Perceptions of Health and Safety Issues for the 2016 Olympic Games in Brazil

By submitting this anonymous survey, I am consenting to participate in research assessing health and safety concerns for spectators and participants at the 2016 Olympic Games in Brazil. It is understood that the results will be reported in aggregate, there is no risk involved in completing this survey, and I may withdraw from answering questions at any time. If I wish to receive results of the survey or if I have any questions, I will contact Ms. Shi Ying (Tiffin University) at 2623431320@qq.com

1. I am or will be attending the 2016 Olympic Games in Brazil.

□Yes □No

2. If afforded the opportunity, I would prefer to watch the 2016 Rio Olympics...(Please chose one)

 \Box in person \Box through the media (television, streaming, etc)

□I have no interest in the Olympic

3. The following would discourage you from attending the 2016 Olympic Games in Brazil.

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
Zika Virus					
Contaminated Water					
Riots/Demonstrations					
Terrorism					
Street Crime					
Fear of Unknown Situations					
Passport/Visa Require					

Time/Economic Condition					
Personal Health Reasons					
Other (please specify)					
4. If you do not go to Rio to will use to focus on the G	1 1	ate in the Oly	mpics, what k	ind of me	dia you

□TV □Internet □radio □Print Media(magazines, newspapers)

5. What is the reason you are focus on the Olympic Games?

Great performance of Chinese national team

 \Box Fascination of the sports \Box Charm of athletes

□Enjoy the high level competition □Making friends

- 6. Which national team do you pay more attention to? Please list below.
- 7. What is the reason you pay attention to these national team?
 □Motherland □Strong comprehensive strength of sports
 □Athlete who is supper star, I like him/her

 \Box My favorite sports that at the top of the world \Box other

- 8. What are the most expect Olympics sports programs you want to watch?
 □Opening/Closing ceremony □Score/Basketball/Volleyball
 □Athletics □Diving/ Swimming □水上项目
 □Gymnastics □Table Tennis/Badminton □Tennis
 □Other (Please specify)
- 9. In what country do you reside?
- 10. What is your gender

□Male □Famale

11. What is your age?

□18-25 □26-35 □36-45 □46+