FOOD SECURITY – FSQ Target Group: Household (Placing: Move whole section to follow INQ)

BOX 0

CHECK ITEM FSQ.005:

IF THIS IS THE FIRST NHANES FAMILY IN THE HOUSEHOLD, CONTINUE. OTHERWISE, GO TO END OF SECTION.

BOX 1

OMITTED

BOX 1A

OMITTED

FSQ.032 Now I am going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was **often** true, **sometimes** true, or **never** true for {you/your household} in the **last 12 months**, that is since last {DISPLAY CURRENT MONTH}.

CAPI INSTRUCTION:

CHECK SCREENER: ASK D AND E ONLY IF THERE IS AT LEAST 1 CHILD IN THE HOUSEHOLD WHO IS <= 17 (OR IN THE AGE RANGE THAT INCLUDES OR IS LESS THAN THE ONE THAT INCLUDES 17). DISPLAY INSTRUCTIONS FOR {YOU/YOUR HOUSEHOLD}:

IF ONLY ONE PERSON IN HOUSEHOLD, DISPLAY "YOU".

IF MORE THAN ONE PERSON IN HOUSEHOLD, DISPLAY "YOUR HOUSEHOLD".

DISPLAY INSTRUCTIONS FOR {I/WE}, {MY/OUR} AND {I WAS/WE WERE}:

IF ONLY ONE PERSON IN HOUSEHOLD, DISPLAY "I" AND "MY".

IF MORE THAN ONE PERSON IN HOUSEHOLD, DISPLAY "WE" AND "OUR".

DISPLAY INSTRUCTIONS FOR {NAME/THE CHILDREN}:

IF ONLY ONE CHILD IN THE HOUSEHOLD AGE <=17, DISPLAY CHILD'S NAME. IF MORE THAN ONE CHILD IN HOUSEHOLD AGE <=17, DISPLAY "THE CHILDREN".

RESPONSES: OFTEN TRUE = 1, SOMETIMES TRUE = 2, NEVER TRUE = 3, REFUSED = 7, DON'T KNOW = 9

a.	{I/we} worried whether {my/our} food would run out before {I/we} got money to buy more.	
b.	the food that {I/we} bought just didn't last, and {I/we} didn't have money to get more.	
C.	{I/we} couldn't afford to eat balanced meals.	
d.	(I/we) relied on only a few kinds of low-cost foods to feed {NAME/the children} because (I was/we were) running out of money to buy food.	
e.	(I/we) couldn't feed {NAME/the children} a balanced	

meal, because (I/we) couldn't afford that.

BOX 2

CHECK ITEM FSQ.038B:

IF THE RESPONSE TO FSQ.032 'A', 'B', 'C', 'D' OR 'E' IS 'OFTEN TRUE' (CODE 1) OR 'SOMETIMES TRUE' (CODE 2), CONTINUE. OTHERWISE, GO TO FSQ.151.

BOX 3

CHECK ITEM FSQ.039A:

IF THERE IS AT LEAST 1 CHILD IN THE HOUSEHOLD WHO IS <= 17 (OR IN THE AGE RANGE THAT INCLUDES OR IS LESS THAN THE ONE THAT INCLUDES 17), CONTINUE WITH ITEM F. OTHERWISE, GO TO FSQ.041.

f. {NAME was/the children were} not eating enough because (I/we) just couldn't afford enough food.

FSQ.041 In the **last 12 months**, since last {DISPLAY CURRENT MONTH}, did {you/you or other adults in your household} **ever** cut the size of your meals or skip meals because there wasn't enough money for food?

YES	1	
NO	2	(FSQ.061)
REFUSED	7	(FSQ.061)
DON'T KNOW	9	(FSQ.061)

FSQ.052 How often did this happen?

Almost every month,	1
some months but not every month, or	2
in only 1 or 2 months?	3
REFUSED	7
DON'T KNOW	9

FSQ.061 In the **last 12 months**, did you **ever** eat **less** than you felt you should because there wasn't enough money to buy food?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.071 [In the last 12 months], were you ever hungry but didn't eat because you couldn't afford enough food?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.081 [In the last 12 months], did you lose weight because you didn't have enough money for food?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

BOX 5

CHECK ITEM FSQ.086A:

IF FSQ.032F IS OFTEN TRUE (CODE 1) OR SOMETIMES TRUE (CODE 2), OR IF 'YES' (CODE 1) IN FSQ.041, FSQ.061, FSQ.071, OR FSQ.081, CONTINUE. OTHERWISE, GO TO FSQ.151. FSQ.092 [In the **last 12 months**], did {you/you or other adults in your household} **ever** not eat for a whole day because there wasn't enough money for food?

YES	1	
NO	2	(BOX 4A)
REFUSED	7	(BOX 4A)
DON'T KNOW	9	(BOX 4A)

FSQ.102 How often did this happen?

Almost every month,	1
some months but not every month, or	2
in only 1 or 2 months?	3
REFUSED	7
DON'T KNOW	9

BOX 4A

CHECK ITEM FSQ.085A:

IF THERE IS AT LEAST 1 CHILD IN THE HOUSEHOLD WHO IS <= 17 (OR IN THE AGE RANGE THAT INCLUDES OR IS LESS THAN THE ONE THAT INCLUDES 17), CONTINUE. OTHERWISE, GO TO FSQ.151.

FSQ.111 The next questions are about children living in the household who are under 18 years old.

In the **last 12 months**, since {DISPLAY CURRENT MONTH} of last year, did you **ever** cut the size of {CHILD'S NAME's/any of the children's} meals because there wasn't enough money for food?

CAPI INSTRUCTION:

IF ONLY 1 CHILD IN HOUSEHOLD IS <= 17, DISPLAY CHILD'S NAME.

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.121 [In the **last 12 months**], did {CHILD'S NAME/any of the children} **ever** skip meals because there wasn't enough money for food?

CAPI INSTRUCTION: IF ONLY 1 CHILD IN HOUSEHOLD <= 17, DISPLAY CHILD'S NAME.

YES	1	
NO	2	(FSQ.141)
REFUSED	7	(FSQ.141)
DON'T KNOW	9	(FSQ.141)

FSQ.132 How often did this happen?

Almost every month,	1
some months but not every month, or	2
in only 1 or 2 months?	3
REFUSED	7
DON'T KNOW	9

FSQ.141 In the **last 12 months**, {was CHILD'S NAME/were the children} **ever** hungry but you just couldn't afford more food?

CAPI INSTRUCTION: IF ONLY 1 CHILD IN HOUSEHOLD IS <= 17, DISPLAY CHILD'S NAME.

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.146 [In the **last 12 months**], did {CHILD'S NAME/any of the children} **ever** not eat for a whole day because there wasn't enough money for food?

CAPI INSTRUCTION:

IF ONLY 1 CHILD IN HOUSEHOLD IS <= 17, DISPLAY CHILD'S NAME.

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.151 In the **last 12 months**, did {you/you or any member of your household} **ever** get emergency food from a church, a food pantry, or a food bank, or eat in a soup kitchen?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

BOX 6

CHECK ITEM FSQ.155B:

IF THERE IS AT LEAST 1 CHILD IN THE HOUSEHOLD WHO IS <=5 (OR IN THE AGE RANGE THAT INCLUDES OR IS LESS THAN THE ONE THAT INCLUDES 5) OR THERE IS A FEMALE IN THE HOUSEHOLD WHO IS BETWEEN 12 AND 59 (OR IN THE AGE RANGE THAT INCLUDES OR IS GREATER THAN THE ONE THAT INCLUDES 12 **AND** IN THE AGE RANGE THAT INCLUDES OR IS LESS THAN THE ONE THAT INCLUDES 59), CONTINUE. OTHERWISE, GO TO FSQ.170.

FSQ.162 [In the **last 12 months**], did {you/you or any member of your household} receive benefits from the WIC program, that is, the Women, Infants and Children program?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.170 [In the **last 12 months**], were {you/you or any members of your household} authorized to receive Food Stamps [which includes a food stamp card or voucher, or cash grants from the state for food]?

AN AUTHORIZED PERSON IS ONE WHOSE NAME APPEARS ON A CERTIFICATION CARD

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

BOX 7

CHECK ITEM FSQ.175:

IF ONLY ONE PERSON IN HOUSEHOLD, FLAG PERSON AS RECEIVING FOOD STAMPS IN FSQ.180 AND GO TO BOX 8 (ASK FSQ.190 AND FSQ.200 FOR THIS PERSON). OTHERWISE, CONTINUE.

FSQ.180 Who was authorized to receive Food Stamps? PROBE: Anyone else?

> CAPI INSTRUCTION: DISPLAY NAMES OF ALL **HOUSEHOLD** MEMBERS.

SELECT NAME(S) FROM ROSTER

REFUSED7(END OF SECTION)DON'T KNOW9(END OF SECTION)

BOX 8

LOOP 1:

ASK FSQ.190 AND FSQ.200 FOR EACH PERSON FLAGGED IN FSQ.180 AS RECEIVING FOOD STAMPS.

FSQ.190 In the **last 12 months**, about how many months {were you/was PERSON NAME} authorized to receive Food Stamps?

IF LESS THAN 1 MONTH, ENTER 1

I____I ENTER NUMBER OF MONTHS

REFUSED	77
DON'T KNOW	99

FSQ.200 {Are you/Is PERSON NAME} now authorized to receive Food Stamps?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

BOX 9

END LOOP 1: ASK FSQ.190 AND FSQ.200 FOR NEXT PERSON. IF NO NEXT PERSON, CONTINUE.

BOX 10

CHECK ITEM FSQ.209: IF FSQ.200 = 1 (YES) FOR ANY HH MEMBER, GO TO FSQ.210. OTHERWISE, GO TO FSQ.220.

FSQ.210 How much did {you/your household} receive in food stamps benefits last month?

Image: Image:

REFUSED	77777	(END OF SECTION)
DON'T KNOW	99999	(END OF SECTION)

FSQ.220 How much did {you/your household} receive the last month anyone got food stamps benefits?

ENTER I	DOLLAR AMOUNT	Г

REFUSED	77777
DON'T KNOW	99999

POST-DIETARY RECALL QUESTIONNAIRE Target Group: SPs Birth + (Individual Food Security Questions)

Note:

The set of individual food security questions was asked as part of the post-recall questionnaire administered in the Mobile Exam Center (MEC) after the 24-hour dietary recall interview. Please refer to the following link at: http://www.cdc.gov/nchs/about/major/nhanes/nhanes2005-2006/questexam05_06.htm for more detailed description on the examination component of dietary recall and the complete post-recall questionnaire.

BOX 2

If the response to FSQ.030 'A', 'B', 'C', 'D' or 'E' is ' often true' (code 1), 'sometimes true' (code 2), ' refuse' (code 7), 'don't know' (code 9), continue with Box 3. Otherwise, go to Box 5.

BOX 3

If SP 16 years or older, continue; If SP less than 12 years old, go to the second FSQ.421 listed. Otherwise, go to the end of the section.

USDA-FNS FSQ.401

The next questions are about whether you were always able to afford enough food in the last 30 days.

In the last 30 days, did you cut the size of your meals because there wasn't enough money for food?

Often	1
Sometimes	2
Never	3
Refused	7
Don't Know	9

USDA-FNS FSQ.411

In the last 30 days, did you skip meals because there wasn't enough money for food?

Often	1
Sometimes	2
Never	3
Refused	7
Don't Know	9

USDA-FNS

FSQ.421 In the last 30 days, did you eat less than you felt you should because there wasn't enough money for food?

Often 1

Sometimes	2
Never	3
Refused	7
Don't Know	9

USDA-FNS

FSQ.431

In the last 30 days, were you hungry but didn't eat because you couldn't afford enough food?

Often Sometimes Never Refused	2 3
	•
Don't Know	9

USDA-FNS

FSQ.440

In the last 30 days, did you lose weight because you didn't have enough money for food?

Yes	1
No	2
Refused	7
Don't Know	9

BOX A

IF (FSQ401 OR FSQ411 OR FSQ421 OR FSQ431 = 1or 2) OR IF (FSQ440=1), CONTINUE; OTHERWISE, GO TO THE END OF THE SECTION.

USDA-FNS

FSQ.451 In the last 30 days, did you not eat for a whole day because there wasn't enough money for food?

Often	1
Sometimes	2
Never	3
Refused	7
Don't Know	9

BOX 4

Go to the end of the section.

USDA-FNS FSQ.421

The next questions are about whether you were always able to afford enough food for (NAME) in the last 30 days.

In the last 30 days, did (NAME) eat less than you felt (he/she) should because there wasn't enough money for food?

1
2
3
7
9

USDA-FNS

FSQ.401 In the last 30 days, did you cut the size of (NAME's) meals because there wasn't enough money for food?

Often	1
Sometimes 2	2
Never	3
Refused	7
Don't Know9)

USDA-FNS

FSQ.491 In the last 30 days, was (NAME) hungry but you just couldn't afford more food?

USDA-FNS

FSQ.501

In the last 30 days, did (NAME) skip a meal because there wasn't enough money for food?

Often	1
Sometimes	2
Never	3
Refused	7
Don't Know	9

BOX B

IF (FSQ421 OR FSQ401 OR FSQ491 OR FSQ501= 1 OR 2), CONTINUE; OTHERWISE, GO TO THE END OF THE SECTION.

USDA-FNS

FSQ.521 In the last 30 days, did (NAME) not eat for a whole day because there wasn't enough money for food?

Often	1
Sometimes	2
Never	3
Refused	7
Don't Know	9

REPRODUCTIVE HEALTH – RHQ

Note:

The set of WIC questions for women was asked as part of the Reproductive Health (RHQ) section administered in the Mobile Exam Center (MEC) to female participants 12 years and older. Please refer to the following link at: http://www.cdc.gov/nchs/about/major/nhanes/nhanes2005-2006/questexam05_06.htm for the complete MEC Reproductive Health questionnaire.

SBOX 24

CHECK ITEM RHQ.640A:

- IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.143, CONTINUE WITH FSQ.651.
- IF THE AGE DIFFERENCE BETWEEN SP'S CURRENT AGE AND AGE AT LAST LIVE BIRTH IN RHQ.190 IS ZERO OR 1, CONTINUE WITH FSQ.651.
- IF SP CURRENTLY LACTATING (CODED '1') IN RHQ.200, CONTINUE WITH FSQ.651.
- IF SP 14-49 YEARS OLD, GO TO RHQ.740.
- OTHERWISE, GO TO END OF SECTION.

FSQ.651 These next questions are about participation in programs for women with young children.

Did {you/SP} personally receive benefits from WIC, that is, the Women, Infants, and Children Program, in the **past 12 months**?

YES	1	
NO	2	(SBOX 25)
REFUSED	7	(SBOX 25)
DON'T KNOW	9	(SBOX 25)

FSQ.660 {Are you/Is SP} **now** receiving benefits from the WIC Program?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.670 Thinking about {your/SP's} most recent pregnancy or delivery, how long {did you receive/have you been Q/U receiving/did she receive/has she been receiving} benefits from the WIC Program?

CAPI INSTRUCTION:

IF SP CURRENTLY RECEIVING WIC BENEFITS (CODED '1') IN FSQ.660, DISPLAY {HAVE YOU BEEN RECEIVING/HAS SHE BEEN RECEIVING}. OTHERWISE, DISPLAY {DID YOU RECEIVE/DID SHE RECEIVE}.

|___| ENTER QUANTITY

REFUSED	77
DON'T KNOW	

ENTER UNIT

MONTHS	1
YEARS	2
REFUSED	7
DON'T KNOW	9

DIET BEHAVIOR AND NUTRITION - DBQ

Note:

The set of WIC questions for children was asked as part of the Diet Behavior and Nutrition (DBQ) section to participants less than 6 years old. Please refer to the following link at: <u>http://www.cdc.gov/nchs/about/major/nhanes/nhanes2005-2006/questexam05_06.htm</u> for the complete Diet Behavior and Nutrition questionnaire.

BOX 10

CHECK ITEM DBQ.425A: IF SP AGE >= 6, GO TO BOX 11. OTHERWISE, CONTINUE.

FSQ.651 Next are a few questions about the WIC program.

Did {SP} receive benefits from WIC, that is, the Women, Infants, and Children program, in the **past 12** months?

YES	1	
NO	2	(BOX 11)
REFUSED	7	(BOX 11)
DON'T KNOW	9	(BOX 11)

BOX 10A

CHECK ITEM DBQ.701: IF SP AGE > 5, GO TO FSQ.671. OTHERWISE, CONTINUE.

FSQ.661 Is {SP} **now** receiving benefits from the WIC program?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

FSQ.671 How long {did SP receive/has SP been receiving} benefits from the WIC program?

Q/U

CAPI INSTRUCTION:

HARD EDIT: NUMBER SHOULD NOT BE HIGHER THAN SP'S AGE.

|___|

ENTER NUMBER (OF MONTHS OR YEARS)

REFUSED	77
DON'T KNOW	99

ENTER UNIT

1
2
7
9