**APPENDIX T.1** 

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## 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	

#### 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	
Never Married	05
Don't know	
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.

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# **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]

#### N**umber 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*: and please 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	
Refused	

#### **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	
Refused	

#### 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	

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

Yes.....01

	No	
	Don't know	
c.	Are you receiving Medicaid or [state specific name for medicaid]?	
	Yes	01
	No	
	Don't know	
d.		receiving free or reduced price meals from the reakfast Program, or the Summer Foods

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	

#### **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	
5 or more years	
5	

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	
Don't know	
Refused	
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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	
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/vears]
Not applicable	
11	

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/vears]
Not applicable	5