

HEAL Winchendon Food Survey

Healthy Eating Active Living Winchendon is sharing this survey to learn about people's habits and preferences around food. We are interested in this information because we want to create a new place, called a food hub, to help you and your family get healthy, local, affordable food. The information you provide in this survey will inform our planning of the food hub. If you have any questions or concerns, please contact

daniel@growingplaces.org. Completed surveys can be dropped off at: the Winchendon Senior Center (c/o Sheila Bettro); the Clark Memorial YMCA (c/o Marissa Mannion-King); the Town of Winchendon at 109 Front Street (c/o Tracy Murphy); or mailed to Growing Places at 325 Lindell Ave, Leominster, MA 01453.

1. What is your age?

- | | |
|--|---|
| <input type="checkbox"/> 18-29 years old | <input type="checkbox"/> 70-79 years old |
| <input type="checkbox"/> 30-44 years old | <input type="checkbox"/> 80-89 years old |
| <input type="checkbox"/> 45-54 years old | <input type="checkbox"/> 90 years or older |
| <input type="checkbox"/> 55-69 years old | <input type="checkbox"/> Prefer not to answer |

2. What racial or ethnic category best describes you?

- | | |
|---|--|
| <input type="checkbox"/> Prefer not to answer | <input type="checkbox"/> Native American or Alaska Native |
| <input type="checkbox"/> White | <input type="checkbox"/> Middle Eastern or Northern African |
| <input type="checkbox"/> Hispanic, Latino, or Spanish | <input type="checkbox"/> Native Hawaiian or other Pacific Islander |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Asian | |

3. Including yourself, how many people live in your household?

- Number of children under 18: _____
- Number of adults 18 – 64: _____
- Number of adults 65 and older: _____

4. What is your annual household income?

- | | |
|--|---|
| <input type="checkbox"/> Less than \$20,000 | <input type="checkbox"/> \$60,000 - \$69,999 |
| <input type="checkbox"/> \$20,000 - \$29,999 | <input type="checkbox"/> \$70,000 or higher |
| <input type="checkbox"/> \$30,000 - \$49,999 | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> \$50,000 - \$59,999 | |

5. How much money do you typically spend on food each week, including at restaurants/fast food restaurants/grocery stores/convenience stores)?

- ☐ \$0 - \$50
- ☐ \$50 - \$100
- ☐ \$100 - \$200
- ☐ \$200 - \$300
- ☐ \$300+

6. What payment methods do you use to pay for food at the grocery store? (Choose all that apply.)

- ☐ Cash
- ☐ Check
- ☐ EBT/Food Stamps
- ☐ WIC
- ☐ Credit Card/Debit Card
- ☐ Other: _____

7. Where do you typically purchase or get your food? (Choose all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Market Basket | <input type="checkbox"/> Cumberland Farms |
| <input type="checkbox"/> Price Chopper | <input type="checkbox"/> Meals on Wheels |
| <input type="checkbox"/> Hannaford | <input type="checkbox"/> Farmers Market |
| <input type="checkbox"/> Walmart | <input type="checkbox"/> Winchendon CAC |
| <input type="checkbox"/> Dollar Store | <input type="checkbox"/> Not Just Produced |
| <input type="checkbox"/> Fast Food Restaurants | |
| • Which fast food restaurants do you go to? _____ | |
| _____ | |
| <input type="checkbox"/> Takeout Restaurants | |
| • Which restaurants do you get takeout from? | |
| _____ | |
| _____ | |
| <input type="checkbox"/> Other: | _____ |

8. How do you get to these places? (Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> I drive | <input type="checkbox"/> I take MRTA |
| <input type="checkbox"/> A friend/family drives me | <input type="checkbox"/> Home health aides do food shopping |
| <input type="checkbox"/> I walk | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> I take a cab | |

9. What would make it easier for you to get food you want to eat? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Delivery service | <input type="checkbox"/> Convenient public transportation |
| <input type="checkbox"/> Pre-prepped produce | <input type="checkbox"/> Convenient store hours |
| <input type="checkbox"/> Closer to my house | <input type="checkbox"/> Other (e.g. others to shop with): |
| <input type="checkbox"/> Lower food prices | _____ |
| <input type="checkbox"/> Knowing how to prepare it | |

10. If you could pick up groceries and prepared food from anywhere in town (e.g., community center, store, church, park, etc.), where would you want that to be?

11. If you could pick up healthy, prepared meals from the location you mentioned in question 9, how often would you buy it?

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Never | <input type="checkbox"/> Once a week |
| <input type="checkbox"/> Once a month | <input type="checkbox"/> Multiple times a week |

12. How much would you be willing to pay per person for a healthy, prepared meal?

13. At home, what equipment do you have to prepare meals? (Check all that apply.)

- | | | |
|------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Stove | <input type="checkbox"/> Toaster oven | <input type="checkbox"/> Cook top/hot plate |
| <input type="checkbox"/> Oven | <input type="checkbox"/> Grill | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Microwave | <input type="checkbox"/> Refrigerator | <input type="checkbox"/> Other _____ |

14. Which of this equipment do you use most often?

15. How would you describe your cooking skills?

- ☐ Poor - I do not have many cooking skills
- ☐ Good - I can make a few dishes
- ☐ Great - I can cook most meals I want to eat
- ☐ Excellent – I could be hired as a chef

16. Do you have a desire to cook?

- ☐ Yes ☐ No
- ☐ Sometimes

17. Who do you eat with on a typical night? (Check all that apply.)

- ☐ Family ☐ No one
- ☐ Friends ☐ Other _____
- ☐ Coworkers

18. Have you ever been told you need to modify your diet because of a health issue?

- ☐ Yes ☐ Prefer not to answer
- ☐ No

19. Do you have dietary restrictions? If so, please list them (optional):

20. Certain medical conditions may cause people to change their diets. Please check any of the following that you have been told you have:

- ☐ Heart disease
- ☐ Diabetes
- ☐ Celiac disease, gluten sensitivity
- ☐ Digestive issues, please describe any changes to your diet because of these issues:

- ☐ None
- ☐ Prefer not to answer

21. Rank your top 3 values you consider when purchasing food, with 1 being the most valuable. Answer by writing #1, #2, and #3. Select only one option per number:

- | | |
|----------------------------|---------------------------------------|
| ___ Local | ___ Variety |
| ___ Organic | ___ Distance to your home/convenience |
| ___ Fresh and high quality | ___ Other _____ |
| ___ Low price | |

Please use the charts below to tell us about the food you and your household buy. Use a (✓) check mark to indicate which foods you currently buy (including seasonal and irregular purchases), which foods you would buy if they were easier to get or more affordable, and which foods you do not wish to purchase.

CATEGORY	ITEM(s)	INCLUDES	I/my household buy this (✓Check)	I/my household do not buy this, but would if it were easier to get or more affordable (✓Check)	I/my household do not wish to purchase this (✓Check)
FRESH FRUIT	APPLES				
	BANANAS				
	BERRIES	blackberries, blueberries, raspberries, strawberries			
	CITRUS FRUIT	clementines, grapefruit, lemons, limes, oranges			
	GRAPES	red and green			
	MELONS	cantaloupe, honeydew, watermelon			
	PEARS				
	STONE FRUIT	apricots, cherries, nectarines, peaches and plums			
	TROPICAL FRUIT	avocados, coconut, dates, kiwi, mango, papaya, pineapple and pomegranate			
PROCESSED FRUIT	CANNED FRUITS	applesauce, pineapple, fruit cups			
	FROZEN FRUITS	frozen berries			
	DRIED FRUIT	banana chips, cranberries, pineapples, raisins			

CATEGORY	ITEM(s)	INCLUDES	I/my household buy this (✓Check)	I/my household do not buy this, but would if it were easier to get or more affordable (✓Check)	I/my household do not wish to purchase this (✓Check)
FRESH VEGETABLES	ARTICHOKE				
	ASPARAGUS				
	BROCCOLI				
	BRUSSELS SPROUTS				
	CAULIFLOWER				
	CABBAGE	Chinese cabbage, green cabbage, red cabbage, savoy cabbage			
	CARROTS				
	CELERY				
	CORN				
	CUCUMBERS				
	EGGPLANT				
	FENNEL				
	GARLIC				
	GINGER ROOT				

	GREEN OR WAX BEANS				
	GREENS, LETTUCE	green leaf lettuce, iceberg lettuce, red leaf lettuce, romaine lettuce, radicchio, spring mix			
	GREENS, OTHER	arugula, beet greens, bok choy, collard greens, kale, spinach, Swiss chard			
	LEEEKS				
	MUSHROOMS	baby bella, portabella, shiitake, white button, and wild mushrooms			
	OKRA				
	ONIONS	boiling, green onions/scallions, red, shallots, yellow, and vidalia			
	PEAS	sugar snap peas and snow peas			
	RADISHES				
	RHUBARB				
	PEPPERS	cubanelle, chile, green bell, habanero, orange bell, poblano, red bell, serrano, yellow bell			
	POTATOES	fingerling, red, russet, sweet, white, yellow			
	PUMPKINS / WINTER SQUASH	acorn squash, buttercup squash, butternut squash, rutabaga, spaghetti squash and turnip			
	SUMMER SQUASH	yellow and zucchini			
	TOMATOES	beefsteak, cherry, grape, heirloom, plum and tomatillo			
PROCESSED VEGETABLES	CANNED VEGETABLES				
	FROZEN VEGETABLES				
HERBS (FRESH OR DRIED)	BASIL				
	CHIVES				
	CILANTRO				
	DILL				
	LEMONGRASS				
	MARGORAM				
	MINT				
	OREGANO				
	PARSLEY				
	SAGE				
	TARRAGON				
	THYME				

CATEGORY	ITEM	INCLUDES	I/my household buy this (✓Check)	I/my household do not buy this, but would if it were easier to get or more affordable (✓Check)	I/my household do not wish to purchase this (✓Check)
GRAINS	WHEAT FLOUR	all-purpose white, whole wheat, bread, Gluten-free flour mix			
	CORNMEAL				
	RICE	brown, white			
	PASTA	egg noodles, macaroni, spaghetti, penne, couscous			
	BREAD	sliced, hamburger buns, hot dog rolls, bulkie rolls, bagels, baguette, wraps, pita pockets, English muffins, pizza crust			
	CEREAL	dry (e.g., Cheerios), oatmeal, hot cereal (e.g., Cream of Wheat), granola			
	CRACKERS				

CATEGORY	ITEM	INCLUDES	I/my household buy this (✓Check)	I/my household do not buy this, but would if it were easier to get or more affordable (✓Check)	I/my household do not wish to purchase this (✓Check)
FATS, SEASONINGS & MISC.	OIL	olive, canola, vegetable, coconut, sprays, shortening			
	KETCHUP				
	MUSTARD				
	MAYONNAISE				
	BBQ SAUCE				
	JELLY				
	HONEY				
	PICKLES				
	SALSA				
	PASTA SAUCE				
	OLIVES				
	HOT CHOCOLATE				
	TEA				
	COFFEE				
	BAKING NEEDS	baking powder, baking soda, yeast, cornstarch			

CATEGORY	ITEM	INCLUDES	I/my household buy this (✓ Check)	I/my household do not buy this, but would if it were easier to get or more affordable (✓ Check)	I/my household do not wish to purchase this (✓ Check)
MEAT	PROCESSED MEATS	bacon, hotdogs, sausages, kielbasa			
	BEEF	burger patties, ground beef, chuck steaks, roasts, cube and stew beef, loin			
	CHICKEN	whole, breast, tenders, quarters, thighs, drumsticks, and wings			
	TURKEY	whole, sliced, and ground			
	PORK	ham steaks, sliced ham, pork butt, ribs, pork chops, tenderloin, roasts, and			
	LAMB				
	BISON / BUFFALO				
SEAFOOD	FRESH FISH	salmon, tilapia, mahi mahi, tuna steaks, haddock, swordfish			
	SHELLFISH	scallops, lobster, oysters, mussels, clams			
	SHRIMP				
	CANNED FISH	tuna, sardines, anchovies			
PLANT-BASED	BEANS	black, black-eyed peas, cannellini, garbanzo/chickpeas, kidney, lima and pinto			
	TOFU				
	PEANUT BUTTER				
	ALMOND BUTTER				
	CASHEW BUTTER				
	ALMONDS				
	CASHEWS				
	PEANUTS				
	PECANS				
	PISTACHIOS				
	WALNUTS				
	PUMPKIN SEEDS				
	SUNFLOWER SEEDS				
DAIRY	EGGS				
	YOGURT	plain, flavored, Greek			
	CHEESE	American, cheddar, cream cheese, cottage cheese, feta, goat, gouda,			
	MILK	cow's milk, nut milks, and soymilk			
	CREAM & HALF-AND-				
	SOUR CREAM				
	BUTTER/MARGARINE				

Are there meals you enjoy but cannot prepare from the ingredients found at nearby grocery stores?

If yes, what ingredients and fresh fruits & vegetables would you like access to that are not listed above?

Thank you for participating! Your responses will go a long way toward helping to bring more healthy food to the community of Winchendon. If you would like to be more involved in the Winchendon Food Project, please provide your contact information below:

Name: _____

Email: _____

Phone: _____

