

8. Appendix Questionnaire

Sex:

Age:

Years of education completed:

Do you believe that people can have food related issues? (Y/N)

Does anyone in your family have food related issues? (Y/N)

Answer the following with Always (A), Often (O), Sometimes (S), Never (N)

1. How often do you read the labels of food products?
2. Would you eat nutritionally rich food even if its calorie content were high?
3. Does your diet contain only a few food items that you deem healthy?
4. Do you take dietary supplements?
5. Are you willing to spend more money to eat healthy food?
6. Do you think fortified food is superior to natural food?
7. Do you avoid foods with additives/preservatives?
8. Do you care more about the quality of food than its taste?
9. Do you fuss over how your food was prepared?
10. Do you make your daily or weekly diet plan?
11. Have you ever consulted a nutritionist for a healthy diet plan?
12. Does straying away from your diet make you feel uncomfortable or guilty?
13. Does it matter what people think about your eating habits?
14. Have you ever considered taking anti-depressants?
15. Do you feel a boost in self-esteem when you follow your healthy diet?
16. Do you read health magazines/articles or watch health shows frequently?
17. How often do you discuss eating habits with friends and family?
18. Do you think commercials truly reflect the nutritional status of food?
19. Do commercials influence your choice of food?
20. Over the past few years, to what extent have your eating habits changed? Grade your answer from a scale of zero to ten.
21. Have your eating habits affected your social life or activities? Grade your answer from a scale of zero to ten.