

# ***Attachment 6m***

## ***Flexible Consumer Behavior Survey Instrument***

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<b>CBQELIGR</b>	
<b>ASK</b>	SPs AGE 1-17 AND MEALSHOPHHQ= 1 (CBQPLANNAM OR CBQSHOPNAM ARE POPULATED IN HHQ). ONLY SPs WHO ARE 18 YEARS OR OLDER AND DO NOT HAVE A PROXY ARE ELIGIBLE FOR FCBS.
<p>[FCBS HAPPENS AFTER DAY 1 OR DAY 2 INCENTIVES/SCHEDULING WHICH IS COMPLETED WITH THE PROXY/PARENT/GUARDIAN FOR SPs AGE 1-17. THEREFORE, YOU SHOULD ALREADY BE TALKING TO AN ADULT WHO IS 18 YEARS OR OLDER. IF NOT, ASK TO PUT THE PROXY/PARENT/GUARDIAN BACK ON THE PHONE]</p> <p>THE FOLLOWING HOUSEHOLD MEMBERS 18 YEARS OR OLDER ARE ELIGIBLE TO COMPLETE THE FCBS FOLLOW-UP MODULE:</p> <p>[DISPLAY NAMES OF HOUSEHOLD MEMBERS 18 YEARS OR OLDER SELECTED IN CBQPLANNAM AND CBQSHOPNAM]</p> <p>IS THE CURRENT RESPONDENT ELIGIBLE TO COMPLETE THE FCBS?</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> </ol>	
<b>SPANISH</b>	N/A
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBQELIGR=1: CBQSLCTR ELSE: CBQAVAIL

<b>CBQAVAIL</b>	
<b>ASK</b>	CBQELIGR=2
<p>Next, I have a few questions on food choices and food shopping and need to speak to someone who prepares meals or does food shopping in {SP's NAME}'s household.</p> <p>Based on our records, that would be [FILL NAMES OF SELECTED HOUSEHOLD MEMBERS 18 YEARS OR OLDER FROM CBQPLANNAM AND CBQSHOPNAM].</p> <p>&lt;TEXT FILL 1&gt; &lt;TEXT FILL 2&gt; available?</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>A continuación, tengo algunas preguntas sobre la elección y compras de alimentos y necesito hablar con alguien que prepare las comidas o haga las compras en el hogar de {SP's NAME}.</p> <p>Según nuestros registros, esta(s) persona(s) sería(n) [FILL NAMES OF SELECTED HOUSEHOLD MEMBERS 18 YEARS OR OLDER FROM CBQPLANNAM AND CBQSHOPNAM].</p> <p>&lt;TEXT FILL 1&gt; &lt;TEXT FILL 2&gt; disponible?</p> <ol style="list-style-type: none"> <li>3. YES</li> <li>4. NO</li> <li>8. REFUSED</li> <li>10. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	<p>TEXT FILL 1: IF ONLY ONE HOUSEHOLD MEMBER SELECTED, FILL "Is {NAME}" ELSE, FILL IS EMPTY</p> <p>TEXT FILL 2: IF MORE THAN ONE SELECTED HOUSEHOLD MEMBERS, FILL "Are any of them" ELSE, FILL IS EMPTY</p>
<b>FILLS (SPA)</b>	<p>TEXT FILL 1: IF ONLY ONE HOUSEHOLD MEMBER SELECTED, FILL "¿Está {NAME}" ELSE, FILL IS EMPTY</p> <p>TEXT FILL 2: IF MORE THAN ONE SELECTED HOUSEHOLD MEMBERS, FILL "¿Está alguna de estas personas" ELSE, FILL IS EMPTY</p>
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	

<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBQAVAIL=1: CBQSLCTR ELSE: END

<b>CBQSLCTR</b>	
<b>ASK</b>	CBQELIGR=1 OR CBQAVAIL=1 OR SP 18+
<p>SELECT RESPONDENT FOR THE FCBS FOLLOW-UP MODULE:</p> <p>[DROPDOWN LIST OF ALL ELIGIBLE RESPONDENTS 18 YEARS OR OLDER]</p>	
<b>SPANISH</b>	N/A
<b>QUESTION TYPE</b>	Dropdown
<b>FILLS</b>	
<b>NOTES</b>	<p>FOR SPs AGE 18+, THE RESPONDENT MUST BE THE SP (NO PROXY RESPONDENT ALLOWED), THEREFORE, THE DROPDOWN LIST SHOULD ONLY CONTAIN THE SP'S NAME.</p> <p>FOR SPs AGE 1-17, DISPLAY LIST OF ELIGIBLE REPSONDENTS 18 YEARS OR OLDER FROM CBQPLANNAM AND CBQSHOPNAM</p>
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	CBQINTRO

<b>CBQELIGRNHH</b>	
<b>ASK</b>	SPs AGE 1-17 AND MEALSHOPHHQ= 2 (CBQPLANNAM OR CBQSHOPNAM NOT POPULATED IN HHQ). ONLY SPs WHO ARE 18 YEARS OR OLDER AND DO NOT HAVE A PROXY ARE ELIGIBLE FOR FCBS.
<p>[FCBS HAPPENS AFTER DAY 1 OR DAY 2 INCENTIVES/SCHEDULING WHICH IS COMPLETED WITH THE PROXY/PARENT/GUARDIAN FOR SPs AGE 1-17. THEREFORE, YOU SHOULD ALREADY BE TALKING TO AN ADULT WHO IS 18 YEARS OR OLDER. IF NOT, ASK TO PUT THE PROXY/PARENT/GUARDIAN BACK ON THE PHONE]</p> <p>There are a few questions about food choices and food shopping, so we need to speak to someone who prepares meals or does food shopping in your household at least some of the time. Would that be you?</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> </ol>	
<b>SPANISH</b>	<p>[FCBS HAPPENS AFTER DAY 1 OR DAY 2 INCENTIVES/SCHEDULING WHICH IS COMPLETED WITH THE PROXY/PARENT/GUARDIAN FOR SPs AGE 1-17. THEREFORE, YOU SHOULD ALREADY BE TALKING TO AN ADULT WHO IS 18 YEARS OR OLDER. IF NOT, ASK TO PUT THE PROXY/PARENT/GUARDIAN BACK ON THE PHONE]</p> <p>Hay algunas preguntas sobre la elección y compras de alimentos, por lo que necesitamos hablar con alguien que prepare las comidas o haga las compras en su hogar al menos parte del tiempo. ¿Es usted esa persona?</p> <ol style="list-style-type: none"> <li>3. YES</li> <li>4. NO</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBQELIGRNHH =1: CBQSLCTRHH ELSE: CBQAVAILNHH

<b>CBQAVAILNHH</b>	
<b>ASK</b>	SPs AGE 1-17 AND CBQELIGNHH =2
<p>Are any of the adults in your household who prepare meals or do food shopping available now?</p> <p>1. YES 2. NO</p>	
<b>SPANISH</b>	<p>¿Está disponible ahora alguno de los adultos de su hogar que prepara las comidas o hace las compras de alimentos?</p> <p>3. YES 4. NO</p>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBQAVAILNHH =1: CBQSLCTRHH ELSE: END

<b>CBQSLCTRHH</b>	
<b>ASK</b>	SPs AGE 1-17 AND CBQAVAILNHH =1
	<p>&lt;TEXT FILL 1&gt;</p> <p>SELECT RESPONDENT FOR THE FCBS FOLLOW-UP MODULE:</p> <p>[DISPLAY NAMES OF ALL HOUSEHOLD MEMBERS WHO ARE 18 YEARS OR OLDER FROM SCREENER ROSTER]</p> <p>&lt;TEXT FILL 2&gt;</p> <p>&lt;TEXT FILL 3&gt;</p>
<b>SPANISH</b>	<p>&lt;TEXT FILL 1&gt;</p> <p>SELECT RESPONDENT FOR THE FCBS FOLLOW-UP MODULE:</p> <p>[DISPLAY NAMES OF ALL HOUSEHOLD MEMBERS WHO ARE 18 YEARS OR OLDER FROM SCREENER ROSTER]</p> <p>&lt;TEXT FILL 2&gt;</p> <p>&lt;TEXT FILL 3&gt;</p>
<b>QUESTION TYPE</b>	Dropdown
<b>FILLS (ENG)</b>	<p>TEXT FILL 1: IF CBQELIGRNHH = 2, FILL "What is their name?" ELSE, FILL IS BLANK.</p> <p>TEXT FILL 2: IF CBQELIGRNHH = 2, FILL "(IF NEEDED: Can you please ask them to come to the phone?)" ELSE, FILL IS BLANK.</p> <p>TEXT FILL 3: IF CBQELIGRNHH = 2, FILL "WAIT FOR SELECTED PERSON TO COME TO PHONE" ELSE, FILL IS BLANK.</p>
<b>FILLS (SPA)</b>	<p>TEXT FILL 1: IF CBQELIGRNHH = 2, FILL "¿Cómo se llama?" ELSE, FILL IS BLANK.</p> <p>TEXT FILL 2: IF CBQELIGRNHH = 2, FILL "(IF NEEDED: ¿Puede pedirle que venga al teléfono?)" ELSE, FILL IS BLANK.</p> <p>TEXT FILL 3: IF CBQELIGRNHH = 2, FILL "WAIT FOR SELECTED PERSON TO COME TO PHONE" ELSE, FILL IS BLANK.</p>
<b>NOTES</b>	DISPLAY NAMES OF ALL HOUSEHOLD MEMBERS WHO ARE 18 YEARS OR OLDER FROM SCREENER ROSTER
<b>HARD</b>	



<b>CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	<b>CBQINTRO</b>

<b>CBQINTRO</b>	
<b>ASK</b>	IF CBQELIGR = yes OR CBQAVAIL = yes OR SP_AGE >= 18 OR CBQELIGNHH = yes OR CBQAVAILNHH = yes
<TEXT FILL 1>, we have some questions about your knowledge and beliefs in food choices. <TEXT FILL 2>.	
<b>SPANISH</b>	<TEXT FILL 1>, tenemos algunas preguntas sobre su conocimiento y creencias sobre la elección de alimentos. <TEXT FILL 2>.
<b>QUESTION TYPE</b>	Text
<b>FILLS (ENG)</b>	TEXT FILL 1: IF CBQELIGR=1 or CBQELIGNHH=1 , FILL "Next" ELSE, FILL "In this interview"  TEXT FILL 2: IF CBQPROXY=1, FILL "This information will help policy makers and researchers have a better understanding from a meal planner or preparer or food shopper's point of view." ELSE, FILL IS EMPTY
<b>FILLS (SPA)</b>	TEXT FILL 1: IF CBQELIGR=1 or CBQELIGNHH=1 , FILL "A continuación" ELSE, FILL "En esta entrevista"  TEXT FILL 2: IF CBQPROXY=1, FILL "Esta información ayudará a legisladores e investigadores científicos a entender mejor el punto de vista de las personas que planifican o preparan las comidas o hacen las compras de alimentos." ELSE, FILL IS EMPTY
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBQELIGR=2 or CBQELIGNHH=2: CBQRECORD ELSE, GO TO CBQBOOKLET

CBQRECORD	
<b>ASK</b>	<p>IF CBQELIGR=2 or CBQELIGRNHH=2</p> <p>ELSE IF (CBQELIGR=1 or CBQELIGRNHH=1) AND CBQCHECKPREV=1, THE RECORDING SHOULD CONTINUE BECAUSE PERMISSION HAS ALREADY BEEN GIVEN DURING THE DIETARY INTERVIEW.</p> <p>ELSE IF (CBQELIGR=1 or CBQELIGRNHH=1) AND CBQCHECKPREV=2, THE FCBS INTERVIEW SHOULD <b>NOT</b> BE RECORDED</p>
<p>This call may be monitored or recorded for quality assurance purposes. The computer is now recording our conversation. Do I have your permission to continue recording?</p> <p>1. YES 2. NO</p>	
<b>SPANISH</b>	<p>Esta llamada puede ser supervisada o grabada con fines de control de calidad. La computadora está grabando nuestra conversación ahora. ¿Tengo su permiso para seguir grabando?</p> <p>1. YES 2. NO</p>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES (ENG)</b>	<p>IF CBQRECORD in (2) 'NO', STOP RECORDING AND DISPLAY A MESSAGE: INTERVIEWER INSTRUCTION: INFORM THE RESPONDENT: "I will turn off the recording now."</p> <p>DO NOT ALLOW DK/REF</p>
<b>NOTES (SPA)</b>	
<b>HELP SCREEN (ENG)</b>	<p><b>How long will the recording be kept?</b> The audio recording will be deleted after three years. You can call our toll free number 800-344-1386 at any time to have your audio recording deleted prior to that time.</p> <p><b>Who will have access to my recordings?</b> Recordings are only used by persons authorized to work on NHANES for reviewing the quality of my work and tools and questionnaires used in the survey.</p>
<b>HELP SCREEN (SPA)</b>	<p><b>¿Cuánto tiempo se conservará la grabación?</b> La grabación de audio se borrará después de tres años. Puede llamar a nuestra línea gratuita al 800-344-1386 en cualquier momento si quiere que la borremos antes.</p> <p><b>¿Quién tendrá acceso a mis grabaciones?</b> Las grabaciones solo son usadas por las personas autorizadas a trabajar en la Encuesta Nacional de Examen de la Salud y Nutrición (NHANES), para revisar la calidad de mi trabajo y las herramientas y cuestionarios que se usan en la encuesta.</p>
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	RIQ.211
<b>NEXT</b>	CBQNONSPCNST

<b>CBQNONSPCNST</b>	
<b>ASK</b>	(IF CBQELIGR=2 or CBQELIGRNHH=2)
<p>This interview will take about 5 minutes. Before we begin, I'd like you to know that participating in this interview is voluntary. You may choose to skip any question you don't wish to answer or end the interview at any time without penalty.</p> <p>We are required by federal law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical purposes. All the information you provide during this interview will be confidential.</p> <p>Do you have any questions before we continue?</p> <p>[INTERVIEWER ADDRESSES QUESTIONS FROM RESPONDENT]</p> <p>Do you agree to proceed with the interview?</p> <p>1. YES 2. NO</p>	
<b>SPANISH</b>	<p>Esta entrevista tomará como unos 5 minutos. Antes de empezar, quisiera que usted sepa que participar en esta entrevista es voluntario. Puede dejar de contestar cualquier pregunta que no desee responder o terminar la entrevista en cualquier momento sin ninguna consecuencia.</p> <p>La ley federal nos obliga a desarrollar y seguir procedimientos estrictos para proteger la confidencialidad de su información y a usar sus respuestas solamente con fines estadísticos. Toda la información que nos brinde durante esta entrevista será confidencial.</p> <p>¿Tiene alguna pregunta antes de continuar?</p> <p>[INTERVIEWER ADDRESSES QUESTIONS FROM RESPONDENT]</p> <p>¿Acepta continuar con la entrevista?</p> <p>1. YES 2. NO</p>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	DO NOT ALLOW DK/REF
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBQNONSPCNST = 1, GO TO CBQBOOKLET ELSE: CBASSTS

<b>CBQBOOKLET</b>	
<b>ASK</b>	All respondents
<p>Do you have the green hand card booklet?</p> <p>[READ IF NECESSARY: It is in the bag you were given that has the food model booklet for&lt;TEXT FILL 1&gt; dietary phone interview. I'll wait while you locate it.</p> <p>Do you have it?]</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>¿Tiene el libro verde de tarjetas?</p> <p>[READ IF NECESSARY: Está en la bolsa que le dieron y que tiene el folleto de modelo de alimentos para &lt;TEXT FILL 1&gt; sobre la alimentación. Esperaré mientras lo encuentra.</p> <p>¿Lo tiene?]</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	TEXT FILL 1: FILL "your" IF SP_STATUS=1 ELSE, FILL "[SP's NAME]'s"
<b>FILLS (SPA)</b>	TEXT FILL 1: FILL "su entrevista telefónica" IF SP_STATUS=1 ELSE, FILL "la entrevista telefónica de [SP's NAME]"
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.502
<b>NEXT</b>	IF CBQBOOKLET in {1}: CBQCALRUSE ELSE: CBQLABEL

<b>CBQLABEL</b>	
<b>ASK</b>	IF CBQBOOKLET = 2, 7, OR 9
<p>Let's go ahead with the interview anyway. Do you have a cereal box, can or package of food with a food label on the back or the side that you can use for this interview? I'll wait while you locate it.</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>Sigamos adelante con la entrevista de todos modos. ¿Tiene una caja de cereal, una lata o un paquete de comida con una etiqueta de información nutricional en la parte de atrás o en los lados que pueda usar para esta entrevista? Esperaré mientras lo encuentra.</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.503
<b>NEXT</b>	CBQCALRUSE

<b>CBQCALRUSE</b>	
<b>ASK</b>	All respondents
<p>&lt;TEXT FILL 1&gt; I am going to ask you about eating foods and beverages from &lt;TEXT FILL 2&gt;</p> <p>How often do you generally use calorie or other nutrition information when deciding what to buy at these places?</p> <p>Would you say always, most of the time, sometimes, rarely, or never?</p> <ol style="list-style-type: none"> <li>1. ALWAYS</li> <li>2. MOST OF THE TIME</li> <li>3. SOMETIMES</li> <li>4. RARELY</li> <li>5. NEVER</li> <li>6. NEVER NOTICED ANY CALORIE OR NUTRITION INFORMATION</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>&lt;TEXT FILL 1&gt; Le voy a preguntar sobre comidas y bebidas que se consumen en &lt;TEXT FILL 2&gt;</p> <p>¿Con qué frecuencia usa normalmente la información sobre las calorías u otro tipo de información nutricional cuando decide qué comprar en estos lugares?</p> <p>¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?</p> <ol style="list-style-type: none"> <li>1. SIEMPRE</li> <li>2. LA MAYOR PARTE DEL TIEMPO</li> <li>3. A VECES</li> <li>4. RARA VEZ</li> <li>5. NUNCA</li> <li>6. NUNCA SE FIJA EN LA INFORMACIÓN SOBRE LAS CALORÍAS O LA NUTRICIÓN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	<p>TEXT FILL 1: IF CBQBOOKLET=1, FILL "Please open the green hand card booklet and turn to the page labeled card CB-1." ELSE, TEXT FILL 1 IS EMPTY</p> <p>TEXT FILL 2: IF CBQBOOKLET=1, FILL "different places listed on card CB-1 in your booklet." ELSE, FILL "fast-food or pizza places, restaurants with waiter or waitress service, all-you-can-eat buffets, places that sell mostly beverages such as a coffee shop or juice bar, movie theaters, sports arenas, or other places of recreation, grocery stores, or convenience stores."</p>
<b>FILLS (SPA)</b>	<p>TEXT FILL 1: IF CBQBOOKLET=1, FILL "Abra el libro verde de tarjetas y vaya a la página que dice tarjeta CB-1." ELSE, TEXT FILL 1 IS EMPTY</p> <p>TEXT FILL 2: IF CBQBOOKLET=1, FILL "diferentes lugares que se indican en la tarjeta CB-1 de su libro". ELSE, FILL "lugares de comida rápida o pizzerías; restaurantes con servicio de meseros; bufés de</p>

	todo lo que pueda comer; lugares en los que se vendan principalmente bebidas, como cafeterías o bares de jugos; cines; estadios deportivos u otros lugares de recreación; supermercados o tiendas de conveniencia.”
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.NEW1
<b>NEXT</b>	IF SP_STATUS=1: CBQCALRKNW ELSE: CBQNUTRIF

<b>CBQCALRKNW</b>	
<b>ASK</b>	IF SP_STATUS=1
<p>&lt;TEXT FILL 1&gt;</p> <p>About how many calories do you think a &lt;TEXT FILL 2&gt; of your age and physical activity needs to consume a day to maintain your current weight?</p> <p>HAND CARD CB-2</p> <ol style="list-style-type: none"> <li>1. Less than 500 calories</li> <li>2. 500-1000 calories</li> <li>3. 1001-1500 calories</li> <li>4. 1501-2000 calories</li> <li>5. 2001-2500 calories</li> <li>6. 2501-3000 calories</li> <li>7. More than 3000 calories</li> <li>77. REFUSED</li> <li>99. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>&lt;TEXT FILL 1&gt;</p> <p>¿Cómo cuántas calorías cree que &lt;TEXT FILL 2&gt; de su edad y nivel de actividad física debe consumir al día para mantener su peso actual?</p> <p>HAND CARD CB-2</p> <ol style="list-style-type: none"> <li>1. Menos de 500 calorías</li> <li>2. De 500 a 1000 calorías</li> <li>3. De 1001 a 1500 calorías</li> <li>4. De 1501 a 2000 calorías</li> <li>5. De 2001 a 2500 calorías</li> <li>6. De 2501 a 3000 calorías</li> <li>7. Más de 3000 calorías</li> <li>77. REFUSED</li> <li>99. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	<p>TEXT FILL 1: FILL "Please turn to card CB-2." IF CBQBOOKLET=1 ELSE, TEXT FILL 1 IS EMPTY</p> <p>TEXT FILL 2: FILL "man" IF SPQGENDER=MALE ONLY FILL "woman" IF SPQGENDER=FEMALE ONLY ELSE FILL "person"</p>
<b>FILLS (SPA)</b>	<p>TEXT FILL 1: FILL "Pase a la tarjeta CB-2." IF CBQBOOKLET=1 ELSE, TEXT FILL 1 IS EMPTY</p> <p>TEXT FILL 2: FILL "un hombre" IF SPQGENDER=MALE ONLY</p>



	FILL "una mujer" IF SPQGENDER=FEMALE ONLY ELSE FILL "una persona"
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.645
<b>NEXT</b>	CBQNUTRIF

CBQNUTRIF	
<b>ASK</b>	All respondents
<p>{Please turn to card CB-3. For the next question you'll use card CB-4 to respond, but first please look at card CB-3 which shows an example of the food label.</p> <p>How often do <b>you</b> use the <b>Nutrition Facts panel</b> on a food label, such as the part colored in green on the sample food label on card CB-3, when deciding to buy a food product?</p> <p>Looking at card CB-4, would you say always, most of the time, sometimes, rarely, or never? }</p> <p>HAND CARDS CB-3 &amp; CB-4</p> <ol style="list-style-type: none"> <li>1. ALWAYS</li> <li>2. MOST OF THE TIME</li> <li>3. SOMETIMES</li> <li>4. RARELY</li> <li>5. NEVER</li> <li>6. NEVER SEEN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>{Pase a la tarjeta CB-3. Para la siguiente pregunta, usará la tarjeta CB-4 para responder, pero primero mire la tarjeta CB-3, la cual muestra un ejemplo de una etiqueta con información nutricional.</p> <p>¿Con qué frecuencia usa <b>usted</b> el <b>panel de información nutricional</b> de una etiqueta de alimentos, como la parte pintada de color verde de la etiqueta de muestra en la tarjeta CB-3, cuando decide comprar un alimento?</p> <p>Mire la tarjeta CB-4. ¿Diría que lo usa siempre, la mayor parte del tiempo, a veces, rara vez o nunca? }</p> <p>HAND CARDS CB-3 &amp; CB-4</p> <ol style="list-style-type: none"> <li>1. SIEMPRE</li> <li>2. LA MAYOR PARTE DEL TIEMPO</li> <li>3. A VECES</li> <li>4. RARA VEZ</li> <li>5. NUNCA</li> <li>6. NUNCA VE ESTA INFORMACIÓN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	<p>IF CBQBOOKLET = 1, DISPLAY CBQNUTRIF AS SHOWN ABOVE.</p> <p>IF CBQLABEL = 1, REPLACE TEXT WITH THE FOLLOWING:  "Next, we have some questions about food labels. On your (cereal box, can, food package, etc.) please look for the food label that is usually on the back or the side of the package. A food label has two parts, a Nutrition Facts panel and a list of ingredients. The "<b>Nutrition Facts panel</b>" of a food label lists the amount of calories, fat, fiber, carbohydrates and some other</p>

nutritional information.

How often do **you** use the **Nutrition Facts panel** when deciding to buy a food product?

Would you say always, most of the time, sometimes, rarely, or never?"

IF CBQLABEL = 2, 7, OR 9, REPLACE TEXT WITH THE FOLLOWING:

"Next, we have some questions about food labels. A food label usually is on the back or the side of the food package. It has two parts, a Nutrition Facts panel and a list of ingredients. The **"Nutrition Facts panel"** of a food label lists the amount of calories, fat, fiber, carbohydrates and some other nutritional information.

How often do **you** use the **Nutrition Facts panel** when deciding to buy a food product?

Would you say always, most of the time, sometimes, rarely, or never?"

<b>FILLS (SPA)</b>	<p>IF CBQBOOKLET = 1, DISPLAY CBQNUTRIF AS SHOWN ABOVE.</p> <p>IF CBQLABEL = 1, REPLACE TEXT WITH THE FOLLOWING:  “A continuación, le haré algunas preguntas sobre las etiquetas de información nutricional. En su (caja de cereales, lata, paquete de alimentos, etc.), busque esta etiqueta que generalmente se encuentra en la parte de atrás o al lado del paquete. Una etiqueta de información nutricional tiene dos partes: un panel de información nutricional y una lista de ingredientes. El <b>“panel de información nutricional”</b> de la etiqueta de un alimento muestra la cantidad de calorías, grasa, fibra, carbohidratos y alguna otra información nutricional.</p> <p>¿Con qué frecuencia usa <b>usted</b> el <b>panel de información nutricional</b> cuando decide comprar un producto alimenticio?</p> <p>¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?”</p> <p>IF CBQLABEL = 2, 7, OR 9, REPLACE TEXT WITH THE FOLLOWING:  “A continuación, le haré algunas preguntas sobre las etiquetas de información nutricional. Una etiqueta de información nutricional generalmente se encuentra en la parte de atrás o al costado del paquete del alimento. Tiene dos partes: un panel de información nutricional y una lista de ingredientes. El <b>“panel de información nutricional”</b> de la etiqueta de un alimento muestra la cantidad de calorías, grasa, fibra, carbohidratos y alguna otra información nutricional.</p> <p>¿Con qué frecuencia usa <b>usted</b> el <b>panel de información nutricional</b> cuando decide comprar un producto alimenticio?</p> <p>¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?”</p>
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	DBQ.750
<b>NEXT</b>	CBQINGRED
<b>CBQINGRED</b>	
<b>ASK</b>	All respondents
<p>How often do <b>you</b> use the <b>list of ingredients</b> on a food label &lt;TEXT FILL 2&gt; when deciding to buy a food product?</p> <p>Would you say always, most of the time, sometimes, rarely, or never?</p> <p>HAND CARDS CB-3 AND CB-4</p> <ol style="list-style-type: none"> <li>1. ALWAYS</li> <li>2. MOST OF THE TIME</li> <li>3. SOMETIMES</li> <li>4. RARELY</li> <li>5. NEVER</li> </ol>	

	<p>6. NEVER SEEN</p> <p>7. REFUSED</p> <p>9. DON'T KNOW</p>
<b>SPANISH</b>	<p>¿Con qué frecuencia usa <b>usted</b> la <b>lista de ingredientes</b> de la etiqueta de información nutricional de un alimento &lt;TEXT FILL 2&gt; cuando decide comprar un producto alimenticio?</p> <p>¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?</p> <p>HAND CARDS CB-3 AND CB-4</p> <ol style="list-style-type: none"> <li>1. SIEMPRE</li> <li>2. LA MAYOR PARTE DEL TIEMPO</li> <li>3. A VECES</li> <li>4. RARA VEZ</li> <li>5. NUNCA</li> <li>6. NUNCA VE ESTA INFORMACIÓN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	TEXT FILL 2: FILL “, such as the part colored in pink on card CB-3,” IF CBQBOOKLET=1 ELSE, TEXT FILL 2 IS EMPTY.
<b>FILLS (SPA)</b>	TEXT FILL 2: FILL “, como la parte de color rosa en la tarjeta CB-3,” IF CBQBOOKLET=1 ELSE, TEXT FILL 2 IS EMPTY.
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	DBQ.760
<b>NEXT</b>	CBQCALORIE

<b>CBQCALORIE</b>	
<b>ASK</b>	All respondents
	<p>&lt;TEXT FILL 1&gt; How often do <b>you</b> use the <b>calorie</b> information on a food label &lt;TEXT FILL 2&gt; when deciding to buy a food product?</p> <p>Would you say always, most of the time, sometimes, rarely, or never?</p> <p>HAND CARDS CB-5 AND CB-6</p> <ol style="list-style-type: none"> <li>1. ALWAYS</li> <li>2. MOST OF THE TIME</li> <li>3. SOMETIMES</li> <li>4. RARELY</li> <li>5. NEVER</li> <li>6. NEVER SEEN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>SPANISH</b>	<p>&lt;TEXT FILL 1&gt; ¿Con qué frecuencia usa <b>usted</b> la información sobre <b>calorías</b> en la etiqueta de información nutricional &lt;TEXT FILL 2&gt; cuando decide comprar un producto alimenticio?</p> <p>¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?</p> <p>HAND CARDS CB-5 AND CB-6</p> <ol style="list-style-type: none"> <li>1. SIEMPRE</li> <li>2. LA MAYOR PARTE DEL TIEMPO</li> <li>3. A VECES</li> <li>4. RARA VEZ</li> <li>5. NUNCA</li> <li>6. NUNCA VE ESTA INFORMACIÓN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	<p>TEXT FILL 1: FILL "Please turn to cards CB-5 and CB-6." IF CBQBOOKLET=1 ELSE TEXT FILL 1 IS EMPTY.</p> <p>TEXT FILL 2: FILL ", such as the part colored in green on card CB-5," IF CBQBOOKLET=1 ELSE TEXT FILL 2 IS EMPTY.</p>
<b>FILLS (SPA)</b>	<p>TEXT FILL 1: FILL "Pase a las tarjetas CB-5 y CB-6." IF CBQBOOKLET=1 ELSE TEXT FILL 1 IS EMPTY.</p> <p>TEXT FILL 2: FILL ", como la parte de color verde en la tarjeta CB-5," IF CBQBOOKLET=1 ELSE TEXT FILL 2 IS EMPTY.</p>
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.930
<b>NEXT</b>	CBQSODIUM

CBQSODIUM	
<b>ASK</b>	All respondents
<p>How about information on <b>sodium</b>?</p> <p>[READ IF NECESSARY: How often do <b>you</b> use information on <b>sodium</b> on a food label &lt;TEXT FILL 2&gt; when deciding to buy a food product?]</p> <p>[Would you say always, most of the time, sometimes, rarely, or never?]</p> <p>HAND CARDS CB-5 AND CB-6</p> <ol style="list-style-type: none"> <li>1. ALWAYS</li> <li>2. MOST OF THE TIME</li> <li>3. SOMETIMES</li> <li>4. RARELY</li> <li>5. NEVER</li> <li>6. NEVER SEEN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>¿Y con respecto a la información sobre el <b>sodio</b>?</p> <p>[READ IF NECESSARY: ¿Con qué frecuencia usa <b>usted</b> la información sobre el <b>sodio</b> en la etiqueta de información nutricional &lt;TEXT FILL 2&gt; cuando decide comprar un producto alimenticio?]</p> <p>[¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?]</p> <p>HAND CARDS CB-5 AND CB-6</p> <ol style="list-style-type: none"> <li>1. SIEMPRE</li> <li>2. LA MAYOR PARTE DEL TIEMPO</li> <li>3. A VECES</li> <li>4. RARA VEZ</li> <li>5. NUNCA</li> <li>6. NUNCA VE ESTA INFORMACIÓN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	TEXT FILL 2: FILL “, such as the part colored in blue on card CB-5,” IF CBQBOOKLET=1 ELSE TEXT FILL 2 IS EMPTY.
<b>FILLS (SPA)</b>	TEXT FILL 2: FILL “, como la parte de color azul en la tarjeta CB-5,” IF CBQBOOKLET=1 ELSE TEXT FILL 2 IS EMPTY.
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.945

NEXT	CBQADDSUG
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CBQADDSUG	
<b>ASK</b>	All respondents
<p>How about information on <b>added sugars</b>?</p> <p>[READ IF NECESSARY: How often do <b>you</b> use information on <b>added sugars</b> on a food label &lt;TEXT FILL 2&gt; when deciding to buy a food product?]</p> <p>[Would you say always, most of the time, sometimes, rarely, or never?]</p> <p>HAND CARDS CB-5 AND CB-6</p> <ol style="list-style-type: none"> <li>1. ALWAYS</li> <li>2. MOST OF THE TIME</li> <li>3. SOMETIMES</li> <li>4. RARELY</li> <li>5. NEVER</li> <li>6. NEVER SEEN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>¿Y con respecto a la información sobre <b>azúcar añadida</b>?</p> <p>[READ IF NECESSARY: ¿Con qué frecuencia usa <b>usted</b> la información sobre <b>azúcar añadida</b> en la etiqueta de información nutricional &lt;TEXT FILL 2&gt; cuando decide comprar un producto alimenticio?]</p> <p>[¿Diría que siempre, la mayor parte del tiempo, a veces, rara vez o nunca?]</p> <p>HAND CARDS CB-5 AND CB-6</p> <ol style="list-style-type: none"> <li>1. SIEMPRE</li> <li>2. LA MAYOR PARTE DEL TIEMPO</li> <li>3. A VECES</li> <li>4. RARA VEZ</li> <li>5. NUNCA</li> <li>6. NUNCA VE ESTA INFORMACIÓN</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS (ENG)</b>	TEXT FILL 2: FILL “, such as the part colored in pink on card CB-5,” IF CBQBOOKLET=1 ELSE TEXT FILL 2 IS EMPTY
<b>FILLS (SPA)</b>	TEXT FILL 2: FILL “, como la parte de color rosa en la tarjeta CB-5,” IF CBQBOOKLET=1 ELSE TEXT FILL 2 IS EMPTY
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.947

<b>NEXT</b>	IF RESPONDENT IS AN SP: CBQLANG ELSE: CBQRELATN
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<b>CBQRELATN</b>	
<b>ASK</b>	IF SP_STATUS=2
<p>What is your relation with &lt;TEXT FILL 1&gt;?</p> <ol style="list-style-type: none"> <li>1. PARENT OF SP</li> <li>2. GRANDPARENT OF SP</li> <li>3. CHILD CARE PROVIDER, CARETAKER</li> <li>4. OTHER RELATIVE</li> <li>5. FRIEND, NON-RELATIVE</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>¿Cuál es su relación con &lt;TEXT FILL 1&gt;?</p> <ol style="list-style-type: none"> <li>1. PADRE/MADRE DE LA PERSONA ENCUESTADA</li> <li>2. ABUELO(A) DE LA PERSONA ENCUESTADA</li> <li>3. PROVEEDOR(A) DE SERVICIOS DE CUIDADO INFANTIL, CUIDADOR(A)</li> <li>4. OTRO(A) PARIENTE</li> <li>5. AMIGO(A), NO PARIENTE</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	TEXT FILL 1: FILL FIRST AND LAST NAME OF SP.
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.755
<b>NEXT</b>	CBQPLANMST

CBQPLANMST	
<b>ASK</b>	IF SP_STATUS=2
<p>Are you the person who does <b>most</b> of the planning <b>or</b> preparing of meals in your family?</p> <p>[INTERVIEW INSTRUCTION: IF RESPONDENT ANSWERS "SOMETIMES" OR "50/50", ENTER YES]</p> <p>1. YES 2. NO 7. REFUSED 9. DON'T KNOW</p>	
<b>SPANISH</b>	<p>¿Es usted la persona que hace la <b>mayor</b> parte de la planificación <b>o</b> preparación de las comidas en su familia?</p> <p>[INTERVIEW INSTRUCTION: IF RESPONDENT ANSWERS "A VECES" OR "50/50", ENTER YES]</p> <p>1. YES 2. NO 7. REFUSED 9. DON'T KNOW</p>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	DBQ.930
<b>NEXT</b>	CBQPLANSHR

CBQPLANSHR	
<b>ASK</b>	IF SP_STATUS=2
<p>Do you share in the planning or preparing of meals with someone else?</p> <p>1. YES 2. NO 7. REFUSED 9. DON'T KNOW</p>	
<b>SPANISH</b>	<p>¿Comparte la planificación o preparación de las comidas con otra persona?</p> <p>1. YES 2. NO 7. REFUSED 9. DON'T KNOW</p>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	DBQ.935
<b>NEXT</b>	CBQSHOPMST

CBQSHOPMST	
<b>ASK</b>	IF SP_STATUS=2
<p>Are you the person who does <b>most</b> of the shopping for food in your family?</p> <p>[INTERVIEW INSTRUCTION: IF RESPONDENT ANSWERS "SOMETIMES" OR "50/50", ENTER YES.]</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>¿Es usted la persona que hace <b>la mayor parte</b> de las compras de alimentos en su familia?</p> <p>[INTERVIEW INSTRUCTION: IF RESPONDENT ANSWERS "A VECES" OR "50/50", ENTER YES.]</p> <ol style="list-style-type: none"> <li>1. YES</li> <li>2. NO</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	DBQ.940
<b>NEXT</b>	CBQSHOPSHR

<b>CBQSHOPSHR</b>	
<b>ASK</b>	IF SP_STATUS=2
<p>Do you share in the shopping for food with someone else?</p> <p>1. YES 2. NO 7. REFUSED 9. DON'T KNOW</p>	
<b>SPANISH</b>	<p>¿Comparte las compras de alimentos con otra persona?</p> <p>1. YES 2. NO 7. REFUSED 9. DON'T KNOW</p>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	DBQ.945
<b>NEXT</b>	CBQAGE

CBQAGE	
<b>ASK</b>	IF SP_STATUS=2
<p>How old are you?</p> <p style="text-align: center;"> _ _  YEARS ENTER AGE</p> <p style="text-align: right;">REFUSED.....777 DON'T KNOW.....999</p>	
<b>SPANISH</b>	<p>¿Cuántos años tiene?</p> <p style="text-align: center;"> _ _  YEARS ENTER AGE</p> <p style="text-align: right;">REFUSED.....777 DON'T KNOW.....999</p>
<b>QUESTION TYPE</b>	Numeric
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	CBQAGE SHOULD BE BETWEEN 18-120 YEARS. IF AGE ENTERED IS LESS THAN 18 SHOW HARD CHECK MESSAGE "YOU MUST BE 18 YEARS OLD, PLEASE CHECK YOUR ANSWER"
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.760
<b>NEXT</b>	CBQEDUC

CBQEDUC	
<b>ASK</b>	IF SP_STATUS=2
<p>Which of the following best describes your highest education level?</p> <ol style="list-style-type: none"> <li>1. Less than high school</li> <li>2. High school diploma (including GED), or</li> <li>3. More than high school</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>¿Cuál de las siguientes opciones describe mejor el nivel de educación más alto que ha completado?</p> <ol style="list-style-type: none"> <li>1. Menos de escuela secundaria/preparatoria o <i>high school</i></li> <li>2. Diploma de escuela secundaria/preparatoria o <i>high school</i> (incluido el GED)</li> <li>3. Nivel superior a la escuela secundaria/preparatoria o <i>high school</i></li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.765
<b>NEXT</b>	CBQGENDER



<b>CBQGENDER</b>	
<b>ASK</b>	IF SP_STATUS=2
<p>For this next question, you may give me more than one answer. Are you...</p> <p>INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY</p> <ol style="list-style-type: none"> <li>1. Male</li> <li>2. Female</li> <li>3. Transgender, non-binary, or another gender</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>	
<b>SPANISH</b>	<p>Para esta siguiente pregunta puede elegir más de una respuesta. ¿Es usted...?</p> <p>INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY</p> <ol style="list-style-type: none"> <li>1. Hombre</li> <li>2. Mujer</li> <li>3. Transgénero, persona no binaria u otra identidad de género</li> <li>7. REFUSED</li> <li>9. DON'T KNOW</li> </ol>
<b>QUESTION TYPE</b>	Select all that apply
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.770
<b>NEXT</b>	CBQLANG

<b>CBQLANG</b>	
<b>ASK</b>	All respondents
<p>INTERVIEWER INSTRUCTION: THIS IS A QUESTION FOR THE INTERVIEWER TO COMPLETE BY SELECTING THE APPROPRIATE OPTION. DO NOT READ THE QUESTION TO THE SP.</p> <p>THE INTERVIEW WAS COMPLETED IN:</p> <ol style="list-style-type: none"> <li>1. ENGLISH</li> <li>2. SPANISH</li> <li>3. ENGLISH AND SPANISH</li> </ol>	
<b>SPANISH</b>	N/A
<b>QUESTION TYPE</b>	Radio button
<b>FILLS</b>	
<b>NOTES</b>	DO NOT ALLOW DK/REF
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	CBQ.785
<b>NEXT</b>	CBASSTS (NOTE: THIS IS BEHIND THE SCENES PARADATA IF COMPLETE)

<b>CBASSTS</b>	
<b>ASK</b>	PARADATA; All Respondents
	1. COMPLETE 2. PARTIAL 3. NOT DONE
<b>SPANISH</b>	N/A
<b>QUESTION TYPE</b>	Radio Button
<b>FILLS</b>	
<b>NOTES</b>	IF SP_STATUS = 1 AND CBQADDSUG ≠ MISSING, AUTOFILL CBASSTS = "1, COMPLETE". GO TO END OF SECTION. IF SP_STATUS = 2 AND CBQEDUC ≠ MISSING, AUTOFILL CBASSTS = "1, COMPLETE". GO TO END OF SECTION. ELSE IF CBQBOOKLET ≠ MISSING, AUTOFILL CBASSTS = "2, PARTIAL". ELSE, CBASSTS = "3, NOT DONE". IF SP AGE 18+ YEARS, AND D1D2PROXY = 1, AUTOFILL CBASSTS = "3, NOT DONE", AND CBASCMT = "8, COMMUNICATION PROBLEM". IF CBQNONSPCNST = 2, AUTOFILL CBASSTS = "3, NOT DONE", AND CBASCMT = "2, REFUSAL". IF SP LANGUAGE NE ENGLISH OR SPANISH, AUTOFILL CBASSTS = "3, NOT DONE", AND CBASCMT = "7, LANGUAGE BARRIER". IF SP AGE = 0, AUTOFILL CBASSTS = "3, NOT DONE", AND CBASCMT = "90, OTHER, SPECIFY".
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBASSTS = 1: END SECTION ELSE: CBASCMT

<b>CBASCMT</b>	
<b>ASK</b>	IF CBASSTS = (2, 3)
<p>SELECT COMMENT CODE</p> <p>1 SAFETY EXCLUSION</p> <p>2 SP REFUSAL</p> <p>3 NO TIME</p> <p>4 NO TIME - SP WITH OTHER HH MEMBER</p> <p>5 NO TIME - CAME LATE/LEFT EARLY</p> <p>6 PHYSICAL LIMITATION</p> <p>7 LANGUAGE BARRIER</p> <p>8 COMMUNICATION PROBLEM</p> <p>9 SP UNABLE TO COMPLY</p> <p>10 EQUIPMENT FAILURE</p> <p>11 SP ILL/EMERGENCY</p> <p>12 FAINTING EPISODE</p> <p>13 EXCLUSION DUE TO CONDITIONS AFFECTING DATA INTERPRETATION</p> <p>14 NO SUITABLE VEIN</p> <p>15 VEIN COLLAPSED</p> <p>16 PRE-TEST DATA UNAVAILABLE</p> <p>17 STAFF UNAVAILABLE</p> <p>18 UNABLE TO REACH THE RESPONDENT</p> <p>19 UNABLE TO SCHEDULE/RESCHEDULE</p> <p>90 OTHER, SPECIFY</p>	
<b>SPANISH</b>	N/A
<b>QUESTION TYPE</b>	Radio Button
<b>FILLS</b>	
<b>NOTES</b>	COMMENT CODE LIST NEEDS TO BE USED FOR MEC AND DIETARY SO KEEP NUMBERING AS IS FOR ANALYSIS. FOR DIETARY ONLY SHOW (2, 6, 7, 8, 10, 11, 18, 19, 90) ON SCREEN. ELSE, SUPPRESS.
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	IF CBASCMT = 90: CBASCOT ELSE: END SECTION

<b>CBASCOT</b>	
<b>ASK</b>	IF CBASCMT = 90
OTHER, PLEASE SPECIFY TEXTBOX [200 CHARACTERS]	
<b>SPANISH</b>	N/A
<b>QUESTION TYPE</b>	TEXT
<b>FILLS</b>	
<b>NOTES</b>	
<b>HARD CHECK</b>	
<b>SOFT CHECK</b>	
<b>VERSION NOTES</b>	
<b>NEXT</b>	END SECTION