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Appendix I1 Parent, Caregiver Interview Guide Participants

PARTICIPANT 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 asking your permission 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.

Do you have the 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 #? 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—SKIP TO 3
- 2) NO
- 3) DON'T KNOW—THANK AND DISCONTINUE
- 4) REFUSED—THANK AND DISCONTINUE

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

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

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

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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: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _
AGE: _ _	GENDER: _	RACE: _ _ _ _	Attends summer meals: _ _

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

7) (IF MORE THAN ONE CHILD) Also, which children received summer meals or activities at <name of the programs; name and location of the sites >?

INTERVIEWER: RECORD ALL CHILDREN IN THE HOUSEHOLD ATTENDING SUMMER FOOD PROGRAMS ABOVE

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

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8) Did your child(ren) receive summer meals at the <name of the programs; name and location of the sites> during the summer of last year?

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

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

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

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10) When did your child(ren) first start going to the summer meals site at <name of the programs; name and location of the sites> this summer? Approximate date is fine.

|_|_|/|_|_| MONTH / DAY

DON'T KNOW

REFUSED

11) On which date do you expect your child(ren) to stop attending this summer meals site this summer? Approximate date is fine.

|_|_|/|_|_| MONTH / DAY

DON'T KNOW

REFUSED

12) How many days in a typical week do your child(ren) usually attend this summer meals site?

|_| # OF DAYS PER WEEK

LESS THAN ONCE A WEEK

DON'T KNOW

REFUSED

12) How long does it usually take to get to this summer meals site?

|_|||_| # OF MINUTES

DON'T KNOW

REFUSED

14) How do(es) your child(ren) usually travel to this summer meals site?

SPECIFY: _____

DON'T KNOW

REFUSED

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

Gets dropped off in car

Walks alone

Walks with other child/children

Walks with a parent or an adult

Takes public transportation alone

Takes public transportation with other child/children

Takes public transportation with a parent or an adult

Takes transportation provided by site

15) When did you first learn of the summer meals program and the sites?

SPECIFY: _____

DON'T KNOW

REFUSED

16) 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

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- School
- Church or other community organization
- Local government/Public assistance office
- Media
- Nutrition or anti-hunger advocacy groups or food banks

17) How did these organizations or people provide you with the information about the summer meals sites in your area?

SPECIFY: _____

- DON'T KNOW
- REFUSED

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

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

18) 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, newspapers, flyers, or 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

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

SPECIFY: _____

- DON'T KNOW
- REFUSED

20) Why did your child(ren) attend the summer meals sites?

SPECIFY: _____

- DON'T KNOW
- REFUSED

PROBE (MORE THAN ONE RESPONSE ARE POSSIBLE):

- Free food
- Nutritious meals
- Lack of childcare during the summer
- Activities besides meals

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- Variety of foods offered
- Quality of food
- Types of food (fruits, vegetables)
- Child(ren) did not want to stay home
- Convenient time
- Convenient location
- Child(ren)'s friends participating
- Get to know/make friends with other children

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21) What did you or your child(ren) like about the summer meals program or the sites?

SPECIFY: _____

DON'T KNOW

REFUSED

22) Was there anything that you or your child(ren) did not like about the summer meals program or the sites?

SPECIFY: _____

DON'T KNOW

REFUSED

PROBE (MORE THAN ONE RESPONSE ARE POSSIBLE):

Required to throw food away if not eaten, can't take food home

No air-conditioning

Limited space

Lack of games or activities

No transportation provided by the site

23) Which kinds of food provided by the sites did your children like and dislike?

SPECIFY: _____

DON'T KNOW

REFUSED

24) Did your child(ren) attend any activities other than meals at the summer meals sites this summer? (such as sports, games, arts)

1) YES

2) NO—SKIP TO 25

3) DON'T KNOW— SKIP TO 25

4) REFUSED— SKIP TO 25

25) Which types of activities did they attend?

SPECIFY: _____

DON'T KNOW

REFUSED

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

Arts and crafts

Performing arts

Educational/instructional activities

Organized games or sports

Swimming

Off-site field trips

Religious activities

Cooking

Multicultural activities

Counseling, therapy, social skills development

26) What did your child(ren) like and not like about these activities?

SPECIFY: _____

DON'T KNOW

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REFUSED

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27) Which difficulties did you or your child(ren) face in attending these sites or receiving summer meals at these sites? Please describe why these are difficulties for you or your child(ren).

SPECIFY: _____

DON'T KNOW

REFUSED

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

- a) Transportation problems or distance to site
- b) Security or safety concerns
- c) Unfriendly sites staff
- d) Inadequate supervision at the sites
- e) Sites not open long enough/offered at an inconvenient time
- f) Health or sanitation concerns at the sites
- 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

29) 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

30) 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

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31) 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

32) Do you plan to send your child(ren) to <name of the programs; name and location of the sites> next summer? Why?

SPECIFY: _____

DON'T KNOW
REFUSED

33) 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 34
- 3) DON'T KNOW—SKIP TO 34
- 4) REFUSED—SKIP TO 34

34) 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)

35) Did any of your child(ren) receive 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 36
- 3) DON'T KNOW—SKIP TO 36
- 4) REFUSED—SKIP TO 36

36) Which programs?

SPECIFY: _____

DON'T KNOW
REFUSED

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

National School Lunch Program (NSLP)
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

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[FOOD INSECURITY MEASURE]

37) 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

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

- Yes

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No

DK

THANK YOU VERY MUCH FOR YOUR TIME.

As a token of our appreciation, we would like to give you a \$25 VISA gift card.
Could I get your name and current address to mail you the card?

NAME: _____

ADDRESS: _____

AGAIN, THANK YOU SO MUCH FOR PARTICIPATING.