

APPENDIX G.1  
AGE 3 EXTENSION WIC INFANT AND TODDLER FEEDING PRACTICES STUDY - II  
30-MONTH INTERVIEW - ENGLISH

**WIC ITFPS-2 PARTICIPANT INTERVIEW**  
**30 MONTH**  
**OCTOBER 28, 2014**

**CAREGIVER STATUS CONFIRMATION**

***Respondent still Caregiver?***

*1, 3, 5, 7, 9, 11, 13, 15, 18, 24, 30, 36*

**SD12. Before we begin today, I need to ask whether you are still {CHILD's} caregiver. [Source: New Development]**

YES.....01→ GOTO SD14  
NO.....02→ GOTO SD12a

**a. Does {CHILD} still live with you?**

YES.....01→ GOTO SD12b  
NO.....02→ GOTO SD12c

**b. (If a is Yes): Can you please tell me who in your household is now {CHILD's} caregiver? Can I speak with that person?**

NAME OF NEW CAREGIVER \_\_\_\_\_

**c. (If a is No): Can you please tell me who is caring for {CHILD} now, and how I could reach that person?**

NAME OF NEW CAREGIVER \_\_\_\_\_  
PHONE OF NEW CAREGIVER \_\_\_\_\_  
ADDRESS OF NEW CAREGIVER \_\_\_\_\_  
RELATION OF NEW CAREGIVER TO CHILD \_\_\_\_\_

**SOCIODEMOGRAPHICS AND BACKGROUND**

**I'd like to start today by asking you some background questions about yourself and your family.**

***Marital status***

*Baseline, 13, 30,36*

**SD14. Are you ...? [Source: WIC IFPS-1]**

Married.....	01
Separated.....	02
Divorced.....	03
Widowed.....	04
Or Never Married.....	05
Don't know.....	98
Refused.....	99

**Household size**

*Enrollment, 7, 13, 24, 30, 36*

**SD18. How many people live in your household? By household I mean people who live together and share living expenses. Please include yourself in this count, and (If PN enrollment: please add 1 to the total for your pregnancy, too/If postnatal enrollment or 7, 13, 24, 30 or 36 months: If you are pregnant right now please add 1 to the total for your pregnancy. [Source: FITS 2002, modified]**

NUMBER OF PEOPLE IN HOUSEHOLD.....[number]

**Household income**

*Enrollment, 7, 13, 24, 30, 36*

**SD19. During [PREVIOUS MONTH], what was your household income before taxes? Please include any income in the past month from you, your family members who live with you, and any other people who live with you and share living expenses with you [Source: WIC IFPS-1, modified]**

INCOME.....[amount]

**(OR if respondent cannot provide specific amount): I'll read some ranges, and you can stop me when I get to the one that is your best estimate of your household income before taxes for [PREVIOUS MONTH]**

\$500 or less.....	01
\$501-\$1000.....	02
\$1001-\$1500.....	03
\$1501-\$2000.....	04
\$2001-\$2500.....	05
\$2501-\$3000.....	06
\$3001-\$3500.....	07
\$3501-\$4000.....	08
\$4001-\$4500.....	09
\$4501-\$5000.....	10
\$5001+.....	11
Don't know.....	98
Refused.....	99

**6-Item Food Security**

Enrollment, 7, 13, 18, 24, 30, 36

**These next questions are about the food eaten in your household in the last 12 months, since {name of current month} of last year and whether you were able to afford the food you need.**

**SD36. I'm going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for your household in the last 12 months—that is, since last (name of current month). [Source: USDA food security 6-item]**

**The first statement is, “The food that (I/we) bought just didn’t last, and (I/we) didn’t have money to get more.” Was that often, sometimes, or never true for your household in the last 12 months?**

OFTEN TRUE.....	01
SOMETIMES TRUE.....	02
NEVER TRUE.....	03
DON'T KNOW.....	98
REFUSED.....	99

**SD37. “We couldn’t afford to eat balanced meals.” Was that often, sometimes, or never true for your household in the last 12 months?**

OFTEN TRUE.....	01
SOMETIMES TRUE.....	02
NEVER TRUE.....	03
DON'T KNOW.....	98
REFUSED.....	99

**SD38. In the last 12 months, since last (name of current month), did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?**

YES.....	01	→	GOTO SD38a
NO.....	02	→	GOTO SD39
DON'T KNOW.....	98	→	GOTO SD39

**a. [if yes to SD38, ask] How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?**

ALMOST EVERY MONTH.....	01
SOME MONTHS BUT NOT EVERY MONTH.....	02
ONLY 1 OR 2 MONTHS.....	03
DON'T KNOW.....	98

**SD39. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?**

YES.....	01
NO.....	02

DON'T KNOW.....98

**SD40. In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?**

YES.....01  
NO.....02  
DON'T KNOW.....98

**Receipt of public assistance**

*Baseline, 13, 24, 30, 36*

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

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

YES.....01  
NO.....02  
DON'T KNOW.....98

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

YES.....01  
NO.....02  
DON'T KNOW.....98

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

YES.....01  
NO.....02  
DON'T KNOW.....98

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

YES.....01  
NO.....02  
DON'T KNOW.....98

**Currently pregnant/due date**

*7, 13, 18, 30, 36*

**SD16. Are you currently pregnant? [Source: New Development]**

YES.....01 → GOTO SD17  
NO.....02 → GOTO SD31  
DON'T KNOW.....98 → GOTO SD31  
REFUSED.....99 → GOTO SD31

**SD17. (If yes) When is your baby due? [Source: FDA IFPS-2]**

MONTH.....[JANUARY – DEC.]  
DAY.....[1-31]  
{Year – autofill for next occurrence of the month}

**Continuation/discontinuation of WIC participation (timing, reasons, location)**  
1, 3, 5, 7, 9, 11, 13, 15, 18, 24, 30, 36

Next I'd like to ask you some questions about WIC.

**SD31. Are you currently getting WIC food or checks for yourself or {CHILD}? [Source: FDA IFPS-2; modified]**

YES.....01  
NO.....02

**SD45. Are you currently getting WIC food or checks for any infants or children other than {CHILD}? [Source: New development]**

YES.....01  
NO.....02

(If SD31 = Yes, go to SD32 after SD45; If SD31 = No for the first time, go to SD34 after SD45; if SD31 = No now and no previously go to WC20 after SD45.)

**SD32. The last time we talked with you, you were going to WIC at [fill in location]. Do you still go there, or do you go to a new location? [Source: FDA IFPS-2 modified]**

YES, STILL THAT LOCATION.....01→ GOTO WC20  
NO, NEW LOCATION.....02→ GOTO SD33

**SD33. (If SD32 is no) Please tell me where you go now**

RECORD LOCATION \_\_\_\_\_

Ask SD34 and SD35 only if SD31 is 'no' for the first time

**SD34. How old was {CHILD} when you stopped going to WIC? [Source: LA WIC Survey; modified]**

Age.....[weeks/months]

**SD35. I'm going to read some reasons why you might have stopped going to WIC. Please tell me if each one is a reason you stopped going to WIC: [Source: LA WIC Survey; modified]**

**a. You no longer qualify for WIC?**

YES.....01  
NO.....02

**b. It was inconvenient for you?**

YES.....01

NO.....02

**c. You no longer need WIC?**

YES.....01

NO.....02

**d. Is there any other reason?**

YES.....01

NO.....02

(IF YES): [What is the other reason you stopped going to WIC?]

SPECIFY \_\_\_\_\_

**WIC PROGRAM AWARENESS, SATISFACTION, UTILIZATION**

**Perceptions of Impact of Nutrition Education**

3, 13, 24, 30

Administer WC20 only if respondent indicated in SD31 or SD45 that they are still on WIC. If not on WIC, skip to intro before WC21.

**WC20. Your WIC benefits include both education and food. Which is more important to you—the food you get from WIC, the education you get from WIC, or are they equally important? [Source: New Development]**

FOOD IS MORE IMPORTANT.....01

EDUCATION IS MORE IMPORTANT.....02

THEY ARE EQUALLY IMPORTANT.....03

DON'T KNOW.....98

REFUSED.....99

If no longer on WIC, say: I'd like to ask you about how you used WIC education.

**WC21. Have you changed how you feed yourself or your family because of something you learned at WIC? [Source: New Development]**

YES.....01→ GOTO WC22

NO.....02→ GOTO MH13

DON'T KNOW.....98→ GOTO MH13

**WC22. (If YES to WC21) What is the most important change you have made based on education you received from WIC? (Open-ended; Interviewer record response) [Source: New Development]**

I/WE EAT MORE FRUITS AND VEGETABLES.....01

I/WE EAT MORE WHOLE GRAINS.....02

I/WE DRINK MORE REDUCED FAT/ LOW-FAT/NON-FAT MILK.....	03
I AM BREASTFEEDING/BREASTFED.....	04
I KNOW HOW TO PREPARE FORMULA/FEED THE RIGHT AMOUNT OF FORMULA.....	05
WE HAVE MORE FAMILY MEALS/EAT TOGETHER.....	06
WE DON'T WATCH TV WHEN EATING MEALS.....	07
WE DRINK/BUY FEWER SUGAR SWEETENED BEVERAGES.....	08
I/WE OFFER THE RIGHT AMOUNT OF FOODS (PORTION).....	09
I KNOW HOW TO CHOOSE MORE HEALTHY FOODS FOR MYSELF/MY FAMILY.....	10
OTHER (SPECIFY _____).....	11
DON'T KNOW.....	98
REFUSED.....	99

<b>MATERNAL HEALTH AND LIFESTYLE</b>
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Now I'd like to change topics and ask you some questions about health, and about work, school, and child care.

**Maternal weight**

1, 3, 13, 24, 30

**MH13. Right now, about how much do you weigh, without shoes? [Source: PHFE WIC Postpartum Questionnaire 2010]**

POUNDS.....[NUMBER]

**Educational attainment**

Baseline, 24, 30

**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

**Educational status**

3, 7, 13, 18, 24, 30

SD27. As of today, are you in school or college? [Source: WIC IFPS-1]

YES.....01  
NO.....02

**Current employment status**

3, 7, 13, 18, 24, 30

SD29. Are you currently working for pay full time, part time, or not at all? [Source: LA WIC Survey]

FULL TIME (35 HOURS OR MORE).....01  
PART TIME.....02  
NOT AT ALL .....03

Ask SD30 first time answer to SD 27 or SD29 is 'yes' then discontinue

SD30. How old was {CHILD} when you started going back to school or working? [Source: New Development]

AGE.....[WEEKS, MONTHS]

**Ever used regular non-maternal child care?**

3, 7, 13, 24, 30 (once answered affirmative, stop asking for subsequent interviews)

The next few questions are about childcare. By childcare, we mean any kind of arrangement where someone other than you or {CHILD'S} other parent takes care of {CHILD} on a regular basis, while you go to work or school.

Please include care provided by a relative or non-relative, either in your home or someone else's home, as well as in a childcare center or family daycare home. Do not include care provided by you or {CHILD'S} other parent. [Source: PHFE WIC Survey 2010 modified]

MH18. Have you ever used a regular childcare arrangement for {CHILD}?

YES.....01→ GOTO MH19  
NO.....02→ GOTO CF43 Intro

If MH18 = Yes, stop asking for subsequent interviews.

**When did child first start non-maternal child care?**

3, 7, 13, 24, 30 (asked only if ever used is yes, then stop asking once answered)

MH19. At what age did {CHILD} first start a regular childcare arrangement? [Source: New Development]

AGE.....[MONTHS]

Stop asking MH19 after the first time it is answered.

**Current use of non-maternal child care (and what kind)**

3, 7, 13, 24, 30



**MH20. Which type of regular childcare arrangement are you currently using the most for {CHILD}? [Source: PHFE WIC Survey 2011, modified]**

- A child care center.....01→ GOTO MH21
- A family daycare home.....02→ GOTO MH21
- Early Head Start.....03→ GOTO MH23
- Someone cares for {CHILD} in their home.....04→ GOTO MH23
- Someone cares for {CHILD} in your home.....05→ GOTO MH23
- Some other kind of childcare.....06→ GOTO MH23
- Not currently using childcare.....07→ GOTO CF43 Intro

**Contact info for child care (for CACFP status)**

3, 7, 13, 24, 30

**MH21. (If center or family daycare from MH20) Can we get the official name and address of the child care? We won't contact them without your permission, we just need it to for our records. [Source: New Development]**

Name \_\_\_\_\_  
 Address \_\_\_\_\_

**Who provides food to child care location (provided by mother, or by facility)**

3, 7, 13, 24, 30

*Ask only if indicated current child care use in MH20*

**MH23. Who provides most of the food {CHILD} eats at childcare – the child care provider, you, or is the food divided about equally between you and the childcare provider? [Source: PHFE WIC Survey 2011]**

- CHILD CARE PROVIDER.....01
- PARENT.....02
- EQUALLY DIVIDED.....03

**CURRENT FEEDING PRACTICES/FEEDING BELIEFS**

Now I'm going to ask some questions about {CHILD's} eating habits and some things you may do in feeding [him/her].

**Infant/child food package – does child eat foods from WIC food package?**

7, 13, 15, 18, 24, 30

*For 13, 15, 18, 24, 30 mo, only if SD31 = Yes. Else skip to CF49.*

**CF43. Which of the following WIC foods does {CHILD} eat? Does [HE/SHE] eat: [Source: FITS 2008, modified]**

**a. Breakfast cereal, either hot or cold from WIC**

- YES.....01
- NO.....02
- DON'T KNOW.....98

<b>b.</b>	<b>Cheese from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>c.</b>	<b>Eggs from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>d</b>	<b>Does {CHILD} eat fruits from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>e.</b>	<b>100% juice from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>f.</b>	<b>Milk from WIC, including cow's milk, soy milk, or other milk</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>g.</b>	<b>Peanut butter from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>h.</b>	<b>Does {CHILD} eat vegetables from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>i.</b>	<b>Whole grain bread or other whole grains, such as brown rice, bulgur, barley, or tortillas from WIC</b>	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98
<b>j.</b>	<b>Does {CHILD} eat other food from WIC (specify</b>	
	_____)	
	YES.....	01
	NO.....	02
	DON'T KNOW.....	98

**Practices for introducing new foods**

15, 18, 24, 30

**CF49. How many times do you offer a new food before you decide {CHILD} does not like it?**  
[Source: FITS 2002, 2008, modified]

Once .....	01
Twice .....	02
Three to five times .....	03
Six to ten times .....	04
More than ten times .....	05
LIKES EVERYTHING .....	06
DON'T KNOW .....	98
REFUSED.....	99

**Toddler/Child feeding rules**

15, 24, 30

**CF51. I am going to read some things that parents may do. Please tell me how often each statement is true for you and {CHILD}. [Source: Thompson et al., 2009]**

**a. I keep track of *what* food {CHILD} eats.**

Always.....	01
Usually.....	02
About half of the time.....	03
Occasionally.....	04
Never.....	05

**b. I try to get {CHILD} to finish his/her food.**

Always.....	01
Usually.....	02
About half of the time.....	03
Occasionally.....	04
Never.....	05

**c. I try to get {CHILD} to eat even if she/he seems not hungry.**

Always.....	01
Usually.....	02
About half of the time.....	03
Occasionally.....	04
Never.....	05

**d. I carefully control how much {CHILD} eats.**

Always.....	01
Usually.....	02
About half of the time.....	03
Occasionally.....	04
Never.....	05

e. **I am very careful not to feed {CHILD} too much.**

Always.....	01
Usually.....	02
About half of the time.....	03
Occasionally.....	04
Never.....	05

Now I'm going to ask you about your beliefs about feeding children.

**Toddler/Child period knowledge, attitudes, beliefs about nutrition**

15, 24, 30

**KA11a.It's ok for a child to walk around while eating as long as he or she eats. [Source: Thompson, 2009, modified]. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree?**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**KA12a.It's important for a child to finish all the food on his or her plate. [Source: Thompson, 2009, modified]. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree?**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**KA13a.The best way to make a child stop crying is to feed him or her. [Source: Thompson, 2009, modified]. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree?**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**KA14a.It's important that the parent decides how much a child should eat. [Source: Thompson, 2009, modified]. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree?**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**KA15a. People feel differently about what their children eat. Which of the following best describes your opinion about children eating fast food: [Source: Thompson, 2009, modified]**

- Children should be allowed to eat fast food whenever they want to.....01
- Children should be allowed to eat fast food occasionally.....02
- Children should never eat fast food.....03

**KA16a. There are many kinds of sugary foods like candy, ice cream, cakes or cookies. Which of the following best describes your opinion about children eating sugary foods: [Source: Thompson, 2009, modified]**

- Children should be allowed to eat sugary foods whenever they want to.01
- Children should be allowed to eat sugary foods occasionally.....02
- Children should never eat sugary foods.....03

**KA17a. There are many kinds of snack foods like potato chips, regular or flavored tortilla chips, and cheese puffs. Which of the following best describes your opinion about children eating snack foods: [Source: Thompson, 2009, modified]**

- Children should be allowed to eat snack foods whenever they want to. .01
- Children should be allowed to eat snack foods occasionally.....02
- Children should never eat snack foods.....03

**CHILD HEALTH, BEHAVIOR, AND CHILD REARING**

The next questions are about {CHILD’S} health and behavior, and your family’s routines and habits.

*Health status/conditions*  
*Actions to rectify health conditions*  
1, 3, 5, 7, 9, 11, 13, 15, 18, 24, 30

**CH2. Has the doctor told you that {CHILD} has any long-term medical problems or conditions that may affect what or how (he/she) eats? [Source: FITS 2008, modified]**

*(Interviewer, if necessary add) These medical problems or conditions may be things like food allergies, diabetes, metabolic disorders such as PKU or galactosemia, gastrointestinal problems such as gastric reflux, other problems like cleft palate or other mouth or facial conditions – any long-term problems that affect the baby’s ability to eat and swallow.*

- YES.....01 → GOTO CH2a
- NO.....02 → GOTO CH21
- DON’T KNOW.....98 → GOTO CH21

**CH2a.(If yes) What medical problem or condition does {CHILD} have?**

Specify \_\_\_\_\_

**CH3. (If yes to health status/conditions in CH2): What are you currently doing to treat this medical problem? [Source: New Development] (Open-ended, Interviewer check all that apply)**

TAKING HER/HIM TO THE DOCTOR FOR TREATMENT 01

TREATING HIM/HER AT HOME WITH MEDICINE.....	02
TREATING HIM/HER AT HOME WITH SOMETHING OTHER THAN MEDICINE (SUCH AS HERBAL REMEDIES, SPECIAL TEAS, OR OTHER FORMS OF TREATMENT).....	03
CHANGING HIS/HER DIET.....	04
OTHER.....	05
DON'T KNOW.....	98
REFUSED.....	99

**Caregiver report of child weight and height**  
30,36

**CH21. The last time {CHILD} was weighed, how much did [he/she] weigh? [Source: New development]**

- POUNDS.....[number]
- OR
- KILOGRAMS.....[number]
- DON'T KNOW.....98 → GOTO CH24
- REFUSED.....99 → GOTO CH24

**CH22. When was that weight taken? Please give me the month and year. [Source: New development]**

- MONTH.....[Jan-Dec]
- YEAR.....[number]
- DON'T KNOW.....98
- REFUSED.....99

**CH23. Where was {CHILD}'s weight taken? Was it... [Source: NC CHAMPS, modified]**

- At home.....01
- In a doctor's office.....02
- At the WIC site or clinic.....03
- Or some other place.....04

**CH24. The last time {CHILD}'s height was measured, how tall was [he/she]? [Source: New development]**

- INCHES.....[number]
- OR
- CENTIMETERS.....[number]

DON'T KNOW.....	98 →	GOTO CH21
REFUSED.....	99 →	GOTO CH21

**CH25. When was that height measurement taken? Please give me the month and year. [Source: New development]**

MONTH.....	[Jan-Dec]
YEAR.....	[number]
DON'T KNOW.....	98
REFUSED.....	99

**CH26. Where was {CHILD}'s height measured? Was it... [Source:NC CHAMPS, modified]**

At home.....	01
In a doctor's office.....	02
At the WIC site or clinic.....	03
Or some other place.....	04

**Medical Home**  
30

**CH27. Is there a place such as a doctor's office, health clinic, or other medical facility that {CHILD} USUALLY goes to when [he/she] needs a routine physical examination or a well-child check-up? Would you say...[Source: NHIS 2013 Child Survey, modified]**

there is <u>one</u> place.....	01
there is <u>more than one</u> place .....	02
or there is <u>no</u> usual place .....	03
DON'T KNOW .....	98
REFUSED.....	99

**Recent Routine Health Visit**  
30

**CH28. Did {CHILD} have a physical exam or well-child check-up around [his/her] second birthday? [Source: New development]**

YES.....	01
NO.....	02
NOT YET.....	03
DON'T KNOW .....	98
REFUSED.....	99

**Child physical activity outdoors**  
18, 24, 30

**CH7a. Think for a moment about a typical weekday, that is Monday through Friday, for your child. In the past month, how much time would you say your child spent playing outdoors on a typical weekday? This can include playing in your yard or neighborhood, or playing in a park or other outdoor recreation area, such as a zoo or amusement park. [Source: Parental report of outdoor playtime Burdette, 2004, modified]**

TIME.....[HOURS/MINUTES]

**CH8. Now, think about a typical weekend day, that is Saturday or Sunday, for your child. In the past month, how much time would you say your child spent playing outdoors on a typical weekend day? [Source: Parental report of outdoor playtime Burdette, 2004, modified]**

TIME.....[HOURS/MINUTES]

***Child television/video exposure***

*15, 18, 24, 30*

**CH17 . On an average day, how many hours does {CHILD} watch television? Only include time when [HE/SHE] is actually watching TV, and just give your best estimate. [Source: PHFE WIC survey 2011, modified]**

LESS THAN ONE HOUR.....01  
NUMBER OF HOURS(1 OR MORE).....[NUMBER 1-18]  
DON'T KNOW.....98  
REFUSED.....99

*At 18, 24, and 30 only:*

**CH18a. On an average day, how many hours does {CHILD} play video or computer games, including games on handheld devices like a cell phone? Do not include time spent playing video or computer games that involve physical activity such as Wii. Just give your best estimate. [Source: PHFE WIC survey 2011, modified]**

LESS THAN ONE HOUR.....01  
NUMBER OF HOURS (1 OR MORE).....[NUMBER 2-18]  
DON'T KNOW.....98  
REFUSED.....99

***Child is a picky eater***

*18, 24, 30*

**CH4. Do you consider [CHILD] a very picky eater, a somewhat picky eater, or not a picky eater? [FITS 2008]**

A VERY PICKY EATER.....01  
A SOMEWHAT PICKY EATER.....02  
NOT A PICKY EATER? .....03  
DON'T KNOW.....98  
REFUSED.....99

***TV on during meals***

*15, 18, 24, 30*



**CH19. When you and your child eat meals or snacks at home, how often is a television on while you are eating? [Source: CDC 2010 Youth Physical Activity and Nutrition Survey, modified]**

Most of the time.....	01
Sometimes.....	02
Rarely.....	03
Never.....	04
Don't know.....	98
Refused.....	99

***Family eats together***

15, 18, 24, 30

**CH20. During the past week, including weekdays and weekends, how many times did all or most of your family sit down and eat a meal together? [Source: NHANES Flexible Consumer Behavior Survey (CBQ) 2009-2010, modified]**

7 or more times each week.....	01
5-6 times during the week.....	02
3-4 times/week.....	03
1-2 times/week.....	04
Never.....	05
Don't know.....	98
Refused.....	99

**HEALTHY FOOD AVAILABILITY, ACCESS, AND PURCHASING**

***Availability and purchasing of fresh fruits and vegetables***

30

**In this next set of questions, I am going to ask you about the availability, cost and quality of fresh fruits and vegetables in your community. Community is defined as the place where you live, and other neighborhoods that you are easily able to get to. Please tell me how much you agree or disagree with the following statements. [Source: Boehmer/ Brownson et al. 2006]**

**AP1. It is easy to buy fresh fruits and vegetables in my community. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree? [Source: Boehmer/ Brownson et al. 2006, modified]**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**AP2. There are a lot of fresh fruits and vegetables available in my community. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree? [Source: Boehmer/ Brownson et al. 2006, modified]**

STRONGLY AGREE.....	01
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AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**AP3. The fresh fruits and vegetables in my community are of high quality. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree? [Source: Boehmer/ Brownson et al. 2006, modified]**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**I'm going to read you a few statements about things some people say make it hard for them to eat fruits and vegetables. For each one, please tell me how much you agree or disagree.**

**AP4. Eating fruits and vegetables is difficult because they cost too much. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree? [Source: CA Nut Ed and Food Package Impact Study]**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**AP5. Eating fruits and vegetables is difficult because they take too much time to prepare. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree? [Source: New development]**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

**AP6. Eating fruits and vegetables is difficult because I don't like them. Would you say that you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree? [Source: CA Nut Ed and Food Package Impact Study]**

STRONGLY AGREE.....	01
AGREE.....	02
NEITHER AGREE NOR DISAGREE.....	03
DISAGREE.....	04
STRONGLY DISAGREE.....	05

<b>PARTICIPANT CONTACT INFORMATION UPDATE</b>
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Thank you for taking the time to speak with me today. Because we'll be calling you again for your next interview when your child is {AGE – next interview}, I'd like to be sure we have all the right ways to contact you.

**CM1. Is your full name still {NAME}?**

- YES.....01
- NO.....02
- (If no, go to a)

**a. Can you please tell me what your full legal name is now?**

\_\_\_\_\_

**CM3. I reached you today at {FILL #}. Will that still be the best number to call you at for your next interview?**

- YES (if yes, go to b).....01→ GOTO CM3b
- NO (if no, go to a).....02→ GOTO CM3a

**a. What is the best number to call you at for your next interview?**

- NUMBER (specify ---/---/----)
- NO PHONE (go to CM4).....97

**Is that number home, work, cell, or something else?**

- HOME.....01
- WORK.....02
- CELL.....03
- OTHER (SPECIFY \_\_\_\_\_).....04

**b. Is there another number we could try in case we have trouble reaching you?**

NUMBER (specify ---/---/----)

**Is that number home, work, cell, or something else?**

- HOME.....01
- WORK.....02
- CELL.....03
- OTHER (SPECIFY \_\_\_\_\_).....04

**We'd like to keep in touch with you even if we can't get you by phone or your phone number changes, so I'm going to ask you about a few additional ways we might be able to contact you.**

**CM4. *If have email on file: We have your email address as {FILL}, is that correct?/If no email: Do you have an email address we could use to contact you if necessary?***

- EMAIL IS THE SAME (FILL BELOW).....01
- NEW EMAIL (SPECIFY BELOW) .....02
- DON'T KNOW EMAIL.....98
- REFUSED EMAIL.....99

**Email**\_\_\_\_\_

**CM5.** *If mailing address on file:* **We have your current mailing address as {FILL}. Is that correct?**  
*If no mailing address on file:* **Can I get a mailing address we could use to contact you if necessary?**

- ADDRESS IS THE SAME (FILL BELOW).....01
- NEW ADDRESS (SPECIFY BELOW) .....02
- DON'T KNOW/DON'T HAVE ADDRESS.....98
- REFUSED ADDRESS.....99

**a.** **Can you please tell me what your current mailing address is?**

Street/Apt# \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP \_\_\_\_\_

**b.** *(If CM3a is 97 – no phone):* **Earlier you indicated that you do not have a phone. Since we need to speak with you by phone we will mail you a study phone. You will receive the phone before your next interview. The package will contain instructions on how to use the phone. Should we mail the phone to the mailing address you just provided?**

- ADDRESS IS THE SAME (FILL BELOW).....01
- NEW ADDRESS (SPECIFY BELOW) .....02
- DON'T KNOW/DON'T HAVE ADDRESS.....98
- REFUSED ADDRESS.....99

**Can you please provide the address where the phone should be mailed?**

Street/Apt# \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP \_\_\_\_\_

**CM6.** **Do you have a Facebook account we could use to contact you?**

- YES.....01
- NO.....02

*(IF YES):* **[What is your Facebook name?]**

**[SPECIFY: \_\_\_\_\_]**

**CM7.** *(If contacts on file:* **Earlier you provided the names and contact information for two people who would always know how to find you. Can I read that information back to you and check that it's still up to date?***If no contacts on file:* **Just in case we can't get in touch with you using the information you just gave me, I'd like to ask you for the names and contact information for two people who would always know how to find you.**

**PERSON #1** (IF CONTACTS ON FILE, READ FILL INFO AND CORRECT AS NEEDED)

NAME.....  
WHAT IS THIS PERSON'S RELATIONSHIP TO YOU?.....  
PHONE.....  
ADDRESS.....  
EMAIL.....

**Person #2** (If contacts on file, read fill info and correct as needed)

NAME.....  
WHAT IS THIS PERSON'S RELATIONSHIP TO YOU?.....  
PHONE.....  
ADDRESS.....  
EMAIL.....