Research Questionnaire on Willingness and Influencing Factors of Salt-Reduction Dietary Behaviors Among Middle-Aged and Elderly (45+) Hypertensive Patients Based on the Theory of Planned Behavior

Dear Uncle/Grandfather/Aunt/Grandmother:

Greetings! This is a research questionnaire conducted by the School of Public Health at Chongqing Medical University. The study focuses on salt-reduction dietary behaviors and their influencing factors among hypertensive patients aged 45 and above. Your responses will provide valuable data and insights for research on salt-reduction awareness and behaviors in hypertension management. Please read each question carefully and answer truthfully.

This study is **anonymous**, and there are no right or wrong answers. Your honest opinions are greatly appreciated.

Informed Consent Statement

I have read this informed consent form and _____ to participate in this survey.

○ Agree to participate

○ Do not agree to participate (skip to the end of the questionnaire)

I. Basic Information

Filling Instructions: Please check "√" next to the appropriate number based on your actual circumstances and enter the relevant information in the "_____" field. Ensure no omissions occur during completion.

1. Your year of birth: _____

2. Gender: ①Male ②Female

3. Your ethnicity: ①Han Chinese ②Other ethnic group_____

4. What is your highest level of education?

①Elementary school or below

②Junior high school

③High school or technical secondary school

④College (associate degree) or above

5. What is your marital status?

①Married

②Divorced

③Unmarried

③Widowed

6. Where is your household residence located?

①Rural

②Urban

7. Who currently take care of your daily meals?

①Self

②Spouse

③Children and/or in-laws

④Other relatives
⑤Housemaid/caregiver
⑥Others

8. **What is your current occupation? (If retired, please indicate your previous industry/employer)**

①Healthcare institution
②Education-related industry
③Commerce/Service sector
④Industry/manufacturing
⑤Government agencies and public institutions (excluding medical institutions and educational institutions)
⑥Agriculture,Forestry,animal husbandry, and fisheries
⑦Other (please specify) _____

9. What is your monthly income? (Including salary, pensions, social security, family support, and government subsidies)

① <1,000 yuan
② 1,000–3,000 yuan
③ 3,001–5,000 yuan
④ 5,001–8,000 yuan
⑤ >8,000 yuan

10. Your height is _____ (unit: cm), and your most recent measured weight is _____ (unit: kg)(Please retain one decimal place, e.g., height 171.5 cm, weight 65.5 kg)

11. How many years have passed since you were first diagnosed with hypertension? _____ year.How many years have you been taking antihypertensive medication?_____ year.

12. Do you have a family history of hypertension?

① Yes
② No

13. In addition to hypertension, do you have any of the following conditions?

① Hyperlipidemia
② Diabetes
③ Coronary heart disease
④ Stroke
⑤ Other conditions
⑥ None

14. Are you currently taking traditional Chinese medicine (TCM) or Western medicine for blood pressure control?

① Traditional Chinese medicine
② Western medicine
③ Both TCM and Western medicine

15. How frequently do you smoke?

① Never smoke
② More than 5 cigarettes per day
③ 1–5 cigarettes per day
④ More than 1 cigarette per week but less than 1 per day

⑤ Less than 1 cigarette per week
⑥ Already quit smoking

16. How often do you drink alcohol?

① Every day
② 3–6 days/week
③ 1–2 days/week
④ 1–3 days/month
⑤ Less than 1 day/month
⑥ Never drink alcohol
⑦ Have quit drinking

17. Have you ever promoted low-salt diet to people around you?

① Never
② Rarely
③ Occasionally
④ Frequently

18. How often do you use low-sodium salt?

① Never
② Rarely
③ Occasionally
④ Frequently

19. When purchasing food, how often do you check the salt/sodium content on nutrition labels?

① Never
② Rarely
③ Occasionally
④ Frequently

20. How often do you use a measured salt spoon?

① Never
② Rarely
③ Occasionally
④ Frequently

II. Theory of Planned Behavior (TPB) Scale

For each statement below, the numbers represent increasing levels of agreement, where **"1"** = **Strongly Disagree** and **"5"** = **Strongly Agree**. Higher scores indicate stronger agreement. The meaning of each extreme value is clearly labeled:

1	2	3	4	5
Strongly disagree	Disagree	neutral	agree	Strongly agree

Please read each statement carefully and mark "✓" or circle "○" on the number that best represents your actual situation.

Dimension	Item	Strongly disagree	Disagree	neutral	agree	Strongly agree
Salt Reduction Dietary Intentions	INT1.I am very concerned about the					

	impact of high-salt diets on blood pressure.					
	INT2.I intend to start a low-salt diet as soon as possible.					
	INT3.I hope to maintain a low-salt diet for more than four weeks.					
perceived behavioral control of salt reduction	PBC1.I am confident that I can maintain a low-salt diet over the next 4 weeks.					
	PBC2.Whether I maintain a low-salt diet in the next four weeks depends on whether I can control my own behavior.					
	PBC3.Over the next four weeks, it will be difficult for me to follow a low-salt diet.					
attitude towards salt reduction	ATT1. If I maintain a low-salt diet, I can reduce my risk of stroke.					
	ATT2.If I maintain a low-salt diet, I can reduce my chances of developing heart disease.					
	ATT3.If I maintain a low-salt diet, my overall health will improve.					
	ATT4.In my opinion, a low-salt diet represents healthier eating habit.					
subjective norms of salt reduction	SN1. My family members advise me to maintain a low-salt diet.					
	SN2.My friends with hypertension recommend that I maintain a low-salt diet					
	SN3.My primary doctor for hypertension advises					

	me to maintain a low-salt diet.					