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## Appendix H1 Parent, Caregiver Interview Guide Nonparticipants

### NONPARTICIPANT INTERVIEW SCRIPTS

#### INTRODUCTION:

Hello, I'm calling from Optimal Solutions group. We are conducting a study for the U.S. Department of Agriculture and *<the State agency that administers the program>* about summer meals programs for children and what role these programs play to ensure that children get enough to eat during the summer. You may recall receiving and signing our letter *<reference date of the signature>* describing the evaluation and inviting you to participate.

I would like to remind you that you will receive a \$25 prepaid VISA gift card as a token of our appreciation. All your answers will be kept private, will be used only for the purposes of this study, and will not be shared with outside groups, except as otherwise required by law. Your and your child's names will never be associated with any of your answers. The survey should take about 30 minutes. At the end, if you would like, we could provide you with information about the summer meals sites and programs in your area.

#### Do you have time right now?

- 1) YES—CONTINUE
- 2) NO—RESCHEDULE
- 3) DON'T KNOW—RESCHEDULE

#### IF QUESTIONS FROM THE RESPONDENT—READ ONLY IF NECESSARY:

*How did you get my phone number?* We got your phone number from a list provided to the U.S. Department of Agriculture by your local school district.

*Why should I participate in the study?* We are trying to learn more about how children spend their summer months, what role local programs play in feeding children during the summer, and how these programs could be improved so that more children can participate.

#### 1) First, I would like to ask whether this summer any of your children attended the summer meals programs *<name of the programs; name of the sites>* at the *<location of the sites>*.

- 1) YES—SWITCH TO THE PARTICIPANTS SURVEY
- 2) NO
- 3) DON'T KNOW—THANK AND DISCONTINUE
- 4) REFUSED—THANK AND DISCONTINUE

#### 2) Did any of your children attend the summer meals at some other sites this summer?

- 1) YES—SWITCH TO THE PARTICIPANTS SURVEY
- 2) NO—CONTINUE
- 3) DON'T KNOW—CONTINUE
- 4) REFUSED—CONTINUE

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**Now, I would like to ask you about your household.**

**3) How many adults, including yourself, over the age of 18 are now living in your household?** Please count adults who usually live in your household but may be temporarily away and also include adults who are temporarily living with you.

\_\_\_\_|\_\_\_\_| # OF ADULTS IN HOUSEHOLD  
DON'T KNOW  
REFUSED

**4) Could you tell me how many children live or stay with you in this household, how old they are, and whether they are boys or girls?**

*INTERVIEWER: RECORD AGE AND GENDER OF ALL CHILDREN IN THE HOUSEHOLD:*

AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
AGE: \_\_\_\_|\_\_\_\_| GENDER: \_\_\_\_| RACE: \_\_\_\_\_|  
DON'T KNOW  
REFUSED

**5) Please tell me (his/her) their race.**

*INTERVIEWER: RECORD RACE OF ALL CHILDREN IN THE HOUSEHOLD ABOVE*

Select one or more race categories:

- 1) American Indian or Alaska Native,
- 2) Asian,
- 3) Black or African American,
- 4) Native Hawaiian or Other Pacific Islander,
- 5) White

**6) Please tell me (his/her) their ethnicity.**

*INTERVIEWER: RECORD ETHNICITY OF ALL CHILDREN IN THE HOUSEHOLD ABOVE*

Ethnicity categories:

- 1) Hispanic or Latino and
- 2) Not Hispanic or Latino

**Now, I'd like to ask you about summer meals sites that are open to children in your area.**

**7) Did your child(ren) ever receive summer meals at any summer meals site in previous years?**

- 1) YES—GO TO 7, THEN SKIP TO 9
- 2) NO—SKIP TO 8
- 3) DON'T KNOW—SKIP TO 8
- 4) REFUSED—SKIP TO 8

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**8) Why did your child(ren) stop attending the summer meals programs?**

SPECIFY: \_\_\_\_\_

DON'T KNOW

REFUSED

PROBE IF DIFFICULTIES IN RESPONDING (MORE THAN ONE RESPONSE ARE POSSIBLE):

Transportation problems or distance to sites

Security or safety concerns

Unfriendly site staff

Programs not open long enough/offered at an inconvenient time

Health or sanitation concerns at the sites

Inadequate supervision at the sites

Insufficient activities besides meals

Insufficient variety of foods offered

Poor quality of food

Child(ren) want or need to stay home

Child(ren)'s friends do not attend

Child(ren)'s dietary restrictions

Child(ren) attend(s) other programs/activities

**9) Have you ever heard of any summer meals sites in your area, such as <name of the programs; name and location of the sites>?**

1) YES

2) NO—SKIP TO 12

3) DON'T KNOW—SKIP TO 12

4) REFUSED—SKIP TO 12

**10) When did you first learn of the summer meals sites in your area?**

SPECIFY: \_\_\_\_\_

DON'T KNOW

REFUSED

**11) Which organizations or people provided you with information about the summer meals sites?**

SPECIFY: \_\_\_\_\_

DON'T KNOW

REFUSED

PROBE IF DIFFICULTIES IN RESPONDING (MORE THAN ONE RESPONSE ARE POSSIBLE):

Friends, family, or neighbors

School

Church or other community organization

Local government/public assistance office

Media

Nutrition or anti-hunger advocacy groups or food banks

**12) How did they provide the information about the summer meals sites in your area?**

SPECIFY: \_\_\_\_\_

DON'T KNOW

REFUSED

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- Mailings (letters, newsletters, flyers, newspaper, brochures)
- E-mail
- Announcements (television, radio)
- Marketing (posters, signs, billboards)
- Toll-free number/hotline
- Website
- Promotional events

**13) Would any of the following methods be useful in providing you with information about the summer meals sites? (Check all that apply.)**

- a) Mailings (letters, newsletters, flyers, newspaper, brochures)
- b) E-mail
- c) Websites
- d) Announcements (television, radio)
- e) Marketing (posters, signs, billboards)
- f) Toll-free number/hotline
- g) Promotional events
- h) Promotional gifts
- i) Other, specify: \_\_\_\_\_
- j) DON'T KNOW
- k) REFUSED

**14) What would be the best ways for the summer meals sites in your area to provide you with information?**

SPECIFY: \_\_\_\_\_  
DON'T KNOW  
REFUSED

**15) What are the reasons why your child(ren) is (are) not attending the summer meals sites in your area?**

SPECIFY: \_\_\_\_\_  
DON'T KNOW  
REFUSED

**PROBE IF DIFFICULTIES IN RESPONDING (MORE THAN ONE RESPONSE ARE POSSIBLE):**

- Did not think child(ren) would be eligible
- Never heard of the summer meals
- Kids didn't need the meals
- Pride-- leave it to people who really need it

**16) Would any of the following issues make it difficult for you or your child(ren) to attend the summer meals sites? (Check all that apply.)**

- a) Transportation problems or distance to site
- b) Security or safety concerns
- c) Site staff is unfriendly
- d) Inadequate supervision at the site

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- e) The site is not open long enough/offered at an inconvenient time
- f) Health or sanitation concerns at the site
- g) Insufficient activities besides meals
- h) Insufficient variety of foods offered
- i) Poor quality of food
- j) Child(ren) want or need to stay home
- k) Child(ren)'s friends do not attend
- l) Child(ren)'s dietary restrictions
- m) Child(ren) attend(s) other programs/activities.
- n) Other, Specify: \_\_\_\_\_
- o) DON'T KNOW
- p) REFUSED

**17) What would make your child(ren) more likely to attend the summer meals sites in your area?  
What could the summer meals sites do to make your child(ren) more likely to attend the program?**  
SPECIFY: \_\_\_\_\_

- DON'T KNOW
- REFUSED

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**18) Would any of the following activities provided by the summer meals sites make it more likely that your children will attend? (Check all that apply.)**

- a) Providing information about the programs
- b) Providing transportation
- c) Providing daycare for children
- d) Providing activities besides meals
- e) Improving security and safety
- f) Offering a variety of foods
- g) Offering better quality of food
- h) Increasing the number of days they are open during the summer
- i) Increasing the time of operation during the day
- j) Other, specify: \_\_\_\_\_
- k) DON'T KNOW
- l) REFUSED

**19) Are there certain types of foods, games, or activities that would make your child(ren) more likely to attend the summer meals sites?**

SPECIFY: \_\_\_\_\_  
DON'T KNOW  
REFUSED

**20) Did your child(ren) attend any other activities or programs this summer?**

- 1) YES
- 2) NO—SKIP TO 25
- 3) DON'T KNOW—SKIP TO 25
- 4) REFUSED—SKIP TO 25

**21) Which types of activities or programs did your child(ren) attend?**

SPECIFY: \_\_\_\_\_  
DON'T KNOW  
REFUSED

**PROBE IF DIFFICULTIES IN RESPONDING (MORE THAN ONE RESPONSE ARE POSSIBLE):**

- Childcare
- Day camp
- Summer school
- Arts and crafts
- Performing arts
- Educational/instructional activities
- Organized games or sports
- Swimming
- Religious activities
- Cooking
- Multicultural activities
- Counseling, therapy, social skills development

**22) What did children like and not like about these activities or programs?**

SPECIFY: \_\_\_\_\_

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DON'T KNOW

REFUSED

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**23) Did these activities or programs provide food to children?**

- 1) YES
- 2) NO
- 3) DON'T KNOW
- 4) REFUSED

**24) Did you have to pay for the food your children ate while attending these activities or programs?**

- 1) YES
- 2) NO
- 3) DON'T KNOW
- 4) REFUSED

**25) Were these activities or programs located at or near <name and location of the sites>?**

- 1) YES
- 2) NO
- 3) DON'T KNOW
- 4) REFUSED

**26) Does anyone in your household receive public assistance programs, such as food stamps, Temporary Assistance for Needy Families, housing assistance, or others?**

- 1) YES
- 2) NO—SKIP TO 27
- 3) DON'T KNOW—SKIP TO 27
- 4) REFUSED—SKIP TO 27

**27) Which programs?**

SPECIFY: \_\_\_\_\_

- DON'T KNOW
- REFUSED

PROBE IF DIFFICULTIES IN RESPONDING (MORE THAN ONE RESPONSE ARE POSSIBLE):

- Temporary Assistance for Needy Families (TANF)
- Housing assistance
- Supplemental Nutrition Assistance Program (SNAP) food stamps
- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

**28) Did any of your child(ren) participate in any food and nutrition programs that provide meals during the school year or during the summer, such as school lunch, food bank, or others?**

- 1) YES
- 2) NO—SKIP TO 29
- 3) DON'T KNOW—SKIP TO 29
- 4) REFUSED—SKIP TO 29

**29) Which programs?**

SPECIFY: \_\_\_\_\_

- DON'T KNOW
- REFUSED

PROBE:

- National School Lunch Program (NSLP)



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- National School Breakfast Program (NSBP)
- Child and Adult Care Food Program (CACFP)
- After School Snack programs
- Commodity Supplemental Food Program (CSFP)
- The Emergency Food Assistance Program (TEFAP)
- Food bank

**[FOOD INSECURITY MEASURE]**

**30) Now, I'm going to read you several statements that people have made about their food situations. 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>.**

**HH3. The first statement is, "The food that we bought just didn't last, and 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
- Sometimes true
- Never true
- DK or Refused

**HH4. "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
- Sometimes true
- Never true
- DK or Refused

**AD1. 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
- No (Skip AD1a)
- DK (Skip AD1a)

**AD1a. [IF YES ABOVE, 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
- Some months but not every month
- Only 1 or 2 months
- DK

**AD2. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?**

- Yes
- No
- DK

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**AD3. In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?**

Yes

No

DK

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**Would you like to get information about the summer meals sites and programs in your area?**

YES—Okay, we will send you the information by mail.

NO

Also, as a token of our appreciation, we would like to give you a \$25 VISA gift card.

Could I get your full name and current address to mail you the card?

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**AGAIN, THANK YOU SO MUCH FOR PARTICIPATING.**