
Questionnaire

Welcome!

WIC is planning to change the types and amounts of food we give to WIC families. The new federal rules will allow families to receive new foods like fruits, vegetables, and whole grain bread while reducing some of the quantities of the current foods like milk, eggs, cheese, and juice. A PowerPoint presentation on the changes is available for your information at www.wicworks.ca.gov under What's New.

The WIC program is trying to get ready for this big change and we need your help. We are asking you to answer some questions about the foods you buy/eat now, your opinion about some other foods that WIC may start offering, and your input about how to best educate WIC participants about the changes. Your responses will help the California WIC program plan how to promote the improvements in the foods we give to families and how to educate participants about the specific changes they will see in WIC. Anything you tell us will be confidential and the survey will take about ten minutes of your time.

Thank you.

1) Please answer all the questions below. (Enter 0 if none.)

Including yourself, how many people currently live in your household?

How many are adults age 18 years and older?

How many are children between the ages of 6 and 18 years?

How many are children between the ages of 2 and 5 years?

How many are children between the ages of 1 and 2 years?

How many are children between the ages of birth and 1 year?

2) When you shop for groceries, how many people do you shop for?

Transition: The next few questions are about the type of milk you buy and drink.

3) What type(s) of milk do you usually buy for you and your family?

(Select all that apply)

- Whole milk (vitamin D milk)
- 2% reduced fat milk
- 1% low fat milk
- Skim or nonfat milk
- Powdered milk
- Evaporated milk
- Lactaid or other lactose free milk
- Soy milk
- Goat's milk
- Do not buy any milk or soy milk
- Don't know
- Refused
- Other

4) What type of milk do **you** drink most of the time?

(Select one)

- I don't drink milk
- Whole (vitamin D)
- 2%
- 1%
- Skim (nonfat)
- Lactaid
- Soy milk
- Goat's milk
- Don't know
- Refused

5) Why do you drink this type of milk?

(Select all that apply)

- It's best for me (healthier)

- My doctor told me to drink this
- WIC recommends it
- I like the taste
- It's the only type available where I shop
- My family prefers it
- It's the cheapest
- I have lactose intolerance or milk allergy
- Don't know
- Refused
- Other

6) If asked to change from whole to 2% milk, how ready would you be?

(Select one.)

- I am ready now
- I am considering switching to 2% milk
- I have not thought about switching to 2% milk
- I sometimes drink 2% milk
- I would never consider switching to 2% milk
- I don't know
- Other

7) If asked to change from 2% to 1% milk, how ready would you be?

(Select one.)

- I am ready now
- I am considering switching to 1% milk
- I have not thought about switching to 1% milk
- I sometimes drink 1% milk
- I would never consider switching to 1% milk
- I don't know
- Other

8) What would make it easier for you to switch to a lower fat milk (from whole to 2% or from 2% to 1%)?

(Select all that apply.)

- If the cost is less
- If it tastes good
- If I learn that it has more vitamins, protein or calcium
- If my doctor recommends it
- If other family members want it
- If I have quick/easy preparation ideas for using it
- Nothing
- I don't know

9) Do you take care of a child **2-5 years old** in your household?

- Yes
- No

If there are MULTIPLE 2-5 year old children in your household, please answer the following questions about the child whose name comes first in the alphabet.

Example: You care for 2 children in your household. Their names are Jane and John. Jane comes before John in the alphabet, so you would answer the next two questions by referring to Jane.

10) What type of milk does the **2 to 5 year old child** in your household drink most of the time?

(Select one.)

- I don't have a child age 2 to 5 years in my household
- Does not drink milk
- Whole (vitamin D)
- 2%
- 1%
- Skim (nonfat)
- Lactaid
- Soy milk
- Goat's milk
- Refused
- Don't know

11) Why does the **2-5 year old child** in your household drink this type of milk?

(Select all that apply.)

- It's best for my child (most nutritious)
- The doctor recommended it
- WIC recommends it
- My child likes the taste
- It's the only type available where I shop
- My family prefers it
- It's the cheapest
- My child has lactose intolerance or allergy to milk
- Don't know
- Refused
- Other

Transition: Because you said that you buy soy milk, we would like to know a little more about soy milk consumption in your household.

12) How often do **you** drink soy milk?

(Select one.)

- I don't drink soy milk (go to Q14)
- I drink soy milk regularly
- I drink soy milk occasionally
- Other

13) Why do **you** drink soy milk?

(Select all that apply.)

- I don't drink soy milk
- I have a lactose intolerance or milk allergy
- I don't like the taste of regular milk
- I like the taste of soy milk
- Soy milk is good for my health
- Don't know
- Refused
- Other

14) Why does your child drink soy milk?

(Select all that apply.)

- I don't have a child
- He/she does not drink soy milk
- He/she has a lactose intolerance or milk allergy
- He/she does not like the taste of regular milk
- He/she like the taste of soy milk
- Soy milk is good for his/her health
- Because another person in the family drinks soy milk
- Don't know
- Refused
- Other

Transition: The next question is about tofu.

15) Do you ever buy tofu for your family? (Do not answer yes if you only buy prepared tofu at a restaurant.)

(Select one.)

- Yes
- No
- Don't know
- Refused
- Other

16) What is the reason you don't buy tofu?

(Select all that apply.)

- I don't know what tofu is
- I have never tried tofu
- I don't like the taste/texture of tofu
- I do not know how to prepare it
- I am allergic to soy products
- My family does not eat tofu
- I don't know
- Other

Transition: The next few questions will ask about fruits and vegetables (this does not include juice).

17) How often do you eat:

(Read the options and select one for each form):

	Daily	Weekly	Monthly	Once in a while	Never
Fresh fruits	<input type="radio"/>				
Canned fruits	<input type="radio"/>				
Frozen fruits	<input type="radio"/>				

18) How often do you eat:

(Read the options and select one for each form):

	Daily	Weekly	Monthly	Once in a while	Never
Fresh vegetables	<input type="radio"/>				
Canned vegetables	<input type="radio"/>				
Frozen vegetables	<input type="radio"/>				

19) What might help you eat more fruits and vegetables?

(Select all that apply.)

- I already eat enough fruits and vegetables
- Quick/easy preparation ideas
- Information on nutrition/health benefits
- Lower price

- If other family members want it
- Opportunities to taste new fruits and vegetables
- Other
- Nothing

- 20) Do you take care of a child **1-5 year old** in your household?
- Yes
 - No

If there are MULTIPLE **1-5** year old children in your household, please answer the following questions about the child whose name comes first in the alphabet.

Example: You care for 2 children in your household. Their names are Jane and John. Jane comes before John in the alphabet, so you would answer the next two questions by referring to Jane.

Transition: The next two questions are about the kind of juice WIC gives.

- 21) How many times a day does the **1-5 year old** child in your household usually drink the kind of juice WIC gives?
- The child in my household does not drink juice
 - 1
 - 2
 - 3
 - 4
 - 5
 - 6
 - 7
 - 8
 - 9
 - 10
 - Don't know
 - Refused
 - Other

- 22) Each time the **1-5 year old** child in your household drinks juice, what is the typical amount?

(Use a measuring cup to estimate amount)

- Up to 4 oz
- 5-7 oz
- 8-11 oz
- 12-15 oz
- 16 oz or more
- Don't know
- Refused
- Other

- 23) When you give juice to the **1-5 year old** child in your household, do you dilute the juice with water?
- Yes
 - No

Transition: The next few questions are about sweetened beverages.

- 24) What sweetened beverages do **you** consume three or more times a week?

(Select all that apply.)

- Sports or energy drinks
- Regular sodas
- Diet sodas
- Sugar sweetened beverages from powder
- Sugar-free beverages from powder
- Fruit drinks (not 100% juice)
- Sugar-free Flavored water
- Sweetened tea/coffee beverages
- Other
- None

- 25) What might help you consume less sugar sweetened beverages?

(Select all that apply.)

- Information on other beverages that are better for me
- If other family members stop wanting them
- Information on why sweetened beverages are not good for my health
- If my doctor recommends that I should limit sweetened beverages

- I am not interested in decreasing intake of sweetened beverages
- I don't know
- Other

26) What sweetened beverages does the **1-5 year old child** in your household drink?

(Select all that apply.)

- Sports or energy drinks
- Regular sodas
- Diet sodas
- Sugar sweetened beverages from powder
- Sugar-free beverages from powder
- Fruit drinks (not 100% juice)
- Sugar-free Flavored water
- Sweetened tea/coffee beverages
- Other
- None

27) Why do you give sweetened beverages to the **1-5 year old child** in your household?

(Select all that apply.)

- I don't see the harm in it
- Other family members also drink them
- I don't know what other beverage to provide
- My child (the child in your household) prefers sweet beverages
- My child (the child in your household) does not like to drink water
- I don't know
- Other

Transition: The next questions are about organic foods.

28) Do you ever buy organic foods?

(Select one.)

- Yes
- No
- Don't know
- Refused
- Other

29) What type of organic foods do you buy for you and your family?

(Select all that apply.)

- Milk
- Fruits
- Vegetables
- Eggs
- Cereals
- Bread
- Meat
- I do not buy organic foods
- Other

30) What is your opinion about organic foods?

(Select all that apply)

- I feel that organic foods are better for me
- I think organic foods are no different from regular foods
- I feel regular (non-organic) foods are a better choice
- I don't know anything about organic foods
- I don't have a strong opinion one way or the other
- Refused

31) Which of the following statements do you agree with?

(Select all that apply.)

- Organic foods are usually more expensive than regular (non-organic) foods
- Organic foods usually cost about the same as regular (non-organic) foods
- Organic foods are too expensive for most people to buy
- I am willing to pay more for organic foods
- I don't know anything about organic foods
- Refused

Transition: The next few questions will ask about the bread and grain products you buy for your family.

32) For each item listed below, identify if you buy it for your family. Do not include items eaten at a restaurant.

(Read the list and select an answer for each item.)

	Yes	No	Don't know
whole wheat bread or whole grain bread	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
white bread	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
corn tortillas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
whole wheat tortillas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
flour tortillas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
oatmeal (not instant oatmeal packets)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
brown rice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
white rice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
barley	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
bulgur	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

33) What is the reason you don't buy whole wheat or whole grain breads?

(Select all that apply.)

- I don't know what these products are
- I have never tasted these products
- I don't like how they taste
- My family doesn't like them
- They cost too much
- Someone in the family has a food allergy or medical reason not to eat that food
- I can't find these products in the store
- No specific reason
- Refused
- Don't know
- Other

34) What is the reason you don't buy corn tortillas?

(Select all that apply.)

- I don't know what they are
- I have never tasted them
- I make my own tortillas at home
- I don't like how they taste
- My family doesn't like them
- They cost too much
- Someone in the family has a food allergy or medical reason not to eat that food
- I can't find them in the store
- I just don't eat tortillas
- Refused
- Don't know
- Other

35) What is the reason you don't buy whole wheat tortillas?

(Select all that apply.)

- I don't know what they are
- I have never tasted them
- I make my own tortillas at home
- I don't like how they taste
- My family doesn't like them

- They cost too much
- Someone in the family has a food allergy or medical reason not to eat that food
- I can't find them in the store
- I just don't eat tortillas
- Don't know
- Refused
- Other

36) What is the reason you don't buy brown rice?

(Select all that apply.)

- I don't know what it is
- I have never tasted it
- I don't know how to cook it
- It takes too long to cook
- I don't like how it tastes
- My family doesn't like it
- It costs too much
- Someone in the family has a food allergy or medical reason not to eat that food
- I can't find it in the store
- No specific reason
- Don't know
- Refused
- Other

37) What do you think might help you consider increasing your consumption of whole grains?

(Select all that apply.)

- I already eat enough whole grains
- Opportunity to taste new whole grain foods
- Quick and easy preparation ideas
- Knowing which foods are whole grain
- Information on nutrition/health benefits
- If doctor recommends it
- If other family members also want to eat these foods
- I don't know
- Nothing

Transition: The next two questions will ask about beans.

38) Which of the following items do you buy?

(Select all that apply)

- Canned beans
- Dried beans
- None
- Refused

39) What is the reason you use canned beans?

(Select all that apply.)

- It takes too long to cook dried beans
- I don't know how to prepare dried beans
- It is more convenient to use canned beans
- Canned beans taste better than cooked dried beans
- Refused
- Other

40) What is your opinion about offering baby foods (plain fruits and vegetables for all and plain meat for fully breastfed infants) in the WIC food package?

(Select all that apply.)

- WIC should offer baby foods because they are convenient to use
- WIC should offer baby foods to help families introduce fruits and vegetables after their babies are six months old
- WIC should not offer baby foods because participants can prepare baby foods at home
- WIC should not offer baby foods because they are expensive
- I don't have any opinion about offering baby foods in the WIC food package
- Other

Transition: As you may know, the new rule decreases the amount of milk, eggs, cheese, and juice to make the food package more consistent with the 2005 U.S. Dietary Guidelines.

The next few questions ask your opinion about the decrease in the amount of milk, cheese, eggs, and juice.

41) What is your opinion about the decrease in the amount of milk?

(Select one.)

- I understand and enthusiastically support this change
- I mostly understand the reason for this change and can support it
- I am not sure I understand the reason for this change and I am not sure I support it, but I am open to learning more
- I think this change is not good and I have serious concerns about it
- Other
- Don't know

42) What is your opinion about the decrease in the amount of cheese?

(Select one.)

- I understand and enthusiastically support this change
- I mostly understand the reason for this change and can support it
- I am not sure I understand the reason for this change and I am not sure I support it, but I am open to learning more
- I think this change is not good and I have serious concerns about it
- Other
- Don't know

43) What is your opinion about the decrease in the amount of eggs?

(Select one.)

- I understand and enthusiastically support this change
- I mostly understand the reason for this change and can support it
- I am not sure I understand the reason for this change and I am not sure I support it, but I am open to learning more
- I think this change is not good and I have serious concerns about it
- Other
- Don't know

44) What is your opinion about the decrease in the amount of juice?

(Select one.)

- I understand and enthusiastically support this change
- I mostly understand the reason for this change and can support it
- I am not sure I understand the reason for this change and I am not sure I support it, but I am open to learning more
- I think this change is not good and I have serious concerns about it
- Other
- Don't know

Transition: We are finished with the food related questions. The next few questions are about education and training.

45) In what ways would you like to share information on the food package changes with WIC participants?

(Select all that apply.)

- Handouts
- Classes
- One-on-one contact
- Video
- Interactive computer programs
- E-mail
- Internet
- Telephone calls
- Other

If Other, please specify:

46) What training or teaching tools would you like to receive in preparation for educating WIC families on the food package changes?

(Select all that apply.)

- Grocery store tours
- Potlucks/Taste-testing new foods
- Cooking demonstrations
- Quick and easy preparation ideas
- Handouts and educational material kits
- Learner-centered training
- Videos
- Web-based training
- Other

If Other, please specify:

Transition: The next few questions are about you.

47) How many years have you worked for WIC?

(Select one.)

- Less than 1
- 1-2
- 3-5
- 6-10
- More than 10
- Other

48) Select the category that most closely describes your job classification:

(Select one.)

- Administrator/Director/Coordinator/Supervisor (not direct client service)
- Registered Dietitian (RD)
- Degreed Nutritionist (DN)
- WIC Nutrition Assistant (WNA)
- Clerical staff or other job working with WIC families

49) Do you regularly provide training to WIC staff?

- Yes
- No

50) What language do you speak most often at home? (Select one.)

- English
- Spanish
- Vietnamese
- Chinese (Cantonese/Mandarin)
- Russian
- Hmong
- Armenian
- Other

If Other, please specify:

51) Which of the following race and ethnicity categories do you most closely identify with? You can select more than one.

(Select all that apply.)

- Hispanic
- White
- African-American / Black
- Asian
- Pacific Islander
- American Indian / Alaska Native
- Refused
- Other

52) How old are you?

53) What is your gender?

(Select one.)

Female

Male

Refused

54) Agency Name