



Should You Be Eating Gluten-Free?

County: _____ Date: _____

Gender: (Circle one) Male Female

Race: (Circle one) Black American Indian or Alaskan Native
 White Asian or Pacific Islander
 Multi-Racial

Ethnicity: Hispanic/Latino: (Circle one) Yes No

Please circle one rating for each of the statements below that describes your understanding about the topic before and after the session.

My Understanding About:	Before Meeting				After Meeting			
	<i>Didn't Know</i>	<i>Knew a Little</i>	<i>Knew the Basics</i>	<i>Knew All About This</i>	<i>Don't Know</i>	<i>Know a Little</i>	<i>Know the Basics</i>	<i>Know All About This</i>
What gluten is	1	2	3	4	1	2	3	4
Why some people should not eat gluten	1	2	3	4	1	2	3	4
Foods that contain gluten	1	2	3	4	1	2	3	4

During the class, we talked about gluten-free diets. Which of the following do you expect to do?

Skill	<i>Currently Doing This</i>	<i>Expect to Make This Change</i>	<i>Don't Intend to Do This</i>
Avoid all gluten-containing foods.			
Try different types of whole grain foods.			
Continue eating a balanced diet that includes gluten-containing foods.			

Have you changed your attitude about eating gluten-free? Circle one: Yes No

If yes, please specify.

What do you plan to do differently?