## 2003-04 Questionnaire

## **DIET BEHAVIOR AND NUTRITION - DBQ**

		BOX 1	
	CHECK ITEM DBQ.005: IF SP AGE <= 6, CONTINU OTHERWISE, GO TO BOX		
DBQ.010	Now I'm going to ask you som	e general questions about {SP's} eating habits.	
	Was (SP) ever breastfed or fe	d breastmilk?	
		YES	1 2 (DBQ.040 7 (DBQ.040 9 (DBQ.040
DBQ.020	How old was {SP} when {he/sl	ne} was <b>first</b> fed something other than breastmi	lk or water?
	INCLUDE FORMULA, JUICE,	SOLID FOODS	
		 ENTER AGE IN DAYS, WEEKS, MONTHS OF	YEARS
		NEVER	77 (BOX 2)
		ENTER UNIT	
		DAYS	1 2 3 4 7 9

DBQ.030	How old was {SP} when {he/s	he} completely stopped breastfeeding or being fed breastmilk?
		ENTER AGE IN DAYS, WEEKS, MONTHS OR YEARS
		STILL BREASTFEEDING
		REFUSED 7777
		DON'T KNOW 9999
		ENTER UNIT
		DAYS 1
		WEEKS 2
		MONTHS 3
		YEARS 4
		REFUSED 7
		DON'T KNOW 9
DBQ.040	How old was {SP} when {he/s	he} was <b>first</b> fed formula on a <b>daily basis</b> ?
	INCLUDE CHILDREN RECE THE SAME TIME	IVING FORMULA <b>AND</b> THOSE RECEIVING FORMULA AND BREASTMILK AT
		 ENTER AGE IN DAYS, WEEKS, MONTHS OR YEARS
		NEVER ON A DAILY BASIS 0 (DBQ.060)
		REFUSED 7777
		DON'T KNOW 9999
		ENTER UNIT
		DAYS 1
		WEEKS 2
		MONTHS
		YEARS 4
		REFUSED 7
		DON'T KNOW 9
DBQ.050	How old was {SP} when {he/s	he} completely stopped drinking formula?
		 ENTER AGE IN DAYS, WEEKS, MONTHS OR YEARS
		STILL DRINKING FORMULA 6666
		REFUSED 7777
		DON'T KNOW 9999
		ENTER UNIT
		DAYS 1
		WEEKS 2
		MONTHS
		YEARS 4
		REFUSED 7

DON'T KNOW ...... 9

DBQ.060 How old was {SP} when {he/she} was first fed **milk** on a daily basis?

# INCLUDE LACTAID AS MILK DO NOT INCLUDE BREASTMILK OR FORMULA

	DO NOT INCLUDE BREAST	MILK OR FORMULA		
		_ _  ENTER AGE IN DAYS, WEEKS, MONTHS O	OR YE	ARS
		NEVER ON A DAILY BASIS		(DBQ.080)
			9999	
		ENTER UNIT		
		DAYS	. 1	
		WEEKS	. 2	
		MONTHS		
		YEARS		
		REFUSED		
		DON'T KNOW		
DBQ.071		irst fed on a daily basis? Was it		
	CODE ALL THAT APPLY			
		whole or regular,	. 10	
		2% fat milk (includes "low fat milk" not		
		further specified),	. 11	
		1% fat milk,	. 12	
		skim, nonfat, or 0.5% fat milk (includes		
		liquid or reconstituted from dry), or	. 13	
		another type?		
		REFUSED		
		DON'T KNOW		
DBQ.080	How old was {SP} when {he/non-liquid foods] on a daily b	she} <b>started</b> eating solid foods [such as straingasis?	ed foo	ods like baby food or any other
		ENTER AGE IN DAYS, WEEKS, MONTHS (	OR YE	EARS
		NEVER ON A DAILY BASIS	. 0	
		REFUSED 7	_	
		DON'T KNOW		
		ENTER UNIT		
		DAYS	. 1	
		WEEKS		
		MONTHS		
		YEARS		
		REFUSED		
		DON'T KNOW		

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u	7	Y	- 2

#### **CHECK ITEM DBQ.085:**

IF SP AGE >= 1, CONTINUE.

OTHERWISE, GO TO FSQ.651.

DBQ.090 {Next I have some general questions about {your/SP's} eating habits.}

{First/Next} are questions about the **kinds** of food {you eat/SP eats}.

On average, how many times **per week** {do you/does SP} eat meals that were prepared in a restaurant? Please include eat-in restaurants, carry out restaurants and restaurants that deliver food to your house.

'MEALS' MEAN MORE THAN A BEVERAGE OR SNACK FOOD LIKE CANDY BARS OR BAG OF CHIPS

#### CAPI INSTRUCTION:

DISPLAY "NEXT ..." AND "FIRST" IF SP AGE IS > 6. CREATE HELP FOR "RESTAURANT MEALS".

I\_\_\_I ENTER NUMBER

NEVER	0
LESS THAN WEEKLY	66
REFUSED	77
DON'T KNOW	99

DBQ.197 Now I'm going to ask a few questions about milk products. Do not include their use in cooking.

In the **past 30 days**, how often did {you/SP} have milk to drink or on {your/his/her} cereal? Please include chocolate and other flavored milks as well as hot cocoa made with milk. Do not count small amounts of milk added to coffee or tea. Would you say . . .

HAND CARD DBQ3

CAPI INSTRUCTION:

THIS SHOULD **NOT** BE A GATE QUESTION ANYMORE. CREATE HELP FOR "HOT COCOA".

never,	0	(BOX 6)
rarely – less than once a week,	1	
sometimes – once a week or more, but		
less than once a day, or	2	
often – once a day or more?	3	
VARIED	4	
REFUSED	7	(BOX 6)
DON'T KNOW	a	(BOY 6)

## DBQ.221 What type of milk was it? Was it usually . . .

## IF RESPONDENT CANNOT PROVIDE USUAL TYPE, CODE ALL THAT APPLY

whole or regular,	1
2% fat milk (includes "low fat milk" not	
further specified),	2
1% fat milk,	3
skim, nonfat, or 0.5% fat milk (includes	
liquid or reconstituted from dry), or	4
another type?	30
REFUSED	77
DON'T KNOW	90

#### BOX 6

#### **CHECK ITEM DBQ.225:**

IF SP AGE >= 20, CONTINUE. OTHERWISE, GO TO BOX 9.

#### DBQ.229 The next question is about **regular** milk use.

A regular milk drinker is someone who uses any type of milk at **least 5 times a week**. Using this definition, which statement best describes {you/SP}? . . .

#### HAND CARD DBQ4

{I've/He's/She's} been a <b>regular</b> milk drinker for <b>most</b> or <b>all</b> of {my/his/her} life, including {my/his/her} childhood; {I've/He's/She's} <b>never</b> been a <b>regular</b>	1	
milk drinker;	2	(BOX 8A)
{My/His/Her} milk drinking has varied over		
{my/his/her} life – sometimes {I've/he's/		
she's} been a regular milk drinker and		
sometimes {I have/he has/she has} not		
been a regular milk drinker	3	
REFUSED	7	(BOX 8A)
DON'T KNOW	9	(BOX 8A)

DBQ.235	Now, I'm going to ask you ho	w often {you/SP} drank milk at different times in	n {your/his/her} <b>life</b> .
	How often did {you/SP} drink	any type of milk, including milk added to cereal	when {you were/s/he was}
	HAND CARD DBQ5		
	IF NECESSARY, PROBE FO	OR USUAL OR MOST COMMON AMOUNT FO	R THIS TIME PERIOD
	CAPI INSTRUCTION:		
	THESE (A-C) SHOULD NOT	BE GATE QUESTIONS ANYMORE.	
		a. a child between the ages of 5 and 12 y	ears old? Would you say
		never,	0
		rarely – less than once a week,	1
		sometimes - once a week or more, but	
		less than once a day, or	2
		often – once a day or more?	3
		VARIED	4
		REFUSED	
		DON'T KNOW	9
		b. a teenager between the ages of 13 and	I 17 years old? Would you
		say	
		never,	0
		rarely – less than once a week,	1
		sometimes - once a week or more, but	
		less than once a day, or	2
		often – once a day or more?	3
		VARIED	4
		REFUSED	
		DON'T KNOW	9
		c. a young adult between the ages of 18 a you say	and 35 years old? Would
		never,	0
		rarely – less than once a week,	1
		sometimes – once a week or more, but	·
		less than once a day, or	2
		often – once a day or more?	3
		VARIED	4
		REFUSED	7
		DON'T KNOW	9

	CHECK ITEM DBQ.265A:  IF SP AGE >= 60, CONTINUE.  OTHERWISE, GO TO END OF SECTION.	
DBQ.301	The next questions are about meals provided by commu	nity or government programs.
	In the <b>past 12 months</b> , did {you/SP} receive any me programs, "Meals on Wheels", or any other programs?	als delivered to {your/his/her} home from community
	YES NO REFUSED	2 7
	DON'T KNOW	9
DBQ.330	In the <b>past 12 months</b> , did {you/SP} go to a community	program or senior center to eat prepared meals?
	INCLUDE ADULT DAY CARE	
	YES NO REFUSED	2 7
	DON'T KNOW	9
	BOX 8B	
	CHECK ITEM DBQ.335: GO TO END OF SECTION.	
	BOX 9	
	CHECK ITEM DBQ.355: IF SP AGE 4-19, CONTINUE. OTHERWISE, GO TO END OF SECTION.	
DBQ.360	During the <b>school year</b> , {do you/does SP} attend a kind	ergarten, grade school, junior or high school?
	YES NO REFUSED DON'T KNOW	

**BOX 8A** 

DBQ.370	Does {your/SP's} school serv	e school lunches? These are <b>complete</b> lunches	s that cost the same every day.
		YES	1
		NO	2 (DBQ.400)
		REFUSED	7 (DBQ.400)
		DON'T KNOW	
		DON I KNOW	9 (DBQ.400)
DBQ.381	During the <b>school year</b> , abou	ut how many times a week {do you/does SP} usu	ually get a complete school lunch?
		1 1	
		ENTER NUMBER OF TIMES	
		NONE	0 (DBQ.400)
		REFUSED	7 (DBQ.400)
		DON'T KNOW	
DBQ.390	(Do you/Doos SP) got those I	unches free, at a reduced price, or {do you/does	ho/cho) nov full prico?
DBQ.390	{DO you/Does SF} get these i	uniches free, at a reduced price, or (do you/does	ne/sne/ pay ruii price?
		FREE	1
		REDUCED PRICE	2
		FULL PRICE	3
		REFUSED	7
		DON'T KNOW	9
DBQ.400	Does {your/SP's} school serv	e a <b>complete</b> breakfast that costs <b>the same ev</b> o	ery day?
		YES	1
		NO	2 (END OF SECTION)
		REFUSED	7 (END OF SECTION)
		DON'T KNOW	9 (END OF SECTION)
DBQ.411	During the <b>school year</b> , abo school?	ut how many times a week {do you/does SP} u	sually get a complete breakfast at
		L  ENTER NUMBER OF TIMES	
		NONE	0 (END OF SECTION)
		REFUSED	7 (END OF SECTION)
		DON'T KNOW	9 (END OF SECTION)
DBQ.421	{Do you/Does SP} get these I	oreakfasts free, at a reduced price, or {do you/do	pes he/she} pay full price?
		FREE	1
		REDUCED PRICE	2
		FULL PRICE	3
		REFUSED	7
		DON'T KNOW	9
		***************************************	

## BOX 9A

## **CHECK ITEM DBQ.422:**

IF DBQ.390 = CODE 1 OR CODE 2 OR DBQ.421 = CODE 1 OR CODE 2, CONTINUE.

OTHERWISE, GO TO END OF SECTION.

DBQ.424 {Do you/Does SP} get a free or reduced price meal at any summer program {he/she} attends?

YES	1
NO	2
DID NOT ATTEND SUMMER PROGRAM	3
REFUSED	7
DON'T KNOW	a