

2007 CalCHEEPS TELEPHONE QUESTIONNAIRE

NOTE TO INTERVIEWERS: PARENTS' QUESTIONS ABOUT THIS SURVEY CAN BE DIRECTED TO CALIFORNIA DEPARTMENT OF HEALTH SERVICES.

(INTERVIEWER NOTE: IF ANSWERING MACHINE LEAVE THE FOLLOWING MESSAGE:

Hello, my name is _____ and I'm calling on behalf of Marie Brighton of the Synovate Global Opinion Panel. You and your ____ year-old child recently completed a survey that we sent to you. As you may recall, your child identified various foods that he or she eats as well as his or her exercise habits. At your earliest convenience, please call us back at 1-800-745-4267 as we are conducting follow-up interviews with children who participated in this important study and would like to speak with you. Please state that you are calling in reference to the Eating and Exercise Survey, and state your ID number as (MIQ from top of screen). Thank you.

ASK FOR PANEL MEMBER:

Hello, my name is _____ and I'm calling on behalf of Marie Brighton of the Synovate Global Opinion Panel for the California Department of Health Services. May I please speak to PANEL MEMBER'S NAME?

- 1 IF YES: CONTINUE WITH PANEL MEMBER. GO TO INTRODUCTION "A"
- 2 IF NO: May I speak with another head of this household? GO TO INTRODUCTION "B"

INTRODUCTION "A" PANEL MEMBER/HEAD OF HOUSEHOLD:

I'm calling on behalf of the California Department of Health Services.

INTRODUCTION "B" NOT PANEL MEMBER

Hello, my name is _____ and I'm calling on behalf of Marie Brighton of the Synovate Global Opinion Panel for the California Department of Health Services.

READ FOR BOTH INTRODUCTION "A" AND "B"

You and your ____ year-old child recently completed a survey that we sent to you. As you may recall, your child identified various foods that he or she eats as well as his or her exercise habits. We are conducting follow-up interviews with children who participated in this important study. Is this child available to speak with us?

- 1 IF YES: CONTINUE.
- 2 IF NO: SET UP CALL-BACK APPOINTMENT.

We want to ask your child what he/she thinks about eating and exercise. The interview will take about 15 minutes. Many children like to participate in this kind of study because their opinion will be used to design health programs for children like themselves, and it makes the child feel important. This survey is confidential, and information about your child will not be disclosed. You or your child may stop the interview at any time, and he/she does not have to answer any questions that he or she does not want to answer. Do you want to continue?

- 1 YES – CONTINUE
- 2 NO: May I call you back at a more convenient time?

- 1 YES – RECORD APPROPRIATE DATE/TIME FOR APPOINTMENT
- 2 NO: Thank you! RECORD AS REFUSED

CONFIRM GENDER/AGE IN ORDER TO CUSTOMIZE QUESTIONS 6J-K AND 12A-C:

AA. Thinking of the child who recently completed the survey regarding the various foods that he or she eats as well as his or her exercise habits, is this child:

- 1 A boy or
- 2 A girl?

BB. And what was his/her age when he/she completed the survey earlier this year? Was he/she:

- 1 9 years of age
- 2 10 years of age
- 3 11 years of age
- 4 DO NOT READ: 8 YEARS OF AGE: Is this child a 4th or 5th grader?
 - 1 YES: CONTINUE
 - 2 NO: Thank you. That is all of my questions. END INTERVIEW.
- 5 DO NOT READ: 12 YEARS OF AGE: Is this child a 4th or 5th grader?
 - 1 YES: CONTINUE
 - 2 NO: Thank you. That is all of my questions. END INTERVIEW.

May we speak with your AGE-year old GENDER child?

- 1 YES/CHILD AT HOME – CONTINUE INTERVIEW WITH CHILD
- 2 YES/CHILD NOT AT HOME: When may I call back? (RECORD APPROPRIATE DATE/TIME FOR APPOINTMENT.)
- 3 NO; For what reasons do you not want your child participating in this interview? RECORD VERBATIM.

IF PARENT ASKS TO LISTEN, WE WOULD LIKE THE INTERVIEWER TO TRY TO PERSUADE THE PARENT NOT TO DO SO: To ensure that we obtain your child's unique and candid answers to our questions regarding his/her knowledge, attitudes, and beliefs about eating and exercise practices, we prefer that you not listen. IF PARENT WILL NOT COOPERATE: We understand your concern, and you are welcome to listen. NOTE: A QUESTION EXISTS AT THE END OF THE INTERVIEW (NOT ASKED OF THE RESPONDENT) WHERE THE INTERVIEWER INDICATES WHETHER OR NOT THE PARENT LISTENED (SEE QUESTION 23).

WHEN SPEAKING WITH CHILD:

Hello. My name is _____. I work for the company that asked you to write down, in a booklet, the different types of foods you eat and the amount of exercise you get. We are asking you these questions because the California Department of Health Services wants to know what you think.

Your answers to my questions will be used to plan eating and exercise programs for children like you. Your ideas are very important to us. Your answers will be combined with other children's so that after this interview we will not be able to tell which answers were yours, and your answers will always be kept confidential. You can stop the interview whenever you want, and you do not have to answer questions that you don't want to answer. This will take about 15 minutes. Do you want to continue?

1 YES – CONTINUE

2 NO: May I call you back at a more convenient time?

1 YES – RECORD APPROPRIATE DATE/TIME FOR APPOINTMENT

2 NO: Thank you! RECORD AS REFUSED

VERIFY FROM RECORDS:

- A. Just to check, are you the ___ year-old boy/girl in your home who filled out our booklet?
- 1 YES; CONTINUE
 - 2 NO; May I speak with your mother or father? (RE-ASK FOR CHILD WHO PARTICIPATED IN STUDY.)

Please note our calls are monitored for quality control purposes.

As we talk, please keep in mind that there are no right or wrong answers to my questions.

INTERVIEWER NOTE: FOR Q.1, IF CHILD SAYS HE/SHE IS ALLERGIC TO MILK OR LACTOSE INTOLERANT, ASK "IN GENERAL, HOW MANY GLASSES OF MILK SHOULD A CHILD YOUR AGE DRINK A DAY FOR GOOD HEALTH?"

1. About how many glasses of milk do you think you should drink each day for good health? A serving is one cup or eight ounces which is similar to a carton of milk you would get at school.
DO NOT ACCEPT A RANGE. PROBE FOR A NUMBER. Is that closer to ___ or ___?

_____ NUMBER OF GLASSES/SERVINGS
00 NONE
99 DON'T KNOW/REFUSED

2. Does your ____: ROTATE.

	YES	NO	DON'T KNOW/ REFUSED/ DON'T EAT SCHOOL LUNCH
School have a soda vending machine that students can use?	1	0	3
School have a vending machine with snacks like chips, cookies, or candy that students can use?	1	0	3
School cafeteria have a salad bar? IF ASKED "WHAT'S A SALAD BAR?": A salad bar is usually a table or cart that has a lot of different types of foods that you can choose from to make your own salad. Usually these foods include lettuce, cheese, tomatoes, carrot slices, fresh fruit, salad dressings and so on.	1	0	3
School cafeteria <u>usually</u> serve students fast food made by restaurants like McDonald's, Burger King, Taco Bell, or Pizza Hut?	1	0	3
School usually have bake sales or candy sales to raise money?	1	0	3
Teacher reward students by giving out treats like candy, cookies, soda, or chips?	1	0	3
School have sodas, sports drinks, cookies, chips, or candy that students can buy after school?	1	0	3
School cafeteria serve at least two different (PAUSE) <u>fresh</u> fruits every day at lunch?	1	0	3
NOTE TO INTERVIEWER: PLACE EMPHASIS ON THE WORD "FRESH."			

3. Did you get to taste any fruits or vegetables in the classroom this year?

- 1 YES
- 2 NO
- 3 NOT SURE/DON'T RECALL

4. Do you have a television in your bedroom? [IF RESPONDENT SAYS HE/SHE DOES NOT SLEEP IN A BEDROOM, ADD Is there a television in the room where you sleep?] [IF RESPONDENT SAYS HE/SHE SPENDS TIME AT THE HOME OF OTHERS (E.G., MOM, DAD, GRANDPARENT), SAY: Think of the bedroom where you sleep most often.)

- 1 YES
2 NO
3 YES – IN SLEEPING ROOM, BUT NOT A BEDROOM (VOLUNTEERED)
9 DON'T KNOW/REFUSED

5. How many total cups of fruits and vegetables do you think you should eat every day for good health? PAUSE: That's a combined total of fruits, fruit juices, vegetables, and salads. A cup is about the size of a baseball or about the size of both your hands cupped together. DO NOT ACCEPT A RANGE. PROBE FOR A NUMBER.

NOTE: HALF PORTION SIZES (E.G., THREE AND A HALF, FOUR AND A HALF, ETC) ARE ACCEPTABLE AND SHOULD BE RECORDED AS SUCH; HOWEVER, NO OTHER PROPORTION (E.G., ONE-FOURTH, THREE-FOURTHS, ONE-THIRD) ARE ACCEPTABLE.

RULE FOR RANGES GIVEN: IF TWO WHOLE NUMBERS GIVEN (E.G., "FOUR TO FIVE SERVINGS") ASK: Is that closer to __, __ and a half, or ___? (EXAMPLE: "Is that closer to four, four and a half, or five servings?")

RULE FOR RANGES GIVEN: IF A WHOLE NUMBER AND A FRACTION GIVEN (E.G., "FOUR TO FOUR AND A HALF SERVINGS," ASK: Is that closer to __ or ___? (EXAMPLE: "Is that closer to four or four and a half servings?")

NOTE TO INTERVIEWER: IF CHILD STATES XX CUPS OR XX BASEBALLS, OR XX HANDS CUPPED TOGETHER, THE INTERVIEWER SHOULD RECORD THIS NUMBER/AMOUNT (SINCE WE READ ALL THREE FORMS OF MEASURE TO THE CHILDREN).

_____ NUMBER OF CUPS/BASEBALLS/CUPPED HANDS
00 NONE
99 DON'T KNOW/REFUSED

6. Now, I am going to read you several statements. READ: For each one, please tell me if you agree or disagree. WAIT FOR ANSWER. WHEN ANSWERED, ASK: Do you agree/disagree a lot or a little? ROTATE QUESTION ITEMS.

	--Agree-- (YES)		--Disagree-- (NO)		Non Response
	A Lot	A Little	A Little	A Lot	Don't know/ Refused
Your parents eat high-fat foods like French fries, chips, or desserts.	4	3	2	1	9
You want to have fruit for an afternoon snack.	4	3	2	1	9
Your friends at school usually eat healthy foods.	4	3	2	1	9
You like to try new kinds of fruits.	4	3	2	1	9
You like to try new kinds of vegetables.	4	3	2	1	9
You like most kinds of fruits.	4	3	2	1	9
You like most kinds of vegetables.	4	3	2	1	9
You help fix fruits, vegetables, or salads for dinner.	4	3	2	1	9
Your parents limit the amount of chips, soda, or sweets you can eat each day.	4	3	2	1	9
Most people in your family think that eating CUSTOMIZE PER TABLE BELOW AND RESPONSES TO AA AND BB of fruits and vegetables each day is important.	4	3	2	1	9
Most kids your age think that eating CUSTOMIZE PER TABLE BELOW AND RESPONSES TO AA AND BB of fruits and vegetables each day is important.	4	3	2	1	9
If you eat fruits and vegetables every day, your friends will start eating them too.	4	3	2	1	9
If you eat fruits and vegetables every day, you will have more energy.	4	3	2	1	9
If you eat fruits and vegetables every day, you will become stronger.	4	3	2	1	9
If you eat fruits and vegetables every day, you will (PAUSE) <u>think</u> better in class. T NOTE TO INTERVIEWER: PLACE EMPHASIS ON THE WORD "THINK."	4	3	2	1	9

IF THE CHILD IS CLEARLY USING "yes" AND "no" IN PLACE OF "agree" AND "disagree," RESPECTIVELY, THIS IS ACCEPTABLE. NEVERTHELESS, THE INTERVIEWERS SHOULD ALWAYS FOLLOW-UP BY ASKING THE FINAL QUESTION: "Do you agree/disagree a lot or a little?"

IF CHILD ANSWERS WITH WHAT APPEARS TO BE A COMPLETE ANSWER (E.G., "DISAGREE A LOT"), THE INTERVIEWER SHOULD CLARIFY AS FOLLOWS: You said you agree/disagree (state correct answer). Would you say you agree/disagree a lot or a little? EXCEPTION: IF THE INTERVIEWER DOES THIS AND THE CHILD IS OFFENDED BECAUSE HE OR SHE CLEARLY HAS MEMORIZED THE FOUR-POINT RATING SCALE, THE INTERVIEWER CAN LET THE CHILD RESPOND ON HIS/HER OWN.

FOR Q6J-K:

- IF AA = 1 (BOY) AND BB = 1 OR 4 (AGES 9 OR 8) = four and one-half cups
- IF AA = 1 (BOY) AND BB = 2 OR 3 OR 5 (AGES 10, 11, 12) = five cups
- IF AA = 2 (GIRL) AND BB = 1 OR 4 (AGES 9 OR 8) = four cups
- IF AA = 2 (GIRL) AND BB = 2 OR 3 OR 5 (AGES 10, 11, OR 12) = four and one-half cups

7. READ FOR LEAD/FIRST ITEM ONLY: Thinking of your own home, tell me if the following statements are always true, sometimes true, or never true. READ FIRST ITEM. IF NECESSARY: Would you say always, sometimes, or never?

FOR SECOND THROUGH FOURTH ITEMS: READ ITEM AND THEN ASK: Would you say always, sometimes, or never. ROTATE.

	Always	Sometimes	Never	Non Response Don't know/ Refused
In your home, there are lots of fruits to eat <u>that you like</u>	3	2	1	9
In your home, there are lots of vegetables to eat <u>that you like</u>	3	2	1	9
In your home, there are fruits kept out in a <u>place where you can get them</u>	3	2	1	9
In your home, there are vegetables cut up and ready to eat where you can get them	3	2	1	9

For the next question that I ask, you can answer yes or no.

8. Thinking of your day yesterday, did your family sit down and eat a meal together?"

- 1 YES – GO TO Q8A
- 2 NO – SKIP TO Q9
- 3 DON'T KNOW/REFUSED – SKIP TO Q9

IF "YES," ASK:

- 8A. How many times did your family sit down and eat a meal together yesterday? DO NOT ACCEPT A RANGE. PROBE FOR A NUMBER: Is that closer to ___ or ___?

- _____NUMBER OF TIMES
- 00 NONE/NOT AT ALL
- 99 DON'T KNOW/REFUSED

INTERVIEWER RECORD WITHOUT ASKING:

DAY OF WEEK YESTERDAY REPRESENTS (E.G., IF TODAY IS MONDAY, YESTERDAY WAS SUNDAY/ RECORD SUNDAY):

- 1 SUNDAY
- 2 MONDAY
- 3 TUESDAY
- 4 WEDNESDAY
- 5 THURSDAY
- 6 FRIDAY
- 7 SATURDAY

I'm now going to ask you about working in a garden. PAUSE. A garden could be indoors or outdoors, in a container or barrel, as well as in the ground.

9. Thinking of the most recent school year, did you work in a garden at school to help grow fruits or vegetables?

1 YES
0 NO
9 DON'T KNOW/REFUSED

10. About how many minutes do you think you should exercise or be active each day for good health? This includes activities like basketball, bicycling, skating, and playing tag, that you do at school, at home, and anywhere else you play. DO NOT ACCEPT A RANGE. Is that closer to ___ or ___? IF NECESSARY BECAUSE CHILD RESPONDS "ONE HOUR": How many minutes is that? IF NECESSARY: So you would say 60 minutes?

_____ NUMBER OF MINUTES (VALID RANGE = 1 TO 180; IF >180; ASK: ___ minutes equals more than three hours of exercise each day. I want to double check that this is your answer. Is this correct?)
00 NONE/NOT NECESSARY (VOLUNTEERED)
99 DON'T KNOW/REFUSED

11. About how many days each week do you think you should exercise or be active? DO NOT ACCEPT A RANGE. Is that closer to ___ or ___? IF NECESSARY BECAUSE CHILD RESPONDS WITH "ONE WEEK" OR ANY RESPONSE THAT IS NOT A NUMBER (READ VERBATIM): Knowing that there are seven days in a week, how many days each week do you think you should exercise or be active. IF NECESSARY: So you would say 7 days a week? IF "NO," ASK: Then about how many days?

_____ NUMBER OF DAYS (NOTE: VALID RANGE = 1-7)
00 NONE/NOT NECESSARY (VOLUNTEERED)
99 DON'T KNOW/REFUSED

12. READ FOR LEAD/FIRST ITEM ONLY: Now, I am going to read you a few statements. For each one, please tell me how confident you are: not confident, confident or very confident. Confident means how sure you are that you can do something.

READ FIRST ITEM. IF NECESSARY: Would you say not confident, confident, or very confident?

FOR SECOND THROUGH FOURTH ITEMS: READ ITEM AND THEN ASK: Would you say not confident, confident, or very confident. ROTATE.

NOTE: IF THE CHILD ANSWERS WITH MORE THAN ONE ANSWER (E.G., “NOT CONFIDENT...CONFIDENT...”), THE INTERVIEWER SHOULD REPEAT ALL THREE CATEGORIES AND CLARIFY: “Please pick only one answer.”

	Not Confident	Confident	Very Confident	Non Response Don't know/ Refused
How confident are you that you can eat CUSTOMIZE PER TABLE BELOW AND AA/BB of fruits each day.	1	2	3	9
How confident are you that you can eat CUSTOMIZE PER TABLE BELOW AND AA/BB of vegetables each day.	1	2	3	9
How confident are you that you can eat CUSTOMIZE PER TABLE BELOW AND AA/BB of fruits and vegetables each day.	1	2	3	9

FOR Q12A (FRUIT):

- IF AA = 1 (BOY) AND BB = 1 OR 4 (AGES 9 OR 8) = two cups
- IF AA = 1 (BOY) AND BB = 2 OR 3 OR 5 (AGES 10, 11, 12) = two cups
- IF AA = 2 (GIRL) AND BB = 1 OR 4 (AGES 9 OR 8) = one and one-half cups
- IF AA = 2 (GIRL) AND BB = 2 OR 3 OR 5 (AGES 10, 11, OR 12) = two cups

FOR Q12B (VEGETABLE):

- IF AA = 1 (BOY) AND BB = 1 OR 4 (AGES 9 OR 8) = two and one-half cups
- IF AA = 1 (BOY) AND BB = 2 OR 3 OR 5 (AGES 10, 11, 12) = three cups
- IF AA = 2 (GIRL) AND BB = 1 OR 4 (AGES 9 OR 8) = two and one-half cups
- IF AA = 2 (GIRL) AND BB = 2 OR 3 OR 5 (AGES 10, 11, OR 12) = two and one-half cups

FOR Q12C (FRUIT AND VEGETABLE):

- IF AA = 1 (BOY) AND BB = 1 OR 4 (AGES 9 OR 8) = four and one-half cups
- IF AA = 1 (BOY) AND BB = 2 OR 3 OR 5 (AGES 10, 11, 12) = five cups
- IF AA = 2 (GIRL) AND BB = 1 OR 4 (AGES 9 OR 8) = four cups
- IF AA = 2 (GIRL) AND BB = 2 OR 3 OR 5 (AGES 10, 11, OR 12) = four and one-half cups

13. I'll now read a few more statements. READ: For each one, please tell me if you agree or disagree. WAIT FOR ANSWER. WHEN ANSWERED, ASK: Do you agree/disagree a lot or a little? ROTATE QUESTION ITEMS.

	--Agree-- (YES)		--Disagree-- (NO)		Non Response Don't know/ Refused
	A Lot	A Little	A Little	A Lot	
I think I can write my favorite fruit or vegetable on the family's shopping list	4	3	2	1	9
I think I can ask someone in my family to buy my favorite fruit or vegetable	4	3	2	1	9
I think I can go shopping with my family for my favorite fruit or vegetable	4	3	2	1	9
I think I can pick out my favorite fruit or vegetable at the store and put it in the shopping basket	4	3	2	1	9
I think I can ask someone in my family to make my favorite vegetable dish for dinner	4	3	2	1	9
I think I can ask someone in my family to serve my favorite fruit at dinner	4	3	2	1	9
I think I can ask someone in my family to have fruits and fruit juices out where I can reach them	4	3	2	1	9
I think I can ask someone in my family to have cut up vegetables out where I can reach them	4	3	2	1	9
You think you're good at most sports. T	4	3	2	1	9
Your family exercises or is active together by doing things like going to the park, playing sports, or riding bikes. T	4	3	2	1	9

IF THE CHILD IS CLEARLY USING "yes" AND "no" IN PLACE OF "agree" AND "disagree," RESPECTIVELY, THIS IS ACCEPTABLE. NEVERTHELESS, THE INTERVIEWERS SHOULD ALWAYS FOLLOW-UP BY ASKING THE FINAL QUESTION: "Do you agree/disagree a lot or a little?"

IF CHILD ANSWERS WITH WHAT APPEARS TO BE A COMPLETE ANSWER (E.G., "DISAGREE A LOT"), THE INTERVIEWER SHOULD CLARIFY AS FOLLOWS: You said you agree/disagree (state correct answer). Would you say you agree/disagree a lot or a little? EXCEPTION: IF THE INTERVIEWER DOES THIS AND THE CHILD IS OFFENDED BECAUSE HE OR SHE CLEARLY HAS MEMORIZED THE FOUR-POINT RATING SCALE, THE INTERVIEWER CAN LET THE CHILD RESPOND ON HIS/HER OWN.

14. I'll now read a few more statements. For each one you can answer yes or no.
 ROTATE ITEMS.

	YES	NO	DON'T KNOW (VOLUNTEERED)
I think I can be physically active most days after school	1	0	3
I think I can ask my parent or other adult to do physically active things with me	1	0	3
I think I can ask my parent or other adult to sign me up for a sport, dance, or other physical activity	1	0	3
I think I can ask my best friend to be physically active with me	1	0	3
I think I can ask my parent or other adult to get me the equipment I need to be physically active	1	0	3
I think I can ask my parent or other adult to take me to a physical activity or sport practice	1	0	3
I think I have the skills I need to be physically active	1	0	3

For the next question that I ask, you can answer yes or no.

15. Do your parents limit the amount of time you spend watching TV or playing video games to less than two hours a day?

- 1 YES
- 2 NO
- 3 DON'T KNOW/REFUSED (VOLUNTEERED)

16. Thinking about your neighborhood, is there a park, playground, grassy field, or sports field within walking distance of your home?

- 1 YES
- 0 NO
- 9 DON'T KNOW/REFUSED

17. Now, I am going to read you a statement about your neighborhood. READ: Please tell me if you agree or disagree. WAIT FOR ANSWER. WHEN ANSWERED, ASK: Do you agree/disagree a lot or a little?

	Agree		Disagree		Don't know/Refused
	A Lot	A Little	A Little	A Lot	
The park or playground closest to where you live is safe <u>during the day</u> .	4	3	2	1	9

For the next question you can answer "yes," "no," or "don't know."

18. During this school year, do you remember seeing or hearing any TV commercials about Power Play (PAUSE) or Five-a-Day Power Play?

- 1 YES
- 0 NO – SKIP TO Q.20
- 9 DON'T KNOW/REFUSED– SKIP TO Q.20

IF "YES" TO Q18, ASK:

19. What was the main idea of the Power Play (PAUSE) or Five-a-Day Power Play TV commercial you saw or heard? PROBE: What else? Anything else? DO NOT READ LIST. ALWAYS READ PROBES.

CODE; DO NOT RECORD VERBATIM:

- 1 POWER PLAY!/5 A DAY POWER PLAY
- 2 EAT 5 SERVINGS OF FRUITS AND VEGETABLES EVERY DAY
- 3 HAVE A PHYSICALLY ACTIVE LIFESTYLE
- 4 EATING FRUITS AND VEGETABLES IS GOOD FOR YOUR HEALTH
- 5 OTHER COMMENTS RELATED TO FRUITS AND VEGETABLES
- 6 EAT A HIGH-FIBER DIET
- 7 EAT A LOW-FAT DIET
- 8 ALL OTHER COMMENTS RELATED TO DIET, NUTRITION, HEALTHY EATING
- 9 ALL OTHER COMMENTS UNRELATED TO DIET, NUTRITION, HEALTHY EATING
- 10 60 MINUTES OR MORE OF PHYSICAL ACTIVITY
- 99 DONT KNOW/REFUSED

EVERYONE:

20. Other than TV commercials, have you seen or heard about Power Play (PAUSE) or Five-a-Day Power Play anywhere else during this school year?

- 1 YES
- 0 NO – SKIP TO END
- 9 DON'T KNOW/REFUSED – SKIP TO END

IF "YES" TO Q20, ASK:

21. Where else have you seen or heard about Power Play (PAUSE) or Five-a-Day Power Play? PROBE: Where else? Anywhere else? DO NOT READ LIST; CIRCLE APPROPRIATE CODES. NEW NOTE: IF TV IS STATED HERE, ASK: Was it a TV commercial or TV program?

- 1 AT SCHOOL
- 2 AT COMMUNITY YOUTH ORGANIZATION; BOYS OR GIRLS CLUB; YMCA/YWCA; BOY/GIRL SCOUTS; 4-H
- 3 AT FARMERS' MARKET
- 4 AT SUPERMARKET
- 5 AT RESTAURANT
- 6 AT CHURCH
- 8 IN NEWSPAPER
- 9 ON BILLBOARDS
- 10 ON RADIO
- 11 ON TV PROGRAM (CLARIFY TO MAKE SURE CHILD MEANS "PROGRAM" AND NOT "ADVERTISEMENT")
- 7 OTHER; SPECIFY:
- 99 DON'T KNOW/REFUSED

22. What was the main idea of what you saw or heard (at, on, in) the ____, ____, or ____? REPEAT ANSWERS TO PRIOR QUESTION. PROBE: What else? Anything else? ALWAYS READ PROBES.

CODE; DO NOT RECORD VERBATIM:

- 1 POWER PLAY!/5 A DAY POWER PLAY
- 2 EAT 5 SERVINGS OF FRUITS AND VEGETABLES EVERY DAY
- 3 HAVE A PHYSICALLY ACTIVE LIFESTYLE
- 4 EATING FRUITS AND VEGETABLES IS GOOD FOR YOUR HEALTH
- 5 OTHER COMMENTS RELATED TO FRUITS AND VEGETABLES
- 6 EAT A HIGH-FIBER DIET
- 7 EAT A LOW-FAT DIET
- 8 ALL OTHER COMMENTS RELATED TO DIET, NUTRITION, HEALTHY EATING
- 9 ALL OTHER COMMENTS UNRELATED TO DIET, NUTRITION, HEALTHY EATING
- 10 60 MINUTES OR MORE OF PHYSICAL ACTIVITY
- 99 DON'T KNOW/REFUSED

END: Thank you! RECORD WITHOUT ASKING:

23. Parent listened to interview/child aware parent was listening. RECORD WITHOUT ASKING

1	YES
0	NO

OTHER DEMOGRAPHICS (CHILD'S AGE, HOUSEHOLD CHARACTERISTICS) PROVIDED BY SYNOVATE. WE WILL BE ABLE TO ASSOCIATE EACH RESPONDENT'S ANSWER TO THE PHONE SURVEY WITH HIS/HER ANSWERS FROM THE FOOD/PHYSICAL ACTIVITY JOURNAL.

INTERVIEWER'S NAME:

DATE:

INTERVIEW LENGTH:

RESPONDENT'S NAME:

RESPONDENT'S TELEPHONE: