

CREATE HEALTHY GARDENS PRE SURVEY

Use at the beginning of the **first** class of a series.



Please take a few minutes to answer the following questions. All responses are confidential, and there are no right or wrong answers to any questions in this survey. The information you provide will help us improve our program and be accountable to SNAP-Ed funders.

1. Write your initials, birth month (2-digit), and birth day (2-digit) below.

For example, if your name were John Doe and your birthdate were May 1, you would write:

First letter of first name: J First letter of last name: D Birth month: 05 Birth day: 01

First letter of first name: _____ **First letter of last name:** _____ **Birth month:** _____ **Birth day:** _____

2. How did you hear about the Create Better Health (SNAP-Ed) program?

- Social media
- Friends or family
- Community organization
- Flyers or poster
- Health department
- USU Extension calendar
- Other, please explain: _____

3. How many Create Better Health (SNAP-Ed) classes have you attended this year? (including this one)

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8 or more

4. How long have you been gardening?

- This is my first time.
- 1-3 years
- 4-6 years
- 7-9 years
- 10+ years

For the following questions, consider what you have done during the past 30 days and select the best answer to describe what you typically do.

5. How many times a day do you eat fruit?

(Include fresh, frozen, dried and canned. Do not include juice.)

- I rarely eat fruit
- Less than 1 time a day (couple times a week)
- 1 time a day
- 2 times a day
- 3 times a day
- 4 or more times a day

6. How many times a day do you eat vegetables?

(Include fresh, frozen, dried and canned. Do not count french fries or potato chips.)

- I rarely eat vegetables
- Less than 1 time a day (couple times a week)
- 1 time a day
- 2 times a day
- 3 times a day
- 4 or more times a day

7. How many different kinds of vegetables do you usually eat a day?

- I rarely eat vegetables
- 1 kind a day
- 2 kinds a day
- 3 kinds a day
- 4 or more kinds a day

8. How much do you agree or disagree with the following statements?	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know what types of fruits and vegetables grow well in my community.	○	○	○	○	○
I feel confident I can plant a seed that will grow into a fruit or vegetable.	○	○	○	○	○
I know when a fruit or vegetable is ready to pick.	○	○	○	○	○
I know how to prepare garden fresh fruits or vegetables.	○	○	○	○	○
I enjoy gardening.	○	○	○	○	○
My family enjoys gardening (if applicable).	○	○	○	○	○

9. In the past 12 months, how many months did anyone in your household receive benefits from a federal food assistance program? (SNAP, WIC, free and reduced lunch program, or any other federal food assistance program)

- All months
 Some months
 Never

10. The next section has statements people have made about their food situation. Choose the answer that best fits your food situation over the last 30 days.	Often true	Sometimes true	Never true	Don't know
The food that I bought just didn't last, and I didn't have money to get more.	○	○	○	○
I couldn't afford to eat balanced meals.	○	○	○	○

11. Over the last 30 days, did you ever cut the size of your meals or skip meals because there wasn't enough money for food?

- Yes
 No
 Don't know

12. What do you think will make it difficult for you to follow MyPlate recommendations for nutrition and physical activity? Select all that apply.

- It is hard to find all food groups from MyPlate.
 It is hard to find safe places to exercise.
 The convenience and marketing of less healthy food options.
 It is difficult to know what food to choose when shopping.
 It is difficult to know how to prepare healthy food.
 It will not be difficult to follow MyPlate recommendations.
 Other, please describe: _____

13. What is your household size?

Number of adults (18 years or older) _____

Number of children (17 years or younger) _____

14. Please select the following options that best represent you.

Gender

- Female
- Male
- Non-binary
- Prefer not to respond
- Gender not listed

Age

- 18-59 years
- 60-74 years
- 75+ years
- Prefer not to respond

Ethnicity

- Hispanic
- Non-Hispanic
- Prefer not to respond

Race (select all that apply)

- American Indian/Alaskan Native
- Asian
- Black/African American
- Native Hawaiian or other Pacific Islander
- White
- Prefer not to respond

Are you willing to take a follow-up survey in 6 months to be entered in a drawing for a \$250 prize?

- Yes
- No

Are you willing to take a follow-up survey in 1 year to be entered in a drawing for a \$250 prize?

- Yes
- No

Are you interested in receiving our free Create Better Health Utah Newsletter?

- Yes
- No

If you answered yes to any of the above questions, please clearly write your email address.

Email: _____



For Office Use Only

Ambassador Name: _____ **Lesson:** _____

Location: _____

