

## The Foodtalk Game: Early Intervention Evaluation Form

**Venue:**

**Date:**

**Relationship to child:**

**Age of child:**

**Primary language spoken at home:**

### Evaluation

	1	2	3	4	5
How would you rate your experience of the Foodtalk Game on a scale of 1-5?	Very Poor	Poor	Average	Good	Very Good

	1	2	3	4	5
How strongly do you agree with this statement: <i>"I would recommend the Foodtalk Game to others."</i>	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree

	1	2	3	4	5
How <b>confident</b> do you feel about being able to eat more healthily in the future?	Not Confident	A Little Confident	Quite Confident	Very Confident	Extremely Confident

	1	2	3	4	5
How <b>confident</b> do you feel about being more physically active in the future?	Not Confident	A Little Confident	Quite Confident	Very Confident	Extremely Confident

**Please tell us what else you thought of the Foodtalk Game for example what affect it has had on your family's eating and physical activity habits (if any):**

## Ethnicity

**What is your ethnicity? (please select one)**

- White: British/ English/ Welsh/ Scottish/Northern Irish
- White: Traveller of Irish Heritage
- White: Other
- Black or Black British: African
- Black/Black British/Other Black Background
- Asian or Asian British: Pakistani
- Asian or Asian British: Chinese
- Mixed/Dual Heritage: White & Black Caribbean
- Mixed/Dual Heritage: White & Asian
- Other Ethnic Groups: Eastern European
- Other Ethnic Groups: Turkish
- White: Irish
- White: Gypsy/Roma
- Black or Black British: Caribbean
- Black or Black British: Somali
- Asian or Asian British: Bangladeshi
- Asian or Asian British: Indian
- Asian/Asian British/Other Asian Background
- Mixed/Dual Heritage: White & Black African
- Mixed/Dual Heritage: Any Other Mixed Background
- Other Ethnic Groups: Afghan

**Other Ethnic Groups / Any other Groups- please specify:** \_\_\_\_\_