

Serial	Date	LOTTERY FUNDED		Location			
Real Food Wythens	hawe	Baseline Quest	tionnaire				
Thank you for agreeing to be are asking people across W health, so that we can plan fresh, healthy foods and ch	ythensh the rig	nawe to tell us about ht kind of activities t	t the foods th	• •			
Please tick if you live in	Wythe	nshawe					
Please tick if you have answered a RFW questionnaire before							
Food shopping							
1) On average, where	e do yo	u buy the followir	ng types of	food? (Tick all that apply)			

	Supermarket (Tesco, Asda, Morrison's, Sainsbury's) (1)	Value Supermarket (Aldi, Lidl, Nisa) (2)	Market stall or specialist shop (fruit and veg stall, butcher, baker) (3)	General shop (One shop, poundshop, B&M) (4)	Other (Foodbank, vegbox scheme, milkman) (5)	Don't buy/eat this (6)
Fruit and						
vegetables						
Meat						
Fish						
Eggs						
Milk and dairy						
Bread						
Dry goods (tins,						
rice, pasta)						

Growing your own

2) In the last 2 years have you grown your own fruit and vegetables at any of the following places? (Tick all that apply)

	Yes	Where (give name if applicable)
Allotment		
School		
Community Garden		
Own garden/windowsill		
Other,		
please specify		



3) If you answered 'No' to all of question 2.

Real Food. Wythenshawe.

Is there anything stopping you from getting involved with growing your own food? (Tick all that apply) No space to grow at home \Box_1 No time \square_2 Allotment waiting list \square_3 Lack of skills/knowledge \square_4 Health problems Cost \Box_6 No Interest \square_7 Other, please specify [Go to question 6] 4) If you answered 'Yes' to any of question 2. Do you use chemical pesticides, herbicides and fertilisers in your growing activities? (Tick one box) Yes \square_1 No □2 5) Are you interested in learning about more environmentally friendly growing methods? (Tick one box) Very interested \square_1 Would like to know a bit more \square_2 No opinion \square_3 Definitely not interested \square_4 No - Already qualified \square_5



Eating seasonal and local foods

Yes \square_1 No \square_2

F	Prompts for interviewer if needed					
t c	Local food: There is no strict definition of local food, but in Wythenshawe it would generally be categorised as being <u>produced</u> (i.e. grown or reared) within Greater Manchester, Cheshire or Lancashire (30-50 miles). It can apply to meat, dairy, fruit and veg or even bread, and will often be labelled to say where it is from.					
y t	Seasonal foods are those which can generally only be produced in the UK at certain times of year, for example tomatoes and strawberries in summer, apples in autumn and parsnips, turnips and other root veg in winter. "Seasonal" is mainly about fruit and veg, but some meat can also be seasonal such as game. Most locally grown fruit and veg will be seasonal.					
-	In a typical week, do you <u>deliberately</u> buy any of th you make a conscious effort to buy any of the follow (Tick all that apply)	_	This means that			
Loc	cally produced meat, dairy or vegetables (see definition)		\square_1			
Sea	asonal fruit and vegetables (see definition)		\square_2			
Org	ganic meat, dairy or vegetables		\square_3			
Foo	d waste					
	What sorts of foods are most likely to be wasted in ck up to 3 items from the list below)	your home?				
Cook Raw		$ \begin{array}{c} \square_1 \\ \square_2 \\ \square_3 \\ \square_4 \\ \square_5 \\ \square_6 \end{array} $				

8) Do you compost or use your compost caddy for any of your food waste?



9) If there is a large amount of packa it? (Tick one box only)	ging on an item, wo	ould it put you of	ff b
Yes	\square_1		
No	\square_2		
Eating more fruit and vegetables			
10) Please name the five main fruit an household each week:	d vegetables that a	re eaten by your	
	4)		
	5)		
11) On a typical day, how many portion includes fruit and vegetables that he vegetables in a stir-fry). (Tick one be A portion is an apple, a glass of fresh fruit speedful of vegetables. Generally the amount of vegetables.	ave been eaten as pox only) juice or a large		
A portion is an apple, a glass of fresh fruit spoonful of vegetables. Generally the amore can fit in the palm of your hand The recommended 5 portions a day	ave been eaten as pox only) juice or a large		
A portion is an apple, a glass of fresh fruit spoonful of vegetables. Generally the amount can fit in the palm of your hand	juice or a large ount of F&V you		
A portion is an apple, a glass of fresh fruit spoonful of vegetables. Generally the amount can fit in the palm of your hand The recommended 5 portions a day or more 1-4 portions a day None	juice or a large ount of F&V you	part of meals (e.g.	
A portion is an apple, a glass of fresh fruit spoonful of vegetables. Generally the amount can fit in the palm of your hand The recommended 5 portions a day or more 1-4 portions a day	juice or a large ount of F&V you	oart of meals (e.g.	



Eating less red meat and more white meat

13) How many times per week do you use the following foods as the main part of the meal?

		0	1	2	3	4	5	6	7
Red Meat	Breakfast								
(Beef, Lamb)	Lunch								
	Tea								
White Meat	Breakfast								
(Chicken, Turkey, Pork)	Lunch								
	Tea								
Fish	Breakfast								
	Lunch								
	Tea								
Meat-free	Breakfast								
	Lunch								
	Tea								

Cooking from scratch

A **Cooked from Scratch** meal is any meal made from fresh, basic ingredients, e.g. raw meat or fish and fresh fruit/vegetables (rather than tinned or frozen)

14) In a typical week, how many times do you eat any of the following?

	Less	1-2	3-4	5-6	7+
	than	times	times	times	times
	once				
"Ready" prepared meals to heat in a					
microwave or oven					
Takeaways or other "fast" food					
A "cooked from scratch" meal at home					
College or staff canteen					
A meal at a community centre or with					
other group					
A meal at a café or restaurant					
A meal with friends or family					



Are you responsible for

Unhealthy

Very Unhealthy

LOTTERY FUNDED buying or preparing any of your own food? (Tick the one which most applies to your circumstances) Buy and cook for myself and others Buy and prepare food for myself only \square_2 Buy food but not generally involved in cooking \square_3 Don't buy but prepare some of my own meals \prod_{λ} All my food is provided/prepared by others (e.g. parents or carers) 16) Are you interested in learning to cook any of the following? (Tick all that apply) Soups \square_1 **Bread** \square_2 Healthy main dishes One-pot cooking Cooking for kids Cooking on a budget \Box_6 Cooking for one \square_7 Basic cookery skills \square_8 Preserving food (jams/chutneys etc) No - I already know how \square_{10} Lifestyle and wellbeing How would you rate your health over the last 6 months? (Tick one box only) **17**) Very Good \Box_1 Good \square_2 **Average** \square_3 Poor Very Poor 18) How would you describe your lifestyle over the last 6 months? Please take into consideration things like the foods you eat, the amount of alcohol you drink, and whether you smoke or take regular exercise. (Tick one box only) Very Healthy \Box_1 Healthy \square_2 Average

 $\square_{\mathbf{4}}$



(Tick one box)	nvironment when choc	osing what loods to buy!	
Yes, a lot		\square_1	
Quite often		\square_2	
Occasionally		\square_3	
Never		\square_4	
Don't understand what "damage to e	nvironment" means	\square_5	
20) Do you understand that there is damage to the environment? (Tick o		od that we choose to eat a	and
Yes	\Box_1		
No	\square_2		



About you

First name Surname					
Home telephone					
Mobile telephone _ Email address				<u> </u>	
Address					
Postcode					
Number in the hous	sehold				
Gender [Please tick Male		1 1 1	Female.		2
Ethnicity [Please tic	k one box onl	[y]			
White – British		Mixed ethnic background	□ 5	Black – African	1 1
White – Irish White – Gypsy or Ir Traveller	ish 🔲 :	₂ Asian – Indian	□ 6 □ 7	Black – Caribbean Black – Any other Black/African/Caribbean	☐ 12 ☐ 13
White – Any other v background	vhite 🔲 .	4 Asian – Banglade	shi 🔲 ₈		1 4
background		Asian – Chinese Asian – Any other Asian background		Other – Any other Prefer not to say	☐ 15 ☐ 16
Do you consider y	ourself to h	nave a disability? [Ple	ease tick o		
Yes		No		 Prefer not to say 	



Age group [Please tick one box only]

0-4 🔲 ₁	5-9 □ ₂	10-14 ₃
15-19 ₄	20-24 ₅	25-34 _ ₆
35-44 7	45-54 ₈	55-64 _ 9
65-74 ₁₀	75-84 ₁₁	85+ ₁₂

Religion or belief [Please tick one box only]

Sexual orientation [Pl	ease tick one box only]		
Muslim	☐ ₇ Sikh	Other religion	9
Buddhist	🔲 ₄ Hindu	5 Jewish	□ 6
Prefer not to say	No religion	Christian	□ 3

Prefer not to say	1	Heterosexual	□ 2	LGBT	3
				(Lesbian/Gay/Bis	sexual/Tra
				nsgender)	

