# Food Smarts Workshop Pre-Workshop Questionnaire for Adults



Site Name							
<b>1. I am a</b> 🗆 Male 🗆 Female	<b>2.</b> I am		] 18-59 yea	ars 🗆 60	)+		
<b>3.</b> Please check one group that describes you. If tw	vo describe y	ou, c	heck both:				
White, not Hispanic Native American/Alaska, not Hispanic							
□ White, and Hispanic/Latino □ Native American/Alaska and Hispanic							
□ Hispanic/Latino	🗆 Hawai	ian N	lative/Paci	fic Islander			
African American, <b>not</b> Hispanic/Latino	🗆 Asian						
□ African American <b>and</b> Hispanic/Latino	□ Other						
<b>4.</b> Read each statement and select the best answe	r to describe	vour	shopping	habits. I kn	ow how to	:	
- a) Read a label for nutrition information					No		
b) Use a grocery list when I shop				Yes 🗆	No		
c) Avoid foods with added fats, salt and suga	r			Yes 🗆	No		
d) Look for 100% whole grain foods				Yes 🗆	No		
e) Shop the perimeter of the grocery store; av	void center ai	sles		Yes 🛛	No		
<b>5.</b> What you eat can make a difference in your chan □ Disagree □ Not Sure □ Agree	nces of gettii	ng he	eart diseas	e or cancer			
<b>6.</b> I will have more energy if I eat fruits and vegetal	bles		🗆 Disagre	ee □ No	ot Sure	□ Agree	
7. I will get sick more often if I don't eat fruits and v	vegetables		🗆 Disagre	ee □ No	ot Sure	□ Agree	
8. Eating fruits and vegetables may help me manage	ge my weight		🗆 Disagre	ee □ No	ot Sure	□ Agree	
<b>9.</b> When shopping at the grocery store, how often	do you:						
	Nev	er	Rarely	Sometimes	Most of the Time	All of the Time	
Read a label for nutrition information							
Use a grocery list when you shop							
Avoid foods with added fats, salt and sugar							
Look for low-fat dairy products							
Look for 100% whole grain foods							
Shop the perimeter of the grocery store; avoid cente aisles	r						

#### **10.** How often do you:

	Never	Rarely	Sometimes	Most of the Time	All of the Time
Eat more than one kind of fruits daily?					
Eat more than one kind of vegetable daily?					
Eat fruits and vegetables as snacks?					
Eat green salad					
Drink water from a glass, a bottle, or a water fountain?					
Drink sugary beverages (soft drinks, energy drinks, sweetened tea, juice, sweetened coffee drinks)					

### **11.** During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time)

## **12.** On average, how many hours do you watch television, play video games or computer games or use a computer or smartphone for something that is not work/school/homework?

(Include activities such as Xbox, PlayStation, Nintendo DS, iPod touch, Facebook, and the Internet)

<ul> <li>I do not watch television, play vide or use a computer or smartphone for work/school/homework</li> <li>Less than 1 hour per day</li> </ul>	0	, ,	-	<ul> <li>2 hours per day</li> <li>3 hours per day</li> <li>4 hours per day</li> <li>5 or more hours per day</li> </ul>		
🗆 1 hour per day						
<b>13.</b> Would you say your general health is:	□ Poor	🗆 Fair	□ Good	□ Very Good	□ Excellent	

**14.** Now think about your physical health, which includes physical illness and injury, for how many days during the past 14 days was your physical health not good?

**15.** Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 14 days was your mental health not good? .....

**16.** In the last 14 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

**17.** In the last 14 days, for about how many days have you felt you did NOT get ENOUGH REST or SLEEP? ......

**18.** In the last 14 days, for about how many days have you felt VERY HEALTHY AND FULL OF ENERGY? ......

**19.** "The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more." Was that often, sometimes, or never true for (you/your household) in the last 12 months?

□ Often true □ Sometimes true □ Never true □ Don't Know

20. "(I/we) couldn't afford to eat balanced meals."
 Was that often, sometimes, or never true for (you/your household) in the last 12 months?
 □ Often true
 □ Sometimes true
 □ Never true
 □ Don't Know

21. In the last 12 months, were you every hungry but didn't eat because there wasn't enough money for food?
 □ Yes □ No □ Don't Know

# Food Smarts Workshop Post-Workshop Questionnaire for Adults



Site Name				
<b>1.</b> I am a 🗆 Male 🗆 Female	<b>2.</b> I am	□ 18-59 years	□ 60+	
3. Please check one group that describes you. If tw	vo describe you,	check both:		
White, not Hispanic	🗆 Native Ar	nerican/Alaska, <b>n</b>	<b>ot</b> Hispanic	
White, and Hispanic/Latino	Native Ar	nerican/Alaska <b>aı</b>	<b>nd</b> Hispanic	
□ Hispanic/Latino	🗆 Hawaiian	Native/Pacific Isl	ander	
□ African American, <b>not</b> Hispanic/Latino	🗆 Asian			
African American and Hispanic/Latino	□ Other		• • • • • • • • • • • • • • • • • • • •	• •
4. Read each statement and select the best answe	r to doscribo vo	ur chonning habit	s I know how	to
a) Read a label for nutrition information	r to describe you	ur shopping nabit □ Yes		
b) Use a grocery list when I shop		□ Tes	□ No	
c) Avoid foods with added fats, salt and suga	r	□ Yes		
d) Look for 100% whole grain foods	1	□ Yes		
e) Shop the perimeter of the grocery store; as	unid conter aisles			
5. What you eat can make a difference in your cha	nces of getting l	neart disease or c	ancer	
□ Disagree □ Not Sure □ Agree				
6. I will have more energy if I eat fruits and vegetal	bles	□ Disagree	□ Not Sure	□ Agree
7. I will get sick more often if I don't eat fruits and	vegetables	🗆 Disagree	□ Not Sure	□ Agree
0				
8. Eating fruits and vegetables may help me managed	ge my weight	□ Disagree	□ Not Sure	□ Agree
O During the next 7 days on her means days	مر بمامرون مالير مع	ive few e tetal of a		too nor dow?
<b>9. During the past 7 days, on how many days were y</b> (Add up all the time you spent in any kind of physical activity				

------

### **10.** Over the past SEVEN days, when shopping at the grocery store, how often did you:

	Never	Rarely	Sometimes	Most of the Time	All of the Time
Read a label for nutrition information					
Use a grocery list when you shop					
Avoid foods with added fats, salt and sugar					
Look for low-fat dairy products					
Shop the perimeter of the grocery store; avoid center aisles					

#### **11.** Over the past SEVEN days, when eating, how often did you:

	Never	Rarely	Sometimes	Most of the Time	All of the Time
Eat more than one kind of fruits daily?					
Eat more than one kind of vegetable daily?					
Eat fruits and vegetables as snacks?					
Eat green salad					
Drink water from a glass, a bottle, or a water fountain?					
Drink sugary beverages (soft drinks, energy drinks, sweetened tea, juice, sweetened coffee drinks)					

## **12.** On average, how many hours do you watch television, play video games or computer games or use a computer or smartphone for something that is not work/school/homework?

(Include activities such as Xbox, PlayStation,	Nintendo DS, iPod t	ouch, Faceboo	k, and the Interr	iet)	
$\Box$ I do not watch television, play v	•	□ 2 hours per day			
or smartphone for something that	ework 🛛	<ul> <li>A hours per day</li> </ul>			
$\Box$ Less than 1 hour per day				4 hours per day	
□ 1 hour per day				5 or more hours p	per day
<b>13.</b> Would you say your general health	is: 🗆 Poor	🗆 Fair	□ Good	□ Very Good	□ Excellent

14.	Now think about your physical health, which includes physical illness and	l injury,
for ho	ow many days during the past 14 days was your physical health not good?	

**15.** Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 14 days was your mental health not good? .....

**16.** In the last 14 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

**17.** In the last 14 days, for about how many days have you felt you did NOT get ENOUGH REST or SLEEP? ......

**18.** In the last 14 days, for about how many days have you felt VERY HEALTHY AND FULL OF ENERGY? ......

**19.** Have you prepared a workshop recipe at home?  $a \square \text{No}$   $b \square \text{No}$ , but I plan to make one  $c \square \text{Yes}$ , once  $d \square \text{Yes}$ , more than once

If **b**, **c**, or **d**. Please share which recipe(s) you made or plan to make!

**20.** "The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more." Was that often, sometimes, or never true for (you/your household) in the last 3 months?

□ Often true □ Sometimes true □ Never true □ Don't Know

<b>21.</b> "(I/we) couldn't afford to eat ba	alanced meals."	Was that often, somet	imes, or never tru	ue for (you/your
household) in the last 3 months?	🗆 Often true	Sometimes true	□ Never true	🗆 Don't Know

22. In the last 3 months, were you every hungry but didn't eat because there wasn't enough money for food?
 □ Yes □ No □ Don't Know