Appendix C-6: Initial Interview Questions for Pretest 2

NATIONAL FOOD PURCHASE STUDY INTIAL INTERVIEW

ADMINISTERED IN CAPI FOR ENGLISH AND SPANISH

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Introduction

Q2 As I said earlier, taking part in this study is completely voluntary. We are required by law to use your information for statistical research only and to keep it confidential. The law prohibits us from giving anyone any information that may identify you or members of your household. You do not have to answer any questions that make you feel uncomfortable. There are no risks for participating but if you have any questions you can always call the telephone number on the brochure/fact sheet. Now I'd like to ask you about the people living in your household, where you usually shop for food, and food programs you may participate in. Some of these questions will help me determine how many of you will need to record food purchase for the study week, and some of the questions will be used by researchers to help them understand how households like yours acquire food. These questions will take about 30 minutes to answer and I will receive $50 as an incentive for completing this interview. May I begin?

      (1) YES, CONTINUE

      (2) NO, RESCHEDULE ALTERNATE TIME

      (3) NO, DECLINE TO TAKE PART/REFUSAL

SECTION A: HH enumeration

We will begin the interview with questions about who lives here. I need to make a list of all the people who are living or staying here at this address over the next week. Be sure to include: People who stay here only some of the time; non-relatives who live here; and any babies and small children. Please mention someone even if you're not sure they should be included. I understand that you may have already provided some of this information, but I need to read the whole series of questions.

A1 Let's start with you. What is your name? INTERVIEWER: FILL NAME GRID

A1a	**A1b**
First name	Last name
_____	_____

A1_CK Does anyone else live or stay here?

(1) YES - Please give me the names of everyone else who lives or stays here most of the time.**)**

(0) NO

(r) REFUSED

(d) DON'T KNOW

[IF A1_CK IN (0, r, d), GO TO A2. IF A1_CK=1, GO TO A1a.]

A1a	**A1b**
First name	Last name
_____	_____
_____	_____
_____	_____

A2 I need to be sure I'm including the correct people in this survey. You have mentioned (ALL NAMES FROM A1 NAME GRID). Is this the address where (you/you and they) live and sleep most of the time?

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

      [IF A2 IN (1, r, d), GO TO A3. IF A2 = 0, GO TO A2a.]

      A2a Who doesn't live or sleep here most of the time? CHECK (√)

          [ ] (fill: Person 1)

          [ ] (fill: Person 2)

          ...

          [ ] (fill: Person N)

INTERVIEWER: FOR EACH PERSON WITH A2a = √, ASK A2b – A2d. THEN GO TO NEXT PERSON

      [If A2a=√, loop through each person.]

      A2b Is there another place where (NAME FROM A2a) lives and sleeps most of the time?

          (1) YES

          (0) NO

          (r) REFUSED

          (d) DON'T KNOW

      [IF A2b=1, GO TO A2c.]

A2c I am going to read a list of reasons why people may have another place where they live or sleep most of the time. Please tell me which is the main reason for (NAME FROM A2a).

(1) A college student who usually lives away at school?

(2) A boarding school student who usually lives away at school but is home for break or vacation?

(3) A boarding school student who usually lives away at school during the week but is here on weekends?

(4) In the Armed Forces, stationed locally?

(5) In the Armed Forces and is temporarily here on leave, but stationed elsewhere?

(6) In an institution such as a home for the aged, mental hospital, or prison?

(7) Temporarily absent on vacation or in hospital?

(8) Temporarily on the road for a job or work?

(9) Absent in connection with a job – lives both here and elsewhere, but does not stay here often?

(10) Has another home but sleeps here more often?

(11) Has another home and sleeps in other home more often?

(r) REFUSED

(d) DON'T KNOW

A2c1 Does (he/she) get mail here?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

A2d Will (NAME) be here for the next week?

        (1) PRESENT

        (2) NOT PRESENT

[Loop ends.]

A3 Sometimes we miss people when it's not totally clear where they live. Just to make sure, have I missed anyone who is staying here until they find a place to live?

    (1) YES

    (0) NO

    (r) REFUSED

    (d) DON'T KNOW

[IF A3 = 1, GO TO A3a. IF A3 IN (0, r, d), GO TO A3b1.]

A3a. Who is that?

INT: FILL NAME IN A1 NAME GRID
(1) (fill: Person 1)

(2) (fill: Person 2)

...

(N) (fill: Person N)

(r) REFUSED

(d) DON'T KNOW

A3b1 Any lodgers, boarders or persons you employ who live here?

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

[IF A3b1= 1, GO TO A3b2. IF A3b1 IN (0, r, d), GO TO A3c.]

A3b2 How many lodgers live here?

      #: _____

      (r) REFUSED

      (d) DON'T KNOW

A3b3 How many boarders live here?

      #: _____

      (r) REFUSED

      (d) DON'T KNOW

A3b4 How many persons you employ who live here?

      #: _____

      (r) REFUSED

      (d) DON'T KNOW

A3c Anyone who may have another place to live, but who stays here often or has some space or a room here?

> (1) YES
>
> (0) NO
>
> (r) REFUSED
>
> (d) DON'T KNOW
>
> **[IF A3c= 1, GO TO A3c1. IF A3c IN (0, r, d), GO TO A4.]**

A3c1 How many people may have another place to live, but stay here often or have some space or a room here?

> #: _____
>
> (r) REFUSED
>
> (d) DON'T KNOW

A3c2 How many of those people will be staying here during the next week?

> #: _____
>
> (r) REFUSED
>
> (d) DON'T KNOW

A3c3 Please tell me the name of each person who may have another place to live, but stays here often or has some space or a room here and will be here for the next week. Who is that?

> INT: FILL NAME IN A1 NAME GRID
>
> (1) (fill: Person 1)
>
> (2) (fill: Person 2)
>
> ...
>
> (N) (fill: Person N)
>
> (r) REFUSED
> (d) DON'T KNOW

[Demographics of HH members]

INTERVIEWER: ASK QUESTION FOR EACH PERSON, THEN MOVE TO NEXT COLUMN.

[Loop through each person.]

A4 (Are you / Is NAME) male or female?

      (1) MALE

      (2) FEMALE

      (r) REFUSED

      (d) DON'T KNOW

A5 What is (NAME's) relationship to you?

      (0) Respondent

      (1) Spouse

      (2) Unmarried Partner

      (3) Child/Step-child/Adopted child

      (4) Grandchild

      (5) Parent

      (6) Brother/Sister

      (7) Other Relative (e.g. cousin, in-law)

      (8) Foster Child

      (9) Housemate/Roommate

      (10) Roomer/Boarder

      (11) Other non-relative

      (r) REFUSED

      (d) DON'T KNOW

A6 How old (are you/is NAME)? ENTER AGE IN YEARS

_____

A6a What is (your/ NAME's) month and year of birth?

      MONTH: _____
      YEAR: _____

A7 Are you/Is NAME) Spanish, Hispanic, or Latino?

    (1) No, not Spanish, Hispanic, or Latino

    (2) Yes, Mexican, Mexican American, or Chicano

    (3) Yes, Puerto Rican

    (4) Yes, Cuban

    (5) Yes, other Spanish, Hispanic, Latino

    (r) REFUSED

    (d) DON'T KNOW

A8 SHOW CARD. Please choose one or more races that you consider (yourself/ NAME) to be.

    SELECT ALL THAT APPLY.(1) White

    (2) Black or African American

    (3) American Indian or Alaska Native

    (4) Asian

    (5) Native Hawaiian or Other Pacific Islander

    (6) OTHER

    (r) REFUSED

    (d) DON'T KNOW

A9 We'd like to know if you might need extra help with this survey because of physical, mental, or emotional conditions. Because of a disability, do you have difficulty using a smartphone or a computer?

     (1) YES
     (0) NO
     (r) REFUSED
     (d) DON'T KNOW

A9a Because of a disability, do you have difficulty writing with a pen or pencil?

     (1) YES
     (2) NO
     (r) REFUSED
     (d) DON'T KNOW

A9b Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

     (1) YES
     (0) NO
     (r) REFUSED
     (d) DON'T KNOW

A9c Do you have vision or other problems that make it difficult to read?

     (1) YES
     (0) NO
     (r) REFUSED
     (d) DON'T KNOW

[IF A9 = 1 or A9a =1 or A9b =1 or A9c =1, GO TO A9d. ELSE GO TO A10]

A9d This survey requires you to track (your/your household's) food acquisitions by completing forms on smartphones or computers, and scanning barcodes on the food items you get. Will you be able to do these things on your own or is there someone else who can help you complete the survey requirements? PROBE: This might be someone who lives with you, a friend, or someone like a social worker or caseworker.

> (1) YES – ON THEIR OWN
> (2) NO – SOMEONE CAN HELP
> (3) NO – NO ONE CAN HELP
> (r) REFUSED
> (d) DON'T KNOW

[IF A9d=1, GO TO A10. IF A9d=2, GO TO A9e1. IF A9d IN (3, r, d), GO TO A9e2.]

A9e1 What is the name of the person who can help?

> FIRST NAME: _____
>
> LAST NAME: _____
> (r) REFUSED
> (d) DON'T KNOW

A9e1a ASK IF [NAME FROM A9e1] IS AVAILABLE TO CONTINUE INTERVIEW NOW

> (1) YES → GO TO A10
>
> (2) NO → SCHEDULE A TIME TO RETURN FOR TRAINING.
>   THEN CONTINUE INTERVIEW

[IF A9e1a=1, GO TO A10.]

A9e2 I'm sorry but our study rules say that we need to find someone else who can help complete the survey requirements. If you can think of someone who can help, I can come back to discuss the study with you and that person. Otherwise you cannot participate at this time.

> (1) CAN IDENTIFY SOMEONE TO HELP
> (2) CANNOT IDENTIFY SOMEONE TO HELP
> (r) REFUSED
> (d) DON'T KNOW

A9e3 What is the name of the person who can help?

       FIRST NAME: _____

       LAST NAME: _____

       (r) REFUSED

       (d) DON'T KNOW

A9e3a ASK IF [NAME FROM A9e3] IS AVAILABLE TO CONTINUE INTERVIEW NOW

       (1) YES → GO TO A10

       (0) NO → SCHEDULE A TIME TO RETURN FOR TRAINING.
              THEN CONTINUE INTERVIEW

INTERVIEWER: ASK QUESTION FOR EACH PERSON **AGE 16 AND OLDER**, THEN MOVE TO NEXT COLUMN.

[Loop through each person if A6 > =16]

A10 What is the highest level of school (you/ NAME) completed or the highest degree (you/NAME) received?

       (11) LESS THAN 1ST GRADE

       (12) 1ST, 2ND, 3RD OR 4TH GRADE

       (13) 5TH OR 6TH GRADE

       (14) 7TH OR 8TH GRADE

       (15) 9TH GRADE

       (16) 10TH GRADE

       (17) 11TH GRADE

       (18) 12TH GRADE, NO DIPLOMA

       (19) HIGH SCHOOL GRADUATE WITH DIPLOMA

       (20) HIGH SCHOOL GRADUATE WITH GED

       (21) 1 OR MORE YRS OF COLLEGE, NO DEGREE

       (22) ASSOCIATE (2-YR) COLLEGE DEGREE

       (23) BACHELOR'S DEGREE (E.G., BA, AB, BS)

       (24) MASTER'S OR HIGHER DEGREE

A11 Are you/ Is NAME) currently married, widowed, divorced, separated or never married?

(1) MARRIED

(2) WIDOWED

(3) DIVORCED

(4) SEPARATED

(5) NEVER MARRIED

(r) REFUSED

(d) DON'T KNOW

[IF A11=1, GO TO A11b.]

A11b Is (NAME's) spouse a member of this household?

ENTER "NO" or SPOUSE'S PERSON #

_____

READ: The next questions are about (your / NAME's) current job or business.

A12 Which of the following (were you/was NAME) doing last week. READ/ENTER CODE

(1) Working at a job or business

(2) With a job or business but not at work

(3) Looking for work

(4) Not working at a job or business

(r) REFUSED

(d) DON'T KNOW

[IF A12 IN (3, r, d), GO TO A12a.]

A12a Did (you/NAME) do any work at a job or business at all last week (include unpaid work in a family farm or business)?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

[IF A12=4 or A12a=0, GO TO A12b.]

A12b What is the main reason (you/NAME) did not work last week?

(1) TAKING CARE OF HOUSE / FAMILY

(2) GOING TO SCHOOL

(3) RETIRED

(4) UNABLE TO WORK FOR HEALTH REASONS

(5) DISABLED

(6) ON LAYOFF / UNEMPLOYED

(7) ON VACATION

(8) ON STRIKE

(9) OTHER

(r) REFUSED

(d) DON'T KNOW

[IF A12 IN (1, 2) or A12b IN (7, 8), GO TO A12c.]

A12c When at work, where (do you/does NAME) usually get food (for example, for lunch or dinner)?

        (1) WORKPLACE-PURCHASE

        (2) WORKPLACE-FREE

        (3) PURCHASE FROM STORE/RESTAURANT

        (4) BRING FOOD FROM HOME

        (5) DO NOT EAT FOOD AT WORK

        (r) REFUSED

        (d) DON'T KNOW

[Loop ends.]

A13 Is anyone in the household a migrant or seasonal farm worker?

        (1) YES
        (0) NO
        (r) REFUSED
        (d) DON'T KNOW

A14 (Are you/Is anyone in your household) self-employed?

        (1) YES
        (0) NO
        (r) REFUSED
        (d) DON'T KNOW

[IF A14=1, GO TO A15. IF A14 IN (0, r, d), GO TO SECTION B.]

A15 (Are you/Is anyone in your household) self-employed in a business that involves food preparation?

        (1) YES
        (0) NO
        (r) REFUSED
        (d) DON'T KNOW

Section B: [Participate in nutrition programs?]

Q1 (Have you/Has anyone in your household) received benefits from the SNAP program in the past 30 to 31 days? This program used to be called food stamps. It puts money on a SNAP EBT card that you can use to buy food.

    (1) YES

    (0) NO

    (r) REFUSED
    (d) DON'T KNOW

[IFQ1=1, GO TO B1. IF Q1 IN (0, r, d), GO TO B3.]

B1 On what date did (you/your household) last receive SNAP benefits?

    MONTH: _____
    DAY: _____
    YEAR: _____
    (r) REFUSED

    (d) DON'T KNOW

    [CAPI check to make sure date is within the last 30-31 days If beyond 31 days, then reconcile as to whether HH is currently active]

B2 How many dollars were put on (your/your household's) SNAP EBT card last month from the SNAP program?

    $: _____
    (r) REFUSED
    (d) DON'T KNOW

    B2a Is that the amount usually added each month, more than the usual amount, or less than the usual amount?

        (1) THE USUAL AMOUNT
        (2) MORE THAN THE USUAL AMOUNT
        (3) LESS THAN THE USUAL AMOUNT
        (r) REFUSED

        (d) DON'T KNOW

B3 Have (you/anyone in your household) ever received benefits from the SNAP program?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

[IFB3=1, GO TO B3a. IF B3 IN (0, r, d), GO TO B4.]

B3a Did (you/anyone in your household) receive SNAP benefits in the last 12 months?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

[IFB3a=1, GO TO B3b. IF B3a IN (0, r, d), GO TO B4.]

B3b On what date did (you/your household) last receive SNAP benefits?

MONTH: _____

DAY: _____

YEAR: _____

(r) REFUSED

(d) DON'T KNOW

B3c How many dollars were put on your SNAP EBT card at that time?

$: _____

(r) REFUSED

(d) DON'T KNOW

B4 Is anyone in your household now receiving benefits from the Food Distribution Program on Indian Reservations (FDPIR)?

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

B4a Is anyone in your household now receiving USDA foods from a local program or distribution site?

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

GO TO B5

INTERVIEWER: ASK QUESTION FOR EACH PERSON, THEN MOVE TO NEXT COLUMN.

[Loop through each person if AGE 4-19 (A6 <=19 and A6>=4).]

B5 Are you/Is NAME) currently attending kindergarten, grade school, junior or high school? How about (NAME)?

      (0) No

      (1) Kindergarten

      (2) Elementary School

      (4) Middle School

      (5) Junior High

      (6) High School

      (7) Other School (College, Technical School, etc.)

      (r) Refused

[IF B5 =0, GO TO B5a.]

B5a What is the reason (you/NAME) is not currently attending school?

       (1) School Break

       (2) Summer Vacation

       (3) Home Schooled

       (5) Disabled

       (6) Not Old Enough

       (7) Other

       (r) Refused

       (d) Don't Know

[IF B5 IN (1, 2, 3, 4, 5, 6), GO TO B5b.]

B5b (Are you/Is NAME) attending a public school, private school, or charter school?

       (1) PUBLIC SCHOOL

       (2) PRIVATE SCHOOL

       (3) CHARTER SCHOOL

       (4) OTHER SCHOOL TYPE

       (r) REFUSED

       (d) DON'T KNOW

[IF B5b IN (2, 3, 4), GO TO B5c.]

B5c What is the name of the school (you are/NAME is) attending?

       _____

[IF B5 IN (1, 2, 3, 4, 5, 6, 7) or (B5=0 and B5a IN (1, 2)), GO TO B6.]

B6 Is (NAME)'s school in session now through the next 10 days, or is it on break or vacation?

      (1) IN SESSION

      (2) SUMMER BREAK

      (3) OTHER BREAK

      (r) REFUSED

      (d) DON'T KNOW

      [IF B6 IN (2, 3), GO TO B6a.]

      B6a What are the first and last days of the school break or vacation?

            FIRST DAY (MM/DD):_____

            LAST DAY (MM/DD):_____

            DON'T KNOW

            REFUSED

[Loop ends.]

INTERVIEWER: ASK QUESTION FOR EACH PERSON, THEN MOVE TO NEXT COLUMN.

B7 (Does NAME's/Last year, did NAME's) school serve school lunches? These are complete lunches that are free or cost the same every day.

      [ ] (fill: Person 1)

      [ ] (fill: Person 2)

      …

      [ ] (fill: Person N)

ASK B7A TO B10 FOR FOR CHILDREN WHO ARE IN SCHOOL (K-12) OR ON SCHOOL BREAK (B5=1-6 OR d, r; OR B5=0 AND B5a=1,2)

[If B7 =√, loop through each person FOR B7A AND B7B. OTHERWISE GO TO B8]

B7a During the school year, about how many times a week does (NAME) usually get a complete school lunch? ENTER # (1-5)

_____ Range 1 - 5

B7b Does (NAME) get these lunches free, at a reduced price, or does he/she pay full price?

(1) FREE

(2) REDUCED PRICE

(3) FULL PRICE

(r) REFUSED

(d) DON'T KNOW

[Loop ends.]

B8 (Do any children/ Last year, did any children) in your household attend a school that serves school breakfasts? These are complete breakfasts that are free or cost the same every day.

(1) YES →GO TO B8A

(0) NO →GO TO B9

(r) REFUSED →GO TO B9

(d) DON'T KNOW →GO TO B9

B8a Which children attend(ed) a school that serves breakfast?

CHECK (√)

[ ] (fill: Person 1)

[ ] (fill: Person 2)

...

[ ] (fill: Person N)

[If B8a =√, loop through each person.]

B8a1 Does [NAME] currently receive breakfast at school?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

[IF B8a1 =1, GO TO B8b.]

B8b During the school year, about how many times a week does (NAME) usually get a complete breakfast at school? ENTER # (1-5)

_____ Range 1 - 5

[IF B8b > 0, GO TO B8c.]

B8c Does (NAME) get these breakfasts free, at a reduced price, or does (he/she) pay full price?

(1) FREE

(2) REDUCED PRICE

(3) FULL PRICE

(r) REFUSED

(d) DON'T KNOW

[Loop ends.]

INTERVIEWER: ASK QUESTIONS FOR EACH PERSON, THEN MOVE TO NEXT COLUMN

COMPLETE FOR CHILDREN WHO ARE IN SCHOOL (K-12) OR ON SCHOOL BREAK (SAME AS B7-B8)

[Loop through each person]

IF B9 IN (3, 4, 5, 6) ASK B9a IMMEDIATELY AFTER, THEN GO TO NEXT NAME

B9 During the school year, where does (NAME) usually go right after school is over?

> (1) YOUR HOME OR ANOTHER HOME WITH AN ADULT THERE
>
> (2) YOUR HOME OR ANOTHER HOME, WITHOUT AN ADULT THERE
>
> (3) A PARK OF RECREATION PROGRAM
>
> (4) A COMMUNITY OR CHURCH GROUP
>
> (5) STAYED AT SCHOOL FOR AN AFTER-SCHOOL PROGRAM
>
> (6) STAYED AT SCHOOL FOR TUTORING OR A SPECIAL CLASS
>
> (7) SOME OTHER PLACE
>
> (r) REFUSED
>
> (d) DON'T KNOW

> **[IF B9 IN (3, 4, 5, 6), GO TO B9a.]**
>
> **B9a** Does (NAME) receive a snack from this program?
>
> > (1) YES
> >
> > (0) NO
> >
> > (r) REFUSED
> >
> > (d) DON'T KNOW

[Loop ends]

[Loop through each person if AGE (A6) ≤ 5 FOR B11 TO B11B.]

INTERVIEWER: IF B11=1, 2, 3, 4 ASK B11a & B11b IMMEDIATELY AFTER, THEN GO TO NEXT NAME.

B11 Does (NAME) attend a child care center, family day care home, Head Start, or Early Head Start?

        (1) CHILD CARE CENTER

        (2) FAMILY DAY CARE HOME

        (3) HEAD START

        (4) EARLY HEAD START

        (0) NO

        (r) REFUSED

        (d) DON'T KNOW

        B11=1,2,3,4 ASK B11a & B11b IMMEDIATELY, BEFORE GOING TO NEXT NAME

        [IF B11 IN (1, 2, 3, 4), GO TO B11a.]

B11a How many meals does (NAME) usually receive from (his/her) child care provider **per week**? ENTER #

        _____

B11b How many snacks per week does (NAME) usually receive from (his/her) child care provider? ENTER #

        _____

[Loop ends.]

INTERVIEWER: ASK QUESTIONS FOR EACH PERSON, THEN MOVE TO NEXT COLUMN

SKIP QUESTIONS B12 – B14c IF HOUSEHOLD HAS NO FEMALES < AGE 50 AND NO CHILDREN < AGE 6.

READ: Next are a few questions about the WIC program - the Women, Infants, and Children program. WIC provides healthy foods and other services to low-income pregnant and breastfeeding women, infants, and children up to age 5.

[IF ANY FEMALES < 50 (A4=2 and A6<50), GO TO B12.]

B12 Before I ask these questions, could you tell me. Is anyone in your household currently pregnant?

    (1) YES

    (0) NO

    (r) REFUSED

    (d) DON'T KNOW

[Look through each person]

    [IF B12 =1 GO TO B12a. IF B12 IN (0, r, d), GO TO B13]

    B12a Who is that? Anyone else? CHECK (√)

        [ ] (fill: Person 1)

        [ ] (fill: Person 2)

        …

        [ ] (fill: Person N)

[IF AGE (A6) ≤ 2:]

B13 Is (NAME) currently breastfeeding?

    (1) Yes

    (0) No

    (r) Refused

    (d) Don't Know

[Loop ends.]

B14 Is anyone in your household now receiving benefits from WIC?

       (1) YES

       (0) NO

       (r) REFUSED

       (d) DON'T KNOW

[IF B14=1, GO TO B14a. IF B14 IN (0, r, d), GO TO B15.]

       B14a Who is that? Anyone else? CHECK (√)

           [ ] (fill: Person 1)

           [ ] (fill: Person 2)

           ...

           [ ] (fill: Person N)

       [Look through B14B AND B14C FOR each person CHECKED IN B14A. THEN GO TO NEXT PERSON]

       [IF FEMALE (A4=2), AGE (A6)>12, AND NOT PREGNANT (B12A=0 AND B14A IS CHECKED, GO TO B14b.]

       B14b Is (NAME) receiving WIC for herself, for a child, or for both herself and her child?

           (1) Herself→SKIP TO B14C

           (2) Child→GO TO SKIP INSTRUCTION BEFORE B14B1

           (3) Both→GO TO SKIP INSTRUCTION BEFORE B14B1

           (r) Refused →SKIP TO B14C

           (d) Don't Know→SKIP TO B14C

[IF HH HAS MORE THAN ONE CHILD LESS THAN 6, ASK B14B1. IF HH HAS ONLY ONE CHILD LESS THAN 6, CAPI AUTOMATICALLY RECORDS CHILD'S NAME TO B14B1 AND GOES TO B14C]

B14B1. Which child/which children is receiving WIC?

[ ] (fill: CHILD 1 LESS THAN 6)

[ ] (fill: CHILD 2 LESS THAN 6)

B14c For how many months has (NAMES FROM B14b) received benefits from the WIC program? ENTER

      #MONTHS _____

      MONTHS _____

      YEARS _____

[Loop ends.]

[Participate in community programs?]

B15 The next questions are about meals provided by community or government programs. (Are you / Is anyone in your household) currently receiving any meals delivered to your home from community programs, 'Meals on Wheels', or any other programs?

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

B16 In the past month, (have you/have you or other household members) gone to a community program or senior center to eat prepared meals? IF NEEDED: This includes adult day care.

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

Section C: [Where do you get food?]

The next questions are about where you get food.

C1 Where (do you/does your household) do most of your food shopping?

INTERVIEWER: SELECT STORE NAME AND ADDRESS FROM LIST.

IF STORE IS NOT ON LIST ENTER '99995'

_____

IF STORE IS ON LIST GO TO C1b

[STORE NAME OR "99995" IS SAVED IN C1.

IF SELECTED FROM LIST, INFORMATION FROM THE LOOKUP TABLE POPULATES **STORE1ID** AND **STORE1TYPE**.]

C1_OTH IF NEEDED: PLEASE SPECIFY NAME OF STORE

      STORE NAME: _____
      (r) REFUSED
      (d) DON'T KNOW

C1_1 Where is that located? IF NEEDED: What street?

      STREET: _____
      (r) REFUSED
      (d) DON'T KNOW

C1_2 IF NEEDED: What city?

      CITY: _____
      (r) REFUSED
      (d) DON'T KNOW

C1a What kind of store is that? INTERVIEWER: SHOW HAND CARD

       (1) Supermarket

       (2) Small grocery store

       (3) Convenience store

       (4) Discount or big box store like Target or Walmart

       (5) Wholesale club like B.J.'s, Costco, or Sam's Club

       (6) OTHER: _____

       (r) REFUSED

       (d) DON'T KNOW

C1b What are your main reasons for shopping at this store?

CIRCLE ALL THAT APPLY.

       [ ] LOW PRICES

       [ ] PRODUCE SELECTION

       [ ] MEAT DEPARTMENT

       [ ] VARIETY OF FOODS (GENERAL)

       [ ] VARIETY OF SPECIAL FOODS (SUCH AS GLUTEN FREE)

       [ ] CLOSE TO HOME

       [ ] LOYALTY/FREQUENT SHOPPER PROGRAM

       [ ] OTHER

       [ ] REFUSED

       [ ] DON'T KNOW

[IF STORE1TYPE OR C1a= 1, GO TO C3.]

C2   Why (don't you/doesn't your household) do most of your food
shopping at a large supermarket?

INTERVIEWER WRITE VERBATIM RESPONSE.

_____

_____

(r) REFUSED

(d) DON'T KNOW

C2a   CIRCLE ALL THAT APPLY TO VERBATIM RESPONSE IN C2

[ ] NO SUPERMARKETS CLOSE BY

[ ] NO TRANSPORTATION

[ ] COSTS TOO MUCH TO GET THERE

[ ] CAN'T FIND ETHNIC/SPECIALTY FOODS THERE

[ ] NO CHILD CARE / ELDER CARE

[ ] HOURS NOT CONVENIENT

[ ] DON'T ACCEPT FOOD STAMPS / WIC

[ ] NOT TREATED WITH RESPECT

[ ] OTHER STORES HAVE LOWER PRICES

[ ] OTHER REASON

C3   In a typical month, where else (do you/does your household) shop
for food?

INTERVIEWER: SELECT STORE NAME AND ADDRESS FROM LIST.

IF STORE IS NOT ON LIST → ENTER '99995'

_____

IF STORE IS ON LIST → GO TO C3b

STORE NAME OR "99995" IS SAVED IN C3.

IF SELECTED FROM LIST, INFORMATION FROM THE LOOKUP TABLE POPULATES **STORE2ID** AND
STORE2TYPE.

C3_OTH IF NEEDED: PLEASE SPECIFY NAME OF STORE

     STORE NAME: _____
     (r) REFUSED
     (d) DON'T KNOW

C3_1 Where is that located? IF NEEDED: What street?

     STREET: _____
     (r) REFUSED
     (d) DON'T KNOW

C3_2 IF NEEDED: What city?

     CITY: _____
     (r) REFUSED
     (d) DON'T KNOW

C3a What kind of store is that? INTERVIEWER: SHOW RESPONDENT HAND CARD, IF NEEDED

     (1) Supermarket
     (2) Small grocery store
     (3) Convenience store
     (4) Discount or big box store like Target or Walmart
     (5) Wholesale club like Costco, B.J.'s, or Sam's Club
     (6) OTHER
     (r) REFUSED
     (d) DON'T KNOW

C3b   What's the main reason you shop at this store?

     (1) LOW PRICES / GOOD VALUE

     (2) PRODUCE SELECTION

     (3) MEAT DEPARTMENT

     (4) QUALITY OF FOODS

     (5) VARIETY OF FOODS (GENERAL)

     (6) VARIETY OF SPECIAL FOODS (SUCH AS GLUTEN FREE)

     (7) CLOSE TO HOME

     (8) LOYALTY/FREQUENT SHOPPER PROGRAM

     (9) OTHER

     (r) REFUSED

     (d) DON'T KNOW

C4 (Do you/does anyone in your household) ever shop anywhere else even for just a few items?

     (1) YES

     (0) NO

     (r) REFUSED

     (d) DON'T KNOW

[IF C4 =1, GO TO C4a. IF C4 IN (0, r, d), GO TO C5.]

C4a In a typical month, how many different places (do you/does your household) shop for food or groceries?

     NUMBER: _____ (Range 1-25)

     (r) REFUSED

     (d) DON'T KNOW

C5 During the past 30 days, (did you/did anyone in your household) spend money on food at stores other than grocery stores? CIRCLE ALL THAT APPLY.

[ ] Convenience store (e.g., 7-11 or MiniMart)

[ ] Discount or big box store like Target or Walmart

[ ] Wholesale club like Costco, B.J.'s, or Sam's Club

[ ] Dollar store

[ ] Bakeries

[ ] Meat or Fish markets

[ ] Produce stores or Vegetable stands

[ ] OTHER – SPECIFY: _____

[ ] NO, NO STORES OTHER THAN GROCERY STORES

[ ] REFUSED

[ ] DON'T KNOW

C6 During the past 30 days, did (you/anyone in your household) go to a food pantry or food bank for groceries?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

[IF C6=1, GO TO C6a. IF C6 IN (0, r, d), GO TO C7.]

C6a What is the name of the food bank or food pantry?

NAME: _____
  (r) REFUSED
  (d) DON'T KNOW

C6b Where is that located? IF NEEDED: What street?

STREET: _____

 (r) REFUSED

 (d) DON'T KNOW

C6b1 IF NEEDED: What city?

CITY: _____

 (r) REFUSED

 (d) DON'T KNOW

C7 When in season, (do you/does your household) have a vegetable garden?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

C8 Do you receive fruits or vegetables from anyone else's garden?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

C9 When in season, do you ever get food from a Farmer's Market or farm stand?

(1) YES

(0) NO

(r) REFUSED

(d) DON'T KNOW

C10 (Do you/does anyone in your household) get food by hunting or fishing?

        (1) YES

        (0) NO

        (r) REFUSED

        (d) DON'T KNOW

[Transportation to store]

C11 Now I have questions about the store where you buy most of your food. How do you usually get to the store where you do most of your food shopping?

        (1) DRIVE OWN CAR
        (2) USE SOMEONE ELSE'S CAR

        (3) SOMEONE ELSE DRIVES ME

        (4) WALK

        (5) BUS
        (6) TAXI
        (7) RIDE BICYCLE
        (8) OTHER, SPECIFY: _____
        (r) REFUSED

        (d) DON'T KNOW

        [IF C11 IN (1, 2, 3, 4), GO TO C12. IF C11 IN (5, 6), GO TO C11a. IF C11 IN (7, 8, r, d), GO TO C11b.]

        C11a How much do you pay out of pocket to get to this store – one way?

            DOLLARS: _____
             (r) REFUSED
             (d) DON'T KNOW

C11b Do you or someone in your household have access to a car when you need one?

      (1) YES

      (0) NO

      (r) REFUSED

      (d) DON'T KNOW

C12 How long does it take to go one way from home to this store?

      MINUTES: _____

      (r) REFUSED

      (d) DON'T KNOW

[Time to get from home to work]

INTERVIEWER: ASK QUESTION FOR EACH PERSON, THEN MOVE TO NEXT COLUMN

[Loop through each person IF A12 In (1, 2) or A12b IN (7, 8).]

C12a How long does it usually take you to get from home to work?

      ENTER CODE FOR HOURS (1) OR MINUTES (2) ????

      HOURS: _____

      MINUTES: _____

C13 How many times (do you/does NAME) eat dinner out during an average week? This includes restaurants, fast-food, take-out, and ordering-in.

      ENTER #: _____

[Loop ends.]

[How often do you eat out?]

[IF HH SIZE>1, ASK C14.]

C14 How many times do you eat dinner out as a group during an average week?

    #TIMES: _____
     (r) REFUSED
     (d) DON'T KNOW

SECTION E: [Food security]

These next questions are about the food eaten in your household in the last 30 days, and whether you were able to afford the food you need.

E1 Which of these statements best describes the food eaten in your household in the last 30 days?

      (1) Enough of the kinds of food (I/we) want to eat

      (2) Enough, but not always the kinds of food (I/we) want to eat

      (3) Sometimes not enough to eat

      (4) Often not enough to eat

      (r) REFUSED

      (d) DON'T KNOW

Now 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 (you/your household) in the last 30 days.

E2 The first statement is "(I/We) worried whether (my/our) food would run out before (I/we) got money to buy more." Was that often true, sometimes true, or never true for (you/your household) in the last 30 days?

      (1) OFTEN TRUE

      (2) SOMETIMES TRUE

      (3) NEVER TRUE

      (r) REFUSED

      (d) DON'T KNOW

E3 "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 (you/your household) in the last 30 days?

        (1) OFTEN TRUE

        (2) SOMETIMES TRUE

        (3) NEVER TRUE

        (r) REFUSED

        (d) DON'T KNOW

E4 "(I/We) couldn't afford to eat balanced meals." PROMPT: Was that often, sometimes, or never true for (you/your household) in the last 30 days?

        (1) OFTEN TRUE

        (2) SOMETIMES TRUE

        (3) NEVER TRUE

        (r) REFUSED

        (d) DON'T KNOW

[IF E1 IN (3,4) or E2 IN (1,2) or E3 IN (1,2) or E4 IN (1,2), CONTINUE. OTHERWISE GO TO SECTION F.]

E5 In the last 30 days did (you/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?

        (1) YES

        (0) NO

        (r) REFUSED

        (d) DON'T KNOW

        [IF E5 =1, GO TO E5a. IF E5 IN (0, r, d), GO TO E6.]

E5a In the last 30 days, how many days did this happen?

> #DAYS: _____ (Range 1-30)
> (r) REFUSED
> (d) DON'T KNOW

		YES (1)	NO (0)	REF (r)	DK (d)
E6	In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money for food?	( )	( )	( )	( )
E7	In the last 30 days, were you ever hungry but didn't eat because there wasn't enough money for food?	( )	( )	( )	( )
E8	In the last 30 days, did you lose weight because there wasn't enough money for food?	( )	( )	( )	( )
E9	In the last 30 days, did (you/you or other adults in your household) ever not eat for a whole day because there wasn't enough money for food?	( )	( )	( )	( )

[IF E9 =1, GO TO E9a.]

E9a In the last 30 days, how many days did this happen?

> #DAYS: _____ (Range 1-30)
> (r) REFUSED
> (d) DON'T KNOW

SECTION F

Close   Those are all the questions I have for this interview. Thank you. Now I'll tell you about the information we want you to collect during the week and explain the incentive you will receive for keeping track of the food you get and completing our interviews. To be able to stay in touch with your household throughout the data collection week, I need to first collect the cell phone numbers and email addresses from all adults in the household if they have one. F1. We have this cell phone number (PULL CELL PHONE NUMBER FROM SCREENER) on file. Whose cell phone number is this?

[LIST ADULT HOUSEHOLD MEMBERS HERE]

F2. Who else has a cell phone and what is the number?

[SHOW A GRID WITH ADULT HOUSEOLD MEMBERS LISTED]

ADULT HOUSHEOLD MEMBE	CELL PHONE
ADULT1	ENTER CELL PHONE NUMBER HERE OR CHECK 'NO CELL PHONE', 'REFUSED'
ADULT2	
ADULT3	

F3. What is (your/[PERSON'S] email address that we can use to contact you?

ADULT HOUSEHOLD MEMBER	EMAIL
ADULT1	**ENTER EMAIL HERE OR CHECK 'NO EMAIL ADDRESS,' 'REFUSED'**
ADULT2	
ADULT3	