

Attachments 4B-3 and 4B-4

FLASHE Teenager Cognitive Interview Guides

**4B-3: Cognitive Interview Guide
Teenager Diet and Demographics Surveys** **Page 2**

**4B-4: Cognitive Interview Guide
Teenager Physical Activity Surveys** **Page 13**

NOTE: Teenagers will be randomized to complete either the Diet and Demographics or the Physical Activity Surveys.

Attachment 4B-3: FLASHE Teenager Diet and Demographics Surveys Cognitive Interview Guide

Thank you for agreeing to help us out today. My name is _____ and I work for Westat, a survey research company in Rockville, MD. Let me give you a little background information about what we'll be doing today. Westat is working with the National Cancer Institute to develop a new survey about diet and physical activity. Before we conduct surveys, we first test them with the help of people such as you. This is to make sure the questions are easy to understand and to answer. That is how you will help us out today -- by going through the survey and sharing some of your reactions with us; it will help make sure the questions are easy to understand.

Your particular survey answers are not the focus of interest. Instead, I will be asking you about things such as how well you understand what the questions are asking, and whether or not certain words and response categories are clear and appropriate. Your input will help us to correct any problems or make improvements before launching the survey at a later date.

Before we start, there are a few things I need to mention:

- This is a research project, and your participation is voluntary. If you prefer not to answer certain questions, just tell me and I'll go on to the next one. You may stop the interview at any time.
- The information you provide today will be confidential and your name or other personal facts that would identify you will not be used when we discuss, or write about this study.
- The interview will take about 90 minutes and we'll pay you \$50 for your assistance today.
- If it's alright with you, I'd like to audio record our interview, so that I don't have to take a lot of notes while we're talking, and can still get an accurate record of what you tell me. The recording will be stored on a secure network drive, only project staff will have access to the information you share with us, and we'll destroy the tape after our project is finished.

HAND ASSENT FORMS TO RESPONDENT AND CONSENT FORM TO PARENT

This form contains all of the things I just told you about your rights in this interview. Please read it over and sign it if you are willing to take part in the study.

HAVE R SIGN TWO CONSENT FORMS, KEEP ONE AND RETURN ONE TO I'ER

EXCUSE PARENT FROM ROOM AT THIS TIME. THE INTERVIEW SHOULD BE CONDUCTED WITH THE YOUTH ONLY.

START AUDIO RECORDER, STATE DATE AND TIME, REQUEST PERMISSION TO RECORD

I'ER: NOTE ANY PROBLEMS R HAS WITH SKIP INSTRUCTIONS OR LANGUAGE LEVEL. IF APPROPRIATE, PROBE FURTHER ON THESE ISSUES.

Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. Refusal to participate will not affect your benefits in any way. The information collected in this study will be kept private under the Privacy Act. Names and other identifiers will not appear in any report of the study. Information provided will be combined for all study participants and reported as summaries. You are being contacted by telephone to complete this instrument so that we can identify potential sources of measurement or response error. The purpose of this instrument is to examine psychosocial, generational, and environmental correlates of cancer preventive behaviors.

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0642). Do not return the completed form to this address.

Introduction

HAVE RESPONDENT READ THE SURVEY INTRODUCTION

What reactions, if any, did you have to the survey introduction?

Was there anything unclear or confusing?

What do you think the survey is going to be about?

In the blue box at the top: What do you think “as well as other factors” means here?

Who will the survey be asking questions about? IF NEEDED, Will the questions be about anyone besides you?

SECTION 1 – Your Attitudes and Opinions

Q1. About how many servings of fruits and vegetables do you think a person should eat each day for good health?

In your own words, describe for me what you think a “serving” is.

Q2. Please mark how much you disagree or agree with each of the statements listed below.

Tell me how you came up with your answer.

Item “c” – *Tell me more about your answer here. IF NEEDED, How do your friends encourage you?*

Q3. There are lots of reasons why people would eat fruits and vegetables every day. Please mark how much you disagree or agree with each of the statements listed below. I would eat fruits and vegetables every day because...

How did you come up with your answers to these items?

INTERVIEWER NOTE: Try to determine if respondent eats fruits and vegetables at all, and if not, how easy or difficult it is to answer these items.

Item “c” -- *Can you give me an example of what you were thinking about when you answered item c? What does “failed” mean to you here?*

Q4. There are lots of things that can prevent people from eating fruits and vegetables as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't eat fruits and vegetables as much as I like to because...

What is this question asking?

PRESENT SHOW CARD WITH THREE VERSIONS OF QUESTION STEM ('prevent', 'stop,' 'keep from')¹. There are a few different ways we could ask this question. Please look at these and tell me, do you think these three questions mean the same thing? Which is easiest for you to understand? Tell me more about your answers.

Item “c” – *What were you thinking of when you answered {x} at item c?*

INTERVIEWER NOTE: How is the respondent interpreting “spoil”?

Item “f” -- *Who were you including as “family” in item f?*

Q5. Please mark how much you disagree or agree with each of the statements listed below.

Tell me in your own words what item “a” is asking. If this read “I feel confident in my ability to cut down on the amount of junk food and sugary drinks I eat and drink every day” would your answer be different? What makes you say that?

- Item “c” – *Tell me more about your answer here. IF NEEDED, How do your friends encourage you?*

Q6. There are lots of reasons why people would try to limit the amount of junk food and sugary drinks they have. Please mark how much you disagree or agree with each of the statements listed below. I would try to limit how much junk food and sugary drinks I have because...

How did you come up with your answers to these items?

¹ See page 12 for the three versions which will be formatted as a show card.

Item “b” -- *Can you give me an example of what you were thinking about when you answered item b? What does “failed” mean to you here?*

Q7. There are lots of reasons why people start eating or continue eating when they aren't hungry. How often do you start or continue to eat when you're not hungry because...

How did you come up with your answers here?

INTERVIEWER NOTE: Listen for whether respondents are confused about including both starting to eat and continuing to eat. Probe on this issue as needed.

Q8. Please think about messages you see or hear on television, magazines, radio, Internet or billboards about foods and drinks. Please mark how much you disagree or agree with each of the statements listed below. When I see advertisements for foods or drinks...

SECTION 2 – Your Preferences

Q9. Please mark how much you dislike or like each of the drinks listed below.

Item “a” – *What are some other examples you might include in this list?*

Item “b” – *In your own words, what's the different between sweetened fruit drinks and 100% pure fruit juice?*

Item “c” – *Which brands do you drink or eat?*

Item “d” – *What are some other examples you would include here?*

Item “e” – *In your mind, do you think there's a difference between energy drinks and sports drinks? What are some other examples you would include here?*

Item “f” – *Tell me more about your answer. What, if anything on this list is unfamiliar to you?*

Item “g” – *Tell me more about your answer here. IF NEEDED, What are some examples of the types of water you would include here?*

Q10. Please mark how much you dislike or like each of the foods listed below.

Item “h” – *What other kinds of foods that you heat or serve, if any, were you thinking of when you answered this question? IF NEEDED, What other kinds of foods can you think of that would fit in this category?*

Item “i” – *What other kinds of foods like this, if any, were you thinking of when you answered this question? IF NEEDED, What other kinds of foods can you think of that would fit in this category?*

Item “j” – *What other kinds of processed meat, if any, were you thinking of when you answered this question? IF NEEDED, What other kinds of foods can you think of that would fit in this category?*

Q11. Please mark the foods and drinks you never eat or drink. Please mark all that apply.

Q12. Think about the foods you never eat. Why don't you eat them? Please mark all that apply.

What other reasons do you, or would others never eat certain foods?

SECTION 3 – Food Away from Home

Q13. Think about all the meals and snacks you ate and drank away from home in the past 7 days, from the time you got up until you went to bed. Please count breakfast, lunch, dinner and snacks. During the past 7 days, on how many days did you eat at least one meal or snack from...

For your answers to these items, were you thinking about where you actually ate in the past 7 days, or were you thinking about where you usually eat?

Item “d” – *What are some other examples of bagel or coffee shops?*

Item “g” – *What are some other examples of convenience stores?*

Item “h” – *What are some other examples of sit-down restaurants? In your mind, what's an “independent restaurant”?*

SECTION 4 – Food in Your Home

Q14. Please think about the evening meals you've eaten at home with your family in the past 7 days. On how many days was your evening meal or dinner...

Who were you including as “family” when answering this question?

Item “b” – *Tell me about your answer here. IF NEEDED, What do you think of as full service restaurants? What might be a better way to describe those kinds of restaurants? IF NEEDED, What about “sit-down restaurant” or “family-owned restaurant”?*

Q15. How often are the following foods and drinks available in your home?

SECTION 5 – Family Meals

Q16. Think about meal times with your family. Please mark how much you disagree or agree with each of the statements listed below. In my family...

Who were you including as “family” when answering this question?

SECTION 6 – What you Eat and Drink

Q17. During the past week, how often did you drink the following

For one each of a high, middle and low frequency item, *How did you come up with your answer here?*

INTERVIEWER NOTE: Listen for whether respondents are including foods eaten at home and away from home. If needed, probe on that issue.

Item “f” – *Do you drink coffee? IF YES, Describe for me the coffee you drink and what you put in it. Where do you usually get the coffee? IF NEEDED AND IF APPLICABLE, Do you buy these kinds of coffee drinks at the supermarket?*

Q18. When you drink milk, what type is it most of the time?

Tell me more about your answer here.

Q19. What kind of milk do you usually drink?

Tell me more about your answer here.

Q20. During the past week, how often did you eat the following

INTERVIEWER NOTE: The food examples are very important in this item series. Listen carefully to the foods respondents list when they talk about their answers. Probe where necessary to find out more about what kinds of foods their including at the sub-items you discuss with them.

For one each of a high, middle and low frequency item, *How did you come up with your answer here?*

INTERVIEWER NOTE: Listen for whether respondents are including foods eaten at home and away from home. If needed, probe on that issue.

Item “a” – *Tell me how you came up with your answer.*

INTERVIEWER NOTE: Listen for whether respondents are including fresh, frozen and canned in their answers. If needed, probe on that issue.

Item “e” – *What kinds of non-fried vegetables were you thinking of when you answered this question? IF NEEDED, What other kinds of vegetables can you think of that would fit in this category? In your mind, what is a “non-fried vegetable”?*

We have another version of this item we’re thinking of using, which reads “Other vegetables like carrots, broccoli, collards, green beans, corn, etc. Don’t count green salad, potatoes or fried vegetables.” Which version do you prefer? What makes you say that?

Item “j” – *What kinds of processed meats were you thinking of when you answered this question? IF NEEDED, What sandwich meats, if any, were you including? What were you not including?*

Item “o” – *What kinds of candies were you thinking of when you answered this question? IF NEEDED, What kinds of candies were you including? What were you not including?*

INTERVIEWER NOTE: Listen for whether respondents are thinking of both chocolate and non-chocolate candies.

Items “q” and “r” – *Do you think these two items should be combined? What makes you say that? Are you familiar with “pan dulce” (pronounced “pan dull-say”)? IF YES, Does it make sense to include it here?*

Item “s” -- *What kinds of yogurts were you including in your answer? What were you not including? What else should be listed here?*

Item “t” – *What kinds of ice cream were you including in your answer? What were you not including?*

Item “u” -- *What chips were you including in your answer? What didn’t you include? What are some other brand name examples you might put on this list?*

Item “v” – *What kinds of cereal were you including in your answer? What didn’t you include? What are some other brand name examples you might put on this list?*

Item “w” -- *What kinds of cereal were you including in your answer? What didn’t you include? What are some other brand name examples you might put on this list?*

Item “x” -- *What kinds of cereal were you including in your answer? What didn’t you include? What are some other brand name examples you might put on this list?*

INTERVIEWER NOTE: Listen for whether respondent is confused about the difference among sugary cereals, non-sugar coated cereals and hot cereals. Probe further as needed on this issue.

SECTION 7 – Your Parents

Q21. Think about what your parent(s) say and do when it comes to eating fruits and vegetables. How often is each statement true for you?

Item “d” or “e” – Tell me more about your answer here. IF NEEDED, How do your parent(s) encourage you?

Item “j” – Tell me more about your answer. What if we asked instead “My parents are supposed to make rules about how many fruits and vegetables I eat”, would your answer change? What makes you say it {would/wouldn’t} change?

Q22. Think about what your parent(s) say and do when it comes to eating junk food or drinking sugary drinks. How often is each statement true for you?

For two of items “d”, “g”, “h” or “i”, Tell me how you came up with your answer here.

INTERVIEWER NOTE: Listen for how respondent answers the negatively worded items in this series and explore how well their explanations match the selected answers.

Item “g” – We have another version of this item, which means “If my parents don’t monitor, I will eat too much junk food or drink too many sugary drinks.” Which version do you prefer? Tell me what makes you say that.

Q23. Now think in general about your relationship with your parent(s). Please mark how much you disagree or agree with each of the statements listed below.

Item “a” – Tell me more about your answer here. IF NEEDED, What does “family rules” mean to you?

Item “d” – Tell me more about your answer. IF NEEDED, Say more about what it means for you to “behave”. Say more about what it means for you to “be in trouble” with your parents.

Item “h” – What do you think is meant by “things” here?

General Information About You

Q1. What is your age?

Q2. Are you male or female?

Q3. What grade are you in?

Q4. During the past school year, what kind of school were you enrolled in?

Q5. Are you Hispanic, Latino/a or Spanish origin?

Q6. Which one or more of the following would you say is your race? Please mark all that apply.

Q7. Were you born in the United States?

Q8. If not, in what year did you come to the United States to stay?

Q9. What languages do you speak at home? Please mark all that apply.

Q10. How would you rate your ability to read?

Q11. How often do you need help reading information from your doctor or pharmacy?

Tell me more about your answer here. IF NEEDED, Do you generally read information that comes from your doctor or with prescriptions you take, or do your parents tend to do that?

Q12. How many hours a week do you get paid to work?

Q13. In general, would you say your health is...

Q14. What is your height and weight without shoes?

Q15. Overall, how would you rate your current weight?

What do you think this question is asking? In your mind, what are the differences among the different answer choices?

Q16. Are you currently trying to...

Q17. I eat a healthy diet.

Q18. I stay at a healthy weight.

Q19. People tease me about my weight.

FINAL PROBES

What did you include as “junk food and sugary drinks” when you were answering the questions about those foods?

What are your impressions of the survey now that you’ve answered all the questions?

What do you think of the name of the survey?

IF NOT MENTIONED: What did you think of the appearance of the survey? IF NEEDED, What did you think of the color and layout?

Did you find it easy or difficult to complete? What made it easy/difficult?

What did you think of the length of the survey?

What other comments about the survey, which we haven’t already talked about, would you like to share with me?

CHECK WITH OBSERVERS, IF PRESENT

TURN OFF AUDIO RECORDER, THANK AND PROVIDE INCENTIVE

SHOW CARD

Q4. There are lots of things that can prevent people from eating fruits and vegetables as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't eat fruits and vegetables as much as I like to because...

Q4. There are lots of things that can stop people from eating fruits and vegetables as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't eat fruits and vegetables as much as I like to because...

Q4. There are lots of things that can keep people from eating fruits and vegetables as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't eat fruits and vegetables as much as I like to because...

Attachment 4B-4: FLASHE Teenager Physical Activity Survey Cognitive Interview Guide

Thank you for agreeing to help us out today. My name is _____ and I work for Westat, a survey research company in Rockville, MD. Let me give you a little background information about what we'll be doing today. Westat is working with the National Cancer Institute to develop a new survey about diet and physical activity. Before we conduct surveys, we first test them with the help of people such as you. This is to make sure the questions are easy to understand and to answer. That is how you will help us out today -- by going through the survey and sharing some of your reactions with us; it will help make sure the questions are easy to understand.

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- The information you provide today will be confidential and your name or other personal facts that would identify you will not be used when we discuss, or write about this study.
- The interview will take about 90 minutes and we'll pay you \$50 for your assistance today.
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I'ER: NOTE ANY PROBLEMS R HAS WITH SKIP INSTRUCTIONS OR LANGUAGE LEVEL. IF APPROPRIATE, PROBE FURTHER ON THESE ISSUES.

Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. Refusal to participate will not affect your benefits in any way. The information collected in this study will be kept private under the Privacy Act. Names and other identifiers will not appear in any report of the study. Information provided will be combined for all study participants and reported as summaries. You are being contacted by telephone to complete this instrument so that we can identify potential sources of measurement or response error. The purpose of this instrument is to examine psychosocial, generational, and environmental correlates of cancer preventive behaviors.

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0642). Do not return the completed form to this address.

INTRODUCTION

HAVE RESPONDENT READ THE SURVEY INTRODUCTION

What reactions, if any, did you have to the survey introduction?

Was there anything unclear or confusing?

What do you think the survey is going to be about?

In the blue box at the top: What do you think “as well as other factors” means here?

Who will the survey be asking questions about? IF NEEDED, Will the questions be about anyone besides you?

Did you notice the definition of “physical activity”?

What do you think of the definition of “parent”?

SECTION 1 – Physical Activity

Q1. Please mark how much you disagree or agree with each of the statements listed below. During a typical week...

What were you including as “exercise” in this question?

What does “exercise” mean to you in this question? To you, do you think “exercise” here means the same as “physical activity”?

Item “a” – Can you say more about how you came up with your answer? What does “most days” mean to you? What does “encourage” mean to you?

Item “b” – Can you say more about your answer here? In your own words, what does this question mean?

If this question asked you to think about the “past month” do you think it would have been easier, more difficult, or the same as answering for a “typical week”?

INTERVIEWER NOTE: Do respondents have an easier time with typical week than answering for the past month?

Q2. There are lots of things that can prevent people from exercising as much as they’d like to. Please mark how much you disagree or agree with each of the statements listed below. I don’t exercise as much as I’d like to because...

What is this question asking?

What were you including as “exercise” in this question?

What does “exercise” mean to you in this question? To you, do you think “exercise” here means the same as “physical activity”?

PRESENT SHOW CARD WITH THREE VERSIONS OF QUESTION STEM (‘prevent,’ ‘stop,’ ‘keep from’)². There are a few different ways we could ask this question. Please look at these and tell me, do you think these three questions mean the same thing? Which is easiest for you to understand? Tell me more about your answers.

Item “e” -- What were you thinking of when you answered {x} at item “e”? Would your answer have changed if it read “I don’t want to mess up the way I look”?

Item “g” -- Who were you including as “family” in item g?

Items “h” and “i” -- What is the difference, if any, between “I’m not athletic” and “I don’t have the skills” in your mind?

Q3. Please think about being physically active on most days of the week. Then please mark how much you disagree or agree with each of the statements listed below. If I were to be physically active on most days of the week it would...

² See page 24 for the three versions which will be formatted as a show card.

How did you come up with your answers to these items? What time period were you thinking of when you read “most days”?

Item “e” – Can you tell me more about your answer here? Would your answer change if it said “make me more good looking”?

Item “g” – Can you tell me more about your answer here? IF NEEDED: What does “make me better in” mean to you?

Q4. There are lots of reasons why people choose to exercise. Please mark how much you disagree or agree with each of the statements listed below. I would exercise most days of the week because...

How did you come up with your answers to these items? What time period were you thinking of when you read “most days of the week”?

Item “c” -- Can you give me an example of what you were thinking about when you answered item c? What does “failed” mean to you here?

Q5. Please mark how much you disagree or agree with this statement: I feel confident in my ability to exercise most days of the week.

Tell me how you came up with your answer?

What do you consider “most days of the week” to be? What would your answer be if it said “I feel confident in my ability to exercise regularly?” EXPLORE IF THE ANSWER WOULD BE DIFFERENT.

Q6. In the past school year, how often have you had homework assignments that limited the amount of time you had available for physical activity?

What time period were you thinking about when you answered this question? What does “past school year” mean to you? If you were answering this survey in January, what school year would you be answering for?

Q7. Please indicate if you have the following items in your home, yard or apartment complex and if you have them, how often you use each item.

How did you come up with your answers here? IF NEEDED, How easy or difficult was it to answer these questions? What makes it easy/difficult?

Item “d” -- What were you including as “sports equipment”?

Item “i” -- What were you including as “cardio equipment”?

Item “l” -- What were you including as an “active gaming system”?

Item “m” -- *When you were thinking of exercise videos what did you include? Were respondents including videos on the computer, youtube, On Demand or Netflix streaming?*

Item “n” -- *What were you thinking of when you read “room to play inside”?*

INTERVIEWER NOTE: Were respondents including videos on the computer or on youtube?

SECTION 2 – Getting To and From School

Q8. On how many days during the school week do you get to school by...

How did you come up with your answers here?

Q9. On how many days during the school week do you leave from school by...

How did you come up with your answers here?

How easy or difficult was it for you to answer these questions about getting to and from school?

Q10. Please mark how much you disagree or agree with each of the statements about walking and biking to school listed below. It is difficult for me to walk or bike to school (alone or with someone else) because...

How did you come up with your answers here?

SECTION 3 – Using Electronic Devices

Q11. On Weekdays (Monday – Friday), about how many hours per day do you use each electronic device?

Q12. On Weekends (Saturday & Sunday), about how many hours per day do you use each electronic device?

Tell me how you came up with your answer.

IF RESPONDENT MENTIONS COMPUTERS: What type of activities on the computer were you thinking about?

INTERVIEWER NOTE: Are respondents including internet surfing, streaming videos, or using smartphones when they think of computers?

IF RESPONDENT MENTIONS MOVIES: Can you tell me more about how you watch the movies?

INTERVIEWER NOTE: Is the respondent including movies on the internet, movies in theaters, movies on the TV, Netflix instant movies, movies on a tablet computer?

Which electronic devices, if any, were you unfamiliar with or surprised to see on this list?

What devices, if any, did you think should be added to this list?

What did you think about the examples given? Were they helpful? Are there any missing that you think should be included?

Q13. How many TVs are in your home?

Can you tell me how you came up with your answer here?

Q14. Do you have a TV in your bedroom?

Q15. There are lots of reasons why people choose to limit the amount of time they spend using electronic devices. Please mark how much you disagree or agree with each of the statements listed below. I would try to limit the amount of time I spend using electronic devices because...

Item "c" -- Can you give me an example of what you were thinking about when you answered item c? IF NEEDED, What does "failed" mean to you here?

Q16. Please mark how much you disagree or agree with the following statement: I feel confident in my ability to limit how much time I spend using electronic devices.

Tell me in your own words what this statement is asking. If this read "I feel confident in my ability to cut down how much time I spend using electronic devices" would your answer be different? What makes you say that?

Q17. My friends watch TV, play on the computer or play electronic games with me.

How did you come up with your answers to these items? What time period were you thinking of when you read "most days"?

INTERVIEWER INSTRUCTIONS: HAVE RESPONDENT BRIEFLY SKIM SECTIONS 4 AND 5 WITHOUT ANSWERING THE ITEMS.

SECTION 4 – Time Spent in the Sun and Indoor Tanning

Q18. In the summer, on average, how many hours are you outside per day between 10AM and 4 PM on weekdays (Monday-Friday)?

How did you come up with your answer? How confident are you in it?

Q19. In the summer, on average, how many hours are you outside per day between 10AM and 4 PM... on weekend days (Saturday & Sunday)?

Q20. For the following questions, think about what you do when you're outside during the summer on a warm sunny day. How often do you...

Q21. Now think about the past 12 months. In that entire time, how often did you use...

Q22. In the past 12 months, how many times did you have a red or painful sunburn that lasted a day or more?

SECTION 5 – Tobacco Use

Q23. Have you smoked at least 100 cigarettes in your entire life?

Q24. How often do you now smoke cigarettes?

Q25. In the past month (30 days), when you smoked, how many cigarettes did you smoke per day?

Q26. At what age did you start smoking regularly?

Q27. During the past month (30 days), did you smoke cigarettes to help you lose weight or keep from gaining weight?

SECTION 6 – Sleep and Mood

Q28. How often do you fall asleep or feel tired during class?

How did you come up with your answer?

*Would your answer change if we asked “How often do you doze off or feel tired during class?”
If YES, why?*

Q29. Do you have a regular bedtime?

What does “bedtime” mean to you?

How did you come up with your answer?

Q30. What time do you usually go to bed in the evening (turn out the lights in order to go to sleep)?

Q31. What time do you usually get out of bed in the morning?

How did you come up with your answers here?

*How easy or difficult was it for you to answer these last few items about when you go to bed
and get up in the morning?*

INTERVIEWER NOTE: Does R have any difficulty with the formatting of these items?

Q32. Do you generally have trouble staying asleep at night?

Q33. How often do you think that you need more sleep?

Q34. In the past month, how often have you felt...

How easy or difficult was it for you to answer this question?

Item “c” -- What does “things are going your way” mean to you?

*Item “d” -- What does “difficulties were piling up so high that you not overcome them” mean
to you?*

What time period were you thinking of when you answered this question?

Q35. In the past 12 months, how often have you been bothered or troubled by...

Item “d” -- *How easy or difficult was it for you to answer this question?*

Item “d” -- *In your own words, what does “hopeless” mean to you?*

Item “e” -- *In your own words what does “tense” mean to you?*

Item “g” -- *What does “changes in your appetite” mean to you?*

What time period were you thinking about when you answered this question?

SECTION 7 – Goals in Life

Q36. For each of the statements listed below, please mark how important it is to you when you think about what you want for yourself in life.

How easy or difficult was it for you to answer these items? What makes it easy/difficult?

SECTION 8 – Your Parent(s)

Q37. Please mark how often each of the statements listed below regarding what your parent(s) say and do when it comes to being physical active are true for you.

Items “b” and “h” – *How did you come up with your answer here?*

INTERVIEWER NOTE: Try to determine how easy or difficult it was for the respondent to use “never” and “always” categories with these items.

Item “b” – *What does “monitor my activities” mean to you? Would your answer be different it said “even if my parents don’t keep track of my activities, I get enough physical activity”?*

Item “c” and “d” - *What does “encourage” mean to you in this question? What were you thinking about when you answered (x)?*

INTERVIEWER NOTE: Does “go out and play” in item “h” seem odd to older respondents?

Q38. Please mark how often each of the statements listed below regarding what your parent(s) say and do when it comes to screen time are true for you.

IF NEEDED: Item “b” – *What does this statement mean to you? Would your answer be different if it asked “If I get upset, my parents let me have screen time.”*

Items “e”, “f” and “g” – *How did you come up with your answer here?*

INTERVIEWER NOTE: Try to determine how easy or difficult it was for the respondent to use “never” and “always” categories with these items.

Are you familiar with that term “screen time”? What were you including as “screen time”? What devices were you thinking of?

Activity Recall

How easy or difficult would you say it was to complete the Activity Recall? What made it easy/difficult?

What did you think about the way the activity recall log looks?

What, if anything, was unclear or confusing about how to fill out the form?

What did you think about the icons to represent “how hard” the activity was?

Were there any activities that were missing from the checklist that you thought should be added?

FOR TWO OR THREE DIFFERENT TIMES/ACTIVITIES, Tell me how you decided on the things you marked for this time/activity.

Day of the week for which you are filling out this booklet.

Activity Number

How Hard

With Whom

FINAL PROBES

What are your impressions of the survey now that you’ve answered all the questions?

What do you think of the name of the survey?

Did you find it easy or difficult to complete? What made it easy/difficult?

What did you think of the length of the survey?

What other comments about the survey, which we haven't already talked about, would you like to share with me?

CHECK WITH OBSERVERS, IF PRESENT

TURN OFF AUDIO RECORDER, THANK AND PROVIDE INCENTIVE

SHOW CARD

Q2. There are lots of things that can prevent people from exercising as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't exercise as much as I like to because...

Q2. There are lots of things that can stop people from exercising as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't exercise as much as I like to because...

Q2. There are lots of things that can keep people from exercising as much as they'd like to. Please mark how much you disagree or agree with each of the statements listed below. I don't exercise as much as I like to because...