APPENDIX T.1

WIC ITFPS-2 Participant Interview

Baseline - English

 (to be administered with first interview,

at prenatal, 1 month, or 3 months)

*Note that these questions would be integrated into the first interview in the appropriate content sections, but are shown separately here to identify the baseline questions.*

**SOCIODEMOGRAPHICS AND BACKGROUND**

***US or foreign born***

*Baseline*

SD13. Were you born in the United States? [Source: WIC IFPS-1]

Yes 01

No 02

***Marital status***

*Baseline, 13*

SD14. Are you married, separated, divorced, widowed, or never married? [Source: WIC IFPS-1]

Married 01

Separated 02

Divorced 03

Widowed 04

Never Married 05

Don’t know 98

Refused 99

***Parity***

*Baseline*

SD15. Thinking about your pregnancies before (*PN*: this one/*1 or 3*: {CHILD}), how many of these pregnancies resulted in a live birth? [Source: WIC IFPS-1]

Number of live births [number]

***Interpregnancy Interval/Interpartum Period***

*Baseline*

*Ask only if answer to SD15 is >0.*

SD42. Now thinking about the children you have given birth to (*PN:* before this pregnancy/*1 or 3:* other than {CHILD}), what is your youngest child’s birthdate?

a. First tell me the year

Year [number]

b. What month was that child born?

Month [January – December]

c. And what day of the month?

Day [1-31]

***Number of children in Household***

*Baseline*

SD43. How many of the people who live in your household are under the age of 18? Please include all of the people under age 18 who stay with you all or most of the time (*PN:* andplease add 1 to the total for your pregnancy, too/*1 or 3 mo:* and please be sure to include {CHILD}, too).

Total household members under age 18 [number]

Don’t know 98

Refused 99

***Presence of infant's father***

*Baseline, 13*

SD20. [*PN*: Is the father of your unborn child/*1, 3, 13*: Is {CHILD’s} father] living in your household? [Source: WIC IFPS-1, modified]

Yes 01

No 02

Don’t know 98

Refused 99

***Receipt of public assistance***

*Baseline, 13, 24-month bonus*

SD21. Are you or your family currently receiving any of the following: [Source: WIC IFPS-1; modified]

a. Supplemental nutrition assistance benefits, sometimes called SNAP or Food Stamps?

Yes 01

No 02

Don’t know 98

b. Temporary assistance to needy families, sometimes called TANF or welfare?

Yes 01

No 02

Don’t know 98

c. Are you receiving Medicaid or [state specific name for medicaid]?

Yes 01

No 02

Don’t know 98

d. Are any children in your household receiving free or reduced price meals from the National School Lunch or School Breakfast Program, or the Summer Foods Program?

Yes 01

No 02

Don’t know 98

***Prior WIC Receipt***

*Baseline*

**SD23.** **Before** (*PN:* This pregnancy/*1 or 3:* {CHILD}), have you ever received benefits from **WIC?** [Source: New Development]

Yes 01

No 02

***Past Children on WIC***

*Baseline*

SD24. (*If yes to SD23*) Thinking of your other children, how many of them have received food from WIC? [Source: New Development]

number of children [number]

***Duration of prior WIC receipt***

*Baseline*

SD25. (*If prior WIC receipt*) In total, how many years have you or your children received WIC services? Would you say it has been less than a year, 1-2 years, 3-4 years, or 5 or more years? [Source: New Development]

Less than 1 year 01

1-2 years 02

3-4 years 03

5 or more years04

***Educational attainment***

*Baseline, 24 months*

SD26. What is the highest year or grade you finished in school? [Source: FITS 2002; modified]

 *(do not read – endorse based on participant response, probe if needed)*

NEVER ATTENDED SCHOOL 01

GRADES 1 TO 11, ENTER NUMBER 02

High school diploma or GED 03

Some college/some postsecondary vocational courses 04

2-year or 3-year college degree (AA degree)

or vocational school diploma 05

4-year college degree (BA, BS degree) 06

Some graduate work/no graduate degree 07

Doctoral or graduate degree (MA, MBA, PhD, JD, MD) 08

DON’T KNOW 98

REFUSED 99

**MATERNAL HEALTH AND LIFESTYLE**

***Father’s weight***

*Baseline*

*(at 1 and 3 months will be integrated into interview after mother’s current weight)*

MH7. Thinking of [*PN*: your unborn child’s/ *1 or 3*: {CHILD’S}] biological father, would you say he is too thin, normal weight or overweight? [Source: CHIRP Study; modified]

Too thin 01

Normal weight 02

Overweight 03

Don’t know 98

Refused 99

***Maternal smoking during pregnancy***

*Baseline*

MH8. During your pregnancy with {CHILD}/(*PN:* currently), about how many cigarettes did you smoke/(*PN*: do you smoke) on an average day? Just your best estimate is fine. [Source: PHFE WIC 2010 Postpartum Questionnaire; modified]

Number of cigarettes [number]

*Note that 1 pack = 20 cigarettes*

***Alcohol during pregnancy***

*Baseline*

MH9. *(1 and 3:* During your pregnancy with {CHILD} how often did you /*PN*: Currently, how often do you) drink alcoholic beverages, such as beer wine or liquor? Would you say never, less than once a week, 1-4 days a week or 5 or more days a week? [Source: PHFE WIC Postpartum Questionnaire; modified]

5 or more days a week 01

1-4 days a week 02

Less than once a week 03

Never 04

Refused 99

**EXPERIENCE, KNOWLEDGE, ADVICE, BELIEFS**

***Past infant feeding practices***

*Baseline*

*If this is the mother’s first child based on SD15, skip KA1-KA8.*

KA1. Did you breastfeed (*If 1 other child based on SD15:* your other child/*If more than 1 other child based on SD15:* any of your other children) even just one time? [Source: WIC IFPS-1; modified]

Yes 01

No 02

Don’t Know 98

*If 1 other baby, based on parity question from sociodemographics (SD15) ask KA2-4:*

KA2. (*If 1 other child*): How old was your other child when you stopped breastfeeding? [Source: WIC IFPS-1; modified]

Age [weeks/months/years]

KA3. (*If 1 other child*) How old was your other child the first time you fed him/her infant cereal, store-bought baby food in a jar or container, or homemade pureed baby food? When thinking about the first time you fed any of these things, please be sure to include infant cereal you might have added to your other child’s bottle. [Source: New Development]

Age [weeks/months/years]

Not applicable 97

KA4. (*If 1 other child*): How old was your other child the first time you fed him/her table foods, like fruits, vegetables, or any other table food? [Source: New Development]

Age [weeks/months/years]

Not applicable 97

*If more than 1 other baby, based on parity question from sociodemographics (SD15) ask KA5-7):*

KA5. (*If more than 1 other child*): How many of your other children did you breastfeed? [Source: WIC IFPS-1; modified]

Number of children [number]

KA6. (*If more than 1 other child*): Thinking of the child you breastfed the longest, how old was he or she when you stopped breastfeeding? [Source: WIC IFPS-1; modified]

Age [weeks/months/years]

KA7. (*If more than 1 other child*): Thinking of all your other children, what was the earliest age that you fed infant cereal, store-bought baby food in a jar or container, or homemade pureed baby food to any of your other children? When thinking about the first time you fed any of these things, please be sure to include infant cereal you might have added to your children’s bottles. [Source: New Development]

Age [weeks/months/years]

Not applicable 97

KA8. (*If more than 1 other child*): Thinking of all your other children, what was the earliest age that you fed table foods like fruits, vegetables, or any other table foods to any of them? [Source: New Development]

Age [weeks/months/years]

Not applicable 97