



**NATIONAL HEALTH AND NUTRITION  
EXAMINATION SURVEY  
NHANES 2019-2020**

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**Flexible Consumer Behavior Survey  
(FCBS) Module**

January 2019



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Department of Health and Human Services  
Centers for Disease Control and Prevention  
National Center for Health Statistics  
National Health and Nutrition Examination Survey  
<http://www.cdc.gov/nchs/nhanes.htm>

# FLEXIBLE CONSUMER BEHAVIOR SURVEY (FCBS) MODULE

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## NHANES 2019-2020 FCBS CORE MODULE

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- a. Interview mode: In-person household interview
- b. Target age: 1+ years (proxy interview for 1-15 years old)
- c. FCBS core module includes two parts:
  1. Family level questions
    - 44 questions administered as part of the NHANES household family questionnaire
    - Includes 13 questions in the Consumer Behavior Section (CBQ), 6 questions in the Income Section (INQ), and 9 questions in the Food Security Section (FSQ)
  2. Sample person questions
    - 19 questions included as part of the Dietary Behavior Section (DBQ) in the NHANES household SP questionnaire
- d. New in the 2019-2020 FCBS core module
  1. Updated the prefills for the monthly income questions INQ238 and INQ241 with the HHS 2018 poverty guidelines.



CBQ.091 Q/U About how much money was spent on nonfood items? (You can tell me per week or per month.)

\$ | | | | | | | | | | | | | | | | | | | | | |  
ENTER AMOUNT

HARD EDIT: AMOUNT CANNOT BE MORE THAN THE AMOUNT ENTERED ON CBQ.071.

REFUSED ..... 7 (CBQ.101)  
DON'T KNOW ..... 9 (CBQ.101)

ENTER UNIT

WEEK ..... 1  
MONTH ..... 2

CBQ.101 During the **past 30 days**, {did your family/did you} spend money on **food** at stores **other** than grocery stores? Please do not include money that you have already told me about. Here are some examples of stores other than grocery stores where you might buy food.

HAND CARD CBQ1

YES ..... 1  
NO ..... 2 (CBQ.121)  
REFUSED ..... 7 (CBQ.121)  
DON'T KNOW ..... 9 (CBQ.121)

CBQ.111 Q/U About how much money {did your family/did you} spend on **food** at these types of stores? Please do not include money you have already told me about. (You can tell me per week or per month.)

INTERVIEWER: ENTER "0" IF SP SAYS NO MONEY WAS SPENT.

\$ | | | | | | | | | | | | | | | | | | | | | |  
ENTER AMOUNT

REFUSED ..... 7 (CBQ.121)  
DON'T KNOW ..... 9 (CBQ.121)

ENTER UNIT

WEEK ..... 1  
MONTH ..... 2

CBQ.121 Q/U During the **past 30 days**, how much money {did your family/did you} spend on **eating out**? Please include money spent in cafeterias at work or at school or on vending machines, **for all family members**. (You can tell me per week or per month.)

INTERVIEWER INSTRUCTION: IF RESPONDENT KNOWS ONLY AMOUNT FOR SELF, CODE DK.

INTERVIEWER: ENTER "0" IF SP SAYS NO MONEY WAS SPENT.

\$ |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|  
ENTER AMOUNT

REFUSED ..... 7 (CBQ.131)  
DON'T KNOW ..... 9 (CBQ.131)

ENTER UNIT

WEEK ..... 1  
MONTH ..... 2

CBQ.131 Q/U During the **past 30 days**, how much money {did your family/did you} spend on food **carried out or delivered**? Please do not include money you have already told me about. (You can tell me per week or per month.)

INTERVIEWER INSTRUCTION: IF RESPONDENT KNOWS ONLY AMOUNT FOR SELF, CODE DK.

INTERVIEWER: ENTER "0" IF SP SAYS NO MONEY WAS SPENT.

\$ |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|  
ENTER AMOUNT

REFUSED ..... 7 (END OF SECTION)  
DON'T KNOW ..... 9 (END OF SECTION)

ENTER UNIT

WEEK ..... 1  
MONTH ..... 2

**BOX 2**

**CHECK ITEM CBQ.205:**  
IF THE FAMILY INCLUDES AT LEAST ONE SP AGED 1-15 YEARS OLD, CONTINUE;  
OTHERWISE, GO TO THE END OF SECTION.

**Section II. Meal planner/shopper/preparer in the family**

CBQ.210 Who is the person who does **most** of the planning or preparing of meals in your family?

CAPI INSTRUCTION:

- DISPLAY NAMES, GENDERS, AND AGES OF ALL HOUSEHOLD MEMBERS.
- SORT THE LIST BY FAMILY AND DISPLAY THE FAMILY OF THE CURRENT RESPONDENT FIRST.
- WITHIN EACH FAMILY, SORT THE FAMILY MEMBERS BY AGE FROM OLDEST TO YOUNGEST.
- BLOCK ALL MEMBERS 10 YEAR OR YOUNGER FROM BEING SELECTED.
- ONLY ALLOW ONE PERSON TO BE SELECTED.

INTERVIEWER INSTRUCTION: SELECT NAME FROM ROSTER

CAPI INSTRUCTION:

AUTOFILL THOSE WHO WERE NOT SELECTED AS CODE "2".

MMP CALCULATION INSTRUCTION

PERSON SELECTED AS FCBS RESPONDENT MUST BE 16 YEARS OR OLDER.

SELECT .....	1
NOT SELECT .....	2 (CBQ.240)
REFUSED .....	7 (CBQ.240)
DON'T KNOW .....	9 (CBQ.240)

SOFT EDIT:

IF THE SELECTED PERSON IS LESS THAN 18 YEARS OLD, DISPLAY THE FOLLOWING MESSAGE:  
"PLEASE VERIFY THAT THE PERSON SELECTED IS YOUNGER THAN 18 YEARS OLD."

SOFT EDIT:

IF CBQ.210 EQUALS 2-NOT SELECT OR DK FOR EVERY HH MEMBER, DISPLAY THE FOLLOWING MESSAGE: "PLEASE VERIFY THAT NO ONE LISTED DOES MOST OF THE PLANNING AND PREPARING OF MEALS IN THE SP'S FAMILY."

CBQ.220 {Do you/Does he/she} share in the planning or preparing of meals with someone else?

YES .....	1
NO .....	2 (CBQ.240)
REFUSED .....	7 (CBQ.240)
DON'T KNOW .....	9 (CBQ.240)

CBQ.230 Who is the person who shares in the planning or preparing of meals with {you/him/her}?

CAPI INSTRUCTION:

- DISPLAY NAMES, GENDERS, AND AGES OF ALL HOUSEHOLD MEMBERS, EXCEPT THE ONE NAMED IN CBQ.210.
- SORT THE LIST BY FAMILY AND DISPLAY THE FAMILY OF THE CURRENT RESPONDENT FIRST.
- WITHIN EACH FAMILY, SORT THE FAMILY MEMBERS BY AGE FROM OLDEST TO YOUNGEST.
- BLOCK ALL MEMBERS 10 YEAR OR YOUNGER FROM BEING SELECTED.
- ONLY ALLOW ONE PERSON TO BE SELECTED.

INTERVIEWER INSTRUCTION: SELECT NAME FROM ROSTER

CAPI INSTRUCTION:

AUTOFILL THOSE WHO WERE NOT SELECTED AS CODE "2".

MMP CALCULATION INSTRUCTION

PERSON SELECTED AS FCBS RESPONDENT MUST BE 16 YEARS OR OLDER.

SELECT .....	1
NOT SELECT .....	2
REFUSED .....	7
DON'T KNOW .....	9

SOFT EDIT:

IF THE SELECTED PERSON IS LESS THAN 18 YEARS OLD, DISPLAY THE FOLLOWING MESSAGE:  
"PLEASE VERIFY THAT THE PERSON SELECTED IS YOUNGER THAN 18 YEARS OLD."



CBQ.240 Who is the person who does **most** of the shopping for food in your family?

CAPI INSTRUCTION:

- DISPLAY NAMES, GENDERS, AND AGES OF ALL HOUSEHOLD MEMBERS.
- SORT THE LIST BY FAMILY AND DISPLAY THE FAMILY OF THE CURRENT RESPONDENT FIRST.
- WITHIN EACH FAMILY, SORT THE FAMILY MEMBERS BY AGE FROM OLDEST TO YOUNGEST.
- BLOCK ALL MEMBERS 10 YEAR OR YOUNGER FROM BEING SELECTED.
- ONLY ALLOW ONE PERSON TO BE SELECTED.

INTERVIEWER INSTRUCTION: SELECT NAME FROM ROSTER

CAPI INSTRUCTION:

AUTOFILL THOSE WHO WERE NOT SELECTED AS CODE "2".

MMP CALCULATION INSTRUCTION

PERSON SELECTED AS FCBS RESPONDENT MUST BE 16 YEARS OR OLDER.

SELECT .....	1
NOT SELECT .....	2 (END OF SECTION)
REFUSED .....	7 (END OF SECTION)
DON'T KNOW .....	9 (END OF SECTION)

SOFT EDIT:

IF THE SELECTED PERSON IS LESS THAN 18 YEARS OLD, DISPLAY THE FOLLOWING MESSAGE:  
"PLEASE VERIFY THAT THE PERSON SELECTED IS YOUNGER THAN 18 YEARS OLD."

SOFT EDIT:

IF CBQ.240 EQUALS 2-NOT SELECT OR DK FOR EVERY HH MEMBER, DISPLAY THE FOLLOWING MESSAGE: "PLEASE VERIFY THAT NO ONE LISTED DOES MOST OF THE SHOPPING FOR FOOD IN THE SP'S FAMILY."

CBQ.250 {Do you/Does he/she} share in the shopping for food with someone else?

YES .....	1
NO .....	2 (END OF SECTION)
REFUSED .....	7 (END OF SECTION)
DON'T KNOW .....	9 (END OF SECTION)

CBQ.260 Who is the person who shares the food shopping with {you/him/her}?

CAPI INSTRUCTION:

- DISPLAY NAMES, GENDERS, AND AGES OF ALL HOUSEHOLD MEMBERS, EXCEPT THE ONE NAMED IN CBQ.240.
- SORT THE LIST BY FAMILY AND DISPLAY THE FAMILY OF THE CURRENT RESPONDENT FIRST.
- WITHIN EACH FAMILY, SORT THE FAMILY MEMBERS BY AGE FROM OLDEST TO YOUNGEST.
- BLOCK ALL MEMBERS 10 YEAR OR YOUNGER FROM BEING SELECTED.
- ONLY ALLOW ONE PERSON BEING SELECTED.

INTERVIEWER INSTRUCTION: SELECT NAME FROM ROSTER

CAPI INSTRUCTION:

AUTOFILL THOSE WHO WERE NOT SELECTED AS CODE "2".

MMP CALCULATION INSTRUCTION

PERSON SELECTED AS FCBS RESPONDENT MUST BE 16 YEARS OR OLDER.

SELECT .....	1
NOT SELECT .....	2
REFUSED .....	7
DON'T KNOW .....	9

SOFT EDIT:

IF THE SELECTED PERSON IS LESS THAN 18 YEARS OLD, DISPLAY THE FOLLOWING MESSAGE:  
"PLEASE VERIFY THAT THE PERSON SELECTED IS YOUNGER THAN 18 YEARS OLD."

**Section III. Income and Assets**

**a. Monthly Income**

INQ.235      What is the total income received last month, {LAST CALENDAR MONTH & CURRENT CALENDAR YEAR} by {you/NAMES OF OTHER FAMILY/you and NAMES OF FAMILY MEMBERS}} before taxes?

[Please include income from all sources we have just talked about such as wages, salaries, Social Security or retirement benefits, help from relatives and so forth.]

[INTERVIEWER INSTRUCTION: IF SP DOES NOT KNOW INCOME OF OTHER FAMILY MEMBERS, ENTER DON'T KNOW.]

SOFT EDIT: AMOUNT REPORTED IN INQ.235 (MONTHLY INCOME) GREATER THAN OR EQUAL TO THE AMOUNT REPORTED IN INQ.200 (ANNUAL INCOME), DISPLAY SOFT EDIT MESSAGE:

"INTERVIEWER, YOU HAVE RECORDED AN ANNUAL TOTAL INCOME OF {ANNUAL INCOME REPORTED IN INQ.200} AND LAST MONTH'S TOTAL INCOME WAS RECORDED AS {TOTAL MONTHLY INCOME REPORTED IN INQ.235}. PLEASE CONFIRM WITH SP THAT LAST MONTH'S INCOME OF {TOTAL MONTHLY INCOME REPORTED IN INQ.235} IS CORRECT.

CAPI INSTRUCTION:

- REQUIRE DOUBLE ENTRY OF INCOME.
- SCREEN SHOULD READ:  
    DOUBLE ENTRY OF INCOME REQUIRED.
- IF ENTRIES DO NOT MATCH, DISPLAY BOTH ENTRIES. INTERVIEW SHOULD SELECT ENTRY TO CORRECT.
- FOR THE CALENDAR FILL: IF CURRENT MONTH IS JANUARY THE PAST CALENDAR YEAR WILL BE SHOWN

\$ |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_| (INQ.300)

REFUSED ..... 7777777777  
DON'T KNOW ..... 9999999999

INQ.238

You may not be able to give us an exact figure, but can you tell me if the income for {you/NAMES OF OTHER FAMILY/your family} in {LAST CALENDAR MONTH & CURRENT CALENDAR YEAR} was . . .

{185% of monthly poverty level} or less, or ..... 1  
 more than {185% monthly poverty level}? ..... 2 (INQ.300)  
 REFUSED ..... 7  
 DON'T KNOW ..... 9

PROBE: (That would be {12 times 185% monthly poverty level}) per year.)

CAPI INSTRUCTION:

- Fill 185% of the **monthly** poverty level based on family size:  
 For family sizes **1-8**, use the numbers in the 3<sup>rd</sup> column in the appropriate table below.  
 For family size **> 8**, with each additional family member:
  - For the 48 contiguous states and the District of Columbia, fill {[\$6,695+(\$681 \* # of additional person past 8)] round to nearest 100s}.
  - For Hawaii, fill {[\$7,699+(\$783 \* # of additional person past 8)] round to nearest 100s}.
- Fill 185% of the **annual** poverty level based on family size in the PROBE:  
 For family sizes **1-8**, use the numbers in the 5<sup>th</sup> column in the appropriate table below.  
 For family size **> 8**, with each additional member:,
  - For the 48 contiguous states and the District of Columbia, fill {[\$80,345.5+(\$8,177 \* # of additional person past 8)] round to nearest 100s}.
  - For Hawaii, fill {[\$92,389+(\$9,398 \* # of additional person past 8)] round to nearest 100s}.

TABLE 1A. 185% POVERTY LEVELS FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

Persons in Family	185% monthly poverty level		185% annual poverty level	
	Raw Number	Rounded to nearest 100s <sup>1</sup>	Raw Number <sup>2</sup>	Rounded to nearest 100s <sup>3</sup>
1	1,926	1,900	23,107	23,100
2	2,607	2,600	31,284	31,300
3	3,288	3,300	39,461	39,500
4	3,970	4,000	47,638	47,600
5	4,651	4,700	55,815	55,800
6	5,333	5,300	63,992	64,000
7	6,014	6,000	72,169	72,200
8	6,695	6,700	80,346	80,300

<sup>1</sup>: These are the numbers to be used in the response category fills.  
<sup>2</sup>: Multiply by 12 to the raw number of the 185% monthly poverty level.  
<sup>3</sup>: These are the numbers to be used in the probe fills.

TABLE 1B. 185% POVERTY LEVELS FOR HAWAII

Persons in Family	185% monthly poverty level		185% annual poverty level	
	Raw Number	Rounded to nearest 100s <sup>1</sup>	Raw Number <sup>2</sup>	Rounded to nearest 100s <sup>3</sup>
1	2,217	2,200	26,603	26,600
2	3,000	3,000	36,001	36,000
3	3,783	3,800	45,399	45,400
4	4,566	4,600	54,797	54,800
5	5,350	5,300	64,195	64,200
6	6,133	6,100	73,593	73,600
7	6,916	6,900	82,991	83,000
8	7,699	7,700	92,389	92,400

<sup>1</sup>: These are the numbers to be used in the response category fills.

<sup>2</sup>: Multiply by 12 to the raw number of the 185% monthly poverty level.

<sup>3</sup>: These are the numbers to be used in the probe fills.

INQ.241 Was it more or less than {130% monthly poverty level}?

{130% of monthly poverty level} OR LESS.... 1  
 More than {130% of monthly poverty level} ... 2  
 REFUSED ..... 7  
 DON'T KNOW ..... 9

PROBE: {That would be 12 times 130% annual poverty level per year.}

CAPI INSTRUCTION:

- Fill 130% of the **monthly** poverty level based on family size:  
 For family sizes **1-8**, use the numbers in the 3<sup>rd</sup> column in the appropriate table below.  
 For family size **> 8**, with each additional family member:
  - For the 48 contiguous states and the District of Columbia, fill {[\$4,705+(\$479\* # of additional person past 8)] round to nearest 100s}.
  - For Hawaii, fill {[\$5,410+(\$550 \* # of additional person past 8)] round to nearest 100s}.
- Fill 130% of the **annual** poverty level based on family size in the PROBE:  
 For family sizes **1-8**, use the numbers in the 5<sup>th</sup> column in the appropriate table below.  
 For family size **> 8**, with each additional member:
  - For the 48 contiguous states and the District of Columbia, fill {[\$56,459+(\$5,746\* # of additional person past 8)] round to nearest 100s}
  - For Hawaii, fill {[\$64,922+(\$6,604 \* # of additional person past 8)] round to nearest 100s}

TABLE 2A. 130% POVERTY LEVELS FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

Persons in Family	130% monthly poverty level		130% annual poverty level	
	Raw Number	Rounded to nearest 100s <sup>1</sup>	Raw Number <sup>2</sup>	Rounded to nearest 100s <sup>3</sup>
1	1,353	1,400	16,237	16,200
2	1,832	1,800	21,983	22,000
3	2,311	2,300	27,729	27,700
4	2,790	2,800	33,475	33,500
5	3,268	3,300	39,221	39,200
6	3,747	3,700	44,967	45,000
7	4,226	4,200	50,713	50,700
8	4,705	4,700	56,459	56,500

<sup>1</sup>: These are the numbers to be used in the response category fills.  
<sup>2</sup>: Multiply by 12 to the raw number of the 185% monthly poverty level.  
<sup>3</sup>: These are the numbers to be used in the probe fills.

TABLE 2B. 130% POVERTY LEVELS HAWAII

Persons in Family	130% monthly poverty level		130% annual poverty level	
	Raw Number <sup>1</sup>	Rounded to nearest 100s <sup>2</sup>	Raw Number <sup>3</sup>	Rounded to nearest 100s <sup>4</sup>
1	1,558	1,600	18,694	18,700
2	2,108	2,100	25,298	25,300
3	2,659	2,700	31,902	31,900
4	3,209	3,200	38,506	38,500
5	3,759	3,800	45,110	45,100
6	4,310	4,300	51,714	51,700
7	4,860	4,900	58,318	58,300
8	5,410	5,400	64,922	64,900

<sup>1</sup>: These are the numbers to be used in the response category fills.

<sup>2</sup>: Multiply by 12 to the raw number of the 185% monthly poverty level.

<sup>3</sup>: These are the numbers to be used in the probe fills.

**b. Assets**

INQ.300 Do {you/NAMES OF OTHER FAMILY/you and NAMES OF FAMILY MEMBERS} have more than \$20,000 in savings at this time? Please include money in all types of accounts {you/your family} may have. Here are some examples of the types of accounts.

HAND CARD INQ3

CAPI INSTRUCTION:

DISPLAY "you" for single-person family; DISPLAY "the members of your family" for multi-persons family.

YES ..... 1 (BOX 9)  
NO ..... 2  
REFUSED ..... 7 (BOX 9)  
DON'T KNOW ..... 9 (BOX 9)

INQ.310 Which letter on this card best represents the total savings or cash assets at this time for {you/NAMES OF OTHER FAMILY/your family}?

HAND CARD INQ4

|\_| ENTER LETTER

REFUSED ..... 7  
DON'T KNOW ..... 9

- A: \$0 - \$3,000
- B: \$3,001 - \$5,000
- C: \$5,001 - \$10,000
- D: \$10,001 - \$15,000
- E: \$15,001 - \$20,000



**c. Household's Access to a Vehicle for Food Shopping**

INQ.320 Now I will ask you a question about how your household usually travels to the store for your grocery shopping.

Please look at this card. How do {you/you or anyone who lives in the household} **usually** get to the store (or stores) where you do **most** of your grocery shopping?

HAND CARD INQ5

INTERVIEWER INSTRUCTION:

- 1. IF THE RESPONDENT CANNOT DECIDE ON ONE SINGLE ANSWER, PROBE FOR THE **"USUAL/MOST COMMON"** WAY.
- 2. SELECT "NO USUAL MODE OF TRAVELING TO STORE" ONLY WHEN THE RESPONDENT CANNOT REPORT A SINGLE USUAL MODE FOR THE QUESTION.
- 3. IF THE RESPONDENT USES DIFFERENT MODES FOR GETTING TO AND RETURNING FROM STORE, ENTER THE MODE OF "GETTING TO" THE STORE.

IN MY CAR.....	1
IN A CAR THAT BELONGS TO SOMEONE I LIVE WITH.....	2
IN A CAR THAT BELONGS TO SOMEONE WHO LIVES ELSEWHERE .....	3
WALK .....	4
RIDE BICYCLE.....	5
BUS, SUBWAY OR OTHER PUBLIC TRANSIT.....	6
TAXI OR OTHER PAID DRIVER.....	7
SOMEONE ELSE DELIVERS GROCERIES.	8
OTHER.....	9
NO USUAL MODE OF TRAVELING TO STORE.....	66
REFUSED .....	77
DON'T KNOW .....	99

**Section IV. Food Assistance - the Supplemental Nutrition Assistance Program**

**a. For current participants and persons who received benefits in the last 12 months**

For current SNAP participants:

- FSQ.810
- FSQ.811
- FSQ.812

For non-current participants who received SNAP in the last 12 months:

- FSQ.900
- FSQ.901
- FSQ.902

On what date were food stamps last put on {your/their/her/his} {DISPLAY STATE NAME FOR EBT CARD} /EBT} card?

**CAPI INSTRUCTIONS:**

INSERT "EBT" IF INTERVIEWING IN STATE WITH NO SPECIFIC NAME FOR THE EBT CARD.  
INSERT STATE NAME FOR EBT CARD IF INTERVIEWING IN A STATE THAT HAS A SPECIFIC NAME FOR THE EBT CARD.  
SEPARATE FIELDS FOR MONTH, DAY AND YEAR, ALLOW ENTRY OF RF AND DK IN FIELDS.

HARD EDIT: DATE MUST BE WITHIN PAST 12 MONTHS OF CURRENT DATE.

INTERVIEWER INSTRUCTION: PROBE FOR ANY MISSING PORTIONS OF DATE.

|\_|\_| - |\_|\_| - |\_|\_|\_|\_|\_|  
MONTH DAY YEAR

REFUSED ..... 7  
DON'T KNOW ..... 9

**b. For persons who anticipated receiving benefits in the next 30 days**

- FSQ.860 On what date {do you/ do you, NAME(S) OF ALL HH MEMBER WITH "NOT SELECTED (CODE "2")" IN
- FSQ.861 FSQ.790/ does {/NAME(S) OF HH MEMBERS WHO ARE NOT THE RESPONDENT AND WITH "NOT
- FSQ.862 SELECTED (CODE "2")" IN FSQ.790}} think {you/you or she, you or he, you or they/he, she, they} will start getting Food Stamps?

**CAPI INSTRUCTIONS:**

SEPARATE FIELDS FOR MONTH, DAY AND YEAR, ALLOW ENTRY OF RF AND DK IN FIELDS.

HARD EDIT: DATE MUST BE AT OR AFTER CURRENT DATE. DATE MUST NOT BE MORE THAN TWO MONTHS FROM CURRENT MONTH.

INTERVIEWER INSTRUCTION: PROBE FOR ANY MISSING PORTIONS OF DATE. IF THERE ARE MULTIPLE ANTICIPATED STARTING DATES, ENTER THE ONE CLOSEST TO THE CURRENT DATE.

|\_|\_| - |\_|\_| - |\_|\_|\_|\_|\_|  
MONTH DAY YEAR

REFUSED ..... 7  
DON'T KNOW ..... 9

**NHANES 2019-2020 FCBS CORE MODULE**  
**Sample Person Questions**

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**Section V. Self-Assessed Diet Quality**

DBQ.700    Next I have some questions about {your/SP's} eating habits.

In general, how healthy is {your/his/her} overall diet? Would you say . . .

- excellent, ..... 1
- very good,..... 2
- good,..... 3
- fair, or ..... 4
- poor? ..... 5
- REFUSED ..... 7
- DON'T KNOW..... 9

**Section VI. Food Assistance - WIC**

**BOX 14**

**CHECK ITEM DBQ.710:**  
 IF SP AGE > 5, GO TO BOX 15.  
 OTHERWISE, CONTINUE.

FSQ.653 Next are a few questions about the WIC program.

Has {SP} **ever** received benefits from WIC, that is, the Women, Infants, and Children program?

- YES ..... 1
- NO ..... 2 (FSQ.690)
- REFUSED ..... 7
- DON'T KNOW..... 9 (FSQ.690)

**HELP SCREEN:**

WIC: WIC is short for the Special Supplemental Nutrition Program for Women, Infants, and Children. This program provides food assistance and nutritional screening to low-income pregnant and postpartum women and their infants, as well as to low-income children up to age 5.

**BOX 14a**

OMITTED

FSQ.673 Is {SP} **now** receiving benefits from the WIC program?

- YES ..... 1 (BOX 14B)
- NO ..... 2
- REFUSED ..... 7 (BOX 14B)
- DON'T KNOW..... 9 (BOX 14B)

**BOX 14B**

**CHECK ITEM DBQ.710b:**  
 IF SP AGE < 1, GO TO FSQ.685.  
 OTHERWISE, CONTINUE.

FSQ.675 Did {SP} receive benefits from WIC when {he/she} was less than one year old?

- YES ..... 1
- NO ..... 2
- REFUSED ..... 7
- DON'T KNOW..... 9

**BOX 14C**

**CHECK ITEM DBQ.950:**

IF FSQ.673 = 1 (NOW RECEIVING WIC), GO TO FSQ.685.  
OTHERWISE, CONTINUE.

FSQ.682 Did {SP} receive benefits from WIC when {he/she} {was/is} between the ages of {1 to {SP AGE/4} years old/12 to {SP AGE} months old}?

CAPI INSTRUCTION:

If SP age = 1, DISPLAY "12 to {the current age of the SP in months} months old";  
If SP age = 2 or 3, DISPLAY "1 to {the current age of the SP in years} years old";  
If SP age >3, DISPLAY "1 to 4 years old".

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9

**BOX 14d**

OMITTED

FSQ.685 Q/U How long {did SP receive/has SP been receiving} benefits from the WIC program?

CAPI INSTRUCTION:

IF FSQ.673 = 1, DISPLAY "HAS SP BEEN RECEIVING"  
OTHERWISE, DISPLAY "DID SP RECEIVE"

SOFT EDIT: NUMBER CANNOT BE MORE THAN SP'S AGE.

|||  
ENTER NUMBER (OF MONTHS OR YEARS)

REFUSED ..... 777 (FSQ.690)  
DON'T KNOW..... 999 (FSQ.690)

|  
ENTER UNIT

MONTHS ..... 1  
YEARS ..... 2

FSQ.690 Did {SP's} mother receive benefits from WIC, while she was pregnant with {SP}?

YES ..... 1  
NO ..... 2 (BOX 15)  
REFUSED ..... 7 (BOX 15)  
DON'T KNOW..... 9 (BOX 15)

FSQ.695 How many months pregnant was {SP's} mother when she began to receive WIC benefits?

|\_|\_|  
ENTER NUMBER

REFUSED ..... 777  
DON'T KNOW..... 999

**Section VII. Food Away From Home (FAFH) Frequency**

**BOX 15**

**CHECK ITEM DBQ.715:**  
 IF SP AGE < 1 GO TO END OF SECTION.  
 IF SP AGE 12-15 GO TO END OF SECTION.  
 OTHERWISE, CONTINUE.

DBQ.895 Next I'm going to ask you about meals. By meal, I mean **breakfast, lunch and dinner**. During the **past 7 days**, how many meals {did you/did SP} get that were **prepared away from home** in places such as restaurants, fast food places, food stands, grocery stores, or from vending machines?

{Please do not include meals provided as part of the school lunch or school breakfast/Please do not include meals provided as part of the community programs you reported earlier.}

**CAPI INSTRUCTION:**

IF DBQ381G = 1 OR DBQ.411G = 1, DISPLAY {Please do not include meals provided as part of the school lunch or school breakfast.}

IF DBQ.301 = 1 OR DBQ.330 = 1, DISPLAY {Please do not include meals provided as part of the community programs you reported earlier.}

SOFT EDIT: DISPLAY A MESSAGE FOR ENTRY LARGER THAN "21." – "Unusually large number entered – Please verify – this is more than 3 meals per day, each day during the past 7 days."

|\_|\_|  
 ENTER NUMBER

- NONE ..... 2 (DBQ.905)
- REFUSED ..... 7 (DBQ.905)
- DON'T KNOW..... 9 (DBQ.905)

DBQ.900 How many of those meals {did you/did SP} get from a fast-food or pizza place?

ENTER NUMBER ..... 1

- NONE ..... 2 (DBQ.905)
- REFUSED ..... 7 (DBQ.905)
- DON'T KNOW..... 9 (DBQ.905)

|\_|\_|  
 ENTER NUMBER

**CAPI INSTRUCTION: HARD EDIT**

NUMBER OF MEALS ENTERED IN DBQ.900 MUST BE EQUAL TO OR LESS THAN NUMBER ENTERED IN DBQ.895. IF NOT, DISPLAY THE FOLLOWING:

"THE NUMBER OF MEALS FROM A FAST FOOD OR PIZZA PLACE CANNOT BE GREATER THAN NUMBER OF MEALS PREPARED AWAY FROM HOME."

**Section VIII. Use of Convenience Foods**

DBQ.905 Some grocery stores sell “ready to eat” foods such as salads, soups, chicken, sandwiches and cooked vegetables in their salad bars and deli counters.

During the **past 30 days**, how often did {you/SP} eat “ready to eat” foods from the grocery store?  
Please do not include sliced meat or cheese you buy for sandwiches and frozen or canned foods.

- ENTER NUMBER OF TIMES ..... 1
- NEVER ..... 2 (DBQ.910)
- REFUSED ..... 7 (DBQ.910)
- DON'T KNOW..... 9 (DBQ.910)

|\_|\_|  
ENTER NUMBER OF TIMES (PER DAY, WEEK, OR MONTH)

|\_|  
ENTER UNIT

- DAY ..... 1
- WEEK..... 2
- MONTH ..... 3

CAPI INSTRUCTION:  
SOFT EDIT IF RESPONSE IS GREATER THAN 6 TIMES A DAY. “THIS IS AN UNUSUALLY LARGE NUMBER OF TIMES PER DAY, PLEASE VERIFY THE ANSWER.”



DBQ.910 During the **past 30 days**, how often did you {SP} eat frozen meals or frozen pizzas? Here are some examples of frozen meals and frozen pizzas.

HAND CARD DBQ7

ENTER NUMBER..... 1  
NEVER ..... 2 (BOX 15A)  
REFUSED ..... 7 (BOX 15A)  
DON'T KNOW..... 9 (BOX 15A)

|\_|\_|  
ENTER NUMBER OF TIMES (PER DAY, WEEK, OR MONTH)

|\_|  
ENTER UNIT

DAY ..... 1  
WEEK ..... 2  
MONTH ..... 3

CAPI INSTRUCTION:  
SOFT EDIT IF RESPONSE IS GREATER THAN 6 TIMES A DAY. "THIS IS AN UNUSUALLY LARGE NUMBER OF TIMES PER DAY, PLEASE VERIFY THE ANSWER."

**Section IX. MyPlate knowledge**

<p><b>BOX 15A</b></p> <p><b>CHECK ITEM DBQ.715a:</b> IF SP AGE &lt; 16, GO TO END OF SECTION. OTHERWISE, CONTINUE.</p>
--

CBQ.596      Next I'm going to ask a few questions about the nutritional guidelines recommended for Americans by the federal government.

{Have you/Has SP} heard of **My Plate**?

- YES ..... 1
- NO ..... 2 (DBQ.930)
- REFUSED ..... 7 (DBQ.930)
- DON'T KNOW..... 9 (DBQ.930)

CBQ.606      {Have you/Has SP} looked up the My Plate plan on the internet?

- YES ..... 1
- NO ..... 2
- REFUSED ..... 7
- DON'T KNOW..... 9

CBQ.611      {Have you/Has SP} tried to follow the recommendations in the My Plate plan?

- YES ..... 1
- NO ..... 2
- REFUSED ..... 7
- DON'T KNOW..... 9

**Section X. Main planner/shopper/preparer status**

DBQ.930 {Are you/Is SP} the person who does **most** of the planning **or** preparing of meals in {your/SP's} family?

INTERVIEWER INSTRUCTION: IF SP ANSWERS "SOMETIMES" OR "50/50", ENTER YES.

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW ..... 9

DBQ.935 {Do you/Does SP} share in the planning or preparing of meals with someone else?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW ..... 9

DBQ.940 {Are you/Is SP} the person who does **most** of the shopping for food in {your/SP's} family?

INTERVIEWER INSTRUCTION: IF SP ANSWERS "SOMETIMES" OR "50/50", ENTER YES.

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW ..... 9

DBQ.945 {Do you/Does SP} share in the shopping for food with someone else?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW ..... 9

## NHANES 2019-2020 FCBS FOLLOW-UP MODULE

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- a. Interview mode: Telephone interview
- b. Target age: 16+ years
  - All NHANES participants 16 years and older who complete a dietary interview will be eligible to participate in the FCBS follow-up interview.
  - NHANES participants 1-15 years old will not be asked the FCBS follow-up questionnaire. Instead, one of their adult family members (16+ years old) who is responsible for the family's meal planning, preparing or food shopping will be sampled and asked to participate in this follow-up interview.
- c. A hand card booklet is given to the participants at the mobile exam center for them to use with the follow-up interview.
- d. New in the 2019-2020 FCBS follow-up module:
  - Three questions were added, and one was dropped:
    1. There is one new question on added sugars, based on the new Nutrition Facts Label (CBQ945).
    2. Added one question on which label the respondent has seen on food packages to assess whether consumers have been exposed to the new Nutrition Facts Label during the time of transition to the new food label (CBQ696).
    3. One question on 10% daily value (CBQ926) was added and the question on 5% daily value (CBQ925) was deleted to reflect the new Nutrition Facts Label.
  - Hand card instructions were slightly revised for CBQ696.
  - The skip pattern was revised for Box 5B.
  - The reference to Hand Cards was updated in the questionnaire.
  - The Hand Cards were updated with the image of the new Nutrition Facts Label and to highlight the “added sugars” information on the label.

## NHANES 2019-2020 FCBS FOLLOW-UP MODULE

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### Section XI. Hand card Information

CBQ.502 Do you have the green hand card booklet? {It is in the same bag as the food measuring guides {you used for your/we used for SP's} dietary phone interview. I'll wait while you locate it.

Do you have it?}

Yes.....	1	(CBQ.506)
No, .....	2	
REFUSED.....	7	
DON'T KNOW .....	9	

CBQ.503 Let's go ahead with the interview anyway. Do you have a cereal box, can or package of food with a food label on the back or the side that you can use for this interview? I'll wait while you locate it.

Yes.....	1
No .....	2
REFUSED.....	7
DON'T KNOW .....	9

**Section XII. Use of calorie labeling on menus**

CBQ.506 I am going to ask you about eating foods and beverages from different places. The types of places are listed on hand card 1 in your booklet. Please turn to hand card 1. We will start with foods or beverages from fast food or pizza places, then I'll go down the list and ask you about each of the other places.) For the first few questions, please answer yes or no.

In the past 12 months, did you buy food from fast food or pizza places?

CAPI INSTRUCTION:

If CBQ.502="2", "7", OR "9", REPLACE TEXT IN THE BRACES WITH THE FOLLOWING:

"Ok, let's go ahead with the interview. I am going to ask you about eating foods and beverages from different places. The types of places include: fast food or pizza places; restaurants with waiter or waitress service; all-you-can-eat buffets; places that sells mostly beverages, such as a coffee shop or juice bar; movie theatres, sports arenas, or other places of recreation; grocery stores; and convenience stores. We will start with foods or beverages from fast food or pizza places, then I'll ask you about each of the other places."

- Yes..... 1
- No ..... 2 [CBQ.551]
- REFUSED..... 7
- DON'T KNOW ..... 9

CBQ.536 At the **last fast food or pizza place** you bought foods or beverages, did you notice any **calorie information** on the menu?

- YES..... 1
- NO ..... 2 (CBQ.551)
- REFUSED..... 7 (CBQ.551)
- DON'T KNOW ..... 9 (CBQ.551)

CBQ.541 Did you use the information in deciding what to buy?

- YES..... 1
- NO ..... 2
- REFUSED..... 7
- DON'T KNOW ..... 9

CBQ.551 In the past 12 months, did you eat in or get take-out from a restaurant with waiter or waitress service?

- Yes..... 1
- No ..... 2 [CBQ.830]
- REFUSED..... 7
- DON'T KNOW ..... 9

CBQ.581 The **last** time you ate or got take-out from a restaurant **with a waiter or waitress**, did you notice any **calorie information** on the menu?

- YES..... 1
- NO ..... 2 (CBQ.830)
- REFUSED..... 7 (CBQ.830)
- DON'T KNOW ..... 9 (CBQ.830)

- CBQ.586 Did you use the information in deciding what to order?
- |                 |   |
|-----------------|---|
| YES.....        | 1 |
| NO .....        | 2 |
| REFUSED.....    | 7 |
| DON'T KNOW..... | 9 |
- CBQ.830 In the past 12 months, did you eat at an all-you-can-eat buffet style restaurant?
- |                 |             |
|-----------------|-------------|
| Yes.....        | 1           |
| No .....        | 2 [CBQ.845] |
| REFUSED.....    | 7           |
| DON'T KNOW..... | 9           |
- CBQ.835 The **last** time you ate at an **all-you-can-eat buffet style restaurant**, did you notice any **calorie information** on the menu?
- |                 |             |
|-----------------|-------------|
| YES.....        | 1           |
| NO .....        | 2 (CBQ.845) |
| REFUSED.....    | 7 (CBQ.845) |
| DON'T KNOW..... | 9 (CBQ.845) |
- CBQ.840 Did you use the information in deciding what to eat?
- |                 |   |
|-----------------|---|
| YES.....        | 1 |
| NO .....        | 2 |
| REFUSED.....    | 7 |
| DON'T KNOW..... | 9 |
- CBQ.845 In the past 12 months, did you buy any foods or beverages at a place that sells mostly beverages such as a coffee shop or juice bar?
- |                 |             |
|-----------------|-------------|
| Yes.....        | 1           |
| No .....        | 2 [CBQ.860] |
| REFUSED.....    | 7           |
| DON'T KNOW..... | 9           |
- CBQ.850 The **last** time you bought foods or beverages at a **place that sells mostly beverages**, did you notice any **calorie information** on the menu?
- |                 |             |
|-----------------|-------------|
| YES.....        | 1           |
| NO .....        | 2 (CBQ.860) |
| REFUSED.....    | 7 (CBQ.860) |
| DON'T KNOW..... | 9 (CBQ.860) |
- CBQ.855 Did you use the information in deciding what to order?
- |                 |   |
|-----------------|---|
| YES.....        | 1 |
| NO .....        | 2 |
| REFUSED.....    | 7 |
| DON'T KNOW..... | 9 |

CBQ860 In the past 12 months, did you buy any foods or beverages at movie theaters, sports arenas, or other places of recreation?

Yes..... 1  
No ..... 2 [CBQ.875]  
REFUSED..... 7  
DON'T KNOW ..... 9

CBQ.865 The **last** time you bought foods or beverages at a **movie theater, sports arena, or other place of recreation**, did you notice any **calorie information** on the menu?

YES..... 1  
NO ..... 2 (CBQ.875)  
REFUSED..... 7 (CBQ.875)  
DON'T KNOW ..... 9 (CBQ.875)

CBQ.870 Did you use the information in deciding what to order?

YES..... 1  
NO ..... 2  
REFUSED..... 7  
DON'T KNOW ..... 9

CBQ.875 In the past 12 months, did you buy prepared foods such as salads, soups, chicken, sandwiches and cooked vegetables from grocery store salad bars and deli counters?

Yes..... 1  
No ..... 2 [CBQ.890]  
REFUSED..... 7  
DON'T KNOW ..... 9

CBQ.880 The **last** time you bought **prepared foods** at a **grocery store**, did you notice any **calorie information** about these foods?

YES..... 1  
NO ..... 2 (CBQ.890)  
REFUSED..... 7 (CBQ.890)  
DON'T KNOW ..... 9 (CBQ.890)

CBQ.885 Did you use the information in deciding what to buy?

YES..... 1  
NO ..... 2  
REFUSED..... 7  
DON'T KNOW ..... 9



CBQ.890 In the past 12 months, did you buy prepared foods at convenience stores including gas stations or corner stores?

Yes..... 1  
No ..... 2 [Box 2]  
REFUSED..... 7  
DON'T KNOW..... 9

CBQ.895 The **last** time you bought **prepared foods** at a **convenience store**, including a gas station or corner store, did you notice any **calorie information** about these foods?

YES..... 1  
NO ..... 2 (Box 2)  
REFUSED..... 7 (Box 2)  
DON'T KNOW..... 9 (Box 2)

CBQ.900 Did you use the information in deciding what to buy?

YES..... 1  
NO ..... 2  
REFUSED..... 7  
DON'T KNOW..... 9

**BOX 2**

CHECK ITEM CBQ.615:  
CBQ.645 ONLY APPLY TO RESPONDENT WHO IS A SP.

IF RESPONDENT IS A SP, CONTINUE.  
OTHERWISE, GO TO CBQ.700.

**Section XIII. Calories knowledge**

CBQ.645 {Please turn to hand card 2.}

About how many calories do you think a {man/woman} of your age and physical activity needs to consume a day to maintain your current weight?

HAND CARD #2

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- A. Less than 500 calories ..... 1
- B. 500-1000 calories ..... 2
- C. 1001-1500 calories ..... 3
- D. 1501-2000 calories ..... 4
- E. 2001-2500 calories ..... 5
- F. 2501-3000 calories ..... 6
- G. More than 3000 calories ..... 7
- REFUSED ..... 77
- DON'T KNOW ..... 99

**Section XIV. Food Label**

CBQ.700 {Now turn the page to use hand card 3.}  
Many food packages contain an **expiration date** such as “**use by**” or “**sell by**”. How often do you use **the expiration date** when deciding to buy a food product?

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

HAND CARD #3

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER ..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

DBQ.780 Some food packages contain health claims about the benefits of nutrients or foods (like the examples on hand card 4). How often do you use this kind of **health claim** when deciding to buy a food product?

{Using hand card 5,} would you say always, most of the time, sometimes, rarely, or never?

HAND CARDS #4 & #5

CAPI INSTRUCTIONS:

IF CBQ.502=2, 7, or 9, REPLACE TEXT IN THE BRACES WITH THE FOLLOWING:

'For example, "Diets low in sodium may reduce the risk of high blood pressure", or "Adequate calcium throughout life may reduce the risk of osteoporosis"', Do NOT display "Using hand card 5", in the third sentence.

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

DBQ.750 {Please turn to hand card 6. For the next question you'll use hand card 7 to respond, but first please look at hand card 6 which shows an example of the food label.

How often do **you** use the **Nutrition Facts panel** on a food label, such as the part colored in yellow on the sample food label on hand card 6, when deciding to buy a food product?}

{Looking at hand card 7,} would you say always, most of the time, sometimes, rarely, or never?

HAND CARDS #6 & #7

CAPI INSTRUCTIONS:

IF CBQ.502=1, DISPLAY DBQ.750 AS SHOWN ABOVE.

ELSE IF CBQ.503=1, REPLACE TEXT IN THE BRACES WITH THE FOLLOWING:

"Next, we have some questions about food labels. On your (cereal box, can, food package, etc.) please look for the food label that is usually on the back or the side of the package. A food label has two parts, a Nutrition Facts panel and a list of ingredients. The "**Nutrition Facts panel**" of a food label lists the amount of calories, fat, fiber, carbohydrates and some other nutritional information.

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

Do NOT display "Looking at hand card 7", in the fourth sentence.

ELSE IF CBQ.503=2, 7, OR 9, REPLACE TEXT IN THE BRACES WITH THE FOLLOWING:

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

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

Do NOT display "Looking at hand card 7", in the fourth sentence.

ALWAYS ..... 1  
MOST OF THE TIME ..... 2  
SOMETIMES..... 3  
RARELY ..... 4  
NEVER ..... 5  
NEVER SEEN ..... 6  
REFUSED ..... 7  
DON'T KNOW ..... 9

DBQ.760 {Please turn to hand card 8. Again, for the next question, you'll use hand card 9 to respond, but first look at hand card 8.}

How often do **you** use the **list of ingredients** on a food label, {such as the part colored in pink on hand card 8,} when deciding to buy a food product?

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

HAND CARD #8 & #9

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

DBQ.770 {Please turn your hand card to the next page.} How about the information on **the serving size**? [HAND CARD #10]

How often do **you** use information on the **servicing size** on a food label, {such as the part colored in green on hand card 10,} when deciding to buy a food product?

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

HAND CARD #10 & #11

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.905 {Please turn to hand cards 12 and 13.} How about the information on **the number of servings in the package?**

[How often do **you** use information on **the number of servings in the package** on a food label, {such as the part colored in purple on hand card 12,} when deciding to buy a food product?]

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

HAND CARDS #12 & #13

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY ..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.910 {Please turn to hand cards 14 and 15.} How about the information contained in the **footnote?**  
[How often do **you** use information contained in the **footnote** on a food label, {such as the part colored in orange on hand card 14,} when deciding to buy a food product?]

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

HAND CARDS #14 & #15

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY ..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.685 {Please turn to {hand cards 16 and 17.} How about the information on **the percent daily value?**  
[How often do **you** use information on the **percent daily value** on a food label, {such as the part colored in blue on hand card 16,} when deciding to buy a food product?]

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

HAND CARD #16 & #17

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY ..... 4
- NEVER..... 5 (BOX NEW)
- NEVER SEEN ..... 6 (BOX NEW)
- REFUSED ..... 7 (BOX NEW)
- DON'T KNOW ..... 9 (BOX NEW)

CBQ.915

{For the next question you'll use {hand card 19/hand card 21} to respond, but first please look at {hand card 18/hand card 20.}

Which one do you use more often when deciding to buy a food product - information on the food label about Percent Daily Value, {such as the part colored in blue on {hand card 18/hand card 20},} or about the amount of nutrients such as the value in grams or milligrams noted next to each nutrient {such as the part highlighted in yellow}?

{Looking at {hand card 19/hand card 21},} would you say you use...

HAND CARDS #18 & #19

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

CAPI INSTRUCTION: IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 1 AND "[HAND CARDS #18 & #19]". IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 2 AND "[HAND CARDS #20 & #21]".

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #1

- Only percent daily value; ..... 1
- Percent daily value more often; ..... 2
- Both percent daily value and the amount of nutrients about the same; ..... 3
- The amount of nutrients more often; or ..... 4
- Only the amount of nutrients ..... 5
- DO NOT USE EITHER ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

HAND CARDS #20 & #21

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #2

- Only the amount of nutrients; ..... 5
- The amount of nutrients more often; ..... 4
- Both the amount of nutrients and percent daily value about the same; ..... 3
- Percent daily value more often; or ..... 2
- Only percent daily value ..... 1
- DO NOT USE EITHER ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

<p><b>BOX NEW</b></p> <p>CHECK ITEM CBQ.920: IF CBQ.502 = 1, CONTINUE. OTHERWISE, GO TO CBQ.930.</p>
--

CBQ.926 Now turn to {hand cards 22 and 23/hand cards 24 and 25}. The label of the product shows 10% Daily Value for Vitamin D in a serving of the product. What does the 10% Daily Value mean to you?

HAND CARDS #22 & #23

CAPI INSTRUCTION: IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 1 AND "HAND CARDS #22 & #23". IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 2 AND "HAND CARDS #24 & #25".

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #1

- 10 percent of the calories in one serving of the product come from Vitamin D ..... 1
- One serving of the product contains 10 percent Vitamin D by weight ..... 2
- One serving of the product supplies 10 percent of the Vitamin D you should have in a day ..... 3
- REFUSED ..... 7
- DON'T KNOW ..... 9

HAND CARDS #24 & #25

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #2

- One serving of the product supplies 10 percent of the Vitamin D you should have in a day ..... 3
- One serving of the product contains 10 percent Vitamin D by weight ..... 2
- 10 percent of the calories in one serving of the product come from Vitamin D ..... 1
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.930 {Look at hand cards 26 and 27.} How often do **you** use the **calorie** information on a food label, {such as the part colored in green,} when deciding to buy a food product?

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

HAND CARD #26 and 27

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES ..... 3
- RARELY ..... 4
- NEVER ..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9



CBQ.935 {Please turn your hand cards to the next page.} How about information on **sugars**?  
[How often do **you** use information on **sugars** on a food label, {such as the part colored in pink on hand card 28,} when deciding to buy a food product?]

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

HAND CARD #28 & 29

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.945 {Now turn to hand cards 30 and 31.} How about information on **sodium**?  
[How often do **you** use information on **sodium** on a food label, {such as the part colored in blue on hand card 30,} when deciding to buy a food product?]

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

HAND CARD #30 & #31

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.947 {Please turn to hand cards 32 & 33.} How about information on **added sugars**?  
[How often do **you** use information on **added sugars** on a food label, {such as the part colored in yellow on hand card 32,} when deciding to buy a food product?]

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

HAND CARD #32 & 33

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

CBQ.950 {Please turn to the next hand card page.} Some food packages contain two column labels. {For example, the one shown in hand card 34}. The first column has nutrient information for one serving of the food, and the second column contains information for the entire package. On packages containing two column labels, how often do you use the second column with information per container when deciding to buy a food product?

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

HAND CARDS #34 & #35

CAPI INSTRUCTION: Do NOT display the text in braces if CBQ.502="2".

- ALWAYS ..... 1
- MOST OF THE TIME ..... 2
- SOMETIMES..... 3
- RARELY..... 4
- NEVER..... 5
- NEVER SEEN ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

**BOX 4A**

**CHECK ITEM CBQ.708:**

IF (DBQ.750 = 1-3) OR (DBQ.760 = 1-3) OR (DBQ.770 = 1-3) OR (DBQ.780 = 1-3),  
OR (CBQ.905 = 1-3), OR (CBQ.910 = 1-3), OR (CBQ.685 = 1-3), OR (CBQ.930 =  
1-3), OR (CBQ.935 = 1-3), OR (CBQ.945 = 1-3), OR (CBQ.947 = 1-3), OR  
(CBQ.950 = 1-3), CONTINUE;  
ELSE IF (DBQ.750 = 6-9) AND (DBQ.760 = 6-9) AND (DBQ.770 = 6-9) AND (DBQ.780  
= 6-9), AND (CBQ.905 = 6-9), AND (CBQ.910 = 6-9), AND (CBQ.685 = 6-9),  
AND CBQ.930 = 6-9), AND (CBQ.935 = 6-9), AND (CBQ.945 = 6-9), AND  
(CBQ.947 = 6-9), AND (CBQ.950 = 6-9), GO TO CBQ.695;  
OTHERWISE, GO TO CBQ.698.

CBQ.738 {What is the reason or reasons that you check the food label when deciding to buy a food product? There are some examples on {hand card 36/hand card 37}. You may give more than one answer.}

HAND CARD #36

CAPI INSTRUCTIONS:

IF CBQ.502=1, DISPLAY CBQ.738 AS SHOWN ABOVE.

ELSE IF CBQ.502=2, 7, OR 9 –

1. REPLACE TEXT IN THE BRACES WITH THE FOLLOWING:

“For this next question you may give more than one answer. What is the reason or reasons that you check the food label when deciding to buy a food product? I will read you some examples.”

DISPLAY ALL THE RESPONSE CATEGORIES IN LOWER CASE

CODE ALL THAT APPLY.

CAPI INSTRUCTION: IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 1 AND “HAND CARD #36”. IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 2 AND “HAND CARD #37”.

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #1

TO WATCH MY WEIGHT AND/OR LOSE WEIGHT .....	1
A FAMILY MEMBER IS TRYING TO WATCH THEIR WEIGHT AND/OR LOSE WEIGHT	2
TO WATCH FOR DIABETES, HIGH TRIGLYCERIDES, HIGH CHOLESTEROL, HIGH BLOOD PRESSURE OR OTHER HEALTH CONDITIONS .....	3
A FAMILY MEMBER HAS A HEALTH CONDITION (FOR EXAMPLE, DIABETES, HIGH TRIGLYCERIDES, HIGH CHOLESTEROL, HIGH BLOOD PRESSURE, ETC) .....	4
I AM ALLERGIC TO CERTAIN FOOD(S) .....	5
A FAMILY MEMBER HAS FOOD ALLERGIES.....	6
TO AVOID CERTAIN INGREDIENTS (SUCH AS MSG, HIGH FRUCTOSE CORN SYRUP, COLOR DYES, ARTIFICIAL PRESERVATIVES, OR HYDROGENATED OILS, ETC).....	7
TO INCREASE CERTAIN NUTRIENTS IN MY/FAMILY’S DIET (SUCH AS FIBER, CALCIUM, ETC) .....	8
TO COMPARE WHICH BRAND/FOOD IS BETTER/HEALTHIER.....	9
TO MAKE BETTER/HEALTHIER CHOICES FOR ME AND MY FAMILY .....	10
TO WATCH FOR CALORIE CONTENT OR NUTRIENTS (SUCH AS SODIUM, TRANS FAT, SUGAR, CARBOHYDRATES, OR PROTEIN, ETC) .....	11
OTHER SPECIFY_____	91
REFUSED .....	77
DON’T KNOW .....	99

HAND CARD #37

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #2

TO COMPARE WHICH BRAND/FOOD IS BETTER/HEALTHIER.....	9
TO MAKE BETTER/HEALTHIER CHOICES FOR ME AND MY FAMILY .....	10
TO AVOID CERTAIN INGREDIENTS	

(SUCH AS MSG, HIGH FRUCTOSE CORN SYRUP, COLOR DYES, ARTIFICIAL PRESERVATIVES, OR HYDROGENATED OILS, ETC).....	7
A FAMILY MEMBER HAS A HEALTH CONDITION (FOR EXAMPLE, DIABETES, HIGH TRIGLYCERIDES, HIGH CHOLESTEROL, HIGH BLOOD PRESSURE, ETC).....	4
I AM ALLERGIC TO CERTAIN FOOD(S) .....	5
A FAMILY MEMBER HAS FOOD ALLERGIES.....	6
TO WATCH FOR DIABETES, HIGH TRIGLYCERIDES, HIGH CHOLESTEROL, HIGH BLOOD PRESSURE OR OTHER HEALTH CONDITIONS .....	3
TO INCREASE CERTAIN NUTRIENTS IN MY/FAMILY'S DIET (SUCH AS FIBER, CALCIUM, ETC) .....	8
TO WATCH MY WEIGHT AND/OR LOSE WEIGHT .....	1
A FAMILY MEMBER IS TRYING TO WATCH THEIR WEIGHT AND/OR LOSE WEIGHT	2
TO WATCH FOR CALORIE CONTENT OR NUTRIENTS (SUCH AS SODIUM, TRANS FAT, SUGAR, CARBOHYDRATES, OR PROTEIN, ETC) .....	11
OTHER SPECIFY.....	91
REFUSED .....	77
DON'T KNOW .....	99

**BOX 5A.**

CHECK ITEM CBQ.751:

GO TO CBQ.695.

CBQ.698 {What is the reason or reasons that you rarely or never check the food label when deciding to buy a food product? There are some examples on {hand card 38/hand card 39}. You may give more than one answer.}

HAND CARD #38

CAPI INSTRUCTIONS:

IF CBQ.502=1, DISPLAY CBQ.698 AS SHOWN ABOVE.

ELSE IF CBQ.502=2, 7, OR 9 –

1. REPLACE TEXT IN THE BRACES WITH THE FOLLOWING:

“For this next question you may give more than one answer. What is the reason or reasons that you rarely or never check the food label when deciding to buy a food product? I will read you some examples.”

DISPLAY ALL THE RESPONSE CATEGORIES IN LOWER CASE

CODE ALL THAT APPLY.

CAPI INSTRUCTION: IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 1 AND “HAND CARD #38”. IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 2 AND “HAND CARD #39”.

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #1

I DON'T HAVE THE TIME.....	1
THE PRINT IS TOO SMALL FOR ME TO READ.....	2
I'M SATISFIED WITH MY HEALTH SO THERE IS NO NEED FOR ME TO CHECK.....	3
I HAVE A GOOD DIET SO THERE IS NO NEED TO CHECK LABELS.....	4
I USUALLY BUY FOODS THAT I'M USED TO, SO I DON'T FEEL THAT I NEED TO CHECK LABELS .....	5
I BUY WHAT I OR MY FAMILY LIKE, I DON'T CARE ABOUT THE LABELS.....	6
I DON'T THINK THE FOOD LABELS ARE IMPORTANT TO ME.....	7
I WON'T KNOW WHAT TO LOOK FOR EVEN IF I READ THE LABELS.....	8
I CAN'T READ ENGLISH THAT WELL.....	9
OTHER SPECIFY.....	91
REFUSED.....	77
DON'T KNOW.....	99

HAND CARD #39

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #2

I DON'T HAVE THE TIME.....	1
I WON'T KNOW WHAT TO LOOK FOR EVEN IF I READ THE LABELS.....	8
I'M SATISFIED WITH MY HEALTH SO THERE IS NO NEED FOR ME TO CHECK.....	3
I CAN'T READ ENGLISH THAT WELL.....	9
I HAVE A GOOD DIET SO THERE IS NO NEED TO CHECK LABELS.....	4
I BUY WHAT I OR MY FAMILY LIKE, I DON'T CARE ABOUT THE LABELS.....	6
I DON'T THINK THE FOOD LABELS ARE IMPORTANT TO ME.....	7
THE PRINT IS TOO SMALL FOR ME TO READ.....	2
I USUALLY BUY FOODS THAT I'M USED TO, SO I DON'T FEEL THAT I NEED TO CHECK LABELS .....	5
OTHER SPECIFY.....	91

REFUSED .....	77
DON'T KNOW .....	99

CBQ.695 {Now turn to {hand cards 40 and 41/hand cards 42 and 43}.} Again, for this next question you may give more than one answer.

Now think about the “**serving size**” on a food label. What does serving size mean to you? Serving size is...

CODE ALL THAT APPLY

HAND CARD #40 & #41

CAPI INSTRUCTION:

1. Do NOT display the text in braces if CBQ.502="2".
2. IF (DBQ.750 = 6-9) AND (DBQ.760 = 6-9) AND (DBQ.770 = 6-9) AND (DBQ.780 = 6-9), AND (CBQ.905 = 6-9), AND (CBQ.910 = 6-9), AND (CBQ.685 = 6-9), AND (CBQ.930 = 6-9), AND (CBQ.935 = 6-9), AND (CBQ.945 = 6-9), AND (CBQ.950 = 6-9), Do NOT display the word “Again,” in the introduction sentence.

CAPI INSTRUCTION: IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 1 AND “HAND CARDS #38 & #39”. IF HOUSEHOLD ID EQUAL TO XXX, DISPLAY RANDOMIZED ORDER VERSION 2 AND “HAND CARDS #42 & #43”.

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #1

The amount of this food that people should eat.....	1
The amount of this food that people usually eat .....	2
Something that makes it easier to compare foods.....	3
REFUSED .....	7
DON'T KNOW.....	9

HAND CARDS #42 & #43

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #2

The amount of this food that people usually eat.....	2
The amount of this food that people should eat .....	1
Something that makes it easier to compare foods.....	3
REFUSED .....	7
DON'T KNOW.....	9

**BOX 5B**

**CHECK ITEM CBQ.753:**

IF CBQ.502 = 1 and ((DBQ.750 = 1-3) OR (DBQ.760 = 1-3) OR (DBQ.770 = 1-3) OR (DBQ.780 = 1-3), OR (CBQ.905 = 1-3), OR (CBQ.910 = 1-3), OR (CBQ.685 = 1-3), OR (CBQ.930 = 1-3), OR (CBQ.935 = 1-3), OR (CBQ.945 = 1-3), OR (CBQ.947 = 1-3), OR (CBQ.950 = 1-3), CONTINUE;

OTHERWISE, GO TO BOX 6.

CBQ.696 Please turn to hand cards 44 and 45. Before this interview, which of the two Nutrition Facts labels have you seen in the store or on food packages?

HAND CARD #44 & #45

- Label 1 only ..... 1
- Label 2 only ..... 2
- Both label 1 and label 2 ..... 3
- Neither label 1 nor label 2 ..... 4
- REFUSED ..... 7
- DON'T KNOW ..... 9

**Section XV. Respondent information**

**BOX 6.**

CHECK ITEM CBQ.750:

CBQ.755, DBQ.930-DBQ.945, CBQ.760-CBQ.770 ONLY APPLY TO NON-SP PROXY.

IF RESPONDENT IS A SP, GO TO CBQ.785.  
OTHERWISE, CONTINUE.

CBQ.755      What is your relation with {SP}?

- Mother of SP ..... 1
- Father of SP ..... 2
- Grandparent of SP ..... 3
- Child care provider, Caretaker ..... 4
- Other Relative ..... 5
- Friend, Non Relative ..... 6
- REFUSED ..... 7
- DON'T KNOW ..... 9

DBQ.930      Are you the person who does **most** of the planning **or** preparing of meals in your family?

INTERVIEWER INSTRUCTION: IF SP ANSWERS "SOMETIMES" OR "50/50", ENTER YES

- YES ..... 1
- NO ..... 2
- REFUSED ..... 7
- DON'T KNOW ..... 9

DBQ.935      Do you share in the planning or preparing of meals with someone else?

- YES ..... 1
- NO ..... 2
- REFUSED ..... 7
- DON'T KNOW ..... 9

DBQ.940      Are you the person who does **most** of the shopping for food in your family?

- YES ..... 1
- NO ..... 2
- REFUSED ..... 7
- DON'T KNOW ..... 9



DBQ.945 Do you share in the shopping for food with someone else?

YES .....	1
NO .....	2
REFUSED .....	7
DON'T KNOW .....	9

CBQ.760 How old are you?

    |\_|\_|\_| Years  
Enter AGE

REFUSED .....	77
DON'T KNOW .....	99

CBQ.765 Which of the following best describe your highest education level?

Less than high school.....	1
High school diploma (including GED), or.....	2
More than high school .....	3
REFUSED .....	7
DON'T KNOW .....	9

CBQ.770 WHAT IS THE GENDER OF THE RESPONDENT?

[Interviewer Instruction: this is a question for the interviewer to complete by selecting the appropriate option. No need to read the question to the SP]

MALE .....	1
FEMALE.....	2

CBQ.785 THE INTERVIEW WAS COMPLETED IN:

INTERVIEWER INSTRUCTION:  
This is a question for the interviewer to complete by selecting the appropriate option. Do not read the question to the SP.

ENGLISH.....	1
SPANISH.....	2
ENGLISH AND SPANISH.....	3
OTHER .....	4