

**Investing in the Future:
the importance of diet, literacy and savings
in a low income community**

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Final report of the evaluation of
the Pilton Milk Token Initiative

August 2003

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Acknowledgements

The authors would like to acknowledge the contribution of the following people in planning and conducting this research: Marilyn Beagley and Bill Scott of Pilton Community Health Project for their assistance in developing the initial research programme and interview topics, and to Eilidh MacDonald for comments on a draft report; all the women for taking the time to give interviews and complete questionnaires; June Sorrell for her patience and help in setting up focus groups and organising the crèche.

Summary

In early 2003, Pilton Community Health Project commissioned an independent evaluation of the Milk Token Initiative, an intervention to promote a community dividend for low income families, healthy eating among women and infants, and improved literacy within the family.

The aim of the project is for local parents from low income households to exchange the Welfare Food Tokens they receive through income support in the Barri Grubb shop. The tokens are distributed with giro's or payment books to those in receipt of income support who:

- Have children under the age of five or
- Are pregnant or
- Are breastfeeding mothers

Welfare Food Tokens entitle the recipient to 4 litres of full cream milk. In addition, users of the Milk Token Initiative also receive:

- A bag of fresh fruit worth 50p, to encourage healthy eating
- A 50p payment to a credit union account in the child's name, to encourage saving
- A 50p book token, to encourage literacy in the household

This paper provides a report of an evaluation of the Initiative. A predominantly qualitative methodology was employed. Semi-structured face-to-face and group interviews were conducted with a sample of women drawn from a database of service users held by the project.

All women interviewed evidently valued the Initiative and its benefits, citing direct beneficial outcomes for their children, their families and themselves. These included improved access to fresh fruit and vegetables, development of saving habits and increased access to books, which helped promote reading and bonding between mother and child. Many pointed to the enjoyment they received from a quiet period of reading with their child. The Initiative appeared to be making a positive impact on healthier eating and healthier diets, according to respondents.

The amount of money being saved both for individual families and as a community dividend is considerable. The first child to enter the scheme now has benefited to the tune of £200, money which otherwise would have gone to the profit margins of shops and supermarkets. The respondents pointed to the value of savings habit and of encouraging responsibility for money.

The Pilton Milk Token Initiative demonstrates that it is possible, even if in a limited way, to make a difference in the lives of families living in a low income

neighbourhood. This findings of the research reported here underline the importance of diet, literacy and savings in such a community.

Recommendations

1. The Pilton Milk Token Initiative is highly regarded by those who use it and deserves to be given support to continue and to develop, particularly beyond its current geographical limits.
2. More secure funding and longer term investment is required, especially to expand the Initiative into other areas. Current and potential funders should be approached and made aware of the proven benefits of the scheme.
3. Further thought needs to be given to advertising the Initiative, using posters, the North Edinburgh News, leaflets and so on.
4. Consultation with users of the Milk Token Initiative should be conducted on a regular basis for monitoring purposes. This could be done in the form of group discussions or questionnaires for users to complete.
5. Attention should be given to how the fruit and vegetables provided could be more varied e.g. to allow for more exotic produce to be tested by families.
6. Similarly, a greater variety of books for young children, including bath books, would be appreciated by some parents.
7. Consideration should be paid to how people can be encouraged to make better use of the credit union and savings accounts, as well as how to overcome negative and mistaken images about the credit union, through advertising within the local community.

Introduction

A lively debate has been taking place about access to healthy food in deprived areas (Wrigley 2000; Cummings and Macintyre 2002). The barriers to healthy eating for low-income families are well-documented (Webster, 1998; Lobstein, 1997; Owens, 1997; Watson 2001; Turrell and Hewitt, 2002). Recently, the Scottish Executive has channelled resources toward improving the diet of expectant mothers, babies and infants (The Scottish Office, 1996). In doing so there is a clear recognition of the importance of establishing patterns of healthy eating at a very early age. In addition, the Sure Start initiative has been developed in an attempt to promote the health and wellbeing of children in the early years (The Scottish Executive, 2001). In addition, the importance of literacy for promoting better health is also being recognised (Nutbeam 2000). However the links between saving schemes, healthy eating and low income areas remain to be examined in the literature.

In this context, an initiative that links together and addresses issues of healthy diet, literacy and savings in a low income neighbourhood is both a welcome and interesting experiment in terms of policy and practice. The Pilton Milk Token Initiative, a recent project set up by Pilton Community Health Project, provides an example and is the subject of this evaluative study.

Background to the Milk Token Initiative

Pilton Community Health Project is situated in one of the most deprived areas of Edinburgh. Barri Grubb is part of the Project and provides low cost fresh fruit and vegetables to low income families. In 2002, a project was established to develop the Welfare Food scheme to ensure that low income families received a “community dividend” and which sought to promote healthy eating, saving habits and improved literacy within these families. This is the Pilton Milk Token Initiative.

The aim of the Milk Token Initiative is for local parents from low income households to exchange the Welfare Food Tokens they receive through income support in the Barri Grubb shop. Welfare Food Tokens are distributed with giro or payment books to those in receipt of income support who:

- Have children under the age of five or
- Are pregnant or
- Are breastfeeding mothers

Those who receive tokens can exchange them at authorised local suppliers and these are returned to the Welfare Foods Unit of the NHS for reimbursement.

The Barri Grubb Milk Token Initiative is designed to ensure that families obtain a community “dividend” when they exchange their milk tokens.

Welfare Food Tokens entitle the recipient to 4 litres of full cream milk. In addition, users of the Milk Token Initiative also receive:

- A bag of fresh fruit worth 50p, to encourage healthy eating
- A 50p payment to a credit union account in the child’s name, to encourage saving
- A 50p book token, to encourage literacy in the household

Parents who have more than one child under five receive milk tokens for each and thus the community dividend for each milk token exchanged. The total of £1.50 that goes to the community dividend is made possible through the profit margin on the retailers’ sale of milk for bulk purchases (2 litre cartons) as opposed to the ½ litre price set with the Welfare Foods Unit. The aims of the Milk Token Initiative are in accord with the recommendations of the Acheson Inquiry into inequalities in health:

Recommendation 3.1: further reductions in poverty in women of child bearing age, expectant mothers, young children and older people should be made by increasing benefits in cash or in kind

Recommendation 22: policies which improve the health and nutrition to women of child bearing age and their children with priority given to the elimination of food poverty

The Milk Token Initiative is intended to address various aspects of health and well-being such as encouraging nutritious eating habits among children, foster household saving and increasing access to books, offering opportunities for social bonding and potentially improving literacy among parents and their children.

Though the scheme has currently 150 users, its geographical reach is restricted. The majority of users come from Pilton and West Pilton. There are fewer users in other parts of the SIP area such as Muirhouse, Royston and Granton.

A considerable amount of preparatory work was undertaken for establishing and promoting the scheme, for example, work with local midwives and health visitors, visits to playgroups and printing of cards with information about the scheme’s benefits.

The project uses the services of a development worker and part-time worker to coordinate and distribute milk and fruit within the Pilton Community Health Project and on an outreach basis in venues in target communities.

In early 2003, Pilton Community Health Project commissioned an independent evaluation of the Milk Token Initiative, in order to establish whether the scheme was effective and what those who used the scheme thought of it.

Methodology

An evaluation framework for the research was agreed in discussion with Barri Grubb's Project Leader and Pilton Community Health Project's Senior Development Worker. A predominantly qualitative methodology was agreed. The proposal was to conduct group interviews with a sample of parents to ascertain their views on their experience of contact with the Initiative. The views were also solicited of the development workers who worked with the Project.

While the original plan had been to conduct facilitated discussion groups with the sample, a method which has worked well with health issues (Titterton et al 2000), this did not prove possible, due to difficulties in accessing the sample and in getting women (and children) together at the one time. The approach was therefore modified to conduct two small group interviews and individual interviews with the remaining sample.

Sample selection

The interview sample was drawn from the database held by Barri Grubb. To be eligible to take part, women had to be participating in the scheme or had formerly used it or who were contemplating using it. The rationale for this was to get some idea of levels of knowledge of and attitudes to contact with the project.

Bias in research findings from small and difficult-to-access samples has been discussed in Smart and Titterton (2002).

List of respondents

The respondents were all women; most were single mothers, nearly all lived in council rented property and nearly all had no private transport. The great majority were on welfare benefits such as Income Support. One woman lived with a male partner, who was unemployed. Most had come to the project through word of mouth.

1. Jennie, Ferry Road, private renter, single parent, daughter aged 12 and son aged 5, looking for work.

2. Nicki, Ferry Road, council renter, single parent, daughter aged 4, works part-time.

3. Mandy, Wardieburn Place West, one and a half years 1 boy aged 3.
4. Louise, 22 years old, Granton Medway, involved in the Milk Token Initiative for two and a half years, 2 children of 2 yrs and 9 months.
5. Claire, aged 21, Muirhouse Green, single parent, just joined Milk Token Initiative, from a leaflet, has two children aged 1 and 3.
6. Lindsay, aged 21, Muirhouse Park, lone parent, one child aged 1 and half.
7. Stacey, 19, single parent, child aged 1 and a half.
8. Karen, aged 18, one child aged 2 and half, uses Stepping Stones (project to support single parents).
9. Linda, project assistant Barri Grubb and Milk Token Initiative.
10. Navenka, aged 27, Muirhouse Green, one child aged 4, has used the Milk Token Initiative for a year and a half.
11. Jacqueline, Muirhouse Court, aged 40, with one child aged 3, single mother, unemployed, joined Milk Token Initiative a few months ago.
12. Victoria, Muirhouse Avenue, aged 23, with one child aged 3, single parent, works part time.
13. Angela, Muirhouse Parkway, aged 40, one daughter now aged 5, used to get Milk Tokens.
14. Adele, Craigroyston Place, aged 21, one daughter aged 4 Rebecca, single parent, with several part-time jobs, does not get Milk Tokens, uses Barri Grubb sometimes.

Results

The interview schedule was designed to acquire information on respondents' perceptions of the benefits of the Milk Token Initiative. Information was also sought on current eating patterns, barriers to healthy eating, access to fresh foods and literacy. The interview schedule comprised mainly open questions but included some closed questions on levels of income, age, marital status etc. A copy of the interview schedule is contained in the Appendix.

Group interviews for the research were conducted on the premises of Pilton Community Health Project and Craigroyston Community School and a crèche was provided for the care of children. It was felt that this would provide a setting where distractions would be minimal i.e. respondents would not have to attend to the needs of their children, answer telephone calls etc. for the duration of the

interviews. Expenses of £5 per interview plus travelling costs were offered to each participant who came to the group interviews. Single interviews were held at the Millennium Centre.

The results of the research are presented under the following key headings, which include sample quotations from respondents' interviews:

- Perceptions of the Pilton Milk Token Initiative
- Health, eating, exercise and lifestyle
- Literacy
- Saving money
- Shopping
- Barriers
- Suggestions for Improvements
- Living in a low income area

Perceptions of the Pilton Milk Token Initiative

"Brilliant scheme!"

"Fabulous, brilliant idea, £1.50 goes a long way"

"The initiative is really brilliant, encourages saving"

"Milk token scheme is great!"

"Very useful, especially saving"

"Great idea, good to encourage healthy eating and saving"

"Good idea, milk at shop to profit making, can get fruit"

"Scheme is good"

"Fruit and veg, leaflets and information – all that's good"

"I'm finding it useful and helpful"

"On the Welfare Food Scheme (the alternative to the Milk Token Initiative), you feel like a pauper handing over token – there is a sense of embarrassment – shopkeepers treat it as a hassle"

Balance between fruit/books/saving

"Brilliant balance between savings/book club/fruit"

"Balance is fine, idea of credit union may put people off, tries to open bank account"

"Good variety – balance – 3 good things, tokens for books, fruit and saving"

"Balance is OK"

Health, eating, exercise and lifestyle

Health

"Not enough knowledge about health"

"Information wanted eg doctors' surgeries"

“Feels well, don’t drink or smoke”
“My health, it’s all right, but I need to give up smoking!”
“Not bad health.”
“Good health”
“My health is all right”
“My health is fine, but I’m a smoker, and my partner has diabolical health!”

Exercise

“I need more exercise”
“Walk everywhere”
“Exercise – tries to walk, not easy with kids”
Walks everywhere”
“Walking main form of exercise”
“Walks everywhere”
“My only exercise is walking everywhere”

Eating

“I have a terrible diet!”
“Good opportunity to purchase fresh fruit and vegetables”
“Arranging fruit – presentation to children is important, faddy eaters”
“I don’t use frozen things or deep fries”
“Fruit and veg is essential”
“More could be done to promote healthy eating”
“Offer options for fruit or veg – carrot sticks, bananas, trial of exotic foods”
“I make efforts to vary diet –sweets as a treat after a meal – problem with sugar”
“Children like fruits like grapes, strawberries, satsumas”
“I eat no fruit, just bread, fussy eater”
“I don’t eat 5 portions of fruit, only 3”

Lifestyle

“Early influences are important”
“Magazines – pressure to stay thin”
“You can show by habit”
“Family atmosphere is important”
“Seen as just women’s issue”
“Practical life skills are needed”

Literacy

“Important to read stories, tell stories, couple of hours morning and night”
“Reading to children is important, as is making up stories”
“Library books – set time aside, morning, afternoon, these are special times, son now reading by himself, verbal skills”
“Book club has over 100 books”
“I try to read to kids, bath books are good”

“I’m not a reader, I’ve only read 2 books in whole of my life. But I try to read Boots reading bags to son, puzzles, make it exciting for him”
“Brilliant idea for books, good for Christmas and birthdays”
“My child enjoys books, especially stories at night, more of a range wanted”

Saving money

“It’s learning to save money, not just spend it”
“Money definitely helps”
“Great idea!”
“Encourages children to save”
“You can involve your children in counting and saving”
“Teaches responsibility”
“Credit union, account and savings book is very useful”
“Adding to Credit Union savings account – it does help saving”
“That’s £26 a year – see how it builds up!”
“Want to keep adding to account”
“We want to keep using savings scheme, up until the children are 18!”

Shopping

“It’s hard to shop for a healthy diet, children are fussy eaters”
“not easy to shop for healthy diet – hard to get certain items e.g. goats’ milk”
“Lack of organic food, lack of fruit and veg in the area”
“Café would be nice”
“Difficult to get fresh fruit in Ferry Road”
“Safeway is an experience for a young mum”
“Shops are OK but I prefer Barri Grubb”
“Problem with carrying 8 pints and milk token – some shops want you to buy it all at once”
“I have to use the bus, to the supermarket”
“Shopping with kids is hard”

Barriers

“Lack of information”
“Distance”
“Managing shopping”
“Managing kids”
“Lack of buses”
“Lack of information and communication is a big issue eg about books”
“Overcoming suspicions”
“Might be cliquy – hard to break into”
“Distance can be a trial, esp when it’s wet”
“There are issues about coming into other areas, deliveries”
“Geographical splits – major roads in the way”
“Laziness”

“Coming into the project from outside the area”
“More incentive needed”

Suggestions for Improvements

“Is there some way of getting scheme into shopping centre eg Pennywell? “
“Lack of knowledge of scheme“
“Use North Edinburgh News, whole page spreads”
“Leaflets door to door”
“Posters”
“Need to say: We’re here and this is what we do!”
“Leaflets, word of mouth is important”
“ The current leaflet not effective, the postcard, is not clear”

“4 litres of milk is heavy to carry!”
“Big problem is getting people to find out about the Milk Token Initiative”
“Want more information - what happens to milk tokens when government is making direct payments?”
“Organic milk wanted”
“Deliveries wanted”
“Being able to phone in to request a delivery”
“I have a suggestion for the delivery of the milk, to save carrying so much”
“Suggestions: recipes, good vegetarian recipes should be offered”
“Variety of vegetables wanted, nothing exotic is on offer”
“Passion needed! Introduce new types of fruit and veg, e.g. spinach, asparagus”
“Any day for milk, more flexible times would be useful”
“Cooking lessons wanted”
“Want dance group and stuff for parents and kids, activity stuff”

Living in a low income area

“Fine community, it’s what you make of it”
“Rough area, it can be hard sometimes to live here”
“Don’t like area, too much drug abuse”
“It’s tough trying to cope with stress, smoking, neighbours, lack of social support and family, waiting on HA lists, trying to transfer...problem of anti social neighbours...Council needs to be more sympathetic”
“Living on benefits is hard”
“Things like Stepping Stones for young parents can help”
“Study and open learning is important”
“I’m a young single mum, unemployed, and claiming income support of £80 per week”
“ The Edinburgh Sitters Project for single parents can help, problem of getting sitters depends on where you live”
“I haven’t been out for 4 years!”
“You need to stand up for yourself and look out for each other”
“It is possible to better oneself”

“Training and support is needed”

“We both did Women onto Work scheme, got a lot of it”

“Careers fair/enterprise can be really useful”

“Women mean business!”

“We want food for thought!”

Discussion

These findings show that the Milk Token Initiative is very well received, particularly by those who are participating or who have participated in the scheme. Perceptions of the initiative were highly favourable and highly regarded by participants, by staff involved in the scheme and those women who do not participate.

All women interviewed evidently valued the Initiative and its benefits, citing direct beneficial outcomes for their children, their families and themselves. These included improved access to fresh fruit and vegetables, development of saving habits and increased access to books, which helped promote reading and bonding between parent and child. Many pointed to the enjoyment they received from a quiet period of reading with their child. The Milk Token Initiative appeared to be making a positive impact on healthier eating and healthier diets, according to respondents.

The amounts of money being saved are considerable. The first child to enter the scheme now has benefited to the tune of £200, money which otherwise would have gone to the profit margins of shops and supermarkets. The respondents pointed to the value of savings habit and of encouraging responsibility for money. Some respondents mentioned the sometimes negative and mistaken images about the credit union, which they thought persisted in the local community and which needed to be put right, for example through more advertising.

There is clearly a problem with shopping for healthier diet in the Pilton area and difficulties in accessing food, one that is discussed within the research and policy literatures. Transport issues are prominent, with most families reliant on public transport or carrying shopping on foot. The Barri Grubb scheme fills an evident gap, and the provision of fresh fruit and vegetables is highly appreciated by the women interviewed.

Suggestions were put forward for improving the scheme, including the publicity for the initiative. People wanted a varied range of produce on offer, for example different kinds of fruit, something which might attract both adults and children. Useful ideas for attracting attention to the Initiative were put forward, mentioned below.

Barriers identified by respondents included geographical issues and transport issues, for example getting to the project, and carrying heavy shopping consisting of 4 litres of milk. Most respondents felt that lack of knowledge about the Initiative

was a key problem and argued that more advertising was required to attract people. Most respondents had found out about the initiative by word of mouth. A range of helpful suggestions to increase publicity were mentioned, such as full page spreads in the local newspaper, the North Edinburgh News, as well as the use of posters and leaflets.

The experience of living in a low income area came across vividly in the interviews. The health experience of women is very mixed, with some women experiencing stress and difficulties in living on a low income and on benefits. The main form of exercise was walking; very few had access to private transport, and the great majority reliant on public transport or walking. One or two made conscious efforts to stay fit, such as by visiting a gym.

Problems with drugs, anti-social behaviour and so on were cited as having a negative impact on the locality. However there were clearly some women keen to be involved in the community and enjoyed living in the neighbourhood.

Women asked for training and support; while some of the younger mothers had little idea what they wanted to do with their lives, others had plans to go back to education. Some made use of Stepping Stones, Edinburgh Sitters Project and other initiatives. There is a keen desire among some of the women to break out of the cycle of dependence on benefits, to improve their personal and family situation. Some assistance in doing this would be greatly appreciated; even small projects can help these women help themselves.

Conclusion

In conclusion, this research demonstrates that the Pilton Milk Token Initiative is perceived as being of considerable value to participants and to others in the neighbourhood. Suggestions for improvement were put forward by those women who use the project, such as increasing opening hours, making milk deliveries available and expanding into shopping centres. Respondents were happy to talk about the benefits of the scheme to them and their families.

While the project was felt to be of benefit, there are a range of factors which impinge on are beyond the scope of the Milk Token Initiative. As mentioned in the evaluation of Ready Steady Baby (Smart and Titterton 2002), these are of a social and structural nature and require intervention at an organisational and societal level. Nonetheless, an initiative such as the Pilton Milk Token Initiative demonstrates that it is possible, even if in a small way, to make a difference in the lives of families living in a low income neighbourhood. This findings of the

research reported here has underlined the importance of diet, literacy and savings in such a community.

Recommendations

1. The Pilton Milk Token Initiative is highly regarded by those who use it and deserves to be given support to continue and to develop, particularly beyond its current geographical limits.
2. More secure funding and longer term investment is required, especially to expand the Initiative into other areas. Current and potential funders should be approached and made aware of the proven benefits of the scheme.
3. Further thought needs to be given to advertising the Initiative, using posters, the North Edinburgh News, leaflets and so on.
4. Consultation with users of the Milk Token Initiative should be conducted on a regular basis for monitoring purposes. This could be done in the form of group discussions or questionnaires for users to complete.
5. Attention should be given to how the fruit and vegetables provided could be more varied e.g. to allow for more exotic produce to be tested by families.
6. Similarly, a greater variety of books for young children, including bath books, would be appreciated by some parents.
7. Consideration should be paid to how people can be encouraged to make better use of the credit union and savings accounts, as well as how to overcome negative and mistaken images about the credit union, through advertising within the local community.

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Appendix: Evaluation of “Milk Token Initiative”: Interview questions

General Information

1. How old are you?
2. Are you married/single/ separated/divorced?
3. How many children do you have and what age?
4. How would you describe your health?
5. Do you receive any state benefits?

Information about the Milk Token Initiative

1. How did you first hear of the Milk Token Initiative?
2. What is your opinion of the Initiative?
3. Is the balance of the scheme OK, in terms of food, savings and milk?
4. Any problems with the Initiative?
5. How can it be better used?

Knowledge about diet and shopping

1. What foods do you think make up a healthy diet?
2. How would you describe your diet?
4. What kinds of things, if any, prevent you from having a healthy diet?
5. How easy is it to buy fresh fruit and vegetables?
6. What is your opinion of the shops in the area?

Reading habits

1. Do you read books?
2. Can your children read and do they enjoy it?

3. Do you read with them?

4. What do you think of the books?

Saving habits

1. Do you have a savings account for the children?

2. Does the scheme encourage you to save?

The community

1. What do you think of the area and the community? Do you like living here?