

SUPPORTING STATEMENT FOR ATUS EATING AND HEALTH MODULE

OMB CONTROL NO. 1220-0187

This ICR seeks OMB clearance for a reinstatement with change of the BLS Eating and Health Module to the American Time Use Survey.

A. JUSTIFICATION

1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating or authorizing the collection of information.

The purpose of this request for review is for the Bureau of Labor Statistics (BLS) to obtain clearance for an Eating and Health Module to the American Time Use Survey (ATUS), scheduled to be conducted January 2022 through December 2023. The proposed questions appear in Attachment A. As part of the ATUS, the module will survey individuals ages 15 and over from a nationally representative sample of approximately 2,060 sample households each month. If approved, the Eating and Health Module questions will be asked immediately after the ATUS and will follow up on some of the information ATUS respondents provide in their time diary. (The time diary is a section of the ATUS interview in which respondents report the activities they did over a 24-hour period that mainly encompasses "yesterday," or the day before the interview.) The Eating and Health Module is sponsored by the Economic Research Service (ERS) at the U.S. Department of Agriculture (USDA).

The Eating and Health Module, as described above, was also attached to the ATUS in the years 2006-08 and 2014-16 and collected under the OMB Numbers 1220-0175 and 1220-0187. Like the previous modules, the core of the 2022-23 Eating and Health Module will collect additional data about eating behavior, food assistance program participation, grocery and food shopping, and meal preparation. Although many questions remain the same, some have been dropped, some have been modified, and some have been added to obtain better information about topics including: food consumption, food preparation, and in-store and online grocery shopping (both for delivery and for pickup). The module will also collect some information about general health and physical exercise.

The ATUS is the nation's first federally administered, continuous survey about time use in the United States. The survey is sponsored by BLS and conducted by the U.S. Census Bureau. In the ATUS, a nationally representative sample of persons from households completing their final month of interviews for the Current Population Survey (CPS) is drawn for the ATUS. From each household, one person age 15 or older is selected for a one-time ATUS interview. The primary focus of the interview is on collecting the time

diary, although additional questions are asked about the respondent's household composition and work during the prior week.

Time-use data are considered important indicators of both quality of life and the contribution of non-market work to national economies. They measure, for example, time spent caring for children, volunteering, working, sleeping, and doing leisure and other activities.

Collection of time-use data fits well within the BLS mission, as outlined in Title 29, United States Code, Section 1:

“The general design and duties of the Bureau of Labor Statistics shall be to acquire and diffuse among the people of the United States useful information on subjects connected with labor, in the most general and comprehensive sense of that word, and especially upon its relation to capital, the hours of labor, the earnings of laboring men and women, and the means of promoting their material, social, intellectual, and moral prosperity.”

2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.

The data from the proposed Eating and Health Module support the BLS mission of providing relevant information on economic and social issues. Time-use data allow researchers to analyze the choices people make in how they spend their time, along with the time and income constraints they face. The data from the proposed Eating and Health Module can be used for research on the inter-relations of time-use patterns and body mass index (BMI), food assistance participation, grocery shopping, and meal preparation. These data will enhance the understanding of peoples' overall well-being.

The data from the Eating and Health Module also closely support the mission of the module's sponsor, ERS, to improve the nation's nutrition and health. By analyzing the module data, the association between time-use patterns and nutrition and health can be studied. Some of the questions that can be answered include:

- What is the association between eating patterns and BMI and obesity?
- What are the time-use patterns of food assistance program participants and low-income nonparticipants?
- What is the association between time-use patterns and eating and activity levels?
- How does time-use vary by health status?

With the exception of asking about secondary child care, the ATUS asks respondents to identify only their primary (or main) activities; however, many Americans eat while doing other things, such as while driving or working. Asking respondents to report eating as a secondary activity provides information both for estimating the total time spent eating and also for understanding eating patterns. USDA has considerable research

interest in eating behavior, as ERS conducts research to monitor and evaluate food consumption from several different perspectives—what people eat, where people buy their food, and how food consumption choices relate to diet quality and nutrition. In addition, ERS research analyzes the degree to which food and eating choices influence the type of crops that America's farmers grow, the prices farmers receive for those crops, and how those crops are transformed into finished products.

Obesity is the most common food- and nutrition-related health problem in America. Health professionals and economists have been conducting research to discover to what extent caloric intake, sedentary lifestyles, and other factors contribute to America's growing obesity problem. The Eating and Health Module, used in conjunction with the core ATUS, can help identify the types of activities and eating patterns that are associated with obesity, a healthy weight, overall health, and well-being. Data on time spent in sedentary and active pursuits, along with eating patterns (primary and secondary eating), demographic characteristics, and labor force information, will provide researchers with the ability to analyze time use for various subgroups by Body Mass Index (BMI). Self-reported general health status is an inexpensive measure that has been found to provide meaningful information on health and well-being. Self-reported general health status has been found to predict mortality and morbidity and is used in other federal surveys to assess overall well-being.¹

The Supplemental Nutrition Assistance Program (SNAP)—formerly named the Food Stamp Program—is the nation's largest food and nutrition assistance program and is administered by USDA. The Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides federal grants to states for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk. Understanding the time constraints that low-income households face, both those with and without SNAP and/or WIC recipients, is of particular interest to policymakers and program administrators.

The 2006-08 and 2014-16 Eating and Health Modules produced data that have been used in a variety of research products that inform policy and programs on eating and other behaviors. Some examples include:

- Food-Related Time Use: Changes and Demographic Differences (2019)—Anekwe and Zeballos (2019) present an overview of food-related time-use patterns over time, both for the U.S. population aged 15 and older and for U.S. subgroups defined by educational attainment, household type, and other demographic factors.²
- The Role of Time Use Behaviors in the Risk of Obesity among Low-Income Mothers—Gough et al. (2019) explore whether childrearing demands and

¹ Hennessy, C.H., D.G. Moriarty, M.M. Zack, P.A. Scherr, R. Brackbill, "Measuring Health-Related Quality of Life for Public Health Surveillance," *Public Health Report* 1994; 109: 665-72

² Tobenna D. Anekwe and Eliana Zeballos. (November 2019). Food-Related Time Use: Changes and Demographic Differences, EIB-213, U.S. Department of Agriculture, Economic Research Service.

differences in time use increase the risk of overweight and obesity for women in different income brackets.³

- Food Purchase Decisions of Millennial Households Compared to Other Generations—Kuhns and Saksena (2017) find that millennials exhibit a higher preference for convenience than do other generational cohorts when making food-at-home purchases, with the largest budget shares going to food categories dominated by ready-to-eat foods.⁴
- The Role of Time in Fast-Food Purchasing Behavior in the United States—Hamrick and Okrent (2014) examine the effects of time-use behaviors on fast-food purchases in the United States.⁵
- Body Mass Index: Accounting for Full Time Sedentary Occupation and 24-Hr Self-Reported Time Use—Tudor-Locke, et al. (2014) examine BMI variations across sedentary and non-sedentary occupations.⁶
- Time in Eating and Food Preparation Among Single Adults—Senia, et al. (2014) examine factors that affect the duration of eating episodes and food preparation among adults in single decision-maker households.⁷
- How Does Time Poverty Affect Behavior? A Look at Eating and Physical Activity—Kalenkoski and Hamrick (2012) analyze the relationships between time poverty and eating and physical activity patterns.⁸
- Shopping For, Preparing, and Eating Food: Where Does the Time Go?—Andrews and Hamrick (2009) describe time-use patterns of SNAP participants and low-income nonparticipants.⁹
- Who Has Time To Cook? How Family Resources Influence Food Preparation—Mancino and Newman (2007) analyzed how family resources affect food preparation time.¹⁰

3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection

³ Gough, M., et al. (2019). *The Role of Time Use Behaviors in the Risk of Obesity among Low-Income Mothers*. *Women's Health Issues* 29(1): 23-30.

⁴ Annemarie Kuhns and Michelle Saksena (December 2017). *Food Purchase Decisions of Millennial Households Compared to Other Generations*, EIB-186, U.S. Department of Agriculture, Economic Research Service.

⁵ Hamrick, Karen, and Okrent, Abigail. (November 2014). *The Role of Time in Fast-Food Purchasing Behavior in the United States*, *Economic Research Report No. (ERR-178)*.

⁶ Tudor-Locke C, Schuna JM Jr, Katzmarzyk PT, Liu W, Hamrick KS, et al. (2014). Body Mass Index: Accounting for Full Time Sedentary Occupation and 24-Hr Self-Reported Time Use. <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0109051>

⁷ Senia, M., H. Jensen, and O. Zhlyevskyy. (2014). Time in eating and food preparation among single adults, *Review of Economics of the Household*: 1-34.

⁸ Kalenkoski, C. M. and K. S. Hamrick. (2012). How Does Time Poverty Affect Behavior? A Look at Eating and Physical Activity, *Applied Economic Perspectives and Policy* 35(1): 89-105.

⁹ Andrews, M., and Hamrick, K. (December 2009). *Shopping For, Preparing, and Eating Food: Where Does the Time Go?* Amber Waves, United States Department of Agriculture, Economic Research Service. <http://webarchives.cdlib.org/details/sw1tx36512/http://www.ers.usda.gov/AmberWaves/December09/PDF/ShoppingFood.pdf>

¹⁰ Mancino, L., and Newman, C. (May 2007). *Who Has Time to Cook? How Family Resources Influence Food Preparation*, *Economic Research Report, No.(ERR-40)*.

techniques or other forms of information technology, e.g., permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also, describe any consideration of using information technology to reduce burden.

The U.S. Census Bureau, which collects and processes the data for ATUS, conducts all interviews over the telephone, completing the respondent's time-use diary using Computer Assisted Telephone Interviewing (CATI). Using an automated call scheduler and hourly reports from the system, cases are presented to interviewers in order depending on respondents' designated interview days, pre-set appointment times, CPS information on the best time to call respondents, and other information.

The ATUS questionnaire and coding instrument are built in Blaise, a Windows-based software package developed by Statistics Netherlands and adopted as the Census Bureau standard. The software's graphical user interface (GUI) enables the usage of data entry grids that accept many entries on one screen. This feature enables the interview to be flexible, making reporting easier for respondents. It also facilitates efficient and accurate coding of diary activities.

4. Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposes described in Item A.2 above.

The 2022-23 Eating and Health Module will complement other food data collection efforts. Because the ATUS is a time-use survey, the Eating and Health Module will utilize the time diary data for research on food assistance, food markets, diet and health, and food safety. The National Household Food Acquisition and Purchase Survey (FoodAPS) collected extensive information on the economic decisions in food purchases, but did not collect time diary information. The CPS Food Security Supplement (FSS) collects extensive information on whether or not a household is food secure, the amount of the household's food expenditures, and whether or not the household receives food assistance benefits, but does not collect any time-use information. The National Health and Nutrition Examination Survey (NHANES) collects extensive medical and food intake data, but no time-use information. The BLS Consumer Expenditure Survey collects extensive information on households' expenditures, but no information about time use.

5. If the collection of information impacts small businesses or other small entities, describe any methods used to minimize burden.

The data are collected from individuals in households; their collection does not involve any small businesses or other small entities.

6. Describe the consequence to federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.

Fielding the Eating and Health Module in 2022-23 will allow researchers to monitor changes in Americans' time-use patterns along with changes in Americans' eating activities, BMI values, and changes in food assistance participation.

Additionally, the proposed 2022-23 Eating and Health Module includes several important questions that were not included in previous modules. These include questions about online grocery shopping, quality of diet, and physical exercise. These questions will provide an additional dimension to analyses of the time-use data and BMI, food assistance participation, grocery shopping, meal preparation, and physical exercise.

7. Explain any special circumstances that would cause an information collection to be conducted in a manner:

- **requiring respondents to report information to the agency more often than quarterly;**
- **requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it;**
- **requiring respondents to submit more than an original and two copies of any document;**
- **requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years;**
- **in connection with a statistical survey, that is not designed to produce valid and reliable results that can be generalized to the universe of study;**
- **requiring the use of statistical data classification that has not been reviewed and approved by OMB;**
- **that includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or**
- **requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.**

No special circumstances apply.

8. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the agency's notice, required by 5 CFR 1320.8(d), soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the agency in response to these comments. Specifically address comments received on cost and hour burden.

Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.

Consultation with representatives of those from whom information is to be obtained or those who must compile records should occur at least once every 3 years -- even if the collection-of-information activity is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.

- a. One comment was received as a result of the Federal Register notice published in 86 FR 35138 on July 1, 2021.

The comment, which was e-mailed to BLS on July 1, 2021, was out of scope. The mission of the BLS is to provide relevant information on economic and social issues. This particular information collection aims to assist in research on the inter-relations of time-use patterns and food assistance participation, grocery shopping, meal preparation, body mass index (BMI), and general health in order to enhance the understanding of peoples' overall well-being.

- b. Several people were consulted in the development of the 2022-23 Eating and Health module to the ATUS. Following are key individuals who were involved in this work:

Economic Research Service (ERS)
Eliana Zeballos, Brandon Restrepo
Economic Research Service
United States Department of Agriculture

U.S. Census Bureau
Beth Ashbaugh Capps
Assistant Survey Director - American Time Use Survey
Associate Director for Demographic Programs
U.S. Census Bureau

Bureau of Labor Statistics
Struther Van Horn, Doug Williams
Office of Survey Methods Research
Bureau of Labor Statistics
Department of Labor

Bureau of Labor Statistics
Rachel Krantz-Kent
American Time Use Survey
Bureau of Labor Statistics
Department of Labor

ERS partnered with NIH-National Cancer Institute (NCI) and USDA-Food and Nutrition Service (FNS) in the development of the 2014-16 Eating and Health Modules. ERS consulted with researchers at Virginia Tech, Iowa State University and the USDA to develop the 2022-23 Eating and Health Modules. ERS asked for their suggestions and prioritization of possible survey questions in the module's development process.

9. Explain any decision to provide any payments or gifts to respondents, other than remuneration of contractors or grantees.

Participants in the Eating and Health Module will not receive compensation beyond what they already receive for participating in the ATUS. In the ATUS, the majority of respondents do not receive compensation. BLS offers incentives to respondents from “no-telephone-number” households. Persons in these households do not own a phone, have not provided a phone number to the Census Bureau as of CPS month-in-sample 8 (final month), or are among a small number of households that provided Census with nonworking phone numbers. Incentives are also sent to individuals for whom the Census Bureau assigned call outcome codes of: *108 Number not in service*; *109 Number changed, no new number given*; *124 Number could not be completed as dialed*; and *127 Temporarily not in service* after the first week of collection. Individuals who are sent incentives account for about 10 percent of the ATUS sample, and are more likely to be black, of Hispanic or Latino ethnicity, to have less education, and to have lower household incomes than members of households that provide phone numbers. The number of such cases is relatively small—approximately 2,500 potential cases each year. Because these households may differ from phone households on unobservable characteristics, including their time-use patterns, and because providing incentives to this small group is not cost prohibitive, BLS believes it is beneficial to expend additional effort and expense to secure their responses.

From December 2019 to September 2021 samples, \$5 and \$10 cash incentives are being sent to some recipients in accordance with the ATUS Cash Incentive Study (see Attachment L.) In the interim period, after the cash incentive study has ended but before

implementation of a new incentive plan, and as discussed in the previously OMB-approved cash incentive study, ATUS will send \$5 cash incentives to incentive cases.

10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.

The Census Bureau employees hold all information that respondents provide in strict confidence in accordance with Title 13, United States Code, Section 9 (see Attachment N.) Each interviewer has taken an oath to this effect, and if convicted of disclosing any information given by the respondent may be fined up to \$250,000 and/or imprisoned up to 5 years. In addition, Title 13 prohibits Census Bureau employees from disclosing information identifying any individual(s) in the ATUS to anyone other than sworn Census employees.

Respondents are informed of their right to confidentiality under Title 13 in the ATUS advance letter, mailed approximately 10 days before the interview date (see Attachment G.) The ATUS advance letter also advises respondents that this is a voluntary survey.

All Census Bureau security safeguards regarding the protection of data files containing confidential information against unauthorized use, including data collected through Computer Assisted Telephone Interviewing (CATI), apply to ATUS data collection.

The BLS Processing System design requires that ATUS data be securely transferred from the Census Bureau server to the BLS server. This process mirrors the process used to transfer CPS data.

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.

Some of the proposed Eating and Health Module questions may be sensitive. Two of the questions were perceived as sensitive during cognitive testing of the 2006-08 Eating and Health Module (see Attachment D). First, in order to calculate BMI, height and weight are asked. Many of the cognitive study participants felt that weight was a sensitive question. However, even though many people felt uncomfortable when asked about their weight, they also said that they thought weight was an important question because it is an important indicator of overall health. Several participants mentioned their knowledge that obesity is a serious public health problem, and their belief that the government should play a role in conducting research about it.

In addition to weight being perceived as sensitive, the module contains one question about household income. During cognitive testing of 2006-08 Eating and Health Module questions, several people indicated that income questions might be sensitive for some people. However, no one refused the income questions, and no one indicated that these questions were particularly sensitive for them. None of the questions added to the 2014-16 Eating and Health Module were perceived as sensitive during cognitive testing (see Attachment E.)

The proposed 2022-23 Eating and Health Module includes several additional questions that were not included in the previous modules. During cognitive testing of the proposed module, there was no indication of participants experiencing burden or sensitivity in reaction to the core set of questions in the Eating and Health Module. Indications of sensitivity were related to questions used in previous modules about weight, income, and being asked about food stamp benefits (see Attachment F).

12. Provide estimates of the hour burden of the collection of information. The statement should:

- **Indicate the number of respondents, frequency of response, annual hour burden, and an explanation of how the burden was estimated. Unless directed to do so, agencies should not conduct special surveys to obtain information on which to base hour burden estimates. Consultation with a sample (fewer than 10) of potential respondents is desirable. If the hour burden on respondents is expected to vary widely because of differences in activity, size, or complexity, show the range of estimated hour burden, and explain the reasons for the variance. General, estimates should not include burden hours for customary and usual business practices.**
- **If this request for approval covers more than one form, provide separate hour burden estimates for each form.**
- **Provide estimates of annualized cost to respondents for the hour burdens for collections of information, identifying and using appropriate wage rate categories. The cost of contracting out or paying outside parties for information collection activities should not be included here. Instead, this cost should be included in Item 14.**

The estimated respondent burden for the proposed 2022-23 Eating and Health Module is 786 hours annually. This is based on an average respondent burden of approximately 5 minutes. In 2019, the overall response rate for the ATUS was 40.1 percent, for a total of 9,435 respondents.¹¹

The overall annualized dollar cost to the respondents for collection of the 2022-23 Eating and Health Module is expected to be \$12,859 per year. This estimate assumes a wage

¹¹ Because data collection, and thus response, for the ATUS was impacted by the COVID-19 pandemic in 2020, the response rates for 2019 are a better representation of expected response rates in 2022-23.

rate for all respondents of \$16.36 an hour, the median hourly earnings for workers paid by the hour in 2020.

Estimated Annualized Respondent Cost and Hour Burden

Activity	No. of Respondents	No. of Responses per Respondent	Total Responses	Average Burden (Hours)	Total Burden (Hours)	Hourly Wage Rate	Total Burden Cost
2022-23 Eating and Health Module	9,435	1	9,435	5/60	786	\$16.36	\$12,859

**Costs are rounded to the nearest dollar and calculated using 2020 median hourly earnings (\$16.36) from the Current Population Survey (see Attachment K.)

13. Provide an estimate of the total annual cost burden to respondents or recordkeepers resulting from the collection of information. (Do not include the cost of any hour burden shown in Items 12 and 14).

- **The cost estimate should be split into two components: (a) a total capital and start up cost component (annualized over its expected useful life); and (b) a total operation and maintenance and purchase of service component. The estimates should take into account costs associated with generating, maintaining, and disclosing or providing the information. Include descriptions of methods used to estimate major cost factors including system and technology acquisition, expected useful life of capital equipment, the discount rate(s), and the time period over which costs will be incurred. Capital and start-up costs include, among other items, preparations for collecting information such as purchasing computers and software; monitoring, sampling, drilling and testing equipment; and record storage facilities.**
- **If cost estimates are expected to vary widely, agencies should present ranges of cost burdens and explain the reasons for the variance. The cost of purchasing or contracting out information collection services should be a part of this cost burden estimate. In developing cost burden estimates, agencies may consult with a sample of respondents (fewer than 10), utilize the 60-day pre-OMB submission public comment process and use existing economic or regulatory impact analysis associated with the rulemaking containing the information collection, as appropriate.**

- **Generally, estimates should not include purchases of equipment or services, or portions thereof, made: (1) prior to October 1, 1995, (2) to achieve regulatory compliance with requirements not associated with the information collection, (3) for reasons other than to provide information or keep records for the government, or (4) as part of customary and usual business or private practices.**
- a. Capital start-up costs: \$0
 - b. Total operation and maintenance and purchase of services: \$0

14. Provide estimates of the annualized cost to the Federal Government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operational expenses (such as equipment, overhead, printing, and support staff), any other expense that would not have been incurred without this collection of information. Agencies also may aggregate cost estimates from Items 12, 13, and 14 into a single table.

The total estimated cost of the 2022-23 Eating and Health Module is approximately \$400,000. This cost is to be borne by the ERS of the USDA and largely represents the charge by the Census Bureau for conducting the module. Census activities for this supplement include programming the collection instrument, collecting data, monitoring calls, processing survey microdata, developing imputation methods and creating edited variables, developing statistical weights, and developing public use files. The cost also includes BLS activities of data review and verification, developing and conducting training, developing documentation to support the module, the administration of the interagency agreement, and the release of the data.

15. Explain the reasons for any program changes or adjustments.

The proposed 2022-23 Eating and Health Module has many questions that are the same or similar to questions appearing in 2014-16 module. Like the previous module, the 2022-23 module includes questions about secondary eating, grocery shopping, meal preparation, food assistance program participation, physical exercise done in the last week, and general health. Unlike the 2014-16 Eating and Health Module, the 2022-23 version will not include questions about secondary drinking, soft drink consumption, meat thermometer use, raw milk consumption, and frequency of fast food purchases in order to make room for new topics.

The proposed 2022-23 Eating and Health Module includes several new or modified questions that were not included in the 2014-16 module. These questions were reviewed by survey methods experts and cognitively tested. The new or modified questions are as follows:

Modified Question

GROSH2: How much of the grocery shopping in the household do you usually do?
None, A little, Some, A lot, All

This question is a modified version of the question GROSH2 which was asked in 2014-16 (Are you the person who usually does the grocery shopping in your household?). This question will allow researchers to measure ratios of labor allocation.

New Question

GROSH3: How much do you enjoy doing the grocery shopping for your household? Not at all, A little, Somewhat, A lot

Asking how much respondents enjoy doing these tasks can help researchers understand why the allocations are in these ratios, and will also contribute to research on the value of time.

New Questions

ONLINE1: Thinking back over the LAST 30 DAYS, how many times did you purchase GROCERIES ONLINE for pickup or delivery for your household?

ONLINE2: Did you usually pick up your online grocery order or did you have it delivered? Usually pickup, Usually delivered, About equal between pickup and delivery

ONLINE3: What is the MAIN reason you chose to purchase groceries ONLINE instead of in person? (Select one) Price, Quality of products, Variety of products, Customer service, Needing specialty foods, Easier to compare prices across stores, Transportation limitations, Time constraints, Physical safety concerns, Other (specify)

ONLINE4: What is the MAIN reason you did not buy groceries online?

Measuring online grocery shopping is important because it is becoming a widely used tool to save time. Moreover, the pandemic has accelerated the adoption of these tools by the general public, and the USDA pilot is rapidly expanding access to online grocery shopping for SNAP/WIC recipients. These behavioral changes may have long lasting effects and it will be important to capture them. Distinguishing between online orders for delivery versus pickup provides relevant insight in the decision making around time use (e.g. paying delivery fees to save time).

Modified question

FASTFD2: In the LAST 7 DAYS, excluding frozen foods, how many times did you PURCHASE prepared, READY-TO-EAT food from a deli, carryout, delivery food, fast food place, or restaurant, for [fill: yourself/yourself or household. **]?

This question is a modified version of FASTFD and FASTFD_FREQ. These questions

were folded into one question in the 2022-23 module to allow room for new questions.

Modified question

FASTFD_YEST2: YESTERDAY, did you EAT food prepared by any food service provider, such as a deli, restaurant, fast food place, cafeteria, or any other type of eatery?

This is a modified version of FASTFD_YEST used in the previous version of the module. Instead of asking the respondent if they purchased prepared food, the new question asks if the respondent ate prepared food. This change allows researchers to examine the relationship between eating out and time spent eating and engaged in food production activities (e.g., cooking, cleaning).

Modified question

PRPMEL2: How much of the meal preparation in the household are you usually responsible for? None, A little, Some, A lot, All

Household allocation of labor was a major topic in the literature that used Eating and Health Module data. The modified question will go beyond the previously used yes/no questions on whether the respondent is the main meal preparer/main grocery shopper in their household and allow researchers to measure ratios of labor allocation.

New question

PRPMEL3: How much do you enjoy doing the food preparation for your household? Not at all, A little, Somewhat, A lot

Asking how much respondents enjoy doing these tasks can help researchers understand why the allocations are in these ratios, and will also contribute to research on the value of time.

Modified question

FDSIT2: The next question is about the food eaten in your household. Which of the following statements best describes the amount of food eaten in your household in the last 30 days— enough of the kinds of food [fill: I/we. **] want, enough but not always the kinds of food [fill: I/we] want, sometimes not enough to eat, or often not enough to eat?

A response category was added in order to capture marginal food sufficiency.

New question

DIET: In general, would you say that the quality of your diet is...Excellent, Very good, Good, Fair, Poor

This question will provide another dimension of overall health and will help researchers better understand factors involved in food-consumption decision-making (e.g., time

constraints, money, food availability).

New question

EXINT: How much of this leisure-time physical activity and exercise was vigorous enough to cause a large increase in breathing or heart rate? None, A little, Some, A lot, All

Measuring exercise intensity adds value to the questions about exercise activity already in the module and also provides a new dimension for research on the relationship between people's activities and their health.

Modified question

INCOME3: Last month, was your total household income before taxes more or less than [fill: 200 percent of poverty threshold**] per month?

This question is a modified version of INCOME2 and INCOME3. These questions were folded into one question in the 2022-23 module to allow room for new questions. The new question determines eligibility for WIC and SNAP benefits.

Because some questions were dropped to make new room for the new questions, there is no change in the estimated time to complete the module. In addition to the changes outlined above, minor language changes were made to some questions for clarity. These changes were time neutral.

16. For collections of information whose results will be published, outline plans for tabulations, and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection of information, completion of report, publication dates, and other actions.

The proposed 2022-23 Eating and Health Module will be collected in calendar years 2022 and 2023. Processing of the module will be done as the data come in. The final 2022 data set will be delivered to ERS for analysis in mid-2023 and the final 2023 data set will be delivered to ERS in mid-2024. ERS plans to produce a data analysis to accompany the release of each set of annual public use data files, publication of which usually occurs about 6-8 months after BLS delivers the data to ERS. The 2022-23 Eating and Health Module public use files and accompanying documentation will be posted on the ATUS website at www.bls.gov/tus.

17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.

ATUS Eating and Health Module
OMB Control Number 1220-0187
OMB Expiration Date: Reinstatement

The Census Bureau does not wish to display the assigned expiration date of the information collection because the instrument is automated and the respondent, therefore, would never see the date.

18. Explain each exception to the certification statement.

There are no exceptions to the certification.