

APPENDIX C12.a

CERTIFICATION SURVEY RECRUITMENT IN-PERSON SCRIPT - ENGLISH

Instructions to reviewers: If unable to reach sampled WIC participant by telephone, Field Interviewers (FIs) will attempt to contact the individual **in-person** at their home address. FIs will be trained to rely minimally on this script so that they can focus on establishing face-to-face rapport with the potential respondent.

Some WIC participants in the Certification Survey sample for NSW-III will also be in the sample for the study's Program Experiences Survey. For such individuals, we plan to administer the Certification Survey followed by the Program Experiences Survey in a single in-person session. The recruitment script includes appropriate modifications for such instances.

In the text below, ALL CAPS signifies a potential response, skip patterns or instructions to the FI. Unless noted otherwise, FIs do not read aloud text that appears in ALL CAPS. Also, note that in the text below,

- If the sampled participant's WIC category is pregnant, breastfeeding, or postpartum woman: RESPONDENT = the sampled WIC participant
- If the sampled participant's WIC category is infant or child: RESPONDENT = the applicant (i.e., parent or guardian, or person who applied for WIC on infant/child's behalf)

Screening

[FIELD INTERVIEWER TRAINED TO FOLLOW SC1-SC5 SEQUENCE WITH MINIMAL RELIANCE ON SCRIPT FOR IN-PERSON RECRUITMENT:]

SC1. Hello, my name is **[INTERVIEWER]** and I'm with Capital Consulting Corporation, a company that conducts research in health and human services. We're conducting a study with families in this area for the United States Department of Agriculture. The study is about a program to improve families' access to healthy food and nutrition. May I please speak with **[RESPONDENT]**?

- 1 SPEAKING TO RESPONDENT
- 2 NOT A GOOD TIME.....[SCHEDULE CALLBACK]
- 3 RESPONDENT UNAVAILABLE...[GO TO SC3]
- 4 NO SUCH PERSON.....[GO TO SC2]
- 5 NOT SPEAKING TO RESPONDENT, BUT QUESTION ABOUT PURPOSE OF CALL
.....[GO TO SC1a]
- 6 NO LONGER AT THIS ADDRESS [UPDATE ADDRESS OR PHONE NUMBER]
- 8 (VOL) DON'T KNOW [THANK AND END. DISPO AS SOFT REFUSAL]
- 9 (VOL) REFUSED [THANK AND END. DISPO AS HARD REFUSAL]

UPDATE ADDRESS/PHONE: [FILL IN BELOW]

Street:	Apt/Unit No.		
City	State:	Confirm Phone:	xxx-xxx-xxxx
ZIP		Alternate Phone	

SC1a. For privacy reasons, we are not allowed to discuss this with anyone other than **[RESPONDENT]**.

SC2. It is important that I speak directly to **[RESPONDENT]**. Do you know how I can reach her? We thought this was her address.

- 1 YES [RECORD NEW PHONE/ADDRESS]
- 2 NO [S/O WRONG ADDRESS]
- 8 DON'T KNOW [S/O WRONG ADDRESS]
- 9 REFUSED [S/O WRONG ADDRESS]

SC3. It is important that I speak directly to **[RESPONDENT]**. Do you know when she will be home?

- 1 YES [SCHEDULE CALLBACK]
- 2 NO [GO TO T1. DISPO AS CALLBACK]
- 8 DON'T KNOW [GO TO T1. DISPO AS CALLBACK]
- 9 REFUSED [GO TO T1. DISPO AS CALLBACK]

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 10 minutes (0.17 hours) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302, ATTN: PRA (0584-xxxx*). Do not return the completed form to this address.

SC4. **[TO ALL:]** Before I continue, I'm required to ask: Are you at least 18 years old?

- | | | |
|---|------------|-------------|
| 1 | YES | [GO TO A1] |
| 2 | NO | [GO TO SC5] |
| 8 | DON'T KNOW | [GO TO SC5] |
| 9 | REFUSED | [GO TO SC5] |

SC5. **[IF < 18 YEARS:]** Thank you, we're looking for people who are at least 18 years old to participate in a survey. I appreciate your time, but you're not eligible. Thank you for taking the time to speak with me. Goodbye.

T1. Thank you for your time. I will try again at another time. **[DISPO AS CALLBACK]**

Introduction to Purpose of Visit

A1. Thank you. The Food and Nutrition Service at the USDA has asked Capital Consulting to conduct a research study about the Special Supplemental Nutrition Assistance Program for Women, Infants and Children, or WIC, food program to help them learn how they might improve the WIC program and the services they provide to WIC participants.

You have been randomly selected for this study because you **[OR your child]** recently qualified or re-qualified to receive WIC. The WIC agency in **[STATE]** gave us permission to contact families for this research study. Your local WIC agency does not know who was randomly selected for the study.

Let me reassure you that:

- Nothing you tell me will cause your WIC benefits or eligibility to change.
- The research team will protect your privacy. We will not tell your local WIC agency who participates or not in the study. We will combine the answers you provide with those from more than 1,500 households across the country, and study reports will not include your name, address, or other personal information about you or your family.
- Participation is voluntary. If you choose not to participate, you will continue getting the WIC benefits for which you're eligible.

IF PARTICIPANT SAMPLED FOR BOTH CERTIFICATION AND PROGRAM

EXPERIENCES SURVEY: For this study, I would like to schedule an in-person appointment to interview you about two different topics. First, we'd like to ask you about the procedures WIC used to qualify you; then, we'd like to ask about your experiences with the WIC program. If you participate in both interviews, you will receive two \$25 Visa debit cards for a total of \$50. The appointment will take about 1 hour and 12 minutes, and would take place in your home at a time that is most convenient for you.

IF PARTICIPANT SAMPLED FOR CERTIFICATION SURVEY ONLY: For this study, I would like to schedule an in-person interview to ask you about the procedures WIC used to qualify you. If you participate in this interview, you will receive a \$25 Visa debit card. The interview will take about 42 minutes, and would take place in your home at a time that is most convenient for you.

A1a. First, can I confirm that you are [OR your child is] participating in the WIC program?

- 1 YES[GO TO A2]
- 2 NO[GO TO WRAP UP 3]

A2. I'd like to schedule a time to come do the interview with you. But first, do you have any questions about the study?

- 1 YES[ANSWER QUESTIONS]
- 2 NO[GO TO A3]

A3. Great! Let's find a convenient time to schedule the interview. For convenience, we are scheduling most of the interviews at people's homes. Is it all right for me to schedule the interview to take place here at your home?

- 1 YES[GO TO A4]
- 2 NO[ASK FOR THEM TO PROVIDE ALTERNATE LOCATION]
- 3 THEY ASK WHY..... [EXPLAIN: To reduce the burden on your time, we come to you. Most people find it easier.]
- 4 REFUSAL.....THANK-DISPO AS HARD REFUSAL WRAP-UP 2]

A4. Ideally, I'd like to find a time this week or next when you'll be able to talk freely. If this is a good time, we could do the interview right now. Or, I have weekday or weekend appointments in the morning, afternoon, or evening. What would you prefer? [SHOW HANDHELD CALENDAR]

- 1 NOW IS A GOOD TIME.....[OBTAIN CONSENT, ASK IF THERE IS A GOOD LOCATION WHERE YOU CAN SIT TOGETHER, PROCEED TO CERTIFICATION SURVEY]
- 2 NO GOOD TIMES THIS WEEK OR NEXT WEEK.....[GO TO A5a]
- 3 RESPONDENT PROVIDES PREFERENCES [FI TALKS WITH PARTICIPANT TO FIND TIMES BEST FOR PARTICIPANT/APPLICANT AND PROCEEDS TO A5]

A5. How does [DATE/TIME] work for you?/Ok, so we'll schedule it for [DATE/TIME]?

- 1 WORKS WELL.....[GO TO A6]
- 2 NOT GOOD TIME.....[REPEAT]

A5a. How would a later date work? We can schedule the interview in the next 3-4 weeks instead if that would be easier for you.

- 1 YES.....[GO TO A5]
- 8 DON'T KNOW YET.....[SUGGEST CALL BACK]

9 NO INTEREST IN INTERVIEW.....[THANK-DISPO AS HARD REFUSAL WRAP-UP 2]

A6. Can I confirm that this is where I should meet you for the in-person interview?

- 1 CONFIRMED..... [ASK ABOUT: parking restrictions in the area ...GO TO A7]
- 2 NO..... [ASK ABOUT: correct address for interview, parking restrictions in the area, any reason it may difficult to find the preferred address...GO TO A7]

A7. Great! In one part of the interview, you'll be asked to show the interviewer certain documents. It's very important that you gather these documents before the interviewer arrives. You may have recently shown these same documents at your recent WIC appointment. The interviewer will ask to see:

- Some form of identification [IF INFANT/CHILD: for you and your child] such as a current driver's license, birth certificate, [IF INFANT/CHILD: or hospital crib card or wrist band];
- Something with your current address such as a current utility bill, rent receipt, or piece of mail that you recently received;
- Documents showing income you and other members of your family have received in the past month. This includes
 - Current paystubs for you or other family members
 - If someone in your family is in the military, a recent "Leave and Earnings Statement;"
 - If you receive alimony or child support, divorce or court papers showing the award amount;
 - If someone in your family receives Social Security, disability benefits or SSI [Supplemental Security Income], a check stub or an award letter showing the amount;
 - If anyone receives unemployment, a check stub or award letter.
 - If anyone in your family owns a business or is self-employed, we would like to see a recent income tax return or W-2 form.
- In case you don't have one of these documents, **please have copies of recent bank statements** for anyone in your family with a checking or savings account.

Finally, if anyone in your family receives SNAP (food stamps), [STATE NAME OF MEDICAID PROGRAM(S)], or TANF (welfare), we would like to see a "Notice of Eligibility" or letter "About Your Benefits" showing the dates when you are eligible. [IF RESPONDENT MENTIONS A PROGRAM CARD OR EBT CARD: Often those kinds of cards do not show your participation dates. If that is all you can find, please also try to have a recent bank statement or a recent EBT receipt.]

Let me say again that:

- Nothing you show me or tell me or will cause your WIC benefits or eligibility to change.
- We will protect your privacy. No personal information that could identify you or your family will appear in any study report.

Do you have any questions about the interview?

- 1 YES [LISTEN TO respondent's questions/concerns. ADDRESS: any issues respondent brings up with FAQ]
- 2 NO [RECORD APPOINTMENT DATE AND TIME. GO TO A8]

A8. I'm looking forward to seeing you on [APPOINTMENT DATE]. I'd like to call or text you a day or two before the interview to remind you that I'll be coming. Would you prefer a phone call or a text message?

- 1 PHONE..... [THANK AND CONFIRM PHONE NUMBER]

- 2 TEXT MESSAGES..... [THANK, CONFIRM PHONE NUMBER, AND TELL THEM: “Great – I’m required to tell you that standard messaging fees may apply according to your cell phone plan.”]

WRAP-UP 1

Again, thank you so much. We really appreciate your participation in this study.

WRAP-UP 2

I understand that you are not willing to participate in this study and schedule an in-home interview. Thanks so much for taking the time to speak with me today.

WRAP-UP 3

I apologize, it looks like there may be a mistake in my records. Thank you for your time. Goodbye.

SPECIAL CIRCUMSTANCES/ EMERGENCY

[IF ANY ADVERSE EVENTS COME UP DURING VISIT, FIS WILL BE TRAINED TO SKIP TO THIS TEXT IMMEDIATELY.]

I am sorry to catch you at a bad time. I’ll try again later. Thank you. **[LEAVE PREMISES. INTERVIEWER: FILL OUT ADVERSE EVENT FORM.]**