

AVAILABILITY – PHASE 3

QUESTIONNAIRE ON INFLUENCES ON FJV AVAILABILITY

Interviewer ID #: _____

Name: _____ Telephone #: _____

Calling Procedure:

If an answering machine picks up:

Hello, this message is for Mr./Ms. _____ . My name is _____ . I am calling from Baylor College of Medicine’s Children Nutrition Research Center. A few days ago you agreed to participate in a study about home food management practices of families with children. Families who participate will have to answer 2 questionnaires over the phone for about 45 minutes each and collect their food receipts for 6 weeks. You will receive up to \$100 in checks for your full participation. I am calling to arrange the first interview and to remind you to start collecting your food and meal receipts starting Monday, (month, day). I would also like to remind you that we need to have this first phone interview completed before the end of your first week of receipt collection. Please give me a call at 713-798-_____. I will also try to reach you some other time. Thank you and have a great day!

If someone picks up:

Hello, may I speak with Mr./Ms. _____ ?

If yes: **Thank you.** (Continue with introduction)

If no: **I am from the Children’s Nutrition Research Center at the Baylor College of Medicine, and Mr./Ms. _____ agreed participate in a study. When would be a good time to speak with him/her? _____ He/She could also try to reach me at 713-798-_____. Thank you!** (Document under Notes on the Phone Call Tracking Form)

Introduction when speaking with person of interest:

Hello, my name is _____ from Baylor College of Medicine’s Children Nutrition Research Center. A few days ago we invited you to participate in a study about home food management practices of families with children and you agreed for us to call you. Families who participate will have to answer 2 questionnaires over the phone for about 45 minutes each and collect their food receipts for 6 weeks. You will receive up to \$100 in checks for your full participation. I am calling to arrange the first interview. Would it be all right if I ask you some food shopping questions now?

yes no

If yes: **Before we begin, would you like to get your copy of the questionnaire so you can follow along with me? Thank you.** (Continue with interview)

If no: **Can I call you another time?**

yes no

If yes: **When would that be?** _____

Okay, I would just like to remind you that we need to have this first phone interview completed before the end of your first week of receipt collection. Your first week of receipt collection starts on Monday, (month, day). I will call you back on/at _____ to do the phone interview. Thank you! Good bye!
(Document on the Phone Call Tracking Form)

If no: **Thank you for your time! Good bye!**
(Document on the Phone Call Tracking Form)

Explanation of why not: _____

Screener:

1. Are there any children living at your home who are between the ages of 8 and 14?

yes no

If yes: Go to Q2

If no: **I am sorry but for purposes of this study, I am only interviewing families with children between the ages of 8 and 14. Thank you for your time! Good bye!**

2. Are you the person who usually does the food shopping and makes the decisions about what foods to buy for your family?

yes no

If yes: Go to Q3

If no: **Well, I need to speak with the person who usually does the food shopping and makes the decisions about what foods to buy for your family. Can I speak with him/her?**

If yes: Start at "Introduction when speaking with person of interest".

If no: **When would be a good time to speak with him/her?**

(Document name of food shopper and date and time to call back on Phone Tracking form)

Name: _____

Day: _____ Time: _____

If no: **Thank you for your time! Good bye!**

Explanation of why not: -

Frequency of Food Shopping:

3. Please tell me how often in a month do you go food shopping for the family? (check only one and use probe below)

- 1 big trip + **no** small trips
- 1 big trip + **a few small** trips
- 2 big trips + **no** small trips
- 2 big trips + **a few small** trips
- 3 big trips + **no** small trips
- 3 big trips + **a few small** trips
- 4 big trips + **no** small trips
- 4 big trips + **a few small** trips
- No big trip, but shop as needed.
 - How many times per week? _____
- Other: _____

Q3 Probe: Would you say you usually make...

- One big trip a month and **no small** trips in between
- One big trip a month and **a few small** trips in between
(Every other week or every 2 weeks) **Do you usually do...**
 - Two big trips a month and **no small** trips in between
 - Two big trips a month and **a few small** trips in between
 - Three big trips a month and **no small** trips in between
 - Three big trips a month and **a few small** trips in between
(Every week or once a week) **Do you usually do...**
 - Four big trips a month and **no small** trips in between
 - Four big trips a month and **a few small** trips in between
 - No big trips, but shop as needed.
 - How many times per week? _____

Food Shopping Practices:

4. Do you ever look in your refrigerator or pantry before you go shopping to see what you need to buy? yes no (Go to Q5)

4b. How often do you do this? (check only one) (Read answer options)

- all the time most of the time sometimes rarely

5. Do you ever use a grocery list when you shop for food?

- yes no (Go to Q6)

5b. How often do you use one? (check only one) (Read answer options)

- all the time most of the time sometimes rarely

6. Do you ever plan your menus for the coming week before you go food shopping?

- yes no (Go to Q7)

6b. How often do you do this? (check only one) (Read answer options)

- all the time most of the time sometimes rarely

7. Do you ever check for fruit or 100% juice that are on sale?

yes no (Go to Q8)

Please tell me how often you check for fruit or 100% juice that are on sale...

(Read answer options)

| | | | | | |
|--|---------------------------------------|---|------------------------------------|---------------------------------|--------------------------------|
| 7b. ...before going to the grocery store. | <input type="checkbox"/> all the time | <input type="checkbox"/> most of the time | <input type="checkbox"/> sometimes | <input type="checkbox"/> rarely | <input type="checkbox"/> never |
| 7c. ...when you get to the grocery store. | <input type="checkbox"/> all the time | <input type="checkbox"/> most of the time | <input type="checkbox"/> sometimes | <input type="checkbox"/> rarely | <input type="checkbox"/> never |

8. Do you ever check for vegetables that are on sale?

yes no (Go to Q9)

Please tell me how often you check for vegetables that are on sale...

(Read answer options)

| | | | | | |
|--|---------------------------------------|---|------------------------------------|---------------------------------|--------------------------------|
| 8b. ...before going to the grocery store. | <input type="checkbox"/> all the time | <input type="checkbox"/> most of the time | <input type="checkbox"/> sometimes | <input type="checkbox"/> rarely | <input type="checkbox"/> never |
| 8c. ...when you get to the grocery store. | <input type="checkbox"/> all the time | <input type="checkbox"/> most of the time | <input type="checkbox"/> sometimes | <input type="checkbox"/> rarely | <input type="checkbox"/> never |

9. Do you ever use coupons for food? yes no (Go to Q13)

9b. How often do you use coupons for food? (check only one)

(Read answer options)

all the time most of the time sometimes rarely

10. Do you ever use coupons to buy the foods and brands you usually buy? yes no

10b. How often do you use coupons to buy the foods and brands you usually buy?

(check only one) (Read answer options)

all the time most of the time sometimes rarely

11. Do you ever use coupons to try a different brand of food than you usually buy?

yes no (Go to Q12)

11b. How often do you use coupons to try a different brand of food than you usually buy?

(check only one) (Read answer options)

all the time most of the time sometimes rarely

12. Do you ever use coupons for new foods you've never had before?

yes no (Go to Q13)

12b. How often do you use coupons for new foods you've never had before?

(check only one) (Read answer options)

all the time most of the time sometimes rarely

13. Do you ever read the label to learn the nutrients in the food?

yes no (Go to Why fruits and vegetables?)

13b. How often do you read the label? (check only one) (Read answer options)

all the time most of the time sometimes rarely

Why fruits and vegetables?

I will now read several statements about why some people buy fruit.

Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with each statement.

14. I buy fruit because...

(Read answer option)

| | | | | | | |
|--|---|---|-----------------------------------|--|--|------------------------------------|
| a. ...they are good for your health. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| b. ...they taste good. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| c. ...they are inexpensive. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| d. ...they are easy to prepare. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| e. ...I grew up eating them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| f. ...of the vitamins and minerals that they have. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| g. ...I need them for what I am preparing. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| h. ...I like to eat them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| i. ...my children like to eat them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| j. ...my spouse likes to eat them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | <input type="checkbox"/> no spouse |
| k. Is there another reason why you buy fruit? (specify) _____ | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |

**I will now read several statements about why some people buy vegetables.
 Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree
 with each statement.**

15. I buy vegetables because...

(Read answer option)

| | | | | | | |
|---|---|---|-----------------------------------|--|--|------------------------------------|
| a. ...they are good for your health. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| b. ...they taste good. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| c. ...they are inexpensive. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| d. ...they are easy to prepare. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| e. ...I grew up eating them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| f. ...of the vitamins and minerals that they have. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| g. ...I need them for what I am preparing. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| h. ...I like to eat them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| i. ...my children like to eat them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |
| j. ...my spouse likes to eat them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | <input type="checkbox"/> no spouse |
| k. Is there another reason why you buy vegetable? (specify) _____ _____ | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree | |

The next statements will ask you to compare two things: fresh fruit with canned, bottled or frozen fruit.

16. Comparing fresh with canned, bottled and frozen fruit, would you say that fresh or canned/bottled/frozen fruit... (Wait for respondent to reply, then read the best two answer options)

| | | | | | | | |
|--|---------------------------------------|---|---|-----------------------------------|--|--|------------------------------------|
| a. ...are better for your health? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| b. ...taste better? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| c. ...are less expensive? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| d. ...are easier to prepare? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| e. ...are quicker to prepare? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| f. ...are the kind you grew up eating? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| g. ...are the kind you need for what you are preparing? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| h. ...are the kind you enjoy? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| i. ...are the kind your children prefer? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| j. ...are the kind your spouse prefers? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | <input type="checkbox"/> no spouse |

The next statements will ask you to compare fresh vegetables with canned, bottled or frozen vegetables.

17. Comparing fresh with canned, bottled and frozen vegetables, would you say that fresh or canned/bottled/frozen vegetables... (Wait for respondent to reply, then read the best two answer options)

| | | | | | | | |
|--|---------------------------------------|---|---|-----------------------------------|--|--|------------------------------------|
| a. ...are better for your health? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| b. ...taste better? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| c. ...are less expensive? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| d. ...are easier to prepare? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| e. ...are quicker to prepare? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| f. ...are the kind you grew up eating? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| g. ...are the kind you need for what you are preparing? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| h. ...are the kind you enjoy? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| i. ...are the kind your children prefer? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | |
| j. ...are the kind your spouse prefers? | <input type="checkbox"/> fresh always | <input type="checkbox"/> fresh most of the time | <input type="checkbox"/> fresh and canned about equal | <input type="checkbox"/> not sure | <input type="checkbox"/> canned most of the time | <input type="checkbox"/> canned always | <input type="checkbox"/> no spouse |

Home Food Management Practices:

I will now read you several statements about when or why some people decide to buy more canned, bottled, or frozen fruit, 100% juice or vegetables. Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with each statement.

| 18. I decide to buy more canned, bottled, or frozen fruit... | | | | | |
|---|---|---|-----------------------------------|--|--|
| a. ...when they are on sale. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| b. ...when I have a coupon for them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| c. ...when I am running low at home. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| d. ...when I run out. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| e. ...to replace what we have eaten. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| f. ...to stock up on them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| g. ...as a habit every time I go shopping. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| h. ...to keep a variety at home. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |

The next statements will ask you about 100% juice.

| 19. I decide to buy more canned, bottled, or frozen 100% juice... | | | | | |
|--|---|---|-----------------------------------|--|--|
| a. ...when they are on sale. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| b. ...when I have a coupon for them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| c. ...when I am running low at home. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| d. ...when I run out. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| e. ...to replace what we have drunk. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| f. ...to stock up on them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| g. ...as a habit every time I go shopping. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| h. ...to keep a variety at home. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |

The next statements will ask you about vegetables.

| 20. I decide to buy more canned, bottled, or frozen vegetables... | | | | | |
|---|---|---|-----------------------------------|--|--|
| a. ...when they are on sale. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| b. ...when I have a coupon for them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| c. ...when I am running low at home. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| d. ...when I run out. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| e. ...to replace what we have eaten. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| f. ...to stock up on them. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| g. ...as a habit every time I go shopping. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |
| h. ...to keep a variety at home. | <input type="checkbox"/> strongly agree | <input type="checkbox"/> somewhat agree | <input type="checkbox"/> not sure | <input type="checkbox"/> somewhat disagree | <input type="checkbox"/> strongly disagree |

Home F.I.V Availability:

I will now ask you some questions about what fruit, 100% juice, and vegetables were in your home last week. Your responses will be “yes”, you had that fruit, 100% juice, or vegetable in your home in the last 7 days or “no” if you did not have that fruit, 100% juice, or vegetable in your home in the last 7 days. If you respond with yes, please tell me what form you had of that particular food, fresh, frozen, or canned. You may have had more than one form of that food in your home, in that case you may respond with as many answers as necessary. Are there any questions?

21. Let’s begin. The first one is Peaches, ‘In the last week did you have... .. in your home?’

If yes: Were the... ..fresh, frozen or canned?

(Continue with the rest using the same format)

| Food | Yes | No | Fresh | Frozen | Canned | Other |
|-----------------------------|------------------------------|-----------------------------|--------------------------------|---------------------------------|---------------------------------|--------------------------------|
| a. Peaches | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| b. 100% Apple Juice | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| c. 100% Grape Juice | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| d. 100% Orange Juice | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| e. Bananas | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| f. Apples | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| g. Cantaloupe or Musk Melon | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| h. Grapes | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| i. Oranges | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| j. Pears | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| k. Plums | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |

| | | | | | | |
|---|------------------------------|-----------------------------|--------------------------------|---------------------------------|---------------------------------|--------------------------------|
| i. Kiwi | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| m. Fruit Salad or Fruit Cocktail | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| n. Applesauce | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| o. Watermelon | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| p. Dried Fruit | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| q. Carrots | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| r. Celery | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| s. Greens (collard, mustard, or turnip) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| t. Spinach | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| u. Frozen French Fried Potatoes | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| v. Potato Salad | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| w. Mashed Potatoes | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| x. Other White Potatoes | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| y. Corn | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| z. Green Peas | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| aa. Tomatoes | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| bb. Broccoli | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| cc. Lettuce | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| dd. Green, String, or Snap Beans | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| ee. Cole Slaw | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| ff. Other Cabbage | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| gg. Beans (e.g. pork 'n beans, pinto, black-eyed peas) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |
| hh. Refried Beans | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Fresh | <input type="checkbox"/> Frozen | <input type="checkbox"/> Canned | <input type="checkbox"/> Other |

Family Social Support for Healthy Shopping:

22. Please tell me, on a scale of 1 to 5, where 1 is never and 5 is very often, how often has your family done or said the following during the previous 3 months. By family I mean people living in your household. In the last 3 months, how often has your family...

Scale: 1 = never 5 = very often

- a. ____ Discussed purchasing fruit or 100% juice with you.
- b. ____ Reminded you to purchase fruit or 100% juice.
- c. ____ Approved when you purchased fruit or 100% juice.
- d. ____ Purchased fruit or 100% juice themselves.
- e. ____ Asked you to purchase fruit or 100% juice.
- f. ____ Criticized the fruit or 100% juice you purchased.
- g. ____ Discussed purchasing vegetables with you.
- h. ____ Reminded you to purchase vegetables.
- i. ____ Approved when you purchased vegetables.
- j. ____ Purchased vegetables themselves.
- k. ____ Asked you to purchase vegetables.
- l. ____ Criticized the vegetables you purchased.

Family Meal Patterns:

The next questions refer to what your family usually does at dinnertime.

23. How many times a week does your family usually eat at a fast food place, cafeteria, buffet, or full service restaurant for dinner?

- | | |
|----------------------------|----------------------------|
| <input type="checkbox"/> 0 | <input type="checkbox"/> 4 |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 5 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 6 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 7 |

24. How many times a week does your family usually purchase something prepared away from home and eat it at home for dinner?

- | | |
|----------------------------|----------------------------|
| <input type="checkbox"/> 0 | <input type="checkbox"/> 4 |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 5 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 6 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 7 |

25. How many times a week do you usually sit down with your whole family for the dinner meal?

- | | |
|----------------------------|----------------------------|
| <input type="checkbox"/> 0 | <input type="checkbox"/> 4 |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 5 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 6 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 7 |

Child BMI & Parent Perceived Child FJV Preferences:

26. How many children do you have between the ages of 8 and 14?

- | | |
|----------------------------|--|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 5 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 6 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> more than 6 |
| <input type="checkbox"/> 4 | <input type="checkbox"/> refused to answer |

27. Please tell me whether they are a boy or a girl, how old they are, how tall they are and how much they weigh.

| Child 1 | Child 2 | Child 3 | Child 4 |
|--|--|--|--|
| a. <input type="checkbox"/> Boy <input type="checkbox"/> Girl b. age: _____ years c. height: ____ft ____in ____ cm d. weight: _____ lbs ____ kg | a. <input type="checkbox"/> Boy <input type="checkbox"/> Girl b. age: _____ years c. height: ____ft ____in ____ cm d. weight: _____ lbs ____ kg | a. <input type="checkbox"/> Boy <input type="checkbox"/> Girl b. age: _____ years c. height: ____ft ____in ____ cm d. weight: _____ lbs ____ kg | a. <input type="checkbox"/> Boy <input type="checkbox"/> Girl b. age: _____ years c. height: ____ft ____in ____ cm d. weight: _____ lbs ____ kg |

28a. Now, thinking about your ...year old (boy/girl), would you say that s/he likes... (Read answer options)

| Child 1 | Child 2 | Child 3 | Child 4 |
|---|---|---|---|
| <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit | <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit | <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit | <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit |

28b. Would you say that your ...year old (boy/girl) likes... (Read answer options)

| | | | |
|--|--|--|--|
| <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables | <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables | <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables | <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables |
|--|--|--|--|

28c. Would you say that your ...year old (boy/girl) likes... (Read answer options)

| | | | |
|---|---|---|---|
| <input type="checkbox"/> almost all types of 100% juice. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. | <input type="checkbox"/> almost all types of 100% juice. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. | <input type="checkbox"/> almost all types of 100% juice. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. | <input type="checkbox"/> almost all types of 100% juice. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. |
|---|---|---|---|

Parent Perceived Spouse/Other Adult FJV Preferences:

29. Does your spouse/partner or another adult live in your home? (check all that apply)

- Yes, spouse
- Yes, another adult
- No (Go to Q32a)

30. How many adults (19 years or older), including yourself, live in your household?

- 1 (Go to Q32a)
- 2
- 3
- 4
- 5
- 6
- more than 6
- refused to answer

31. Please tell me which 2 adults living in your household, not including your spouse/partner and yourself, are most important in affecting your food shopping. Tell me their relationship to YOU, if they are male or female, and how old they are.

None of the adults in the household affect my food shopping

| Adult 1 | Adult 2 |
|---|---|
| a. Relationship <input type="checkbox"/> Older child <input type="checkbox"/> Sister / Sister in law <input type="checkbox"/> Brother / Brother in law <input type="checkbox"/> Mom / Stepmom <input type="checkbox"/> Dad / Stepdad <input type="checkbox"/> Mother in law <input type="checkbox"/> Father in law <input type="checkbox"/> Grandmother <input type="checkbox"/> Grandfather <input type="checkbox"/> Other (specify) _____ b. <input type="checkbox"/> Male <input type="checkbox"/> Female c. age: _____ years | a. Relationship <input type="checkbox"/> Older child <input type="checkbox"/> Sister / Sister in law <input type="checkbox"/> Brother / Brother in law <input type="checkbox"/> Mom / Stepmom <input type="checkbox"/> Dad / Stepdad <input type="checkbox"/> Mother in law <input type="checkbox"/> Father in law <input type="checkbox"/> Grandmother <input type="checkbox"/> Grandfather <input type="checkbox"/> Other (specify) _____ b. <input type="checkbox"/> Male <input type="checkbox"/> Female c. age: _____ years |

| 32a. Now thinking about... .., would you say that... ..like... | | | |
|---|---|---|---|
| Yourself | Your Spouse or Partner | Your... (Adult 1) | Your... (Adult 2) |
| <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit | <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit | <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit | <input type="checkbox"/> almost all types of fruit <input type="checkbox"/> some types of fruit <input type="checkbox"/> no type of fruit |
| 32b. Would you say that... ..like... | | | |
| <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables | <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables | <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables | <input type="checkbox"/> almost all types of veg. <input type="checkbox"/> some types of veg. <input type="checkbox"/> no type of vegetables |
| 32c. Would you say that... ..like... | | | |
| <input type="checkbox"/> almost all types of 100% J. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. | <input type="checkbox"/> almost all types of 100% J. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. | <input type="checkbox"/> almost all types of 100% J. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. | <input type="checkbox"/> almost all types of 100% J. <input type="checkbox"/> some types of 100% juice. <input type="checkbox"/> no type of 100% juice. |

Social Desirability:

33. I will now read to you several statements. Please tell me ‘Yes’ if you think it is true about you or ‘No’ if you think it is not true about you.

| | | |
|--|------------------------------|-----------------------------|
| a. I like everyone I know. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. I am always kind. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. I always have good manners. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. I am always good. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. I am always nice to everyone. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. I tell the truth every single time. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| g. I never get angry. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| h. I never say things I shouldn’t. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| i. I never lie. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Food Stores:

34. I will now read you several reasons people select a grocery store. Please tell me how important each of these reasons is for your selecting a grocery store. How important is having... (Read answer options)

| | | | |
|---|--|---|---|
| a. a clean, neat store | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| b. courteous, friendly employees | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| c. low prices | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| d. quality produce (fruit and veg.) | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| e. good quality meat | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| f. good variety or wide selection | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| g. the brands you like | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| h. items you like on sale or specials | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| i. convenient location | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| j. safe area or good security | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| k. fast checkout | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| l. the store open early morning or late night hours | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| m. attention to special requests or needs | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| n. the store owned and operated by community residents | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| o. readable and accurate shelf tags | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| p. nutrition and health information available to shoppers | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| q. WIC vouchers allowed | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| r. check cashing service or ATM available | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| s. people in the store know you | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |
| t. a pharmacy available | <input type="checkbox"/> Not important | <input type="checkbox"/> Somewhat important | <input type="checkbox"/> Very important |

35. Do you do most of your food shopping at stores that are close by your home or do you travel outside your neighborhood?

- Close by (Go to Demographics)
- Outside neighborhood

35b. Why don't you shop in your neighborhood? Is it because... (check all that apply)

- No stores close by
- Crime
- High prices
- Limited food selection
- Embarrassed to use food stamps near home
- Combine food shopping with other errands
- Ride with people who shop outside of neighborhood
- Other: _____

Demographics:

36. How old were you on your last birthday? ____ years

Probe: **How old are you today?**

37. How long have you lived in this country?

- All my life
- ____ years

38. Are you male or female?

39. How many children (18 years or younger) live in your household?

- 1
- 2
- 3
- 4
- 5
- 6
- more than 6
- refused to answer

SKIP Q40 if respondent is male.

40. Are you expecting another child?

- yes
- no

41. Do you consider yourself to be Hispanic/Latino/Mexican American?

- yes
- no

42. To what race would you say you belong? (Check only one) (Read answer options)

- White
- American Indian / Alaskan Native
- Other (specify): _____
- Black / African American
- Asian / Pacific Islander

43a. What is the highest level of education you have completed? (check only one)

(Do not read each response)

- | | |
|---|--|
| <input type="checkbox"/> 8 years or less | <input type="checkbox"/> some college |
| <input type="checkbox"/> some high school | <input type="checkbox"/> completed college |
| <input type="checkbox"/> completed high school | <input type="checkbox"/> some post baccalaureate education |
| <input type="checkbox"/> some vocational education | <input type="checkbox"/> completed an advanced degree |
| <input type="checkbox"/> completed vocational education | <input type="checkbox"/> other (specify): _____ |

SKIP Q43b if respondent has no spouse/partner.

43b. What is the highest level of education your spouse/partner has completed? (check only one)

(Do not read each response)

- | | |
|---|--|
| <input type="checkbox"/> 8 years or less | <input type="checkbox"/> some college |
| <input type="checkbox"/> some high school | <input type="checkbox"/> completed college |
| <input type="checkbox"/> completed high school | <input type="checkbox"/> some post baccalaureate education |
| <input type="checkbox"/> some vocational education | <input type="checkbox"/> completed an advanced degree |
| <input type="checkbox"/> completed vocational education | <input type="checkbox"/> other (specify): _____ |

44. What language is spoken most often in your home?

- | | |
|--|---|
| <input type="checkbox"/> all English | <input type="checkbox"/> mostly another language - which one? _____ |
| <input type="checkbox"/> mostly English | <input type="checkbox"/> all another language - which one? _____ |
| <input type="checkbox"/> 2 languages equally – which ones? _____ | |

IF THIS IS THE 1ST INTERVIEW, END WITH SCRIPT BELOW. OTHERWISE GO TO Q45.

That was the last question. We will be sending you a \$20 check by mail. The check will be sent to [Read the address from the Interview Tracking Form]. Is this the right mailing address? [If No: record the right mailing address onto the Interview Tracking Form] Is there an apartment number? [If Yes, record number]

[If we are missing the participant's SS#:] **In order for us to send you the check, we need your social security number. What is your social security number? [Record number onto the Interview Tracking Form]**

It should take about two weeks to receive your check. If you do not receive it after two weeks contact Mariam, the project manager, at 713-798-7126.

I also would like to remind you to begin collecting your food and meal receipts starting Monday, [Read starting date from the Interview Tracking Form]. We will be calling you back in 6 weeks to do the final phone interview. Do you have any questions?

Thank you so much! We appreciate your taking the time to answer our questions. Good-bye.

INTERVIEW ASSESSMENT

Quality of Interview Rating:

- High quality, explain: _____

- Moderate quality, explain: _____

- Low quality, explain: _____

Language in which interview was administered:

- English
- Spanish

General Comments: _____

THE QUESTIONS BELOW WILL ONLY BE ASKED IN THE 2ND INTERVIEW

Respondent BMI:

45. How tall are you? ____ ft. ____ in. OR ____ cm
 refused to answer

46. How much do you weigh? _____ lbs. OR ____kg
 refused to answer

Food Security/SES:

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford the food you need. I'm going to read you two statements that people have made about their food situation. Please tell me whether the statement was OFTEN, SOMETIMES, or NEVER true for you or the other members of your household in the last 12 months.

47. The first statement is, "The food that we bought just didn't last, and we didn't have money to get more." Was that often, sometimes, or never true for your household in the last 12 months?

- Often true
- Sometimes true
- Never true
- Don't know
- Refused

48. "We couldn't afford to eat balanced meals." Was that often, sometimes, or never true for your household in the last 12 months?

- Often true
- Sometimes true
- Never true
- Don't know
- Refused

49. In the last 12 months, since (date 12 months ago) did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

- Yes
- No (Go to Q50)
- Don't know (Go to Q50)
- Refused (Go to Q50)

49b. How often did this happen---almost every month, some months but not every month, or in only 1 or 2 months?

- Almost every month
- Some months but not every month
- Only 1 or 2 months
- Don't know
- Refused

50. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

- Yes
- No
- Don't know
- Refused

51. In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

- Yes
- No
- Don't know
- Refused

Income and Budget:

Interviewer: check Q49 to determine if Respondent is the only adult in the house. If Respondent is the only adult, begin with Q58.

Finally, I would like to ask some questions about your household and food budget.

52. First, are you the person or one of the persons who usually handle the household's finances or budget?

- Yes
- No (Go to Q54)

52b. Do you share this responsibility with another person in the household?

- Yes
- No (Go to Q53)

52c. Who is the person who shares these responsibilities with you?

- Spouse/partner
- Other related adult
- Other non-related adult

53. Last month, were you the person or one of the persons who handled the household's finances or budget?

- Yes (Go to Q58)
- No

54. Who is/was the primary person who does/did this?

- Spouse/partner
- Other related adult
- Other non-related adult

55. Last month, how much did you spend purchasing non-food items at grocery stores and convenience stores? By non-food items, I mean items such as paper products, drugs, cosmetics, alcohol and cleaning supplies.

- \$ _____ (If needed, say, we only need your best estimate.)
- Don't know
- Refused

56. Last month, how much did you spend purchasing food at grocery stores, specialty stores such as meat markets and bakeries and at convenience stores?

- \$ _____ (If needed, say, we only need your best estimate.)
- Don't know
- Refused

57. (If responded with 'Yes' to Q52b or Q54) You said that your spouse / your partner / another adult in the household participates in the household budget decisions. Last month, did this person shop for food with you?

- Yes
- No

That was the last question. We will be sending you a \$20 check by mail. The check will be sent to [Read the address from the Interview Tracking Form]. Is this the right mailing address? [If No: record the right mailing address onto the Interview Tracking Form] Is there an apartment number? [If Yes, record number]

It should take about two weeks to receive your check. If you do not receive it after two weeks contact Mariam, the project manager, at 713-798-7126.

Thank you so much! We appreciate your taking the time to answer our questions. Good-bye.

INTERVIEW ASSESSMENT

Quality of Interview Rating:

- High quality, explain: _____

- Moderate quality, explain: _____

- Low quality, explain: _____

Language in which interview was administered:

- English
- Spanish

General Comments: _____

If Respondent is the only adult: (Remember to SKIP Q60)

Finally, I would like to ask some questions about your household and food budget.

58. Last month, how much did you spend purchasing non-food items at grocery stores and convenience stores? By non-food items, I mean items such as paper products, drugs, cosmetics, alcohol and cleaning supplies.

- \$ _____ (If needed, say, we only need your best estimate.)
- Don't know
- Refused

59. Last month, how much did you spend purchasing food at grocery stores, specialty stores such as meat markets and bakeries and at convenience stores?

- \$ _____ (If needed, say, we only need your best estimate.)
- Don't know
- Refused

(SKIP Q60 if respondent is the only adult)

60. (If responded 'Yes' to Q52b or Q54) You said that your spouse / your partner / another adult in the household participates in the household budget decisions. Does this person shop for food with you?

- Yes
- No

61. Which of the following best describes where you live now?

(Read only the first three items)

- A place you own,
- A place you rent,
- A place where you live rent free,
- Don't know
- Refused

62. Last month, what was the household's monthly rent/mortgage payment, that is, how much rent/mortgage payment did the household pay last month?

- \$_____ (If needed, say, we only need your best estimate.)
- Don't know
- Refused

63. Last month, what was the amount the household paid for electricity?

- \$_____ (If needed, say, we only need your best estimate.)
- The cost is included in the rent
- Don't know
- Refused

64. Last month, what was the amount the household paid for gas for heating or cooking?

- \$_____ (If needed, say, we only need your best estimate.)
- Household does not have this service
- The cost is included in the rent
- Don't know
- Refused

65. Last month, what was the amount the household paid for water and sewer?

- \$_____ (If needed, say, we only need your best estimate.)
- The cost is included in the rent.
- Don't know
- Refused

66. Last month, what was the amount the household paid for cable?

- \$_____ (If needed, say, we only need your best estimate.)
- Household does not have this service
- The cost is included in the rent
- Don't know
- Refused

66b. Does that include internet service? Yes No

67. Last month, what was the amount the household paid for telephone services, including local and long distance charges (and cellular)?

- \$_____ (If needed, say, we only need your best estimate.)
- Household does not have this service
- Don't know
- Refused

67b. Does that include internet service? Yes No

Finally, we would like to know whether the household received any income last month from the following sources.

68. Last month, how much did the household receive from wages, salary commissions, bonuses or tips from all jobs (before taxes)?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

69. Last month, how much did the household receive from self-employment or business income (after expenses)?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

70. Last month, how much did the household receive from interest, dividends, net rental income, royalty income?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

71. Last month, how much did the household receive from Social Security or Railroad Retirement?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

72. Last month, how much did the household receive from other sources of retirement or pension income?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

73. Last month, how much did the household receive from unemployment insurance or public assistance?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

74. Last month, how much did the household receive from Food Stamps (Lone Star Card)?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from this source
- Don't know
- Refused

75. Last month, how much did the household receive from child support or alimony?

- \$_____ (If needed, say, we only need your best estimate.)
- Household members do not receive income from these sources
- Don't know
- Refused

That was the last question. We will be sending you a \$20 check by mail. The check will be sent to [Read the address from the Interview Tracking Form]. Is this the right mailing address? [If No: record the right mailing address onto the Interview Tracking Form] Is there an apartment number? [If Yes, record number]

It should take about two weeks to receive your check. If you do not receive it after two weeks contact Mariam, the project manager, at 713-798-7126.

Thank you so much! We appreciate your taking the time to answer our questions. Good-bye.

INTERVIEW ASSESSMENT

Quality of Interview Rating:

- High quality, explain: _____

- Moderate quality, explain: _____

- Low quality, explain: _____

Language in which interview was administered:

- English
- Spanish

General Comments: _____

