## **Supplementary File 2. Feedback Survey**

## Nature-based interventions for individuals with rare skeletal disorders: evaluation of a 5-day sailing program on health-related quality of life

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## **EXPERIENCE PERCEPTION**

We want to understand what your experience was and how you felt in the project.

Read the following questions carefully and answer them in the way that is most correct for you; there are no right or wrong answers!

For each question, indicate ONLY ONE answer.

## How satisfied were you with each of the following questions?

	Questions	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
1	The project was in line with your expectations	0	1	2	3	4
2	The project satisfied your needs	0	1	2	3	4
3	Sail environment	0	1	2	3	4
4	Daily activities	0	1	2	3	4
5	Adventure mates	0	1	2	3	4

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