

**HOLLYWOOD FOOD NEEDS ASSESSMENT
SURVEY OF HUMAN FOOD NEEDS 2003**

Surveyor: _____

Date: _____

Hi, I am _____ from a non-profit organization in Hollywood that is interested in people's thoughts about food, nutrition, and hunger. I'd like to ask you for 10 minutes to answer the question on this survey that I'll read to you. You don't have to answer any question that you don't want to, and you can quit at any time, but your responses, along with those of many other people, will help us get better food programs in this area. Is it ok with you?

My first few questions are about the foods you eat.

1. Many people don't eat as many servings of fruits and vegetables as they think they should every day. How often do you eat fruits and vegetables?

- 5 times a day (**Skip to question 4**) 2 to 4 times a day At least once a day
 Several times a week About once a week Less than once a week

2. Why is it difficult for you to eat as many fruits and vegetables as you should?

- Don't know where to get them Don't know any food lines that give them Don't like them
 Not in the habit of eating them Other: _____

3. What would make it easier for you to eat more fruits and vegetables?

- Knowing that they can help prevent disease If more food lines had them If they were cheaper
 If they were more available If I had a way to cook them If I had refrigeration/ storage
 Other: _____

4. Do you think that eating fruits and vegetables can help prevent illnesses like diabetes, cancer, and high blood pressure?

- No, they don't help I don't know one way or the other They might help I am sure they help

5. Do you frequently get fruits and vegetables from the following places:

	Yes	No		Yes	No
a. Grocery Store	<input type="checkbox"/>	<input type="checkbox"/>	e. Community garden	<input type="checkbox"/>	<input type="checkbox"/>
b. Farmer's Market	<input type="checkbox"/>	<input type="checkbox"/>	f. Sandwiches from a food line	<input type="checkbox"/>	<input type="checkbox"/>
c. Truck selling produce	<input type="checkbox"/>	<input type="checkbox"/>	g. Salads or cooked vegetables from a food line	<input type="checkbox"/>	<input type="checkbox"/>
d. Grocery bag program	<input type="checkbox"/>	<input type="checkbox"/>	h. Salad at fast food restaurants	<input type="checkbox"/>	<input type="checkbox"/>
			i. Other food at fast food restaurants	<input type="checkbox"/>	<input type="checkbox"/>

6. How often do you eat snacks or meals that you think are not good for your health?

- More than once a day Once a day Several times a week About once a week Less than once a week

7. What kinds of food do you want that you think is healthy for you but you can't afford or get easily? Please list a few off the top of your head.

- | | |
|----------|----------|
| a. _____ | d. _____ |
| b. _____ | e. _____ |
| c. _____ | f. _____ |

8. How often do you eat at fast food restaurants such as McDonalds, Burger King, Popeye's, Taco Bell?

- About every day Few times a week About once a week A few times a month Less than once a mo.

9. Why do you eat at fast food restaurants? (Read list and check all that apply)

- It is inexpensive It is easy / convenient I can't cook at home My kids like it The food is healthy

I like the taste It is filling Other reasons: _____

My next few questions are about hunger and health issues.

10. How often do you get enough food to eat?
 Almost very day Several times a week About once a week Less than once a week
11. In the last 12 months, how frequently have you run out of cash or food stamps before the end of the month and not been able to buy food?
 Almost every month More than half of the time Several months in the last year
 Only once or twice Not once in the last year
12. Do you have any diet-health problems? Check all that apply.
 Trouble chewing food Stomach trouble Diabetes Overweight Cancer Need low sodium items
 Need fat-free items Other: _____

13. Here are some reasons why people don't always have enough to eat. For each one, please tell me if that is a reason why you don't always have enough to eat.

	Yes	No		Yes	No
a. Income too low	<input type="checkbox"/>	<input type="checkbox"/>	h. On a diet	<input type="checkbox"/>	<input type="checkbox"/>
b. Rent or other expenses too high	<input type="checkbox"/>	<input type="checkbox"/>	i. Not able to cook or eat because of health problems	<input type="checkbox"/>	<input type="checkbox"/>
c. Too hard to get to the store	<input type="checkbox"/>	<input type="checkbox"/>	j. Too busy to shop	<input type="checkbox"/>	<input type="checkbox"/>
d. Need help carrying groceries	<input type="checkbox"/>	<input type="checkbox"/>	k. Too little time to cook	<input type="checkbox"/>	<input type="checkbox"/>
e. No refrigerator available	<input type="checkbox"/>	<input type="checkbox"/>	l. Don't know how to cook well	<input type="checkbox"/>	<input type="checkbox"/>
f. No working stove available	<input type="checkbox"/>	<input type="checkbox"/>	m. Prefer to eat out but cant afford it	<input type="checkbox"/>	<input type="checkbox"/>
g. Kinds of food we want are not available	<input type="checkbox"/>	<input type="checkbox"/>	n. Need special food I can't get	<input type="checkbox"/>	<input type="checkbox"/>

Let me ask you about shopping for food.

14. Please name the three stores you usually buy food from and tell me why you shop there.

	Price is Right	Quality is Good	Location is Convenient	Other Reason:
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

15. How do you usually get to the store you shop at most often? (check all that apply)
 Bus Walking Car Taxi Ride from friend or family member

16. How long does it take you to get there, shop, and get back? _____ minutes

17. At the store, how often do you buy the following kinds of foods?

	Never	Rarely	Sometimes	Frequently
Lunchmeat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dairy, eggs, milk butter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raw meat, fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned meat, fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fresh fruits, vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned fruits, vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pasta, rice, or potatoes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bread/Tortillas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Many people look for ways to cut the cost of buying food. Which of the following things do you do to find out about lower food prices?
- I don't try, I just buy what's there Look for specials in the newspaper or magazine
- Cut out coupons Word of mouth
- Look for sales in the store Other: _____ -
19. Do you ever buy food that is of poor quality or out of date because it is cheaper?
- Frequently Sometimes Rarely Never
20. How much money, including food stamps, does your family spend on food per month -- including food from the store, corner shops, coffee shops, snacks, and restaurants?
- Under \$50 \$50-\$100 \$100-\$150 \$150-\$200 \$200-\$250 \$300-\$350 \$350-\$400
21. If your income were to go down, how would that affect your food shopping? Would you: (Check all that apply)
- Buy less food Look for places to get free food Cut down on other expenses Eat less food
- Eat more often at fast food restaurants Eat less often at fast food restaurants No change from now

I'd like to ask you about food programs. Many people today use food programs, and it is important that we let the county know which ones work and what needs to be improved. Your responses will help us do this.

22. In the past month have you gotten any free food? Yes No (SKIP to question 27)

23. Which free food programs have you used in the past month? (Ask this question of each program first.)
 How often have you used each program? (For each program used, ask this question second.)
 How long does it take for you to get to the program, get or eat the food and get back? (For each program used, ask this question third.)

	Used this program in past month	Number of times used in past 1 month*	Number of minutes to get there and back
a. Hot meals or sack lunch programs	<input type="checkbox"/>	_____	_____
b. Grocery bag programs	<input type="checkbox"/>	_____	_____
c. Senior meals	<input type="checkbox"/>	_____	_____
d. Home delivered meals	<input type="checkbox"/>	_____	(Not applicable)
e. Food from family and friends	<input type="checkbox"/>	_____	_____

*Number of times used in past 1 month by you and family (for example if you and 1 child used a program every week, this would be 8 times.)

24. (Ask this only if used Grocery Bag programs:) How long does the food from the grocery bag program last you?

Less than one week 1 – 2 weeks 2-3 weeks More than 3 weeks

25. What areas of town have you used free food programs?

Hollywood Downtown Glendale Pasadena Other: _____

26. Are there things they give you at free food programs that you should not eat for whatever reason?
 Please tell me the food and the reason.

(Skip to Question 28)

27. People choose not to use free food programs for different reasons. Why do you NOT use free food programs?
- I do not like the food because it is not what I typically eat
 - I can not eat many of the items they give me for health reasons
 - I can not eat many of the items they give me for religious reasons
 - I do not like to accept charity
 - I do not like the quality of the food that is given
 - I do not care for the people who work there
 - Other reason: _____
28. Have transportation problems caused you to miss getting food at a food line or shopping for food?
- No
 - Yes: had no money for the bus
 - Yes: Bus came late or was not available
 - Other _____
29. Which of the following do you have regular access to:
- stove
 - oven
 - microwave
 - refrigerator
 - freezer
 - hot plate
 - propane burner/sterno
 - none
30. If there were a convenient place you could go (like a church or center) where you could prepare and cook your own food for free, how interested would you be in this kind of service?
- Very interested
 - Somewhat interested
 - Not at all interested
 - Don't know; need more information
31. Do you or your family get food stamps?
- Yes
 - No (**Skip to Question 34**)
 - Others in my household get them, but I do not
32. How much food stamps do you or your family receive each month? \$_____
33. How long do your food stamps usually last?
- Less than one week
 - 1 – 2 weeks
 - 2-3 weeks
 - More than 3 weeks
- (Skip to Question 35)**
34. Have you ever applied for food stamps?
- Yes, I got them before but I'm not getting them now because _____
 - Yes, but I was denied because _____
 - No, because _____
35. How much more income per month, in cash or food stamps, would give your family an adequate food budget?
- \$ _____
36. For each food program, please tell me if you've ever heard of it, if you are interested in the program and want to know more, and if you currently use it.
- | | Heard of | Interested; Want to
know more | Use the program |
|---|--------------------------|----------------------------------|--------------------------|
| a. Food stamps | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. WIC | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Farmers markets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Food programs at churches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Project Angel Food | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Community gardens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Congregate meals for seniors (at churches) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Senior farmers market coupons | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Meals on Wheels | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Free school breakfast/lunch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Summer Food Program (for kids in parks) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

To help us better understand the results of the survey, we'd like to ask a final few questions to know what kinds of people filled out the survey.

37. Gender _____ 38. Your age: _____

39. What is your ethnicity? (Check all that apply)

- African American Hispanic/ Latino Caucasian/ White Armenian Russian
 Native American/American Indian Asian/Pacific Islander Other

40. How many people do you buy or prepare food for? _____

41. What are your sources of income or benefits? (check all that apply)

- Full time job 40 hrs./wk Regular job less than 40 hrs./wk. Occasional work
 Solicit change CalWORKs GR
 SSI Social Security Food stamp
 WIC Help from family/friends Other

42. How would you describe your living situation? (check one box that best describes your situation)

- In house or apartment I can afford In a place where I pay over 1/2 my income in rent
 Staying with family friends Staying in a shelter (including domestic violence shelter)
 Staying in supported housing (group home, halfway house) Living in a car, on the streets

43. Finally, if you could tell the Mayor of Los Angeles anything about food programs or hunger in Los Angeles, what would you want to tell him?

Thank you so much for participating in this survey!