS

It is extremely important for our study that you wear the meter properly. Please follow these instructions carefully:

- Wear the meter snugly around your waist, either underneath or on top of your clothing. It should be worn just above your right hipbone. Please see the picture below.
- When wearing the meter, the edge with the imprinted serial code should point toward your feet and the edge with the small notch on the meter should point toward your head.
- The side with the label on it should be worn against your skin/clothes. The side that is blank should be facing out from your body.
- You can adjust the belt by pulling the end of the strap to make it tighter or, to loosen the belt, feed more of the strap through the loop. Please wear the belt tight enough so that the meter does not move.
- Put it on in the morning, just after getting out of bed or just after you shower/bathe. Take it off just before you go to bed at night.
- **During the next 7 days, please do not change anything about your usual activities.**
- **When you have completed wearing the meter, please send it back as soon as possible.**



N. Accelerometer Log

Wear the movement meter for seven (7) consecutive days. * In the table below, write down the dates and days on which you wear the meter. Note the times, including “a.m.” or “p.m.” that you put it on and take it off during each day. Below is a sample entry:

Date	Feb. 23, 2005	
Day	Saturday	
	On	Off
	7:30 a.m.	11:00 a.m.
	11:15 a.m.	10:45 p.m.

We have included extra spaces/rows just in case you need to take the meter off during the course of the day. If you have to take the meter off for more than 5 minutes, such as when showering, record when you take it off and put it back on.

Date														
Day														
	On	Off	On	Off	On	Off	On	Off	On	Off	On	Off	On	Off

*If you are unable to wear the meter for seven (7) consecutive days, make up the day(s) at the end of the week.

FOR OFFICE USE ONLY	Serial Number _____
Participant ID _____	Date Initialized _____

O. Online Survey Instructions Email

Hi (participant's name),

You have chosen to complete the NQLS survey online, so click on <http://www.nqls.org/nqlssurvey/login.cfm> to access the user login page.

Your information is as follows:

Username:

Password:

There are a few things to remember about completing the on-line survey. The first is that you **cannot use the back button on your internet browser** to return to most pages in the survey. If you need to modify your responses, you can use the back button **once** to return to the previous page. However, you can only return to the last page you visited. If you go back further, your answers on the pages you pass will not be saved. You will have to re-answer these items. Please review your answers carefully before hitting the submit button at the bottom of the page so you will not need to return.

The second thing to remember is that **your answers are transmitted and saved once you hit submit** at the completion of each page. If for any reason you stop the survey, you will automatically be sent to the page where you stopped the next time you login. Your answers will not be lost but you will have to complete any pages that were not submitted prior to exiting the survey.

Please feel free to contact us at 1-800-990-6757, or reply to this email, if you have any questions.

Thank you for your help and have a great day!

Sincerely,

(Recruiter's name)

Neighborhood Quality of Life Study

P. Thank You Letter - First Part

Dear (Participant's Name),

Thank you for participating in the Neighborhood Quality of Life Study! The success of our project depends on people like you, who care enough about our nation's neighborhoods to take the time and effort to participate. Your contribution, along with that of hundreds of others will provide much new information about our neighborhoods, quality of life, and health.

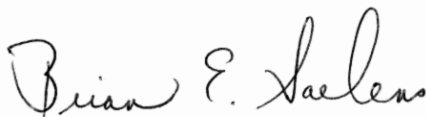
As a symbol of our appreciation, we have enclosed a \$20 check for completing the first part of the study. In six months, we will contact you for the second stage. You will wear the activity meter again and fill out a different survey. Your continued participation is crucial. It will allow us to obtain a more accurate picture of your quality of life and how you view your neighborhood. When the second part is complete, we will send you a \$30 check.

We appreciate your commitment to our project and we look forward to your continued support and participation. If you have any questions, please call us toll-free at (toll-free number).

Sincerely,



James F. Sallis, Ph.D.
Professor, San Diego State University



Brian E. Saelens, Ph.D.
Assistant Professor, University of Cincinnati


Q. Thank You Letter – Second Part

Dear (Participant's Name),

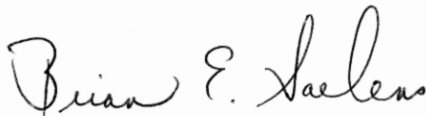
Thank you for your participation in the Neighborhood Quality of Life Study! Your contribution to our project will provide new insight into how neighborhoods are related to health and quality of life. From these findings, we are hoping to influence the planning of future neighborhoods, and provide information on how officials can improve existing neighborhoods. We have enjoyed working with you over the last few months, and we hope your participation has been a positive experience.

We have enclosed a \$30 check for completing the second half of the study. We sincerely appreciate your commitment to our project. If you have any questions, please call us toll-free at (toll-free number).

Sincerely,



James F. Sallis, PhD
Professor, San Diego State University



Brian E. Saelens, PhD
Assistant Professor, University of Cincinnati

R. Accelerometer Reward Letter

Dear (Participant's Name),

We are writing because we have not received your activity meter and survey. We have made numerous attempts to contact you by phone. The meters are very valuable to us, and other participants are waiting to wear the meter. If you have temporarily misplaced the meter, please make every effort to locate it.

To stress the importance of you getting the meter back to us, we will pay you \$50.00 to send the meter back in the enclosed envelope, regardless of whether you have worn it. If you have not yet worn the meter or filled out the survey yet, please return these items anyway, as the battery life of the meter has expired. We will continue to contact you if we do not receive the meter very soon. If you have any questions, please call us at our toll free number, 1-800-990-6757.

Thank You,

The Neighborhood Quality of Life Study

S. Hard to Reach Second Part Letter

Dear (Participant's Name),

We are writing because we have not been able to reach you by phone about the second phase of your participation in the Neighborhood Quality of Life Study. As you know, your participation during this part is similar to your participation during the first part. When you have completed the study, we will send you a check for \$30.

Please call us at our toll free number, 1-xxx-xxx-xxxx, and let us know good days and times to call you, or if there is a better phone number where you can be reached. You may also email us at nqls@projects.sdsu.edu and let us the best way to get in touch with you. We look forward to you completing your participation.

Thank You,

The Neighborhood Quality of Life Study

T. Snowball Recruitment Letter

Dear (Participant's Name),

We would like to take this opportunity to thank you again for participating in the Neighborhood Quality of Life Study! Currently, we are finishing up in Seattle and will begin studying our second city, Baltimore shortly.

We are contacting you again because we need your help. In order to complete the Seattle portion of our study, we need a few more participants from your neighborhood. We have enclosed fliers with our contact information and we're requesting that you pass these out to your friends and neighbors **(those who live within two miles of your home)** who might be interested in participating in our study. For every person you refer who consents to participate, we will send you \$5 as a token of our appreciation.

Thank you in advance for helping us reach our goal. Please call us toll-free at (800) 990-6757 if you have any questions.

Sincerely,

The Neighborhood Quality of Life Study

U. Tell Us a Story Email

Hi (Participant's Name),

I know it has been a little while since you completed your participation with the Neighborhood Quality of Life Study, but I wanted to contact you again briefly with an important request. As we wrap up the study, we are asking previous participants to share stories about their neighborhood and how their neighborhood affects their quality of life (e.g. things you like or don't like, ways in which it is similar or different from neighborhoods you have lived in before, how your quality of life is affected by living in your particular neighborhood environment.)

You were such a great participant that I thought you may be interested in helping us out by sharing your story. These excerpts will be used on our website and in publications in scientific journals and other popular media venues. Your name will be kept confidential unless you give us permission to use it. Any stories you are able to provide will further help us understand the relation of neighborhoods with mental and physical health, and quality of life; they provide us new knowledge that can be applied in the planning of future neighborhoods and improving existing ones.

You can help us out either by responding to this e-mail with your story, or you can submit your story online using this link (<http://www.nqls.org/partinput.html>). Please call our toll-free number (xxx) xxx-xxxx if you have any questions about this exciting enhancement to the Neighborhood Quality of Life Study.

Thanks in advance,

The Neighborhood Quality of Life Study

V. Tell Us a Story Survey Insert

Please tell us about your neighborhood and how it affects your health and quality of life:



Name (optional) _____

ID # _____

This information may be used in final reports, articles, and other publications.

Please check if it is OK to print your comments.