APPENDIX NN.1:
CAREGIVER OF CHILD INTERIM CATI SURVEY-ENGLISH

## WIC Nutrition Education Study Interim Survey for Participant with Eligible Child Telephone Questionnaire for Nonrespondents to Mail Survey

1. RECORD TODAY'S DATE:


Please answer the survey questions for [Insert child's name]
2. How old is your child? SELECT ONE.
$\square \quad$ Less than 12 months old
1 year or older [Go to Question 6]
$\square \quad-4$ DON'T KNOW
-7 REFUSAL
3. Are you currently breastfeeding your child? SELECT ONE.
$\square \quad$ YES

- NO [Go to Question 6]
$\square$-4 DON'T KNOW
$\square \quad-7$ REFUSAL

4. Think about how much longer you plan to breastfeed your child. How old do you expect your child to be when you stop breastfeeding? ENTER AGE IN MONTHS. $\qquad$ months
5. How sure are you that you can breastfeed your child until she or he is 1 year old? Would you say you are...? SELECT ONE.
$\square$ Not sure
A little sure
Very sure
-4 DON'T KNOW
-7 REFUSAL

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 number. The valid OMB control number for this information collection is $0584-\mathrm{XXXX}$. The time required to complete this information collection is estimated to average 20 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.
6. Different children like different foods. How much does your child like...? [READ ITEMS.] Would you say she or he...? SELECT ONE FOR EACH FOOD.

| a. Vegetables, including baby food | Has Never <br> Tried It | Doesn't <br> Like It at All | Likes It <br> a Little | Likes It <br> a Lot | -4 <br> DON'T <br> KNOW | -7 <br> REFUSAL |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| b. Fruit, including baby food | Has Never <br> Tried It | Doesn't <br> Like It at All | Likes It <br> a Little | Likes It <br> a Lot | -4 <br> DON'T <br> KNOW | -7 <br> REFUSAL |
| c. Whole milk, 2\%, or reduced fat milk | Has Never <br> Tried It | Doesn't <br> Like It at All | Likes It <br> a Little | Likes It <br> a Lot | -4 <br> DON'T <br> KNOW | -7 <br> REFUSAL |
| d. Low-fat, 1\%, fat-free, or skim milk | Has Never <br> Tried It | Doesn't <br> Like It at All | Likes It <br> a Little | Likes It <br> a Lot | -4 <br> DON'T <br> KNOW | REFUSAL |
| e.Whole grains, such as whole grain <br> bread, whole wheat or corn tortillas, or <br> brown rice | Has Never <br> Tried It | Doesn't <br> Like It at All | Likes It <br> a Little | Likes It <br> a Lot | -4 <br> DON'T <br> KNOW | REFUSAL |

The next questions are about the different kinds of foods your child ate or drank during the past month, that is, the past 30 days. When answering, please include meals and snacks eaten at home, at school, in restaurants, and anyplace else.
7. In the past 30 days, how often did your child eat hot or cold cereals, including baby cereal? Would you say...? SELECT ONE.

| $\square$ | Never [Go to Question 8] |
| :--- | :--- |
| $\square$ | Once last month |
| $\square$ | 2 to 3 times last month |
| $\square$ | Once a week |
| $\square$ | Twice a week |
| $\square$ | 3 to 4 times per week |
| $\square$ | 5 to 6 times per week |
| $\square$ | Once a day |
| $\square$ | More than once a day |
| $\square$ | -4 DON'T KNOW |
| $\square$ | -7 REFUSAL |

7a. In the past 30 days, what kind of cereal did your child usually eat? ENTER NAME OF CEREAL.
$\square$

7b. If there was another kind of cereal that your child ate in the past 30 days, what kind was it? ENTER NAME OF CEREAL, OR IF NONE, ENTER 1.
$\square$
8. In the past 30 days, how often did your child have any cow's milk either to drink or on cereal? Please include regular milk, chocolate or flavored milk, lactose-free milk, and buttermilk. Do not include soy milk, almond milk, rice milk, or small amounts of milk added to coffee or tea. Would you say...? SELECT ONE.

## $\square \quad$ Never [Go to Question 10]

Once last month2 to 3 times last monthOnce a week
Twice a week
3 to 4 times per week5 to 6 times per week
Once a day
More than once a day
-4 DON'T KNOW
-7 REFUSAL
9. In the past 30 days, what kind of milk did your child usually drink? Would you say...? SELECT ALL THAT APPLY.
$\square \quad$ Whole or vitamin D milk2\% milk, which is also called reduced-fat milk
1\% milk, which is also called low-fat milkSkim milk, which is also called fat-free or nonfat milk
Soy milk
Chocolate or flavored milk
$\square \quad$ Another kind of milk. [If selected] What kind of milk did your child drink? ENTER RESPONSE.
-4 DON'T KNOW
-7 REFUSAL
10. In the past 30 days, how often did your child drink...? [READ ITEMS.] Would you say...? SELECT ONE FOR EACH ITEM.

| a. Regular soda or pop that contains sugar. Do not include diet soda. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{array}{\|c} \text { Once } \\ \text { a } \\ \text { Day } \end{array}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. $100 \%$ pure fruit juices with no added sugar, such as orange, mango, apple, grape, and pineapple juices | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 Times per Week | $\left\lvert\, \begin{gathered} \text { Once } \\ \text { a } \\ \text { Day } \end{gathered}\right.$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| c. Coffee or tea that had sugar or honey added to it, such as coffee and tea you sweetened yourself, or presweetened tea and coffee drinks, such as Arizona Iced Tea and Frappuccino. Do not include coffee or diet tea with artificial sweeteners, such as Equal, Sweet'N Low, or Splenda. | Never |  | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times <br> per <br> Week | $\begin{array}{\|l} \text { Once } \\ \text { a } \\ \text { Day } \end{array}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| d. Sweetened fruit drinks, sports drinks, or energy drinks, such as Kool-Aid, lemonade, HiC, cranberry drink, Gatorade, Red Bull, Vitamin Water, or fruit juices that you made at home and added sugar. Do not include diet drinks with artificial sweeteners, such as Equal, Sweet'N Low, or Splenda. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\left\lvert\, \begin{gathered} \text { Once } \\ \text { a } \\ \text { Day } \end{gathered}\right.$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |

11. In the past 30 days, how often did your child eat...? [READ ITEMS.] Would you say...? REPEAT AFTER EVERY THREE FOODS. SELECT ONE FOR EACH ITEM.

| a. Fruit, including fresh, frozen, dried, or canned fruit. Do not include juices. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once <br> a <br> Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. Green leafy or lettuce salad, with or without other vegetables | Never | Once Last Month | 2 to 3 <br> Times Last Month | Once a Week | Twice <br> a <br> Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| c. Any kind of fried potatoes, including French fries, home fries, or hash brown potatoes | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once <br> a Week | Twice <br> a Week | 3 to 4 <br> Times per Week | 5 to 6 Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| d. Any other kind of potatoes, such as baked, boiled, mashed potatoes; sweet potatoes; or potato salad | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice <br> a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |


|  | Refried beans, baked beans, beans in soup, pork and beans, or any other type of cooked dried beans. Do not include green beans. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once <br> a <br> Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Brown rice or other cooked whole grains, such as bulgur, cracked wheat, or millet. Do not include white rice. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | Onc e a Day | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Other vegetables, including fresh, frozen, dried, or canned vegetables. Do not include green salads, potatoes, or cooked dried beans. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times <br> per <br> Week | 5 to 6 <br> Times per Week | $\begin{gathered} \text { Onc } \\ \text { e a } \\ \text { Day } \end{gathered}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Mexican-type salsa made with tomatoes | Never | Once Last Month | 2 to 3 <br> Times Last Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
|  | Pizza, including frozen pizza, take-out pizza, pizza in restaurants, and homemade pizza | Never | Once Last Month | 2 to 3 <br> Times Last Month | Once <br> a <br> Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Tomato sauce served with spaghetti or noodles or mixed into other foods such as lasagna. Do not include tomato sauce on pizza. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | $\begin{gathered} \text { Once } \\ \text { a } \\ \text { Week } \end{gathered}$ | Twice a Week | 3 to 4 <br> Times <br> per <br> Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
|  | Any kind of cheese, including cheese as a snack; cheese on burgers and sandwiches; and cheese in foods such as lasagna, quesadillas, or casseroles. Do not include cheese on pizza. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once <br> a <br> Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Corn or whole wheat tortillas. Do not include white flour tortillas. | Never | Once Last Month | 2 to 3 <br> Times Last <br> Month | $\begin{gathered} \text { Once } \\ \text { a } \\ \text { Week } \end{gathered}$ | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Whole grain bread, including whole wheat, rye, oatmeal, and pumpernickel toast and rolls and in sandwiches. Do not include white bread. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once <br> a <br> Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | -4 DON'T KNOW | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Chocolate or any other types of candy. Do not include sugar-free candy. | Never | Once Last Month | 2 to 3 <br> Times Last <br> Month | Once <br> a <br> Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |


| o. Doughnuts, sweet rolls, Danish, muffins, pan dulce, or Pop-Tarts. Do not include sugar-free kinds. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice <br> a Week | 3 to 4 <br> Times <br> per Week | 5 to 6 Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| p. Cookies, cake, pie, or brownies. Do not include sugar-free kinds. | Never | Once Last Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice a Week | 3 to 4 <br> Times per Week | 5 to 6 <br> Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| q. Ice cream or other frozen desserts. Do not include sugar-free kinds. | Never | Once <br> Last <br> Month | 2 to 3 <br> Times <br> Last <br> Month | Once a Week | Twice <br> a Week | 3 to 4 <br> Times per Week | 5 to 6 Times per Week | $\begin{aligned} & \text { Onc } \\ & \text { e a } \\ & \text { Day } \end{aligned}$ | More than Once a Day | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |

12. All families are different and eat different foods. For the next question, I'm going to list several activities. For each activity, please tell me if at this time you are not thinking about doing it; thinking about doing it; planning to do it next month; have been doing it for less than 6 months; or have been doing it for 6 months or longer.

The first/next activity is... [READ ITEMS.] Would you say you...? REPEAT AFTER EVERY THREE STATEMENTS. SELECT ONE FOR EACH STATEMENT.

|  | Serve your child vegetables, including baby food, at dinner every day | Are Not Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{aligned} & -4 \\ & \text { DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Serve your child fruit, including baby food, for a snack instead of cookies or chips every day | Are Not Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | -4 DON'T KNOW <br> KNOW | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | [Check child's age in profile data and only ask if child is 2 years or older.] Serve your child low-fat, 1\%, fat-free, or skim milk instead of whole milk, $2 \%$, or reduced fat milk every day | Are Not Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{aligned} & -4 \\ & \text { DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
|  | Almost always serve your child whole grain bread instead of white bread | Are Not Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| e. | Almost always serve your child brown rice instead of white rice | Are Not <br> Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| f. | Almost always serve your child whole wheat or corn tortillas instead of white flour tortillas | Are Not <br> Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{aligned} & \text {-4 } \\ & \text { DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |

g. Serve your child $100 \%$ juice no more than once a day
h. Serve your child regular soda or pop, sweetened fruit drinks, sports drinks or energy drinks no more than once a month

| Are Not <br> Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Are Not Thinking about Doing It | Are <br> Thinking about Doing It | Are Planning to Do It Next Month | Have Been Doing It for Less Than 6 Months | Have Been Doing It for 6 Months or Longer | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |

13. Again, I'm going to read you a list of activities. For each activity, please tell me how sure you are you could do the activity. How sure are you that you can...? [READ ITEMS.] Would you say you are...? REPEAT AFTER EVERY 3 STATEMENTS. SELECT ONE FOR EACH STATEMENT.

| a. Serve your child vegetables, including baby food, at dinner every day | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| b. Serve your child fruit, including baby food, for a snack instead of cookies or chips every day | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| c. [Only ask if child is $\mathbf{2}$ years or older.] Serve your child low-fat, 1\%, fat-free, or skim milk instead of whole milk, $2 \%$, or reduced fat milk every day | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| d. Serve your child whole grain bread instead of white bread | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| e. Serve your child brown rice instead of white rice | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| f. Serve your child whole wheat or corn tortillas instead of white flour tortillas | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| g. Serve your child $100 \%$ juice no more than once a day | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| h. Serve your child regular soda or pop, sweetened fruit drinks, sports drinks or energy drinks no more than once a month | Not Sure | A Little Sure | Very Sure | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |

14. For the next question, I'm going to list some WIC foods. Please tell me whether you bought the WIC food in the past 30 days. If you did not receive the food from WIC, please let me know. In the past 30 days, did you buy...? SELECT ONE FOR EACH STATEMENT.

| a. Juice | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| b. Fruit and vegetables | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| c. Milk | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| d. Cereal | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| e. Other whole grains, like whole grain bread, whole wheat or corn tortillas, or brown rice | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| f. [Only ask if Question $\mathbf{2}$ = less than 12 months old; otherwise, select "did not receive from WIC."] Baby food in jars | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| g. [Only ask if Question 2 = less than 12 months old; otherwise, select "did not receive from WIC."] Infant formula | YES | NO | DID NOT RECEIVE FROM WIC | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |

15. I'm going to list four activities. For each activity, please tell me how often you or your child does the activity. How often would you say...? [READ ITEMS.] Would you say...? SELECT ONE FOR EACH STATEMENT.

| a. Your child eats a meal while watching TV or DVDs | Rarely or Never | Some Days | Most Days | Almost Every Day | Every Day | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. You sit and eat a meal with your child | Rarely or Never | Some Days | Most Days | Almost Every Day | Every Day | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| c. Your child is picky about the foods she or he eats | Rarely or Never | Some Days | Most Days | Almost Every Day | Every Day | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| d. You cook a homemade dinner for your child at home | Rarely or Never | Some Days | Most Days | Almost Every Day | Every Day | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |

16. How many times do you usually offer a new food before you decide your child does not like it? Would you say...? SELECT ONE.

| $\square$ | Once |
| :--- | :--- |
| $\square$ | Twice |
| $\square$ | 3 to 5 times |
| $\square$ | 6 to 10 times |
| $\square$ | More than 10 times |
| $\square$ | My child likes everything |
| $\square$ | My child hasn't tried new foods |
| $\square$ | -4 DON'T KNOW |
| $\square$ | -7 REFUSAL |

17. All families do things differently. For each activity, please tell me how many times you or your child does the activity in a usual week or day. SELECT ONE FOR EACH STATEMENT.

| a. How many times a week does your child eat breakfast? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. How many times a week do you eat out? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | $\begin{aligned} & 8 \text { OR } \\ & \text { MORE } \end{aligned}$ | -4 DON'T <br> KNOW | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| c. How many times a week does your child eat fast food? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | $\begin{aligned} & 8 \text { OR } \\ & \text { MORE } \end{aligned}$ |  | $-7$ <br> REFUSAL |
| d. How many days a week does your child play outside? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  | -4 DON'T KNOW | $\stackrel{-7}{\text { REFUSAL }}$ |
| e. How many hours a day does your child play outside? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | $\begin{aligned} & 8 \text { OR } \\ & \text { MORE } \end{aligned}$ |  | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| f. How many days a week do you play outside with your child? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  | -4 DON'T KNOW | $\stackrel{-7}{\text { REFUSAL }}$ |
| g. How many hours a day does your child watch TV or DVDs? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | $\begin{aligned} & 8 \text { OR } \\ & \text { MORE } \end{aligned}$ | -4 DON'T KNOW | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |


| h. How many hours a day do you watch TV or DVDs? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | $\begin{aligned} & 8 \text { OR } \\ & \text { MORE } \end{aligned}$ | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| i. How many hours a day does your child play video or computer games, including games played on phones and other handheld devices? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | $\begin{gathered} 8 \text { OR } \\ \text { MORE } \end{gathered}$ | $\begin{gathered} -4 \\ \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |

18. In the past 7 days, on how many days did you do moderate or vigorous physical activities like walking, jogging, dancing, or bicycling? Think only about physical activities that you did for at least 10 minutes at a time. SELECT ONE.
$\begin{array}{llllllllll}0 & 1 & 2 & 3 & 4 & 5 & 6 & 7 & -4 & \text { DON'T KNOW }\end{array}$
[If 0, go to Question 20]
19. On the days that you did more than 10 minutes of moderate or vigorous physical activities, how many minutes in a day did you usually spend doing these physical activities? Would you say...? SELECT ONE.

| $\square$ | 10 to 20 minutes |
| :--- | :--- |
| $\square$ | 21 to 30 minutes |
| $\square$ | 31 to 40 minutes |
| $\square$ | 41 to 50 minutes |
| $\square$ | 51 to 60 minutes |
| $\square$ | More than 60 minutes |
| $\square$ | -4 DON'T KNOW |
| $\square$ | -7 REFUSAL |

20. In the past 30 days, how often did you...? [READ ITEMS.] Would you say...? SELECT ONE FOR EACH STATEMENT.

| a. Plan meals ahead of time | Almost <br> Never | Once in a <br> While | Sometimes | Often | Almost <br> Always | -4 DON'T <br> KNOW | -7 <br> REFUSAL |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b.Use Nutrition Facts on food labels to <br> choose foods | Almost <br> Never | Once in a <br> While | Sometimes | Often | Almost <br> Always | -4 DON'T <br> KNOW | -7 <br> REFUSAL |

21. Who in your family currently gets WIC benefits? Would you say...? SELECT ALL THAT APPLY.

| $\square$ | You, because you are pregnant |
| :--- | :--- |
| $\square$ | You, because you recently gave birth |
| $\square$ | Your baby who is less than 12 months old |
| $\square$ | Your child or children who are over 12 months old |
| $\square$ | No one in your family [Go to Question 23] |
| $\square$ | -4 DON'T KNOW |
| $\square$ | -7 REFUSAL |

22. Do your family's WIC benefits come from the [Insert name] WIC office? Would you say...? SELECT ONE.

## Yes [Go to Question 23]

No, you are receiving WIC from another WIC office [Go to Question 23]
No, you are not currently receiving WIC
-4 DON'T KNOW
$\square \quad-7$ REFUSAL

22a. What month and year did you stop receiving WIC? ENTER MONTH AND YEAR.
23. In the past 6 months, how many times did you visit a WIC office and
 get information on health or healthy eating? Do not include visits for other reasons, such as picking up a food instrument or voucher or taking a friend to her appointment. SELECT ONE.

| $\square$ | NONE [Go to Question 51] |
| :--- | :--- |
| $\square$ | ONCE |
| $\square$ | 2 TIMES |
| $\square$ | 3 TIMES |
| $\square$ | 4 TIMES |
| $\square$ | 5 TIMES |
| $\square$ | 6 OR MORE TIMES |
| $\square$ | -4 DON'T KNOW |
| $\square$ | -7 REFUSAL |

24. For the next question, please include your most recent visit to WIC. In the past 6 months, during WIC visits, how many times did you...? [READ ITEMS.] SELECT ONE FOR EACH STATEMENT.

| a.Talk one-on-one with a WIC staff <br> person about health or healthy <br> eating | NONE | 1 | 2 | 3 | 4 | 5 | 6 OR <br> MORE | -4 DON'T <br> KNOW | -7 <br> REFUSAL |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b.Attend a group session about <br> health or healthy eating | NONE | 1 | 2 | 3 | 4 | 5 | 6 OR <br> MORE | -4 DON'T <br> KNOW | -7 <br> REFUSAL |
| c.Watch a video or DVD about <br> health or healthy eating | NONE | 1 | 2 | 3 | 4 | 5 | 6 OR <br> MORE | -4 DON'T <br> KNOW | -7 <br> REFUSAL |
| d.Use the WIC Web site about <br> health or healthy eating | NONE | 1 | 2 | 3 | 4 | 5 | 6 OR <br> MORE | -4 DON'T <br> KNOW | REFUSAL |

25. In the past 6 months, in between WIC visits, did you get any of the following from WIC with information on health or healthy eating? Do not include things you got during your WIC visit. SELECT ALL THAT APPLY.
$\square \quad$ Personal phone callText messageEmail messageOnline education that I could log into from home or someplace else
Invitation or link to Facebook, Twitter, or other social media siteBrochure or handout in the mail
NONE OF THE ABOVE
-4 DON'T KNOW
$\square \quad-7$ REFUSAL

The next questions are about your most recent WIC visit in which you got information on health or healthy eating.
26. When was your most recent WIC visit? Would you say...? SELECT ONE.
$\square \quad$ Less than 2 weeks ago
$\square \quad 2$ to 4 weeks ago
$\square \quad 1$ to 2 months ago
$\square \quad$ Over 2 months ago
-4 DON'T KNOW
-7 REFUSAL
27. What did you do at your most recent WIC visit? Did you...? SELECT ALL THAT APPLY.
$\square \quad$ Talk one-on-one with a WIC staff person about health or healthy eating
$\square \quad$ Spend time in a group session on health or healthy eating
$\square \quad$ Use a WIC Web site on health or healthy eating
$\square \quad$ Use a WIC video or DVD on health or healthy eating
$\square \quad$ NONE OF THE ABOVE
$\square \quad$-4 DON'T KNOW
$\square \quad-7$ REFUSAL
28. For the next question, I'm going to read you two statements. For your most recent WIC visit, how much do you agree or disagree with the statement? [READ ITEMS.] Would you say you...? SELECT ONE FOR EACH STATEMENT.

| a. I learned good reasons to eat healthy | Disagree <br> a Lot | Disagree <br> a Little | Agree <br> a Little | Agree <br> a Lot | -4 DON'T <br> KNOW | -7 <br> REFUSAL |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
| b. I learned good ways to eat healthy | Disagree <br> a Lot | Disagree <br> a Little | Agree <br> a Little | Agree <br> a Lot | -4 DON'T <br> KNOW | -7 <br> REFUSAL |

29. Some people say that some WIC visits are more helpful than others. Which of the following statements best describes the information you received at your most recent WIC visit? SELECT ONE.
$\square \quad$ The information was helpful because it was new to me.
$\square \quad$ The information was helpful. I knew the information, but it was good to hear it again.
The information was not that helpful because I already knew it.
$\square \quad$ The information was not that helpful because it did not apply to me.
-4 DON'T KNOW
-7 REFUSAL
30. Which of the following statements best describes your most recent WIC visit? SELECT ONE.
$\square \quad$ I did not have any children with meI had a child with me so it made it hard to listen to the WIC information
31. At your most recent WIC visit, did the WIC staff show you any of the following or use any of these with you while they talked about health or healthy eating? SELECT ALL THAT APPLY.
$\square \quad$ Brochure, handout, or paper with information
$\square \quad$ Bulletin board or poster
$\square \quad$ Video or DVD
$\square \quad$ Tasting or cooking demonstration
$\square \quad$ Activity or game
$\square \quad$ Other items that you could pass around like measuring cups or food containers
$\square \quad$ NONE OF THE ABOVE
$\square \quad$ Something else. [If selected] What did she or he show you? ENTER RESPONSE.
$\square \quad$-4 DON'T KNOW
$\square \quad-7$ REFUSAL
32. When you enroll in WIC and then 6 to 12 months later, WIC asks you to bring proof of address or income to make sure you can be on WIC. Did you bring proof to your most recent WIC visit? SELECT ONE.
$\square \quad$ YES
$\square \quad$ NO
-4 DON'T KNOW

- -7 REFUSAL

33. At your most recent WIC visit, how long did you talk one-on-one with a WIC staff person about health or healthy eating? Would you say...? SELECT ONE.
$\square \quad$ I did not talk one-on-one about health or healthy eating [Go to Question 39]
$\square \quad$ Less than 5 minutes
$\square \quad 5$ to 15 minutes
$\square \quad 16$ to 30 minutes
$\square \quad$ More than 30 minutes
$\square$-4 DON'T KNOW
-7 REFUSAL

For the next set of questions, please think about your most recent one-on-one time with a WIC staff person.
34. Which of the following statements best describes your most recent one-on-one time with a WIC staff person? SELECT ONE.
$\square \quad$ The WIC staff person chose what we talked about
$\square \quad$ I chose what we talked about
$\square \quad$ The WIC staff person and I together chose what we talked about
-4 DON'T KNOW
-7 REFUSAL
35. A health goal means trying to become healthier by changing something you do. Which of the following statements best describes your most recent one-on-one time with a WIC staff person? SELECT ONE.
$\square \quad$ She worked with me to set health goals for me or my child
$\square \quad$ She talked about health goals, but I did not set any
$\square \quad$ She did not talk about setting health goals

- -4 DON'T KNOW
$\square \quad-7$ REFUSAL

36. For the next question, I'm going to read you three statements. For your most recent one-on-one time with a WIC staff person, how much do you agree or disagree with the statement? [READ STATEMENTS.] Would you say you...? SELECT ONE FOR EACH STATEMENT.

| a. The WIC staff person talked most of the time | Disagree <br> a Lot | Disagree a Little | Agree <br> a Little | Agree <br> a Lot | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. The WIC staff person listened to me and understood my concerns | Disagree <br> a Lot | Disagree a Little | Agree <br> a Little | Agree <br> a Lot | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| c. The WIC staff person followed up on issues or questions from my last one-on-one visit | Disagree <br> a Lot | Disagree a Little | Agree <br> a Little | Agree <br> a Lot | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |

37. Please tell me if you talked about any of the following topics in your most recent one-on-one time with a WIC staff person. Did you talk about...? [READ STATEMENTS.] SELECT ONE FOR EACH STATEMENT.

| a. Serving more fruit and vegetables | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| :---: | :---: | :---: | :---: | :---: |
| b. Serving more whole grains, like whole grain bread, whole wheat or corn tortillas, or brown rice | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| c. [Only ask if child is $\mathbf{2}$ years or older.] Serving lower fat milk; that is, 1\%, fat-free, or skim milk | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| d. Encouraging more physical activity | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| e. Preparing healthier foods for my family | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| f. Providing water instead of soda and sugary drinks | YES | NO | -4 DON'T KNOW | -7 REFUSAL |

38. [If yes to any topics] Now I would like to know if you have made or think you will make a change to your child's eating or activities since discussing the topic, [READ TOPIC]. Would you say you are...? SELECT ONE FOR EACH STATEMENT.

| a. Serving more fruit and vegetables | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | -7 REFUSAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. Serving more whole grains, like whole grain bread, whole wheat or corn tortillas, or brown rice | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | -7 REFUSAL |
| c. Serving lower fat milk; that is, $1 \%$, fat-free, or skim milk | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | -7 REFUSAL |
| d. Encouraging more physical activity | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | -7 REFUSAL |
| e. Preparing healthier foods for my family | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | -7 REFUSAL |
| f. Providing water instead of soda and sugary drinks | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | -7 REFUSAL |

39. At your most recent WIC visit, how long did you spend in a group session talking about health or healthy eating? Would you say...? SELECT ONE.

| $\square$ | I was not in a group session [Go to Question 45] |
| :--- | :--- |
| $\square$ | Less than 5 minutes |
| $\square$ | 5 to 15 minutes |
| $\square$ | 16 to 30 minutes |
| $\square$ | More than 30 minutes |
| $\square$ | -4 DON'T KNOW |
| $\square$ | -7 REFUSAL |

For the next set of questions, please think about your most recent WIC group session.
40. Which of the following statements best describes your most recent WIC group session? SELECT ONE.
$\square \quad$ She mostly talked and would stop to ask if we had questions
$\square \quad$ We watched a video or DVD, and at the end, she asked if we had questions
$\square \quad$ She shared information, and we had a discussion. She asked me and the other people in the group about our thoughts and opinions.

- -4 DON'T KNOW
$\square \quad-7$ REFUSAL

41. A health goal means trying to become healthier by changing something you do. Which of the following statements best describes your most recent group session with a WIC staff person? SELECT ONE.
$\square \quad$ She worked with me to set health goals for me or my child
$\square \quad$ She talked about health goals, but I didn't set any
$\square \quad$ She did not talk about setting health goals
$\square$-4 DON'T KNOW
$\square \quad-7$ REFUSAL
42. For the next question, I'm going to read you two statements. For your most recent WIC group session, how much do you agree or disagree with the statement? [READ STATEMENTS.] Would you say you...? SELECT ONE FOR EACH STATEMENT.

| a. The WIC staff person listened to the group and understood our concerns | Disagree a Lot | Disagree a Little | Agree <br> a Little | Agree <br> a Lot | -4 DON'T KNOW | -7 REFUSAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. I had a chance to bring up topics that were important to me | Disagree a Lot | Disagree a Little | Agree a Little | Agree <br> a Lot | -4 DON'T KNOW | -7 REFUSAL |

43. Please tell me if you talked about any of the following topics in your most recent WIC group session. Did you talk about...? [READ STATEMENTS.] SELECT ONE FOR EACH STATEMENT.

| a. Serving more fruit and vegetables | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| :---: | :---: | :---: | :---: | :---: |
| b. Serving more whole grains, like whole grain bread, whole wheat or corn tortillas, or brown rice | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| c. [Only ask if child is $\mathbf{2}$ years or older.] Serving lower fat milk; that is, $1 \%$, fat-free, or skim milk | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| d. Encouraging more physical activity | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| e. Preparing healthier foods for my family | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| f. Providing water instead of soda and sugary drinks | YES | NO | -4 DON'T KNOW | -7 REFUSAL |

44. [If yes to any topics] Now I would like to know if you have made or think you will make a change to your child's eating or activities since discussing the topic, [READ TOPIC]. Would you say you are...? SELECT ONE FOR EACH STATEMENT.

| a. Serving more fruit and vegetables | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. Serving more whole grains, like whole grain bread, whole wheat or corn tortillas, or brown rice | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| c. Serving lower fat milk; that is, 1\%, fat-free, or skim milk | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| d. Encouraging more physical activity | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| e. Preparing healthier foods for my family | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| f. Providing water instead of soda and sugary drinks | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |

45. Which statements describe how you used a WIC Web site on health or healthy eating in the past 6 months? SELECT ALL THAT APPLY.
$\square \quad$ I used a WIC Web site on health or healthy eating in the WIC office by myself
$\square \quad$ I used a WIC Web site on health or healthy eating instead of going to a WIC appointment
$\square \quad$ I used a WIC Web site on health or healthy eating before or after going to a WIC appointment
$\square \quad$ I have not used a WIC Web site on health or healthy eating in the past 6 months [Go to Question 50]

- -4 DON'T KNOW
$\square \quad-7$ REFUSAL

For the next set of questions, please think about the last time you used a WIC Web site on health or healthy eating in the past 6 months.
46. How long did you spend using the WIC Web site? Please include time in and outside of WIC office. SELECT ONE.

```
Less than 5 minutes
5 to 15 minutes
15 to 30 minutes
More than 30 minutes
-4 DON'T KNOW
-7 REFUSAL
```

47. Which of the following statements best describes how the topic for the WIC Web site was chosen? SELECT ONE.
$\square \quad$ There was a list of topics, and I chose one of them myself
$\square \quad$ There was a list of topics, and a WIC staff person helped me choose one
$\square \quad$ There was only one topic available
$\square \quad$ The topic was chosen another way. [If selected] How was the topic for the WIC Web site chosen? ENTER RESPONSE:
$\square \quad-4$ DON'T KNOW
$\square \quad-7$ REFUSAL
48. Please tell me if you read or viewed any of the following topics on the WIC Web site. Did you read or view anything about...? [READ ITEMS.] SELECT ONE FOR EACH STATEMENT.

| a. Serving more fruit and vegetables | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| :--- | :---: | :---: | :---: | :---: |
| b.Serving more whole grains, like whole grain bread, whole <br> wheat or corn tortillas, or brown rice | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| c.[Only ask if child is 2 years or older.] Serving lower <br> fat milk; that is, 1\%, fat-free, or skim milk <br> d. <br> Encouraging more physical activity YES | NO | -4 DON'T KNOW | -7 REFUSAL |  |
| e. Preparing healthier foods for my family | YES | NO | -4 DON'T KNOW | -7 REFUSAL |
| f. $\quad$ Providing water instead of soda and sugary drinks | YES | NO | -4 DON'T KNOW | -7 REFUSAL |

49. [If yes to any topics] Now I would like to know if you have made or think you will make a change to your child's eating or activities since reading or viewing the topic, [READ TOPIC]. Would you say you are...? SELECT ONE FOR EACH STATEMENT.

| a. Serving more fruit and vegetables | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| b. Serving more whole grains, like whole grain bread, whole wheat or corn tortillas, or brown rice | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| c. Serving lower fat milk; that is, $1 \%$, fat-free, or skim milk | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| d. Encouraging more physical activity | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| e. Preparing healthier foods for my family | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| f. Providing water instead of soda and sugary drinks | Not Thinking about Doing It | Thinking about Doing It | Planning on Doing It | Already Doing It | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |

50. Which statements describe how you used a WIC video or DVD on health or healthy eating in the past 6 months? SELECT ALL THAT APPLY.
$\square \quad$ I used a WIC video or DVD on health or healthy eating in the WIC office by myself I used a WIC video or DVD on health or healthy eating in the WIC office in a group $\square \quad$ I used a WIC video or DVD on health or healthy eating instead of going to a WIC appointment
$\square \quad$ I used a WIC video or DVD on health or healthy eating before or after going to a WIC appointment
$\square \quad$ I have not used a WIC video or DVD on health or healthy eating in the past 6 months
$\square \quad-4$ DON'T KNOW
$\square \quad-7$ REFUSAL
51. Think about the number of people who live in your household right now. How many people are there in each of the following age groups?

|  |  |
| :--- | :--- |
| a. Infants under 12 months of age |  |
| b. Children 1 to 4 years of age |  |
| c. Children 5 to 17 years of age |  |
| d. Adults 18 years or older, including yourself |  |

52. How many people in your household are on WIC right now? Please include yourself. ENTER NUMBER. $\qquad$
53. Do you have regular childcare for [Insert child's name] where someone other than a family member in your home takes care of him or her on a regular basis? SELECT ONE.
$\square \quad$ YES

- NO [Go to Question 54]
- -4 DON'T KNOW
$\square \quad-7$ REFUSAL

53a. How many hours per week is your child usually in childcare? ENTER NUMBER. $\qquad$
54. In the past 6 months, which of the following topics did you discuss in WIC one-on-one or group sessions or watch in videos, DVDs, or Web sites? SELECT ALL THAT APPLY.

| DOES NOT APPLY. HAS NOT BEEN IN WIC IN THE PAST 6 MONTHS [Go to end script]. | YES | NO | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| :---: | :---: | :---: | :---: | :---: |
| a. Breastfeeding | YES | NO | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| b. Weaning from a bottle | YES | NO | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| c. Drinking milk or choosing lower fat milk | YES | NO | $\begin{gathered} \text {-4 DON’T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| d. Drinking water | YES | NO | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| e. Fruit and vegetables | YES | NO | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| f. Healthy snacking | YES | NO | $\begin{aligned} & \text {-4 DON’T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| g. Healthy weight for myself | YES | NO | $\begin{gathered} \text {-4 DON’T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| h. Introducing solid foods to my child | YES | NO | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $\begin{gathered} -7 \\ \text { REFUSAL } \end{gathered}$ |
| i. Medical conditions such as low iron or high blood sugar | YES | NO | $\begin{gathered} \text {-4 DON’T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| j. Physical activity | YES | NO | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | $\stackrel{-7}{\text { REFUSAL }}$ |
| k. Picky eaters | YES | NO | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| I. Shopping for and preparing healthy foods | YES | NO | $\begin{gathered} \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| m. Sodas and sugary drinks | YES | NO | $\begin{aligned} & \text {-4 DON'T } \\ & \text { KNOW } \end{aligned}$ | $-7$ <br> REFUSAL |
| n. Whole grains | YES | NO | $\begin{gathered} \hline \text {-4 DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |
| o. NONE OF THE ABOVE | YES | NO | $\begin{gathered} \hline-4 \text { DON'T } \\ \text { KNOW } \end{gathered}$ | $-7$ <br> REFUSAL |

55. You selected [READ LIST OF YES RESPONSES].Of these, which one was most helpful? SELECT ONE.

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You will receive another survey in several months.
Thank you for taking part in the WIC Nutrition Education Study (NEST)!

