

The Athlete PEACE Survey

Demographics

What is your age?

- ☐ 21 to 29
- ☐ 30 to 39
- ☐ 40 to 49
- ☐ 50 to 59
- ☐ 60 to 69
- ☐ 70 or older

What is your gender?

- ☐ Male
- ☐ Female
- ☐ Other - Write In: _____
- ☐ Prefer not to answer

What is your ethnicity?

- ☐ American Indian/Alaska Native
- ☐ Asian
- ☐ Black/African-American
- ☐ Hispanic/Latino
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Prefer not to answer
- ☐ Other - Write In: _____

What is your employment status?

- ☐ Full-time
- ☐ Part-time
- ☐ Unemployed
- ☐ Retired
- ☐ Student
- ☐ Other - Write In: _____

What is your highest level of education?

- ☐ Less than high school
- ☐ Graduated high school
- ☐ Trade/technical school
- ☐ Some college, no degree
- ☐ Associate degree
- ☐ Bachelor's degree
- ☐ Advanced degree (Master's, Ph.D., M.D.)

Do you have pain?

- ☐ I have had pain for 3 or more months
- ☐ I have had pain for less than 3 months
- ☐ I don't have pain

Athlete Profile

How many years have you been an athlete?

- ☐ 1-2 years
- ☐ 3-5 years
- ☐ 6-10 years
- ☐ 11-19 years
- ☐ 20 years or more

What is your primary sport/exercise?

- ☐ Swimming
- ☐ Running
- ☐ Cycling
- ☐ Triathlon
- ☐ Yoga/Pilates
- ☐ Climbing
- ☐ Spartan races
- ☐ Trail running
- ☐ Hiking
- ☐ Walking
- ☐ Strength training/gym
- ☐ Winter sports (skiing, snowboarding, snow shoeing)
- ☐ Martial arts/MMA
- ☐ Other - Write In: _____

Over the past three months, on average, how many **days per week do you exercise (include all sports that you participate in)?**

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7

Over the past three months, on average, how many **hours per week do you exercise (include all sports that you participate in)?**

- ☐ 0-5 hours
- ☐ 6-10 hours
- ☐ 11-15 hours
- ☐ 16-20 hours
- ☐ more than 20 hours

What is your athletic status?

- ☐ Professional
- ☐ Serious/competitive athlete (amateur)
- ☐ Frequent/fitness athlete
- ☐ Recreational athlete
- ☐ Other - Write In: _____

Marijuana Use

In the past two weeks, have you used marijuana (including THC and/or CBD)?

☐ Yes

☐ No

36) Why do you currently NOT use marijuana? (check all that apply)

☐ I don't need to use marijuana

☐ I don't know enough about marijuana

☐ Marijuana is not legal in my state

☐ Marijuana is not legal at my job

☐ I am scared to use marijuana

☐ I am allergic to marijuana

☐ I get sick from marijuana

☐ I consider using marijuana doping

☐ I am uncomfortable going to a dispensary

☐ I can't afford it

☐ Other - Write In: _____

Do you use marijuana medically, recreationally, or both?

☐ Medically

☐ Recreationally

☐ Both medically & recreationally

What do you primarily use THC, CBD, or both?

☐ THC

☐ CBD

☐ Both THC & CBD

☐ Other - Write In: _____

How long have you been using marijuana?

- ☐ 3 to <6 month
- ☐ 6 months to < 12 months
- ☐ 12 months to
- ☐ 3 years or more
- ☐ Not applicable
- ☐ Other - Write In: _____

How often do you use marijuana?

- ☐ 1-3 times weekly
- ☐ 4-7 times weekly
- ☐ 1-2 times per day
- ☐ More than 2 times per day
- ☐ Other - Write In: _____
- ☐ Not applicable

How do you use marijuana? (check all that apply)

- ☐ Smoke in cigarette or pipe
- ☐ Vaporizer
- ☐ Spray
- ☐ Capsule
- ☐ Oil/tincture
- ☐ Edible (cookie, candy, etc.)
- ☐ Topical (cream, ointment, patch)
- ☐ Other - Write In: _____
- ☐ Not applicable

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Have you had any negative effects from marijuana use or contact? (check all that apply)

- ☐ Respiratory (e.g. wheezing, coughing, itchy eyes, nasal symptoms)
- ☐ Cardiovascular (e.g. increased heart rate, palpitations)
- ☐ Gastrointestinal (e.g. nausea, vomiting, diarrhea)
- ☐ Skin reaction (e.g. hives, rash)
- ☐ Anxiety, paranoia, feeling uneasy
- ☐ Worse athletic performance
- ☐ Difficulty concentrating
- ☐ Increased appetite
- ☐ Other - Write In: _____
- ☐ No negative effects

Have you had positive effects from marijuana use? (check all that apply)

- ☐ Increased energy
- ☐ Helps with sleep
- ☐ Euphoria
- ☐ Calms me down
- ☐ Decreased anxiety
- ☐ Improved athletic performance
- ☐ Less pain
- ☐ Fewer muscle spasms
- ☐ Decreased nausea
- ☐ Other - Write In: _____
- ☐ No positive effects

Do you take marijuana for pain?

☐ Yes

() No