Questionnaire S1.

Survey on spatiotemporal use patterns and health-related benefits in Huowa Lane Red-themed Pocket Park

Dear Citizens,

Greetings! I am a student from Nanjing Forestry University. To investigate the utilization status of urban pocket parks and further optimize their service for the public, we have specially designed this questionnaire. Your participation is essential for us to collect valid data, and the survey will take approximately 5 minutes to complete. This is an anonymous questionnaire. All collected data will be kept strictly confidential and used exclusively for academic research purposes.

We sincerely appreciate your time and cooperation. Thank you very much!

Section 1: Demographic Characteristics of Respondents

1.Gender: ☐Male ☐Female

2.Age: ☐Under 16 ☐16-29 ☐30-59 ☐60 and above

3.Education:

☐Junior high or below ☐High school / vocational secondary ☐College/ university ☐Master's degree or above

4.Employment status: ☐Flexible employment ☐Stable employment ☐Not employed ☐Retired

5.Residential location: ☐Local residents (within 5 km) ☐Visitors (beyond 5 km)

Section 2: Activity Characteristics of Respondents

1.Travel mode to the park: ☐Walking ☐Bicycle ☐Electric moped ☐Private car ☐Public transport

2.Visit frequency: ☐Rarely visit ☐1-2 times per week ☐3-4 times per week ☐More than 5 times per week

3.Visit date (Multiple choices allowed): ☐Weekday ☐Weekend ☐Holiday

4.Visit time (Multiple choices allowed):

☐6:00-8:00 ☐8:00-10:00 ☐10:00-12:00 ☐13:00-15:00 ☐15:00-17:00 ☐18:00-20:00

5.Length of stay in the park: ☐<0.5h ☐0.5-1h ☐1-2h ☐>2h

6.Preferred seasons to visit park (Multiple choices allowed): ☐Spring ☐Summer ☐Autumn ☐Winter

7.What are your primary activities in the park (Multiple choices allowed):

☐Entertainment activity: Dancing, singing, musical instrument performance, calligraphy, movie watching, etc.

☐Fitness related activity: Jogging, walking, rope skipping, calisthenics, martial arts (tai chi, qigong, sword dancing), stretching exercises, fitness equipment usage, ball sports (badminton, basketball), etc.

☐Leisure activity: Pet walking, sitting, chatting, reading newspapers and books, card and board games, sightseeing, people-watching, mobile phone use, photography, fishing, wading, recreational play, skateboarding, roller skating, cycling, etc.

☐Interaction oriented activity: Childcare, elderly care, group gatherings, peer play, etc.

8. Please evaluate the different types of facilities in this park:

Leisure facility	 Small plaza, Leisure benches, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never

Fitness facility	 Fitness equipment, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never
Landscape facility	 Landscape bridge, Flower border, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never
Public service facility	 Charity service station, Reading kiosk, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never

Section 3: Evaluation of Health Benefits

Please evaluate the following indicators of health benefits based on your personal circumstances and feelings after engaging in activities in the park.

	Perceived health benefit indicators	Degree of impact on you				
		No impact	Minor impact	Moderate impact	Major impact	Significant impact
Psychological health	Improve mood					
	Alleviate loneliness					
	Enhance attention					
	The overall benefit of this park for your psychological health: ☐No benefit ☐Moderate benefit ☐High benefit					
Physical health	Relieve fatigue					
	Boost energy					
	Improve physique					
	Improve sleep					
	Relieve pain					
	The overall benefit of this park for your physical health: ☐No benefit ☐Moderate benefit ☐High benefit					
Social health	Promote neighborhood harmony					
	Facilitate parent-child communication					
	Increase social willingness					
	Improve motivation					
	The overall benefit of this park for your social health: ☐No benefit ☐Moderate benefit ☐High benefit					

Questionnaire S2.

Survey on spatiotemporal use patterns and health-related benefits in Yuanmei Plaza

Dear Citizens,

Greetings! I am a student from Nanjing Forestry University. To investigate the utilization status of urban pocket parks and further optimize their service for the public, we have specially designed this questionnaire. Your participation is essential for us to collect valid data, and the survey will take approximately 5 minutes to complete. This is an anonymous questionnaire. All collected data will be kept strictly confidential and used exclusively for academic research purposes.

We sincerely appreciate your time and cooperation. Thank you very much!

Section 1: Demographic Characteristics of Respondents

1.Gender: ☐Male ☐Female

2.Age: ☐Under 16 ☐16-29 ☐30-59 ☐60 and above

3.Education:

☐Junior high or below ☐High school / vocational secondary ☐College/ university ☐Master's degree or above

4.Employment status: ☐Flexible employment ☐Stable employment ☐Not employed ☐Retired

5.Residential location: ☐Local residents (within 5 km) ☐Visitors (beyond 5 km)

Section 2: Activity Characteristics of Respondents

1.Travel mode to the park: ☐Walking ☐Bicycle ☐Electric moped ☐Private car ☐Public transport

2.Visit frequency: ☐Rarely visit ☐1-2 times per week ☐3-4 times per week ☐More than 5 times per week

3.Visit date (Multiple choices allowed): ☐Weekday ☐Weekend ☐Holiday

4.Visit time (Multiple choices allowed):

☐6:00-8:00 ☐8:00-10:00 ☐10:00-12:00 ☐13:00-15:00 ☐15:00-17:00 ☐18:00-20:00

5.Length of stay in the park: ☐<0.5h ☐0.5-1h ☐1-2h ☐>2h

6.Preferred seasons to visit park (Multiple choices allowed): ☐Spring ☐Summer ☐Autumn ☐Winter

7.What are your primary activities in the park (Multiple choices allowed):

☐Entertainment activity: Dancing, singing, musical instrument performance, calligraphy, movie watching, etc.

☐Fitness related activity: Jogging, walking, rope skipping, calisthenics, martial arts (tai chi, qigong, sword dancing), stretching exercises, fitness equipment usage, ball sports (badminton, basketball), etc.

☐Leisure activity: Pet walking, sitting, chatting, reading newspapers and books, card and board games, sightseeing, people-watching, mobile phone use, photography, fishing, wading, recreational play, skateboarding, roller skating, cycling, etc.

☐Interaction oriented activity: Childcare, elderly care, group gatherings, peer play, etc.

8. Please evaluate the different types of facilities in this park:

Leisure facility	 Leisure benches, Central plaza, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never

Landscape facility	 Flower border trail, Viewing platform, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never
Public service facility	 Charity service station, Book lounge, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never

Section 3: Evaluation of Health Benefits

Please evaluate the following indicators of health benefits based on your personal circumstances and feelings after engaging in activities in the park.

	Perceived health benefit indicators	Degree of impact on you				
		No impact	Minor impact	Moderate impact	Major impact	Significant impact
Psychological health	Improve mood					
	Alleviate loneliness					
	Enhance attention					
	The overall benefit of this park for your psychological health: ☐No benefit ☐Moderate benefit ☐High benefit					
Physical health	Relieve fatigue					
	Boost energy					
	Improve physique					
	Improve sleep					
	Relieve pain					
	The overall benefit of this park for your physical health: ☐No benefit ☐Moderate benefit ☐High benefit					
Social health	Promote neighborhood harmony					
	Facilitate parent-child communication					
	Increase social willingness					
	Improve motivation					
	The overall benefit of this park for your social health: ☐No benefit ☐Moderate benefit ☐High benefit					

Questionnaire S3.

Survey on spatiotemporal use patterns and health-related benefits in Jingming Jiayuan Pocket Park

Dear Citizens,

Greetings! I am a student from Nanjing Forestry University. To investigate the utilization status of urban pocket parks and further optimize their service for the public, we have specially designed this questionnaire. Your participation is essential for us to collect valid data, and the survey will take approximately 5 minutes to complete. This is an anonymous questionnaire. All collected data will be kept strictly confidential and used exclusively for academic research purposes.

We sincerely appreciate your time and cooperation. Thank you very much!

Section 1: Demographic Characteristics of Respondents

1.Gender: ☐Male ☐Female

2.Age: ☐Under 16 ☐16-29 ☐30-59 ☐60 and above

3.Education:

☐Junior high or below ☐High school / vocational secondary ☐College/ university ☐Master's degree or above

4.Employment status: ☐Flexible employment ☐Stable employment ☐Not employed ☐Retired

5.Residential location: ☐Local residents (within 5 km) ☐Visitors (beyond 5 km)

Section 2: Activity Characteristics of Respondents

1.Travel mode to the park: ☐Walking ☐Bicycle ☐Electric moped ☐Private car ☐Public transport

2.Visit frequency: ☐Rarely visit ☐1-2 times per week ☐3-4 times per week ☐More than 5 times per week

3.Visit date (Multiple choices allowed): ☐Weekday ☐Weekend ☐Holiday

4.Visit time (Multiple choices allowed):

☐6:00-8:00 ☐8:00-10:00 ☐10:00-12:00 ☐13:00-15:00 ☐15:00-17:00 ☐18:00-20:00

5.Length of stay in the park: ☐<0.5h ☐0.5-1h ☐1-2h ☐>2h

6.Preferred seasons to visit park (Multiple choices allowed): ☐Spring ☐Summer ☐Autumn ☐Winter

7.What are your primary activities in the park (Multiple choices allowed):

☐Entertainment activity: Dancing, singing, musical instrument performance, calligraphy, movie watching, etc.

☐Fitness related activity: Jogging, walking, rope skipping, calisthenics, martial arts (tai chi, qigong, sword dancing), stretching exercises, fitness equipment usage, ball sports (badminton, basketball), etc.

☐Leisure activity: Pet walking, sitting, chatting, reading newspapers and books, card and board games, sightseeing, people-watching, mobile phone use, photography, fishing, wading, recreational play, skateboarding, roller skating, cycling, etc.

☐Interaction oriented activity: Childcare, elderly care, group gatherings, peer play, etc.

8. Please evaluate the different types of facilities in this park:

Leisure facility	 Leisure benches, Pergola, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never

Children's facility	 Children's slide, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never
Landscape facility	 Landscape bridge, Scenic trail, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never
Public service facility	 Subway station, Public toilets, etc.	1. Do you think the quantity of facilities in this park is sufficient? ☐ Excessive ☐ Adequate ☐ Insufficient 2. How would you rate the quality of facilities in this park? ☐ Good ☐ Moderate ☐ Poor 3. Can the facilities in this park meet your health needs? ☐ Fully meet ☐ Partially meet ☐ Fail to meet 4. How frequently do you use the facilities in this park? ☐ Frequently ☐ Occasionally ☐ Never

Section 3: Evaluation of Health Benefits

Please evaluate the following indicators of health benefits based on your personal circumstances and feelings after engaging in activities in the park.

	Perceived health benefit indicators	Degree of impact on you				
		No impact	Minor impact	Moderate impact	Major impact	Significant impact
Psychological health	Improve mood					
	Alleviate loneliness					
	Enhance attention					
	The overall benefit of this park for your psychological health: ☐No benefit ☐Moderate benefit ☐High benefit					
Physical health	Relieve fatigue					
	Boost energy					
	Improve physique					
	Improve sleep					
	Relieve pain					
	The overall benefit of this park for your physical health: ☐No benefit ☐Moderate benefit ☐High benefit					
Social health	Promote neighborhood harmony					
	Facilitate parent-child communication					
	Increase social willingness					
	Improve motivation					
	The overall benefit of this park for your social health: ☐No benefit ☐Moderate benefit ☐High benefit					