

what we eat in
AMERICA
1994-96

INTERVIEWER MANUAL

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by Westat Inc., Rockville, MD

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Only chapters 6, 7, 8, 12, 13, 14, and 15 are included in the Interviewer's Manual because all other chapters are considered proprietary by the contractor.

TABLE OF CONTENTS

Chapter

1.	INTRODUCTION AND OVERVIEW	1-1
	1.1 Survey Purpose	1-1
	1.2 The Design of “What We Eat in America”	1-3
	1.3 The Results of the Pilot Study	1-4
	1.4 Overview of Your Responsibilities	1-5
2.	PREPARING FOR THE FIELD	2-1
	2.1 Overview of Your Materials	2-1
	2.1.1 Assignment Materials	2-2
	2.1.2 Bulk Supplies	2-2
	2.2 Organizing Your Assignments	2-3
	2.3 Checklist of Materials to Bring to the Field	2-4
3.	LOCATING SAMPLED HOUSEHOLDS	3-1
	3.1 Overview of the Sample Design	3-1
	3.2 Listing Procedures	3-1
	3.2.1 Definition of a Dwelling Unit (DU)	3-1
	3.2.2 Description of Listing Materials	3-5
	3.3 Locating Your Assignment Area	3-10
	3.4 Case ID Labels	3-11
	3.5 Attempting to Locate DUs: Special Situations	3-14
	3.5.1 Structure Does Not Qualify as a DU	3-15
	3.5.2 DU Does Not Exist or Cannot Be Found	3-15
	3.5.3 DU Appears Vacant	3-15
	3.5.4 DU is Outside of the Segment’s Boundaries	3-16
4.	MAKING CONTACT	4-1
	4.1 Introduction at the Door	4-1
	4.2 Using the Advance Materials and Survey Publicity Materials . . .	4-1
	4.3 Answering Questions About the Survey	4-5
	4.4 Contacting Rules	4-7
	4.4.1 Overview	4-7
	4.4.2 Day 1 Intake	4-9
	4.4.3 Number of Attempts	4-13
	4.5 Tracking Respondents	4-13
5.	ADMINISTERING THE HOUSEHOLD SCREENER	5-1
	5.1 Identifying the Screener Respondent	5-1
	5.2 Rules for Determining Household Members	5-3
	5.2.1 Who Qualifies as a Household Member	5-3
	5.2.2 Special Issues	5-4

TABLE OF CONTENTS (continued)

Chapter

5.3 Sample Person Selection 5-5

5.4 Missed DU and Missed Structure Procedures 5-19

 5.4.1 Missed DU Procedure 5-19

 5.4.2 Missed Structure Procedure 5-23

5.5 Use of Neighbor Information 5-27

5.6 Making Contact and Completing the Screener:
Special Situations 5-46

 5.6.1 Locked Buildings 5-46

 5.6.2 Refusal at the Door 5-46

 5.6.3 Language Problems and the Use of Interpreters 5-47

 5.6.4 Other Situations 5-48

 5.6.5 Documenting Problems 5-49

6. ADMINISTERING THE HOUSEHOLD QUESTIONNAIRE 6-1

 6.1 Identifying the Household Questionnaire Respondent 6-1

 6.2 Scheduling Considerations 6-1

 6.3 Answering the Respondent’s Questions 6-1

 6.4 Completing the Household Questionnaire: Special Situations . . 6-3

 6.4.1 Refusal 6-3

 6.4.2 Language Problems and the Use of Interpreters 6-3

 6.5 Documenting Problems 6-4

7. ADMINISTERING THE DAY 1 AND DAY 2 INDIVIDUAL
INTAKE QUESTIONNAIRES 7-1

 7.1 Overview of the Individual Intake 7-1

 7.2 Scheduling Considerations for the Intake Interviews 7-1

 7.2.1 The Day 1 Intake 7-1

 7.2.2 The Day 2 Intake 7-2

 7.3 Proxy Interviews: Overview 7-3

 7.3.1 Child SPs Under 6 Years of Age 7-3

 7.3.2 Child SPs 6 to 11 Years Old 7-3

 7.3.3 Adult SPs Unable to Report for Themselves 7-5

 7.4 Data Retrieval of Intake Data 7-7

 7.4.1 Guidelines 7-7

 7.4.2 Data Retrieval Contact Procedures 7-11

 7.4.3 Recording Information Collected from
Retrieval Sources 7-13

 7.5 Recording Procedures for Missing Meals If Data Retrieval
is Not Required 7-16

 7.6 Conducting Intakes in Households With More Than One SP . . . 7-18

 7.7 Market Checks 7-19

TABLE OF CONTENTS (continued)

Chapter

7.8	Completing the Individual Intake: Special Situations	7-22
	7.8.1 Refusal	7-22
	7.8.2 Language Problems and the Use of Interpreters	7-22
	7.8.3 Sample Persons Who Move From the Household	7-22
7.9	Answering the Sample Person's Questions	7-23
7.10	Documenting Problems	7-24
8.	ADMINISTERING THE DIET AND HEALTH KNOWLEDGE SURVEY QUESTIONNAIRE	8-1
8.1	Selecting the DHKS Respondent	8-1
8.2	Scheduling the DHKS Interview	8-1
8.3	Preparing for the DHKS	8-6
8.4	Answering the Respondent's Questions	8-7
8.5	Telephone Procedures	8-8
	8.5.1 Setting for the Interview	8-8
	8.5.2 Using the DHKS Reminder Card During the Interview	8-8
	8.5.3 Special Telephone Problems	8-9
8.6	Special Issues	8-10
	8.6.1 Conducting the DHKS in Person	8-10
	8.6.2 Conducting the DHKS Without the Reminder Card	8-10
	8.6.3 Use of Proxies	8-10
	8.6.4 Refusal	8-11
	8.6.5 Language Problems and the Use of Interpreters	8-11
8.7	Documenting Non Response	8-11
9.	RECORDING THE RESULTS OF YOUR WORK	9-1
9.1	Overview	9-1
9.2	The Household Folder	9-2
	9.2.1 Front Cover: Summary of Household Work	9-2
	9.2.2 Back Cover: Household Call Record	9-5
	9.2.3 Assigning Result Codes	9-7
	9.2.4 Inside Cover: Follow-up Call Records	9-17
9.3	DHKS Folder	9-19
9.4	Examples of Completed Call Records	9-23
9.5	The Non-Interview Report Form	9-28
10.	QUALITY CONTROL PROCEDURES	10-1
	10.1 Field Edit	10-1
	10.2 Validation	10-3
	10.3 Taping Interviews	10-3
	10.4 Observation	10-4
	10.5 Feedback From Home Office Review	10-5
	10.6 Updating Procedures and Specifications	10-6

TABLE OF CONTENTS (continued)

Chapter

11.	ADMINISTRATIVE PROCEDURES	11-1
	11.1 Preparing For and Transmitting Data in FMS to Home Office .	11-2
	11.2 Mailing Finalized Cases	11-4
	11.3 Preparing For and Reporting Weekly to Your Supervisor	11-7
	11.4 Report Forms	11-9
	11.5 Time and Expense Reporting	11-15
	11.5.1 Authorized/Non-Authorized Expenses	11-17
	11.5.2 General Information About the T&E	11-18
	11.5.3 Instructions for Filling Out the Time and Expense Report	11-19
12.	HOUSEHOLD SCREENER	12-1
	12.1 Overview	12-3
	12.2 Household Enumeration	12-5
	12.3 Completing the Household Enumeration Table	12-9
	12.4 Using the Sampling Labels to Select Sample Persons	12-13
	12.5 Ending the Screener	12-15
	12.6 Recording Neighbor Information	12-17
13.	HOUSEHOLD QUESTIONNAIRE	13-1
	13.1 Interaction With the Household Screener/ Preparing the Questionnaire	13-1
	13.2 Heads of Household	13-7
	13.3 Activities of Household Members 15 Years of Age or Older	13-9
	13.4 DU Ownership and Water Supply	13-13
	13.5 Miscellaneous Food Source Questions	13-15
	13.6 School Breakfast and Lunch Programs	13-21
	13.7 Food Supply	13-23
	13.8 Income	13-25
	13.9 Food Stamps	13-29
14.	DAY 1 INDIVIDUAL INTAKE QUESTIONNAIRE	14-1
	14.1 Introduction to Respondent and the Quick List	14-5
	14.2 Time and Eating Occasion	14-9
	14.3 Using the Food Instruction Booklet (FIB)	14-13
	14.3.1 Locating a Food Item Within the FIB	14-15
	14.3.2 How to Read the Probes in the FIB	14-16
	14.4 Obtaining Food Descriptions and Recording Responses on the Intake Questionnaire	14-21
	14.4.1 How to Record Probe Responses on the Intake Questionnaire	14-22
	14.4.2 Combination Foods	14-25
	14.4.3 Home Recipes	14-31
	14.4.4 Sandwiches	14-35
	14.4.5 Ethnic, Regional, and New Foods	14-37

TABLE OF CONTENTS (continued)

Chapter

14.5	Obtaining Quantities and Use of the Food Guides	14-39
14.5.1	The Measuring Guides	14-40
14.5.2	How to Measure Quantities	14-43
14.6	Was This the Same Eating Occasion?	14-49
14.7	Review of Intake	14-51
14.8	Where Obtained and Where Eaten	14-55
14.9	Health-Related Questions	14-65
14.10	Day 2 Intake Questionnaire	14-91
15.	DIET AND HEALTH KNOWLEDGE SURVEY QUESTIONNAIRE	15-1
15.1	Recording Random Starts from Cover Label	15-1
15.2	General Specifications for Completing the DHKS	15-3
15.3	Question-by-Question Specifications	15-5

List of Exhibits

Exhibit

2-1	Checklist of materials needed in the field	2-5
3-1	Chart for Determining a Dwelling Unit	3-3
3-2	Handy Listing Guide	3-4
3-3	Tract Map	3-6
3-4	Segment Map	3-7
3-5	Listing Sheet	3-8
3 4	Special Instructions and General Comments Form	3-9
3-7	Label for Household Folder and Screener	3-13
4-1	Advance Letter	4-2
4-2	Letter of Authorization	4-4
4-3	Summary of Contact Rules	4-8
4-4	“Sorry I Missed You” Card	4-12
4-5	Tracking Form	4-15
5-1	Missed DU Procedure	5-18
5-2	Missed Structure Form	5-22
7-1	Market Check Form	7-20
8-1	DHKS Folder	8-2
8-2	DHKS Call Record	8-3
8-3	DHKS Reminder Card	8-4
8-4	DHKS Questionnaire NIR	8-12
9-1	Front Cover of Household Folder	9-3
9-2	Household Call Record	9-6
9-3	Result Codes	9-9
9-4	Follow-up Call Record	9-18
9-5	Front Cover of DHKS Call Record	9-20

TABLE OF CONTENTS (continued)

List of Exhibits (continued)

Exhibit

9-6	DHKS Call Record	9-22
9-7	Example of Completed Household Call Record and Follow-up Call Record	9-24
9-8	Example of a Completed Household Call Record and DHKS Call Record	9-26
9-9	Non-Interview Report (NIR) Form	9-29
11-1	Interviewer Transmittal Form	11-5
11-2	Interviewer Log and Status Report	11-10
11-3	Intake Interview Schedule	11-13
11-4	DHKS Appointment Schedule	11-14
11-5	Time and Expense Report	11-16
11-6	Completed Time and Expense Report	11-22

6. ADMINISTERING THE HOUSEHOLD QUESTIONNAIRE

6.1 Identifying the Household Questionnaire Respondent

The preferred respondent for the Household Questionnaire is the main food preparer or planner for the household or a person knowledgeable about household characteristics, especially income. This person may or may not also be a Sample Person.

6.2 Scheduling Considerations

The preferred interview flow within the household is Screener, followed by Household Questionnaire, followed by Day 1 Intake(s). However, the order can be changed to accommodate the members of the household. For example, if the Sample Person is available to complete the Intake as soon as the Screener is complete but he/she has an appointment later on and therefore, would not be available if the Household Questionnaire is completed after the Screener, complete the Intake first. You will have to use some judgement in deciding which is the best order for the particular household you are interviewing.

6.3 Answering the Respondent's Questions

If the Household Questionnaire respondent was also the Screener respondent, you will probably have answered many questions about the survey. However, if the Household Questionnaire respondent is not the same person as the Screener respondent, you need to be prepared to answer their questions, and to introduce yourself and the study.

The following provides some examples of the types of questions a respondent may ask as well as some suggested answers.

HOW LONG IS THIS GOING TO TAKE? This interview should take about 30 minutes on the average. It can take more or less time depending on your answers.

WHAT ARE YOU GOING TO ASK ME? I'll ask you a short series of questions on purchasing food, the cost of groceries, and some general questions about the make up of the household.

WILL I LOSE MY FOOD STAMPS/OTHER GOVERNMENT BENEFITS IF I DON'T DO THIS? No. Your decision to participate or not to participate will in no way affect your benefits. However, this is a very important study and your participation will help us to better understand what people eat.

DO I HAVE TO ANSWER ALL OF THESE QUESTIONS? You have the right to refuse any question you would rather not answer. However, we are required by law not to reveal any information other than to persons directly involved with the study. Your answers will be used only by research staff working on the study. Each of them is required to sign a statement to keep confidential all information provided by respondents. Survey results will be published only as statistical totals. No information which would permit the identification of any individual will be released.

The selected Household Questionnaire respondent may also have questions that will arise during the interview itself. The following are some common questions that occur during the interview as well as some suggested answers.

WHAT DO THESE QUESTIONS HAVE TO DO WITH FOOD? The answers you provide will help determine how persons at different income levels eat. This helps policy makers develop improved national food and nutrition programs. This also helps nutrition educators in targeting their efforts to teach the public about nutrition and food safety. I want to assure you again that your answers will be combined with answers from other households to make totals and averages, in which no person or family will be identified.

WHY ARE YOU ASKING ALL OF THESE QUESTIONS ABOUT INCOME? These questions about income are designed to help you provide **complete** income information. The questions about business and interest income are asked specifically because they may not be thought of as income by some individuals and may be otherwise omitted. I want to assure you again that your answers will be combined with answers from other households to make totals and averages, in which no person or family will be identified.

6.4 Completing the Household Questionnaire: Special Situations

There are a number of situations you may encounter when attempting to complete the Household Questionnaire. If you have a problem completing the Household Questionnaire, you should attempt to complete the Individual Intakes. Do not cause refusals to the Intakes by being too aggressive, but do not back away from the Intakes because you are having problems with the Household Questionnaire respondent, who may or may not be an SP.

6.4.1 Refusal

You may encounter a suitable Household Questionnaire respondent who is not willing to complete the Household Questionnaire. In this case, continue with another knowledgeable household member.

6.4.2 Language Problems and the Use of Interpreters

The Household Questionnaire is only printed in English and Spanish. If the household respondent does not speak either of these languages, you may use an interpreter. The procedures for using an interpreter in Spanish households and households which speak languages other than Spanish or English are discussed below.

Spanish-Speaking Households

We have identified PSUs in which we expect high concentrations of Spanish-speaking households, and have hired bilingual interviewers in these areas. If you are a bilingual interviewer, administer the Spanish version of the Household Questionnaire whenever you contact a respondent who feels more comfortable answering in Spanish.

If you are not a bilingual interviewer but there is one in your area, try to convey to the Spanish-speaking respondent that a Spanish-speaking interviewer will contact them. Then discuss the situation with your supervisor. You should rarely encounter this type of situation because it will usually be discovered during the administration of the Screener.

If there is no Spanish-speaking interviewer in your area, try to arrange for a bilingual household member, a neighbor, or household visitor, age 16 and older, to assist you. Follow this procedure: Share the Spanish version of the Household Questionnaire with the assistant, pointing to the question he or she should read to the respondent. Ask the assistant to translate the response for you so you can record it in the English version of the Household Questionnaire. Then, point to the next question the assistant should ask. While this procedure may be somewhat cumbersome, you should be able to complete the Household Questionnaire in this manner.

If, despite your best efforts, you cannot arrange for an assistant, complete the NIR (discussed further in Section 6.4.3) and return the case to your supervisor after discussing it with her.

Households Speaking Other Languages

If you encounter a household that speaks a language other than Spanish or English, try to arrange for a household member, child, or neighbor, aged 16 or older, to assist in the translation. In these cases, your assistant will have to translate the questions into the respondent's language from your English version of the Household Questionnaire. If this is not possible, complete the NIR and return the case to your supervisor after discussing it with her.

6.5 Documenting Problems

All situations that you encounter which prevent you from completing the questionnaire should be fully documented on a Questionnaire Non Interview Report (NIR). The NIR is discussed in Chapter 9.

7. ADMINISTERING THE DAY 1 AND DAY 2 INDIVIDUAL INTAKE QUESTIONNAIRES

7.1. Overview of the Individual Intake

Day 1 and Day 2 Individual Intake Questionnaire data will be collected in-person for all Sample Persons (SPs) in the household. The Day 1 and Day 2 Individual Intake Questionnaires are very similar and are comprised of three parts: the 24-hour diet recall, a set of health-related questions, and an observation form. The primary goal of the questionnaire is to collect a list of all the food and beverages the respondent consumed within a 24-hour period, the time of consumption, the name of the meal or snack, the detailed food descriptions needed for accurate food coding, the amount eaten, and the source of the foods.

Information collected from the Individual Intake will be coded and linked to a database of nutrient compositions of foods. Calculations of total daily nutrient intakes (in addition to many other food constituents) will be derived from these data. The information obtained will be used to describe the food and nutrient intake of the population.

Because people do not eat the same food everyday, you will collect two 24-hour intakes on each Sample Person. This will allow a description of the variability of what people eat.

The health-related questions ask about the respondent's usual intake, water consumption habits, use of salt, and other diet and health-related questions.

You will complete the observation form based on your judgement and observations.

7.2 Scheduling Considerations for the Intake Interviews

7.2.1 The Day 1 Intake

The goal of the data collection effort is to have at least 10 percent of the Day 1 Intake interviews conducted on each day of the week. To meet this requirement, we have developed procedures for scheduling interviewer assignments that maximize the spread of interviews across the days of the week.

You must conduct Day 1 Intakes in person on 1 of the 3 contact days recorded on the Household Folder/Screenener label. If you have information about the household or one of the Sample Persons/respondents that would make an interview on 1 of the 3 days impossible, discuss the case with your supervisor. With her approval, you are allowed to conduct the Day 1 Intake on another day.

7.2.2 The Day 2 Intake

Day 2 Intakes are to be conducted 3 to 10 days after the Day 1 Intake but not on the same day of the week as the Day 1 Intake.

Collecting a respondent's dietary intake by telephone will be the last alternative for obtaining data. However, if you make 3 in-person visits to collect the Day 2 Intakes, you may try to collect the data by telephone. All telephone interviews must be approved by your field supervisor prior to the interview. Decisions will be made on a case-by-case basis depending on the reason you are unable to collect the data in-person.

When you make your call, note on the Call Record that the interview will be collected by telephone, that you have received approval from your supervisor, and the reason for the telephone interview. If you attempt a telephone interview and get an answering machine, you may leave a message that you are trying to reach the SP, his/her importance to the survey, your willingness to conduct the interview by telephone rather than lose his/her participation, and an indication that you will call back.

A telephone interview will be conducted in a manner very similar to the in-person interview. First, ask the respondent to have the measuring guides (left from the Day 1 Intake interview) conveniently placed in front of him/her. Next, read the introduction and make sure the respondent understands the time frame. Then, following the questionnaire, obtain a Quick List of all foods eaten in the 24 hours of the previous day and collect the details for each food and beverage. The respondent must use the food measuring guides when reporting quantities. For example, if the respondent reports eating a bowl of a certain food, you would say, "Using one of the measuring cups in front of you, could you tell me about how much you ate?"

7.3 Proxy Interviews: Overview

Proxy interviews will be conducted for child SPs under 6 years of age and adult SPs that cannot report for themselves because of age or disability. Child SPs 6-11 years of age will be asked to provide their own data assisted by an adult household member (referred to as the assistant). The preferred proxy/assistant is the person responsible for preparing the SP's meals.

The questionnaire introduction has been modified for Intakes for all children under 12 years and it is written on the questionnaire. For sampled children under 3 years old, use this introduction, including the phrase "and bottles or breast milk." As with the standard introduction, explain the information you need and define the time frame for the proxy. Since infants frequently have feedings during the night, it is important that the proxy understands the time frame. Use the 24-hour food time-line handcard (Hand Card I1) to reinforce the time period.

7.3.1 Child SPs Under 6 Years of Age

A proxy must report for children under the age of 6, as we assume that they cannot reliably report for themselves. Young children may contribute useful information, but most of the data will be provided by one or more proxies responding for the child. The proxy for a child under 6 years of age may be the parent, grandparent, baby-sitter, or any other person knowledgeable about the child's intake. If the child has more than one caregiver, several individuals may contribute to the Intake data.

7.3.2 Child SPs 6 to 11 Years Old

Our procedures assume that while children between 6 to 11 years old may be capable of self-reporting, there is a wide variation of abilities and the participation of the adult most knowledgeable about the child's intake is required to collect complete and accurate information. Before starting the interview with a 6-11 year old SP, include the assistant by saying something like, "I would like you to help with some of the detail later in the interview."

Always ask the child SP Question 1 (the Quick List) of the Intake. After the child reports the Quick List (uninterrupted by the assistant), address the next statement to both the child and the assistant: "Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me." Invite the assistant to participate in the interview and encourage the assistant to help the child report completely and accurately.

It is preferred that the child be present to answer intake questions 1 through 9 and the health-related questions 10-15. After question 15, you may temporarily conclude the interview with the child, but bring him/her back for question 35 about TV viewing habits at the end of the interview. The rest of the interview (questions 16-34) should be directed to the proxy. The proxy should answer the health-related questions based on how he/she perceives the child, not how he/she thinks the child would answer. If the child and assistant provide conflicting information, give them an opportunity to reconcile the response on their own. If they cannot, record the SP's report on the intake grid and proxy comments in the margin.

It is likely that you will be interviewing children about what they ate in the school cafeteria, at a day-care center, a baby-sitter's, or some other caretaker's. It may be necessary to collect not only information about school lunch, but also breakfast and after-school snacks.

A **school-age child** is often able to describe and quantify what he/she ate. A school menu is a good tool to help a school-aged child remember what was served in the school cafeteria. A child can often remember what he/she ate once given a little assistance. Check your local newspapers each week for the weekly school menus in the school districts in which you will be interviewing. Clip the menus and place them in the pocket of the FIB. Or, if this is not feasible, ask the adult present for the interview if he/she has a copy of the weekly menu. Use the school menu to ask something like "the school menu says that (READ MENU) was served. Do you remember if you had these foods?"

If the **pre-school child** has a meal(s) outside the home, the proxy or other family member may be able to tell you what foods were sent with the child, but probably not what foods were eaten. Be patient and persistent in trying to collect as much information as possible from the sampled child, if the proxy cannot be of assistance.

Some tips to remember when interviewing children include:

- Children may be easily influenced by adult approval or disapproval, so you must encourage participation while remaining completely neutral;
- Try to maintain eye contact with the child and show genuine acceptance and interest in the child's answers;
- Remember when probing to use child-related events and terms;
- Help the child think through the day by telling you about his/her activities, and then ask whether or not anything was eaten or drunk. For example, you might ask, "Where did you go right after school yesterday?" If the child says "To my friend's house," you might ask a few more orientation questions (i.e., what is your friend's name, what did you do at this friend's house) and then ask, "Did you have anything to eat or drink while you were at his/her house?"
- An adult must be present in the household when interviewing children under the age of 18.

7.3.3 Adult SPs Unable to Report for Themselves

You may need to interview some respondents older than age 11 who are not capable of responding for themselves due to physical or mental limitations. In these cases, an acceptable proxy would be the person most knowledgeable about the respondent's food consumption. Never assume that a person, especially an elderly person, is not competent to report his/her intake. However, if you determine that a respondent is not capable of giving reliable information or another household member indicates that the SP is unable to report for him/herself, identify a proxy that can provide the information completely and accurately. The person might be a parent, child, nursing aid, spouse, etc. Proxy interviews for adults are not acceptable for adults who are difficult to reach or nonrespondents.

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Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (MAND- CARD)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q6 How much of this (FOOD) did you actually (eat/drink)?
A. Cereal	✓	ⓐ	1. Cereal	Cheerios	1/2c
B. School lunch	✓	ⓑ	2. MILK	lowfat, Liquid	1/2c
C. Coke	✓	ⓐ	3. hamburger	Bread bun, DK type / reg bun	Atc ALL
D. noodle casserole	11:30	ⓐ	4.	Meat: DK kind, DK amt	
E. broccoli		ⓐ	5.	Veg: none	
F. apple		ⓐ	6.	Cheese: DK type, DK amt	
G. cake		ⓐ	7.	SPread: DK	
H. MILK		ⓐ	8.	Other: NONE	
I.		ⓐ	9.	Salt: DK	
J. hamburger	✓	ⓐ	10.	Add: none	
K. tater tots	✓	ⓐ	11. Tater tots	DK Salt	5
L. Milk	✓	ⓐ	12. Milk	Choc, DK type	School carton "little left in bottom"
M.		ⓐ	13.	Coke	not decaf, reg
N.	3	ⓐ	14. noodle Casserole	Macaroni noodles, 1c cooked	1/2c
O.	7	ⓐ	15.	Stewed tomatoes, 2c	
P.		ⓐ	16.	green pepper, 1 med	
Q.		ⓐ			
R.		ⓐ			
S.		ⓐ			
T.		ⓐ			
U.		ⓐ			
V.		ⓐ			
W.		ⓐ			
X.		ⓐ			

7.4 Data Retrieval of Intake Data

7.4.1 Guidelines

If the SP or proxy/assistant cannot provide enough descriptive information about the foods, or the quantity eaten, you will sometimes need to retrieve the data from someone outside the household. If you need to do data retrieval for a food item, circle the line numbers in the *Food/Drink and Additions* column. There are two guidelines for collecting food intake data from someone outside the household:

- The SP was a child under 12 years or an adult who is physically or mentally incompetent.
- And, if one or both of the following occur:
 - the SP or proxy/assistant cannot answer the first probe attached to any hanger (bolded item) in the Food Instruction Booklet (FIB) column Q4 for the reported food; and
 - the SP or proxy/assistant cannot report the amount eaten, FIB column Q5.

If the SP or proxy/assistant does not remember what he/she ate in the school cafeteria, daycare, at the baby sitters, or other caretakers, follow the steps shown on the adjacent page.

1. First, record the eating occasion ("school lunch," "day-care breakfast," or "snack at baby-sitter's") on the Quick List;
2. Next, when you come to that notation for Question 2, ask or confirm the time and then the eating occasion;
3. If a school menu is available, read the foods offered and ask if he/she remembers having those foods. If the SP remembers, record all foods eaten in the Quick List;
4. Check off the box opposite the eating occasion you recorded in the Quick List;
5. Transfer each food item to the *Food/Drink and Additions* column in sequence, check off the box, and ask Q4 and Q5 for each food;
6. Remember to circle all line numbers that need data retrieval.
7. Last, go to the next food item on the Quick List after the eating occasion you just recorded.

If no menu is available, record an explanation across the *Food/Drink and Additions* column and Column Q4 (i.e., “DK daycare breakfast”) and then ask about the quantity eaten. The SP may be able to provide some information on how much was eaten even if he/she cannot remember the food. Record the quantity in Q5 as a portion, for example, “ate all.” Remember to circle all line numbers for foods that will need data retrieval. In the following example, the SP and proxy report that breakfast was eaten at daycare. There is no menu available and while the child doesn’t remember what was eaten, she does remember she ate all of it.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD IS)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Daycare Bkfst	7 [ⓐ] P	01	1. DK DAYCARE BREAKFAST		Ate ALL
B.	a P		2.		
C.					

Question 5 in the FIB (the quantity eaten) can often only be reported by the SP, so it is important to work with the SP to obtain this information. First try to have the SP use the measuring guides to estimate the amount eaten. If the quantity eaten can not be estimated in that way, he/she may be able to report the portion eaten, for example “drank all.” Record this information in column Q5 and follow-up with an outside source if one is available.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD IS)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. School Bkfst	7 [ⓐ] P	01	1. Cereal	Cheerios	1 Box
B.	a P	↓	2. MILK	DK TYPE, LIQUID	drank ALL
C.					

There is a prompt at the end of the questionnaire (Question F on the Interviewer Observation Form) that will remind you to ask the proxy for the name of the school, day-care center, or baby-sitter's and the telephone number. Record this information along with the date and name of the meal on the Follow-up Call Record on page 3 of the Call Record Folder.

DAY ONE FOOD INTAKE QUESTIONNAIRE (Page 18)

F. IS DATA RETRIEVAL NECESSARY FOR DAYCARE/BABY-SITTER/SCHOOL/OR OTHER CARETAKER?

YES 1
 NO 2

(IF YES, RECORD SOURCE INFORMATION ON FOLLOW-UP CALL RECORD ON HOUSEHOLD FOLDER.)

FOLLOW-UP CALL RECORD FOLDER

FOLLOWUP INFORMATION

SP # 103 SP NAME: SALLY

PERMISSION RECEIVED BY Jane Smith RELATIONSHIP TO SP Mother

NAME OF DAY CARE, SCHOOL, BABYSITTER, OR OTHER CARETAKER Wilson School

TYPE OF PLACE/PERSON (SPECIFY SCHOOL, BABYSITTER, ETC.): Elem School

CONTACT PERSON (IF APPLICABLE): ---

TELEPHONE NUMBER: (410) 652-7622

DAY TO RETRIEVE: Wed 3/16/94 MEALS TO RETRIEVE: Lunch

COMMENTS: _____

FOLLOWUP CALL RECORD									
ATTENDY NUMBER	INT ID	DAY OF WEEK	DATE	TIME (SPECIFY AM or PM)	TYPE OF CONTACT		RESULT OF CONTACT		REMARKS
					T	IP	SUCCESSFUL	NOT SUCCESSFUL	
				AM					
				PM					
				AM					
				PM					
				AM					
				PM					
				AM					
				PM					
				AM					
				PM					
				AM					
				PM					
				AM					
				PM					

If the proxy does not give you permission to contact the outside source, make sure you have recorded "DK (MEAL)" across the *Food/Drink and Additions* column and Column Q4 on the appropriate line in the questionnaire grid, and note in Question F that you did not get permission.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (MAND- CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. daycare breakfast	8 ⁰⁰ P	01	1. DK DAYCARE BREAKFAST		
B.	a P		2.		
C.					

DAY ONE FOOD INTAKE QUESTIONNAIRE (Page 18)

F. IS DATA RETRIEVAL NECESSARY FOR DAYCARE/BABY-SITTER/SCHOOL/OR OTHER CARETAKER?
 Did not get permission
 YES 1
 NO 2
 [IF YES, RECORD SOURCE INFORMATION ON FOLLOW-UP CALL RECORD ON HOUSEHOLD FOLDER.]

7.4.2 Data Retrieval Contact Procedures

The amount of information you obtain when you make data retrieval calls will vary, depending on the type of care situation, the age of the SP, and the ability of the caretaker or school personnel to answer the questions. Try to get as much information as possible: what foods were served, descriptions of the food as specified in the FIB, and the quantity consumed or served.

The following are guidelines for making data retrieval calls to a source outside the household:

- Have a member of the household make the introductory call while you are in the household, if possible. The person can be very helpful by explaining to the outside resource who you are and why you will be asking questions about the food intake. It will not be possible to call the school if you are conducting the interview after school hours. However, you might suggest to the proxy/assistant that he/she call the school the following day to inform them of your future call.
- If you must make the call yourself, make sure a person responsible for the child has given you permission to contact the resource.
- Make the call within 12 hours of the interview, if possible.
- Do not try to contact the resource more than 3 days after the interview (or 4 days if the period includes a weekend).

Begin the data retrieval call by introducing yourself and explaining why you are calling. If you have no information about what was served for the meal, ask what was served and record the foods in the Quick List. Follow the procedures for listing the items in the *Food/Drink and Additions* column, and record the descriptive information for Q4 using the FIB. Read Q5 to obtain quantity information, but be aware that the respondent does not have measuring guides to help estimate the quantity eaten. Without measuring guides the answer to the question "how much did Johnny actually eat?" may be "all of it." Follow up with a question such as "can you tell me the number of level tablespoons" or "think of the measuring cups you use for cooking and try to tell me how much was eaten using one of those sizes." Ask for appropriate measures using the FIB as a guide, e.g., portion of sandwich or number of pieces of fruit.

Contacting Schools: When you talk with school personnel about breakfast and/or lunch information, use column Q4 in the FIB to probe for as much detail as possible about the food items. Ask for the **AMOUNT SERVED** of each food item if the child SP did not report the amount eaten during the interview.

Contacting Day-care, Baby-sitters, and Other Caretakers: The amount of information you will obtain from day-care, baby-sitters, and other caretakers will depend on a number of factors. While a baby-sitter or family day-care worker may have a good idea of the food served and the amount consumed, a day-care center may be able to supply very little information about what the SP ate. Many times the family member will be able to tell you what foods were sent with the SP but will not be able to tell you if the he/she ate them. Your job will be to find out how much the SP ate of the food brought from home, and if any other snacks or drinks were eaten during that time.

If the family prefers NOT to have you talk to the resource person, try to "train" a family member to get the information. It may be best to write down the specific questions you need answered on a separate piece of paper to use as guidelines. Use your judgement in deciding how much information the family member is capable of collecting.

7.4.3 Recording Information Collected from Retrieval Sources

As shown below, record all data retrieval information obtained from the school, day-care, or baby-sitter below the "NOTHING ELSE" line on the Intake. Note the line number the data retrieval items refer to above the "NOTHING ELSE" line. Record all information, even if it conflicts with what the SP reported. For instance, as in the example, the child reported eating a turkey hot dog, but the source reported serving a beef/pork hot dog, record the information the data retrieval source reports.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q6 How much of this (FOOD) did you actually (eat/drink)?
A. Cereal	7 [ⓐ] P	01	1. Cereal	Cheerios	1/2c
B. School lunch			2. MILK	lowfat, liquid	1/2c
C. Coke	↓ a P	↓			
D. _____	11 [ⓑ] P	03	3. hot dog	bun: DK type, DK grain, 1 reg	Ate 1/2
E. hot dog			4. ↓	Meat: turkey, DK type	
F. tater tots			5. ↓	Other: cheese, DK American	
G. Milk			6. ↓	Add: none	
H. _____					
I. _____					
J. _____			7. tater tots	DK salt	5
K. _____					
L. _____	↓ a P	↓	8. Milk	Choc, DK type	School carton drank all
M. _____					
N. _____	3 [ⓐ] P	06	9. Coke	not decaf, reg	15 FO
O. _____			10. _____	NOTHING ELSE	
P. _____			See line 3		
Q. _____			Hot dog	Bun: white, commercial	
R. _____					
S. _____			12. ↓	Meat: beef/pork, reg, 1 reg	
T. _____			13. ↓	Other: American cheese, 1s!	
U. _____			See line 7		
V. _____			tater tots	Salt used	Amt Svd: 5
W. _____			15. See line 8		
X. _____			Milk	Choc, lowfat, liquid	Amt Svd: 8 FO
			16. _____		

Refers to line number above

If the source cannot provide any information, record "Data retrieval -- DK (MEAL)" across the *Food/Drink and Additions* column and column Q4 and "DK quantity" in column Q5 below the "NOTHING ELSE" line on the questionnaire grid.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A Cereal	7 [ⓐ] P	01	1. Cereal	Cheerios	1/2c
B. School lunch	↓ a P	↓	2. Milk	lowfat, Liquid	1/2c
C. Coke	11 [ⓐ] P	03	3. hot dog	Bread: bun, DK type, 1 reg	Atc 1/2
D. _____	↓ a P	↓	4. ↓	Meat: DK kind, DK type, 1, DK size	↓
E hot dog	↓ a P	↓	5. ↓	Other: Cheese, DK AMT. DK American	↓
F. tater tots	↓ a P	↓	6. ↓	Adds, none	↓
G. Milk	↓ a P	↓	7. tater tots	DK salt	5
H. _____	↓ a P	↓	8. Milk	Choc, DK type	School cartm drank all
I. _____	3 [ⓐ] P	06	9. Coke	Not decaf, reg	12 FO
J. _____	↓ a P	↓	10.	NOTHING ELSE	
K. _____	↓ a P	↓	11.		
L. _____	↓ a P	↓	12. DATA RETRIEVAL - DK MEAL		DK QUANTITY
M. _____	↓ a P	↓	13.		
N. _____	↓ a P	↓	14.		
O. _____	↓ a P	↓	15.		
P. _____	↓ a P	↓	16.		
Q. _____					
R. _____					
S. _____					
T. _____					
U. _____					
V. _____					
W. _____					
X. _____					

If you do not reach the resource person within 3 days (or 4 days if the period includes a weekend), or cannot reach him/her at all, complete code F01 on the Follow-up Call Record, and note on the Intake, "call unsuccessful."

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (MAND-CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q6 How much of this (FOOD) did you actually (eat/drink)?
A. Cereal	7 [ⓐ]	01	1. cereal	Cheerios	1/2c
B. School lunch			2. MILK	lowfat, liquid	1/2c
C. Coke			3. hot dog	brn: DK type, DK grain, 1reg, 1, DK size	Ate 1/2
D. _____	11 [ⓑ]	03	4. ↓	Meat: turkey, DK type	↓
E. hot dogs			5. ↓	other: Cheese, DK AMT	↓
F. tater tots			6. ↓	add: None	↓
G. MILK			7. tater tots	DK Salt	5
H. _____			8. Milk	Choc, DK type	School Carton drank all
I. _____			9. Coke	not decaf, reg	12 F0
J. _____	3 [ⓐ]	06	10.	NOTHING ELSE	
K. _____			11.		
L. _____			12.	DATA RETRIEVAL CALL UNSUCCESSFUL	
M. _____			13.		
N. _____			14.		
O. _____			15.		
P. _____			16.		
Q. _____					
R. _____					
S. _____					
T. _____					
U. _____					
V. _____					
W. _____					
X. _____					

7.5 Recording Procedures for Missing Meals If Data Retrieval is Not Required

If the Intake does not meet the guidelines for data retrieval (see 7.4.1) and the SP can remember consuming foods and beverages at a particular meal, but cannot remember what was consumed, the meal is considered missing. You would record the missing meal as follows:

Write the eating occasion on the Quick List when reported, for example “lunch” or “snack.” When you transfer the meal to the *Food/Drink and Additions* column, ask the SP again whether he/she can remember what was eaten at the occasion. If the SP still cannot remember, record “DK (MEAL)” across the *Food/Drink and Additions* column and column Q4 and record “DK quantity” in column Q5.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD ID)	Q4 Food/Drink and Additions	Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. coffee	7 ⁰⁰ P	01	1. Coffee	Reg, grd, No Adds	1C
B. Snack	9 ⁰⁰ P	06	2. DK SNACK		DK QUANTITY
C.					

A **missing meal** is distinguished from a skipped meal. A skipped meal is a meal that the respondent might have been expected to eat or drink, but did not, such as no consumption before 1:00 in the afternoon. Record in column Q4 any information the respondent offers, such as "I never eat breakfast" across the *Food/Drink and Additions* column to indicate the meal is not missing.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Salad	✓	a p	1. I NEVER EAT BREAKFAST		
B. Steak					
C. tea	noon	a p 03	2. Salad	tossed	1C
D.		a p	3.	lettuce DKAMT	
E.		a p	4.	Mushrooms DKAMT	
F.		a p	5.	Onions DKAMT	
G.		a p	6.	NO salad dressing	
H.		a p			
I.		a p			

7.6 Conducting Intakes in Households With More Than One SP

If the household member responsible for meal preparation is also a respondent, try to complete his/her Intake first. The main meal preparer will probably provide the most accurate and complete information about what food was served and how it was prepared in the home. Then, if other respondents in the household ate the same foods, you can refer to the main meal preparer's Intake Questionnaire rather than documenting an identical detailed description. In these cases record the name of the food in the Food/Drink column. In column Q4 write: "same as person ID (NUMBER) at (DAY 1/2) (EATING OCCASION) at (TIME) and line # (NUMBER)."

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Omelet	8:30 ^{AM} _P	01	^{1.} Omelet	Same as SP03, Day 1	1/2 c
B.	↓ _a ↓ _p	↓	^{2.} ↓	01, 8:30a, line # 2	↓
C.					

7.7 Market Checks

Market checks are needed when the respondent reports eating a food that is new on the market or a food specific to that area (regional food). For example, a market check would be needed on a new product like Heartbeat margarine or a regional product like McDonald's rib sandwich. When you complete a market check, you will obtain more detailed information about a food than required by the FIB. This information may be used by USDA to expand their food and nutrient data base.

Market check queries will be sent to your supervisor from Westat and you will receive the Market Check form (see Exhibit 7-1) from your supervisor. When you receive the form, the top portion of the form will be filled out with enough information for you to identify the food in question. In order to complete the form, you will need to go to grocery or other stores or make telephone calls to fast food or other restaurants. Do not call the respondent for information.

You may complete the Market Check form in one of three ways:

- _ By copying the information from the label while at the grocery store;
- _ By purchasing the item and copying the information at home; or
- _ By sending the label attached to the Market Check form to Westat.

There may be times when we request that you send the unopened food item. If you send the label or the food item, you do not need to complete the Market Check form.

The form may also have written instructions for you in the comments section of the enclosed box. For instance, you may be asked to find out whether the particular product in question comes in any other sizes, whether it comes salted or unsalted, or with or without nuts. Or, the form may have certain lines asterisked with instructions for gathering the needed information.

If the respondent provides a label during the interview of a food he/she has eaten, attach it to the questionnaire. We appreciate all labels of new or unusual foods you can easily collect.

Exhibit 7-1. Market Check Form

MARKET CHECK FORM (Page 1)

MARKET CHECK FORM

FOR USDA USE ONLY

Date Requested _____ Household ID # _____ Person ID # _____

Person Name _____

City, State _____

Food Line # _____

Food Description _____

Interviewer ID # _____

Comments _____

Exact NAME on label: _____

Description of food: _____

Form of food: (CIRCLE) Canned Bottled Beverage Snack Box Frozen
Dry Fresh or Raw Cooked Ready to Eat/Ready to Serve
Other (EXPLAIN) _____

Price _____ Label enclosed _____ No (CONTINUE) Yes (END)

Whole package enclosed _____ No (CONTINUE) Yes (END)

Manufacturer name _____ Phone, if given _____

Address _____

Ingredients on label _____

Directions for preparation _____

Package weight _____ Number of items in pkg. _____

Serving size _____ No. of servings in pkg. _____

DRAW AND GIVE
DIMENSIONS IF NEEDED

Exhibit 7-1. Market Check Form (continued)

MARKET CHECK FORM (Page 2)

Nutrition Facts

<u>Food Components</u>	<u>% Daily Value</u>
Calories _____	_____ %
Calories from Fat _____	_____ %
Total Fat _____g	_____ %
Saturated Fat _____g	_____ %
Polyunsaturated Fat _____g	_____ %
Monounsaturated Fat _____g	_____ %
Cholesterol _____mg	_____ %
Sodium _____mg	_____ %
Total Carbohydrate _____g	_____ %
Dietary Fiber _____g	_____ %
Sugar _____g	_____ %
Protein _____g	_____ %

Vitamin A _____ %	Vitamin C _____ %
Calcium _____ %	Iron _____ %

NOTE: Some food labels may have this data, some may not. Full compliance with labeling regulations is not required until the end of 1994.

7.8 Completing the Individual Intake: Special Situations

7.8.1 Refusal

Despite your best efforts and good explanations, you will encounter some respondents who do not want to complete the Intake interview. Some respondents will not refuse outright, but may express some hesitancy, reservations, or initial hostility. In a short time, you will become sensitive to how firm a "no" you are receiving by the tone and wording of the respondent's comments. When you begin to sense reasons behind the hesitancy, you should develop ways to reassure the respondent.

If you find you are not getting anywhere with the respondent, try to leave before you get a final "no." It may just be a bad time or a bad day. You also need to consider whether there are other SPs in the household. You need to be very careful not to antagonize or alienate the respondent. Leave the door open so another interviewer can try or so you can obtain interviews with the remaining SPs.

7.8.2 Language Problems and the Use of Interpreters

If you encounter a SP who does not speak English or Spanish, you may use an interpreter. The interpreter should be either a family member or neighbor.

When using an interpreter, you need to remain sensitive to including the SP in the interview. That is, the interpreter should not be answering the questions for the person but simply translating the questions and answers so that you can communicate with him/her and record accurate information. See guidelines for using an interpreter in Section 5.6.3.

7.8.3 Sample Persons Who Move From the Household

It is possible that one of the SPs will move out of the household before both Intakes have been conducted. Regardless of where the SP moves, we want to interview him/her. If the SP has moved from the PSU, record as much information as possible about his/her whereabouts and discuss the case with your supervisor before proceeding.

7.9 Answering the Sample Person's Questions

Listening to the respondent's questions and concerns and answering them by providing accurate information that is needed to remove doubts about the survey is as important when you are introducing the Intake to the respondent as it is when you are first trying to gain cooperation for the Screener. As always, use the advance materials whenever possible to help you make your points.

Here are some of the questions we expect respondents to ask about the Intake as well as suggested answers:

HOW LONG WILL THIS TAKE? The interview should take about 30 minutes.

WHAT ARE YOU GOING TO ASK ME? I'll ask you to tell me about the foods and beverages you consumed yesterday plus a few other food-related questions.

I HAVE A BAD DIET, I WOULDN'T BE A GOOD RESPONDENT. We are interviewing people who have all different types of diets. Your participation will help us better understand the different types of eating habits we have in America.

WHY DO YOU NEED ALL THIS DETAIL ABOUT THE FOOD? We will use the information to calculate the nutrient content of diets. Foods and beverages vary in nutrient content depending on brand, type, what was added to it such as fat and salt, and the quantity eaten. The more exact information you can provide, the more accurate will be the calculations for food and nutrient intakes of all those in your age group.

I DON'T REMEMBER WHAT I ATE. Try to do the best you can. This is not a test. Sometimes, just thinking of your activities throughout the day yesterday and places you have been will help you remember what you ate. Perhaps someone you know would be able to help you remember what you ate such as your parent/friend/daughter/son.

YESTERDAY WASN'T TYPICAL. This survey is designed to estimate food and nutrient intakes that represent those of all people in the U.S. Since not everyone eats the same every day, we would like to include individuals who may not have eaten a typical day's food intake. Information you provide will be combined with that of others to provide an overall picture of food and nutrient intakes.

7.10 Documenting Problems

All situations you encounter which prevent you from completing the questionnaire should be fully documented on the Questionnaire Non-Interview Report (NIR) Form. This will provide your supervisor with the information she needs to determine what to do next with the case. If she decides to refile the case, the NIR will also be used by the next interviewer to better understand the situation you encountered. The NIR is discussed in Chapter 9.

8. ADMINISTERING THE DIET AND HEALTH KNOWLEDGE SURVEY QUESTIONNAIRE

8.1 Selecting the DHKS Respondent

The DHKS respondent will be a Sample Person (SP) who is age 20 or older and has completed the Day 1 Intake. Your Field Management System (FMS) will select the appropriate person once you have entered a Day 1 Intake final result code for every SP in the household. (Your FMS manual describes these procedures.)

DHKS Folder

Once the DHKS respondent is selected, you are to make up a DHKS Folder (see Exhibit 8-1). On the front cover, attach a household mini-label and fill in the DHKS respondent's SP number, name, address, and phone number. All of this information can be transferred directly from the Household Folder. Once you have made the appointment, transfer the date to the DHKS Folder, as well as the date you mailed the DHKS reminder card (discussed in Section 8.2.1).

The back cover of the DHKS Folder contains the DHKS Call Record (Exhibit 8-2) which allows space for you to record information about every attempt to conduct the DHKS Questionnaire. Please be sure that every entry in the Call Record is accurate, complete and legible. Westat codes all of this information.

8.2 Scheduling the DHKS Interview

You will administer the DHKS interview by telephone 2 to 3 weeks after the Day 2 Intake. You are to schedule an appointment to conduct the DHKS after you conduct the Day 2 Intake. Record the appointment (or call back time) both on the Household Folder and in the Field Management System. (See your FMS manual for further instructions.)

DHKS Reminder Card

Approximately 3-5 days before the scheduled interview, you will mail the selected DHKS respondent a reminder card. This card will remind the DHKS respondent of the appointment date and time. The card also contains a list of response categories from selected questions in the questionnaire. It is important that the respondent has the response categories in front of him/her during the interview; the flow of the interview will be much smoother and possibly faster. Exhibit 8-3 is a sample reminder card.

WHAT WE EAT IN AMERICA: 1994-1996 MAIN SURVEY DHKS FOLDER

PLACE CASE LABEL HERE

SAMPLE PERSON #: |__|__|

SP NAME: _____

SP DATE OF BIRTH: |__|__| - |__|__| - |__|__|__|
MONTH DAY YEAR

OR

SP AGE: __|__|

ADDRESS: _____

TELEPHONE NUMBER: (_____) _____

APPOINTMENT INFORMATION

EARLIEST DATE: _____

ACTUAL DATE: _____/_____/_____

DATE REMINDER CARD MAILED: _____/_____/_____

COMMENTS: _____

FIRST INTERVIEWER: _____

DATE ASSIGNED: ____/____/_____

SECOND INTERVIEWER: _____

DATE ASSIGNED: ____/____/_____

Just a reminder...

I will be calling you on _____
at ____:____ am pm to talk to
you about your opinions on
various issues for the USDA
Survey "What We Eat in
America." **Please save this
card** for the interview. The
answer categories to some of
the questions are on the
reverse side.

Interviewer

WESTAT

An Employee-Owned Research Corporation
1990 Research Blvd • Rowles, MD 20850-3125 • 301 261-1500

Place
Postage
Here

- A** Strongly Agree
Somewhat Agree
Somewhat Disagree
Strongly Disagree
- B** Too Low
Too High
About Right
- C** Very Important
Somewhat Important
Not too Important
Not at all Important
- D** Often
Sometimes
Rarely
Never

- E** Very Easy
Somewhat Easy
Not too Easy
- F** Very Confident
Somewhat Confident
Not too Confident
- G** Always
Sometimes
Rarely
Never



Before mailing the card, fill in the respondent's name and address and affix a 19¢ stamp to the right side of the postcard. On the left side of the card, fill in the day, date, and time (remember to circle AM or PM as appropriate) of the scheduled interview. At the bottom of the card, sign your name on the line.

The reverse side of the card contains seven selected response categories, labelled A-F for use in responding to 20 questions in the questionnaire. Before you begin the interview, make sure the respondent has the card in front of him/her.

Below is a listing of the lettered sets of response categories and the question numbers for which each will be used.

<u>Response Categories</u>	<u>DHK Question Numbers</u>
A. Strongly Agree Somewhat Agree Somewhat Disagree Strongly Disagree	2, 23, 24
B. Too Low Too High About Right	3
C. Very Important Somewhat Important Not Too Important Not at all Important	4, 15
D. Often Sometimes Rarely Never	16, 17, 18
E. Very Easy Somewhat Easy Not Too Easy	19
F. Very Confident Somewhat Confident Not Too Confident	20
G. Always Sometimes Rarely Never	26-31 & 38-40

8.3 Preparing for the DHKS

There are 18 questions in the DHKS which contain lists of subquestions, each of which require a response. To ensure that the frequency of responses given is not solely a function of the order in which the questions are read to the respondents, we have randomized the start order. Thus, the cover of the DHKS contains a random start label. (See example below.)

Q1 = D	Q9 = B	Q20 = F
Q2 = A	Q15 = C	Q21 = A
Q3 = H	Q16 = A	Q22 = D
Q4 = H	Q17 = G	Q23 = F
Q5 = C	Q18 = A	Q24 = E
Q8 = A	Q19 = E	Q25 = C

For each question with a random start, the label specifies which question category you are to ask first. For example, for a case with the label at the bottom of the previous page, the first question category you would read for question 1 is D, for question 2 is A, etc. Before you begin the DHKS interview, affix a case ID mini-label to a DHKS and go through the questionnaire and place an X beside the specified sub-question listed next to the main-question on the random start label. For example, using the label above, you would mark question 1 as illustrated below. Be sure to mark your questionnaire in advance of conducting the interview.

-
1. Let's begin by talking about the number of servings from different food groups that a person should eat each day. How many servings from the (FOOD GROUP) would you say a person of your age and sex should eat each day for good health? (DO NOT ACCEPT A RANGE OF SERVINGS.)

What about the (NEXT FOOD GROUP)?

IF ASKED, SAY: "Count as a serving whatever you consider a serving to be."

	FOOD GROUP	NUMBER OF SERVINGS	DON'T KNOW
START AT "X"	a. Fruit Group?	|_|_|	98
	b. Vegetable Group?	|_|_|	98
	c. Milk, Yogurt, and Cheese Group?	|_|_|	98
	<input checked="" type="checkbox"/> d. Bread, Cereal, Rice, and Pasta Group?	|_|_|	98
	e. Meat, Poultry, Fish, Dry Beans, and Eggs Group?	|_|_|	98

It is essential that you mark the correct random starts in the DHKS questionnaire before phoning the respondent. It is even more important that you follow the random starts and ask the questions in the order specified, that is, starting at the "X", proceeding down the list, and then going back up to the subquestions before the "X."

8.4 Answering the Respondent's Questions

Since the DHKS is conducted after the Day 2 Intake, respondents probably have asked you any questions they may have. However, you must be prepared to respond to any concerns or questions that may come up before or during the DHKS interview.

The following are some of the questions respondents may ask and suggested answers. These questions may also come up at the time you are making the DHKS appointment.

HOW LONG WILL THIS TAKE? The interview should take about 30 minutes.

I TOLD YOU EVERYTHING BEFORE. WHY ARE YOU CALLING? Thank you for your participation in the last interview. It was very useful in helping to determine what people eat and drink. This interview will be about your opinions concerning various food issues.

HOW ARE THESE QUESTIONS DIFFERENT FROM THE LAST TIME? The questions in this interview are quite different from before. Last time I asked you a number of questions about what you ate and drank during the day before the interview. This interview is about your opinions concerning various food issues.

HOW MANY TIMES ARE YOU GOING TO CALL/COME BACK? This is the last interview we will be asking you to do.

The selected DHKS respondent may also have questions that arise during or after the interview itself. The following are common questions that may occur during the interview as well as some suggested answers.

WHAT DO YOU THINK ...(of my response)? We are trying to determine what you think about these issues. So, I really wouldn't be a good judge of your answers.

WHAT WAS THE RIGHT ANSWER? / HOW DID I DO? / WHAT WAS MY SCORE?
I am not a nutritionist and I'm really not sure. Please remember this is not a test.

8.5 Telephone Procedures

8.5.1 Setting for the Interview

The DHKS interview will (for the most part) be conducted by telephone from your home. As you get ready to call the respondent, it is important that you take a few minutes to consider the interview setting. Are you seated in a comfortable position - that is, comfortable enough to spend the next 30 minutes or so asking questions and recording responses while balancing a telephone? Have you eliminated all background noise - turned off television or radio, gone into a quiet room?

It is important that the respondent continues to "see you" as a professional interviewer. In addition, the setting can influence the length of the interview (e.g., if questions need to be repeated because respondent cannot hear over background noise, it will take longer).

Although you will be able to control your end of the call, it will be much harder to control the respondent's end. If there is a lot of distraction at the respondent's home, use your judgement as to whether to request that a radio be turned down, for example. Since this is your third interview with the respondent, you should be in a fairly good position to judge what the reaction might be to such a request. Remember, you do not want to jeopardize the interview.

8.5.2 Using the DHKS Reminder Card During the Interview

Before you start the interview, make sure the respondent has the reminder card with the response categories in front of him/her. Explain that responses to many of the questions are on the card and that you will refer him/her to the appropriate lettered set of response categories. You should always have a reminder card in front of you for reference so you can prompt the respondent as to where the response set is located on the card. To direct the respondent to use the card, you might say something like, "Look now at response set E; it is printed in the right hand corner."

Or, at question number 2 for example, you could say something like "Please look at response set A -- this is the set with the agree and disagree categories - did you find it ...? Answer the following questions with one of those choices. Now, I am going to read some statements about what people eat. Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement (STATEMENT)?"

8.5.3 Special Telephone Problems

There are a few problems which are unique to telephone interviewing. These are as follows:

1. You reach an answering machine. Count the call as an attempt. Leave a message on the machine that you will be calling back. It is important to let the respondent know that you have attempted to keep the appointment.
2. You reach a telephone company recording saying the number has been disconnected or is nonworking. Discuss the situation with your supervisor. It may be possible to get a new number from Directory Assistance or it may be necessary to conduct the interview in person.
3. The respondent has trouble hearing on the telephone. If your respondent is hard of hearing, the most important thing for you to do is be patient - you may need to repeat things.

When your respondent is having trouble hearing you, it is especially important that there are no background distractions. It may also be helpful if you "cup" the mouthpiece with your hand while reading the questions.

If it is clear that the interview cannot be conducted by telephone, discuss the case with your supervisor. She will need to give you approval before you can conduct the interview in person.

8.6 Special Issues

8.6.1 Conducting the DHKS In Person

It is possible that you will encounter a respondent with a severe hearing problem or one who does not have a telephone. For these types of cases the DHKS can be conducted in person only after receiving supervisor approval. If, after discussing the situation with your supervisor, she agrees that the interview should be conducted in person, be sure to document the fact that you received approval on the DHKS Folder.

If you have received approval to conduct the DHKS in person, you would still mail the card, and use it in much the same way you would use your hand cards. Refer to the particular lettered set of responses when you ask a question which has the answer categories printed on the card. Always read the answer choices at least one time.

8.6.2 Conducting the DHKS Without the Reminder Card

Although we have stressed the importance of the reminder card, all is not lost if the respondent or someone else in the household accidentally misplaced or threw away the card, or if it was never received. There is no reason that you need to make another appointment just to mail the respondent another reminder card. Instead, simply read the answer categories a little more slowly. There are interviewer boxed instructions for most of these questions which prompt you to repeat the answer categories, as needed.

8.6.3 Use of Proxies

The DHKS can never be conducted with a proxy. If the selected SP cannot respond him/herself, determine the reason, code the disposition accordingly and complete the DHKS Questionnaire NIR.

8.6.4 Refusal

You may encounter a DHKS respondent who is not interested in completing the interview. Stress to the respondent that this is the last interview we will ask him or her to do. If your best efforts fail, document the refusal fully on the NIR.

8.6.5 Language Problems and the Use of Interpreters

Spanish-Speaking SPs: In most cases the work in a Spanish-speaking household will have already been transferred to a bilingual interviewer. If not, discuss the possibility of transferring the DHKS interview to a bilingual interviewer. If this is not possible, you should receive approval from your supervisor to conduct the interview in person. Arrange for a bilingual assistant (aged 16 or older) and follow the procedures for using an interpreter: share the Spanish version of the DHKS with the interpreter, pointing to the questions to be read to the respondent. Ask the interpreter to translate the response for you so you can record it in the English version of the DHKS. Then, point to the next question the interpreter should ask. Make sure that any questions raised by the respondent are translated by the interpreter.

If, despite your best efforts, you cannot arrange for an interpreter, complete the NIR and return the case to your supervisor after discussing it with her.

Households Speaking Other Languages: Follow the procedures outlined above for conducting the DHKS in person with the assistance of an interpreter. Emphasize to the interpreter that his/her translation of the questionnaire needs to be carefully made because wording changes could impact the meaning of the questions.

8.7 Documenting Non Response

It is very important to document every problem you encounter that prevents you from completing the DHKS. Document the problem situation fully on the DHKS Non-Interview Report (see Exhibit 8-4) located inside the DHKS Folder. NIR information will be used by your supervisor in deciding whether or not the case should be refiled. If the case is refiled, the NIR will provide valuable information to the next interviewer in assessing the problem and developing a strategy to deal with it. Therefore, it is important to complete the report as accurately as possible. Make enough notes so that you can thoroughly discuss the situation with your supervisor or help another interviewer convert the case.

<p style="text-align: center;">INTERVIEWER 1 NONINTERVIEW REPORT</p>	<p style="text-align: center;">INTERVIEWER 2 NONINTERVIEW REPORT</p>
<p>N-1. RECORD THE FOLLOWING BACKGROUND INFORMATION</p> <p>INTERVIEWER NAME: _____</p> <p>INTERVIEW ID: _____</p> <p>DATE: _____</p>	<p>N-1. RECORD THE FOLLOWING BACKGROUND INFORMATION</p> <p>INTERVIEWER NAME: _____</p> <p>INTERVIEW ID: _____</p> <p>DATE: _____</p>
<p>N-2. WHOM DID YOU SPEAK TO DURING YOUR CONTACT ATTEMPT(S)? (CODE ALL THAT APPLY.)</p> <p>NO ONE 1</p> <p>HH MEMBER OVER 16 2</p> <p>HH MEMBER UNDER 16 3</p> <p>RELATIVE/FRIEND OF HH 4</p> <p>NEIGHBOR 5</p> <p>SAMPLE PERSON 6</p> <p>OTHER (SPECIFY): 7</p> <p>_____ |__|__|</p>	<p>N-2. WHOM DID YOU SPEAK TO DURING YOUR CONTACT ATTEMPT(S)? (CODE ALL THAT APPLY.)</p> <p>NO ONE 1</p> <p>HH MEMBER OVER 16 2</p> <p>HH MEMBER UNDER 16 3</p> <p>RELATIVE/FRIEND OF HH 4</p> <p>NEIGHBOR 5</p> <p>SAMPLE PERSON 6</p> <p>OTHER (SPECIFY): 7</p> <p>_____ |__|__|</p>
<p>N-3. WHY WERE YOU UNABLE TO COMPLETE THE DHKS? (CODE ALL THAT APPLY)</p> <p>RESPONDENT UNAVAILABLE</p> <p>DURING FIELD PERIOD 01</p> <p>LANGUAGE PROBLEM 02</p> <p>REFUSAL/BREAK-OFF 03</p> <p>MAXIMUM ATTEMPTS 04</p> <p>UNABLE TO LOCATE/INTERVIEW 05</p> <p>ILLNESS OR DISABILITY 06</p> <p>UNABLE TO ENTER STRUCTURE 07</p> <p>OTHER 08</p>	<p>N-3. WHY WERE YOU UNABLE TO COMPLETE THE QUESTIONNAIRE? (CODE ALL THAT APPLY)</p> <p>RESPONDENT UNAVAILABLE</p> <p>DURING FIELD PERIOD 01</p> <p>LANGUAGE PROBLEM 02</p> <p>REFUSAL/BREAK-OFF 03</p> <p>MAXIMUM ATTEMPTS 04</p> <p>UNABLE TO LOCATE/INTERVIEW 05</p> <p>ILLNESS OR DISABILITY 06</p> <p>UNABLE TO ENTER STRUCTURE 07</p> <p>OTHER 08</p>
<p>N-4. IF LANGUAGE PROBLEM: CODE NON-ENGLISH LANGUAGE SPOKEN IN THE HOUSEHOLD.</p> <p>SPANISH 1</p> <p>OTHER (SPECIFY): 2 |__|__|</p> <p>_____</p> <p>DON'T KNOW 8</p>	<p>N-4. IF LANGUAGE PROBLEM: CODE NON-ENGLISH LANGUAGE SPOKEN IN THE HOUSEHOLD.</p> <p>SPANISH 1</p> <p>OTHER (SPECIFY): 2 |__|__|</p> <p>_____</p> <p>DON'T KNOW 8</p>

<p style="text-align: center;">INTERVIEWER 1 NONINTERVIEW REPORT</p>	<p style="text-align: center;">INTERVIEWER 2 NONINTERVIEW REPORT</p>
<p>N-5. IF REFUSAL/BREAKOFF: EXPLAIN WHY THE RESPONDENT REFUSED OR BROKE OFF THE QUESTIONNAIRE, USING THE RESPONDENT'S OWN WORDS WHEN POSSIBLE.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>DID NOT HAVE TIME, DIDN'T WANT TO BE BOTHERED .. 01 OBJECTED TO THIS (MORE PARTICIPATION IN THIS) PARTICULAR SURVEY 02 DID NOT BELIEVE IN SURVEYS IN GENERAL..... 03 OBJECTED TO GOVERNMENT INTRUSION OR HAD NEGATIVE FEELINGS ABOUT GOVERNMENT 04 AFRAID TO LET INTERVIEWER IN, AFRAID TO ANSWER, TOLD NOT TO ANSWER QUESTIONS..... 05 CLAIMED THIS SURVEY DID NOT APPLY TO HH/SP..... 06 OTHER REASON 07</p>	<p>N-5. IF REFUSAL/BREAKOFF: EXPLAIN WHY THE RESPONDENT REFUSED OR BROKE OFF THE QUESTIONNAIRE, USING THE RESPONDENT'S OWN WORDS WHEN POSSIBLE.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>DID NOT HAVE TIME, DIDN'T WANT TO BE BOTHERED 01 OBJECTED TO THIS (MORE PARTICIPATION IN THIS) PARTICULAR SURVEY 02 DID NOT BELIEVE IN SURVEYS IN GENERAL..... 03 OBJECTED TO GOVERNMENT INTRUSION OR HAD NEGATIVE FEELINGS ABOUT GOVERNMENT 04 AFRAID TO LET INTERVIEWER IN, AFRAID TO ANSWER, TOLD NOT TO ANSWER QUESTIONS 05 CLAIMED THIS SURVEY DID NOT APPLY TO HH/SP..... 06 OTHER REASON..... 07</p>
<p>N-6. EXPLAIN IN DETAIL WHY YOU WERE UNABLE TO COMPLETE THE QUESTIONNAIRE.</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>N-6. EXPLAIN IN DETAIL WHY YOU WERE UNABLE TO COMPLETE THE QUESTIONNAIRE.</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>N-7. WOULD SENDING A CONVERSION LETTER BE HELPFUL?</p> <p>YES 1 NO 2</p> <p>COMMENTS: _____</p> <p>_____</p> <p>_____</p>	<p>N-7. WOULD SENDING A CONVERSION LETTER BE HELPFUL?</p> <p>YES 1 NO 2 ALREADY SENT 3</p> <p>COMMENTS: _____</p> <p>_____</p> <p>_____</p>
<p>N-8. RECORD ANY INFORMATION THAT MIGHT HELP ANOTHER INTERVIEWER MAKE CONTACT WITH THE RESPONDENT AND/OR COMPLETE THE QUESTIONNAIRE.</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>N-8. RECORD ANY INFORMATION THAT MIGHT HELP ANOTHER INTERVIEWER MAKE CONTACT WITH THE RESPONDENT AND/OR COMPLETE THE QUESTIONNAIRE.</p> <p>_____</p> <p>_____</p> <p>_____</p>

12. HOUSEHOLD SCREENER

This page intentionally blank.

WHAT WE EAT IN AMERICA: 1994-1996 SCREENER

CASE #: _____

ADDRESS: _____

MISSED STRUCTURE: ___ YES ___ NO

MISSED DU: ___ YES ___ NO

CONTACT DAYS _____

SAMPLE MESSAGE: _____

INTRODUCTION: Hello, I'm (YOUR NAME) and we are conducting a survey for the United States Department of Agriculture. A letter and brochure were sent to you recently explaining the What We Eat in America Survey which is about what people eat and drink. (IF RESIDENT DOES NOT REMEMBER, HAND NEW COPY OF LETTER AND BROCHURE.)

First, I would like to verify your address. Is this (READ ADDRESS FROM LABEL ABOVE)? [MAKE CORRECTIONS TO ADDRESS LABEL IF NECESSARY. IF AT CORRECT ADDRESS, CONTINUE WITH SCREENER. IF NOT AT CORRECT ADDRESS, THANK RESPONDENT AND LEAVE.]

I need to determine if any members of your household are eligible to participate. To do this, I'd like to ask some questions about the persons who live here. Each eligible household that agrees to participate will receive a gift. Before we begin, I want to assure you that your answers will be combined with answers from other households to make totals and averages, in which no person or family will be identified.

INTERVIEWER NAME: _____

_____ AM 1
TIME STARTED PM 2

INTERVIEWER ID: |__|__|__|

_____ AM 1
TIME ENDED PM 2

DATE OF SCREENER: |__|__| - |__|__| - 19 |__|__|
 MO DAY YR

RESPONDENT'S FIRST NAME: _____

LINE LETTER: |__|

DISPOSITION CODE: _____

FOR HOME OFFICE USE ONLY	
DATE RECEIVED: _____	
VERIFIER ID: _____	
MC: ___ YES ___ NO	
BATCH #: _____	

12.1 Overview

The Screener collects household composition data which will enable you to select Sample Persons (SPs).

The Front Cover contains:

- The large case label with address and messages.
- Introduction with instructions to verify the address.
- Space for your name, ID number, and the date of interview.
- Start and End times. Remember to circle AM or PM.
- Space for the Screener respondent's first name and line letter.
- Space for the Screener disposition code.

12.2 Household Enumeration

In this section, you will gather information about the name, age, and race of the household members.

- Q.1** Enter the number of people given by the Screener respondent. If you learn later that the number you entered is incorrect, line through the original entry and record the number that agrees with the enumeration table. Remember to list all household members, regardless of age. There is space allocated for a 2 digit number. If there are only 1-9 household member(s), be sure to record a zero in front of the number of household member(s) (e.g., 02).
- Q.2** Enter the first name only of the person who owns or rents the home on line A. If more than one person owns or rents the home, ask the respondent to decide who should be listed first. If the DU is owned or rented by a non-household member, the person listed first should be the person responsible for the majority of the household expenses.
- Q.3** When reading this question, insert the name of Person A where it reads (REFERENCE PERSON).

4. And the other members of this household who are related to (REFERENCE PERSON).
What are their first names? Let's begin with the oldest.
[ENTER NAME(S) IN AGE ORDER ON ENUMERATION TABLE BELOW.]
5. Are there any other people living here who are not related to (REFERENCE PERSON)?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW]
6. [I have listed (READ ALL NAMES).] Is there anyone else living here now, such as friends, relatives, or roomers?
[IF YES, ENTER WE(S) ON ENUMERATION TABLE BELOW.]
7. Have we missed other household members now away from home who usually live here,
for example, someone away on vacation or business, or in a hospital?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW.]

10. <div style="border: 1px solid black; padding: 2px; display: inline-block;">HAND CARD S2</div> Do any of the groups on this card represent (NAME)'s national origin?	11. What is (NAME)'s date of birth? (MM/DD/ YYYY)	12. AGE CHART (ASK IF NECESSARY: How old was (NAME) on (his/her) last birthday?) IF LESS THAN 1, RECORD AGE IN MONTHS.	13. CODE SEX. (ASK IF NOT OBVIOUS: Is (NAME) male or female?)	SAMPLE PERSON	
				✓	NUMBER
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____/____/____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____

Q.4 List the first names only of other members of the household related to the reference person. List them in age order from oldest to youngest.

Questions 5, 6, and 7 work together to make the enumeration as complete as possible by prompting the respondent to think of persons who might have been missed.

Q.5 This question asks for household members who are not related to the reference person. If a household employee has a private room in the home but takes meals with the rest of the household, that person should be listed.

Q.6 This question summarizes the household listing for the respondent to ensure that no household member has been inadvertently excluded.

Q.7 This question captures household members who may be away at the time of screening. These questions make it clear that we need to include people even if they are not related to Person A, only live at the DU on a temporary basis but have no other permanent address, or are temporarily away from the DU such as someone away on vacation. REMEMBER that if a student is away at school and living in a dormitory, sorority or fraternity house, s/he is to be INCLUDED as a household member. Do NOT include students living away in off campus housing such as apartments and houses that have their own chance of selection in the survey.

1. including yourself, how many people live in this household? | |
NUMBER

2. What is the first person or one of the persons who owns or rents this home?
[ENTER NAME ON LINE A OF ENUMERATION TABLE BELOW.]
[IF ONLY ONE PERSON LIVES IN HOUSEHOLD, GO TO Q6. OTHERWISE CONTINUE.]

3. What is the first name of (REFERENCE PERSON)'S spouse, if any, who lives in this household?
[ENTER NAME ON LINE B OF ENUMERATION TABLE BELOW.]

ENUMERATION TABLE: AFTER LISTING HOUSEHOLD MEMBERS, RECORD NAME AND LINE LETTER OF SCREENER RESPONDENT ON FRONT COVER. ASK QUESTIONS 8-13 GOING ACROSS FOR EACH PERSON.

LINE LTR	ENUMERATION QUESTIONS 2-7: FIRST NAME	8. What is (NAME)'s relationship to (REFERENCE PERSON)? |_0_|_0_|	9.  Which of the groups on this card best describes (NAME)'s race? WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
A		REFERENCE PERSON |_0_|_0_|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
B		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
C		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
D		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
E		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
F		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
G		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
H		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3
I		|_ _|_ _|	WHITE 1 AM. INDIAN 4 BLACK 2 OTHER 5 ASIAN 3

12.3 Completing the Household Enumeration Table

After you complete the enumeration of the household, record the name and line letter of the Screener respondent on the front cover of the Screener and proceed with Q. 8-13 for each person. Always complete questions 8-13 for one person before beginning the series for the next person listed.

Q.8 You will skip this question for Person A. In giving the names of household members during the earlier questions, the respondent may mention a relationship. If so, record it in the table but verify it when you get to Q.8. Ignore the two boxes in the corner of each column. These boxes are for coder use only.

Throughout this process, be sure the respondent is giving you each household member's relationship to Person A. Be prepared to probe if you are in doubt.

Q.9 At this question, you will give the respondent Hand Card S1 to obtain the race of the household members. Circle the code that corresponds to the answer. If the respondent has difficulty choosing one category, use the following definitions as a guide in helping him/her. Circle only one response.

- A. White- includes persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- B. Black - includes persons having origins in any of the Black racial groups of Africa, Puerto Rico, Mexican, Cuban, Latino, etc.
- C. Asian - includes persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent. This area includes, for example, China, India, and Korea.
- D. American Indian - includes persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.
- E. Other - this category is provided for the few situations where a respondent is reluctant to categorize him/herself or others in the household under one of the other codes.

NOTE: Probe a mixed race answer by first asking the respondent which race best describes the household member and coding the answer. Second, when a respondent cannot provide one answer and continues to provide two or more answers, record the answer verbatim in the margin along with the SP number. For example, "SP01 1/4 white, 3/4 black." If the respondent says that the racial background is Hispanic, probe for White Hispanic or Black Hispanic and code accordingly.

4. And the other members of this household who are related to (REFERENCE PERSON).
What are their first names? Lets begin with the oldest.
[ENTER NAME(S) IN AGE ORDER ON ENUMERATION TABLE BELOW.]
5. Are there any other people living here who are not related to (REFERENCE PERSON)?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW]
6. [I have lii (READ ALL NAMES).]Is there anyone else living here now, such as friends, relatives, or roomers?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW.]
7. Have we missed other household members now away from home who usually lie here,
for example, someone away on vacation or business, or in a hospital?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW.]

10. <div style="border: 1px solid black; padding: 2px; display: inline-block;">HAND CARD S2</div> Do any of the groups on this card represent (NAME)'s national origin?	11. What is (NAME)'s date of birth? (MM/DD/ YYYY)	12. AGE CHART (ASK IF NECESSARY: How old was (NAME) on (his/her) last birthday?) IF LESS THAN 1, RECORD AGE IN MONTHS.	13. CODE SEX (ASK IF NOT OBVIOUS: Is (NAME) male or female?)	SAMPLE PERSON	
				✓	NUMBER
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN .. 2 HISPANIC 4 CUBAN..... 3 NONE OF ABOVE ... 5	____/____/____ ____	_____ YRS 1 MOS 2	MALE 1 FEMALE 2		____

Q.10 Give respondent Hand Card S2 in order to gather information on the national origin of the household members. Code "none of the above" for household members who are not Hispanic. Circle only one response.

If the respondent reports that a household member is of mixed origin, ask if the person identifies more with one nationality than the other. Code that ethnic group. If the person does not select one ethnic group, record the answer verbatim in the margin along with the SP number. For example, "SP03 1/3 Cuban, 2/3 Mexican."

Q.11 Ask the date of birth for each household member. If the respondent does not know the complete birthday, record as much information as possible. Please record the individual's birth date in the following format:

M	M	D	D
Y	Y	Y	Y

For example, if the respondent reports that his birthday is November 8, 1936, you would record:

1	1	0	8
1	9	3	6

Q.12 Refer to the third Hand Card and the birthdate in Q11 to determine the persons's age. To use the Age Chart, start with the person's year of birth. If the person's birthday is on or before the date of the interview, the "Yes" column will list the age. If the person's birthday comes after the date of interview, the correct age will appear in the "No" column. Verify the age with the respondent. Record the age as a 3-digit number. For example, 056. Circle the code for years or months. (A child's age should be recorded in months if the child is under a year old.)

Q.13 Self explanatory

The two far right-hand columns are used for Sample Person selection as explained in detail in Chapter 5.

PLACE BOX 1 LABEL HERE

I _!

14.

**HAND
CARD
S3**

SELECT CARD FOR NUMBER OF HOUSEHOLD MEMBERS. CARD SELECTED = S3-|_|_|. Here is a card showing different sources from which households may receive income. Please think for a moment about the various sources from which the members of this household received income last year - during 1993.

Thinking about all of the sources of income, please tell me whether the total income received by the members of this household during 1993 was more or less than the amount at the bottom of this card.

- MORE 1 (BOX 3)
- LESS 2 (BOX 2) ----->
- REFUSED 7
- DON'T KNOW 8 } 14a

**BOX 2.
SAMPLE PERSON
SELECTION**

CHECK SAMPLE
PERSON COLUMN FOR
EACH PERSON IN AGE
AND SEX CATEGORY
MARKED YES IN BOX

14a. ARE THERE ANY CHILDREN LESS THAN 6 YEARS OF AGE?

- YES 1 (Q14b)
- NO 2 (BOX 3)

14b. IS THERE A MALE 18 YEARS OF AGE OR OLDER?

- YES 1 (BOX 3)
- NO 2 (BOX 2) ----->

PLACE BOX 3 LABEL HERE

BOX 4. SAMPLE PERSON SELECTION

a. CHECK SAMPLE PERSON COLUMN FOR EACH PERSON IN AGE AND SEX CATEGORY MARKED YES IN BOX 3.

b. IS ANY PERSON IN THE HOUSEHOLD CHECKED AS AN SP?

- YES 1 (CHECK SAMPLE PERSON COLUMN FOR EACH PERSON LESS THAN ONE YEAR OLD. THEN GO TO BOX 5)
- NO 2 (Q15)

BOX 5. ASSIGNING SP NUMBERS

ASSIGN SAMPLE PERSON NUMBER FOR EACH PERSON WITH A CHECK IN SAMPLE PERSON COLUMN. PLEASE NUMBER IN SEQUENTIAL ORDER.

12.4 Using the Sampling Labels to Select Sample Persons

Two labels will be affixed to page 4 of the screener. There are 24 versions of the labels. Some versions require that question 14 be asked and others do not. Chapter 5 explains SP selection in detail and provides examples of the sampling labels.

Boxes 1-5 Please refer to Chapter 5 for an explanation of the Sampling Boxes.

Ignore the box to the right of the Box 1 label. This is for coder use only.

Q.14 Using Hand Card S3 (as appropriate for the number of household members), ask Question 14. If the respondent does not know or refuses to answer Q.14, you will record the answers to Q.14a and Q.14b.

Be sure to write in the number of the Screener Hand Card S3 you showed to the respondent. Hand Cards for 1-12 person households are in your set of bound cards. Hand Cards for larger households are on a separate ring. Always have them with you in case you encounter a household with more than 12 members.

NOTE: The only times you would move on to Box 2 are when the respondent answers Q.14 as "LESS" or Q.14b as "NO."

If the household contains a live-in employee, do not include his or her income as part of the household income. If the household contains roomers/boarders, their income should be included as part of the household income.

15. Would you give me your telephone number in case my office wants to check my work?

TELEPHONE NUMBER: () _____

NO TELEPHONE 2
REFUSED 7

BOX 6
WAS ANY SAMPLE PERSON SELECTED?
YES 1 (Q16)
NO 2 (Q19)

16. Are you or any members of this household planning to move within the next 6 weeks?

YES 1 (Q17)
NO 2 (Q19)

17. When are (you/he/she/they) planning to move?

_____ MONTH

RECORD ANY AVAILABLE ADDRESS INFORMATION:

18. Please give me the name and telephone number of two relatives or friends who would know where the members of your household could be reached in case we have trouble reaching you. Please give me the names of persons who are not currently living in the household.

NAME #1: _____

TELEPHONE NUMBER: () _____

| |

NAME #2: _____

TELEPHONE NUMBER: () _____

19. DOES THE SCREENER LABEL REQUIRE THE MISSED DU PROCEDURE?		
<p>1 <input type="radio"/> YES ↓</p> <ul style="list-style-type: none"> ▪ COMPLETE MISSED DU PROCEDURE AND FORM <u>NOW</u>. THEN: ▪ IF SP SELECTED, CONTINUE WITH HH QUESTIONNAIRE. ▪ IF <u>NO</u> SP SELECTED, TERMINATE. 	<p>2 <input type="radio"/> NO ↓</p> <ul style="list-style-type: none"> ▪ IF SP SELECTED, CONTINUE WITH HH QUESTIONNAIRE. ▪ IF <u>NO</u> SP SELECTED, TERMINATE.	| |

TIME ENDED _____ AM
PM

- Q.15** Collect telephone numbers whenever possible. If the household does not have a telephone, ask for a work number and make a marginal notation that the telephone is located at the work place.
- Box 6** If at least one Sample Person is selected, Q.16-18 will be asked in order to collect information on locating the household if, in fact, they have plans to move. If no SP is selected, we are not concerned with the household's plans to move, and therefore, you would skip to Q.19, the Missed DU procedure.
- Q.16-17** Locating information is important for households planning to move. If the respondent does not have complete information about the move, collect any that he or she has. A city and state is preferable to no information at all.
- Q.18** This question is asked to assist in locating household members who might relocate. Assure the respondent that the two references will not be contacted for any other purpose. It is important to record area codes as well as complete telephone numbers. If the respondent does not know the numbers, ask him/her to get the phone book and look them up.

12.5 Ending the Screener

- Q.19** This is an instruction box alerting you to the Missed DU procedure. Check the label on the front cover and follow the instructions. See Chapter 5 for additional information on the procedure.

NEIGHBOR INFORMATION

|_ |

PLACE BOX 6 LABEL HERE

|_ |

20. **ARE THERE ANY CHILDREN LESS THAN 6 YEARS OF AGE?**
- YES 1 (Q21)
- NO 2 (BOX 8)

21. **IS THERE A MALE 18 YEARS OF AGE OR OLDER?**
- YES 1 (BOX 8)
- NO 2 (BOX 7) _____ >

BOX 7

RECORD AGE AND SEX IN
SAMPLE PERSON CHART
BELOW FOR EACH PERSON
IN AGE AND SEX CATEGORY
IN BOX 6.

PLACE BOX 8 LABEL HERE

|_ |

|_ |

BOX 9. SAMPLE PERSON SELECTION

RECORD AGE AND SEX IN SAMPLE PERSON CHART BELOW FOR EACH PERSON IN AGE AND SEX CATEGORY IN BOX 8.

SAMPLE PERSON CHART		
AGE OR AGE RANGE	SEX	SAMPLE PERSON NUMBER

BOX 10. ASSIGNING SP NUMBERS

RECORD SAMPLE PERSON NUMBER FOR EACH PERSON RECORDED IN SAMPLE PERSON CHART ABOVE. PLEASE NUMBER IN SEQUENTIAL ORDER.

RECORD NAME, ADDRESS, AND TELEPHONE NUMBER OF THE INDIVIDUALS PROVIDING THIS INFORMATION.

1. _____
2. _____

12.6 Recording Neighbor Information

When the selected household refuses the Screener interview or cannot be contacted for interview, you must collect "neighbor" information as discussed in detail in Chapter 5. A "neighbor" can be someone living next door, the postman, or a household member who will not provide complete enumeration information. The back cover of the Screener is an abbreviated set of questions to determine if there are any eligible SPs living in the selected household. See Chapter 5 for more detailed instructions and several examples on when and how to complete this page.

Boxes 6-10 See Chapter 5 for instructions on completing the neighbor information sampling boxes.

Ignore the boxes in the right margins of Boxes 6 and 8. These are for coder use only.

NOTE: If you have used neighbor information to select SPs and you then make contact with the household and they agree to participate, you must conduct the complete household enumeration in the Screener prior to conducting any other interviews (e.g., Intakes).

Q.20 Self explanatory.

Q.21 Self explanatory.

NOTE: Questions 20 and 21 are in all CAPS, and therefore, should not be asked aloud. These questions are coded after you have received a complete listing of the sex and age of all household members. If you feel you have received an incomplete list and asking this question aloud may trigger a forgotten household member, please ask it.

13. HOUSEHOLD QUESTIONNAIRE

The Household Questionnaire is asked in each household in which Sample Persons (SPs) have been selected. Although the administration of the questionnaire is dependent upon whether the household contains at least one SP, the questions in the Household Questionnaire are asked about ALL members of the household (not just the Sample Persons).

The Household Questionnaire asks questions about a variety of topics including food shopping practices, activities of household members, source of water and food, school food programs, household food supply, and income. Because of this variety, it is important that your respondent is someone who is knowledgeable about the household. The Household Questionnaire respondent does not have to be an SP. Chapter 6 of this manual discusses the procedures for selecting the respondent in more detail.

13.1 Interaction With the Household Screener/Preparing the Questionnaire

The Household Questionnaire has several questions that are set up with household member information you collected in the Screener. See Q.9 and the grid on p.4 for explanation. For this reason, it is critical that you always have the Screener close at hand while conducting the Household Interview.

Cover Page - As you begin the interview, place a mini label in the box provided on the cover. Print your name and your identification number beneath it. Enter the date of the interview. Record the name and line letter of the respondent for the Household Interview. Check Q.14 in the screener and answer the question in the box. The answer to this box should be coded in terms of whether an answer of 'MORE' or 'LESS' was received to Q.14. If the screener Q.14 is blank or coded refused or don't know, the answer to this box should be 'NO.' Also record the answer in Box 5 on page 13.

At the end of the interview (or as part of your edit), transfer the start time and end times that you recorded on page 1 and 16, respectively to the cover. Don't forget to circle either the 1 (AM) or 2 (PM).

Example of Setting Up the Person Grids

Screener:

LINE LTR	ENUMERATION QUESTIONS 2-7	8 What is (NAME)'s relationship to (REFERENCE PERSON)?	9 Which of the groups on this card best describes (NAME)'s race?
A	FIRST NAME John	REFERENCE PERSON 1 0 1 0 1	WHITE BLACK ASIAN AM INDIAN OTHER 3
B	Mary	wife 1 1 1 1	WHITE BLACK ASIAN AM INDIAN OTHER 3
C	Peter	son 1 1 1 1	WHITE BLACK ASIAN AM INDIAN OTHER 3
D	Sue	daughter 1 1 1 1	WHITE BLACK ASIAN AM INDIAN OTHER 3
E	Jackie	daughter 1 1 1 1	WHITE BLACK ASIAN AM INDIAN OTHER 3
F	Jimmy	son 1 1 1 1	WHITE BLACK ASIAN AM INDIAN OTHER 3
G			WHITE BLACK ASIAN AM INDIAN OTHER 3

Household Questionnaire:

RECORD FIRST NAME(S) AND LINE LETTER(S) OF ALL HOUSEHOLD MEMBERS WHO ARE 15 YEARS OF AGE OR OLDER STARTING WITH REFERENCE PERSON ON LINE LETTER A. THEN ASK Qs 10-16 IN SEQUENCE FOR EACH PERSON

LINE LETTER	NAME	Q10	Q11	Q12	Q13	Q14	Q15	Q16
A	John	NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00 ELEMENTARY: 01 02 03 04 05 06 07 08 HIGH SCHOOL: 09 10 11 12 or GED COLLEGE: 13 14 15 16 17+ (1) (2) (3) (4) (5+)	1 0 1 0 1	1 (Q13) NO 2	1 (Q14) NO 2 (Q16)			
B	Mary	NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00 ELEMENTARY: 01 02 03 04 05 06 07 08 HIGH SCHOOL: 09 10 11 12 or GED COLLEGE: 13 14 15 16 17+ (1) (2) (3) (4) (5+)	1 0 1 1	1 (Q13) NO 2	1 (Q14) NO 2 (Q16)			
C	Peter	NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00 ELEMENTARY: 01 02 03 04 05 06 07 08 HIGH SCHOOL: 09 10 11 12 or GED COLLEGE: 13 14 15 16 17+ (1) (2) (3) (4) (5+)	1 0 1 1	1 (Q13) NO 2	1 (Q14) NO 2 (Q16)			
D	Sue	NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00 ELEMENTARY: 01 02 03 04 05 06 07 08 HIGH SCHOOL: 09 10 11 12 or GED COLLEGE: 13 14 15 16 17+ (1) (2) (3) (4) (5+)	1 0 1 1	1 (Q13) NO 2	1 (Q14) NO 2 (Q16)			

10. HAND CARD S2	11. What is (NAME)'s date of birth? (MM/DD/YYYY)	12. AGE CHART ASK IF NECESSARY: How old was (he/her) last birthday? IF LESS THAN 1, RECORD AGE IN MONTHS.	13. CODE SEX (ASK IF NOT OBVIOUS: Is (NAME) male or female?)	SAMPLE PERSON NUMBER
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 0 FEMALE..... 2	1 1 1
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 1 FEMALE..... 0	1 1 1
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 0 FEMALE..... 2	0 1 1
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 1 FEMALE..... 2	1 1 1
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 1 FEMALE..... 2	1 1 1
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 0 FEMALE..... 2	0 2 1
MEXICAN..... 1 OTHER SPANISH/ PUERTO RICAN..... 2 HISPANIC CUBAN..... 3 NONE OF ABOVE. 4	1 0 1 / 1 1 5 1	YRS..... 0 MOS..... 2	MALE..... 1 FEMALE..... 2	1 1 1

Setting Up the Person Grids - As you progress through the interview, you will be instructed to transfer household member information from the Screener to a series of grids. The transferred information will include the household member name and the line letter. The line letter appears to the FAR LEFT on the Enumeration Table in the Screener. **DO NOT CONFUSE THE LINE LETTER WITH THE SAMPLE PERSON NUMBER.**

It may be difficult for you to transfer all of this information during the interview. If you want, you may record the first name during the interview and then, as part of your edit, go through and record the line letters. However, it is very important that you do not ship the completed questionnaire to Westat until all names and line letter references have been filled in.

On the adjacent page is an example of a completed Screener enumeration table and grid. The box before Question 10 on page 4 of the Household Questionnaire, asks you to first transfer the name of the reference person, recorded on line letter A, and then transfer the names and line letters of all other household members aged 15 and older. In the example, the interviewer wrote John's name on the line in the first column preprinted with line letter A. He then wrote Mary and line letter B in the second column; Peter and line letter C in the third column; and Sue and line letter D in the fourth column. Please note that Jackie and Jimmy were not included because they were both under 14 years of age at time of the administration of the Screener.

HOUSEHOLD QUESTIONNAIRE

1. Let's begin by talking about the general food shopping practice of this household. On the average, how often does someone do a major food shopping for this household? Would you say. . .

- More than once a week,..... 1
- Once a week,.....2
- Once every two weeks, 3
- Once a month or less, or 4
- Never? 5 (Q3)

2. In what kind of store is this major food shopping usually done? Is it. . .

- A supermarket,..... 1
- A small store, or 2
- Someplace else? (SPECIFY)..... 3

_____ | _ | _ |

3. During the last three months, how much money has this household spent per week or per month at grocery stores, including the stores' salad bars, soup bars, delis, etc.? include purchases made with food stamps.

\$ | _ | _ | _ | , | _ | _ | _ | .00 PER WEEK 1
PER MONTH2

4. You said this household spent (AMOUNT IN Q3) per (week/month), About how much of this amount, if any, was for nonfood items, such as cleaning or paper products, food bought for feeding a pet, or cigarettes? (IF NONE, ENTER "0".)

\$ | _ | _ | _ | , | _ | _ | _ | .00 PER WEEK 1
PER MONTH2

5. During the last three months, how much has this household spent per week or per month on food at specialty stores - such as bakeries, liquor stores, delicatessens, meat markets, vegetable stands, health food stores, and other similar places - when the food was brought into your home? (IF NONE, ENTER "0".)

\$ | _ | _ | _ | , | _ | _ | _ | .00 PER WEEK 1
PER MONTH2

6. During the last three months, how much has this household spent per week or per month at fast food or carryout places when the food was brought into your home?(IF NONE, ENTER "0".)

\$ | _ | _ | _ | , | _ | _ | _ | .00 PER WEEK 1
PER MONTH2

Questions 1 through 7 collect information on where the household shops as well as what the household spends for food at grocery stores, specialty stores, and restaurants. It is designed to collect the total food expenditures for the household. Begin the section by recording the starting time in the upper right-hand corner.

Q.1 Do not define the phrase "major food shopping trip." If the respondent asks for a definition, explain that he/she should use his/her own definition.

Q.2 Do not define the various types of stores. If the respondent asks for a definition, explain that he/she should use his/her own definition.

Q.3-6 Enter the amount in whole dollars and circle the time period. Use the standard rounding convention. If the cents is less than 49, round down; if 50 cents or more, round up.

Complete the dollar amount boxes properly. Fill in any necessary zeros at the beginning of the amount. For example, if the respondent reports "150 dollars," you would record \$|0|0|0|,|1|5|0|.00.

Q.3 Stress per week or per month. Do not record the amount for the entire 3- month period. If the respondent says the amount varies, probe for the usual pattern during the last 3 months. The phrase "grocery store" is used in a generic sense; that is, it should include supermarkets, food warehouses, etc.

Q.4 As you read the question, insert the amount you recorded in Q.3 and stress non-food items.

Q.5 Stress the time period of per week or per month. Specialty stores are stores other than supermarkets or general food stores. We are only concerned with **food** purchases in this question. For example, if the respondent reports buying vitamins at a health food store, it should not be included here. Stress that the question asks for the amount when the food was brought into the home.

Q.6 Ask for the typical amount spent during a week or month at fast food or carryout places but brought into the home. Do not include food eaten at the fast food establishment.

7. During the last three months, what has been this household's usual amount of money spent per week or per month for food bought and eaten away from home? include food and beverages that never entered your home, that is, eaten at restaurants, fast food places, cafeterias at work or at school or purchased from vending machines, for all household members. (IF NONE, ENTER "0".)

\$|__|__|__|,|__|__|__|.00 PER WEEK 1
PER MONTH 2

8. Now I have a few questions about the persons who live in this household.
[IF ONE ADULT FEMALE, CONFIRM AND RECORD.
IF MORE THAN ONE ADULT FEMALE, ASK]
Who is the female head of household?

(IF NECESSARY, SAY For the purposes of this survey, the female head of household is the woman who other household members think of as being in charge of household matters, that is, the woman of the house.)

NAME: _____ LINE LETTER: |_| (RECORD FIRST NAME
AND LINE LETTER FROM
NO FEMALE HEAD2 SCREENER)

9. [IF ONE ADULT MALE, CONFIRM AND RECORD.
IF MORE THAN ONE ADULT MALE, ASK]
Who is the male head of household?

NAME: _____ LINE LETTER: |_| (RECORD FIRST NAME
AND LINE LETTER FROM
NO MALE HEAD2 SCREENER)

Q.7 This question asks about foods purchased and eaten away from home, a distinction from Q.6. If the respondent answers in a unit other than "per week" or "per month," for example, "every two weeks," record the response verbatim.

13.2 Heads of Household

The next two questions collect information on the names of the female and male head of household, if any.

Q.8 Let the respondent decide whether there is a female head of household. If there is difficulty deciding, the female head of household is typically the woman other household members think of as being in charge of household matters, that is, the "woman of the house." Record the name and line letter of the female head of household in the space provided or circle code 2 if the respondent can not designate a female head of household.

Q.9 Let the respondent decide whether there is a male head of household and, if so, who he is. If there is difficulty deciding, the male head of household is generally the man who is responsible for the finances of the household. If the household contains all unrelated men, have the respondent choose one as the male head; the others are considered "partners" or "roommates." Record the name and line letter of the male head of household in the space provided or circle code 2 if the respondent feels there is no male head of household.

RECORD FIRST NAME(S) AND LINE LETTER(S) OF ALL HOUSEHOLD MEMBERS WHO ARE 15 YEARS OF AGE OR OLDER STARTING WITH REFERENCE PERSON ON LINE LETTER A. THEN ASK Qs 10-16 IN SEQUENCE FOR EACH PERSON.

CODER USE ONLY:
|_|_|

LINE LETTER: | A |

LINE LETTER: |__|

<p>10. HAND CARD H1 Looking at this card, what is the highest grade or year of regular school (you have/<u>NAME</u> has) ever completed? (CIRCLE CODE FOR HIGHEST GRADE OR YEAR.)</p>	<p>NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00</p> <p>ELEMENTARY: 01 02 03 04 05 06 07 08</p> <p>HIGH SCHOOL: 09 10 11 12 or GED</p> <p>COLLEGE: 13 14 15 16 17+ (1) (2) (3) (4) (5+)</p>	<p>NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00</p> <p>ELEMENTARY: 01 02 03 04 05 06 07 08</p> <p>HIGH SCHOOL: 09 10 11 12 or GED</p> <p>COLLEGE: 13 14 15 16 17+ (1) (2) (3) (4) (5+)</p>
<p>11. Last week, did (you/ <u>NAME</u>) work at all at a paid job or in (your/his/her) own business or farm?</p>	<p>YES 1 (Q13) NO 2</p>	<p>YES 1 (Q13) NO 2</p>
<p>12. Do you have a paid job from which you were temporarily absent?</p>	<p>YES 1 (Q14) NO 2 (Q16)</p>	<p>YES 1 (Q14) NO 2 (Q16)</p>
<p>13. How many hours did (you/he/she) work at all jobs in the last week? Include all overtime hours that (you/he/she) worked and hours on any part-time jobs as well as (your/his/her) principal job.</p>	<p>|_|_|_| # OF HOURS</p>	<p>|_|_|_| # OF HOURS</p>
<p>14. How many hours a week do/does (you/he/she) usually work?</p>	<p>|_|_|_| # OF HOURS</p>	<p>|_|_|_| # OF HOURS</p>
<p>15. HAND CARD H2 Which of the categories on this card comes closest to describing the paid work [you do/ (he/she) does].</p>	<p>01 02 03 04 05 06 07 08 (NP or Q17)</p>	<p>01 02 03 04 05 06 07 08 (NP or Q17)</p>
<p>16. HAND CARD H3 Which of the reasons on this card best describes why (you were/<u>NAME</u> was) not working at a paid job last week? (CIRCLE ONLY ONE)</p>	<p>LOOKING FOR WORK .....01 GOING TO SCHOOL .....02 KEEPING HOUSE .....03 RETIRED .....04 UNABLE TO WORK .....05 OTHER (SPECIFY) .....06</p> <p>_____</p> <p>_____ |_|_|</p>	<p>LOOKING FOR WORK .....01 GOING TO SCHOOL .....02 KEEPING HOUSE .....03 RETIRED .....04 UNABLE TO WORK .....05 OTHER (SPECIFY) .....06</p> <p>_____</p> <p>_____ |_|_|</p>

13.3 **Activities of Household Members 15 Years of Age or Older**

The next series collects demographic information about household members.

Boxed Instructions Record the name of the reference person (line letter A) in column 1. Then record the name(s) and line letter(s) of all other household members who are 15 years of age or older. Ask Q.10-16 in sequence (going down the page) for each individual before asking Q.10-16 for the next household member. Start with the reference person.

Q.10 Hand Card H1 to the respondent. Probe for the highest grade completed, not the grade the person may have been in when he/she left school. If the respondent mentions going part time, and therefore, taking longer to earn the degree, probe for how many years it usually takes to earn the degree. If the person has a GED, circle 12. Formal schooling does not include trade or vocational schools, company training or tutoring unless credit is given which would be accepted at a regular school or college. If the person attended school outside of the USA, probe for the equivalent grade.

Please note that each of the codes for college contain an additional reference in parentheses for the number of years in college. This is for your use in translating the respondent's answer (e.g., "I earned a 4-year college degree" would be code 16).

Q.11 By last week, we mean the last (closed out) calendar week, Sunday to Saturday. Include any work regardless of the number of hours or whether this is the person's usual job. "Work" includes any full- or part-time activity for which money, goods or services were received. It also includes active duty in the military.

Q.12 This question is trying to determine if the respondent normally works (see definition in Q.11), but last week was temporarily not working because of vacation, sick time, family leave, etc.

Q.13-14 Accept only whole numbers, not ranges. Since a three-digit field is provided, zero fill the amount given if it is less than 100 (e.g., 040, 034, etc.) Here "usually" means the average number of hours in a typical work week.

RECORD FIRST NAME(S) AND LINE LETTER(S) OF ALL HOUSEHOLD MEMBERS WHO ARE 15 YEARS OF AGE OR OLDER STARTING WITH REFERENCE PERSON ON LINE LETTER A. THEN ASK Qs 10-16 IN SEQUENCE FOR EACH PERSON.

CODER USE ONLY:

|_|_|_|

LINE LETTER: | A |

LINE LETTER: |_|_|

10. Looking at this card, what is the highest grade or year of regular school (you have/NAME has) ever completed? (CIRCLE CODE FOR HIGHEST GRADE OR YEAR.)

HAND CARD H1

NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00
 ELEMENTARY:
 01 02 03 04 05 06 07 08
 HIGH SCHOOL:
 09 10 11 12 or GED
 COLLEGE: 13 14 15 16 17+
 (1) (2) (3) (4) (5+)

NEVER ATTENDED SCHOOL OR KINDERGARTEN ONLY: 00
 ELEMENTARY:
 01 02 03 04 05 06 07 08
 HIGH SCHOOL:
 09 10 11 12 or GED
 COLLEGE: 13 14 15 16 17+
 (1) (2) (3) (4) (5+)

11. Last week, did (you/ NAME) work at all at a paid job or in (your/his/her) own business or farm?

YES 1 (Q13)
 NO 2

YES 1 (Q13)
 NO 2

12. Do you have a paid job from which you were temporarily absent?

YES 1 (Q14)
 NO 2 (Q16)

YES 1 (Q14)
 NO 2 (Q16)

13. How many hours did (you/he/she) work at all jobs in the last week? Include all overtime hours that (you/he/she) worked and hours on any part-time jobs as well as (your/his/her) principal job.

|_|_|_|
 # OF HOURS

|_|_|_|
 # OF HOURS

14. How many hours a week do/does (you/he/she) usually work?

|_|_|_|
 # OF HOURS

|_|_|_|
 # OF HOURS

15. Which of the categories on this card comes closest to describing the paid work [you do/ (he/she) does].

HAND CARD H2

01 02 03 04 05 06 07 08
 (NP or Q17)

01 02 03 04 05 06 07 08
 (NP or Q17)

16. Which of the reasons on this card best describes why (you were/NAME was) not working at a paid job last week? (CIRCLE ONLY ONE)

HAND CARD H3

LOOKING FOR WORK01
 GOING TO SCHOOL02
 KEEPING HOUSE03
 RETIRED04
 UNABLE TO WORK05
 OTHER (SPECIFY)06

LOOKING FOR WORK01
 GOING TO SCHOOL02
 KEEPING HOUSE03
 RETIRED04
 UNABLE TO WORK05
 OTHER (SPECIFY)06

|_|_|

|_|_|

Q.15 Hand Card H2 to the respondent. If the person had more than one paid job at a time, record the job he/she considered the primary job. If the respondent is in doubt about what code applies, you may assist him/her in selecting the appropriate code. If still in doubt, record the occupation in a marginal note.

Q.16 Hand Card H3 to the respondent. Please note that this question is only asked of a respondent who reported in Q.12 that he/she was not just temporarily absent from a paid job last week. Although a person may have more than one reason for not working at a paid job, probe for the one that is most accurate. Record the activity the respondent was doing the most if it does not fit into one of the coded responses. Accept only one answer. If the person is not working because of a physical disability, assign code 05.

Complete Qs 10-16 for reference person A and then for all other household members aged 15 and older. Complete the series (i.e., Qs 10-16) for each person before asking 10-16 for the next person.

17. In regard to this dwelling, is the property. . .

- Owned or being bought by
 - someone living in this household, 1
- Rented with payment required, or 2
- Occupied without payment of rent
 - required? 3

18. Looking at this card, what is the main source of the water used for cooking in your home? Is it. . .



- the community water supply, 1
- your own well or rain cistern, 2
- your own spring or a public spring, 3
- bottled water you purchase, or 4
- something else? (SPECIFY) 5

_____ I _ I _ I

19. What is the main source of the water used in your home for preparing beverages such as coffee, tea, juices, and baby formula? (Is it. . .



- the community water supply, 1
- your own well or rain cistern, 2
- your own spring or a public spring, 3
- bottled water you purchase, or 4
- something else? (SPECIFY) 5

_____ I _ I _ I

20. What is the main source of plain drinking water in your home? (Is it. . .



- the community water supply, 1
- your own well or rain cistern, 2
- your own spring or a public spring, 3
- bottled water you purchase, or 4
- something else? (SPECIFY) 5

_____ I _ I _ I

13.4 DU Ownership and Water Supply

Q.17 Use code 1 if the dwelling (includes trailers) was bought for cash, the mortgage has been paid off, or the mortgage is still being paid off by someone living in the household. If the respondent is buying or owns the dwelling but not the land (e.g., mobile home in a trailer park), the code 1 should still be used.

Q.18-20 These questions relate to the main source of water used in the home for cooking, preparing beverages, and drinking. Hand Card H4 to the respondent. If the respondent has trouble reading, read the choices. Code only one answer for each question. If the respondent answers with more than one source, probe for the main source. You may provide the respondent with the definition and alternate wording provided below.

- Rain cistern: a tank, usually underground, in which rain water is collected for use.
- Community water supply is also called "City water," "Public water," "Municipal water" and in rural areas it may be called water from a "rural water district."
- Water from a well in a trailer park is considered precode 02, "your own well."

Ignore the boxes in the right-hand margin. These are for coder use only.

21. Returning to the topic of food, who usually plans the meals? (RECORD FIRST NAME AND LINE LETTER FROM SCREENER. IF NOT A HOUSEHOLD MEMBER, ENTER "Y" AS THE LINE LETTER.)

IF ALL HOUSEHOLD MEMBERS, ENTER "Z" HERE: |__| AND GO TO NEXT QUESTION.

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

22. Who usually does the major food shopping? (RECORD FIRST NAME AND LINE LETTER FROM SCREENER. IF NOT A HOUSEHOLD MEMBER, ENTER "Y" AS THE LINE LETTER.)

IF ALL HOUSEHOLD MEMBERS, ENTER "Z" HERE: |__| AND GO TO NEXT QUESTION.

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

23. And who usually prepares the food? (RECORD FIRST NAME AND LINE LETTER FROM SCREENER. IF NOT A HOUSEHOLD MEMBER, ENTER "Y" AS THE LINE LETTER.)

IF ALL HOUSEHOLD MEMBERS, ENTER "Z" HERE: |__| AND GO TO NEXT QUESTION.

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

13.5 Miscellaneous Food Source Questions

Q.21-23 Ask about the person or persons who usually plan, shop for, and prepare the food. Record up to three names for each question and enter that person's line letter in the answer column. If the person is NOT a household member, record the letter "Y" as the line letter. If all household members are responsible for either planning, shopping, or preparing their food, record the letter "Z."

For example, four college students all share an apartment. Each buys their own groceries, and plan and prepare their own meals. In this example, instead of listing all four household members separately along with their line letters, you would simply enter the letter 'Z' in the space provided for Q.21-23.

However, if there are more than three persons in the household but not all plan, shop for, or prepare the food, record names and line letters of members beyond three in the left-hand margin.

24. Is anyone in this household on any kind of diet either to lose weight or for some other health-related reason?

YES 1
NO 2 (BOX 1)

25. Which of these diets on this card (are/is) (you/he/she/they) on? (CIRCLE ALL THAT APPLY)



- WEIGHT LOSS OR LOW CALORIE DIET 01
- LOW FAT OR CHOLESTEROL DIET02
- LOW SALT OR SODIUM DIET 03
- SUGAR FREE OR LOW SUGAR DIET 04
- LOW FIBER DIET 05
- HIGH FIBER DIET 06
- DIABETIC DIET 07
- OTHER DIET (PLEASE DESCRIBE)08

|_|_|

BOX 1

CHECK SCREENER. ARE THERE ANY **FEMALES** IN THE HOUSEHOLD **10 THROUGH 55** YEARS OF AGE?

YES.....1 (Q26)
NO 2 (BOX 2)

26. Is anyone in this household now pregnant?

YES 1
NO 2 (BOX 2)

27. Please tell me who. (RECORD FIRST NAME AND LINE LETTER FROM SCREENER.)

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

28. How many months pregnant (are you/is NAME)?

|_|_|
MONTHS PREGNANT
LESS THAN ONE MONTH 00

|_|_|
MONTHS PREGNANT
LESS THAN ONE MONTH 00

BOX 2

CHECK SCREENER. ARE THERE ANY **CHILDREN** IN THE HOUSEHOLD **3 YEARS OLD OR LESS?**

YES 1 (Q29)
NO 2 (Q32)

Q.24-25 Ask about person(s) on diet(s). "Diet" refers to a conscious change in the foods and/or beverages the respondent is consuming. Either the amount or the kinds of items may be different to constitute a "diet." Hand Card H5 to the respondent if s/he answers "YES" to Q.24. Code as many of the diets that apply. If the person(s) is on a diet that does not fit into a precoded category, record it in the "OTHER DIET" category and provide a description. If there is more than one "OTHER DIET," number each of them and provide a description for each. Use the margin if you run out of space on the lines provided.

Ignore the boxes in the right-hand margin. These are for coder use only.

BOX 1 Review the Screener Enumeration Table. If there are any females 12 to 55 years of age, the questions about pregnancy (i.e., Q.26-28) should be asked. If there are no females 12 to 55 years of age, skip to Box 2.

Q.26 This questions asks about females now pregnant, not those recently pregnant or those considering pregnancy.

Q.27 Room is provided to enter information about two pregnant females. Remember to record the pregnant woman's line letter from the Screener. If more than two females are pregnant, enter that information in the left-hand margin near this question.

Q.28 This question asks for the month of pregnancy and should be recorded from 01 to 09. Do not enter the name of a month such as March, April, or May! If the respondent is unsure of the month, probe for "due date MONTH" and record in the margin.

BOX 2 Review the Enumeration Table in the Screener. If there are any children 3 years old or younger, the three questions concerning breast feeding (i.e., Q.29-31) will be asked. If there are no children 3 years old or younger, skip to Q.32.

29. Are any children currently being breast fed?

YES 1
NO 2 (Q32)

30. Please tell me who. (RECORD FIRST NAME AND LINE LETTER FROM SCREENER.)

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

31. Please tell me the name of the woman who is breast feeding (CHILD). (RECORD FIRST NAME AND LINE LETTER FROM SCREENER FOR EACH CHILD.)?

NAME: _____

LINE LETTER: |__|

NAME: _____

LINE LETTER: |__|

32. Is anyone in this household receiving benefits under the WIC Program at the present time? (That is the Women, Infants and Children Program.)

YES 1
NO 2
DON'T KNOW 8 } (BOX 3)

33. Please tell me who in this household is receiving WIC benefits. (RECORD FIRST NAME AND LINE LETTER FROM SCREENER.)

NAME: _____

LINE LETTER: |__|

34. How long (have you/has NAME) been receiving WIC benefits?

|__| |__| MONTHS 1
YEARS..... 2

- Q.29** Self-explanatory.
- Q.30** Record the name and line letter from the Screener Enumeration Table for each child being breast fed. If more than two children are being breast fed, record in the left-hand margin.
- Q.31** Record the name and line letter from the Screener Enumeration Table for each woman breast feeding a child, making sure that the woman's name corresponds to the name of the child's that she is breast feeding as recorded in Q.30. For example, the woman who is breast feeding the first child listed in Q.30 should be the first woman listed in Q.31, and so forth. If you recorded more than two children in Q.30, follow the same convention for Q.31
- Q.32** WIC is a program that provides milk, formula and some food products to expectant mothers, qualifying mothers, infants and young children. If a person has participated in WIC, she will know it. However, the respondent may not be the participant. Be prepared to explain the WIC program to the respondent. It should be noted that after birth, a mother may receive benefits even if she is not breast feeding. A "Don't Know" is an acceptable answer here and should not be probed.
- Q.33** Record the name and line letter from the Enumeration Table in the Screener for all household members receiving WIC Benefits.
- Q.34** Please note that the amount of time one has received WIC benefits recorded in this question should correspond to the individual named directly across (in Q.33) from this amount.

Enter a number and circle the time category. For example, for years enter 02 and circle precode 2, "years." Do not enter the name of a month such as May or the year such as 1991. We want the total number of months or years as an answer.

BOX 3

CHECK SCREENER. ARE THERE ANY CHILDREN IN THE HOUSEHOLD AGE 5 THROUGH 18 YEARS? (REMEMBER TO INCLUDE 18 YEAR OLDS)

YES 1 [RECORD FIRST NAME AND LINE LETTER IN GRID BELOW.
THEN ASK Qs 35-41 IN SEQUENCE FOR EACH CHILD.]
NO 2 (BOX 4)

CODER USE ONLY:
|__|__|

NAME: _____ LINE LETTER: |__|	NAME: _____ LINE LETTER: |__|	NAME: _____ LINE LETTER: |__|
---------------------------------	---------------------------------	---------------------------------

Now I would like to ask about school breakfast and lunch programs.

35. Does (NAME) attend a kindergarten, grade school, junior or high school?	YES 1 NO 2 (NP)	YES 1 NO 2 (NP)	YES 1 NO 2 (NP)
36. Does (NAME) attend a school which serves school lunches? These are <u>complete</u> lunches costing a <u>fixed price every day</u> .	YES 1 NO 2 (Q39)	YES 1 NO 2 (Q39)	YES 1 NO 2 (Q39)
37. During the school year, approximately how many times a week does (he/she) usually get a complete school lunch?	TIMES: |__| /WEEK 1 /MONTH 2 NONE 0 (Q39)	TIMES: |__| /WEEK 1 /MONTH 2 NONE 0 (Q39)	TIMES: |__| /WEEK 1 /MONTH 2 NONE 0 (Q39)
38. Does (he/she) get these lunches free, at a reduced price or does (he/she) pay full price?	FREE 1 REDUCED PRICE 2 FULL PRICE 3 DON'T KNOW 8	FREE 1 REDUCED PRICE 2 FULL PRICE 3 DON'T KNOW 8	FREE 1 REDUCED PRICE 2 FULL PRICE 3 DON'T KNOW 8
39. Does (NAME) attend a school which serves a <u>complete</u> breakfast costing a <u>fixed price every day</u> ?	YES 1 NO 2 (NP)	YES 1 NO 2 (NP)	YES 1 NO 2 (NP)
40. During the school year, approximately how many times a week does (NAME) usually get a complete breakfast at school?	TIMES: |__| /WEEK 1 /MONTH 2 NONE 0 (NP)	TIMES: |__| /WEEK 1 /MONTH: 2 NONE 0 (NP)	TIMES: |__| /WEEK 1 /MONTH: 2 NONE 0 (NP)
41. Does (he/she) get these breakfasts free, at a reduced price or does (he/she) pay full price?	FREE 1 REDUCED PRICE 2 FULL PRICE 3 DON'T KNOW 8	FREE 1 REDUCED PRICE 2 FULL PRICE 3 DON'T KNOW 8	FREE 1 REDUCED PRICE 2 FULL PRICE 3 DON'T KNOW 8

13.6 School Breakfast and Lunch Programs

This series will collect information on school-aged children who may consume some of their meals at school.

Box 3 Refer to the Screener Enumeration Table to determine if there are any children in the household aged 5 through 18 (this includes both 5 year olds and 18 year olds, even though 18 year olds may not be considered children). If there are school-aged children in the household, prepare the columns with the names and line letters for all children 5 to 18 years. Then, ask Q. 35-41 in sequence (going down) for each child, before moving onto the next child. If there are no children in the household age 5 through 18, skip to Box 4 on page 12.

Q.35 The answer is "YES" if the child regularly attends school during the normal school year. During school vacations, ask about the school term just completed.

Q.36 If the respondent asks, the definition of a school lunch is an entire meal with beverage that is the same price every day. You should use the strict definition of school lunch that is in the question. Do not include other lunches eaten at school such as those brought from home by children who sometimes buy a few additional items in the cafeteria. Also, do not include lunches obtained and eaten at a boarding school.

Q.37 If the respondent says it varies, probe for usual pattern. Although the question asks for the number of times per week, do not probe if the respondent answers with the number of times per month. Record the response next to TIME/MONTHS and move to Q.38.

Q.38 A "Don't Know" is an acceptable answer to this question since the respondent might not have information on the school lunch program for a child in the household.

Q.39-41 These questions ask about the school breakfast program. The series is identical to the lunch questions (i.e., Q.36-38).

BOX 4

CHECK SCREENER. ARE THERE ANY CHILDREN IN THE HOUSEHOLD AGE 1 THROUGH 5 YEARS?

YES..... 1 [RECORD FIRST NAME AND LINE LETTER BELOW.
THEN ASK Q42.]
NO..... 2 (Q43)

CODER USE ONLY:
|_|_|

NAME:	NAME:	NAME:	NAME:
LINE LETTER:	LINE LETTER:	LINE LETTER:	LINE LETTER:
_	_	_	_

42. Does (<u>NAME</u>) attend a child care program which gives (him/her) any meals or snacks?	YES.....1	YES 1	YES 1	YES 1
	NO.....2	NO 2	NO 2	NO 2

43. Which of these statements best describes the food eaten in your household in the last 3 months-enough of the kinds of food we want to eat; enough but not always the kinds of food we want to eat; sometimes not enough to eat; or often not enough to eat?

- ENOUGH OF THE KINDS OF FOOD WE WANT TO EAT 1 (BOX 5)
- ENOUGH BUT NOT ALWAYS THE KINDS OF FOOD WE WANT TO EAT 2 (BOX 5)
- SOMETIMES NOT ENOUGH TO EAT 3
- OFTEN NOT ENOUGH TO EAT..... 4

44. In which of the last three months did your household not have enough to eat? (CIRCLE ALL THAT APPLY.)

- LAST MONTH 1
- THE MONTH BEFORE LAST 2
- TWO MONTHS BEFORE LAST 3

45. Which of the following reasons explain why your household did not have enough food:

a. Did not have enough money, food stamps, or WIC vouchers to buy food or beverages.

- YES 1
- NO 2

b. Did not have working appliances for storing or preparing foods (such as stove or refrigerator).

- YES 1
- NO 2

c. Did not have transportation or had transportation problems.

- YES 1
- NO 2

d. Some other reason?

- YES (EXPLAIN) 1
- _____
- _____
- NO 2

|_|_|

BOX 4 Refer to the Screener Enumeration Table to determine if there are any children in the household aged 1 through 5 years. Be sure to include both 1 year olds and 5 year olds. Note that if there is a 5 year old in the household, he/she would be included in both this chart and the chart on pages 10 and 11. Prepare the columns with the names and line letters for all children between 1 and 5 years. If there are no preschool-aged children, skip to Q.43.

Q.42 This question is intended to capture meals or snacks provided by the child care program, not meals or snacks served to the child that were brought from the home.

13.7 Food Supply

The next set of questions gathers information on the quantity of food the household consumed in the last 3 months. "Months" refers to calender months. For example, if this is April, the last 3 months are March, February, and January.

Q.43 Do not define any concepts in this questions.

Q.44 Note that multiple answers are acceptable.

Q.45 Obtain a "YES" or "NO" response for each question subset before moving onto the next question subset. The respondent's verbatim explanation should be recorded any time the answer is "YES" to "Some Other Reason" (category D).

46. Last month, how many days did your household not have food, or money or food stamps to buy food?

|_|_|_|
NUMBER OF DAYS

<p>BOX 5</p> <p>CHECK COVER. WAS SCREENER Q14 ANSWERED "MORE" OR "LESS"?</p> <p>YES 1 (Q48)</p> <p>NO 2</p>

47. HAND
CARD
S3 SELECT CARD FOR NUMBER OF HOUSEHOLD MEMBERS. CARD SELECTED = S3-|_|_|_|. Here is a card showing different sources from which households may receive income. Please think for a moment about the various sources from which the members of this household received income last year – during 1993.

Thinking about all of the sources of income, please tell me whether the total income received by the members of this household during 1993 was more or less than the amount at the bottom of this card.

MORE 1
LESS 2

48. Did any member of this household receive any income from their own business or farm in 1993?

YES 1
NO 2 (Q50)

49. What was the total net income after business expenses received in 1993 by all members of this household who have their own business or farm?

TOTAL NET INCOME \$|_|_|_|_|,|_|_|_|_|.00

50. Did any member of this household receive any income from interest, dividends, or annuities in 1993?

YES 1
NO 2 (Q52)

51. What was the total amount of income from interest, dividends, and annuities received in 1993 by all members of this household?

\$|_|_|_|_|,|_|_|_|_|.00

Q.46 Enter a whole number. If the respondent answers with a range of numbers, probe for which number best represents his/her answer. Record the answer as a 2-digit field (e.g., 02, 09, 12, etc.).

13.8 Income

These questions capture income available to the household during the past year and the past month. By past or last year/month, we mean the last (closed out) calendar year/month. If the household contains a live-in employee, do not include that employee's income as part of the household income. If the household contains roomers and/or boarders and the respondent can provide an estimate of his/her income, include the roomer/boarder income. (If the respondent cannot provide an estimate of the roomer/boarder income to include in the household income, make a marginal note to this effect.)

When filling in dollar amounts less than \$100,000, fill in the appropriate number of zeros before the actual amount reported. For example, the respondent says the net income of the household was \$40,500.00. You would then record: \$|0|4|0|,|5|0|0|.00

BOX 5 Check the cover of the Household Questionnaire. If Screener Q.14 was answered, that is, answered "more" or "less" than the amount at the bottom of the appropriate card, skip to Q.48. If Q.14 was NOT answered (i.e., is blank, coded refused, or don't know) in the screener, ask Q.47.

Q.47 Hand Card S3 (for the appropriate number of household members) to the respondent. This card has a listing of different sources from which households may receive income, with a dollar amount printed at the bottom of the card. After selecting the card, record the card number on the line in the questionnaire, and then ask the question. If there are more than 12 household members, use the card for a 12-person household.

Q.48-49 These two questions refer to net income from a business or farm. Net income means income after business expenses are subtracted. Do not include wages or salaries in this question. Record whole numbers only.

Q.50-51 These questions are self-explanatory. If a respondent has income from any of these sources, they will know what these terms mean.

52. During 1993, approximately how much income from all sources did you and other household members have before income taxes? (Please give me your best estimate.)

TOTAL INCOME \$|_|_|_|_|,|_|_|_|_|.00 (Q54)
NOT A HOUSEHOLD UNIT IN 1993999996 (Q54)
REFUSED999997 (Q53)
DON'T KNOW999998 (Q53)

53. Please tell me which letter on this card best represents your combined household income before taxes for 1993.



LETTER: |_|

54. Now, consider cash, savings or checking accounts, stocks, bonds, mutual funds and certifies of deposits. Do the members of this household have more than \$5,000 of such savings or cash assets at this time?

YES 1 (Q56)
NO 2

55. What letter on this card best represents the total savings or cash assets of all household members at this time?



LETTER: |_|

Q.52 Asks for the gross income (i.e., income before tax deductions) for the household for last year. An estimate is acceptable. If respondent offers to check their records, allow them to do so, but do not require it.

You would code "NOT A HOUSEHOLD UNIT IN 1993" if the household members did not reside together last year. For our purposes, a household did not exist if the male and female head of the household did not live together from January through December of the entire calendar year. This information must be volunteered by the respondent; do not ask for it.

Q.53 Hand Card H6 to the respondent. This question is asked of respondents who would not or could not answer Q.52.

Q.54-55 Ask about savings and cash assets. If the cash assets are less than \$5000, ask Q.55. The respondent should respond with a category letter, listed on Hand Card H7, which you will record on the line in Q.55

	<p>56. Here is a card that lists a number of income sources I'm going to ask about. Please tell me whether any member of this household received income <u>last month</u> from (SOURCE).</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p>HAND CARD H8</p> </div>	<p>57. What was the total income received <u>last month</u> by all members of your household - <u>before taxes and other deductions</u> - from (SOURCE)?</p>
<p>a. Wages or salary from a job including tips or commissions?</p>	<p>YES 1 → NO 2</p>	<p>\$|_|_|_|_|,|_|_|_|_|.00</p>
<p>b. Any Social Security or Supplemental Security income?</p>	<p>YES 1 → NO 2</p>	<p>\$|_|_|_|_|,|_|_|_|_|.00</p>
<p>c. Income from pension or retirement?</p>	<p>YES 1 → NO 2</p>	<p>\$|_|_|_|_|,|_|_|_|_|.00</p>
<p>d. Unemployment or Workmen's Compensation?</p>	<p>YES 1 → NO 2</p>	<p>\$|_|_|_|_|,|_|_|_|_|.00</p>
<p>e. AFDC, general assistance or other public assistance program? (Do not include food stamps or WIC benefits)</p>	<p>YES 1 → NO 2</p>	<p>\$|_|_|_|_|,|_|_|_|_|.00</p>
<p>f. Other sources, such as alimony, child support, and other regular monthly contributions from persons not living in this household?</p>	<p>YES 1 → NO 2</p>	<p>\$|_|_|_|_|,|_|_|_|_|.00</p>

BOX 6

CHECK Q56 AND Q57. IS THERE ANY RESPONSE OF DON'T KNOW OR REFUSED?

YES 1 (Q58)
NO 2 (Q59)

58.

HAND CARD H9

 Would you please tell me whether the total income received by the members of this household during (LAST MONTH) was more or less than the amount on this card next to the number (NUMBER OF MEMBERS IN THE HOUSEHOLD).

MORE 1
LESS 2

59. Did any member of your household receive food stamps in any of the last 12 months? [IF RESPONDENT IS UNCERTAIN, SAY That is, from (NAME OF CURRENT MONTH) 1993 through (NAME OF LAST MONTH), 1994.

YES 1
NO 2
DON'T KNOW 8

Q.56-57 These questions concern various sources of income including wages and entitlement programs. Even though the respondent is referring to Hand Card H8, you will read each source of income prior to recording yes or no. Q.57 changes the time frame from the previous questions. You are now asking about the last calendar month. Stress the words "last month" when reading the question. Make sure that the respondent understands that the income should be reported as gross income, **before** taxes or deductions as for health insurance, union dues, 401K, etc. Record only whole numbers.

The respondent should NOT include business and farm income.

BOX 6 Review Q.56 and 57. If you have recorded any answers of don't know or refused, you should ask Q.58. If all of the answers have been provided (even if there are some estimates), you should not ask Q.58, and should skip to Q.59.

Q.58 Hand Card H9 to the respondent. As you ask this question, you must insert the number of household members. Refer to the Screener Enumeration Table for the correct number.

13.9 Food Stamps

The last series of questions in the Household Questionnaire refers to the receipt and use of Food Stamps.

Q.59 The time frame for the first Food Stamps question is the past 12 months. If the respondent has difficulty with the concept, insert the name of the present month before the number 1993 and the name of the previous month before the 1994.

60. Is anyone in your household authorized to receive food stamps at the present time? (An authorized person is one whose name appears on a certification card.)

YES 1
NO 2 (END)

61. Is everyone in your household covered under this food stamp allotment?

YES 1 (Q64)
NO 2

62. Which persons are covered?

NAME: _____

NAME: _____

LINE LETTER: |__|

LINE LETTER: |__|

NAME: _____

NAME: _____

LINE LETTER: |__|

LINE LETTER: |__|

NAME: _____

NAME: _____

LINE LETTER: |__|

LINE LETTER: |__|

63.



Think now just about these people, that is **(READ NAMES IN Q62)** and their income from the sources on this card. Approximately how much income from all sources did they have before taxes in **(NAME OF LAST MONTH)**? (Please give me your best estimate for just these people receiving food stamps.)

\$|_|_|_|_|,|_|_|_|_|.00

64. On about what date did your household last get food stamps?

|_|_|_| 19 |_|_|_|
MONTH DAY YEAR

HAVE NOT RECEIVED THEM YET969696 (END)
DON'T KNOW989898

65. What was the total amount of stamps you received at that time? (Please give your best estimate.)

\$|_|_|_|_|,|_|_|_|_|.00

DON'T KNOW999998

TIME ENDED _____ AM
PM

- Q.60-62** Ask additional questions about Food Stamps receipt. In Q.62, refer to the Screener Enumeration Table for the name(s) and line letter(s). If more than six members of the household receive food stamps, record their names and line letters in the blank space next to the question.
- Q.63** Refer back to Q.62 and insert the name(s) who are receiving Food Stamps. The time frame for this question is last calendar month.
- Q.64** To indicate the last time anyone in the household received food stamps, write in the month, day and year numerically. For example, November 3, 1993, would be entered as |1|1|0|3|19|9|3|. Remember this is the date LAST received, and not the date that the household usually receives Food Stamps.
- Q.65** Enter the total dollar amount of Food Stamps received on the date specified in Q.64.

Record the ending time, circle AM or PM, and remember to transfer the ending time to the front cover.

OMB #:

Expires:

WHAT WE EAT IN AMERICA: 1994-1996

DAY ONE INTAKE QUESTIONNAIRE

PLACE CASE LABEL HERE

SAMPLE PERSON #: 01INTERVIEWER NAME: Russell

__|__|__|	AM	.....	1
TIME STARTED	PM	.....	2

INTERVIEWER ID: RUSDATE OF INTERVIEW: 03-16-94
MO DA YR

__|__|__|	AM	.....	1
TIME ENDED	PM	.....	2

DAY OF INTERVIEW: Wednesday

INTERVIEW CONDUCTED:

IN PERSON	.....	①
BY TELEPHONE	.....	2

FIRST NAME OF
SAMPLE PERSON: JANEDATE OF BIRTH: 03-05-1950
MO DA YEAROR
AGE: 043 YRS ①
MOS 2

SEX: M 1 F ②

FOR HOME OFFICE USE ONLY

DATE RECEIVED: _____

VERIFIER ID: _____

MC: YES NO

BATCH #: _____

14. DAY 1 INDIVIDUAL INTAKE QUESTIONNAIRE

The Day 1 Individual Intake Questionnaire is comprised of 41 questions and is divided into three parts: the 24-hour recall, a set of health-related questions, and an Interviewer Observation Form.

- The first nine questions comprise the 24-hour recall. Responses to these questions will be documented on the intake grid (pages 2-7). These 9 questions are printed on fold-out pages in the questionnaire.

Q1 - Asks the respondent for a list of everything he/she ate/drank the day before. Document all foods eaten in Column 1 on the grid.

Q2-Q6 - Asks the respondent for the time, eating occasion, description, and quantity of food eaten or drunk. Complete Questions 2 through 6 for all foods and the review before going on to Question 7.

Review - Review all reported foods allowing the respondent the opportunity to remember and report additional foods before going onto Question 7.

Q7-Q9 - Ask the respondent where the food was obtained, whether it was eaten at home, and whether it was ever at home.

Questions 1-9 have been reproduced on the front and back of an 8 1/2" x 11" laminated card that can be stored in the pocket of the FIB. There may be situations where it will be more convenient for you to use the card. (For instance, when there is not space in the respondent's home to unfold the questionnaire.)

- The health-related questions, 10-41.
- The Interviewer Observation Form consists of 6 questions and is to be completed by you based on your judgment and observations.

Before opening the questionnaire, be sure you have completed all necessary information on the cover. Fill in the Sample Person (SP) number, your name, your ID, and the date and day of the interview. Ask the SP (or proxy) for SP's first name, date of birth and age, and confirm the sex. Do not try to compare this information with the Screener information.

You will notice that on the cover of the Day 1 Intake, the question "Interview Conducted?" is precoded as "In Person". All Day 1 Intakes must be conducted in person. On the Day 2 Intake, this question is not precoded. In a limited number of special circumstances, your supervisor may give you approval to conduct the Day 2 by telephone.

TIME STARTED 5:00 AM PM

DAY 1

1.

HAND CARD I1

I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD I1 IF NECESSARY.]

[IF INFANT OR CHILD SP:] I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

DAY ONE FOOD INTAKE QUESTIONNAIRE (Cover page)

WHAT WE EAT IN AMERICA: 1994-1996
DAY ONE INTAKE QUESTIONNAIRE

PLACE CASE LABEL HERE

SAMPLE PERSON #: 011

INTERVIEWER NAME: Russell

INTERVIEWER ID: BUSI

DATE OF INTERVIEW: 03-16-94
MO DA YR

DAY OF INTERVIEW: Wednesday

FIRST NAME OF SAMPLE PERSON: JANE

DATE OF BIRTH: 03-05-1950
MO DA YEAR

OR AGE: 043 YRS MOS 2

SEX: M 1 F 2

05:00 AM 2
TIME STARTED PM

05:30 AM 1
TIME ENDED PM 2

INTERVIEW CONDUCTED:
IN PERSON 1
BY TELEPHONE 2

FOR HOME OFFICE USE ONLY
DATE RECEIVED: _____
VERIFIER ID: _____
MC: YES NO
BATCH #: _____

Conducted for the United States Department of Agriculture by Westat Inc., Rockville, MD

... specific questions about the foods and beverages we just listed. When else you ate or drank as we go along, please tell me.

(you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF LIST]

... else tell me what (you/NAME) would call this occasion? [OR CONFIRM IF LIST]

... BREAKFAST INTAKE QUESTIONNAIRE (Page 1)

... ought to work up a sweat?

DAILY 1
5-6 TIMES PER WEEK 2
2-4 TIMES PER WEEK 3
ONCE A WEEK 4
1-3 TIMES PER MONTH 5
RARELY OR NEVER 6

... during your entire life?

YES 1
NO 2 (Q40)

... YES 1
... NO 2 (Q40)

... PER DAY

... ublic beverages, including ale, wine, wine coolers, etc., and mixed drinks containing liquor.

... ice last (NAME OF MONTH), ... you consumed any

YES 1
NO 2 (TIME ENDED)

... nsumed any: YES NO

..... 1 2

... r, rum, gin, or vodka, ing liquor? 1 2

... erages? 1 2

THANK RESPONDENT

COVER USE ONLY. QUEST: _____

TIME ENDED 5:30 AM PM

After you open the questionnaire, but before asking the first question, fill in the time started in the space in the upper right-hand corner of page 1. At the end of the interview, transfer the time started from page 1 and the time ended from page 16 to the front cover of the Intake. Be sure to circle AM or PM.

TIME STARTED 5:00 AM
PM

DAY 1

1.

HAND CARD 11

 I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday. (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD 11 IF NECESSARY.]

[IF INFANT OR CHILD SP.]: I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me.

2. About what time did (you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF RECORDED ON QUICK LIST]
3. Looking at this card, please tell me what (you/NAME) would call this occasion? [OR CONFIRM IF RECORDED ON QUICK LIST]



- 01 BREAKFAST
- 02 BRUNCH
- 03 LUNCH
- 04 DINNER
- 05 SUPPER
- 06 FOOD AND/OR BEVERAGE BREAK
 - SNACK
 - ALCOHOLIC BEVERAGE
 - OTHER BEVERAGE
- 07 FEEDING (INFANT ONLY)
- 08 OTHER (SPECIFY)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
[IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

14.1 Introduction to Respondent and the Quick List

Q1 With this question you introduce the respondent to the concept of the 24-hour recall. This question is asking the respondent to recall all of the foods and beverages eaten and drunk the day before.

The Sample Person (SP) or proxy must understand that you are interested in everything eaten or drunk during the 24 hours of the previous day, from midnight to midnight. Read the question exactly as it is written in the questionnaire. If the respondent does not understand the time frame, re-explain using the 24-hour clock time-line (Hand Card I1).

For example, you might add, "We'll be talking about the period from 12 midnight Tuesday night, all day Wednesday, until 12 midnight last night." The exact time period is from 12:00 midnight to 11:59 pm.

Emphasize that the respondent or proxy is to tell you **everything eaten or drunk** including snacks, coffee, alcoholic beverages, and food eaten or drunk at home or away from home. You do not need to collect information about vitamins and mineral supplementation in a pill or liquid form.

Use the INFANT or CHILD introduction for all children under 12 years old. If the child is an infant (under 3 years) be sure to include the phrase (and bottles or breast milk).

If the respondent or proxy is not able to recall what he/she ate in the 24-hour period or for a particular eating occasion, use a prompt such as, "Perhaps it will help you to think about where you were on Wednesday" or "Perhaps it will help if you think about what you were doing at that time." Be careful, however, not to use probes that suggest specific meals or foods such as, "What did you have for breakfast?" or "Do you usually have a cup of coffee first?"

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD I2)	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Coffee ^{B 7a}	a		1.	
B. Bagel ^B	p			
C. Salad	a		2.	
D. Sandwich	p			
E. Coke	a		3.	
F. Pizza ^D	p			
G. Ice Cream	a		4.	
H. root beer	p			
I. _____	a		5.	
J. _____	p			
K. _____	a		6.	
L. _____	p			
M. _____	a		7.	
N. _____	p			
O. _____	a		8.	
P. _____	p			
Q. _____	a		9.	
R. _____	p			
S. _____	a		10.	
T. _____	p			
U. _____	a		11.	
V. _____	p			
W. _____	a		12.	
X. _____	p			
	a		13.	
	p			
	a		14.	
	p			
	a		15.	
	p			
	a		16.	
	p			

It is crucial that the respondent really understand what is being asked. It is important to explain the procedure carefully and let the respondent know that you will be patient while he or she tries to recall the information. While it may be useful to prompt the respondent in some cases as described above, do not do so before he or she has time to think about the question.

Record all foods and beverages on the Quick List as the respondent reports them during Q1. Do not interrupt or probe.

The respondent may provide some information about eating times and occasions as he/she remembers what was eaten. Use the Quick List as your note pad to jot down the list of foods, as well as time and eating occasions if reported. Do not ask for the times or eating occasion of any foods while the SP or proxy is answering Q1.

Remember, your goal is to let the respondent report everything eaten or drunk without leading him/her to supply the answers he/she thinks you expect.

Draw a line after the last item the respondent reports on the Quick List.

TIME STARTED 5:00 AM
PM

DAY 1

1.

HAND
CARD
11

I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD 11 IF NECESSARY.]

[IF INFANT OR CHILD SP:] I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me.

2. About what time did (you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF RECORDED ON QUICK LIST]
3. Looking at this card, please tell me what (you/NAME) would call this occasion? [OR CONFIRM IF RECORDED ON QUICK LIST]

HAND
CARD
12

- 01 BREAKFAST
- 02 BRUNCH
- 03 LUNCH
- 04 DINNER
- 05 SUPPER
- 06 FOOD AND/OR BEVERAGE BREAK
 - SNACK
 - ALCOHOLIC BEVERAGE
 - OTHER BEVERAGE
- 07 FEEDING (INFANT ONLY)
- 08 OTHER (SPECIFY)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
 [IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

14.2 Time and Eating Occasion

Questions 2 and 3 begin the series of questions that ask the respondent for specific information about the food items named in the Quick List. When the Quick List is complete, read the next sentence on the questionnaire: “Now I’m going to ask you some specific questions about the foods and beverages we just listed.” Encourage the respondent to try to remember more foods as the interview progresses -- “When you remember anything else you ate or drank as we go along, please tell me.” Go to line A of the Quick List and ask **Q2**.

Q2 This question is asking the respondent what time the particular food item was eaten. Begin with the first food on the Quick List. If the respondent reported the time when completing the Quick List, confirm the time and record in column Q2. Otherwise, ask Q2 and record the reported time and circle “a” or “p” for am or pm in column Q2. If the respondent does not know the exact time the eating occasion began, probe for the closest estimate. If the respondent reports eating at “noon” or “midnight,” record “noon” or “midnight.” If you cannot get an estimate, document “DK” (for “Don’t Know”) in column Q2.

For example, if the respondent reported drinking coffee at 7:30 a.m., you would record “7: 30” and circle “a” for am.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q6 How much of this (FOOD) did you actually (eat/drink)?
A. <i>Coffee</i>	<i>7:30</i>	<i>a</i>	1.		
B.	<i>a</i>		2.		
C.	<i>p</i>				

TIME STARTED 5:00 AM
PM

DAY 1

1.

HAND
CARD
I1

I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD I1 IF NECESSARY.]

[IF INFANT OR CHILD SP:] I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me.

2. About what time did (you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF RECORDED ON QUICK LIST]
3. Looking at this card, please tell me what (you/NAME) would call this occasion? [OR CONFIRM IF RECORDED ON QUICK LIST]

HAND
CARD
I2

- 01 BREAKFAST
- 02 BRUNCH
- 03 LUNCH
- 04 DINNER
- 05 SUPPER
- 06 FOOD AND/OR BEVERAGE BREAK
 SNACK
 ALCOHOLIC BEVERAGE
 OTHER BEVERAGE
- 07 FEEDING (INFANT ONLY)
- 08 OTHER (SPECIFY)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
[IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

Q3

This question asks the respondent to name the eating occasion at which the food was eaten or drunk. If the respondent reported the eating occasion while completing the Quick List, confirm the occasion and record in column Q3. Otherwise, before asking the question, hand the respondent Hand Card 12. Card 12 is the same list as in Q3. Always read the categories the first time Q3 is asked of every respondent.

Do not suggest a name for any occasion or **describe any occasions on the hand card**. When the respondent selects the occasion from Hand Card 12, enter the code number in column Q3.

If the respondent indicates that none of the codes define the occasion, ask what the respondent calls the occasion. Record the response verbatim in column Q3 and record it as code number 08.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. <i>Coffee</i>	<i>7:30 P</i>	<i>08. Meeting</i>	1.		
B.	a		2.		
C.	p				

BOX 1

This box instructs you to transfer the food or beverage from the Quick List to the Food/Drink column. As you transfer the item, put a check (✓) in the narrow column to the right of the Quick List.

DAY ONE FOOD INTAKE QUESTIONNAIRE (Page 1)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
[IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

Q1 Quick List of Food Items		Time	(HAND-CARD 12)	Food/Drink Situations	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Coffee	✓	7:30 @	08	1. "Meeting" Coffee		
B.		a		2.		
C.		p				

14.3 Using the Food Instruction Booklet (FIB)

Every food item recorded in the Quick List is subsequently transferred to the *Food/Drink and Additions column* of the Intake Questionnaire. The FIB is your essential tool for guiding the respondent in answering Questions 4 and 5 for each of these foods.

The FIB has been designed to work with the Intake Questionnaire. The first column on each page in the FIB is where you will find the Food/Drink category for the food item you record in the *Food/Drink and Additions* column of the Intake Questionnaire. The second column of the FIB contains the list of probes you need to ask the SP about each food item. The responses to these probes will be recorded in the Q4 column (Description of Food/Drink and Ingredient Amount) of the Intake Questionnaire. The third column of the FIB contains the probes you need to ask about the amount of the food item that the SP actually ate/drank. You will record the answers to these questions in the Q5 column of the Intake Questionnaire. (How much of this (FOOD) did you actually (eat/drink)?)

FIB (Milk - Page 6)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Milk	<p>TYPE: What kind was it? (Was it whole, lowfat, 2%, soy, buttermilk...?)</p> <p>(FOOD: CHOCOLATE MILK, SEE NEXT CATEGORY)</p> <p>TYPE: Was it dry, evaporated, sweetened condensed?</p> <p>If dry, evaporated or sweetened condensed - Was water added?</p>	<p>IF VOLUME: How much? (Tsp, Tbsp, Cup, FO)</p> <p>IF SCHOOL MILK CARTON: How many? or What portion? (Examples: 1 carton; 1/2 carton)</p>

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A Milk	7 @ p	01	1. Milk	Whole, Liquid	
B. eggs	a p		2.		
C. coffee	a p		3.		
D. Sandwich	a p		4.		
E. Coke	a p		5.		
F. hamburger	a p		6.		
G. fries	a p		7.		
H. milkshake	a p		8.		
I.	a p				
J.	a p				
K.	a p				
L.	a p				

Icons in the FIB: Throughout the FIB, icons are used to remind you that more detailed instructions for obtaining complete information about a food item are available in the General Instructions section in the front of the FIB. Following is a short explanation for the five icons used:

Additions: An Addition is any food item that is added to the portion of the SP's food by the SP or by someone else for the SP. A detailed discussion of Additions is found on page ix.

Home Recipes: A home recipe is a dish that was made from scratch or from more than one ingredient and not from a commercial mix alone. A detailed discussion of Home Recipes is found on page x.

Sandwiches: There are six sandwich categories in the FIB: Fast Food Sandwiches, Hamburger on bun, Hot Dogs, Grilled Cheese Sandwiches, Peanut Butter or Peanut Butter and Jelly Sandwiches, and Other Sandwiches. A detailed discussion of Sandwiches is found on page x.

Salt: The salt probe refers to the salt used in cooking and preparing the foods. "Cooking and preparing" foods is defined as the preparation before cooking, during cooking, and the garnish after cooking but before serving. For example, if noodles were boiled in unsalted water but salt was added prior to serving, the response should be recorded as SALT USED. Record the answer to this question as either DK SALT, SALT USED, or NO SALT. This question does not refer to salt added by the SP to the portion of the food he/she ate. Make sure the SP understands this probe is asking about ordinary salt and not "lite" salt or a salt substitute.

Fat: The fat questions refers to fat used in cooking and preparing food. "Cooking and preparing" foods is defined as the preparation before cooking, during cooking, and the garnish after cooking but before serving. For example, if green beans were cooked in water with oil OR if green beans were cooked without fat but margarine was added before they were served, the response should be recorded as FAT USED. This question does not refer to any fat added by the SP to the portion of food he/she ate.

The fat used can be a solid (such as lard, butter, or margarine) or a liquid (such as olive oil, canola oil, or corn oil). Record the answer to this question as either DK FAT, FAT USED, or NO FAT.

If the SP reports that fat was used in cooking or preparing the food, you will ask "What kind?" and record the answer as part of the food item description in the Q4 column. You do not need to probe for detail; however do record any information the SP gives such as "canola oil," "olive oil," "tub margarine," or "butter." Brand name information is acceptable.

14.3.1 Locating a Food Item Within the FIB

You can locate a food item in the FIB by using the Table of Contents in the front or the Index in the back. The Table of Contents is divided into 14 major food groups. Each of the food groups corresponds to one of the tabbed sections of the FIB. The groups are in alphabetical order and include:

- Baby Foods, Formulas, Juices
- Beverages, Milk, Cream
- Breads, Sweet Breads
- Candy, Syrups, Sweeteners
- Cereals, Pasta, Rice
- Cheese, Eggs, Yogurt
- Desserts, Ice Cream, Frozen Yogurt
- Fruits, Vegetables
- Meat, Poultry, Fish
- Pizza, Tacos, Frozen Meals, and Mixed Dishes
- Sandwiches, Salads, Soups
- Sauces, Gravies
- Snacks
- Spreads, Salad Dressings

Each of these groups is further divided into categories so that you can more easily find food items. You can also locate a food item by using the Index in the back. The Index should be used when you are looking for a specific food item.

The FIB does not contain a complete list of food items. You will probably have foods reported that you cannot find in the FIB. When this occurs, try to find a food group it fits into and ask probes from a category in that group.

Every food item transferred from the Quick List to the *Food/Drink and Additions* column, as well as each food recorded as an addition, must be looked up in the FIB.

14.3.2 How to Read the Probes in the FIB

The FIB has specific probes for food items on the Quick List. The probes are designed to collect detailed descriptions about foods and beverages reported, and the amounts actually eaten. It is essential to follow the FIB closely to ensure enough detail is obtained.

Probes in column Q4 and Q5 are preceded by headings called hangers. Hangers are always in bold type. All probes are attached to hangers.

FIB (Flavored Milks - Page 6)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Flavored Milks, Milk Drinks, Chocolate Milk, Hot Chocolate	KIND: What kind was it? (Was it cocoa, hot chocolate, chocolate milk, malted milk, strawberry milk, PDQ...?) FORM: Was it made from a dry mix, or was it ready-to-drink? If dry mix -- Did the mix have sugar or a low calorie sweetener? TYPE: Was it made with whole, lowfat (1%, 2%), skim milk, water...? BRAND: If school -- GO TO Q5. If not school -- What was the brand name?	IF VOLUME: How much? (Tsp, Tbsp, Cup, FO) IF WEIGHT: What was the weight and how many packets? IF SCHOOL MILK CARTON: How many? <u>or</u> What portion? (Examples: 1 carton; 1/2 carton)

You begin asking the probes for a food by starting with the first hanger to the far left. For most categories in Q4, this is KIND. You then proceed down the Q4 column until you have asked all applicable probes under the hangers.

FIB (Milk - Page 6)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Milk	KIND: What kind was it? (Was it whole, lowfat (1%, 2%), skim, soy, buttermilk...?) (FOR CHOCOLATE MILK, SEE NEXT CATEGORY) TYPE: Was it liquid, dry, evaporated, sweetened condensed? If dry, evaporated or sweetened condensed -- Was water added?	IF VOLUME: How much? (Tsp, Tbsp, Cup, FO) IF SCHOOL MILK CARTON: How many? <u>or</u> What portion? (Examples: 1 carton; 1/2 carton)

If the respondent has already given you the answer to the probe attached to the KIND hanger, make sure the information has been recorded, then skip to the next bold hanger. Notice that the KIND hanger often has two probes attached to it. The second probe is in parentheses and may not need to be asked. Only ask the probe in parentheses if the respondent seems puzzled by the first probe as in the example below “What kind was it?”.

FIB (Flavored Milks - Page 6)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Flavored Milks, Milk Drinks, Chocolate Milk, Hot Chocolate	KIND: What kind was it? (Was it cocoa, hot chocolate, chocolate milk, malted milk, strawberry milk, PDQ...?)	IF VOLUME: How much? (Tsp, Tbsp, Cup, FO)
	FORM: Was it made from a dry mix, or was it ready-to-drink? If dry mix -- Did the mix have sugar or a low calorie sweetener?	IF WEIGHT: What was the weight and how many packets?
	TYPE: Was it made with whole, lowfat (1%, 2%), skim milk, water...?	IF SCHOOL MILK CARTON: How many? or What portion? (Examples: 1 carton; 1/2 carton)
	BRAND: If school -- GO TO Q5. If not school -- What was the brand name?	

Some hangers are preceded by the word IF. These are always decision points and you will ask the indented questions within the IF series if the previous answers send you to the series. For example, look below at the doughnut category example. If the respondent answered yes to the question about topping “Did it have an icing, glaze, or coating?”, you then ask, “What kind?”. If the respondent answered “no” to the topping question, you skip over the IF yes probe to the next hanger, in this example BRAND.

FIB (Doughnuts - Page 18)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Doughnuts	KIND: What kind of doughnut was it? (Was it jelly filled, cream filled, chocolate, cake, raised (yeast)...?) TOPPING: Did it have an icing, glaze, or coating? If yes -- What kind? BRAND: What was the brand name?	IF NUMBER: How many and what size? (small, medium, large; doughnut hole or stick) IF WEIGHT: What was the package weight and portion eaten? (Example: 1/2 - 6 WO box)

Throughout column Q4 you will find questions with a list of examples followed by "... ?" after them. This indicates that you should finish the question with "or something else?".

FIB (Cream - Page 8)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Cream, Creamers, Cream Substitutes,	KIND: What kind was it? (Was it light or table cream, a cream substitute, half & half, heavy...?) (IF WHIPPED CREAM, SEE NEXT CATEGORY) FORM: Was it liquid, powdered, frozen...? BRAND: What was the brand name?	IF VOLUME: How much? (Tsp, Tbsp, FO) IF INDIVIDUAL CONTAINERS OR PACKETS: How many?

Neutral Probing: As always, it is very important to remain neutral when probing. The FIB probes are written in a neutral manner. Be cautious not to imply that some answers are more acceptable than others or hint that a respondent might want to consider another response. Following is an example of a neutral and a non-neutral probe. The SP reports drinking a cup of coffee with breakfast. He describes the coffee by answering the interviewer's probes.

Neutral probe: Did you add anything to your coffee?

Non-neutral probe: Did you add cream or sugar?

The non-neutral probe suggests a specific answer to the respondent and thus leads the respondent toward that answer, rather than leaving the range of possible responses completely open for the respondent to specify.

TIME STARTED 5:00 ^{AM}
PM

DAY 1

1.

HAND
CARD
11

I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD 11 IF NECESSARY.]

[IF INFANT OR CHILD SP:] I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me.

2.

About what time did (you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF RECORDED ON QUICK LIST]

3.

Looking at this card, please tell me what (you/NAME) would call this occasion? [OR CONFIRM IF RECORDED ON QUICK LIST]

HAND
CARD
12

- 01 BREAKFAST
- 02 BRUNCH
- 03 LUNCH
- 04 DINNER
- 05 SUPPER
- 06 FOOD AND/OR BEVERAGE BREAK
 - SNACK
 - ALCOHOLIC BEVERAGE
 - OTHER BEVERAGE
- 07 FEEDING (INFANT ONLY)
- 08 OTHER (SPECIFY)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4.

SEE FIB COLUMN Q4 FOR FOOD PROBES.

5.

[SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?

6.

[ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
 [IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

Obtaining Food Descriptions and Recording Responses on the Intake Questionnaire

Q4

Q4 instructs you to go to the Food Instruction Booklet (FIB) for food probes (descriptions).

DAY ONE FOOD INTAKE QUESTIONNAIRE (Page 1)

BOX 1
TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time? [IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

FIB (Milk - Page 6)

Food/Drink Category	Q4. Description of Food/Drink	How much of this (FOOD) did you actually (eat/drink)?
Milk	<p>KIND: What kind was it? (Was it whole, lowfat (1%, 2%), skim, soy, buttermilk...?)</p> <p>(FOR CHOCOLATE MILK, SEE NEXT CATEGORY)</p> <p>TYPE: Was it liquid, dry, evaporated, sweetened condensed? If dry, evaporated or sweetened condensed -- Was water added?</p>	<p>HOW MUCH: How much? (Tsp, Tbsp, Cup, P, C)</p> <p>IF SCHOOL MILK CARTON: How many? or What portion? (Examples: 1 carton; 1/2 carton)</p>

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Milk	7 ⁰⁰ P	01	1. Milk		
B. eggs	a		2.		
C. coffee	p		3.		
D. Sandwich	a		4.		
E. Coke	p				
F. hamburger	a				

14.4.1 How to Record Probe Responses on the Intake Questionnaire

You must record an answer to every probe asked in the Q4 column. Record either the respondent's answer, or if the respondent does not know the answer, record DK followed by the hanger. Look at the doughnut category (page 18 in the FIB). If the respondent described the doughnut as jelly-filled (KIND), but did not know whether it had a topping, you will record "DK topping."

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A Donut	7:00	01	1 Donut	Jelly-filled, DK topping	
B. coffee	a		2.		
C. Orange juice	p		3.		
D. Apple	a		4.		
E. Sandwich	p				
F. Chix breast	a				

When a hanger starts with IF and the respondent does not know the answer, you will need to record the response by using a word from the probe that describes the response. For example, if the respondent knew the jelly-filled doughnut had a topping, but not what kind of topping, record "jelly-filled, topping - DK kind."

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A donut	7:00	01	1 Donut	Jelly-filling, topping - DK kind	
B. coffee	a		2.		
C. Orange juice	p		3.		
D. Apple	a		4.		
E. Sandwich	p				
F. Chix breast	a				

There is one exception to this recording rule. Sometimes hangers with the word “TYPE,” or “type,” in them have multiple probes attached. If a respondent knows the answers to all of the probes, record each response, and if he/she knows the answer to none of the probes, record “DK type.” But if the respondent can answer some but not all of the probes, record the answers followed by “DK more.”

<p>Sweet Breads, Coffee Cakes, Sweet Rolls, Pastries, Muffins (not corn), Croissants, Toaster Strudel, Pop Tarts, Toaster Pastries</p>	<p>KIND: What kind was it? (Was it coffee cake, sweet roll or bun, danish pastry, muffin, croissant...?) (IF BISCUIT, SEE PAGE 16. IF ENGLISH MUFFIN, SEE PAGE 15)</p> <p>TYPE: Was it regular, reduced calorie...? Did it have frosting, fruit, nuts, or a filling? If filling – What kind of filling was it?</p> <p>BRAND: What was the brand name?</p> <p>ADDITIONS: Did you add anything to the (FOOD)? RECORD EACH ADDITION ON A SEPARATE LINE IN THE FOOD/DRINK COLUMN. ASK Q4 AND Q5 FOR EACH ADDITION. Examples: Butter, margarine, page 69 Jam, jelly, page 69</p>	<p>IF SWEET ROLLS, PASTRIES, MUFFINS, CROISSANTS: How many and what size? (miniature, small, medium, large)</p> <p>IF COFFEE CAKE: 1. How many pieces? 2. What was the shape? (rec, sq, wedge) and 3. What were the dimensions of each piece? (length, width, height) (Example: 1 rec 3" L x 2" W x 1 1/4" H)</p> <p>OR</p> <p>What portion and what was the diameter? (Example: 1/8 of 9" dia coffee cake)</p> <p>IF TOASTER STRUDEL, POP TARTS, TOASTER PASTRIES: How many? (Example: 2 Pop Tarts)</p>
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Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q6 How much of this (FOOD) did you actually (eat/drink)?
A Sweet roll	8 ^(a) P	01	Sweet roll	frosting, DK more	
A donut	7 ^(a) P	01	1. Donut	jelly-filling, topping - DK kind	
B. coffee	a P		2.		
C. Orange juice	a P		3.		
D. Apple	a P		4.		
E. Sandwich ch x brea	a P				

A list of Food Item Abbreviations like the below can be found in the back of the FIB. These abbreviations will make recording the food/beverage descriptions easier.

FIB

LIST OF ACCEPTABLE ABBREVIATIONS

Measuring Abbreviations

Teaspoon.....	tsp	Thickness sticks	St
Tablespoon.....	tbsp	Width	W
Cup	C	Diameter	Dia
Fluid Ounce	FO	Inches	"
Weight ounce	WO	Small	Sm
Pound	Lb	Medium	Med
Gallon.....	Gal	Large.....	Lrg
Quart.....	Qt	Extra Large	X Lrg
Pint.....	Pt	Miniature	Mini
Length	L	Regular	Reg
Height	H	Package	Pkg
		Weight.....	Wt

Food Item Abbreviations

Beverage	bev	Margarine	marg
Casserole.....	cass	Mayonnaise	mayo
Cereal	cer	Mozzarella	mazz
Chicken	chix	Orange juice.....	oj
Chocolate	choc	Peanut butter	pb
Coffee	coff	Potato	pot
Cottage cheese	cot cheese	Sandwich	sand
Crackers	crax	Spaghetti	spag
Decaffeinated	decaf	Water	H ₂ O
French fries	FFries	Vitamin	vit
Macaroni	mac	Vegetables	veg

Descriptive Abbreviations

Additions	adds	Powdered	pwd
Amount	amt	Preparation	prep
Baked	bkd	Regular	reg
Breakfast	bkfst	Rectangular	rec
Canned	can	Served	svd
Commercial	comml	Slice(s)	sl(s)
Cooked	ckd	Square	sq
Frozen	frz	With	w/
Ground	grd	Without	w/o
Piece(s)	pc(s)		

14.4.2 Combination Foods

Combination foods are foods eaten together. There are two types of combinations: additions to foods such as milk added to cereal; and ingredients of foods such as lettuce, tomato, and cheese on a sandwich. All combination foods should be bracketed to indicate they were eaten together.

Additions to Foods: An addition is any food item that is added to a reported food at the table, either by the SP or by someone else for the SP to the SP's portion of food. For instance, butter is an addition to bread whether the child butters it at the table or Mom butters it for him before putting it on his plate. You will ask for a description of the addition and the amount of it added to the food reported.

Additions to foods may not be mentioned by the respondent during the Quick List recall. For example, a respondent may report eating Cheerios for breakfast but not mention milk or sugar. Therefore, most food categories have the **ADDITIONS** hanger with the question "Did you add anything to your (FOOD)?". The **ADDITIONS** hanger is easily identified by the "plus" icon to the left and is always the last bold hanger in the food category. **It after asking the additions question the respondent looks puzzled or asks for clarification, you should say "Did you put anything (on/in) the (FOOD) before you (ate/drank) it?"**

FIB (Stuffing - Page 16)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Bread or Rice Stuffing, Dressing	<p>KIND: What kind was it? (Was it cornbread dressing, bread stuffing, rice dressing...?)</p> <p>TYPE: Was it made with meat, oysters, vegetables, egg...? If meat – What kind?</p> <p>ADDITIONS: Did you add anything to the (FOOD)? RECORD EACH ADDITION ON A SEPARATE LINE IN THE FOOD/DRINK COLUMN. ASK Q4 AND Q5 FOR EACH ADDITION. Examples: Gravy, page 65</p>	<p>IF VOLUME: How much? (Tsp, Tbsp, Cup)</p>

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (MAND-CARD I2)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Stuffing	✓	1	1. Stuffing	Cornbread, Vegetables	
B. relish	✓	03			
C. corn		a p	2.		

When a respondent reports an addition, record it on a separate line in the *Food/Drink and Additions* column. Continue to probe for more additions using “Anything else?” until the respondent has reported and you have recorded all of the additions.

Q1 Quick List of Food Items		Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. stuffing	✓	1 ^a Ⓟ	03	1. Stuffing	cornbread, vegetables	
B. Relish		↓	↓	2. gravy		
C. corn						

Following is an example for asking about and recording ADDITIONS.

1. The SP reported eating Cheerios. You have asked the probes and recorded the detail in the Q4 column of the Intake questionnaire. You then ask about additions: "Did you add anything to the Cheerios?"
2. The SP reports milk as an addition. You record the reported addition (milk) on the next line in the *Food/Drink and Additions* column, and ask "Anything else?" The SP then reports sugar. You record the reported addition (sugar) on the next line in the *Food/Drink and Additions* column, and ask "Anything else?" The SP says "No."
3. You ask Q5 for Cheerios ("How much of the Cheerios did you actually eat?"), and record the response in the Q5 column of the Intake questionnaire.
4. Then ask Q4 (description) and Q5 (amount) for the milk first and then the sugar you recorded in the *Food/Drink and Additions* column. You will need to refer to the milk and sugar categories to ask the right probes in columns Q4 and Q5 of the FIB.

The responses to the above example have been recorded below. Notice that the food items (Cheerios, milk, and sugar) have been bracketed to show that they were eaten together.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (MAND- CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Cereal	7 ^a	01	1. Cereal	① Cheerios	③ 1 C
B. Sandwich	a	}	2. Milk ②	Skim, liquid ④	1/2 C
C. Chips	p		3. Sugar ③		
D. Coke	a		4.		
E. Cookie	p				
F. Dear	a				

Ingredients of Foods: Ingredients are components of foods. There are 12 food categories that ask for ingredients:

Milkshakes (page 7)

Tacos, Burritos, Enchiladas, Fajitas (page 46)

Macaroni and Cheese (page 48)

Spaghetti, Spaghetti and Sauce, Spaghetti with Meatballs/Meat Sauce (page 50)

Mixed Dishes, Casseroles, Stews (pages 52, 53)

Hamburger on Bun (page 56)

Hot Dogs (page 57)

Grilled Cheese Sandwiches (page 58)

Peanut Butter or Peanut Butter and Jelly Sandwiches (page 59)

Other Sandwiches (page 60)

Soups (page 63)

Dips (page 67)

Some categories also ask for the amounts of the ingredients. Ingredients and amounts of ingredients are always recorded in the Q4 column of the questionnaire grid and bracketed as shown below to indicate they are a combination.

FIB (Peanut Butter Sandwich - Page 59)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Peanut Butter Sandwich, Peanut Butter and Jelly Sandwich 	<p>BREAD: Was the bread white, rye, whole wheat, multigrain...? If whole wheat – Was that 100% whole wheat? (CHECK LABEL)</p> <p>Type – Was it commercial, from a bakery, or made from a home recipe? Was it regular, reduced calorie, high fiber...?</p> <p>Bread amount – How many slices and what size (thick, regular, thin, very thin)?</p> <p>PEANUT BUTTER: Was it regular, reduced sodium, unsalted...? Peanut butter amount – How much? (TSP, TBSP)</p> <p>OTHER INGREDIENTS: Was anything else on the sandwich? If jelly: What kind of jelly was used? (Was it jelly, marmalade, preserves...?) Type – Was it regular, reduced sugar...?</p> <p>Jelly amount – How much? (TSP, TBSP)</p> <p>If other: What were they? (RECORD AMOUNT FOR EACH)</p>	IF NUMBER: How many? or What portion?

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. P.B. Sandwich	8 ^(S)	P	1. P.B. Sand	Bread: White, Commercial	
B. MILK	a	P	2.	Reg 2s1	
C. Cookies	a	P	3.	P.B.: reg 2TBSP	
D. Applesauce	a	P	4.	Jelly: Reg 2TBSP	
E. Cray	a	P	↓		
F.	↓	P	↓		

It is possible to have ingredients and additions with the same food. For example, a respondent reported eating a hot dog. The hot dog category has all the ingredient probes listed in column Q4. The SP responded to all the ingredient questions which the interviewer recorded in column Q4 of the questionnaire grid. When she was asked the last probe, **ADDITIONS** (“Did you add anything to your hot dog?”), she reported catsup. The interviewer recorded the addition in the *Food/Drink and Additions* column, and after asking Q5 (“How much of the (FOOD) did you actually eat?”) for the hot dog, the interviewer referred to the condiment category and asked Q4 for the catsup. Notice that the ingredients of the hot dog are bracketed in column Q4, and the hot dog and catsup are bracketed in the *Food/Drink and Additions* column.

FIB (Hot Dogs - Page 57)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?																																										
Hot Dogs 	<p>BREAD: Was it on a bun, bread...? Grain: Was it white, whole wheat, sourdough, multigrain...? If whole wheat: Was that 100% whole wheat? Type: Was it commercial, from a bakery, or made from a home recipe? Was it regular, reduced calorie, high fiber...?</p>	<p>IF NUMBER: How many? or What portion? What size? (regular, jumbo, cocktail, footlong)</p>																																										
Bun/bun size? MEAT: W/ turkey, beef Type: Meat a JUMBO OTHER INGREDIENTS: Did it have cheese? If chili If sauce If other -- What were they? (RECORD AMOUNT OF EACH) + ADDITIONS: Did you add anything to the hot dog? RECORD EACH ADDITION ON A SEPARATE LINE IN THE FOOD/DRINK COLUMN. ASK Q4 AND Q5 FOR EACH ADDITION. Example: Mustard, page 69	<table border="1"> <thead> <tr> <th>Q1 Quick List of Food Items</th> <th>Q2 Time</th> <th>Q3 Occ. (HAND-CARD 12)</th> <th>Q4 Food/Drink and Additions</th> <th>Q4 Description of Food/Drink and Ingredient Amount</th> <th>Q5 How much of this (FOOD) did you actually (eat/drink)?</th> </tr> </thead> <tbody> <tr> <td>A. Hot dog</td> <td>2</td> <td>03</td> <td>1. Hot dog</td> <td>Bun: white, commercial 1 reg</td> <td>Ate All</td> </tr> <tr> <td>B. Coke</td> <td>a</td> <td>p</td> <td>2. ↓</td> <td>Meat: beef/pork, reg 1 reg</td> <td>↓</td> </tr> <tr> <td>C. Chips</td> <td>a</td> <td>p</td> <td>3. ↓</td> <td>Chili: w/meat, DK amt</td> <td>↓</td> </tr> <tr> <td>D. Cookies</td> <td>a</td> <td>p</td> <td>↓</td> <td></td> <td></td> </tr> <tr> <td>E. Salad</td> <td>a</td> <td>p</td> <td>4. Catsup</td> <td>Catsup</td> <td></td> </tr> <tr> <td>F. Fish</td> <td>a</td> <td>p</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?	A. Hot dog	2	03	1. Hot dog	Bun: white, commercial 1 reg	Ate All	B. Coke	a	p	2. ↓	Meat: beef/pork, reg 1 reg	↓	C. Chips	a	p	3. ↓	Chili: w/meat, DK amt	↓	D. Cookies	a	p	↓			E. Salad	a	p	4. Catsup	Catsup		F. Fish	a	p				
	Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?																																						
	A. Hot dog	2	03	1. Hot dog	Bun: white, commercial 1 reg	Ate All																																						
	B. Coke	a	p	2. ↓	Meat: beef/pork, reg 1 reg	↓																																						
	C. Chips	a	p	3. ↓	Chili: w/meat, DK amt	↓																																						
	D. Cookies	a	p	↓																																								
	E. Salad	a	p	4. Catsup	Catsup																																							
F. Fish	a	p																																										

FIB (Condiments - Page 69)

Food/Drink Category	Q4. Description of Food/Drink	Q5. How much of this (FOOD) did you actually (eat/drink)?
Condiments	<p>(IF SOY SAUCE, TERIYAKI SAUCE, ETC., SEE PAGE 65)</p> <p>KIND: What kind was it? (Was it mustard, catsup, hotdog relish, corn relish, horseradish...?)</p>	<p>IF VOLUME: How much? (Tsp, Tbsp, Cup)</p> <p>IF INDIVIDUAL PACKETS: How many?</p>

14.4.3 Home Recipes

A home recipe is a dish made from scratch or from more than one ingredient and not from a commercial mix alone. The following categories ask specific questions about all the ingredients in a home recipe; they are easily identified in the FIB by the “house” icon.

- Milkshakes (page 7)
- Tacos, Burritos, Enchiladas, Fajitas (page 46)
- Macaroni and Cheese (page 48)
- Spaghetti, Spaghetti and Sauce, Spaghetti with Meatballs/Meat Sauce (page 50)
- Mixed Dishes, Casseroles, Stews (page 52)

Record the ingredients in the Q4 column of the questionnaire as the respondent reports them. Then ask the probes specified for each ingredient.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?	
A. Spaghetti	a	04	1. Spaghetti	Home recipe: Spaghetti noodles		
B. Coke	a		2.	} olive oil Healthy choice Sauce: commercial, red		
C. bread	p		3.			
D. Salad	a		4.			
E. cake	p		5.		No salt	
F. —	a		6.		No adds	
G. —	a					
H. —	p					
I. —	a					

For three of the home recipe items (milkshakes, mixed dishes, etc., and tacos, etc.), you will also need to record the amount of each ingredient as instructed in the FIB. Again, this amount should be recorded in the Q4 column as you are asking about the ingredients in the recipe, not the amount eaten or drunk.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (MAND- CARD 12)	Q4 Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Milkshake	✓	a	1. Milkshake	Home Recipes Milk: 2/0 1c	
B. Cookies		2 @ 06	2. ↓	Choc Ice cream: Borden's 1c	
C. Fish		a	3. ↓	Choc Syrup: 2 TBS	
D. Salad		a	4.		
E. rice		a	5.		
F. Carrots		p	5.		
G. cake		a	7.		
H. wine		a			
I. nuts		p			
J. —		a			
K.		p			
L.		a			

Since each recipe can contain many ingredients, feel free to use as many lines as you need for recording in the Q4 column. When you have completed recording all of the ingredients, make sure you bracket the home recipe to show that the ingredients were eaten together.

Once you have obtained all of the ingredients, go to the Q5 column and ask the probe for the total amount of the mixture, for example, the milkshake that the SP actually drank.

If the respondent was not the cook or is unsure of the ingredients, try to obtain more information from “the cook” or a more knowledgeable member of the household.

Mixed Dishes: There are two Mixed Dishes categories: Home Recipe (recipe known), page 52 and Commercial, Restaurant, or Recipe Unknown, page 53.

If the dish is a home recipe and the recipe is known, column Q4 of the FIB lists the questions needed to collect descriptive and Quantity information about the recipe ingredients. First you will collect the name of each ingredient, then go back and get description and quantity information for each ingredient. Then ask the recipe amount from **RECIPE AMOUNT** hanger (the next to the last bold hanger on page 53).

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Italian Cass	1	a Ⓟ 03	1. Italian Cass	Home Recipe noodles: macaroni, 2c ckd	
B. Tea		a	}	2. tomato Sauce: Pasta Sauce 3c	
C. broccoli.		p		3. Chick: breast, 1c ckd	
D. Salad		a		4. no salt	
E. Steak		p		5. Fat - olive oil 1/4c	
F. Fries		a		6. TOTAL AMT 7c	
G. tea		p			
H. _____		a			
I. _____		p			

If a mixed dish is commercial, from a restaurant, or an unknown recipe, use the category on page 53. Notice that column Q4 in the FIB lists major ingredient headings and asks for very brief descriptions. No amounts are needed.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. lasagna	5	a	1. lasagna	Noodle: lasagna noodles	
B.	Ⓟ	04		tomato	
C.	a			Sauce: pasta sauce	
D.	p				
E.	a			Meat: ground beef	
F.	p			Cheese: mozzarella	
G.	a			No brand	
H.	p				
I.	a				
J.	p			NO Adds	
K.	a				
L.	p				

14.4.4 Sandwiches

There are six sandwich categories in the FIB that can be identified by the “sandwich” icon:

- Fast Food Sandwiches (page 55)
- Hamburger on Bun (pages 56, 57)
- Hot Dogs (page 57)
- Grilled Cheese Sandwiches (page 58)
- Peanut Butter or Peanut Butter and Jelly Sandwiches (page 59)
- Other Sandwiches (pages 60, 61)

Fast Food Sandwiches applies to sandwiches purchased at the following fast food places: Arby’s, Burger King, Hardees, Jack-in-the-Box, Kentucky Fried Chicken, McDonald’s, Roy Rogers, White Castle, and Wendy’s. If the sandwich is from one of these places, you need only get the name of the sandwich and any changes made to the standard item (deletions or additions).

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD IZ)	Q4 Food/Drink and Additions	Q5 Description of Food/Drink and Ingredient Amount	Q6 How much of this (FOOD) did you actually (eat/drink)?
A. McD hamburger ✓	Noon	a 03	1. McD Hamburger	none removed	
B.		a	2.		
C.		p			

If the sandwich is not a fast food sandwich from one of the listed fast food restaurants, refer to the appropriate sandwich category and ask the respondent each probe. As the respondent reports the ingredients, you will record them one after the other in the Q4 column asking the probes specified for each ingredient.

You will also need to record the amount of each ingredient. Again, this amount should be recorded in the Q4 column as you are asking about each ingredient. Always bracket the ingredients of the sandwich.

Since each sandwich can contain many ingredients, feel free to use as many lines as you need for recording in the Q4 column. When you have completed recording all of the ingredients, bracket the sandwich to show that the ingredients were eaten together.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Hamburger ✓	✓	a	1.	1 veg	
B.	Non	p	03	Hamburger	Bun: white, commercial veg
C.	a	p	2.		Meat: grd beef med
D.	a	p	3.		tomato - 1 sl
E.	a	p	4.		veg: lettuce - 1 leaf
F.	a	p	5.		Pickles 3 sl
G.	a	p	6.		Spread: mayo, DK more
H.	a	p			Salt: DK salt
I.	a	p		↓	Adds: no

14.4.5 Ethnic, Regional, and New Foods

Sometimes a respondent will report eating a food that is unfamiliar to you. Such foods may be ethnic foods, regional foods, or foods new on the market. If a respondent reports an unfamiliar dish, ask for a description such as what foods were in the dish and how it was cooked or served. Always record the ethnic name of a recipe with a translation if possible. From the description try to determine the appropriate FIB food category. Go to the FIB and, using the descriptive probes for a similar food or beverage, try to obtain as much detail as possible.

Unfamiliar ethnic or regional foods are often **Mixed Dishes**. If the respondent describes the food as a mixture, turn to page 52 of the FIB (Mixed Dishes). If the respondent reports the dish as a home recipe, follow the probes on page 52. Otherwise, go to Mixed Dishes on page 53. Notice that tacos, burritos, enchiladas, and fajitas are found in their own category on page 46 rather than in Mixed Dishes.

If the respondent cannot give you a good description, ask to see the ingredients used in preparing the dish or the container the food came in. If the food was eaten in a restaurant, ask the restaurant name. You might also determine the thickness of the food (e.g., soup versus stew) by asking the respondent whether he/she used a knife, fork, or spoon to eat the unfamiliar dish.

If possible, document the food category. Write down the name of the food verbatim and describe the food as accurately as you can.

TIME STARTED 5:00 **AM**
PM

DAY 1

1.



I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD I1 IF NECESSARY.]

[IF INFANT OR CHILD SP: I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me.

2. About what time did (you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF RECORDED ON QUICK LIST]
3. Looking at this card, please tell me what (you/NAME) would call this occasion? [OR CONFIRM IF RECORDED ON QUICK LIST]



- 01 BREAKFAST
- 02 BRUNCH
- 03 LUNCH
- 04 DINNER
- 05 SUPPER
- 06 FOOD AND/OR BEVERAGE BREAK
- SNACK
- ALCOHOLIC BEVERAGE
- OTHER BEVERAGE
- 07 FEEDING (INFANT ONLY)
- 08 OTHER (SPECIFY)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
 [IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

14.5 Obtaining Quantities and Use of the Food Guides

Q5 This question asks for the actual amount of the food item eaten. Using column Q5 of the FIB, document food quantity in appropriate measures (i.e., teaspoons, tablespoons, cups, fluid ounces, weight ounces, etc.).

Every food transferred to the *Food/Drink and Additions* column (except plain drinking water) should have a quantity in Q5. Do not accept a range value for quantity. If a respondent reports eating 10-20 potato chips, ask: "Can you give me your best estimate of the number of chips you ate?"

Only the amount eaten is reported -- not the amount served. Probe carefully when the respondent reports sandwiches, chicken parts, and meats such as pork chops. The respondent may be so intent on describing the size of the serving to you that he/she forgets that the whole portion wasn't eaten.

There is one exception to the amount eaten recording convention. In cases that meet the data retrieval guidelines (see p. 7-6) if the type of food and beverage served is reported, but the quantity eaten is not known, you can, through data retrieval, determine quantity of food "served." In that situation, document the amount served in column Q5 noting "amount served." For example, a young school age respondent may report eating pizza and drinking milk for lunch in the school cafeteria, but can't remember how much he ate.

If the respondent cannot give you a quantity and there is no way you can retrieve the data, code "DK quantity" in column Q5.

14.5.1 The Measuring Guides

To assist the respondent in accurately reporting the amount of foods eaten, you will be provided six (6) measuring guides. These tools will be used to determine the volume and dimensions of the food items the respondent reports. The instruction pages in the FIB (shown below) are a quick reference of how to use measuring cups and spoons to determine quantity.

MEASURING CUPS (C): Use the measuring cups to estimate the capacity of mugs, bowls or glasses, and to estimate sizes of portions or servings. For example, these cups would be used to measure liquids (such as juice or milk) and solids (such as potato salad or corn chips).

MEASURING SPOONS (tsp, tbsp): Use the measuring spoons to estimate the capacities of cooking spoons, serving spoons, or household spoons, and to estimate small amounts. Always have the respondent estimate level spoons.

THICKNESS STICKS (st): The thickness sticks consist of eight 1/8 inch sticks. Only use the thickness sticks to measure the thickness of meat, poultry, and cheese. If the respondent thinks the thickness was greater than 8 sticks (1 inch), use a ruler. The Q5 column of the FIB will instruct you as to when to use thickness sticks.

RULER ("): Use the ruler to estimate dimensions in inches. For example, the ruler would be used to estimate the length, width, and height of a piece of cornbread; and the length and width of a piece meat or poultry (height would be estimated from the thickness sticks).

LAMINATED CARDS: The laminated card has two sides. The first side includes a set of six concentric circles (1" to 6") and two perpendicular 6" rulers. The circles can be used to estimate the size of such foods as pancakes, or a small pizza. The perpendicular rulers are helpful to the respondent when estimating the length and width of square and rectangular foods such as cornbread, cake, or lasagna.

The other side contains pictures of a fish fillet, parts of chicken, and dimensions for various shapes. This card can be used as a type of Hand Card to help the respondent in answering particular questions. It should always be used to confirm whole and half chicken breasts and chicken legs, drumsticks, and thighs.

TWO CUP PLASTIC MEASURING CUP (C): The 2-cup plastic measuring cup should only be used to estimate the amount of food or beverage the SP ate or drank when the SP refers to a bowl or cup in his/her home. For example, if a respondent reports drinking "a cup of coffee," have him/her fill the cup used with water to represent the amount of coffee he/she actually drank. You can then measure the liquid by pouring it into the 2-cup measure. Make sure the amount in the measuring cup is the amount he/she drank.

You can use this same procedure with dry measures. For example, if the SP reports eating a small bowl of popcorn, have him/her fill the bowl used with water to represent the amount of popcorn he/she actually ate. Then measure the water by pouring it into the 2-cup measure.

Keep a set of the cups and spoons in a zip-lock plastic bag for easy access. Before starting the Intake Questionnaire, lay out all the food measuring guides (except the 2-cup measuring cup). After completing the Quick List describe to the respondent how he/she should use them to quantify intake. For example, say something like:

"You can use these measuring guides to estimate the amount of food you ate yesterday. There are cups, spoons, a ruler, thickness sticks, and concentric circles on the table.

The cups and spoons will help you measure the volume of your food.

The ruler and thickness sticks will help us get dimensions. You can use the ruler to estimate how long, wide, and high a food is. Use the thickness sticks to estimate the thickness of meat, poultry, and cheese.

And the concentric circles will help estimate the diameter of pancakes, biscuits, tortillas, and or other round foods."

Other suggestions to assist the respondent in reporting include:

- _ Turning measuring cups upside down to simulate a mound of food.
- _ Having the respondent show the dimensions of a food with his/her hands, on the grid if possible. Use the ruler to measure what is displayed. If necessary, have the respondent draw the size and shape of what was eaten on a piece of paper, then use the ruler to measure.

Accept the measurement unit the respondent spontaneously reports if it is in column Q5 of the FIB. If it is not in the FIB, guide the respondent to the first appropriate unit listed in column Q5. If the respondent is hesitant, guide him/her to other appropriate units of measure in column Q5. If, despite this, the respondent cannot report in units in the FIB, record in the unit the respondent offers.

If the respondent reports in cups, spoons, or dimensions, but did not use the measuring guides to help estimate, confirm the amount reported by referring to the appropriate cup, spoon, ruler, grid, or circle. For example, if a respondent reports drinking 2 cups of milk, point to the cup measure and confirm by saying something like “was each cup this size?”.

Do not use your judgement about “unreasonable” amounts. Accept the amount reported.

In the back of the FIB is a list of measuring abbreviations to make the documentation of food quantity easier.

FIB			
LIST OF ACCEPTABLE ABBREVIATIONS			
<u>Measuring Abbreviations</u>			
Teaspoon.....	tsp	Thickness sticks	St
Tablespoon.....	tblsp	Width	W
Cup	C	Diameter	Dia
Fluid Ounce	FO	Inches	"
Weight ounce	WO	Small	Sm
Pound	Lb	Medium	Med
Gallon.....	Gal	Large.....	Lrg
Quart.....	Qt	Extra Large	X Lrg
Pint.....	Pt	Miniature	Mini
Length	L	Regular	Reg
Height	H	Package	Pkg
		Weight.....	Wt
<u>Food Item Abbreviations</u>			
Beverage	bev	Margarine	marg
Casserole.....	cass	Mayonnaise	mayo
Cereal	cer	Mozzarella	mozz
Chicken	chix	Orange juice.....	oj
Chocolate	choc	Peanut butter	pb
Coffee	coff	Potato	pot
Cottage cheese	cot cheese	Sandwich	sand
Crackers	crax	Spaghetti	spag
Decaffeinated	decaf	Water	H ₂ O
French fries	FFries	Vitamin	vit
Macaroni	mac	Vegetables	veg
<u>Descriptive Abbreviations</u>			
Additions	adds	Powdered	pwd
Amount	amt	Preparation	prep
Baked	bkd	Regular	reg
Breakfast	bkfst	Rectangular	rec
Canned	can	Served	svd
Commercial	commi	Slice(s)	sl(s)
Cooked	ckd	Square	sq
Frozen	frz	With	w/
Ground	grd	Without	w/o
Piece(s)	pc(s)		

14.5.2 How to Measure Quantities

The FIB specifies three ways to measure quantities of foods and beverages consumed: as a weight (weight ounce, pound), as a volume (fluid ounce, cup, Tbsp, tsp.), and as a size (small, medium, large).

- Weight** measures how heavy or dense a food is. That is, how much it weighs on a scale.

Weight measures should only be used when the weight (in grams, ounces, or pounds) is read from a package label of a ready-to-eat food or from a scale. If it is read from a label, note what portion of the entire package or can the respondent ate. For example, if the respondent reports eating a half a bag of pretzels, document in column Q5 of the intake form: "1/2 of a 2.7 WO bag." Or if a respondent reports eating a whole can of cling peaches, record: "1 can -15.5 WO."

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. pretzels	3 ^a	06	1. pretzels	1/2 of 2.7 WO pkg
B. peaches	4 ^a	06	2. peaches	1 can - 15.5 WO
C.				

Weight measures should only be used for restaurant meals when the weight is specified in the menu. For example, if the menu describes the food item as "1/2 pound of fried shrimp", document in column Q5: "1/2 Lb." You must also document whether that description is a raw or cooked weight. Ask the respondent if weight is raw or cooked. If unknown, the correct documentation would be: "1/2 Lb., DK raw."

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Q4 Food/Drink and Additions	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Shrimp	5 ^a	04	1. Shrimp	1/2 lb, DK raw
B.	1 ^a	1	2. ↓	↓
C.				

- **Volume** measures how much space a food takes up. Common units for volume are:
 - cups or fractions of cups;
 - tablespoons, teaspoons or fractions of these spoons; and
 - fluid ounces.

Always collect level cup, tablespoon, or teaspoon measures only. Do not accept "heaping" measures. Ask for the respondent's best estimate of level measures.

Amounts of beverage consumed should be reported in cups or fluid ounces.

Weight Versus Fluid Ounce: An "ounce" is a unit of measure that can be used for both weight and volume. However, a weight ounce (WO) and a volume or fluid ounce (FO) are different, and the difference can be substantial in some foods. For example, compare 8 fluid ounces (FO) and 8 weight ounces (WO) of potato chips:

- WEIGHT: 8 WO equals 227 grams
- VOLUME: 8 FO (1 cup) equals 20 grams

In this instance 8 WO of potato chips is equivalent to more than 10 times 8 FO (1 cup)! Now you see why it's so important to distinguish between weight and fluid ounces. Following are some probes you might use to determine the correct "ounce" measurement.

- When you say ounces, do you mean the ounces you read off of a cup measure? If the respondent answers "Yes," record in FO or portion of a cup.
- When you say ounces, do you mean the ounces you would read off of a scale if you were weighing the food? If the respondent answers "Yes", record in WO.

Only accept "unknown ounce" if the respondent is not able to distinguish between the two types.

- **Size** measures the physical dimensions or proportion of a food. For instance, small, medium, large, or length, width, height, diameter.

Relative size (small, medium, large) is used for food items where actual dimensions may be difficult to report. For example, fruits, vegetables, fish, poultry, and many meats with bone such as steaks and chops can be adequately described with relative size. Following is a list of descriptions that are commonly used to quantify a food item. The FIB will tell when to use relative size, and which terms to use.

- miniature/mini (muffins, cookies, bagels)
- small
- medium
- large
- extra large (eggs)
- jumbo (eggs, shrimp)
- regular
- thin (slices)
- very thin (slices)
- wafer thin (pre-sliced meats only)
- bite size (indicate brand for cookies, crackers, muffins)
- thick (slices)

Dimensions may be used only when specified in the FIB. Use a ruler, thickness sticks, or the concentric circles to determine dimensions.

For example, if a respondent reports eating a wedged shape piece of pie (page 27), probe for the dimensions. Say something like: "Using the ruler, can you tell me the size of the piece you ate? What was the length? and the width? and the height?"

Record in column Q5 as: 1 wedge, 4"L X 3"W x 1 1/4"H

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. pie	7:06	a	1. pie	NO Adds DUMPKIN ONE CRUST	1 wedge 4"L x 3"W x 1-1/4"H
B.		a	2.		
C.		p			

Use thickness sticks to estimate the thickness (height) of meat, poultry, and cheese, ONLY. For example, if a respondent reports eating a boneless, square piece of steak, you can use the ruler to measure the length and width, and the thickness sticks to measure the thickness. Say something like: "Using the thickness sticks, can you tell me the thickness of that piece of steak?" Spread the sticks out and demonstrate by putting one on top of the other to indicate thickness. If the respondent thinks the food was thicker than 8 sticks (one inch), use the ruler.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND-CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. Steak	5:04	a	1. Steak	no Adds nobone, broiled, salted	1 SQ 4"L x 4"W x 3"st
B.		a	2.		
C.		p			

Use the concentric circles to help a respondent report round foods such as pancakes, or waffles. For instance, if a respondent reports eating three pancakes, probe: "Looking at these circles, can you show me which one is the size of your pancakes?"

If a food is an irregular shape, draw a small replica of the food on the intake form in the description (Q4) or quantity (Q5) column and label the dimensions.

Q1 Quick List of Food Items	Q2 Time	Q3 Occ. (HAND- CARD 12)	Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?
A. pancakes	8 ⁰⁰ P	01	1. pancakes	buttermilk, reg	3-4" d
B. milk			2. ↓	no fruit	↓
C. eggs			3. Syrup		
D. coffee			4. butter		
E. juice					
F. bacon					

If you consistently have problems getting a sample person to quantify the foods he/she has eaten, document at the bottom of the questionnaire.

Remember that the amount to be reported is only the amount actually eaten or drunk by the respondent. The interview will go faster and you will not collect too little or too much detail about the quantity eaten or drunk when you follow the specifications in the FIB.

TIME STARTED 6:00 AM
PM

DAY 1

1.



I'd like you to tell me everything (you/NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (you/NAME) ate and drank at home and away - even snacks, coffee, and alcoholic beverages. [DO NOT INTERRUPT RESPONDENT. USE HANDCARD 11 IF NECESSARY.]

[IF INFANT OR CHILD SP:] I'd like you to tell me everything (NAME) had to eat and drink all day yesterday, (DAY), from midnight to midnight. Include everything (he/she) ate and drank at home and away, including snacks and drinks (and bottles or breast milk).

[WHEN RESPONDENT STOPS, ASK: Anything else?]

Now I'm going to ask you specific questions about the foods and beverages we just listed. When you remember anything else you ate or drank as we go along, please tell me.

2. About what time did (you/NAME) begin to (eat/drink) the (FOOD)? [OR CONFIRM IF RECORDED ON QUICK LIST]
3. Looking at this card, please tell me what (you/NAME) would call this occasion? [OR CONFIRM IF RECORDED ON QUICK LIST]



- 01 BREAKFAST
- 02 BRUNCH
- 03 LUNCH
- 04 DINNER
- 05 SUPPER
- 06 FOOD AND/OR BEVERAGE BREAK
 - SNACK
 - ALCOHOLIC BEVERAGE
 - OTHER BEVERAGE
- 07 FEEDING (INFANT ONLY)
- 08 OTHER (SPECIFY)

BOX 1

TRANSFER QUICK LIST FOOD TO GRID. CHECK OFF FOOD IN QUICK LIST AS IT IS TRANSFERRED.

4. SEE FIB COLUMN Q4 FOR FOOD PROBES.
5. [SEE FIB COLUMN Q5 FOR AMOUNT SPECIFICATIONS.] How much of this (FOOD) did (you/NAME) actually (eat/drink)?
6. [ASK IF NOT OBVIOUS:] Did (you/NAME) have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME) or was that at another time?
[IF SAME OCCASION, GO BACK TO BOX 1. IF ANOTHER TIME, GO BACK TO Q2.]

14.6 Was This the Same Eating Occasion?

Q6 This question begins the series of questions (Q2-Q5) for the next food on the Quick List. It is asking the respondent whether the next food is part of the same eating occasion as the previous food. The question is designed to help the flow of the interview and eliminate redundant questions.

After recording the amount eaten in column Q5, the questionnaire prompts you to ask Q6 for the next food item: "Did you have (NEXT QUICK LIST ITEM) with your (OCCASION) at (TIME), or was that at another time?" If it is the same occasion, skip Questions 2 (Q2) and 3 (Q3) and follow the directions in Box 1. If it is not the same occasion, go back to Question 2 (Q2).

For example, if a respondent reported on the Quick List that he had coffee, juice, milk, toast, sandwich, chips, coffee, casserole, peas, and tea. You ask Q2 through Q5 for the coffee. The respondent reports drinking coffee at 7:30 for breakfast and then describes and quantifies the coffee in Q4-5. Q6 prompts you to ask "Did you have the juice with that breakfast at 7:30 or was that at another time?" If the respondent answers "Yes, it was the same time," skip Q2 and Q3 and go to Box 1. Transfer the juice to the *Food/Drink and Additions* column. Then ask Q4 and Q5 for the juice.

If the respondent answers "No," ask Q2 "What time did you drink this juice?"

If you recorded a respondent-reported time and/or eating occasion on the Quick List, you can verify that information at this time by saying something like "So you had your juice at 7:30, for breakfast, as well?" If the respondent verifies, skip Q2 and Q3 and go directly to Box 1.

REVIEW: Now let's see if I have everything. I'd like you to try to remember anything else (you/NAME) ate or drank yesterday, that you haven't already told me about, including anything (you/he/she) ate or drank while preparing a meal or while waiting to eat.

- a. At (EARLIEST TIME) (you/NAME) had (FOODS) for (EARLIEST OCCASION). . . Did (you/he/she) have anything to eat or drink before that, starting at midnight?
- b. Next, at (TIME) (you/he/she) had (FOODS) for (OCCASION). . . Did (you/he/she) have anything to eat or drink between (LAST OCCASION) at (LAST TIME) and (THIS OCCASION) at (THIS TIME)?
[REPEAT b FOR EACH OCCASION]
- c. Did (you/he/she) have anything to eat or drink yesterday after (LAST TIME) but before midnight?

Now let's go back to the beginning of the day and find out where (you/NAME), or other people who live here, obtained the food (you/he/she) ate and where (you/he/she) ate it.

- 7. (Looking at this card) Where did (you/he/she) obtain this (FOOD/MOST OF THE INGREDIENTS FOR THIS FOOD)?

HAND
CARD
13

- | | |
|---|--|
| <ul style="list-style-type: none"> 01 STORE, SUCH AS
SUPERMARKET, GROCERY STORE,
OR WAREHOUSE, CONVENIENCE
STORE, DRUG STORE, OR
GAS STATION
SPECIALTY STORE SUCH AS BAKERY,
DELI, SEAFOOD, ETHNIC FOOD,
HEALTH FOOD
COMMISSARY
PRODUCE STAND OR FARMER'S
MARKET 02 RESTAURANT WITH WAITER/WAITRESS
SERVICE 03 FAST FOOD PLACE, PIZZA PLACE 04 BAR, TAVERN, LOUNGE 05 SCHOOL CAFETERIA 06 OTHER CAFETERIA 07 VENDING MACHINE 08 CHILD CARE CENTER, FAMILY DAY
CARE HOME, ADULT DAY CARE | <ul style="list-style-type: none"> 09 SOUP KITCHEN, SHELTER, FOOD PANTRY 10 MEALS ON WHEELS 11 OTHER COMMUNITY FOOD PROGRAM 12 GROWN OR CAUGHT BY YOU OR SOMEONE
YOU KNOW IF FISH OR SEAFOOD, ASK: Did it come from a... <ul style="list-style-type: none"> 71 Freshwater lake, pond, or river 72 The ocean, or 73 A bay, sound, or estuary? 74 DON'T KNOW BODY OF WATER 13 SOMEONE ELSE/GIFT |
|---|--|

SOME OTHER PLACE (PLEASE DESCRIBE)

- 14 MAIL ORDER PURCHASE
- 15 COMMON COFFEE POT OR
SNACK TRAY
- 16 RESIDENTIAL DINING FACILITY
- 17 OTHER (SPECIFY)
- 98 DON'T KNOW

- 8. Did (you/NAME) (eat/drink) this (FOOD) at your home?

IF YES, GO BACK TO Q7 FOR NEXT FOOD.
IF NO, GO TO Q9.

- 9. Before (you/NAME) (ate/drank) this particular (FOOD), was it ever at your home?

REPEAT Q7-9 FOR EACH FOOD.

14.7 Review of Intake

The recall review gives the respondent the opportunity to report any forgotten food items s/he ate the day before. Speak slowly and distinctly to give the respondent the time to think. As you progress through the recall review, encourage the respondent to make corrections or add any additional food items.

First, let the respondent know what is expected by reading the statement in the questionnaire: **"Now let's see if I have everything. I'd like you to try to remember anything else you ate or drank yesterday that you haven't already told me about, including anything you ate or drank while preparing a meal or while waiting to eat."** Then follow with a series of three questions:

Qa This question is asking the respondent to try to remember first whether he/she ate or drank anything else at the first reported eating occasion; and then, whether he/she ate or drank anything between midnight and the first reported eating occasion.

Notice the three dots at the end of the first line of the question. These dots indicate a PAUSE in the question. This pause allows the respondent time to think and respond.

For example, "At 7 a.m. you had one slice of toast with butter and coffee with sugar for breakfast." **PAUSE and look expectantly at the respondent to encourage a response.** Then, "Did you have anything to eat or drink before that, starting at midnight?" If the SP thinks of additional foods after the first pause, record them on the Quick List under the line, then ask the second part of the question and record any additional foods on the Quick List. Go on to Qb and Qc before asking for more information about the additional foods.

DAY ONE FOOD INTAKE QUESTIONNAIRE (Page 2)

REVIEW: Now let's see if I have everything. I'd like you to try to remember anything else (you/NAME) ate or drank yesterday, that you haven't already told me about, including anything (you/he/she) ate or drank while preparing a meal or while waiting to eat.

- a. At (EARLIEST TIME) (you/NAME) had (FOODS) for (EARLIEST OCCASION)...
Did (you/he/she) have anything to eat or drink before that, starting at midnight?
- b. Next, at (TIME) (you/he/she) had (FOODS) for (OCCASION)...
Did (you/he/she) have anything to eat or drink between (LAST OCCASION) at (LAST TIME) and (THIS OCCASION) at (THIS TIME)?
[REPEAT b FOR EACH OCCASION]
- c. Did (you/he/she) have anything to eat or drink yesterday after (LAST TIME) but before midnight?

Now let's go back to the beginning of the day and find out where (you/NAME), or other people who live here, obtained the food (you/he/she) ate and where (you/he/she) ate it.

7. (Looking at this card) Where did (you/he/she) obtain this (FOOD/MOST OF THE INGREDIENTS FOR THIS FOOD)?

HAND
CARD
13

- | | |
|---|---|
| <ul style="list-style-type: none"> 01 STORE, SUCH AS
SUPERMARKET, GROCERY STORE,
OR WAREHOUSE, CONVENIENCE
STORE, DRUG STORE, OR
GAS STATION
SPECIALTY STORE SUCH AS BAKERY,
DELI, SEAFOOD, ETHNIC FOOD,
HEALTH FOOD
COMMISSARY
PRODUCE STAND OR FARMER'S
MARKET 02 RESTAURANT WITH WAITER/WAITRESS
SERVICE 03 FAST FOOD PLACE, PIZZA PLACE 04 BAR, TAVERN, LOUNGE 05 SCHOOL CAFETERIA 06 OTHER CAFETERIA 07 VENDING MACHINE 08 CHILD CARE CENTER, FAMILY DAY
CARE HOME, ADULT DAY CARE | <ul style="list-style-type: none"> 09 SOUP KITCHEN, SHELTER, FOOD PANTRY 10 MEALS ON WHEELS 11 OTHER COMMUNITY FOOD PROGRAM 12 GROWN OR CAUGHT BY YOU OR SOMEONE
YOU KNOW <p>IF FISH OR SEAFOOD, ASK: Did it come from a...</p> <ul style="list-style-type: none"> 71 Freshwater lake, pond, or river 72 The ocean, or 73 A bay, sound, or estuary? 74 DON'T KNOW BODY OF WATER |
|---|---|

- 13 SOMEONE ELSE/GIFT
- SOME OTHER PLACE (PLEASE DESCRIBE)
- 14 MAIL ORDER PURCHASE
 - 15 COMMON COFFEE POT OR
SNACK TRAY
 - 16 RESIDENTIAL DINING FACILITY
 - 17 OTHER (SPECIFY)
 - 98 DON'T KNOW

8. Did (you/NAME) (eat/drink) this (FOOD) at your home?

IF YES, GO BACK TO Q7 FOR NEXT FOOD.
IF NO, GO TO Q9.

9. Before (you/NAME) (ate/drank) this particular (FOOD), was it ever at your home?

REPEAT Q7-9 FOR EACH FOOD.

Qb This question is first asking the respondent to try to remember whether he/she ate or drank anything else at the named eating occasion; and then whether he/she ate or drank anything between the last eating occasion and the named eating occasion.

For example, "Next, at 10 a.m. you had a doughnut for a snack. **PAUSE and look expectantly at the respondent to encourage a response.** Then, "Did you have anything to eat or drink between your breakfast at 7 a.m. and your snack at 10 a.m.?"

Continue repeating this question until you have reviewed all eating occasions listed on the questionnaire grid. Record additional foods on the Quick List.

Qc This question is asking the respondent to try to remember whether he/she had anything else to eat or drink after the last reported time and midnight.

For example, "Did you have anything to eat or drink yesterday after 7 p.m. but before midnight?"

When all the additional foods are recorded on the Quick List after the line, for each food or drink added, ask Q2-Q5 (time, occasion, description, and quantity). When you have completed the record review, draw a line under the last item in column Q4 and write "NOTHING ELSE."

REVIEW: Now let's see if I have everything. I'd like you to try to remember anything else (you/NAME) ate or drank yesterday, that you haven't already told me about, including anything (you/he/she) ate or drank while preparing a meal or while waiting to eat.

- a. At (EARLIEST TIME) (you/NAME) had (FOODS) for (EARLIEST OCCASION). . . Did (you/he/she) have anything to eat or drink before that, starting at midnight?
- b. Next, at (TIME) (you/he/she) had (FOODS) for (OCCASION). . . Did (you/he/she) have anything to eat or drink between (LAST OCCASION) at (LAST TIME) and (THIS OCCASION) at (THIS TIME)?
[REPEAT b FOR EACH OCCASION]
- c. Did (you/he/she) have anything to eat or drink yesterday after (LAST TIME) but before midnight?

Now let's go back to the beginning of the day and find out where (you/NAME), or other people who live here, obtained the food (you/he/she) ate and where (you/he/she) ate it.

7. (Looking at this card) Where did (you/he/she) obtain this (FOOD/MOST OF THE INGREDIENTS FOR THIS FOOD)?

HAND
CARD
13

- | | |
|---|---|
| <ul style="list-style-type: none"> 01 STORE, SUCH AS
 SUPERMARKET, GROCERY STORE,
 OR WAREHOUSE, CONVENIENCE
 STORE, DRUG STORE, OR
 GAS STATION
 SPECIALTY STORE SUCH AS BAKERY,
 DELI, SEAFOOD, ETHNIC FOOD,
 HEALTH FOOD
 COMMISSARY
 PRODUCE STAND OR FARMER'S
 MARKET 02 RESTAURANT WITH WAITER/WAITRESS
 SERVICE 03 FAST FOOD PLACE, PIZZA PLACE 04 BAR, TAVERN, LOUNGE 05 SCHOOL CAFETERIA 06 OTHER CAFETERIA 07 VENDING MACHINE 08 CHILD CARE CENTER, FAMILY DAY
 CARE HOME, ADULT DAY CARE | <ul style="list-style-type: none"> 09 SOUP KITCHEN, SHELTER, FOOD PANTRY 10 MEALS ON WHEELS 11 OTHER COMMUNITY FOOD PROGRAM 12 GROWN OR CAUGHT BY YOU OR SOMEONE
 YOU KNOW <p>IF FISH OR SEAFOOD, ASK: Did it come from a...</p> <ul style="list-style-type: none"> 71 Freshwater lake, pond, or river 72 The ocean, or 73 A bay, sound, or estuary? 74 DON'T KNOW BODY OF WATER |
|---|---|

13 SOMEONE ELSE/GIFT

SOME OTHER PLACE (PLEASE DESCRIBE)

- 14 MAIL ORDER PURCHASE
- 15 COMMON COFFEE POT OR
 SNACK TRAY
- 16 RESIDENTIAL DINING FACILITY
- 17 OTHER (SPECIFY)
- 98 DON'T KNOW

8. Did (you/NAME) (eat/drink) this (FOOD) at your home?

IF YES, GO BACK TO Q7 FOR NEXT FOOD.
IF NO, GO TO Q9.

9. Before (you/NAME) (ate/drank) this particular (FOOD), was it ever at your home?

REPEAT Q7-9 FOR EACH FOOD.

14.8 Where Obtained and Where Eaten

Complete Q2 through Q6 and the REVIEW before asking Question 7. Q7 through Q9 ask the respondent where he/she obtained the food; if it was eaten at home; and, if eaten away, whether it was ever in the home. Begin at the top of the list of foods in the *Food/Drink and Additions* column and ask these questions for every food that has a quantity or "DK Amount" recorded in column Q5 on the questionnaire grid.

Q7 Read the introductory sentence and hand the respondent Hand Card I3, then read Q7. Card I3 is the same list as in Q7 except it does not list the items under either code 12 - ("Grown or Caught by You or Someone You Know"), or "Some Other Place." Do not read the categories unless you suspect the respondent has difficulty reading.

The first time you read the question, the respondent may not understand what is meant and answer something like, "from the refrigerator" or "from the cupboard." In this case, say, "Where did you or someone else in your household obtain the (FOOD) before it came into your home?" Children are likely to say "from my Mom or Dad" in which case you will clarify by saying something like, "Where did your mom or dad get it?" In other words, you want to know the household's source of the food.

Often the respondent will have obtained the items eaten at the same occasion from more than one source. For example, he/she could have caught the fish in a lake (71), bought the bread at the store (01), and grown most of the ingredients for his/her salad in the garden (09). A child may get his/her sandwich and milk from the school cafeteria (05), but a cookie from the friend who was sitting next to her/him (13).

DAY ONE FOOD INTAKE QUESTIONNAIRE (Page 6)

REVIEW: Now let's see if I have everything. I'd like you to try to remember anything else (you/NAME) ate or drank yesterday, that you haven't already told me about, including anything (you/he/she) ate or drank while preparing a meal or while waiting to eat.

- a. At (EARLIEST TIME) (you/NAME) had (FOODS) for (EARLIEST OCCASION) ... Did (you/he/she) have anything to eat or drink before that, starting at midnight?
- b. Next, at (TIME) (you/he/she) had (FOODS) for (OCCASION) ... Did (you/he/she) have anything to eat or drink between (LAST OCCASION) at (LAST TIME) and (THIS OCCASION) at (THIS TIME)?
[REPEAT b FOR EACH OCCASION]
- c. Did (you/he/she) have anything to eat or drink yesterday after (LAST TIME) but before midnight?

Now let's go back to the beginning of the day and find out where (you/NAME), or other people who live here, obtained the food (you/he/she) ate and where (you/he/she) ate it.

- 7. (Looking at this card) Where did (you/he/she) obtain this (FOOD/MOST OF THE INGREDIENTS FOR THIS FOOD)?

HAND
CARD
13

- | | |
|---|--|
| <ul style="list-style-type: none"> 01 STORE, SUCH AS
SUPERMARKET, GROCERY STORE,
OR WAREHOUSE, CONVENIENCE
STORE, DRUG STORE, OR
GAS STATION
SPECIALTY STORE SUCH AS BAKERY,
DELI, SEAFOOD, ETHNIC FOOD,
HEALTH FOOD
COMMISSARY
PRODUCE STAND OR FARMER'S
MARKET 02 RESTAURANT WITH WAITER/WAITRESS
SERVICE 03 FAST FOOD PLACE, PIZZA PLACE 04 BAR, TAVERN, LOUNGE 05 SCHOOL CAFETERIA 06 OTHER CAFETERIA 07 VENDING MACHINE 08 CHILD CARE CENTER, FAMILY DAY
CARE HOME, ADULT DAY CARE | <ul style="list-style-type: none"> 09 SOUP KITCHEN, SHELTER, FOOD PANTRY 10 MEALS ON WHEELS 11 OTHER COMMUNITY FOOD PROGRAM 12 GROWN OR CAUGHT BY YOU OR SOMEONE
YOU KNOW IF FISH OR SEAFOOD, ASK: Did it come from a... <ul style="list-style-type: none"> 71 Freshwater lake, pond, or river 72 The ocean, or 73 A bay, sound, or estuary? 74 DON'T KNOW BODY OF WATER 13 SOMEONE ELSE/GIFT <u>SOME OTHER PLACE (PLEASE DESCRIBE)</u> <ul style="list-style-type: none"> 14 MAIL ORDER PURCHASE 15 COMMON COFFEE POT OR
SNACK TRAY 16 RESIDENTIAL DINING FACILITY 17 OTHER (SPECIFY) 98 DON'T KNOW |
|---|--|

- 8. Did (you/NAME) (eat/drink) this (FOOD) at your home?

IF YES, GO BACK TO Q7 FOR NEXT FOOD.
IF NO, GO TO Q9.

- 9. Before (you/NAME) (ate/drank) this particular (FOOD), was it ever at your home?

REPEAT Q7-9 FOR EACH FOOD.

If more than one code seems equally appropriate, describe the situation in the margin.

Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?	Q7 Where Obtained (HAND CARD 13)	Q8 Eaten At Home	Q9 Ever At Home
1. Fish	no coating, no salt, no adds Perch, Fresh Fillet, baked	1 med Fillet	71	YES 1 (Q7) NO 2	YES 1 NO 2
2. bread	white, not presliced, no adds Italian, bakery, not toasted	1 rec 2x2x1H	01	YES 1 (Q7) NO 2	YES 1 NO 2
3. Salad	lettuce 1/2c	Ate All	09	YES 1 (Q7) NO 2	YES 1 NO 2
4.	tomato 1/2 med	↓	↓	YES 1 (Q7) NO 2	YES 1 NO 2
5.	Cucumber 1/4	↓	↓	YES 1 (Q7) NO 2	YES 1 NO 2
6.				YES 1 (Q7) NO 2	YES 1 NO 2

For foods prepared at home, it is possible that the ingredients came from more than one source. Therefore, for foods prepared at home and having only one amount in Q5, ask, “Where did you obtain most of the ingredients for this (FOOD)?”

If the respondent mentioned the source of the food earlier in the interview (e.g., McDonald’s hamburger), you may ask Q7 in the confirmatory manner. For example, you may say, “You obtained the hamburger from a fast-food place. Is that correct?”

Defining the Source: Let the respondent choose the source from the hand card. There may be situations, however, where you need to help the respondent decide the source of the food item or code, you need to the source based on the respondent's description.

Code 01 - This code refers to any type of store. It also includes gas stations, produce stands, and farmers' markets. If the respondent uses the word "store" in his/her answer, use this code. Other stores that might sell food include toy stores and department stores.

Code 02 and 03 - Code 02 refers to a restaurant and code 03 refers to a fast food place or a pizza place. A restaurant is distinguished from a fast food place by waiter/waitress service. If a respondent is not sure which answer to choose, ask him/her if the place has waiters and waitresses. If the response is "yes" code 02. If the response is "no," the source is either a fast food place or a cafeteria. Respondents can usually distinguish between fast food places and cafeterias.

If the respondent reports "pizza place," do not be concerned about the type of service and use code 03. Pizzas that are delivered should be coded as coming from a pizza place (code 03).

Code 04 - This code includes bars, taverns, cocktail lounges and other "drinking places." If a respondent is having difficulty deciding between codes 02 and 04, ask him/her if s/he considers the place to be an "eating place" or a "drinking place."

Code 05 - This code refers to a school cafeteria. It means food provided by the school cafeteria, not food that the respondent may have gotten from a friend at school (See code 13). Remember, this question asks about the source of the food, not the location where it was eaten.

Code 06 - This code, "other cafeteria," means other than a school cafeteria.

Code 08 - This code includes child care centers and day care centers for children. It also includes family day care homes, which are private homes where infants and children are often cared for. The distinction between a family day care home and "someone else(s)" home (code 13) is that the family day care home provides day care for a fee; that is, it is paid "babysitting." This code also includes places that provide day care for adults.

Code 09 - This code refers to emergency food sources and includes soup kitchens, shelters for the homeless, battered women, etc., and food pantries and food banks that provide food for people who cannot afford to buy food for themselves. This code describes a higher level of desperation than the food assistance programs included in code 11.

Code 10 - "Meals on Wheels" is a community program that provides meals to home-bound elderly and disabled persons.

Code 11 - This code refers to community food assistance programs other than those in code 09 and 10, that provide food to recipients on a regular basis rather than on an emergency basis. For instance:

- Women, Infants, and Children (WIC) program when the respondent's food came directly from the WIC office rather than from a store using WIC vouchers (which would be coded 01).
- Senior citizens centers that offer meals on a regular basis, and state and federally-sponsored congregate meal sites.

Code 12 - This code, "grown or caught by you or someone you know," refers to vegetables from the garden and other home-grown foods, fish that was caught, and also game, such as deer, that was hunted.

If the respondent reports that the fish (or seafood) eaten was caught by him/her or someone he/she knows, ask "Did it come from a freshwater lake, pond, or river; the ocean; or bay, sound, or estuary?" (An estuary is a place where fresh water flows into salt water, such as where a river flows into the sea.)

If the respondent is the fisherman, he/she will probably know the answer to this question. Record one of the following answers in column Q7:

- 71 for freshwater lake, pond, or river;
- 72 for the ocean;
- 73 for a bay, sound or estuary; and
- 74 if the respondent does not know the type of body of water where the fish was caught.

Code 13 - This code includes gifts and foods that were prepared or eaten in someone else's home. It includes all sources not listed elsewhere when the respondent (or another household member) did not pay for the food.

Code 14 - This code only includes foods purchased by mail order. It does not include gifts that may have arrived by mail (which would be coded 13).

Code 15 - This code refers to a common coffee pot or snack tray. Such sources are often found in office building or other work sites.

Code 16 - This code refers to residential dining facilities. For example, a senior citizen community where the meals are taken outside of the living quarters, perhaps in a dining hall would be coded 16.

If the answer reported as a specified "Some other place" does not fall into an existing code, enter code 17 and write the answer given in column Q7. Similarly, if you are not sure how to code a respondent's answer, record the answer verbatim.

Q8 This question asks if the food item was consumed "at the respondent's home." The definition of "your home" is the respondent's dwelling unit and the surrounding area that is used solely by the occupants of that dwelling unit. For example, foods eaten in the backyard would be eaten "at home."

If the respondent ate the food at home, circle "YES," and you are finished documenting that food item. The box instructs you to go back to Q7 for the next food.

Once you have determined that the first food item in a particular eating occasion was eaten at home, you may ask Q8 for the remaining items eaten at that time in a confirmatory manner. For example, you may say, "And you ate the cake and drank the coffee at home?"

If the answer is "NO," go to Q9 to find out whether the food was ever in the home before the respondent ate/drank it.

Q9 This question asks those respondents that reported eating a food item(s) away from home in Q8, whether that particular food(s) was ever in the home before it was eaten.

For example, suppose a respondent reported that for lunch, he had some left-over pizza, a soda, and an apple. He got the pizza from a pizza place (Q7 =03) and ate it at work (Q8 =NO). When you ask Q9 for the pizza, you find out that this particular pizza had been at his home before he ate it (Q8 =YES). He got the soda from the cafeteria at work (Q7 =06), and drank it at work (Q8 =NO). It was never in his home (Q9 =NO). He got a bag of apples from a supermarket and brought them home (Q7=01), and ate one of the apples at work (Q8=NO). This particular apple had been in his home before he ate it (Q9=YES).

Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?	Q7 Where Obtained (HAND CARD I3)	Q8 Eaten At Home	Q9 Ever At Home
1. Pizza	Dominos plain, thin crust	16" d - 851 ate 251	03	YES 1 (Q7) NO 2	YES 1 NO 2
2. Soda	Coke, not decaf, reg	12 Fp	06	YES 1 (Q7) NO 2	YES 1 NO 2
3. Apple	Fresh, no adds	1 Med	01	YES 1 (Q7) NO 2	YES 1 NO 2
4.				YES 1 (Q7) NO 2	YES 1 NO 2

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Common Sources: If Q8 revealed that the first food item in a particular eating occasion was not eaten at home and was never in the home (Q8 =NO and Q9= NO) and its source (Q7) was a restaurant (02), fast-food or pizza place (03), or cafeteria other than a school cafeteria (06), you may ask Q8 and Q9 for the source in a confirmatory manner.

For example, a respondent had reported that the source of the egg drop soup he had for lunch was a restaurant (Q7 =02), it was not eaten at home (Q8 =NO), and it had never been in his home (Q9=NO). The next item was an egg roll, which also came from the same restaurant (Q7 =02). Because it is virtually impossible that other items eaten with the soup were eaten at home or were ever in the home, you may say something like, “And the egg roll was not eaten at home and was never in your home. Is that correct?”

Food/Drink and Additions	Q4 Description of Food/Drink and Ingredient Amount	Q5 How much of this (FOOD) did you actually (eat/drink)?	Q7 Where Obtained (HAND CARD IS)	Q8 Eaten At Home	Q9 Ever At Home
1. egg drop soup	DK Form, NO Adds	1c	02	YES 1 (07) NO (2)	YES 1 NO (2)
2. Egg roll	Celery, bean sprouts, no sauce pork, flour wrapper, no brand	1 med	02	YES 1 (07) NO (2)	YES 1 NO (2)
3. Kung Pao Chix	Sauce-DK kind, no brand breast, rice, peas, no Adds	1c	02	YES 1 (07) NO (2)	YES 1 NO (2)
4. Fortune Cookie	DK type, DK brand, NO Adds	1 med	02	YES 1 (07) NO (2)	YES 1 NO (2)

It is possible that a respondent may remember more foods as he/she thinks about the source of the food and where it was eaten. In that case, record the food in the Quick List and continue with Q7 through Q9. When you finish Q9 for the last food amount in Q5, go back to the foods on the Quick List and ask Q2 through Q5 for each food, and then Q7 through Q9.

10. Was the amount of food that (you/NAME) ate yesterday about usual, less than usual, or more than usual?

USUAL 1 (Q13)
 LESS THAN USUAL 2 (Q11)
 MORE THAN USUAL 3 (Q12)

11. What is the main reason the amount (you/NAME) ate yesterday was less than usual?

SICKNESS	01	} (Q13)
SHORT OF MONEY	02	
TRAVELING	03	
AT A SOCIAL OCCASION OR ON A SPECIAL DAY	04	
ON VACATION	05	
TOO BUSY	06	
NOT HUNGRY	07	
DIETING	08	
FASTING	09	
BORED OR STRESSED	10	
SOME OTHER REASON (SPECIFY)	11	

"At a friend's"

12. What is the main reason the amount (you/NAME) ate yesterday was more than usual?

TRAVELING	1
AT A SOCIAL OCCASION OR ON A SPECIAL DAY	2
ON VACATION	3
VERY HUNGRY	4
BORED OR STRESSED	5
SOME OTHER REASON	6
(SPECIFY)	

13. HAND
CARD
14 What type of salt, if any, (do you/does NAME) add to (your/his/her) food at the table? Would you say it is ordinary salt, seasoned salt, lite salt, or a salt substitute?

ORDINARY SALT/SEA SALT	1
SEASONED SALT OR OTHER FLAVORED SALT	2
LITE SALT	3
SALT SUBSTITUTE	4
NONE	5 (Q15)
DON'T KNOW	8 (Q15)

14. How often (do you/does NAME) add (ANSWER IN Q13) to (your/his/her) food at the table? Is it always, frequently, sometimes, or rarely?

ALWAYS	1
FREQUENTLY	2
SOMETIMES	3
RARELY	4

14.9 Health-Related Questions

Questions 10-41 and A-F are documented in a typical questionnaire format rather than the 24-hour Intake grid.

Q10-12 These questions are asking the respondent to make a judgment as to whether the amount of food and drink reported in the 24-hour recall was typical, or less or more than usual. The respondent may have difficulty deciding whether the intake reported was really different from usual. Don't lead the respondent -- let him/her decide. If the respondent asks you to define the terms, just repeat the question. Remind the respondent that it is his/her judgement.

Q11 This question is asking the respondent to give a reason for eating less than usual "yesterday." Ask the respondent for the best description as to why his/her intake was less than usual.

These precoded responses in the questionnaire are NOT to be read aloud. Do not offer any of the reasons to the respondent, instead have the respondent explain the reason for the unusual consumption and attempt to code it as one of the responses listed. If there is more than one reason given, probe for best answer.

If the precoded responses do not apply to the respondent's description, code the response as "Some other reason" and record the respondent's words verbatim.

Q12 This question is asking the respondent to give a reason for eating more than usual "yesterday." If there is more than one reason given, probe for the best description as to why his/her intake was more than usual.

Do not read the response categories.

If the precoded responses do not apply to the respondent's description, code the response as "Some other reason" and record the respondent's words verbatim.

10. Was the amount of food that (you/NAME) ate yesterday about usual, less than usual, or more than usual?

USUAL 1 (Q13)
 LESS THAN USUAL 2 (Q11)
 MORE THAN USUAL 3 (Q12)

11. What is the main reason the amount (you/NAME) ate yesterday was less than usual?

SICKNESS 01
 SHORT OF MONEY 02
 TRAVELING 03
 AT A SOCIAL OCCASION OR
 ON A SPECIAL DAY 04
 ON VACATION 05
 TOO BUSY 06
 NOT HUNGRY 07
 DIETING 08
 FASTING 09
 BORED OR STRESSED 10
 SOME OTHER REASON (SPECIFY) 11
 "At a friends" _____

(Q13)

12. What is the main reason the amount (you/NAME) ate yesterday was more than usual?

TRAVELING 1
 AT A SOCIAL OCCASION OR
 ON A SPECIAL DAY 2
 ON VACATION 3
 VERY HUNGRY 4
 BORED OR STRESSED 5
 SOME OTHER REASON 6
 (SPECIFY) _____

13. HAND CARD I4 What type of salt, if any, (do you/does NAME) add to (your/his/her) food at the table? Would you say it is ordinary salt, seasoned salt, lite salt, or a salt substitute?

*Uses Ordinary Salt
 and lite Salt
 equally*

ORDINARY SALT/SEA SALT 1
 SEASONED SALT OR OTHER
 FLAVORED SALT 2
 LITE SALT 3
 SALT SUBSTITUTE 4
 NONE 5 (Q15)
 DON'T KNOW 8 (Q15)

14. How often (do you/does NAME) add (ANSWER IN Q13) to (your/his/her) food at the table? Is it always, frequently, sometimes, or rarely?

ALWAYS 1
 FREQUENTLY 2
 SOMETIMES 3
 RARELY 4

Q13

This question asks about the type of "salt" the respondent uses. The question specifically asks about salt or salt-substitutes that are added at the table. Before asking the question, show the respondent Hand Card I4. Do not define any of the choices listed to the respondent.

If the respondent reports adding salt in cooking, but "not at the table", the answer would be "None."

This question specifies usual behavior.

- If a respondent usually adds ordinary salt to his/her food at the table, but uses salt substitute on occasion, select "ordinary salt."
- If, on the other hand, the respondent says "I use both ordinary and lite salt at the table," probe as to which he/she uses most often.
- If the respondent reports using both "ordinary salt" and "lite salt" equally, write that out in the margin of the question.
- If, after probing, the respondent does not know the type of salt (e.g., because the spouse does all the shopping and puts "something" in the salt shaker), select "Don't Know" response.
- If the respondent is not sure that the product he/she used was salt, record the name of the product in the margin. For example, record "Uses Mrs. Dash."

When interviewing a proxy, substitute the SP's name and sex appropriately. For example, "What type of salt, if any, does Jimmy add to his food at the table?" If the proxy is for a child too young to be adding salt, you may modify the question slightly, such as "What type of salt, if any, is added to Jimmy's food at the table?"

Q14

This question is asking the respondent about frequency of salt use. Again, the question specifically asks about salt or salt-substitutes that are added at the table.

HAND
CARD
15

Now I'd like you to think about all of the plain drinking water that (you/NAME) had yesterday, regardless of where (you/he/she) drank it. By plain drinking water, I mean tap water or any bottled water that is not carbonated, with nothing added to it, not even lemon.

15. How many ounces of plain drinking water did (you/he/she) drink yesterday?

10 | 3 | 2 |
OUNCES

NONE000 (Q18)

16. How much of this plain drinking water came from your home? Would you say all, most, some, or none?

ALL 1 (Q18)
MOST ②
SOME 3
NONE 4

17. What was the main source of plain drinking water that did not come from your home? Was it tap water, water from a drinking fountain, bottled water, or something else?

TAP WATER AND/OR DRINKING FOUNTAIN 1
BOTTLED WATER 2
OTHER SOURCE 3
(SPECIFY) _____
DON'T KNOW 8

|||

18. (Are you/Is NAME) on any kind of diet either to lose weight or for some other health-related reason?

YES 1
NO 2 (Q22)

Q15 This question asks the respondent for an estimate of the number of fluid ounces of water consumed "Yesterday" (not including coffee, tea, fruit drinks and flavored water). This does not include water used to make alcoholic drinks, fruit juices, or infant formula. It does include water from a drinking fountain. "Yesterday" refers to the same 24-hour period as the food intake.

Read the introduction statement before Q15 emphasizing plain drinking water. Show the respondent Hand Card I5 to distinguish between types of water. If the respondent reports "don't know," probe for the closest estimate.

Be sure to zero fill the number of ounces if the response is less than 100 (e.g., 016, 020, etc.)

You may find the respondent can report the amount of water drunk in cup measures but not in ounces. If this is the case, write the cup amounts out to the side of the question. The Westat reviewers will convert the cup quantities to ounces when they are coded.

- For example, if a respondent has difficulty giving you an amount in ounces, say: "Using the cups and spoons, can you give me an estimate of how much water you drank yesterday?" If the respondent reports "about 2 cups", write "2 cups" to the left of the "OUNCES" line.
- If the respondent reports water intake in a series such as : "I had 2 cups of water in the morning, 1/2 cup while at my desk at lunch, and 2 more cups before bed" record all amounts to the left of the "OUNCES" line. Add up the cups and record a total amount.
- If the respondent has used a glass in the home for water, have him/her fill the glass with an approximately equal amount of water and measure the water using the 2-cup plastic measuring cup. Write the number of ounces to the left of the "OUNCES" line then ask the respondent for the number of times he/she drank the glass of water and record. For example 8 ounces x 5 times.

Q16-17 These questions are asking the source of the water reported in question Q15. "From your home" refers to the main source of water used in the home for drinking water, that is, the answer given to household Q20.

Q16 This question asks how much of the water reported in Q15 came from this "home" source.

HAND
CARD
15

Now I'd like you to think about all of the plain drinking water that (you/NAME) had yesterday, regardless of where (you/he/she) drank it. By plain drinking water, I mean tap water or any bottled water that is not carbonated, with nothing added to it, not even lemon.

15. How many ounces of plain drinking water did (you/he/she) drink yesterday?

10 | 3 | 2 |
OUNCES

NONE 000 (Q18)

16. How much of this plain drinking water came from your home? Would you say all, most, some, or none?

ALL 1 (Q18)

MOST 2

SOME 3

NONE 4

17. What was the main source of plain drinking water that did not come from your home? Was it tap water, water from a drinking fountain, bottled water, or something else?

TAP WATER AND/OR DRINKING FOUNTAIN 1

BOTTLED WATER 2

OTHER SOURCE 3

(SPECIFY) a stream | | |

DONT KNOW 8

*SP
was
Camping
yesterday*

18. (Are you/Is NAME) on any kind of diet either to lose weight or for some other health-related reason?

YES 1

NO 2 (Q22)

Q17 This question asks the respondent to identify the main source of the water that did not come from the home. The choices are listed within the question. If the respondent reports that the water came from somewhere else, code as "Other Source" and specify. "Tap water" includes any water coming from a tap or faucet regardless of the original source.

Q18 The meaning of "diet" refers to a conscious change in the foods and/or beverages the respondent is consuming. Either the amount and/or the kinds of items may be different to constitute a "diet."

If a respondent reports following a diet because his/her spouse is on one, s/he is not "following a diet for weight loss or other health-related reasons." The question is asking if the SP has his/her own health-related reason for following a diet. Circle 2 for a "NO" response.

Although it is rare that a young child would be on a weight loss diet, even the youngest infant may be on special formulas for health related reasons such as milk allergies. For example, if a baby is given a special formula such as Nutramigen because of allergies to humans or cow's milk, the respondent may consider this a special diet.

CIRCLE ALL THAT APPLY AND ASK Q20 AND Q21 IN SEQUENCE FOR EACH DIET CIRCLED.

		WEIGHT LOSS OR LOW CALORIE DIET	LOW FAT OR CHOLESTEROL DIET	LOW SALT OR SODIUM DIET	SUGAR FREE OR LOW SUGAR DIET	LOW FIBER DIET	HIGH FIBER DIET	DIABETIC DIET	OTHER DIET (SPECIFY)
19.	HAND CARD 16 Looking at this card, please tell me which of these diets (you are/NAME is) on.	01	02	03	04	05	06	07	08 [] []
20.	(Are you/Is NAME) on this (ANSWER IN Q19) because . . .	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	A doctor or dietitian suggested or prescribed it?	(1) 2	1 2	1 2	1 2	1 2	(1) 2	1 2	1 2
	A medical condition runs in your family?	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2
	You joined another person on his/her diet?	(1) 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2
	You want to maintain or improve your health?	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2
	You want to lose weight?	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2
	Some other reason?	1 2	1 2	1 2	1 2	1 2	1 2	1 2	
	(IF YES, SPECIFY)	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []
21.	HAND CARD 17 Looking at this card, please tell me which of these best describes the source of (your/his/her) (ANSWER IN Q19). (CODE ONLY ONE)								
	AN ORGANIZED WEIGHT LOSS PROGRAM	(1)	1	1	1	1	(1)	1	1
	A DOCTOR OR DIETITIAN	2	2	2	2	2	2	2	2
	SOMETHING YOU READ OR HEARD ABOUT	3	3	3	3	3	3	3	3
	SOMETHING YOU MADE UP	4	4	4	4	4	4	4	4
	SOMETHING ELSE	5	5	5	5	5	5	5	5
	(SPECIFY UNDER CODE 5)	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []	(SPECIFY) [] []

Q19-21 These questions are in a grid form and are only asked of respondents who answered YES to Q18. Q19 is asking the respondent to identify all diets he/she is following. Q20 asks the respondent why he/she is following the diets identified in Q19, and Q21 asks for the source of the diets identified in Q19.

Q19 Before asking the question, show Hand Card I6 to the respondent. Circle all responses and record verbatim any "Other Diet" responses. If the respondent gives a general answer such as "For my heart," probe for a better description. For example, ask: "What kind of foods do you avoid?" If the respondent cannot describe, record under "Other Diet."

Q20-21 You will ask Questions 20 and 21 in order for each diet specified in Q19 before moving onto Q20-Q21 for the next diet specified. That is, ask Q19 going across and Questions 20 and 21 going down and then across.

Q20 Ask the respondent if he/she is on the diet specified in Q19 for each of the six reasons specified. Wait for a YES/NO response before asking if the next reason applies. If the respondent answers "YES" for "Some Other Reason," record the respondent's reason verbatim on the (SPECIFY) line.

Multiple "YES" (Code 1) responses are allowed.

Q21 Before asking this question show Hand Card I7 to the respondent. If the respondent attempts to give multiple sources, probe for the 'best source.'

An "organized weight loss program" includes groups like Weight Watchers and Nutra-System.

22. Do you consider (yourself/NAME) to be a vegetarian?

YES 1
NO 2

23. How often, if at all, (do you/does NAME) take any vitamin or mineral supplement in pill or liquid form? Would you say every day or almost every day, every so often, or not at all?

EVERY DAY OR ALMOST
EVERY DAY 1
EVERY SO OFTEN 2
NOT AT ALL 3 (Q26)

24.

HAND
CARD
18

Looking at this card, which of these types of supplements (do you/does NAME) usually take... a multivitamin; multivitamin with iron or other minerals; combination of Vitamin C and iron; or single vitamins or minerals? (CIRCLE ALL THAT APPLY)

MULTIVITAMIN 1
MULTIVITAMIN WITH IRON
OR OTHER MINERALS 2
COMBINATION OF VITAMIN C
AND IRON 3
SINGLE VITAMINS/MINERALS 4

BOX 2

IS "4" CIRCLED IN Q24?

YES 1 (Q25)
NO 2 (Q26)

25.

HAND
CARD
19

Looking at this card, which of these single vitamins and minerals (do you/does he/she) usually take? (CIRCLE ALL THAT APPLY)

VITAMIN A 01
VITAMIN B/B COMPLEX 02
VITAMIN C 03
VITAMIN D 04
VITAMIN E 05
CALCIUM 06
FOLACIN 07
FLUORIDE 08
IRON 09
ZINC 10
SELENIUM 11
CHROMIUM 12
SOMETHING ELSE (SPECIFY) 13

Q22 This question determines whether the respondent "considers" himself/herself to be a vegetarian. Don't elaborate on this question. If the respondent asks for a definition or a more detailed description of a vegetarian, just repeat the question.

If the respondent just reported eating meat in the 24-hour recall, and expresses dismay at this question, you may say something like "I must ask every question for every person selected for the survey."

In some situations you will be asking this question of proxies who will be making a judgement for the sampled person. If the proxy seems surprised, you may say "I must ask every question for every person selected for the survey." Tell the proxy to use his/her best judgment in answering.

Q23 This question is asking the respondent about his/her current use of dietary supplements in pill or liquid form that are taken by mouth therefore B-12 shots are not considered supplements.

Q24 This question is asking the respondent the type(s) of vitamins used. REMEMBER, MORE THAN ONE CODE CAN BE CIRCLED. Each circled code represents a type of vitamin or mineral taken.

Have the respondent refer to Hand Card I8 while you read the answer categories.

If the respondent is not sure what type of vitamins and minerals he/she is taking, ask to see the bottle(s). The label on the front of the bottle will tell you whether it is a single nutrient capsule/pill, that is, it contains only one nutrient, or in a multivitamin/mineral form.

22. Do you consider (yourself/NAME) to be a vegetarian?

YES 1
NO 2

23. How often, if at all, (do you/does NAME) take any vitamin or mineral supplement in pill or liquid form? Would you say every day or almost every day, every so often, or not at all?

EVERY DAY OR ALMOST
EVERY DAY 1
EVERY SO OFTEN 2
NOT AT ALL 3 (Q26)

24. HAND
CARD
18 Looking at this card, which of these types of supplements (do you/does NAME) usually take... a multivitamin; multivitamin with iron or other minerals; combination of Vitamin C and iron; or single vitamins or minerals? (CIRCLE ALL THAT APPLY)

MULTIVITAMIN 1
MULTIVITAMIN WITH IRON
OR OTHER MINERALS 2
COMBINATION OF VITAMIN C
AND IRON 3
SINGLE VITAMINS/MINERALS 4

BOX 2

IS '4' CIRCLED IN Q24?

YES 1 (Q25)
NO 2 (Q26)

25. HAND
CARD
19 Looking at this card, which of these single vitamins and minerals (do you/does he/she) usually take? (CIRCLE ALL THAT APPLY)

VITAMIN A 01
VITAMIN B/B COMPLEX 02
VITAMIN C 03
VITAMIN D 04
VITAMIN E 05
CALCIUM 06
FOLACIN 07
FLUORIDE 08
IRON 09
ZINC 10
SELENIUM 11
CHROMIUM 12
SOMETHING ELSE (SPECIFY) 13

|_|_|

Q25

This question asks the respondent to identify the single vitamin/mineral supplements he/she usually takes. "Single" refers to vitamins and mineral capsules or pills that contain only one nutrient. Multivitamins or multivitamins with minerals are a combination of nutrients.

Before asking this question, show Hand Card I9 to the respondent.

If the respondent says "Something else", record verbatim what else is taken. Do not make a judgment as to whether or not this is a vitamin or mineral supplement, but confirm that it is in a pill or liquid form.

26. (Do you/Does NAME) take a fish oil supplement?

YES 1
NO 2

27. (Do you/Does he/she) take a fiber supplement?

YES 1
NO 2

28. (Have you/Has NAME) ever had (your/his/her) blood cholesterol checked?

YES 1
NO 2
DONT KNOW 8

29. How tall (are you/is he/she) without shoes?

5 | 10 | 2 |
FEET INCHES

30. About how much (do you/does NAME) weigh without shoes?

10 | 9 | 8 |
POUNDS

31. In general, would you say (your/his/her) health is excellent, very good, good, fair, or poor?

EXCELLENT 1
VERY GOOD 2
GOOD 3
FAIR 4
POOR 5

Q26-27 These questions ask the respondent about consumption of fish oil or fiber supplements. Do not explain what is meant by "fish oil" or "fiber" supplements. If the respondent is currently taking either of these supplements, he/she will know.

The respondent should not include food items, such as high-fiber cereals, as a fiber supplement.

Q28 This question asks about ever having a blood cholesterol level check. It does not ask whether the respondent knows what their blood cholesterol level is.

Q29 This question refers to height without shoes. Record whatever answer the respondent gives you. If respondent is uncertain, obtain their best estimate.

Q30 This question refers to weight without shoes or heavy clothing. Record whatever answer the respondent gives you. This may be a sensitive question. Ask in a neutral manner and don't comment. If respondent is uncertain, obtain their best estimate.

Be sure to zero fill the leading digit(s) if the response is less than 100 lbs. (e.g., 072, 054, 009, etc.).

If the sample person is an infant, whose weight is typically reported in pounds and ounces, record the response in the margin to the left of the "Pounds" box.

Q31 This question asks about the respondent's perception of his/her health at the present time. If a proxy is answering, record the proxy's answer for his or her perception of the sample person. Circle only one code. Do not define the responses.

32. (Do you/Does NAME) have any food allergies that make it necessary to avoid certain foods?

YES ①
NO 2 (Q34)

33. What food allergies (do you/does NAME) have? (CIRCLE ALL THAT APPLY.)

WHEAT 01
COW'S MILK 02
EGGS 03
FISH OR SHELLFISH 04
CORN 05
PEANUTS 06
OTHER NUTS 07
SOY PRODUCTS 08
OTHER (SPECIFY) ⑨

Chocolate

1 1 1

34. Has a doctor ever told (you/NAME) that (you have/he/she has): (CIRCLE A NUMBER FOR EACH)

	YES	NO
Diabetes?	1	②
High blood pressure (Hypertension)?	1	②
Heart disease?	1	②
Cancer?	1	②
Osteoporosis?	1	②
High blood cholesterol?	1	②
Stroke?	1	②

35. How many hours did (you/NAME) watch television or videotapes yesterday?

1 0 9 1
OF HOURS

BOX 3

SAMPLE PERSON IS ...

LESS THAN 12 YEARS OF AGE 1 (TIME ENDED)
12 YEARS OF AGE OR OLDER ② (Q36)

Q32-33 These questions ask about any food allergies the sampled person may have. If the respondent reports food allergies (Q32), ask the follow-up question (Q33). Do not read the list of common food allergies. Allow the respondent to report his/her particular allergy(s). After each food reported, ask "Anything else?" until the answer is "NO."

Q34 This question asks the respondent about specific diseases that the respondent has now, or has had in the past. Emphasize that the respondent must have been told by a doctor that he or she has or had the disease.

The question should be asked for each disease listed and a "YES" or "NO" response should be recorded. Do not attempt to define any condition.

Q35 This question is specifically asking about the amount of T.V. or videotapes watched yesterday. Make sure the respondent realizes the question is about "yesterday," the same 24-hour period as the food intake recall.

If the number of hours is less than 10, be sure to zero fill the first digit (e.g. 01, 02, 03, etc.)

If the respondent reports by the 1/2 hour or in minutes, write in the total amount reported in the margin. (Do not round.)

Do not include the hours the SP may have spent playing video games, such as Nintendo.

BOX 3 If the sample person is under 12 years of age, skip to the time ended on page 16 and thank the respondent. Complete the observation questions as quickly as possible before leaving the household. If this is not possible, make sure you answer Q.F before leaving the household and complete the form as soon as possible after leaving the household. If the sample person is 12 years or older, continue with Q36.

36. How often do you exercise vigorously enough to work up a sweat?

DAILY 1
5-6 TIMES PER WEEK 2
2-4 TIMES PER WEEK 3
ONCE A WEEK 4
1-3 TIMES PER MONTH 5
RARELY OR NEVER 6

37. Have you smoked 100 or more cigarettes during your entire life?

YES 1
NO 2 (Q40)

38. Do you smoke cigarettes now?

YES 1
NO 2 (Q40)

39. On average, how many cigarettes per day do you smoke?

|_|_|_|
PER DAY

40. The last few questions are about alcoholic beverages, including beer, ale, wine, wine coolers, liquor such as whiskey, rum, gin, and vodka, and mixed drinks containing liquor.

During the past 12 months, that is, since last (NAME OF MONTH), have you consumed any alcoholic beverage?

YES 1
NO 2 (TIME ENDED)

41. During the past 12 months, have you consumed any:

	YES	NO
Beer or ale?	1	2
Wine or wine coolers?	1	2
Liquor, such as whiskey, rum, gin, or vodka, or mixed drinks containing liquor?	1	2
Any other alcoholic beverages?	1	2
(SPECIFY) _____		

|_|_|

THANK RESPONDENT

CODER USE ONLY.
QJST: |_|_|

TIME ENDED 3:30 AM
PM

Q36 This question is asking the respondent about his/her current exercise habits, that is, the usual pattern of exercise and is intended to indicate levels of exercise that may affect cardiovascular health.

If the respondent is not doing his/her regular exercise program because of a temporary condition (i.e., sprained ankle), record usual pattern.

Exercise does not have to be at a gym or in a class situation. Walking, biking, even vigorous yard work counts if the respondent works up a sweat.

People who swim or do water aerobics for exercise may say they do not sweat or can't tell if they sweat. However if they are swimming laps for exercise (opposed to recreational swimming) or taking a class, this should count.

Do not read the response categories, but attempt to fit the answer into one of the precoded responses. If you cannot code the amount, write the respondent's response, verbatim, in the left margin.

Q37-39 These questions focus on prior and current smoking habits. Even if the respondent hasn't smoked for many years, if he/she has smoked more than 100 cigarettes, the answer is "YES." The questions are asking only about cigarettes. Pipes, cigars and other tobacco forms are not included. In Q39, emphasize "on average."

Q38 This question refers to smoking status at the time of the interview. If the respondent has only recently stopped smoking, the answer is still "NO."

Q39 Be sure to zero fill the boxes, if the number of cigarette smoked per day is less than 100 (e.g., 005, 038, etc.).

Q40 This question focuses on the respondent's alcohol consumption. Do not include non-alcoholic beer or wine.

36. How often do you exercise vigorously enough to work up a sweat?

- DAILY ①
- 5-6 TIMES PER WEEK 2
- 2-4 TIMES PER WEEK 3
- ONCE A WEEK 4
- 1-3 TIMES PER MONTH 5
- RARELY OR NEVER 6

37. Have you smoked 100 or more cigarettes during your entire life?

- YES 1
- NO ② (Q40)

38. Do you smoke cigarettes now?

- YES 1
- NO 2 (Q40)

39. On average, how many cigarettes per day do you smoke?

|_|_|_|
PER DAY

40. The last few questions are about alcoholic beverages, including beer, ale, wine, wine coolers, liquor such as whiskey, rum, gin, and vodka, and mixed drinks containing liquor.

During the past 12 months, that is, since last (NAME OF MONTH), have you consumed any alcoholic beverage?

- YES ①
- NO 2 (TIME ENDED)

41. During the past 12 months, have you consumed any:

- | | YES | NO |
|--|-----|----|
| Beer or ale? | ① | 2 |
| Wine or wine coolers? | 1 | ② |
| Liquor, such as whiskey, rum, gin, or vodka,
or mixed drinks containing liquor? | 1 | ③ |
| Any other alcoholic beverages? | 1 | ② |
| (SPECIFY) _____ | | |

|_|_|

THANK RESPONDENT

CODER USE ONLY.
QUIST: |_|_|

TIME ENDED 3:30 AM
PM

Q41 This question should be asked for each type of alcohol listed and a YES or NO response should be reported for each. There should be at least one "YES" response. If not, ask the respondent what he/she consumed.

This question excludes items that are not beverages such as cough syrup, flavoring extracts, antifreeze, and sterno.

Do not attempt to define any of the alcohol types.

The definition of alcoholic beverages is all distilled alcoholic beverages. Following are lists of alcoholic beverages included in each category.

Beer - beer, ale, malt, stout, light beer, homemade beer, and beer coolers.
Exclude non-alcoholic beer.

Wine - wine, wine coolers, fortified wine, wine punches, wine cocktails, champagne, homemade wine, hard cider, and mixed drinks containing wine.
Exclude non-alcoholic wine.

Liquor - brandy, vodka, gin, whiskey, rye, scotch, schnapps, rum, liqueurs, cordials, moonshine, aquavit, pure grain alcohol, and mixed drinks containing any of these.

Record the ending time in the space provided in the lower right-hand corner of page 16, then go to the Interviewer Observation Form. Complete the Observation Form, or at least Q.F., before completing the interview. Then go to the front cover and record the ending time, circling AM or PM, as appropriate.

Go on to the next sample person if there is one, and repeat the interview. If there are no other household members to be interviewed (for any document), thank all respondents and leave the household. If you did not complete the Interviewer Observation Form while in the household, fill it out as soon as possible after you leave, when the interview is still fresh in your mind.

INTERVIEWER OBSERVATION FORM

[DO NOT READ THESE QUESTIONS TO THE RESPONDENT.]

A. WHO WAS THE MAIN RESPONDENT FOR THIS INTERVIEW?

- SAMPLE PERSON 01
- MOTHER OF SAMPLE PERSON 02
- FATHER OF SAMPLE PERSON 03
- WIFE OF SAMPLE PERSON 04
- HUSBAND OF SAMPLE PERSON 05
- DAUGHTER OF SAMPLE PERSON 06
- SON OF SAMPLE PERSON 07
- SISTER OF SAMPLE PERSON 08
- BROTHER OF SAMPLE PERSON 09
- GRANDPARENT OF SAMPLE PERSON 10
- SOMEONE ELSE (SPECIFY) 11

_____|_____|

B. WHO, IF ANYONE, HELPED IN RESPONDING FOR THIS INTERVIEW? (CIRCLE ALL THAT APPLY)

- NO ONE 00
- SAMPLE PERSON 01
- MOTHER OF SAMPLE PERSON 02
- FATHER OF SAMPLE PERSON 03
- WIFE OF SAMPLE PERSON 04
- HUSBAND OF SAMPLE PERSON 05
- DAUGHTER OF SAMPLE PERSON 06
- SON OF SAMPLE PERSON 07
- SISTER OF SAMPLE PERSON 08
- BROTHER OF SAMPLE PERSON 09
- GRANDPARENT OF SAMPLE PERSON 10
- SOMEONE ELSE (SPECIFY) - OTHER THAN INTERVIEWER 11

_____|_____|

C. DID YOU OR THE RESPONDENT HAVE DIFFICULTY WITH THIS INTAKE INTERVIEW?

- YES 1
- NO 2 (BOX 4)

D. WHAT WAS THE REASON FOR THIS DIFFICULTY?

QA-F These questions are to be answered solely by you. DO NOT READ THESE QUESTIONS TO THE RESPONDENT.

QA This question asks for the individual who was interviewed and answered all or most of the questions, or in other words, the main respondent. The main respondent may or may not be the SP.

QB This question asks for the individuals who assisted the main respondent (recorded in QA) during the intake interview.

Multiple responses are acceptable.

QC-D Please use your best judgment in answering these questions.

If you answered "YES," please describe in detail what you felt the difficulties were and the reasons for these difficulties. This information is useful in evaluating the survey instrument and for planning and improving future surveys.

BOX 4	
SAMPLE PERSON IS . . .	
LESS THAN 12	(QF)
12 OR OLDER	(QE)

E. DO YOU THINK OTHER PEOPLE COULD HAVE HEARD THE ANSWERS TO Q37-41?

YES 1
 NO 2

F. IS DATA RETRIEVAL NECESSARY FOR DAYCARE/BABY-SITTER/SCHOOL/OR OTHER CARETAKER?

YES 1
 NO 2

[IF YES, RECORD SOURCE INFORMATION ON FOLLOW-UP CALL RECORD ON HOUSEHOLD FOLDER.]

- QE** This question deals with the sensitivity of Q37-Q41 (cigarette and alcohol use). It tells us if anyone might have heard the respondent answer these questions and thus may have influenced the answer.
- QF** This question reminds you to do any necessary data retrieval for foods missed in the 24-hour recall. It also alerts the home office staff to look for the food(s) and/or drink(s) item(s) retrieved.

OMB #:

Expires:

WHAT WE EAT IN AMERICA: 1994-1996

DAY TWO INTAKE QUESTIONNAIRE

PLACE CASE LABEL HERE

SAMPLE PERSON #: |__|__|

INTERVIEWER NAME: _____

|_|_|:|_|_| AM 1
TIME STARTED PM 2

INTERVIEWER ID: |_|_|_|

|_|_|:|_|_| AM 1
TIME ENDED PM 2

DATE OF INTERVIEW: |_|_|-|_|_|-19|_|_|
MO DA YR

DAY OF INTERVIEW: _____

INTERVIEW CONDUCTED:
IN PERSON 1
BY TELEPHONE 2

FIRST NAME OF SAMPLE PERSON: _____

FOR HOME OFFICE USE ONLY

DATE RECEIVED: _____

VERIFIER ID: _____

MC: YES NO

BATCH #: _____

DATE OF BIRTH: |_|_|-|_|_|-|_|_|-|_|_|
MO DA YEAR

OR
AGE: |_|_|_| YRS 1
MOS 2

SEX: M 1 F 2

Conducted for the United States Department of Agriculture
by Westat Inc., Rockville, MD

14.10 Day 2 Intake Questionnaire

The Day 2 Intake Questionnaire is similar to the Day 1 except shorter because there are fewer non-food questions. It includes the 24-hour recall, a food list, and some non-food questions.

- Questions 1 through 9 are the same as the Day 1 questions. They capture the information from the 24-hour recall.
- Questions 10-16 are some of the same non-food questions as on the Day 1 Questionnaire. Refer to the Day 1 Question-by-Question Specifications.
- Question 17 is a food list. This question asks the respondent whether he/she has eaten a particular food in the last 12 months.
- Questions A through F are the same observation questions as on the Day 1 form. Again, refer to the Day 1 Question-by-Question Specifications.

15. What was the main source of plain drinking water that did not come from your home? Was it tap water, water from a drinking fountain, bottled water, or something else?

TAP WATER AND/OR DRINKING FOUNTAIN 1
 BOTTLED WATER 2
 OTHER SOURCE 3
 (SPECIFY) _____
 DON'T KNOW 8

|_|_|

16. How many hours did (you/NAME) watch television or videotapes yesterday?

|_|_|
 # OF HOURS

17. During the past 12 months, that is, since last (NAME OF MONTH), (have you/has NAME) eaten any (FOOD) in any form?

	YES	NO		YES	NO
Artichokes	1	(2)	Grapefruit, other than juice	(1)	2
Asparagus	(1)	2	Cantaloupe	(1)	2
Broccoli	(1)	2	Honeydew melon	(1)	2
Brussels sprouts	1	(2)	Watermelon	(1)	2
Cauliflower	(1)	2	Nectarines	(1)	2
Eggplant	1	(2)	Pears	(1)	2
Kale	1	(2)	Plums	1	(2)
Swiss chard	1	(2)	Rhubarb	1	(2)
Okra	1	(2)	Chicken liver	1	(2)
Spinach	(1)	2	Beef, veal or pork liver	(1)	2
Summer squash (thin skin)	(1)	2	Lamb	1	(2)
Winter squash (hard skin)	(1)	2	Shellfish	(1)	2
Sweet potato or yams	(1)	2	Fish, other than shellfish or canned fish	1	(2)
Turnips, other than greens	1	(2)	IF YES: Was any of the fish you ate caught by you or someone you know?	1	2
Avocado or guacamole	(1)	2			

Q17

This question on the Day 2 questionnaire should be completed by asking for a "Yes" or "No" response to each food mentioned. It does not matter how often the respondent ate the food or how small the serving, if the respondent has eaten the food, it will have a "Yes" response.

Ask the question in this manner: "During the past 12 months, that is, since (Name of month of interview) of last year, did you eat any artichokes in any form?" Fill in the blank with the month only.

There are some foods on the list that may require clarification. If the respondent asks, you may provide an explanation for the following foods:

- Artichokes refers to both the heart and the leaves
- Summer squash refers to zucchini and yellow squash (crookneck and straightneck)
- Winter squash refers to acorn, butternut, hubbard, and spaghetti squash
- Shellfish refers to shrimp, clams, oysters, lobster, crabs, and crayfish

For instance, if a respondent says "I've eaten shrimp, is that a shellfish?" you may respond affirmatively.

If the proxy for a very young infant reports that the infant only consumed breast milk or formula in the past 24-hours, you may ask the proxy "Has (BABY) ever eaten any foods other than breast milk or formula?" If the proxy answers "No," skip to time ended.

Don't forget that "in any form" includes baby foods such as strained fruits (e.g., plums), vegetables (e.g., squash), and meats (e.g., liver).

Don't forget to fill in the time in the lower right-hand corner of the bottom page and on the front cover, and go onto the next respondent.

When you have completed the questions for the Day 2 questionnaire, thank the respondent(s). Complete the Interviewer Observation Form, or at least QF, before leaving the household.

15. DIET AND HEALTH KNOWLEDGE SURVEY QUESTIONNAIRE

The Diet and Health Knowledge Survey (DHKS) Questionnaire is administered by telephone to one of the Sample Persons (SPs) in a household aged 20 or older. The information obtained from the DHKS is used to help people make healthy food choices through better nutrition education. The SP for the DHKS is selected by the FMS from all the SPs in the household aged 20 or older who completed the Day 1 Intake. The remainder of this chapter contains the specifications that should be used in administering the DHKS.

15.1 Recording Random Starts from Cover Label

Many of the questions with the DHKS contain lists of items to be read to the respondent. It is very important that these lists be read in different orders. For this reason, we will use random starts.

Each of the DHKS questionnaires you receive will have a Random Start Label affixed to the front cover. You should use the information on this label to prepare the questionnaire BEFORE you contact the respondent.

The label itself (see below) contains the listing of the 18 question numbers which require a random start. Next to each question number is one letter. Locate the letter for the question number and place an X in the box next to it.

When using a random start, you will start reading the list with the item marked with an "X". You will continue down the list and when you reach the bottom, you will go back to the top of the list until you reach the "X" (see example on next page):

Q1	=	D	Q9	=	B	Q20	=	F
Q2	=	A	Q15	=	C	Q21	=	A
Q3	=	H	Q16	=	A	Q22	=	D
Q4	=	H	Q17	=	G	Q23	=	F
Q5	=	C	Q18	=	A	Q24	=	E
Q8	=	A	Q19	=	E	Q25	=	C

1. Let's begin by talking about the number of servings from different food groups that a person should eat each day. How many servings from the (FOOD GROUP) would you say a person of your age and sex should eat each day for good health? (DO NOT ACCEPT A RANGE OF SERVINGS.)

What about the (NEXT FOOD GROUP)?

IF ASKED, SAY 'Count as a serving whatever you consider a serving to be:'

START
AT 'X'

	FOOD GROUP	NUMBER OF SERVINGS	DONT KNOW
	a. Fruit Group?	|_|_|_|	98
	b. Vegetable Group?	|_|_|_|	98
	c. Milk, Yogurt, and Cheese Group?	|_|_|_|	98
X	d. Bread, Cereal, Rice, and Pasta Group?	|_|_|_|	98
	e. Meat, Poultry, Fish, Dry Beans, and Eggs Group?	|_|_|_|	98

RANDOM START: d.
READ THE QUESTION INSERTING FOOD GROUP d FIRST.
THEN READ THE QUESTION INSERTING FOOD GROUP e.
GO BACK TO THE TOP AND READ QUESTION INSERTING FOOD GROUP a, b, AND c, RESPECTIVELY.

As you go through the list of questions and mark each one, it is a good idea to put a check mark next to the question number on the label. This way, you will know which ones you've completed.

15.2 General Specifications for Completing the DHKS

One of the main purposes of the DHKS is to gather information that will be used to help develop better food labeling and to help develop publications describing what people know about food-related issues. For this reason, the questions ask either for the respondent's opinion or for the respondent's knowledge. Since we are interested in what the respondent thinks or knows, it is important that you do not attempt to define or explain questions to the respondent (unless the specifications clearly instruct you to do so).

If the respondent asks for a definition or explanation or for your opinion, explain that we are interested in what he/she thinks. The respondent should use his/her own definitions. In addition, do not interpret a respondent's answer if he/she uses different words than those of the response categories. Always probe so that the respondent selects the category closest to his/her answer.

Some respondents may have strong opinions on these topics. You must be careful not to express your own opinion or indicate in any way your agreement or disagreement with the respondent's opinions. Other respondents may be tense about "why you need to know what I know" or react as if it is a test. You should explain that this information is used in order to develop good nutrition education by saying something like "based upon what we learn about what people do and do not know, we will try to provide the information people need. We will help people make healthy food choices through better nutrition education." Finally, if the respondent provides an answer and then asks you if it was the right answer, you should explain that you are not a nutritionist and do not know the right answer.

Using the DHKS Reminder Card

Please refer to Sections 8.2.1 (DHKS Reminder Card) and 8.5.2 (Using the DHKS Reminder Card During the Interview) for a complete discussion of how to use this card during the interview. At the appropriate questions in the QxQs, it is noted to which response set to refer the respondent.

WHAT WE EAT IN AMERICA: 1994-1996

DIET AND HEALTH KNOWLEDGE SURVEY QUESTIONNAIRE

PLACE CASE LABEL HERE

[BE SURE TO PREPARE QUESTIONNAIRE BY MARKING
RANDOM STARTS BEFORE CONTACTING RESPONDENT.]

RANDOM START LABEL

INTRODUCTION: (ASK TO SPEAK WITH SAMPLE PERSON.)

Hello, I am (YOUR NAME) from Westat. (I/We) spoke with you recently as part of the food survey Westat is conducting for the United States Department of Agriculture. At that time (I/we) said (I/we) would get back in touch with you to ask a few more questions about your opinions on your diet, health, food shopping, and related topics. Before I begin, I just need to verify your name and age to make sure that I am interviewing the correct person. Is this (NAME OF SAMPLE PERSON)? And you are (about) (AGE) years old? (IF NOT CORRECT SAMPLE PERSON, THANK RESPONDENT AND ATTEMPT TO SPEAK WITH CORRECT SAMPLE PERSON.)

SAMPLE PERSON #: |__|__|

INTERVIEWER NAME: _____

|__|__| : |__|__| AM..... 1
TIME STARTED PM..... 2

INTERVIEWER ID: |__|__|__|

|__|__| : |__|__| AM..... 1
TIME ENDED PM..... 2

DATE OF INTERVIEW: |__|__| - |__|__| - 19 |__|__|
MO DAY YR

CONDUCTED:
IN PERSON 1
BY TELEPHONE 2

DAY OF INTERVIEW: _____

SP'S FIRST NAME: _____

DATE OF BIRTH: |__|__| - |__|__| - |__|__|__|
MO DAY YEAR

OR

AGE: |__|__|__| YRS ①
MOS 2

SEX: M 1 F 2

FOR HOME OFFICE USE ONLY	
DATE RECEIVED: _____	
VERIFIER ID: _____	
MC: ___ YES ___ NO	
BATCH #: _____	

15.3 Question-by-Question Specifications

Cover Page Be sure to mark the random starts before phoning or contacting the respondent.

Fill in the SP's number, your name and ID, the date and day of the interview, and the SP's first name, date of birth, age and sex. It is a good idea to have the SP's information handy in order to verify that you are speaking to the correct individual before starting the interview.

At the end of the interview, or as part of your edit, be sure to transfer the time started (from page 1) and time ended (from page 19) to the front cover of the DHKS.

Indicate whether the interview was conducted by telephone or in-person. If the interview was conducted in a language other than English, write the language used on the cover page of the English version of the questionnaire next to "Conducted: In-Person."

1. Let's begin by taking about the number of servings from different food groups that a person should eat each day. How many servings from the (FOOD GROUP) would you say a person of your age and sex should eat each day for good health? (DO NOT ACCEPT A RANGE OF SERVINGS.)

What about the (NEXT FOOD GROUP)?

IF ASKED, SAY: "Count as a serving whatever you consider a serving to be."

**START
AT "X"**

	FOOD GROUP	NUMBER OF SERVINGS	DON'T KNOW
a.	Fruit Group?	|__|__|	98
b.	Vegetable Group?	|__|__|	98
c.	Milk, Yogurt, and Cheese Group?	|__|__|	98
d.	Bread, Cereal, Rice, and Pasta Group?	|__|__|	98
e.	Meat, Poultry, Fish, Dry Beans, and Eggs Group?	|__|__|	98

Before asking the first question, fill in the time started in the upper right-hand corner of the page and circle AM or PM as appropriate.

Q.1 This series of questions is asking the respondent's opinion on what is an appropriate number of servings to eat each day from each food group.

Record answers for all the food groups.

Read the entire question for the first food group in the series. Thereafter you may ask "What about the (NEXT FOOD GROUP)?" and when appropriate for flow, you may simply read the item (e.g., "Fruit Group?").

Do not accept a range of servings as a response for a food group.

If the respondent says "about 2 or 3," ask "Which would you say?"

Or, if the respondent says that the number of servings a person should eat each day is different for different people (because of sex, age, physical activity, body size, or whatever), you should say, "We want to know what you think is the right number of servings for someone like you."

For responses less than 10, zero fill the amount given (e.g., 01, 02, etc.).

Use the boxed interviewer instruction if the respondent asks for a definition of a "serving." It is important to try to get an answer for each item.

Discourage "don't know" responses to this question. If the respondent seems unsure, say "This question is just asking for your opinion." However, if a respondent insists that he/she does not know, circle code 98 to the right of the number of servings for that particular food group.

2. Now I am going to read some statements about what people eat. Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement (READ STATEMENT)

What about (NEXT STATEMENT)?

IF NEEDED, SAY: "Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the Statement?"

**START
AT "X"**

	STATEMENT	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
a.	Choosing a healthy diet is just a matter of knowing what foods are good and what foods are bad.	4	3	2	1
b.	Eating a variety of foods each day probably gives you all the vitamins and minerals you need.	4	3	2	1
c.	Some people are born to be fat and some thin; there is not much you can do to change this.	4	3	2	1
d.	Starchy foods, like bread, potatoes, and rice, make people fat.	4	3	2	1
e.	There are so many recommendations about healthy ways to eat, it's hard to know what to believe.	4	3	2	1
f.	What you eat can make a big difference in your chance of getting a disease, like heart disease or cancer.	4	3	2	1
g.	The things I eat and drink now are healthy so there is no reason for me to make changes.	4	3	2	1
	STATEMENT	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree

Q.2 This series of questions is asking the respondent to agree or disagree with nutrition statements that may affect his/her willingness to make dietary changes.

Refer the respondent to response set A on the reminder card.

Circle only ONE answer to each statement in the series.

Read the entire question for the first statement. Thereafter you may say "What about (NEXT STATEMENT)?" When appropriate for flow, you may simply read the statement (e.g., starchy foods, like bread, potatoes & rice...). Use the interviewer instruction as a prompt if needed.

3. Next, let's talk about your own diet. Compared to what is healthy, do you think your diet is too low, too high, or about right in (STATEMENT)?

What about (NEXT STATEMENT)?

IF NEEDED, SAY: "Would you say your diet is too low, too high, or about right in that?"

IF NEEDED, SAY: "The question is asking about nutrients from foods, not from vitamin pills."

START
AT "X"

STATEMENT	Too Low	Too High	About Right	DON'T KNOW
a. Calories?	1	2	3	8
b. Calcium?	1	2	3	8
c. Iron?	1	2	3	8
d. Vitamin C?	1	2	3	8
e. Protein?	1	2	3	8
f. Fat?	1	2	3	8
g. Saturated fat?	1	2	3	8
h. Cholesterol?	1	2	3	8
i. Salt or sodium?	1	2	3	8
j. Fiber?	1	2	3	8
k. Sugar and sweets?	1	2	3	8
STATEMENT	Too Low	Too High	About Right	DON'T KNOW

Q.3 This series of questions is asking the respondent to evaluate the nutritional quality of his/her own diet, nutrient by nutrient.

Refer the respondent to response set B on the reminder card.

Circle only ONE answer to each statement in the series.

Read the entire question to the respondent for the first statement. Thereafter, you may say "What about (NEXT STATEMENT)?" Use the interviewer instruction as a prompt if needed.

If the respondent asks for a definition of any of the nutrients, say "Whatever it means to you." However, be sure the respondent does not include nutrients from vitamin pills in his/her response.

4. To you personally, is it very important, somewhat important, not too important, or not at all important to (STATEMENT)?

To you personally, how important is it to (NEXT STATEMENT)?

IF NEEDED, SAY: "Is that very important, somewhat important, not too important, or not at all important to you personally?"

IF NEEDED, SAY: "The question is not asking about your actual eating habits, it is asking about the importance of the statement to you personally."

START
AT "X"

STATEMENT	Very Important	Somewhat Important	Not Too Important	Not At All Important	DON'T KNOW
a. Use salt or sodium only in moderation?	4	3	2	1	8
b. Choose a diet low in saturated fat?	4	3	2	1	8
c. Choose a diet with plenty of fruits and vegetables?	4	3	2	1	8
d. Use sugars only in moderation?	4	3	2	1	8
e. Choose a diet with adequate fiber?	4	3	2	1	8
f. Eat a variety of foods?	4	3	2	1	8
g. Maintain a healthy weight?	4	3	2	1	8
h. Choose a diet low in fat?	4	3	2	1	8
i. Choose a diet low in cholesterol?	4	3	2	1	8
j. Choose a diet with plenty of breads, cereals, rice, and pasta?	4	3	2	1	8
k. Eat at least two servings of dairy products daily?	4	3	2	1	8
STATEMENT	Very Important	Somewhat Important	Not Too Important	Not At All Important	DON'T KNOW

Q.4 This series of questions is asking the respondent to rate the importance of each of the Dietary Guidelines for Americans to himself/herself. It is not asking the respondent about the general importance of the Dietary Guidelines. That is, the question is not asking the respondent to decide whether the Dietary Guidelines on sugar is more important than the Dietary Guideline on cholesterol. Emphasize the words "you personally" as you read the question.

Refer the respondent to response set C on the reminder card.

Circle only ONE code for each statement.

Read the complete question to the respondent for the first statement. Thereafter say "To you personally, how important is it to (NEXT STATEMENT)?" And, when appropriate for flow, you may simply read the statement. Repeat response categories as needed using the first interviewer instruction (in the box).

Remember that this question is eliciting the respondent's **opinion** about the importance of each of the Dietary Guidelines, not defining his/her **behavior**. Therefore, read the second interviewer instruction in the box as needed to remind the respondent that he/she does not have to be following the guidelines to feel they are important.

**START
AT "X"**

5. Have you heard about any health problems caused by (BEHAVIOR)?

(ASK QUESTIONS 5A - 5G AND 6 UNTIL COMPLETE, THEN GO TO QUESTION 7.)

BEHAVIOR

6. What health problems are these? Any other problems? (DO NOT READ PROBLEMS) (CIRCLE CODE IN THE APPROPRIATE ROW BELOW)

- | | | |
|--|-----------------------------------|---------------------------------------|
| 01 -- Arteriosclerosis/Atherosclerosis | 09 -- Edema | 15 -- Obesity/Overweight |
| 02 -- Arthritis | 10 -- Fatigue | 03 -- Osteoporosis |
| 03 -- Bone problems/Rickets | 15 -- Fat/Overweight | 14 -- Renal disease |
| 04 -- Breathing problems | 01 -- Hardening of the arteries | 16 -- Stroke |
| 05 -- Cancer (All types) | 01 -- Heart problems/Heart attack | 10 -- Tiredness |
| 07 -- Cavities/Caries | 11 -- High blood cholesterol | 07 -- Tooth problems |
| 01 -- Clogged arteries | 12 -- High blood pressure | 09 -- Water (fluid) retention |
| 06 -- Colitis/Colon problems | 08 -- High blood sugar | 17 -- HEALTH PROBLEMS NOT SPECIFIED |
| 06 -- Constipation | 13 -- Hyperactivity | 00 -- Other disease/problem (SPECIFY) |
| 01 -- Coronary disease | 12 -- Hypertension | |
| 08 -- Diabetes | 06 -- Irregularity | |
| 06 -- Digestive problems | 14 -- Kidney disease | |
| 06 -- Diverticulosis | 10 -- Lack of energy | |

15-14

a. Eating too much fat? YES 1 (Q6) NO 2 (Q5b)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||
b. Not eating enough fiber? YES 1 (Q6) NO 2 (Q5c)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||
c. Eating too much salt or sodium? YES 1 (Q6) NO 2 (Q5d)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||
d. Not eating enough calcium? YES 1 (Q6) NO 2 (Q5e)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||
e. Eating too much cholesterol? YES 1 (Q6) NO 2 (Q5f)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||
f. Eating too much sugar? YES 1 (Q6) NO 2 (Q5g)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||
g. Being overweight? YES 1 (Q6) NO 2 (Q5a)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	00 (SPECIFY)	||_||

Q.5-6 This series of questions is asking for the respondent's perceptions of relationships between specific dietary behaviors and health problems. The questions are read as a set.

Record answers for all questions in the series.

If a respondent answers "Yes" to **Q.5**, follow-up immediately with **Q.6**. Probe using the "Any other problems?" cue after each response until the respondent indicates he/she cannot think of any other health problems caused by the behavior.

Circle as many answers as reported for **Q.6**. The response categories are listed in **alphabetical** order. Listen carefully before recording the respondent's answers. If the answer(s) fits any of the listed health problems, circle the corresponding code. If the respondent provides a response that is not on the list, circle the code "00" (other disease/problems) in the last column, and write the response in the space provided. If the respondent is unable to specify any health problems even though he/she says relationships exist, circle code 17 (health problems not specified). The response "Health problems not specified" should be used if the respondent knows the behavior is not healthy but cannot name any specific examples.

Do not try to interpret the sample person's response to these questions. For example, if the respondent says the behavior "makes you fat," do not record as "obesity" or "overweight." Instead, circle the code "00" and write the response verbatim in the space provided.

Ignore the boxes in the right-hand margin. These are for coder use only.

7. Do you consider yourself to be:

- Overweight, 1
- Underweight, or 2
- About right? 3

9. Which has more fat: (READ EACH PAIR STARTING AT "X" AND THEN WAIT FOR AN ANSWER. DO NOT PROBE "DON'T KNOW" ANSWERS.)

8. Based on your knowledge, which has more saturated fat: (READ EACH PAIR STARTING AT "X" AND THEN WAIT FOR AN ANSWER. DO NOT PROBE "DON'T KNOW" ANSWERS.)

15-16

START
AT "X"

PAIR	
a.	Liver, or 1 T-bone steak? 2 THE SAME 3 DON'T KNOW 8
b.	Butter, or 1 Margarine? 2 THE SAME 3 DON'T KNOW 8
c.	Egg white, or 1 Egg yolk? 2 THE SAME 3 DON'T KNOW 8
d.	Skim milk, or 1 Whole milk? 2 THE SAME 3 DON'T KNOW 8

START
AT "X"

PAIR	
a.	Regular hamburger, or 1 Ground round? 2 THE SAME 3 DON'T KNOW 8
b.	Loin pork chops, or 1 Pork spare ribs? 2 THE SAME 3 DON'T KNOW 8
c.	Hot dogs, or 1 Ham? 2 THE SAME 3 DON'T KNOW 8
d.	Peanuts, or 1 Popcorn? 2 THE SAME 3 DON'T KNOW 8
e.	Yogurt, or 1 Sour cream? 2 THE SAME 3 DON'T KNOW 8
f.	Porterhouse steak, or 1 Round steak? 2 THE SAME 3 DON'T KNOW 8

Q.7 This is an opinion question that asks the respondent to assess his/her own weight status.

Q.8-14 This is a series of knowledge questions on sources of fat, saturated fat, and cholesterol in the diet. If the respondent asks about the meaning of any of the terms, say "The question is based on your knowledge" or "Whatever it means to you."

It is important that the respondent does not become frustrated by these questions or feels "stupid." If appropriate, reassure the respondent that the questions seem difficult for most people, and that you do not know the correct answers. If the respondent asks if s/he got the answer "right," say that you are not a nutritionist and do not know the right answers.

Q.8-9 To ensure the respondent understands the difference between Q.8 and Q.9, emphasize the word "saturated" in Q.8 and "fat" in Q.9.

Do not give the respondent a definition of saturated or polyunsaturated fats, say something like "I'm not a nutritionist and I'm really not sure. This question is based on what you know."

Record only one answer for each pair.

If the respondent says "don't know," probe once by saying "The answer is based on your knowledge." Because these responses are based on knowledge rather than opinion, DO NOT FORCE A CHOICE. Circle "Don't Know" code if response does not change with the first probe.

If the respondent answers that the pairs are "the same," repeat the question emphasizing the choice. If the respondent insists that the answer is still "the same," then circle code 3 for "THE SAME."

10. Which kind of fat is more likely to be a liquid rather than a solid:

- Saturated fats, 1
- Polyunsaturated fats, or 2
- Are they equally likely to be liquids? 3
- DON'T KNOW 8

11. If a food has no cholesterol is it also:

- Low in saturated fat, 1
- High in saturated fat, or 2
- Could it be either high or low in saturated fat? 3
- DON'T KNOW 8

12. Is cholesterol found in:

- Vegetables and vegetable oils, 1
- Animal products like meat and dairy products, or 2
- All foods containing fat or oil? 3
- DON'T KNOW 8

13. If a product is labeled as containing only vegetable oil is it:

- Low in saturated fat, 1
- High in saturated fat, or 2
- Could it be either high or low in saturated fat? 3
- DON'T KNOW 8

14. If a food product is labeled "light," does that mean that compared to a similar product not labeled "light" it is lower in calories, lower in fat, or lower in calories and/or fat, or does it mean something else?

- LOWER IN CALORIES 1
- LOWER IN FAT 2
- LOWER IN CALORIES AND/OR FAT 3
- SOMETHING ELSE 4
- DON'T KNOW 8

Q.10-14 Note that you read the response categories in Q.10, 11, 12, and 13. Circle only ONE answer. Do not define any of the terms for the respondent. Do not force the respondent to guess if he/she does not know the answer.

15. Now think about buying food. When you buy food, how important is (FACTOR) - very important, somewhat important, not too important, or not at all important?

What about (NEXT FACTOR)?

IF NEEDED, SAY: "How important is (FACTOR) - very important, somewhat important, not too important, or not at all important?"

**START
AT "X"**

FACTOR	Very Important	Somewhat Important	Not Too Important	Not At All Important	DON'T KNOW
a. How safe the food is to eat?	4	3	2	1	8
b. Nutrition?	4	3	2	1	8
c. Price?	4	3	2	1	8
d. How well the food keeps?	4	3	2	1	8
e. How easy the food is to prepare?	4	3	2	1	8
f. Taste?	4	3	2	1	8

Q.15 This series of questions is asking the respondent how important certain factors are when buying food. This question refers to factors that may be important to the respondent when he/she shops for food, not when someone else in the household does the food shopping.

Refer the respondent to response set C on the reminder card.

Circle only ONE answer per factor for all factors.

Read the complete question to the respondent for the first factor. Thereafter, you may ask "What about (NEXT FACTOR)" and, when appropriate for flow, you may simply read the factor. Repeat response categories (except "Don't Know") or read interviewer instruction as needed.

16. Now think about food labels. When you buy foods, do you use (SECTION) often, sometimes, rarely, or never?

What about (NEXT SECTION)?

IF NEEDED, SAY: "Do you use (SECTION) often, sometimes, rarely, or never?"

START
AT "X"

SECTION	Often (Always)	Some- times	Rarely	Never	NEVER SEEN	DON'T KNOW
a. The list of ingredients?	1	2	3	4	5	8
b. The short phrases like "low-fat" or "light" or "good source of fiber"?	1	2	3	4	5	8
c. The nutrition panel that tells the amount of calories, protein, fat, and such in a serving of the food?	1	2	3	4	5	8
d. The information about the size of a serving?	1	2	3	4	5	8
e. A statement that describes how nutrients or foods and health problems are related?	1	2	3	4	5	8

BOX 1

IS "NEVER" (4) OR "NEVER SEEN" (5) CIRCLED FOR ALL PARTS OF QUESTION 16?

YES 1 (Q24)
NO 2

Q.16-25 This series of questions focuses on use, understanding, knowledge, and attitudes about nutrition information on food labels.

Q.16 This question is asking the respondent about his/her use of sections of the food label that contain nutrition-related information.

Refer the respondent to response set D on the reminder card.

Circle only ONE answer per "section" for all sections.

Read the entire question to the respondent for the first section. Thereafter, ask "What about (NEXT SECTION)?" and, when appropriate for flow, you may simply read the section. Repeat response categories or interviewer instruction as needed.

In the past, statements that describe how nutrients and health problems are related were seldom seen on food labels. However, new government regulations will result in an increase in their use. If the respondent is unfamiliar with this section (or any other section), mark "Never Seen." Do not try to describe it.

BOX 1 If answers to Sections Q.16a-e are all "Never" or "Never Seen," circle code 1 and then skip to Q.24. These responses indicate that the respondent does not use the nutrition information on food labels, so there is no need to ask for the details of label use covered in Q.17-23.

17. When you look for nutrition information on the food label, would you say you often, sometimes, rarely, or never look for information about (STATEMENT)?

What about (NEXT STATEMENT)?

IF NEEDED, SAY: "Would you say you often, sometimes, rarely, or never look for information about that?"

STATEMENT	Often (Always)	Some-times	Rarely	Never
a. Calories?	1	2	3	4
b. Salt or sodium?	1	2	3	4
c. Total fat?	1	2	3	4
d. Saturated fat?	1	2	3	4
e. Cholesterol?	1	2	3	4
f. Vitamins or minerals?	1	2	3	4
g. Fiber?	1	2	3	4
h. Sugars?	1	2	3	4

START AT "X"

18. Now think about the types of food products you buy using food labels. When you buy (FOOD PRODUCT), do you look for nutrition information on the food label often, sometimes, rarely, or never?

What about (NEXT FOOD PRODUCT)?

IF NEEDED, SAY: "And when you buy (FOOD PRODUCT), do you use the label often, sometimes, rarely, or never?"

FOOD PRODUCT	Often (Always)	Some-times	Rarely	Never	NEVER SEEN	DO NOT BUY
a. Dessert items like cookies or cake mixes?	1	2	3	4	5	6
b. Snack items like chips, popcorn, or pretzels?	1	2	3	4	5	6
c. Frozen dinners or main dishes?	1	2	3	4	5	6
d. Breakfast cereals?	1	2	3	4	5	6
e. Cheese?	1	2	3	4	5	6
f. Fresh fruits or vegetables?	1	2	3	4	5	6
g. Salad dressings?	1	2	3	4	5	6
h. Table spreads like butter or margarine?	1	2	3	4	5	6
i. Raw meat, poultry, or fish?	1	2	3	4	5	6
j. Processed meat products like hot dogs and bologna?	1	2	3	4	5	6
FOOD PRODUCT	Often (Always)	Some-times	Rarely	Never	NEVER SEEN	DO NOT BUY

START AT "X"

Q.17 This series of questions is asking about the type of nutrient information respondents look for on food labels.

Refer the respondent to response set D on the reminder card.

Circle only ONE answer per statement for all statements.

Read the complete question for the first statement. Thereafter, ask "What about (NEXT STATEMENT)?" and, when appropriate for flow, you may simply read the statement. Repeat the response categories or read the interviewer instruction as needed.

If the respondent says he/she "Always" looks for information about the statement, mark "Often." There is no need to repeat the designated response categories.

17. When you look for nutrition information on the food label, would you say you often, sometimes, rarely, or never look for information about (STATEMENT)?

What about (NEXT STATEMENT)?

IF NEEDED, SAY: "Would you say you often, sometimes, rarely, or never look for information about that?"

START
AT "X"

STATEMENT	Often (Always)	Some- times	Rarely	Never
a. Calories?	1	2	3	4
b. Salt or sodium?	1	2	3	4
c. Total fat?	1	2	3	4
d. Saturated fat?	1	2	3	4
e. Cholesterol?	1	2	3	4
f. Vitamins or minerals?	1	2	3	4
g. Fiber?	1	2	3	4
h. Sugars?	1	2	3	4

18. Now think about the types of food products you buy using food labels. When you buy (FOOD PRODUCT), do you look for nutrition information on the food label often, sometimes, rarely, or never?

What about (NEXT FOOD PRODUCT)?

IF NEEDED, SAY: "And when you buy (FOOD PRODUCT), do you use the label often, sometimes, rarely, or never?"

START
AT "X"

FOOD PRODUCT	Often (Always)	Some- times	Rarely	Never	NEVER SEEN	DO NOT BUY
a. Dessert items like cookies or cake mixes?	1	2	3	4	5	6
b. Snack items like chips, popcorn, or pretzels?	1	2	3	4	5	6
c. Frozen dinners or main dishes?	1	2	3	4	5	6
d. Breakfast cereals?	1	2	3	4	5	6
e. Cheese?	1	2	3	4	5	6
f. Fresh fruits or vegetables?	1	2	3	4	5	6
g. Salad dressings?	1	2	3	4	5	6
h. Table spreads like butter or margarine?	1	2	3	4	5	6
i. Raw meat, poultry, or fish?	1	2	3	4	5	6
j. Processed meat products like hot dogs and bologna?	1	2	3	4	5	6
FOOD PRODUCT	Often (Always)	Some- times	Rarely	Never	NEVER SEEN	DO NOT BUY

Q.18 This series of questions is asking about the types of food products the respondent buys using food labels.

Refer the respondent to response set D on the reminder card.

Circle only ONE answer per food product for all food products.

Read the initial question for the first food product in the series. Thereafter, you may ask "What about (NEXT FOOD PRODUCT)?" and, when appropriate for flow, you may simply read the item. Repeat the response categories or read the interviewer instruction as needed.

If a respondent reports he/she "Always" looks for information about the food product, mark "Often." There is no need to repeat the designated response categories.

There are three categories that need some explanation: "Never Seen," "Do Not Buy," and "Never."

Do not read the "Never Seen" response. If a respondent asks if the type of food product has labels or reports that he has "Never Seen" a food label on a particular type of product, **DO NOT PROBE**. Mark "Never Seen" and go on to the next food product. Nutrition labeling of "fresh fruits and vegetables" and "raw meat, poultry, or fish" are not as common as labeling on other food products and many respondents may not have seen them.

Do not read the "Do Not Buy" response. If the respondent reports he/she never buys the product, mark this category.

If a respondent reports he/she buys a particular food product but does not look at the food label to help him make a food choice, mark "Never".

19. Now think about the types of nutrition information on food labels. Do you think (SECTION) is very easy to understand, somewhat easy, or not too easy to understand?

What about (NEXT SECTION)?

IF NEEDED, SAY: "Would you say that is very easy to understand, somewhat easy, or not too easy to understand?"

SECTION	Very Easy	Somewhat Easy	Not Too Easy	NEVER SEEN	DON'T KNOW
a. The list of ingredients?	1	2	3	4	8
b. A short phrase like "low-fat" or "light" or "good source of fiber"?	1	2	3	4	8
c. The number of calories in a serving?	1	2	3	4	8
d. The number of calories <u>from fat</u> in a serving?	1	2	3	4	8
e. The number of grams or milligrams of nutrients like fat and sodium in a serving?	1	2	3	4	8
f. The percent of the daily value for each nutrient?	1	2	3	4	8
g. A description like "lean" or "extra lean" on meats?	1	2	3	4	8
SECTION	Very Easy	Somewhat Easy	Not Too Easy	NEVER SEEN	DON'T KNOW

START AT "X"

20. If a food label says a food is (DESCRIPTION), would you say you are very confident, somewhat confident, or not too confident that the description is a reliable basis for choosing foods?

What about (NEXT DESCRIPTION)?

IF NEEDED, SAY: "How confident are you that the description is reliable? Would you say very confident, somewhat confident, or not too confident?"

DESCRIPTION	Very Confident	Somewhat Confident	Not Too Confident	DON'T KNOW
a. Low-fat?	1	2	3	8
b. Low-cholesterol?	1	2	3	8
c. A good source of fiber?	1	2	3	8
d. Light?	1	2	3	8
e. Healthy?	1	2	3	8
f. Extra lean?	1	2	3	8

START AT "X"

Q.19 This series of questions is asking the respondent how easy s/he finds understanding and using different types of nutrition information on labels.

Refer the respondent to response set E on the reminder card.

Circle only ONE answer per section for all sections.

Read the complete question for the first section. Thereafter, you may ask "What about (NEXT SECTION)?" and, when appropriate for flow, you may simply read the section. Repeat response categories or read interviewer instruction as needed. Probe for a response other than "Don't Know" by saying "This is just your opinion."

Q.20 This series of questions is asking how much the respondent feels he/she can rely on short phrases (e.g., "low fat") on food labels to accurately describe the nutritive value of the food product.

Refer the respondent to response set F on the reminder card.

Circle only ONE answer per description for all descriptions.

Read the complete question for the first description. Thereafter, you may say "What about (NEXT DESCRIPTION)?" and, when appropriate for flow, you may simply read the description. Repeat response categories or read interviewer instruction as needed. Probe for response other than "Don't Know" by saying "This is just your opinion."

21. As far as you know, does the government define and enforce the meaning of the phrase (PHRASE) on food labels? (DO NOT PROBE "DON'T KNOW" ANSWERS.)

What about the phrase (NEXT PHRASE)?

**START
AT "X"**

	PHRASE	YES	NO	DON'T KNOW
a.	Low-cholesterol?	1	2	8
b.	Light?	1	2	8
c.	Extra lean?	1	2	8

22. Now think about the section of the food label that tells the amount of calories, protein, and fat in a serving of the food. If it showed that one serving of the food contained (AMOUNT OF NUTRIENT), would you consider that to be a low amount or a high amount? (DO NOT PROBE "DON'T KNOW" ANSWERS.)

What about (NEXT AMOUNT OF NUTRIENT)?

IF NEEDED, SAY "Would you consider that to be a low amount or a high amount for one serving of food?"

**START
AT "X"**

	AMOUNT OF NUTRIENT	Low	High	DON'T KNOW
a.	100 milligrams of sodium?	1	2	8
b.	20 grams of fat?	1	2	8
c.	15 milligrams of cholesterol?	1	2	8
d.	5 grams of fiber?	1	2	8
e.	10 grams of saturated fat?	1	2	8

Q.21 This series of questions is asking the respondent whether he/she thinks descriptive phrases on food labels are regulated by the government.

Record answers for all phrases.

Read the complete question for the first phrase. Thereafter, you may say "What about the phrase (PHRASE)?" Allow enough time for the respondent to mull over the question, but do not force the respondent to guess if he/she does not know the answer.

Do not provide a definition of enforce, let the respondent decide what it means to him/her.

Q.22 This series of questions is asking the respondent to say how he/she would interpret some of the technical information on food labels. The question asks whether the stated quantity of a particular nutrient is a high or low amount for one serving.

Record an answer for all nutrient amounts.

Repeat the complete question for the first nutrient amount, and thereafter you may ask "What about (NEXT AMOUNT OF NUTRIENT)?" Use interviewer instruction as needed. **Accept a "Don't Know" response without probing.**

If the respondent asks what a serving is, say: "A serving is the amount the food label identifies as one serving."

If the respondent says it depends on the type of food, say: "This is asking for your best estimate for foods in general."

23. Now I am going to read some statements. Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement: (READ STATEMENT)

What about (NEXT STATEMENT)?

IF NEEDED, SAY: "Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement?"

START
AT "X"

STATEMENT	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	NO OPINION
a. The nutrition information on food labels is useful to me.	4	3	2	1	0
b. I feel confident that I know how to use food labels to choose a healthy diet.	4	3	2	1	0
c. The nutrition information on food labels is hard to interpret.	4	3	2	1	0
d. Reading food labels takes more time than I can spare.	4	3	2	1	0
e. I read food labels because good health is important to me.	4	3	2	1	0
f. I would like to learn more about how to use food labels to choose a nutritious diet.	4	3	2	1	0
g. Reading food labels makes it easier to choose foods.	4	3	2	1	0
h. Sometimes I try new foods because of the information on the food label.	4	3	2	1	0
i. When I use food labels, I make better food choices.	4	3	2	1	0
j. Using food labels to choose foods is better than just relying on my own knowledge about what is in them.	4	3	2	1	0
STATEMENT	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	NO OPINION

GO TO Q26

Q.23 This series of questions is asking the respondent about his/her attitudes toward using food labels to get nutrition information.

Refer the respondent to response set A on the reminder card.

Circle only ONE answer per statement for all statements.

Read the complete question for the first statement. Thereafter, you may ask "What about (NEXT STATEMENT)?" and, when appropriate for flow, you may simply read the statement. Repeat response categories or read interviewer instruction as needed.

If the respondent's answer is don't know, record DK next to the question; do not code a don't know response as NO OPINION.

If this question has been asked, which would mean that Q.16-22 were answered, skip to Q.26 when finished.

24. Now I am going to read some statements about food labels. Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement: (READ STATEMENT)

What about (NEXT STATEMENT)?

IF NEEDED, SAY: "Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement?"

START
AT "X"

STATEMENT	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	NO OPINION
a. I feel confident that I know how to use food labels to choose a healthy diet.	4	3	2	1	0
b. The nutrition information on food labels is hard to interpret.	4	3	2	1	0
c. Reading food labels takes more time than I can spare.	4	3	2	1	0
d. I would like to learn more about how to use food labels to choose a nutritious diet.	4	3	2	1	0
e. Using food labels to choose foods would be better than just relying on my own knowledge about what is in them.	4	3	2	1	0
STATEMENT	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	NO OPINION

25. As far as you know, does the government define and enforce the meaning of the phrase (PHRASE) on food labels? (DO NOT PROBE "DON'T KNOW" ANSWERS.)

What about the phrase (NEXT PHRASE)?

START
AT "X"

PHRASE	YES	NO	DON'T KNOW
a. Low-cholesterol?	1	2	8
b. Light?	1	2	8
c. Extra lean?	1	2	8

Q.24 This series of questions are asking the respondent about his/her attitudes about the information on food labels.

Refer the respondent to response set A on the reminder card.

Circle only ONE answer per statement for all statements.

Use the complete question for the first statement. Thereafter, you may ask "What about (NEXT STATEMENT)?" and, when appropriate for flow, you may simply read the statement. Repeat response categories or read interviewer instruction as needed.

If the respondent's answer is don't know, record DK next to the question; do not code a don't know response as NO OPINION.

This question is a subset of the Q.23 statements. Ask this question only of respondents who answered all of Q.16A-E with code 4 and/or 5, and skipped over Q.17-22.

Q.25 This series of questions is asking the respondent whether he/she thinks descriptive phrases on food labels are regulated by the government.

Record answers for all phrases.

Read the complete question for the first phrase. Thereafter, you may say "What about the phrase (PHRASE)?" Allow enough time for the respondent to mull over the question, but do not force the respondent to guess if he/she does not know the answer.

Do not provide a definition of "enforce", let the respondent decide what it means to him/her.

This question is identical to Q.21. Ask this question only of respondents who answered all of Q.16A-E with code 4 and/or 5 and skipped over Q.17-22. Individuals who did answer Q.17-22 should have skipped directly to Q.26 and therefore would not be asked the same question twice (i.e., Q.21 and Q.25).

26. Now think about the foods you eat. Would you say you always, sometimes, rarely, or never (HABIT)?

What about (NEXT HABIT)?

IF NEEDED, SAY: "Do you always, sometimes, rarely, or never (HABIT)?"

HABIT	Always (Almost Always)	Some- times	Rarely	Never	DOES NOT APPLY
a. Eat lower-fat luncheon meats <u>instead</u> of regular luncheon meats? (IF NEEDED, SAY: "Examples of lower-fat luncheon meats are deli ham and turkey. Examples of regular luncheon meats are bologna and salami.")	1	2	3	4	0
b. Use skim or 1% milk <u>instead</u> of 2% or whole milk?	1	2	3	4	0
c. Eat special, low-fat cheeses, when you eat cheese?	1	2	3	4	0
d. Eat ice milk, frozen yogurt, or sherbet <u>instead</u> of ice cream?	1	2	3	4	0
e. Use low-calorie <u>instead</u> of regular salad dressing?	1	2	3	4	0
f. Have fruit for dessert when you eat dessert?	1	2	3	4	0
g. Eat fish or poultry <u>instead</u> of meat? (IF NEEDED, SAY: "Meat refers to beef, pork, or lamb.")	1	2	3	4	0
HABIT	Always (Almost Always)	Some- times	Rarely	Never	DOES NOT APPLY

27. When you eat baked or boiled potatoes, how often do you add butter, margarine, or sour cream? Would you say always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DO NOT EAT BAKED OR BOILED POTATOES 0

Q.26-40 These questions ask the respondent about his/her own eating habits, especially as they pertain to fat and cholesterol intake.

Q.26 This series of questions is asking the respondent about his/her eating habits for particular foods.

Refer the respondent to response set G on the reminder card.

Note: There is no random start for this question. Circle only ONE answer for each habit.

Read the complete question for the first habit. Thereafter, you may ask "What about (NEXT HABIT)?" and, when appropriate for flow, you may simply read the habit. Repeat response categories or read interviewer instruction as needed. Do not read the "Does Not Apply" category.

There are two categories that need some explanation: "Does Not Apply" and "Never." The "Does Not Apply" response refers to respondents who may indicate that a specific food habit does not apply to the way they eat.

For example, in Q.26a ("Eat lower-fat luncheon meats instead of regular luncheon meats?") "Does Not Apply" is the correct response if the respondent says they never eat luncheon meats.

However, "Never" is the correct response if the respondent does eat luncheon meat, but never eats low-fat luncheon meats.

And, in Q.26f ("...Have fruit for dessert when you eat dessert?") "Does Not Apply" is the correct response if the respondent never eats dessert.

However, "Never" is the correct response if the respondent does eat dessert, but never eats fruit for dessert.

26. Now think about the foods you eat. Would you say you always, sometimes, rarely, or never (HABIT)?

What about (NEXT HABIT)?

IF NEEDED, SAY: "Do you always, sometimes, rarely, or never (HABIT)?"

HABIT	Always (Almost Always)	Some- times	Rarely	Never	DOES NOT APPLY
a. Eat lower-fat luncheon meats <u>instead</u> of regular luncheon meats? (IF NEEDED, SAY: "Examples of lower-fat luncheon meats are deli ham and turkey. Examples of regular luncheon meats are bologna and salami.")	1	2	3	4	0
b. Use skim or 1% milk <u>instead</u> of 2% or whole milk?	1	2	3	4	0
c. Eat special, low-fat cheeses, when you eat cheese?	1	2	3	4	0
d. Eat ice milk, frozen yogurt, or sherbet <u>instead</u> of ice cream?	1	2	3	4	0
e. Use low-calorie <u>instead</u> of regular salad dressing?	1	2	3	4	0
f. Have fruit for dessert when you eat dessert?	1	2	3	4	0
g. Eat fish or poultry <u>instead</u> of meat? (IF NEEDED, SAY: "Meat refers to beef, pork, or lamb.")	1	2	3	4	0
HABIT	Always (Almost Always)	Some- times	Rarely	Never	DOES NOT APPLY

27. When you eat baked or boiled potatoes, how often do you add butter, margarine, or sour cream? Would you say always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DO NOT EAT BAKED OR BOILED
POTATOES 0

Questions 26a and 26g contain interviewer instructions within the questions. Read these instructions if you feel the respondent does not understand the habit.

For example, ask "What about eating lower-fat luncheon meats instead of regular luncheon meats?" (PAUSE) If the respondent does not answer or asks what low-fat or regular luncheon meats are, say "Examples of lower-fat luncheon meats are deli ham and turkey. Examples of regular luncheon meats are bologna and salami."

...."Eat fish or poultry instead of meat?" (PAUSE) If the respondent does not answer, or asks you what you mean by "meat", say "Meat refers to beef, pork, or lamb."

Q.27 This question asks about the frequency of adding specific fats to boiled or baked potatoes.

Refer the respondent to response set G on the reminder card.

Do not read "do not eat baked or boiled potatoes." Circle this response only if the respondent reports he/she does not eat baked or boiled potatoes.

Do not try to interpret the respondent's answer. Instead repeat the answer categories and have the respondent fit his/her answer into a category.

28. When you eat other cooked vegetables, do you always, sometimes, rarely, or never eat them with butter or margarine added?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DO NOT EAT COOKED VEGETABLES 0 (Q30)

29. When you eat other cooked vegetables, do you always, sometimes, rarely, or never eat them with cheese or another creamy sauce added?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4

30. When you eat chicken, do you always, sometimes, rarely, or never eat it fried?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DO NOT EAT CHICKEN 0 (Q32)

31. When you eat chicken, do you always, sometimes, rarely, or never remove the skin?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4

32. Would you describe the amount of butter or margarine you usually spread on breads and muffins as:

- None, 1
- Light, 2
- Moderate, or 3
- Generous? 4

Q.28-29 These questions are asking about the frequency of eating cooked vegetables with specific additions.

Refer the respondent to response set G on the reminder card.

For Q.28, do not read "Do not eat cooked vegetables." Circle this response only if the respondent reports that he/she does not eat cooked vegetables (or any kind of vegetables) and then skip to Q.30.

For Q.29, if asked what is meant by a "creamy sauce" say "whatever it means to you" or "whatever you consider a creamy sauce to be."

Do not try to interpret the respondent's answer. Instead repeat the answer categories and have the respondent fit his/her answer into a category.

Q.30-31 These questions are asking the respondent about the frequency of eating chicken fried or breaded and without the skin.

Refer the respondent to response set G on the reminder card.

Circle only ONE answer per behavior.

Do not read "Don't Eat Chicken." Use this response only if the respondent reports he/she does not eat chicken, and then skip to Q.32.

Q.32 This question is asking the respondent to estimate the amount of butter or margarine he/she uses as a spread.

Circle only ONE code.

33. About how many times in a week do you eat (FOOD) – less than once a week, 1-3, 4-6, or 7 or more times?

IF ASKED, SAY: "A 'time' is any single eating occasion."

FOOD	Less than once a week (Never)	1-3	4-6	7 or More
a. Bakery products like cakes, cookies, or donuts?	1	2	3	4
b. Chips, such as potato or corn chips?	1	2	3	4

34. And at your main meal, about how many times in a week do you eat beef, pork, or lamb. Would you say less than once a week, 1-2, 3-4, or 5-7 times?

- LESS THAN ONCE A WEEK/NEVER 1
- 1-2 TIMES 2
- 3-4 TIMES 3
- 5-7 TIMES 4
- DO NOT EAT MEAT 0 (Q37)

35. When you eat meat, do you usually eat:

IF ASKED, SAY: "The question is asking about meats, like beef, pork, or lamb."

- Small, 1
- Medium, or 2
- Large portions? 3
- DO NOT EAT MEAT 0 (Q37)

36. When you eat meat and there is visible fat, do you trim the fat always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- NEVER EAT MEAT WITH VISIBLE FAT 0

37. How many eggs do you usually eat in a week – less than one, 1-2, 3-4, or 5 or more?

IF ASKED, SAY: "The question is asking about plain eggs, not egg substitutes or eggs in mixed dishes or baked goods."

- LESS THAN ONE/NONE 1
- 1-2 2
- 3-4 3
- 5 OR MORE 4

Q.33 This question is asking the respondent to estimate how often he/she eats bakery products and chips. It is referring to usual eating behavior over the last month. This information should reflect the eating behavior you have already collected on the Day 1 and 2 intakes.

If a respondent says he/she has been on a diet for the last month (or some period of time within a month), ask, "Could you give me an estimate of the average number of times in the last month you have eaten these items?"

If you are asked what is meant by "times in a week," say "A time is any single eating occasion." For example, if a respondent usually eats three cookies twice a week, the answers would be "1-3" times (not six cookies).

Circle only ONE answer for each food.

Q.34 This question is asking the respondent how often he/she eats meat at the main meal. The "main meal" is whatever the respondent considers it to be. Circle only ONE code. If meat is never eaten at the main meal, circle code 1, "Less than once a week."

Circle only one code and use the boxed interviewer instructions as necessary.

Do not read "Do Not Eat Meat" response. If the respondent says he/she "does not eat meat" circle code 0 and skip to Q.37.

33. About how many times in a week do you eat (FOOD) – less than once a week, 1-3, 4-6, or 7 or more times?

IF ASKED, SAY: "A 'time' is any single eating occasion."

FOOD	Less than once a week (Never)	1-3	4-6	7 or More
a. Bakery products like cakes, cookies, or donuts?	1	2	3	4
b. Chips, such as potato or corn chips?	1	2	3	4

34. And at your main meal, about how many times in a week do you eat beef, pork, or lamb. Would you say less than once a week, 1-2, 3-4, or 5-7 times?

- LESS THAN ONCE A WEEK/NEVER 1
- 1-2 TIMES 2
- 3-4 TIMES 3
- 5-7 TIMES 4
- DO NOT EAT MEAT 0 (Q37)

35. When you eat meat, do you usually eat:

IF ASKED, SAY: "The question is asking about meats, like beef, pork, or lamb."

- Small, 1
- Medium, or 2
- Large portions? 3
- DO NOT EAT MEAT 0 (Q37)

36. When you eat meat and there is visible fat, do you trim the fat always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- NEVER EAT MEAT WITH VISIBLE FAT 0

37. How many eggs do you usually eat in a week – less than one, 1-2, 3-4, or 5 or more?

IF ASKED, SAY: "The question is asking about plain eggs, not egg substitutes or eggs in mixed dishes or baked goods."

- LESS THAN ONE/NONE 1
- 1-2 2
- 3-4 3
- 5 OR MORE 4

Q.35 This question is asking the respondent to estimate what a typical serving of meat is for him/her. "Meat" refers to beef, pork, or lamb.

If the respondent asks you to define "meat," refer to the interview instruction.

Do not ask this question if Q.34 is coded zero.

Do not read "Don't Know" response. If the respondent says he/she does not eat meat, circle code 0 and skip to Q.37.

Circle only ONE code.

Q.36 This question is asking the respondent if he/she trims the fat from the meat. "Trims the fat" is referring to the visible fat on the outside of the meat. Refer the respondent to response set G on the reminder card.

Circle only ONE code.

Do not ask this question if Q.34 and Q.35 are coded 0.

Q.37 This question is asking the respondent about his egg consumption. In this question, "eggs" means "plain" eggs -- those that are recognizable as eggs. For example, a plain egg would be scrambled, fried, poached, boiled, deviled, or in an omelet. Do not count eggs eaten in mixed dishes like casseroles, cakes, bread, or a quiche. Also do not include egg substitutes.

Use interviewer instruction as needed.

Accept only ONE answer.

38. Before you eat fresh fruits and vegetables, do you or does someone else wash them always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DON'T KNOW 8
- DO NOT EAT FRESH FRUITS/
VEGETABLES 0 (Q42)

39. When you eat fresh fruits with peels that can be eaten, do you eat the peel always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DON'T KNOW 8

40. When you eat fresh vegetables with peels that can be eaten, do you eat the peel always, sometimes, rarely, or never?

- ALWAYS (ALMOST ALWAYS) 1
- SOMETIMES 2
- RARELY 3
- NEVER 4
- DON'T KNOW 8

41. Do you eat the outer leaves of leafy vegetables like lettuce and cabbage?

- YES 1
- NO 2
- DON'T KNOW 8
- DO NOT EAT LEAFY VEGETABLES 0

IF NEEDED, SAY: "What do you do most of the time?"

42. Are you the person most responsible for planning or preparing the meals in your household?

- YES 1
- NO 2
- DON'T KNOW 8

THANK YOU FOR YOUR TIME AND COOPERATION

TIME ENDED _____ AM
PM

Q.38 This question asks the respondent how often he/she or someone else washes fruits and vegetables before eating. The question is not asking how often the respondent solely washes or even eat fruits and vegetables.

Refer the respondent to response set G on the reminder card.

A "Never" response means the respondent never eats fruits and vegetables that have been washed first, while a "Do Not Eat" response means the respondent never eats fruits and vegetables.

Q.39-40 These questions asks the respondent how often he/she eats fruits and vegetables that are peeled. The question is not asking how often the respondent peels his/her fruits and vegetables.

Refer the respondent to response set G on the reminder card.

If the respondent replies that his/her answer varies depending on the type of fruit or vegetable, say something like "How often do you typically eat peeled fruits and/or vegetables?"

If the respondent reported "Do Not Eat Fresh Fruits/Vegetables" in Q.38, skip to Q.42.

Q.41 This question is asking if the respondent eats the outer leaves of leafy vegetables.

DO NOT READ the response categories. Circle only ONE response. If the respondent says he/she does not eat leafy vegetables, circle code zero (0).

Q.42 This question is asking the respondent's opinion as to whether he/she is the person most responsible for meal planning and preparation. Often many members of a household take part in planning and preparing meals.

DO NOT READ the response categories.

Record the time ended in the lower right-hand corner and circle the AM or PM as appropriate. Then transfer to front cover.