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Summer Electronic Benefits Transfer for Children

Spring Baseline Questionnaire

January 17, 2012 (Proposed)



According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection will be entered after clearance. The time required to complete this information collection is estimated to average 25 minutes per response, including the time to

review instructions, se	arch existing data resou	rces, gather the data ne	eeded, and complete ar	nd review the informa	tion collection.

SECTION A: INTRODUCTION Hello, my name is _____ and I'm calling on behalf of the U.S. Department of A1. Agriculture, Food and Nutrition Service. May I please speak to [%UFName % ULName]? INTERVIEWER NOTE: REFER TO FA Q'S TO ANSWER ANY QUESTIONS, **INCLUDING CONTENT OF SURVEY]** SPEAKING TO [NAME OF PARENT]......1 GO TO A2 [NAME OF PARENT] COMES TO PHONE......2 GO TO A2 NOT A GOOD TIME.....4 SCHEDULE CALLBACK [IF INBOUND CALL] SI1 Just in case we are disconnected, what telephone number can I reach you at to complete the interview? Provided phone number......1 GO TO A2 (VOL) respondent will call back......2 GO TO A2 Don't know......8 GO TO **A2** Refused......9 GO TO A2 **QUALIFIED LEVEL 1: SI1=1** [IF SAMPLE FLAGGED AS CELL PHONE] **SC1** Are you in a safe place to talk right now? IF DRIVING VOLUNTEERED, CODE AS 2 USE LL INTRO FOR LL CALLBACKS Yes, safe place to talk..... No, call me later.....2 **SCHEDULE CALLBACK** No, CB on land-line.....3 RECORD NUMBER, SCHEDULE CALLBACK (VOL) on landline.....4 GO TO A2 Don't know.....8 Refused......9 [IF SAMPLE FLAGGED AS CELL PHONE] SC2 Are you driving?

1/5/2012

SCHEDULE

Don't know......8
Refused......9

CALLBACK

for the U.S.D.A, Food and Nutrition Service. The study will help the government make its child nutrition programs better for school-age children. A2a. Is there a child living in your home who attends an elementary, middle or high school in the [NAME OF SCHOOL DISTRICT] public school system? YES.....1 DON'T KNOW......88 GO TO REFUSAL REFUSED......99 GO TO REFUSAL A3. Are you the parent or adult in the household who knows the most about what the schoolage children in this household ate over the last 30 days? [IF R ANSWERS "PROBABLY" OR "AS MUCH AS ANYONE ELSE," ENTER "1,YES."] YES......1 **GO TO A4.3** YES, BUT NOT AVAILABLE NOW......2 **GO TO CALLBACK** NO......3 DON'T KNOW......8 REFUSED......9 What is the name of the parent or adult who knows the most about what the school-age A4.1 children in this household ate over the last 30 days? ENTER NAME OF PARENT/ADULT: DON'T KNOW.....8 REFUSED......9 QUALIFIED LEVEL 2: (A3=1 OR 2) OR (GAVE NAME IN A4.1) May I speak with (him/her)? A4.2 YES......1 YES, BUT NOT AVAILABLE NOW......2 **GO TO CALLBACK** CANNOT COME TO PHONE......3 **GO TO CALLBACK** (VOL) Not available at this phone number.....4 **GO TO UPDATE PHONE** DON'T KNOW......8 **GO TO CALLBACK** REFUSED......9 **GO TO REFUSAL**

We are conducting a research study about the food choices of children and their families

A2.

A4.3 **[READ IF A4.2=1]** Hello, my name is _____ and I'm calling on behalf of the USDA., Food and Nutrition Service. We are conducting a research study about the food choices of children and their families.

[READ TO ALL:] Are you at least 18 years old?

YES	1
NO	2 SCREEN-OUT RESP UNDER 18
DON'T KNOW/REFUSED	8 SCREEN-OUT RESPUNDER 18 REE

QUALIFIED LEVEL 3: A4.3=1

[READ TO ALL:]

A4.4 For quality assurances purposes, this call may be monitored or recorded.

The study has two parts - an interview that will take about 25 minutes and a second interview during the summer. As a way of saying thank you, you will get a total of \$35 for completing both interviews. We will send you a \$10 VISA gift card when we finish today's interview and a \$25 VISA gift card after completing the interview in the summer. You will get a total of \$35 if you do both interviews.

The interviews have questions about your children's food choices as well as general questions about you and your household. Your answers will help the government make its child nutrition programs better for school-age children.

Your participation in this interview is voluntary and you may stop at any time. You may also refuse to answer any question. Your benefits will not be affected by any answers to questions or if you choose not to participate.

All the information you give us will be kept private to the extent allowed by law. There is a small risk of the loss of confidentiality of your data, but procedures are in place to minimize this risk. Your name will not be attached to any of your answers. Your information will be used only in combination with information from other households for research purposes.

Do you have any questions about the interview before I begin?

[REFER TO FA Q'S TO ANSWER ANY QUESTIONS]

A5	If now is a good time for you and you	i are willing to participate, I'd
like to	begin my questions.	
	YES, IT'S A GOOD TIME AND I'M WILLING1	GO TO A7
	YES, I'M WILLING BUT NOT AVAILABLE NOW2	SCHEDULE CALLBACK
	DON'T KNOW8	
	REFUSED TO PARTICIPATE9	GO TO REFUSAL
A6.	May we call you back at another time?	
	YES1	SCHEDULE CALLBACK
	NO2	GO TO REFUSAL
	DON'T KNOW8	SCHEDULE CALLBACK
	DECLICED	CO TO DEFLICAL

SECTION B: HOUSEHOLD CHARACTERISTICS

The first few questions are about the people you live with.

QUALIFIED LEVEL 4: REACHES B1

B1.1 Do all the people who live with you share the food that is bought for the household?

B1.2 Including yourself, how many people in your household share the food that is bought for the household?

[PROGRAMMER NOTE: IF B1 NE 88/99 B1.2 CANNOT BE GREATER THAN B1]

_____ Number of people
DON'T KNOW......88

REFUSED......99

B2. How many of those (IF B1.1=1, FILL NUMBER FROM B1, OTHERWISE, FILL NUMBER FROM B1.2) people are children age 18 or younger or over 18 but still in high school?

[**IF B1.1 AND B1.2 = 88 OR 99**, READ:] How many people in your household are children age 18 or younger or over 18 but still in high school?

[PROGRAMMER NOTE: B2 CANNOT BE GREATER THAN B1/B1.2]

	Number of children [RANGE 1-20]	GO TO B3
	NO CHILDREN IN HOUSEHOLD00	SCREEN-OUT: NO CHILDREN IN HH
	DON'T KNOW88	SCREEN-OUT: DK/REF NUM OF CHILDREN IN HH
	REFUSED99	SCREEN-OUT DK/REF NUM OF CHILDREN IN HH
tl C	d like to make a list of the first names or initials of the children, a nose over 18 but still in high school and their birthdays. What is t hild?[IF 1 CHILD READ:] What is the name of the child age 18 out still in high school living in your household?	he name of the (first
B4a. V	Vhat is (NAME1)'s birthday?	
	/ / MONTH DAY YEAR	
	DON'T KNOW8	SCREEN-OUT: DK/REF NUM OF CHILDREN IN HH
	REFUSED9 \$	SCREEN-OUT: DK/REF NUM OF CHILDREN IN HH
B4b. IF school s	CHILD IS 3 YEARS OR OLDER: Is that child in grades pre-K th ystem?	rough 12 in your public
	YES1	
	NO2	
	DON'T KNOW88	

1/5/2012

REFUSED......99

B4c. IF B4b=YES AND AGE AT B4a=20 OR OVER: Just to confirm, (NAME1) was born in
(INSERT YEAR FROM B4a)?
YES1
NO
DON'T KNOW
REFUSED
REF GGED
B5. What is the name of the next child?
B5a. What is (NAME2)'s birthday?
DON'T KNOW8
REFUSED9
B5b. IF CHILD IS 3 YEARS OR OLDER: Is that child in grades pre-K through 12 in your
public school system?
YES1
NO
DON'T KNOW88
REFUSED99
B5c. IF B5b=YES AND AGE AT B5a=20 OR OVER: Just to confirm, (NAME 2) was born in
(INSERT YEAR FROM B5a)?
YES1
NO2 GO TO B5a & CORRECT
DON'T KNOW88
REFUSED99
PROGRAMMER: CREATE GRID, USING B2 FOR NUMBER OF CHILDREN IF B2<88. IF B2=88,99 ALLOW UP TO 20.
D2-00,00 / (20 V O) 10 20.
IF MORE THAN1 CHILD IN HOUSEHOLD, USE RANDOM SELECTION TO CHOOSE FOCAL CHILD.

SECTION C: CHILD DEMOGRAPHICS

QUALIFIED LEVEL 5: REACHES C1

[IF NUMBER OF CHILDREN >1] For the next set of questions, we are going to focus on [CHILD NAME].

READ IF NECESSARY: Throughout the survey there will be questions asked only about [CHILD NAME]. This child has been randomly selected and we cannot change to ask about a different child.

C1.	Is [CHILD NAME] a boy or girl?
	[ASK IF THEY HAVE NOT ALREADY MENTIONED CHILD'S SEX]
	BOY1
	GIRL2
	DON'T KNOW8

[ASK IF B1 NE 1]

C1a. During the past 30 days, since [DATE (DATE OF INTERVIEW -30 DAYS)], how many days did [CHILD NAME] live in this household?

REFUSED......9

- RE	SPONDENT SAYS EVERYDAY, ENTER 30.	
	Number of days [RANGE 1-30]	
	NONE	0
	DON'T KNOW	88
	REFUSED	99



SECTION E: PROGRAM PARTICIPATION – CHILD

For the next series of questions we'll be asking about meals and snacks [CHILDNAME] may have had during the last 30 days since [DATE (DATE OF INTERVIEW -30 DAYS)].

E1.	During the last 30 days did [CHILD NAME] usually eat breakfast each day?
	YES1
	NO2
	DON'T KNOW8
	REFUSED9
E2.1.	On school days during the last 30 days, did [CHILD NAME] get free or reduced price breakfasts at school?
	YES1
	NO2
	DON'T KNOW8
	REFUSED9
E2.2	On school days during the last 30 days, did [CHILD NAME] get free or reduced price lunches at school?
	YES1
	NO2
	DON'T KNOW8
	REFUSED9
E2.3	During the last 30 days, how many days a week did [CHILD NAME] get free supper meals at an after school program held in (his/her) school building?
	ONE DAY1
	TWO DAYS2
	THREE DAYS3
	FOUR DAYS4
	FIVE DAYS/EVERYDAY5
	NO DAYS/EATS SUPPER SOMEPLACE ELSE6
	DON'T KNOW8
	REFUSED9

1/5/2012

IF E2 E3.	E2.3=6, 8, OR 9 INSERT "an"; IF E2.3=1-5 INSERT "ar". During the last 30 days, did [CHILD NAME] particip program where meals or snacks are served?	
	YES	1
	NO	2
	DON'T KNOW	8
	REFUSED	9
E4.	 During the last 30 days since [DATE (DATE OF IN NAME] get food through a backpack food program 	
	NAME] get 1000 tillough a backpack 1000 program	Tor Criticiens
	[IF NEEDED: THE BACKPACK FOOD PROGRAM TO TAKE HOME OVER WEEKENDS AND HOLID	
	YES	1
	NO	2
	DON'T KNOW	8
	REFUSED	9

[ASK F1-F8a FOR ALL RESPONDENTS]

SECTION F: FOOD SECURITY - HOUSEHOLD

[PROGRAMMER NOTE: SELECT APPROPRIATE FILLS DEPENDING ON NUMBER OF ADULTS AND CHILDREN IN THE HOUSEHOLD. DEFAULT TO MULTIPLE ADULTS AND MULTIPLE CHILDREN IN HOUSEHOLD.]

QUALIFIED LEVEL 6: REACHES F1

The next questions are about the food eaten in your household in the last 30 days and whether you were able to afford the food you need.

F1. Now I'm going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was <u>often</u> true, <u>sometimes</u> true, or <u>never</u> true for your household in the last 30 days.

The first statement is "We worried whether our food would run out before we got money to buy more." Was that often true, sometimes true, or never true for your household in the last 30 days?

	OFTEN TRUE1
	SOMETIMES TRUE2
	NEVER TRUE3
	DON'T KNOW8
	REFUSED9
F2.	"The food that we bought just didn't last, and we didn't have money to get more." Was that often, sometimes, or never true for your household in the last 30 days?
	OFTEN TRUE1
	SOMETIMES TRUE2
	NEVER TRUE3
	DON'T KNOW8
	REFUSED9
F3.	"We couldn't afford to eat balanced meals." Was that often, sometimes, or never true for your household in the last 30 days?
	OFTEN TRUE1
	SOMETIMES TRUE2
	NEVER TRUE3
	DON'T KNOW8
	REFUSED9

12 1/5/2012

TO F4: OTHERWISE. SKIP TO F9.

PROGRAMMER: IF AFFIRMATIVE RESPONSE (I.E., "OFTEN TRUE" OR "SOMETIMES

TRUE") TO ONE OR MORE OF QUESTIONS F1-F3, THEN CONTINUE

F4.	In the last 30 days, did [you/you or other adults in your household] ever cut the size your meals or skip meals because there wasn't enough money for food?			
		YES1		
		NO2	GO TO F5	
		DON'T KNOW8	GO TO F5	
		REFUSED9	GO TO F5	
[ASK F4a.	IF F4=	e last 30 days, how many days did this happen?		
GO T	O F5	Number of days [RANGE 1-30]		
		DON'T KNOW88		
		REFUSED99	GO TO F5	
F4b.	Do yo	ou think it was one or two days, or more than two days?		
		ONE OR TWO DAYS1		
		MORE THAN TWO DAYS2		
		DON'T KNOW8		
		DON 1 KNOW		
		REFUSED9		
F5.			because there wasn't	
F5.		REFUSED9 e last 30 days, did you ever eat less than you felt you should	because there wasn't	
F5.		REFUSED9 e last 30 days, did you ever eat less than you felt you should gh money for food?	because there wasn't	
F5.		REFUSED9 e last 30 days, did you ever eat less than you felt you should gh money for food? YES	because there wasn't	
F5.		REFUSED	because there wasn't	
F5.	enou In the	REFUSED		
	enou In the	REFUSED		
	enou In the	REFUSED		
	enou In the	REFUSED		
	enou In the	REFUSED		

F7.	In the las	st 30 days, did you lose weight because there was	n't enough money for
	YE	S1	
	NO	2	
	DO	N'T KNOW8	
	RE	FUSED9	
PRO	GRAMMER	: IF AFFIRMATIVE RESPONSE TO ONE OR MORE (F4-F7, THEN CONTINUE TO F8. OTHERWISE, SKI	
F8.		30 days, did [you/you or other adults in your household] because there wasn't enough money for food?	ever not eat for a
	YE	S1	
	NO	2	GO TO F9
	DO	N'T KNOW8	GO TO F9
	RE	FUSED9	GO TO F9
[ASK F8a.	IF F8=1] In the last	: 30 days, how many days did this happen?	
		Number of days [RANGE 1-30]	
GO T	O F9		
	DO	N'T KNOW88	
	RE	FUSED99	GO TO F9
F8b.	Do you th	ink it was one or two days, or more than two days?	
	ON	E OR TWO DAYS1	
	MC	RE THAN TWO DAYS2	
	DO	N'T KNOW8	
	RE	FUSED9	

SELECT APPROPRIATE FILLS DEPENDING ON NUMBER OF ADULTS AND NUMBER OF CHILDREN IN THE HOUSEHOLD.

F9.	Now I'm going to read you several statements that people have made about the food situation of their children. For these statements, please tell me whether the statement was often true, sometimes true, or never true in the last 30 days for [your child/children living in the household who are under 18 years old or 18 or older but still in high school
	"[I/We] relied on only a few kinds of low-cost food to feed [my/our] [child/ children] because [I was/we were] running out of money to buy food." Was that often, sometimes or never true for your household in the last 30 days?
	OFTEN TRUE1
	SOMETIMES TRUE2
	NEVER TRUE3
	DON'T KNOW8
	REFUSED9
F10.	"[I/We] couldn't feed [my/our] child/children] a balanced meal, because [I/we] couldn't afford that." Was that often, sometimes, or never true for your household in the last 30 days?
	OFTEN TRUE1
	SOMETIMES TRUE2
	NEVER TRUE3
	DON'T KNOW8
	REFUSED9
[MUL	GLE ADULT/SINGLE CHILD: My child was] TIPLE ADULTS/SINGLE CHILD: Our child was] GLE OR MULTIPLE ADULTS/MULTIPLE CHILDREN: The children were] "[My child was /Our child was/The children were] not eating enough because [I/we] just couldn't afford enough food." Was that often, sometimes, or never true for your household in the last 30 days?
	OFTEN TRUE1
	SOMETIMES TRUE2
	NEVER TRUE3
	DON'T KNOW8
	REFUSED9

PROG	GRAMMER:	IF AFFIRMATIVE RESPONSE (I.E., "OFTEN TRUE") TO ONE OR MORE OF QUESTIONS F9-F1 TO F12. OTHERWISE, SKIP TO G1.	
F12.		30 days, did you ever cut the size of [your child's/any o ere wasn't enough money for food?	f the children's] meals
	YES	1	
	NO	2	
	DON	'T KNOW8	
	REF	USED9	
F13.		30 days, did [your child/any of the children] ever skip mugh money for food?	eals because there
	YES	1	
	NO	2	GO TO F14
	DON	'T KNOW8	GO TO F14
	REF	USED9	GO TO F14
-	IF F13=1]	30 days, how many days did this happen?	
		Number of days [RANGE 1-30]	GO
TO F1		Number of days [RANGE 1-30]	GO
	. 4 DON	Number of days [RANGE 1-30] 'T KNOW88	
	. 4 DON	Number of days [RANGE 1-30]	
	.4 DON REF	Number of days [RANGE 1-30] 'T KNOW88	
TO F1	.4 DON REF	Number of days [RANGE 1-30] 'T KNOW88 USED99	
TO F1	.4 DON REF	Number of days [RANGE 1-30] 'T KNOW	
TO F1	.4 DON REF Do you thin ONE	Number of days [RANGE 1-30] 'T KNOW	
TO F1	DO you thin ONE MOR	Number of days [RANGE 1-30] 'T KNOW	
TO F1	DON REF	Number of days [RANGE 1-30] 'T KNOW	GO TO F14
TO F1	DO YOU thin ONE MOR DON REF	Number of days [RANGE 1-30] 'T KNOW	GO TO F14
TO F1	DO You thin ONE MOF DON REF	Number of days [RANGE 1-30] 'T KNOW	GO TO F14
TO F1	DO You thin ONE MOF DON REF	Number of days [RANGE 1-30] T KNOW	GO TO F14

1/5/2012

ause there wasn't enough money for food? YES1	
NO2	
DON'T KNOW8	
REFUSED9	

1/5/2012

SECTION G: PROGRAM PARTICIPATION – HOUSEHOLD

G1.	Next, I'm going to read the names of some programs that provide food or meals to individuals or households.
G1.1	In the last 30 days that is since [DATE OF INTERVIEW -30 DAYS], did you or anyone in your household receive food or benefits from the Women, Infants and Children program called WIC?
	YES1
	NO2 GO TO G1.3
	DON'T KNOW8 GO TO G1.3
	REFUSED9 GO TO G1.3
G1.2a	How many women or children in the household got WIC foods or benefits?
	Number of women or children [RANGE 1-20]
	DON'T KNOW88 GO TO G1.3
	REFUSED99 GO TO G1.3
[ASK G1.2ba	IF G1.2A=1] a Is that person who got WIC foods or benefits an infant less than 1 year old?
	YES1 [CODE AS 1 IN G1.2B]
	NO2
	DON'T KNOW88
	REFUSED99
	F G1.2A>1 AND NOT DK/REF] How many of those [NUMBER FROM G1.2a] people who got WIC foods or benefits are infants less than 1 year old? Number of infants [RANGE 0-20]
	DON'T KNOW88
	REFUSED99
CREA	TE PROGRAMMED VARIABLE COMBINING G1.2BA AND G1.2B

G1.3	In the last 30 days did you or anyone in your household receive food or meals from food pantries, food banks, local soup kitchens or emergency kitchens? YES
G2.	Are you [IF MULTIPLE PEOPLE IN HOUSEHOLD: or others in your household] currently receiving [FILL STATE SNAP PROGRAM NAME] benefits? YES
G3.	How long have you (and your household) been receiving [FILL STATE SNAP PROGRAM NAME] benefits? RANGE 1 - 1 DAYS [RANGE 1-365] 2 WEEKS [RANGE 1-52] 3 MONTHS [RANGE 1-12] 4YEARS [RANGE 1-50] 888 DON'T KNOW/NOT SURE 999 REFUSED

1/5/2012

G4.	What is the amount of the [FILL STATE SNAP PROGRAM NAME] benefits (you receive/your household receives) per month?
	Enter amount [\$1 - \$9999]
	DON'T KNOW8
	REFUSED9
G5.	How many weeks do your [FILL STATE SNAP PROGRAM NAME] benefits usually last?
	[CODE ANY ANSWER GREATER THAN 8 WEEKS AS 8]
	Enter number of weeks (range 0-8)
	DON'T KNOW88
	REFUSED99
G6.	Do you (or others in your household) currently receive monthly commodity foods as part of the Food Distribution Program on Indian Reservations (FDPIR [fid-purr])?
	YES1
	NO2
	DON'T KNOW
	REFUSED9
G7.	Please tell me if you have access to a working refrigerator to store food you get for your household?
	YES 1
	NO2
	DON'T KNOW8
	REFUSED9

[ASK ALL]

SECTION H: SHOPPING AND EATING BEHAVIOR - HOUSEHOLD

Now, I'd like to ask some questions about shopping for food and eating at restaurants.

H1. First I'll ask you about money spent at supermarkets and other stores. Then we will talk about money spent at fast food restaurants and other restaurants.

Excluding any purchases made with government benefits like SNAP or WIC, since [DATE (DATE OF INTERVIEW –30 DAYS)] how much money [did your family/did you] spend out of pocket at <u>supermarkets</u>, <u>grocery stores</u>, <u>and other stores</u>? Please do <u>not</u> include fast food restaurants and other types of restaurants. (You can tell me per week or per month.)

PROBE: This includes stores such as Wal-mart, Target, and Kmart, convenience stores like 7-11 or Mini Mart, stores like Costco or Sam's Club, dollar stores, bakeries, meat markets, vegetable stands, or farmer's markets.

[RECORD "0" IF NO MONEY WAS SPENT]

0NO MONEY SPENT	GO TO H4
1 PER WEEK [RANGE \$1-\$9,999]	
2 PER MONTH [RANGE \$1-\$9,999]	
8 DON'T KNOW/NOT SURE	GO TO H4
9 REFUSED	GO TO H4

H2. Was any of this money spent on <u>nonfood items</u> such as cleaning or paper products, pet food, cigarettes or alcoholic beverages?

YES1	
NO2	GO TO H4
DON'T KNOW8	GO TO H4
REFUSED9	GO TO H4

H3. About how much money was spent on nonfood items? (You can tell me per week or per month.) PROGRAMMER: AMOUNT CANNOT BE MORE THAN THE AMOUNT ENTERED ON **OUESTION H1.** [RECORD "0" IF NO MONEY WAS SPENT] 0 NO MONEY SPENT 1 PER WEEK [RANGE \$1-\$9,999] 2 PER MONTH [RANGE \$1-\$9,999] 8 DON'T KNOW/NOT SURE 9 REFUSED H4. [IF G1.1=1:] Did the [AMOUNT REPORTED AT H1] you spent on food include purchases made with your household's WIC fruit & vegetable voucher? YES.....1 NO......2 DON'T KNOW......8 REFUSED......9 [IF G2=1:] Did the [AMOUNT REPORTED AT H1] you spent on food include purchases made with your household's SNAP Benefits? YES......1 NO......2 DON'T KNOW......8 REFUSED......9

H6. During the last 30 days, how many times did your family <u>eat food from a fast food restaurant?</u> Include fast food meals at home, or at fast food restaurants, carryout, or drive thru. (You can tell me per week or per month.)

[IF NEEDED, SAY: "SUCH AS FOOD YOU GET AT MCDONALD'S, KFC, PANDA EXPRESS, OR TACO BELL."]

- 0 NEVER
- 1__ PER WEEK [RANGE 1-99]
- 2 PER MONTH [RANGE 1-99]
- 8 DON'T KNOW/NOT SURE
- 9 REFUSED
- H7. During the last 30 days, how many times did your family <u>eat food at other kinds of restaurants</u>? (You can tell me per week or per month.)

[IF NEEDED, SAY: "SUCH AS FOOD YOU GET AT APPLEBEE'S, CHILI'S, TGI FRIDAYS, ETC."]

- 0 NEVER
- 1 PER WEEK [RANGE 1-99]
- 2 PER MONTH [RANGE 1-99]
- 8 DON'T KNOW/NOT SURE
- 9 REFUSED

[PROGRAMMER: IF H6 AND H7=0, GO TO I1]

- H8. About how much money [did your family/did you] spend on <u>food at all types of restaurants</u> including fast food restaurants during the last 30 days? (You can tell me per week or per month.)
 - 0 NO MONEY SPENT
 - 1 PER WEEK [RANGE \$1-\$9,999]
 - 2__ PER MONTH [RANGE \$1-\$9,999]
 - 8 DON'T KNOW/NOT SURE
 - 9 REFUSED

SECTION I: CAREGIVER DEMOGRAPHICS

I1. Now, I have a few questions about you.

[RECORD GENDER FROM OBSERVATION.]

ONLY IF NECESSARY - ASK: Because it is sometimes difficult to determine over the phone, I am asked to confirm with everyone...Are you male or female?]

MALE	1
FEMALE2	
DON'T KNOW8	
REFUSED9	

12. What is your relationship to [CHILD NAME]?

READ ONLY IF NECESSARY: Are you [CHILD NAME's]...

BIOLOGICAL/ADOPTIVE PARENT	1
STEP-PARENT	2
GRANDPARENT	3
GREAT GRANDPARENT	4
SIBLING/STEPSIBLING	5
OTHER RELATIVE OR IN-LAW	6
FOSTER PARENT	7
OTHER NON-RELATIVE	8
PARENT'S PARTNER	9
DON'T KNOW	88
REFUSED	99

24 1/5/2012

	Are you of Hispanic or Latino origin?
	YES1
	NO2
	DON'T KNOW8
	REFUSED9
1.4	
14.	I am going to read a list of five race categories. Please choose one or more races that you consider yourself to be. American Indian or Alaska Native; Asian; Black or African American; Native Hawaiian or other Pacific Islander; White?
	MARK ALL THAT APPLY
	AMERICAN INDIAN OR ALASKA NATIVE1
	ASIAN2
	BLACK OR AFRICAN AMERICAN3
	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER4
	WHITE5
	DON'T KNOW8
	REFUSED9
15 ^** > 1	. What is your current marital status?
	. What is your current marital status? ou now married, divorced, separated, widowed, never married, or living with a partner?
	ou now married, divorced, separated, widowed,
	ou now married, divorced, separated, widowed, never married, or living with a partner?
	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED1
	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED
	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED
	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED
	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED
	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED
Are y	ou now married, divorced, separated, widowed, never married, or living with a partner? MARRIED

PROGRAMMER: MUST BE OLDER THAN 18. IF NOT ASK:

I6a. You said your date of birth is [INPUT ANSWER FROM I6), is this correct?

YES1	
-	
NO2	REPEAT 16

17. What is the <u>highest</u> grade or level of school you have <u>completed</u> or the <u>highest</u> <u>degree</u>

you have received?

[ENTER HIGHEST LEVEL OF SCHOOL.]

NEVER ATTENDED/KINDERGARTEN ONLY0
1ST GRADE1
2ND GRADE2
3RD GRADE3
4TH GRADE4
5TH GRADE5
6TH GRADE6
7TH GRADE7
8TH GRADE8
9TH GRADE9
10TH GRADE10
11TH GRADE11
12TH GRADE, NO DIPLOMA12
HIGH SCHOOL GRADUATE13
GED OR EQUIVALENT14
SOME COLLEGE, NO DEGREE15
ASSOCIATE DEGREE: OCCUPATIONAL, TECHNICAL, OR VOCATIONAL PROGRAM16
ASSOCIATE DEGREE: ACADEMIC PROGRAM17
BACHELOR'S DEGREE (EXAMPLE: BA, AB, BS, BBA)18
MASTER'S DEGREE (EXAMPLE: MA, MS, MEng, MEd, MBA)19
PROFESSIONAL SCHOOL DEGREE (EXAMPLE: MD, DDS, DVM, JD)20
DOCTORAL DEGREE (EXAMPLE: PhD, EdD)21
DON'T KNOW88
REFUSED99

l8.	The next questions are about your current job or business. Were the last 30 days that is, since [DATE (DATE OF INTERVIEW -30	
	YES1	GO TO I10
	NO2	
	DON'T KNOW8	
	REFUSED9	
19.	Was any other adult in the household working for pay in the last 3 [DATE (DATE OF INTERVIEW -30 DAYS)]?	30 days <mark>that is, since</mark>
	YES	1
	NO2	
	DON'T KNOW8	
	REFUSED9	
l10.	What was your household's total income <u>last month</u> , <u>during [MON MONTH -1)]</u> before taxes? Please include all types of income recomembers last month, including all earnings, Social Security, pensicash welfare benefits such as TANF (<i>TAH-nif</i>) and SSI. Do not in SNAP benefits or food stamps, WIC, Medicaid, or public housing.	eived by all household ions, child support, and iclude the value of
	NO INCOME	0 GO TO I12
	GAVE ANSWER1 [RANGE \$1 – 99,999] GO	TO I12
	GAVE ANSWER1 [RANGE \$1 – 99,999] GO DON'T KNOW8	TO I12
	·	TO I12
l11.	DON'T KNOW8	
l11.	DON'T KNOW8 REFUSED9	
l11.	DON'T KNOW	
I11.	DON'T KNOW	
l11.	DON'T KNOW	
l11.	DON'T KNOW	
l11.	DON'T KNOW	

l12.	And, what was your household's total income <u>last year</u> before taxes? Please include all types of income received by all household members last year, including all earnings, Social Security, pensions, child support, and cash welfare benefits such as TANF (<i>TAH-nif</i>) and SSI. Do not include the value of SNAP benefits or food stamps, WIC, Medicaid, or public housing.
	NO INCOME 0 GO TO I14
	GAVE ANSWER1 [RANGE \$1 – 999,999] GO TO I14
	DON'T KNOW8
	REFUSED9
I13.	Please stop me when I reach your household's total income for last year . Was it
	Less than \$10,000,1
	\$10,000 to \$19,999,2
	\$20,000 to \$34,999,3
	\$35,000 to \$49,999,4
	\$50,000 to \$74,999,5
	\$75,000 to \$99,999,6
	\$100,000 to \$149,999 or,7
	\$150,000 or more?8
	DON'T KNOW88
	REFUSED99
l14.	Has a doctor or other health care professional ever told you or anyone in your household that they had a disability? By disability, I mean a physical or mental impairment. YES
	NO2
	DON'T KNOW8
	REFUSED9

SECTION J: ADDITIONAL CONTACT INFORMATION

QUALIFIED LEVEL 6: REACHES J1

- J1. [IF NOT INBOUND CALL FROM IN-PERSON INTERVIEWER:] Thank you very much for your time. You have helped us greatly with this important study. I'd like to confirm your address so we can send you a \$10 VISA gift card within the next few weeks.
- J1. [IF INBOUND CALL FROM IN-PERSON INTERVIEWER:] Thank you very much for your time. You have helped us greatly with this important study. The field interviewer will give you your \$10 VISA gift card. While we have you on the phone, we would like to confirm your mailing address.

	your mailing address.
[ASK /	ALL:] According to our records we have [IF A3=1, FILL NAME FROM FILE. ELSE, FILL FROM A4.1] [FILL STREET ADDRESS FROM SAMPLE FRAME] [FILL CITY, STATE, ZIP CODE FROM SAMPLE FRAME]
	NAME AND ADDRESS IS CORRECT
	CITY:
	STATE:
	ZIP CODE:
J2.	We would also like to conduct a follow up interview in a couple of weeks to see how you are doing during the summer. You will receive a \$25 VISA gift card for participating in that interview.
	In case we can't reach you at this number, is there another number we should try?
	PHONE NUMBER: _ - - - - - - - -
	NO ADDITIONAL PHONE AVAILABLE1
	(VOL) GAVE INTERNATIONAL PHONE NUMBER2
	REFUSED TO PARTICIPATE IN FOLLOW-UP INTERVIEW9 \rightarrow GO TO END

.a.		
	HOME1	
	CELL2	
	WORK3	
	OTHER, SPECIFY4	
	DON'T KNOW8	
	REFUSED9	
2.b.	. Please give me an email address that we can reach you at?	
	EMAIL ADDRESS:	
	NO EMAIL ADDRESS AVAILABLE2	
	DON'T KNOW8	
	REFUSED9	
3.	In case we have trouble reaching you in a couple of weeks, please give and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING]	u could be
3.	and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING]	u could be
3.	and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME:	u could be
3.	and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	u could be
3.	and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME:	u could be
3.	and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	u could be
3.	and telephone number of a relative or friend who would know where yo reached.(Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	u could be
3.	and telephone number of a relative or friend who would know where yo reached. (Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	u could be
3.	and telephone number of a relative or friend who would know where yo reached. (Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	ou could be ne household.
	and telephone number of a relative or friend who would know where yo reached. (Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	ou could be ne household
	and telephone number of a relative or friend who would know where yo reached. (Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME: DON'T KNOW	ou could be ne household
	and telephone number of a relative or friend who would know where yo reached. (Please give me the name of someone not currently living in the [BE SURE TO VERIFY SPELLING] ENTER FIRST NAME:	ou could be ne household

J5. A	and what is [NAME FROM ABOVE]'s r	erationship to you?	
	RELATIONSHIP:		
	DON'T KNOW	8	
	REFUSED	9	
Thank yo speaking	ou again for your help and have a good g with you again during the summer wh	d day/good evening. We look forward to en you will be eligible for a \$25 VISA gift	card.