

Welcome to the STRAVA x FitrWoman Menopause Survey

Overview: You are being invited to take part in a research study. Before deciding whether you would like to take part, it is important to understand why the research is being done and what it will involve. Please read the following information carefully, if there is anything that is not clear, you do not understand, or would like more information on, please do not hesitate to ask.

Study purpose: The purpose of this study is to evaluate the menstrual history and menstrual characteristics of exercising women. It is well known that menstruation, pregnancy and menopause can affect sports performance and participation. We are looking to advance understanding in these areas.

Requirements: To participate you need to be aged 18 or over and either going through the menopause or post-menopausal. If you decide to take part, you will be required to complete a questionnaire (lasting approximately 10 minutes) about your health and exercise habits. If you are eligible and willing, you will also be invited to partake in two additional questionnaires on pregnancy (lasting approximately 4 minutes), and the menopause (lasting approximately 2 minutes).

Background: This study is a collaboration between Strava, FitrWoman and St Mary's University, Twickenham, UK. Participation is entirely voluntary. All information collected in this study will be kept strictly confidential. Please note that data will be held by a third party (Survey Monkey), who are compliant with the EU GDPR requirements. Findings from the study are likely to be presented at conferences and published in appropriate academic journals. At no point will you be identified in any publication or presentation.

For further information contact – stravasurvey@stmarys.ac.uk

In order to take part in the survey please read the following points:

I consent to participating in the above research study on the following conditions;

- I have read the participant information, have had the opportunity to ask questions and I understand what is required of me.
- I understand that my participation is voluntary, and that by initiating the questionnaire I am consenting to inclusion in this research and will not be able to withdraw.
- I understand that my personal information/data will be treated confidentially and kept in a secured place. My personal information is not to be released or revealed to anybody unless I give written consent to this. The information obtained may be used for statistical analysis but will be kept anonymous if published.

Thank you for taking the time to consider your involvement in this study.

* 1. Do you agree to the above terms and accept all the requests and regulations asked here, and therefore consent to volunteer in this research study, knowing all that it involves? You will only be able to continue with the survey by selecting 'Yes'

Yes

No

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* 2. Do you think you are currently going through the menopause (peri-menopausal)?

Yes

No

Don't know

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* 3. Do you think you are post-menopausal?

Yes

No

Don't know

* 4. How long ago do you think you started going through the menopause?

In the last 6 months

6-12 months ago

1-2 years ago

3-4 years ago

5+ years ago

* 5. Do you experience any of the following:

	Never	Occasionally	Regularly	In the past
Hot flushes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Night sweats	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vaginal dryness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low mood or anxiety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduced sex drive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problems with memory and concentration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heart palpitations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Joint stiffness, aches and pains	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduced muscle mass	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Headaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recurrent urinary tract infections (UTIs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

* 6. Have you had a menstrual period in the last 12 months?

- Yes
- No

* 7. Since you think you started to enter the menopausal period, how have your exercise behaviours changed?

- They increased
- They stayed the same
- They decreased
- I have not considered it

* 8. Have you ever received any advice around exercising during or after the menopause?

- Yes
- No
- Don't know

9. Who gave you this advice (please select all that apply)?

- Through sport (including coaches, physios etc.)
- My friends/family
- Doctor/other clinical practitioner
- Other (please specify)
- Educated myself online/reading books/magazines

* 10. What were you told to do?

- Maintain exercise levels
- Include more strength training
- Reduce exercise levels
- Reduce strength training
- Alter type of exercise
- Other (please specify)