ATTACHMENT E:

DRAFT QUESTIONNAIRE

INTRODUCTION: Thank you for agreeing to participate in this study of foods and food labels. Today you will be looking at some food labels for everyday food products. We are less concerned about how the labels look, than with what they say. None of these products are currently available for sale but they are similar to products you may have seen or purchased.

 Your participation is completely voluntary. Your answers are kept strictly confidential and reported in statistical form only.

Please take a minute to look at these two products labels, which are taken from food products in the [Donut/Margarine/Frozen Dinner] category.

1. **Based on what you see on the labels, which product would you choose as being healthier to eat yourself or to serve to your family?**

    o   [Donut/Margarine/Frozen Dinner] A is healthier

    o   [Donut/Margarine/Frozen Dinner]   B is healthier

    o   Both [Donuts/Margarines/Frozen Dinners]   are the same [SKIP TO Q3]

2. **Briefly, why did you select [Donut/Margarine/Frozen Dinner]   [A/B]?**

    o   {write in open-end response}

3. Thinking about [Donut/Margarine/Frozen Lasagna] [A/B—IF ANSWERED Both in Q1, randomly assigned A or B for duration of questionnaire], how would you rate this product compared to the <u>typical product</u> in the [Donut/Margarine/Frozen Lasagna] category?

3a. Amount of fat?

CONTAINS MORE FAT	1
	2
	3
CONTAINS ABOUT THE SAME AMOUNT	4
	5
	6
CONTAINS LESS FAT	7

3b. Amount of sodium?

CONTAINS MORE SODIUM	1
	2
	3
CONTAINS ABOUT THE SAME AMOUNT	4
	5
	6
CONTAINS LESS SODIUM	7

3c.   Amount of cholesterol?

CONTAINS MORE CHOLESTEROL   1

                                        2

                                        3

CONTAINS ABOUT THE SAME AMOUNT   4

                                        5

                                        6

CONTAINS LESS CHOLESTEROL   7

3d.   Amount of saturated fat?

CONTAINS MORE SATURATED FAT   1

                                        2

                                        3

CONTAINS ABOUT THE SAME AMOUNT   4

                                        5

                                        6

CONTAINS LESS SATURATED FAT   7

3e. Amount of *trans* fat?

CONTAINS MORE *TRANS* FAT	1
	2
	3
CONTAINS ABOUT THE SAME AMOUNT	4
	5
	6
CONTAINS LESS *TRANS* FAT	7

4. On a scale from 1 to 7, where 1 means VERY LIKELY and 7 means VERY UNLIKELY, how likely is it that eating this product <u>as a regular part of your diet</u> would…

4a.   Raise your risk of having a heart attack?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

4b.   Raise your risk of having high blood cholesterol?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

4c.   **Raise your risk of becoming overweight?**

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

4d.   **Raise your risk of having high blood pressure?**

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

5. **Do you consider the [Donut/Margarine/Frozen Dinner] you selected to be high, medium or low in …?**

[RANDOM START].

NUTRIENT	HIGH	MEDIUM	LOW
a. Calories	1	2	3
b. Total Fat	1	2	3
c. Saturated Fat	1	2	3
d. *Trans* Fat	1	2	3
e. Cholesterol	1	2	3
f. Sodium	1	2	3
g. Carbohydrates	1	2	3

6. If you were going to buy this [Donut/Margarine/Frozen Dinner], how likely would you be to read …?

    a.. A statement on the front of the package that the product has zero (0) grams of *trans* fat?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

    b. The Nutrition Facts information about *trans* fat?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

c. The Nutrition Facts information about calories?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

d. The Nutrition Facts information about saturated fat?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

e. Information on the label about how much *trans* fat you should eat?

VERY LIKELY	1
	2
	3
NEITHER LIKELY NOR UNLIKELY	4
	5
	6
VERY UNLIKELY	7

7. Have you or has anyone *currently living in your household* ever

HEALTH CONDITION	YES	NO	DON'T KNOW
a. Had heart disease?	1	2	3
b. Had diabetes?	1	2	3
c. Had high blood pressure?	1	2	3
d. Had a stoke?	1	2	3
e. Been treated for cancer?	1	2	3
f. Been diagnosed as overweight or obese?	1	2	3

8. In the last two weeks, can you remember an instance where your decision to buy or use a food product was changed because you read the nutrition label?

Yes	1
No	2

BACKGROUND QUESTIONS FOR STATISTICAL PURPOSES

9. **Gender:**
Male   1
Female   2

10. **What is your date of birth?**

_____
MMDDYYYY

11. **What was the last grade or year of school you completed?**

a.   8TH grade or less
b.   9TH -11TH grade
c.   12TH grade/high school graduate/GED
d.   Trade or technical training after high school
e.   1-3 years college/associate degree/junior college
f.   4 year college graduate
g.   Post graduate