

NATIONAL HEALTH AND NUTRITION EXAMINATION SURVEY NHANES 2021-2022

Flexible Consumer Behavior Survey (FCBS) Module

August 2021



FLEXIBLE CONSUMER BEHAVIOR SURVEY (FCBS) MODULE

2021-2022 QUESTIONNAIRE CONTENTS

Core Module: Hou	sehold In-person Interview3
Part A: Family I	Level Questions4
Section I	Food expenditure4
Section II	Meal planner/shopper/preparer in the family7
Section III	Income and assets11
	a. Monthly income11
	b. Assets
Section IV	Food assistance - the Supplemental Nutrition Assistance Program15
	For current participants and
	persons who received benefit in the last 12 months
Part B: Sample	Person Questions
Section V	Food assistance – WIC16
Section VI	Main planner/shopper/preparer status19
Follow up Module:	Telephone Interview
•	
Section VII	Hand card information21
Section VIII	Use of calorie labeling on menus
Section IX	Calories knowledge
Section X	Food label27
Section XI	Respondent information40

NHANES 2021-2022 FCBS CORE MODULE

- 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
 - 24 questions administered as part of the NHANES household family questionnaire
 - Includes 13 questions in the Consumer Behavior Section (CBQ), 5 questions in the Income Section (INQ), and 6 questions in the Food Security Section (FSQ)
 - 2. Sample person questions
 - 11 questions included as part of the Dietary Behavior Section (DBQ) in the NHANES household SP questionnaire
- d. New in the 2021-2022 FCBS core module
 - 1. Four family-level questions dropped
 - Household's access to a vehicle for food shopping (INQ320)
 - Anticipated starting date for persons who anticipated receiving SNAP benefits in the next 30 days (FSQ860, FSQ861, FSQ862)
 - 2. Eight sample person questions dropped
 - Self-assessed diet quality (DBQ700)
 - Food away from home frequency (DBQ895, DBQ900)
 - Use of convenience foods (DBQ905, DBQ910)
 - MyPlate knowledge (CBQ596, CBQ606, CBQ.611)
 - 3. Updated the prefills for the monthly income questions INQ238 and INQ241 with the HHS 2020 poverty guidelines.

NHANES 2021-2022 FCBS CORE MODULE

Family Level Questions

Section I. Food Expenditure

CBQ.071 Q/U	about money spent at superstores. When you answer the	ut how much money {your family spends/you spends or grocery stores. Then we will talk about the spends of the spen	ut money spent at other types o ent on alcoholic beverages .
	-	ow much money {did your family/did you} spen nases made with food stamps. (You can tell me p	
	INTERVIEWER: ENTER "0"	F SP SAYS NO MONEY WAS SPENT.	
		\$ _ _ _ ENTER AMOUNT	
		NO MONEY SPENTREFUSEDDON'T KNOW	7 (CBQ.101)
		ENTER UNIT	
		WEEKMONTH	
CBQ.081	Was any of this money spent alcoholic beverages?	on nonfood items such as cleaning or paper p	products, pet food, cigarettes, or
		YES NO REFUSED DON'T KNOW	2 (CBQ.101) 7 (CBQ.101)

CBQ.091 Q/U	About how much money was	spent on nonfood items? (You can tell me per v	veek or per month.)
W 10		\$ _ _ ENTER AMOUNT	
		HARD EDIT: AMOUNT CANNOT BE MORE T THE AMOUNT ENTERED ON CBQ.071.	HAN
		REFUSEDDON'T KNOW	,
		ENTER UNIT	
		WEEKMONTH	
CBQ.101		your family/did you} spend money on food at st that you have already told me about. Here are u might buy food.	
	HAND CARD CBQ1		
		YES	,
CBQ.111 Q/U		I your family/did you} spend on food at these ady told me about. (You can tell me per week or	* *
	INTERVIEWER: ENTER "0" II	F SP SAYS NO MONEY WAS SPENT.	
		\$ _ _ ENTER AMOUNT	
		REFUSED DON'T KNOW	7 (CBQ.121) 9 (CBQ.121)
		ENTER UNIT	
		WEEKMONTH	1 2

CBQ.121 Q/U		ch money {did your family/did you} spend or at school or on vending machines, for				
	INTERVIEWER INSTRUCTION: IF	RESPONDENT KNOWS ONLY AMOUNT	FOR SELF, CODE DK.			
	INTERVIEWER: ENTER "0" IF SP SAYS NO MONEY WAS SPENT.					
	\$ <u> </u> ENT	_ _ _ ER AMOUNT				
		USED	,			
	ENT	ER UNIT				
		EK	1 2			
CBQ.131 Q/U		h money {did your family/did you} spend on nave already told me about. (You can tell m				
	INTERVIEWER INSTRUCTION: IF	RESPONDENT KNOWS ONLY AMOUNT	FOR SELF, CODE DK.			
	INTERVIEWER: ENTER "0" IF SP	SAYS NO MONEY WAS SPENT.				
	\$ ENT	_ _ _ ER AMOUNT				
		USED	·			
	ENT	ER UNIT				
		EK	1 2			
		BOX 2				
	CHECK ITEM CBQ.205: IF THE FAMILY INCLUDES AT OTHERWISE, GO TO THE EN	LEAST ONE SP AGED 1-15 YEARS OLD D OF SECTION.), CONTINUE;			

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	q

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) <u>GREATER THAN OR EQUAL</u> 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	777777777
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:

- DISPLAY "you" IF ONLY 1 PERSON IN THE FAMILY.
- DISPLAY 'your family" IF MORE THAN 1 PERSON IN FAMILY AND RESPONDENT IS IN THE FAMILY.
- DISPLAY "NAMES OF FAMILY MEMBERS" Y IF RESPONDENT NOT IN FAMILY.
- Fill 185% of the **monthly** poverty level based on family size:

For family sizes **1-8**, use the numbers in the 3rd 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 {[\$6,802+(\$691* # 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 5th 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 {[\$81,622+(\$8,288 * # of additional person past 8)] round to nearest 100s}.

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

	185% monthly	poverty level	185% annual	poverty level
Persons in Family	Raw Number ¹	Rounded to nearest 100s ²	Raw Number³	Rounded to nearest 100s ⁴
1	1,967	2,000	23,606	23,600
2	2,658	2,700	31,894	31,900
3	3,349	3,300	40,182	40,200
4	4,039	4,000	48,470	48,500
5	4,730	4,700	56,758	56,800
6	5,421	5,400	65,046	65,000
7	6,111	6,100	73,334	73,300
8	6,802	6,800	81,622	81,600

^{1:} For each additional person past 8, the value is \$6,802 + (\$691 * # of additional persons past 8)

²: These are the numbers to be used in the response category fills.

³: For each additional person past 8, the value is \$81,622 + (\$8,288 * # of additional persons past 8)

^{4:} 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 3rd 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 {[\$4,780+(\$485* # 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 5th 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 {[\$57,356+(\$5,824* # of additional person past 8)] round to nearest 100s}

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

	130% monthly	poverty level	130% annual	poverty level
Persons in Family	Raw Number ¹	Rounded to nearest 100s ²	Raw Number³	Rounded to nearest 100s ⁴
1	1,382	1,400	16,588	16,600
2	1,868	1,900	22,412	22,400
3	2,353	2,400	28,236	28,200
4	2,838	2,800	34,060	34,100
5	3,324	3,300	39,884	39,900
6	3,809	3,800	45,708	45,700
7	4,294	4,300	51,532	51,500
8	4,780	4,800	57,356	57,400

^{1:} For each additional person past 8, the value is \$4,780 + (\$485 * # of additional persons past 8)

²: These are the numbers to be used in the text of question and response category fills.

³: For each additional person past 8, the value is \$57,356 + (\$5,824 * # of additional persons past 8)

⁴: These are the numbers to be used in the probe fills.

b.	Α	SS	se	ts

INQ.300		HER FAMILY/you and NAMES OF FAMILY MEI ease include money in all types of accounts {you pes of accounts.	
	HAND CARD INQ3		
	CAPI INSTRUCTION: DISPLAY "you" for single	e-person family; DISPLAY "the members of your	family" for multi-persons family.
		YESREFUSEDDON'T KNOW	2 7 (BOX 9)
INQ.310	Which letter on this card OTHER FAMILY/your fa	d best represents the total savings or cash assemily}?	ets at this time for {you/NAMES OF
	HAND CARD INQ4		
		ENTER LETTER	
		REFUSED DON'T KNOW	
		A: \$0 - \$3,000 B: \$3,001 - \$5,000 C: \$5,001 - \$10,000 D: \$10,001 - \$15,000	

E: \$15,001 - \$20,000

Section IV. Food Assistance - the Supplemental Nutrition Assistance Program

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

For current FSQ.810 FSQ.811 FSQ.812	SNAP participants:
For non-cu FSQ.900 FSQ.901 FSQ.902	rrent participants who received SNAP in the last 12 months:
100.302	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

NHANES 2021-2022 FCBS CORE MODULE

Sample Person Questions

Section V. Food Assistance - WIC

	BOX 14
	CHECK ITEM DBQ.710: IF SP AGE > 5, GO TO BOX 15. OTHERWISE, CONTINUE.
3	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
	HELP SCREEN: WIC: WIC is short for the Special Supplemental Nutrition Program for Women, Infants, and
	This program provides food assistance and nutritional screening to low-income pregnant and p women and their infants, as well as to low-income children up to age 5.
	women and their infants, as well as to low-income children up to age 5.
673	women and their infants, as well as to low-income children up to age 5. BOX 14a
673	women and their infants, as well as to low-income children up to age 5. BOX 14a OMITTED Is {SP} now receiving benefits from the WIC program? YES
773	women and their infants, as well as to low-income children up to age 5. BOX 14a OMITTED Is {SP} now receiving benefits from the WIC program?
373	women and their infants, as well as to low-income children up to age 5. BOX 14a OMITTED Is {SP} now receiving benefits from the WIC program? YES

FSQ.675	Did {SP} receive benefits from WIC when {he/she} was less than one year old?
	YES
	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
	BOX 14d
	OMITTED

Q/U 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) **ENTER UNIT** MONTHS 1 YEARS 2 FSQ.690 Did {SP's} mother receive benefits from WIC, while she was pregnant with {SP}? YES 1 REFUSED 7 (BOX 15) How many months pregnant was {SP's} mother when she began to receive WIC benefits? FSQ.695 **ENTER NUMBER** REFUSED777 DON'T KNOW......999

How long {did SP receive/has SP been receiving} benefits from the WIC program?

FSQ.685

Section VI. 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 ANSWE	ERS "SOMETIMES" OR "50/50", E	NTER YES.	
	NO REFUSED			
DBQ.935	{Do you/Does SP} share in the planning or prep	aring of meals with someone else	?	
	NO REFUSED			
DBQ.940	{Are you/Is SP} the person who does most of the	ne shopping for food in {your/SP's}	family?	
	INTERVIEWER INSTRUCTION: IF SP ANSWE	ERS "SOMETIMES" OR "50/50", E	NTER YES.	
	NO REFUSED			
DBQ.945	{Do you/Does SP} share in the shopping for foo	d with someone else?		
	NO REFUSED			

NHANES 2021-2022 FCBS FOLLOW-UP MODULE

- 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. There were no changes in the 2021-2022 FCBS follow-up module from the previous version.

NHANES 2021-2022 FCBS FOLLOW-UP MODULE

Section VII. 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.
	Yes1
	No2
	REFUSED7
	DON'T KNOW9

Section VIII. 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 I	NSTRU	ICTION:
--------	-------	---------

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 No REFUSED DON'T KNOW	1 2 [CBQ.551] 7 9
CBQ.536	At the last fast food or pizza place you bought foods or beverages, did you n information on the menu?	notice any calorie
	YES NOREFUSEDDON'T KNOW	•
CBQ.541	Did you use the information in deciding what to buy?	
	YES NOREFUSEDDON'T KNOW	
CBQ.551	In the past 12 months, did you eat in or get take-out from a restaurant with wai	iter or waitress service?
	Yes No REFUSED DON'T KNOW	1 2 [CBQ.830] 7 9
CBQ.581	The last time you ate or got take-out from a restaurant with a waiter or waitre calorie information on the menu?	ess, did you notice any

YES...... 1

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

CBQ860	places of recreation?	ters, sports arenas, or othe
	Yes	1
	No	
	REFUSED	
	DON'T KNOW	9
CBQ.865	The last time you bought foods or beverages at a movie theater , sports recreation , did you notice any calorie information on the menu?	arena, or other place of
	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 cooked vegetables from grocery store salad bars and deli counters?	, chicken, sandwiches and
	Yes	1
	No	2 [CBQ.890]
	REFUSED	= = =
	DON'T KNOW	9
CBQ.880	The last time you bought prepared foods at a grocery store , did you no information about these foods?	tice any calorie
	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 No REFUSED DON'T KNOW	1 2 7 9	[Box 2]
CBQ.895	The last time you bought prepared foods at a convenience store , includin store, did you notice any calorie information about these foods?	g a	gas station or corne
	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 RESPODENT WHO IS A SP.		
	IF RESPONDENT IS A SP, CONTINUE.		

OTHERWISE, GO TO CBQ.700.

Section IX. 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 X. 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	q

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 **serving 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".

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; Percent daily value more often;	
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;	
Both the amount of nutrients and percent daily value	
about the same;	3
Percent daily value more often; or	
Only percent daily value	
DO NOT USE EITHER	
REFUSED	
DON'T KNOW	g

BOX NEW

CHECK ITEM CBQ.920: IF CBQ.502 = 1, CONTINUE. OTHERWISE, GO TO CBQ.930.

Now turn to {hand cards 22 and 23/hand cards 24 and 25}. The label of the product shows 10% Daily CBQ.926 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 D1
	One serving of the product contains 10 percent Vitamin D by weight2
	One serving of the product supplies 10 percent of the Vitamin D you should have in a day3
	REFUSED7 DON'T KNOW9
	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 day3
	One serving of the product contains 10 percent Vitamin D by weight2
	10 percent of the calories in one serving of the product come from Vitamin D1
	REFUSED
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

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
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

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)	
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	
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
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'I 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

L DONUT LIAN /E THE TIME

CAPI INSTRUCTION: RANDOMIZED ORDER VERSION #2

IDON'I 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".
- 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	
Neither label 1 nor label 2	4
REFUSED	7
DON'T KNOW	9

Section XI. 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			
	INTERVIEWER INSTRUCTION: IF SP ANSWERS "SOMETIMES" OR "50/5 YES	1 2 7			
DBQ.935	Do you share in the planning or preparing of meals with someone else?				
	YES	1			
	NO				
	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			
	DOIN 1 KINOVY	3			

DBQ.945	Do you share in the shopping for food with someone else?			
	NOREFUSED		1 2 7 9	
CBQ.760	How old are you?			
	Years Enter AGE			
		77 99		
CBQ.765	Which of the following best de	scribe your highest education level?		
	High school diplor More than high so REFUSED	hoolma (including GED), orbhool	1 2 3 7 9	
CBQ.770	WHAT IS THE GENDER OF 1	THE RESPONDENT?		
		ction: this is a question for the interviewer to co No need to read the question to the SP]	mplete by selecting the	
			1 2	
CBQ.785	THE INTERVIEW WAS COME	PLETED IN:		
	INTERVIEWER INSTRUCTIO This is a question for the interview question to the SP.	N: viewer to complete by selecting the appropriate	option. Do not read the	
	1	ENGLISH	1	
		SPANISH	2	
		ENGLISH AND SPANISH	3	
		OTHER	4	