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## INTRODUCTION

| DOMAIN<br>SOURCE  | ENGLISH   | SPANISH TRANSLATION   |
|-------------------|---|---|
| ELIGIBILITY INTRO | Before you continue to the study information, we need to confirm your eligibility with a few short questions.   | Antes de continuar con la información sobre el estudio, necesitamos confirmar que usted pueda participar en el. Para ello le haremos unas breves preguntas  |
| AGE<br><br>AGE    | How old are you?<br>[numeric]<br>[If <18: “Unfortunately, you are not eligible for the study. Thank you for your time. You will now be redirected back to the survey company.”]   | ¿Qué edad tiene?<br>[numeric]<br>[Si <18: “Desafortunadamente, no es elegible para el estudio. Muchas gracias por su tiempo. Ahora usted se redirige a la empresa de encuestas.”]   |
| INFO              | <p>Before you start the survey, please read the following information and let us know if you agree to participate.</p> <ul style="list-style-type: none"> <li>- The survey will examine eating patterns. The study is being conducted by Professor David Hammond at the University of Waterloo, Canada.</li> <li>- The survey will take about 20 minutes to complete.</li> <li>- You must be 18 years of age or older to participate in the study.</li> <li>- Participation is voluntary and you can skip any question you don’t want to answer. You can choose to stop the study at any time without penalty. If you choose to discontinue the study, you may receive remuneration by declining all further questions until the end of the survey. Any data already collected may be used in the study, unless you contact the researcher to have it deleted.</li> <li>- We take your privacy very seriously and will make every effort to keep your information strictly confidential. We will never share your personal information with any company or marketing firm. The data will be stored for a minimum of 7 years on a secure University of Waterloo server. Internet protocol (IP) addresses may be recorded by the software programs used for this study, but this information will not be used by the researchers or the owners of the programs with an intention to identify you. When information is transmitted over the internet, privacy cannot be guaranteed. There is always a risk your responses may be intercepted by a third party (e.g., government agencies, hackers).</li> <li>- This project has been reviewed and received ethics clearance through a University of Waterloo Research Ethics Committee. However, the final decision about participation is yours. Participants who have concerns or questions about their involvement in the project may contact the Chief Ethics Officer, Office of Research Ethics at 519-888-4567, ext. 36005 or <a href="mailto:ore-ceo@uwaterloo.ca">ore-ceo@uwaterloo.ca</a>.</li> </ul> | <p>Antes de iniciar la encuesta, lea por favor la siguiente información e indíquenos si está de acuerdo en participar.</p> <ul style="list-style-type: none"> <li>- La encuesta explorará patrones de alimentación. El estudio lo lleva a cabo el Profesor David Hammond de la Universidad de Waterloo en Canadá.</li> <li>- Contestar la encuesta le tomará unos 20 minutos.</li> <li>- Debe tener 18 años de edad o más para participar en el estudio.</li> <li>- La participación es voluntaria y se puede saltar cualquier pregunta que no desee contestar. Puede optar por salir del estudio en cualquier momento sin incurrir en ninguna penalidad. Si decide salir del estudio, podría recibir una remuneración en caso de que no responda ninguna otra pregunta hasta el final de la encuesta. Todos los datos ya recopilados hasta ese momento se podrían usar en el estudio a menos que se ponga en comunicación con el investigador para que los elimine.</li> <li>- Su privacidad es un asunto de mucha seriedad para nosotros y haremos todo lo posible para mantener su información en la más estricta confidencialidad. Nunca compartiremos sus datos personales con ninguna compañía ni empresa de mercadotecnia. Los datos se almacenarán 7 años como mínimo en un servidor seguro de la Universidad de Waterloo. Las direcciones de protocolo de Internet (IP) podrían quedar registradas en los programas de software usados para el estudio pero no las utilizarán los investigadores ni los propietarios de los programas con el propósito de identificarle a usted. Cuando se transmite información en Internet, no se puede garantizar la privacidad. Siempre existe el riesgo de que sus respuestas sean interceptadas por terceros (e.g., agencias gubernamentales, piratas cibernéticos (hackers)).</li> <li>- Los aspectos éticos del proyecto fueron revisados y aprobados por el Comité de Ética de la Investigación de la Universidad de Waterloo. Sin</li> </ul> |

|  |   |   |
|--|---|---|
|  | <p>- If you have any questions about the study, please contact Professor David Hammond of the University of Waterloo, at 519-888-4567 ext. 36462 or <a href="mailto:dhammond@uwaterloo.ca">dhammond@uwaterloo.ca</a>.</p>   | <p>embargo, la decisión final de participar depende de usted. Las personas que entren al estudio y tengan inquietudes o preguntas sobre su participación en el proyecto pueden comunicarse con el Oficial Principal de Ética, en la Oficina de Ética de la Investigación, al teléfono 519-888-4567, ext. 36005 o al correo electrónico <a href="mailto:oreceo@uwaterloo.ca">oreceo@uwaterloo.ca</a>.</p> <p>- Si tiene preguntas sobre el estudio, favor de comunicarse con el Profesor David Hammond de la Universidad de Waterloo al teléfono 519-888-4567 ext. 36462 o al correo electrónico <a href="mailto:dhammond@uwaterloo.ca">dhammond@uwaterloo.ca</a>.</p> |
| <p><b>CONSENT</b><br/><i>CONSENT</i></p> | <p><b>Based on the information you received, do you agree to take part in this research study being conducted by Professor David Hammond of the University of Waterloo?</b><br/>Yes → <i>[continue to survey]</i><br/>No → Thank you for your time. You will now be redirected back to the survey company. <i>[TERMINATE]</i></p> | <p><b>Con base en la información que recibió, ¿está de acuerdo en formar parte de este estudio de investigación que realiza el Profesor David Hammond de la Universidad de Waterloo?</b><br/>Sí → <i>[pase a la encuesta]</i><br/>No → Gracias por su tiempo. Ahora usted se redirige a la empresa de encuestas. <i>[TERMINAR]</i></p>  |



## DEMOGRAPHICS

| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION  |
|---|--|--|
| <b>PREAMBLE</b>   | The first section of this survey includes questions about where you get food, the types of food you eat, the places you eat, and your background.  | En la primera sección de esta encuesta se incluyen preguntas sobre los lugares donde consigue alimentos, los tipos de alimentos que come, los lugares donde come y sus antecedentes personales.  |
| <b>GENDER</b><br>CIHR SUGGESTED<br>METHOD (GRETA<br>BAUER, WESTERN)<br><br><i>GENDER</i><br><i>GENDER_OTEXT</i> | <b>What is your current gender identity?</b><br>Man<br>Woman<br>Trans male/trans man<br>Trans female/trans woman<br>Gender queer/gender non-conforming<br>Different identity → Please specify: [ <i>open-ended</i> ]<br>Don't know<br>Refuse to answer   | <b>¿Cuál es su actual identidad de género?</b><br>Hombre<br>Mujer<br>Trans masculino/hombre trans<br>Trans femenina/mujer trans<br>Queer/persona que no se ajusta a las normas tradicionales del género<br>Otra identidad → Favor de especificar: [ <i>respuesta abierta</i> ]<br>No sabe<br>Se negó a contestar |
| <b>SEX AT BIRTH</b><br>CIHR SUGGESTED<br>METHOD (GRETA<br>BAUER, WESTERN)<br><i>SEX</i>                         | <b>What sex were you assigned at birth, meaning on your original birth certificate?</b><br>Male<br>Female  | <b>¿Qué sexo se le asignó al nacer, es decir, en su acta de nacimiento original?</b><br>Masculino<br>Femenino  |
| <b>STUDENT STATUS</b><br><br><i>STUDENT</i>   | <b>Are you currently a student?</b><br>No<br>Yes, full-time<br>Yes, part-time<br>Don't know<br>Refuse to answer  | <b>¿Estudia actualmente?</b><br>No<br>Sí, tiempo completo<br>Sí, medio tiempo<br>No sabe<br>Se negó a responder  |
| <b>CURRENT EMPLOYMENT</b><br><br><i>WORK</i>  | <b>Do you currently do any paid work at a job or a business?</b><br>Yes – Full-time (30 hours or more per week)<br>Yes – Part-time (less than 30 hours per week)<br>No – Looking for work<br>No – Not looking for work<br>Don't know<br>Refuse to answer | <b>¿Trabaja actualmente en alguna ocupación o negocio?</b><br>Sí, tiempo completo (30 horas o más a la semana)<br>Sí, medio tiempo (menos de 30 horas a la semana)<br>No, está buscando trabajo<br>No y no está buscando trabajo<br>No sabe<br>Se negó a responder   |
| <b>CHILDREN – ANY</b><br><br><i>CHILD_ANY</i>   | <b>Do you have any children (including step-children or adopted children) under the age of 18?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer  | <b>¿Tiene hijos (incluidos hijastros o hijos adoptivos) menores de 18 años de edad?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder  |

|  |   |   |
|--|---|---|
| <b>CURRENT LIVING SITUATION</b><br><br>LIVE_PARENT<br>LIVE_ROOM<br>LIVE_SPOUSE<br>LIVE_CHILD<br>LIVE_SCHOOL<br>LIVE_ALONE<br>LIVE_OTHER<br>LIVE_DK<br>LIVE_R<br>LIVE_OTEXT | [PROGRAMMER NOTE: Only display “My child(ren)” option if >1 child in household]<br><b>What is your current living situation? I live with...</b> (Select all that apply.)<br>My parent(s)/guardian(s)<br>Roommate(s)<br>My partner / spouse<br>My children<br>I live at school, university or college<br>I live alone<br>Other → Please specify: <i>[open-ended]</i><br>Don’t know<br>Refuse to answer | [PROGRAMMER NOTE: Only display “My child(ren)” option if >1 child in household]<br><b>¿Con quién vive actualmente? Vivo con...</b> (Seleccione todas las opciones que apliquen.)<br>Mi padre y/o mi madre/tutor(es)<br>Compañero(s) de cuarto<br>Mi pareja/cónyuge<br>Mi(s) hijo(s)<br>Vivo en un dormitorio de la escuela, universidad o colegio<br>Vivo solo<br>Otro → Favor de especificar: <i>[respuesta abierta]</i><br>No sabe<br>Se negó a responder |
|--|---|---|

## FOOD SOURCES

| DOMAIN SOURCE  | ENGLISH   | SPANISH TRANSLATION   |
|--|---|---|
| <b>FOOD SOURCE – INTRO</b>   | The next questions ask about where you got the <b>FOOD YOU ATE IN THE LAST WEEK</b> . We’ll ask about drinks later.<br><br>We will ask about <b>WHERE YOUR FOOD WAS PREPARED</b> , not where you ate it.<br><br>We’ll also ask <b>WHO PREPARED IT</b> .<br><br>We will start by asking about yesterday, and then work back through each previous day, one by one.   | Las siguientes preguntas exploran dónde obtuvo los <b>ALIMENTOS QUE COMIÓ LA SEMANA PASADA</b> . Más adelante le haremos preguntas sobre las bebidas.<br><br>Le preguntaremos <b>DÓNDE FUERON PREPARADOS SUS ALIMENTOS</b> , no dónde los comió.<br><br>También le preguntaremos <b>QUIÉN LOS PREPARÓ</b> .<br><br>Empezaremos con preguntas acerca del día de ayer y después iremos hacia atrás, día por día.  |
| <b>FOOD SOURCE – PREPARATION LOCATION BY DAY &amp; MEAL</b><br><br>DAY#_BREAKFAST<br>DAY#_LUNCH<br>DAY#_DINNER<br>DAY#_OTHER | [PROGRAMMER NOTE: Ask for each of the past 7 days.]<br><b>Remember: We are asking about WHERE your food was PREPARED, not where you ate it.</b> <i>For example: If you made lunch at home and brought it to work or school, this would be prepared at “home.” If your food came from home—even if it needed little or no preparation (e.g., an apple or crackers)—that counts as at “home”.</i><br><br>We’re also asking <b>WHO prepared the food.</b> <i>If the food preparation was shared equally with someone else, choose “Home, by you”. If someone else did most of the food preparation, choose “Home, by someone else”.</i><br><br><b>DO NOT include drinks.</b><br><br><b>[Yesterday,] on [date], please indicate WHERE each meal was PREPARED.</b> | [PROGRAMMER NOTE: Ask for each of the past 7 days.]<br><b>Recuerde: Estas preguntas son acerca de DÓNDE SE PREPARARON sus alimentos, no dónde los comió.</b> <i>Por ejemplo: si preparó su almuerzo en casa y lo llevó al trabajo o a la escuela, la respuesta sería que fue preparado en “casa”. Si sus alimentos vinieron de su casa, incluso si necesitaron poca o ninguna preparación (e.g. una manzana o galletas saladas), se considerarán preparados en “casa”.</i><br><br><b>También le preguntaremos QUIÉN preparó los alimentos.</b> <i>Si la preparación de los alimentos fue compartida por igual con alguien más, elija “En casa, preparado por usted”. Si alguien más se encargó de la mayor parte de la preparación, elija “En casa, preparado por alguien más”.</i><br><br><b>NO incluya bebidas.</b> |

|  |   |  |
|--|---|--|
|  | <p>[Table with meal as row headings and location as column headings]</p> <p>BREAKFAST<br/>LUNCH<br/>DINNER<br/>SNACKS/OTHER</p> <p><b>Home, by you</b> (incl. minimal/no prep)<br/><b>Home, by someone else</b> (family, partner, friend)<br/><b>Restaurant, take-out, cafeteria, vending machine, etc.</b><br/><b>Someone else's home</b><br/><b>Did not eat</b><br/>Don't know<br/>Refuse to answer</p>   | <p>[Ayer,] [fecha], por favor indique <b>DÓNDE</b> fue <b>PREPARADO</b> cada uno de los siguientes alimentos.</p> <p>[Table with meal as row headings and location as column headings]</p> <p>DESAYUNO<br/>ALMUERZO<br/>CENA<br/>REFRIGERIOS/OTRO</p> <p><b>En casa, preparado por usted</b> (incluye mínima/ninguna preparación)<br/><b>En casa, preparado por alguien más</b> (familiar, pareja, amigo)<br/><b>En restaurante, establecimiento de comida para llevar, autoservicio, máquina expendedora, etc.</b><br/><b>En casa de alguien más</b><br/><b>No comió</b><br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>FOOD SOURCE – PURCHASE LOCATIONS FOR FOOD PREPARED OUTSIDE THE HOME</b></p> <p>DAY#_B1...B9<br/>DAY#_BDK<br/>DAY#_BR<br/>DAY#_B9O</p> <p>(B/L/D/O)</p> | <p>[UNIVERSE: Respondents who indicated that any food was prepared at "Restaurant, take-out, cafeteria, vending machine, etc." for any meals.]<br/>[PROGRAMMER: Ask separately for each applicable meal by day.]<br/><b>You said you had food prepared outside the home on [date].</b></p> <p><b>Please indicate WHERE each of these meals was purchased.</b></p> <p>[MEAL]<br/>Fast food / quick service / coffee shop (i.e., order from a counter, pizza delivery, etc.)<br/>Sit-down restaurant with a server<br/>Cafeteria (NOT including fast food chains)<br/>Ready-to-eat / take-away from grocery store<br/>Food truck / food stand / 'street food'<br/>Convenience store / gas station<br/>Sports, recreation, or entertainment venue<br/>Vending machine<br/>Some other place (Please specify):<br/>Don't know<br/>Refuse to answer</p> | <p>[UNIVERSE: Respondents who indicated that any food was prepared at "Restaurant, take-out, cafeteria, vending machine, etc." for any meals.]<br/>[PROGRAMMER: Ask separately for each applicable meal by day.]<br/><b>Usted dijo que comió alimentos no preparados en casa el [fecha].</b></p> <p><b>Favor de indicar DÓNDE se compraron cada uno de los siguientes alimentos.</b></p> <p>[ALIMENTO]<br/>Restaurante o cafetería de comida rápida (i.e. Starbucks, McDonalds, Subway)<br/>Restaurante tradicional (con meseros)<br/>Cafetería (sin incluir cadenas de comida rápida como McDonalds)<br/>Alimentos listos para el consumo de tienda de abarrotes/conveniencia<br/>Puesto de comida ambulante<br/>Centro deportivo, recreativo o de entretenimiento<br/>Máquina de autoservicio<br/>Algún otro lugar (Favor de especificar):<br/>No sabe<br/>Se negó a contestar</p> |
| <p><b>FOOD SOURCE – LOCATION</b></p> <p>FF_WHERE_1...4<br/>FF_WHERE_DK</p>   | <p>[UNIVERSE: Respondents who indicated they purchased any meals from a "Fast food / quick service / coffee shop".]<br/><b>Where were any of the fast food or quick service restaurant(s) that you ate at in the last 7 days located?</b> (Select all that apply)<br/>Near your home</p>  | <p>[UNIVERSO: Los informantes que indicaron que compraron algún alimento en un "Establecimiento de comida rápida / servicio rápido / cafetería".]<br/><b>El(los) restaurante(s) de comida rápida o de servicio rápido donde estuvo en los últimos 7 días se localizaba(n) .....</b><br/>(Seleccione todas las opciones que apliquen)</p>   |















|  |   |  |
|--|---|--|
| <p>FF_WHERE_R</p>  | <p>Near your work or school<br/>On your way to or from work or school<br/>Other location<br/>Don't know<br/>Refuse to answer</p>  | <p>Cerca de su casa<br/>Cerca de su trabajo o escuela<br/>De camino hacia o desde su trabajo o escuela<br/>Otro lugar<br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>FOOD SOURCE – FAST FOOD FREQUENCY</b></p> <p>FF_1... 10<br/>FF_10_OTEXT<br/>FF_DK<br/>FF_R</p>                         | <p>[UNIVERSE: Respondents who indicated they purchased any meals from a “Fast food / quick service / coffee shop”.]</p> <p><b>You told us you ate at a fast food or quick service restaurant(s) [#] time(s) in the last 7 days.</b></p> <p><b>We'd like to know what TYPES OF RESTAURANTS these were.</b></p> <p><b>HOW MANY TIMES did you eat ate at/from each of the following TYPES OF RESTAURANT(s) in the LAST 7 DAYS?</b></p> <p># of times<br/>[numeric] <b>Coffee shop/ Café/ Bakery</b> (Dunkin' Donuts, Starbucks, etc.)<br/>[numeric] <b>Traditional “burger &amp; fries”</b> (McDonald's, Burger King, etc.)<br/>[numeric] <b>Sandwich/ sub</b> (Subway, Quizno's, etc.)<br/>[numeric] <b>Pizza</b><br/>[numeric] <b>Fried chicken</b> (KFC, Popeye's, etc.)<br/>[numeric] <b>Mexican</b> (Taco Bell, Chipotle, etc.)<br/>[numeric] <b>Asian/ International fast food</b> (Indian, Chinese, Shawarma, etc.)<br/>[numeric] <b>Ice cream/ frozen yogurt</b> (Marble Slab, Yogen Fruz, etc.)<br/>[numeric] <b>Fresh food/ Smoothie bar</b> (Freshii, Booster Juice, etc.)<br/>[numeric] <b>Some other kind of place → Please specify:</b> [open-ended]<br/>Don't know<br/>Refuse to answer</p> | <p>[UNIVERSO: Los informantes que indicaron haber comprado algún alimento en un “Establecimiento de comida rápida / de servicio rápido / cafetería”.]</p> <p><b>Usted nos dijo que comió en restaurante(s) de comida rápida o servicio rápido [#] vez o veces en los últimos 7 días.</b></p> <p><b>Nos gustaría saber qué TIPO DE RESTAURANTES fueron.</b></p> <p><b>¿CUÁNTAS VECES comió usted alimentos en cada uno de los siguientes TIPOS DE RESTAURANTES en los ÚLTIMOS 7 DÍAS?</b></p> <p># de veces<br/>[numeric] <b>Café/Panadería</b> (Starbucks, El Globo, Dunkin Donuts, etc)<br/>[numeric] <b>Restaurante de « Hamburguesas y papas fritas »</b> (McDonald's, Burger King, etc.)<br/>[numeric] <b>Sandwich</b> (Subway, etc.)<br/>[numeric] <b>Pizza</b><br/>[numeric] <b>Pollo frito</b> (KFC, etc.)<br/>[numeric] <b>Comida mexicana</b> (Taco Bell, Chipotle, etc.)<br/>[numeric] <b>Comida rápida</b> internacional u oriental (China, India, Shawarma, etc.)<br/>[numeric] <b>Helado o yogurt helado</b> (Nutrisa)<br/>[numeric] <b>Vendedor de jugos naturales /Smoothies,</b><br/>[numeric] <b>Otro tipo de lugar → Favor de especificar:</b> [respuesta abierta]<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>FOOD SOURCE – PURCHASE LOCATIONS FOR FOOD PREPARED AT HOME</b></p> <p>HS_1...10<br/>HS_DK<br/>HS_R<br/>HS_10_OTEXT</p> | <p>[UNIVERSE: Respondents who indicated they prepared any meals “Home: by you”, or “Home: by someone else”].</p> <p><b>Please think about the food <u>PREPARED AT HOME</u> (by you or someone else) <u>IN THE LAST 7 DAYS</u>. Where was it purchased? Select all that apply.</b></p> <p>Grocery store or supercenter<br/>Warehouse club (e.g., Costco)<br/>Convenience / corner store<br/>Drugstore / pharmacy<br/>Farmer's market, produce stand, or CSA<br/>Ethnic or specialty food store/market</p>  | <p>[UNIVERSO: Los informantes que indicaron que prepararon algún alimento “En casa, preparado por usted” o “En casa, preparado por alguien más”.]</p> <p><b>Por favor piense en los alimentos <u>PREPARADOS EN CASA</u> (por usted o alguien más) <u>EN LOS ÚLTIMOS 7 DÍAS</u>. ¿Dónde compró los ingredientes? Seleccione todas las opciones que apliquen.</b></p> <p>Supermercado (Walmart, Comercial Mexicana)<br/>Club o almacén (i.e. Costco, Sams Club)<br/>Tienda de abarrotes / tiendita de la esquina<br/>Farmacia<br/>Mercado sobre ruedas, tianguis</p>   |

|   |  |  |
|---|--|--|
|   | <p>Bulk food store<br/>                 Grocery delivery<br/>                 Food bank<br/>                 Some other place → Please specify: <i>[open-ended]</i><br/>                 Don't know<br/>                 Refuse to answer</p>  | <p>Tienda de especialidades o comida étnica<br/>                 Tienda de alimentos a granel<br/>                 Entrega a domicilio<br/>                 "Food bank" o un lugar donde se distribuyen alimentos gratuitos<br/>                 Otro tipo de lugar → Favor de especificar: <i>[respuesta abierta]</i><br/>                 No sabe<br/>                 Se negó a responder</p>   |
| <p><b>FOOD SOURCE –<br/>                 PURCHASE LOCATIONS<br/>                 FOR FOOD PREPARED AT<br/>                 HOME BY PERCENTAGE</b></p> <p><i>HSP_1...10<br/>                 HSP_DK<br/>                 HSP_R</i></p> | <p>[UNIVERSE: Respondents who indicated they prepared any meals "Home: by you", or "Home: by someone else"].</p> <p><b>Still thinking about the food PREPARED AT HOME IN THE LAST 7 DAYS, how much was purchased from each place?</b></p> <p>Enter a percentage for each source. Sources must add to 100%.</p> <p>[PROGRAMMER NOTE: Only show locations selected in previous question.]</p> <p><i>[numeric]</i> Grocery store or supercenter<br/> <i>[numeric]</i> Warehouse club (e.g., Costco)<br/> <i>[numeric]</i> Convenience / corner store<br/> <i>[numeric]</i> Drugstore / pharmacy<br/> <i>[numeric]</i> Farmer's market, produce stand, or CSA<br/> <i>[numeric]</i> Ethnic or specialty food store/market<br/> <i>[numeric]</i> Grocery delivery<br/> <i>[numeric]</i> Bulk food store<br/> <i>[numeric]</i> Food bank<br/> <i>[numeric]</i> [PROGRAMMER: Insert "Some other place" text from previous question]</p> <p><i>[fill with total]</i> out of 100% Total</p> <p>Don't know<br/>                 Refuse to answer</p> | <p>[UNIVERSO: Los informantes que indicaron que prepararon algún alimento "En casa, preparado por usted" o "En casa, preparado por alguien más".]</p> <p><b>Pensando todavía en los alimentos PREPARADOS EN CASA EN LOS ÚLTIMOS 7 DÍAS, ¿cuántos alimentos se compraron en cada uno de los siguientes lugares?</b></p> <p>Anote el porcentaje para cada una de las fuentes. El total debe sumar 100%.</p> <p>[PROGRAMMER NOTE: Only show locations selected in previous question.]</p> <p><i>[numeric]</i> Supermercado (Walmart, Comercial Mexicana)<br/> <i>[numeric]</i> Club o almacén (i.e. Costco, Sams Club)<br/> <i>[numeric]</i> Tienda de abarrotes / tiendita de la esquina<br/> <i>[numeric]</i> Farmacia<br/> <i>[numeric]</i> Mercado sobre ruedas, tianguis<br/> <i>[numeric]</i> Tienda de especialidades o comida étnica<br/> <i>[numeric]</i> Tienda de alimentos a granel<br/> <i>[numeric]</i> Entrega a domicilio<br/> <i>[numeric]</i> "Food bank" o un lugar donde se distribuyen alimentos gratuitos<br/> <i>[numeric]</i> [PROGRAMMER: Insert "Some other place" text from previous question]</p> <p><i>[anote el total]</i> de 100% en total</p> <p>No sabe<br/>                 Se negó a responder</p> |
| <p><b>READY-TO-EAT MEALS</b></p> <p><i>READY<br/>                 READY_DKR</i></p>   | <p><b>Thinking about the meals prepared at home in the last 7 days, what percentage was "ready-to-eat" or "box food" (e.g., microwave, frozen or packaged meals)?</b></p> <p>This includes foods like frozen pizza, chicken fingers, Kraft dinner, minute rice, canned soup, baking mixes, instant oatmeal, toaster waffles, etc.</p> <p><i>[slider with anchors; 5% increments]</i></p> <p>0%<br/>                 100%</p>   | <p><b>Pensando en los alimentos preparados en casa en los últimos 7 días, ¿qué porcentaje estaban "listos para comer" o eran "alimentos en caja" (e.g., para microondas, congelados o comidas empacadas)?</b></p> <p>Esto incluye alimentos como pizza congelada, nuggets de pollo, arroz instantáneo, sopa enlatada, avena instantánea, etc.</p> <p><i>[barra de desplazamiento con anclas; incrementos del 5%]</i></p> <p>0%<br/>                 100%</p>   |

|                                |                                |
|--------------------------------|--------------------------------|
| Don't know<br>Refuse to answer | No sabe<br>Se negó a responder |
|--------------------------------|--------------------------------|

## BEVERAGE INTAKE






| DOMAIN   | ENGLISH   | SPANISH TRANSLATION   |
|--|---|---|
| SOURCE<br><b>BEVERAGE FREQUENCY QUESTIONNAIRE (BFQ) – NUMBER OF DRINKS BY TYPE</b><br>ADAPTED FROM SEVERAL OTHER PAPER FFQS FOR BEVERAGES.<br><br>BFQ_#_N<br>BFQ_NONE<br>BFQ_DK_N<br>BFQ_R_N | <p>During the PAST 7 DAYS, how many drinks did you have for each of the following beverages?<br/>           For each category, fill in the <u>number of drinks</u> you had in the boxes below. We'll ask about the sizes later.</p> <p><b># OF DRINKS</b></p> <p>[numeric] <b>Regular soda or pop</b> (Coke, Pepsi, 7-up, Sprite, root beer, etc) <i>*Not including diet pop</i></p> <p>[numeric] <b>Diet soda or pop</b> (Diet Pepsi, Coke Zero, etc.)</p> <p>[numeric] <b>100% fruit or vegetable juice</b> (orange juice, apple juice, etc.)</p> <p>[numeric] <b>Sweetened fruit drinks</b> (lemonade, iced tea, SunnyD, fruit punch/cocktail, etc.)</p> <p>[numeric] <b>Low-/no-calorie fruit drinks</b> (diet lemonade, unsweetened iced tea, etc.)</p> <p>[numeric] <b>Regular flavoured waters or vitamin waters <u>with</u> calories</b></p> <p>[numeric] <b>Low-/no-calorie flavoured waters or vitamin waters</b> (Crystal Light, Mio, etc.)</p> <p>[numeric] <b>Regular sports drinks</b> (Gatorade, Powerade, etc.)</p> <p>[numeric] <b>Low-/no-calorie sports drinks</b> (G2, Powerade Zero, etc.)</p> <p>[numeric] <b>Regular energy drinks</b> (Red Bull, Rockstar, Monster, etc.)</p> <p>[numeric] <b>Low-/no-calorie energy drinks</b> (Red Bull Sugarfree, etc.)</p> <p>[numeric] <b>White milk</b> or unsweetened milk alternatives (soy, almond, etc.) as a beverage <i>*NOT including milk consumed in cereal, etc.</i></p> <p>[numeric] <b>Chocolate milk</b> (incl. hot chocolate), sweetened milk or other flavoured milk</p> <p>[numeric] <b>Coffee or tea, <u>with</u> cream or sugar</b></p> <p>[numeric] <b>Coffee or tea, <u>no cream or sugar</u></b>, with or without artificial sweetener</p> <p>[numeric] <b>Speciality coffees</b> (lattes, mochas, frappucinos, macchiatos, etc.)</p> <p>[numeric] <b>Sweetened smoothies, protein shakes, or drinkable yogurt</b></p> <p>[numeric] <b>Unsweetened smoothies, protein shakes, or drinkable yogurt</b></p> <p>[numeric] <b>Beer, cider, coolers</b></p> <p>[numeric] <b>Wine</b> (red or white)</p> <p>[numeric] <b>Hard alcohol <u>with mix</u>, cocktails that have calories</b> (rum &amp; coke, gin &amp; tonic, margarita, caesar, etc.)</p> | <p>En los ÚLTIMOS 7 DÍAS, ¿cuántas bebidas tomó de cada uno de los siguientes tipos?<br/>           Para cada categoría, escriba el <u>número de bebidas</u> que consumió dentro de las casillas presentadas a continuación. Más adelante le haremos preguntas sobre el tamaño de las mismas.</p> <p><b># DE BEBIDAS</b></p> <p>[numeric] <b>Bebida refrescos/gaseosas normal</b> (Coca-cola, Pepsi, 7-Up, Sprite, cerveza de raíz, etc.) <i>*No incluya bebidas refrescos/gaseosas de dieta</i></p> <p>[numeric] <b>Bebidas refrescos/gaseosas de dieta</b> (Pepsi de dieta, Coca-cola Zero, etc.)</p> <p>[numeric] <b>Jugo 100% de fruta o de verduras</b> (jugo de naranja, de manzana, etc.)</p> <p>[numeric] <b>Bebidas de fruta endulzadas</b> (limonada, té helado, SunnyD, ponche/coctel de frutas, etc.)</p> <p>[numeric] <b>Bebidas de fruta sin/bajas en calorías</b> (limonada de dieta, té helado sin azúcar, etc.)</p> <p>[numeric] <b>Aguas de sabor o vitaminadas normales <u>con</u> calorías</b></p> <p>[numeric] <b>Aguas de sabor o vitaminadas sin/bajas en calorías</b> (Crystal Light, Mio, etc.)</p> <p>[numeric] <b>Bebidas deportivas</b> (Gatorade, Powerade, etc.)</p> <p>[numeric] <b>Bebidas deportivas sin/bajas en calorías</b> (G2, Powerade Zero, etc.)</p> <p>[numeric] <b>Bebidas energéticas normales</b> (Red Bull, Rockstar, Monster, etc.)</p> <p>[numeric] <b>Bebidas energéticas sin/bajas en calorías</b> (Red Bull Sugarfree, etc.)</p> <p>[numeric] <b>Leche blanca</b> o alternativas a la leche sin endulzar (de soya, almendra, arroz, etc.), consumidas como bebida <i>*NO incluya leche consumida con cereal, etc.</i></p> <p>[numeric] <b>Leche con chocolate</b> (incluido chocolate caliente), leche endulzada o de otro sabor</p> <p>[numeric] <b>Café o té, <u>con</u> crema o azúcar</b></p> <p>[numeric] <b>Café o té, <u>sin crema ni azúcar</u></b>, con o sin endulzante artificial</p> <p>[numeric] <b>Cafés de especialidad</b> (lattes, mochas, frappucinos, macchiatos, etc.)</p> |

|  |  |   |
|--|--|---|
|  | <p>[numeric] <b>Hard alcohol <u>with no mix</u> or non-caloric mix</b> (shots, whiskey on the rocks, vodka &amp; soda, rum &amp; diet, etc.)</p> <p>None of the above<br/>Don't know<br/>Refuse to answer</p>  | <p>[numeric] Smoothies, licuados de proteína o yogurt para beber con azúcar añadida</p> <p>[numeric] Smoothies, licuados de proteína o yogurt para beber sin azúcar añadida</p> <p>[numeric] Cerveza, sidra, bebidas a base de vino (coolers)</p> <p>[numeric] Vino (tinto o blanco)</p> <p>[numeric] Bebidas alcohólicas mezcladas, cocteles con calorías (ron con Coca-cola, gin &amp; tonic, coctel Margarita, coctel Caesar, etc.)</p> <p>[numeric] Bebidas alcohólicas no mezcladas o con mezclas no calóricas (shots, whiskey en las rocas, vodka con soda, ron con Coca-cola dietetica, etc.)</p> <p>Ninguna de las anteriores<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>BFQ – USUAL SIZE</b><br/>ADAPTED FROM SEVERAL OTHER PAPER FFQS FOR BEVERAGES.</p> <p>BFQ_#_SIZE_USA<br/>BFQ_#_SIZE_DK_USA<br/>BFQ_#_SIZE_R_USA</p> | <p>[PROGRAMMER NOTE: For each category that there was at least one drink consumed, ask size question - images should only be shown for beverage categories selected above]</p> <p><b>For each type of drink, what size did you <u>USUALLY</u> have?</b><br/>If you had different sizes, select the picture that is closest to the average size.</p> <p>Regular soda or pop (Coke, Pepsi, 7-Up, Sprite, root beer, etc.) <i>*NOT including diet pop</i></p> <div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <p><b>Less</b></p>  <p>Less than 8 fl oz</p> </div> <div style="text-align: center;">  <p>1 cup (8 fl oz)</p> </div> <div style="text-align: center;">  <p>Can (12 fl oz)</p> </div> <div style="text-align: center;">  <p>Fountain cup (16 fl oz)</p> </div> <div style="text-align: center;">  <p>Bottle (20 fl oz)</p> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">  <p>Fountain cup (20 fl oz)</p> </div> <div style="text-align: center;">  <p>Fountain cup (24 fl oz)</p> </div> <div style="text-align: center;"> <p><b>More</b></p> <p>More than 24 fl oz</p> </div> </div> | <p>[PROGRAMMER NOTE: For each category that there was at least one drink consumed, ask size question - images should only be shown for beverage categories selected above]</p> <p><b>Para cada tipo de bebida, especifique qué tamaño toma USUALMENTE.</b><br/>Si consumió distintos tamaños, seleccione la imagen más cercana al tamaño promedio de sus bebidas.</p> <p>Bebida refrescos/gaseosas normal (Coca-cola, Pepsi, 7-Up, Sprite, cerveza de raíz, etc.) <i>*No incluya bebidas refrescos/gaseosas de dieta</i></p> <div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <p><b>Menos</b></p>  <p>Menos de 8 fl oz</p> </div> <div style="text-align: center;">  <p>1 vaso (8 fl oz)</p> </div> <div style="text-align: center;">  <p>Lata (12 fl oz)</p> </div> <div style="text-align: center;">  <p>Vaso de fuente de sodas (16 fl oz)</p> </div> <div style="text-align: center;">  <p>Botella (20 fl oz)</p> </div> </div> <div style="display: flex; justify-content: space-around; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">  <p>Vaso de fuente de sodas (20 fl oz)</p> </div> <div style="text-align: center;">  <p>Vaso de fuente de sodas (24 fl oz)</p> </div> <div style="text-align: center;"> <p><b>Más</b></p> <p>Más de 24 fl oz</p> </div> </div> |


Diet soda or pop (Diet Pepsi, Coke Zero, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | 1 cup (8 fl oz)   | Can (12 fl oz)  | Fountain cup (16 fl oz)   | Bottle (20 fl oz)  |
|  |  | <b>More</b>   |   |  |
| Fountain cup (20 fl oz)   | Fountain cup (24 fl oz)   | More than 24 fl oz  |   |  |

100% fruit or vegetable juices (orange juice, apple juice, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | 1 cup (8 fl oz)   | Juicebox (8 fl oz)  | Can (12 fl oz)  | Bottle (12 fl oz)  |
|  | <b>More</b>   |   |   |  |
| Large bottle (16 fl oz)   | More than 16 fl oz  |   |   |  |

Sweetened fruit drinks (lemonade, iced tea, SunnyD, fruit punch/cocktail, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | 1 cup (8 fl oz)   | Juicebox (8 fl oz)  | Can (12 fl oz)  | Bottle (16 fl oz)  |
|  |  | <b>More</b>   |   |  |
| Large bottle (20 fl oz)   | Tall can (24 fl oz)   | More than 24 fl oz  |   |  |

Bebidas refrescos/gaseosas de dieta (Pepsi de dieta, Coca-cola Zero, etc.)

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | 1 vaso (8 fl oz)  | Lata (12 fl oz)   | Vaso de fuente de sodas (16 fl oz)  | Botella (20 fl oz)  |
|  |  | <b>Más</b>  |   |   |
| Vaso de fuente de sodas (20 fl oz)  | Vaso de fuente de sodas (24 fl oz)  | Más de 24 fl oz   |   |   |

Jugo 100% de fruta o de verduras (jugo de naranja, de manzana, etc.)

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | 1 vaso (8 fl oz)  | Cartón de jugo (8 fl oz)  | Lata (12 fl oz)   | Botella (12 fl oz)  |
|  | <b>Más</b>  |   |   |   |
| Botella grande (16 fl oz)   | Más de 16 fl oz   |   |   |   |

Bebidas de fruta endulzadas (limonada, té helado, SunnyD, ponche/coctel de frutas, etc.)

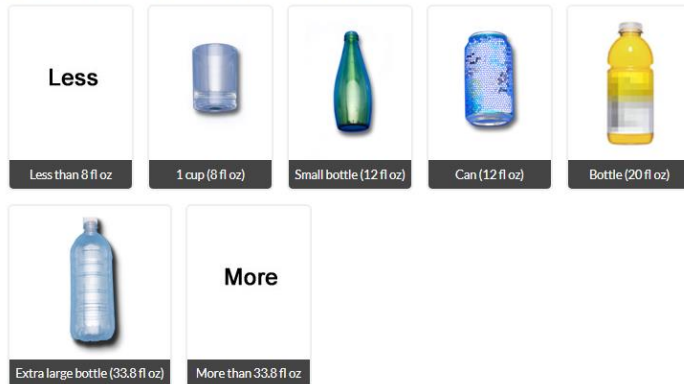
|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | 1 vaso (8 fl oz)  | Cartón de jugo (8 fl oz)  | Lata (12 fl oz)   | Botella (12 fl oz)  |
|  |  | <b>Más</b>  |   |   |
| Botella grande (16 fl oz)   | Lata grande (24 fl oz)  | Más de 24 fl oz   |   |   |



Low-/no-calorie fruit drinks (diet lemonade, unsweetened iced tea, etc.)



Regular flavoured waters or vitamin waters with calories



Programming error: Instead of “Botella (12 fl oz)” and “Botella grande (16 fl oz)”, the options should have been “Botella (16 fl oz)” and “Botella grande (20 fl oz)”.

Bebidas de fruta sin/bajas en calorías (limonada de dieta, té helado sin azúcar, etc.)








Programming error: Instead of “Botella (12 fl oz)” and “Botella grande (16 fl oz)”, the options should have been “Botella (16 fl oz)” and “Botella grande (20 fl oz)”.

Aguas de sabor o vitaminadas con calorías



Programming error: Instead of “Botella pequeña (8 fl oz)”, the option should have been “Botella pequeña (12 fl oz)”.

Low-/no-calorie flavoured waters or vitamin waters (Crystal Light, Mio, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | 1 cup (8 fl oz)   | Small bottle (12 fl oz)   | Can (12 fl oz)  | Bottle (20 fl oz)  |
|  | <b>More</b>   |   |   |  |
| Extra large bottle (33.8 fl oz)   | More than 33.8 fl oz  |   |   |  |


Regular sports drinks (Gatorade, Powerade, etc.)

|                   |   |   |   |                    |
|-------------------|---|---|---|--------------------|
| <b>Less</b>       |  |  |  | <b>More</b>        |
| Less than 8 fl oz | 1 cup (8 fl oz)   | Bottle (20 fl oz)   | XL Bottle (32 fl oz)  | More than 32 fl oz |

Low-/no-calorie sports drinks (G2, Powerade Zero, etc.)

|                   |  |  |  |                    |
|-------------------|--|--|--|--------------------|
| <b>Less</b>       |  |  |  | <b>More</b>        |
| Less than 8 fl oz | 1 cup (8 fl oz)  | Bottle (20 fl oz)  | XL Bottle (32 fl oz)   | More than 32 fl oz |

Aguas de sabor o vitaminadas sin/bajas en calorías (Crystal Light, Mio, etc.)

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | 1 vaso (8 fl oz)  | Botella pequeña (8 fl oz)   | Lata (12 fl oz)   | Botella (20 fl oz)  |
|  | <b>Más</b>  |   |   |   |
| Botella extra grande (33.8 fl oz)   | Más de 33.8 fl oz   |   |   |   |

Programming error: Instead of “Botella pequeña (8 fl oz)”, the option should have been “Botella pequeña (12 fl oz)”.






Bebidas deportivas (Gatorade, Powerade, etc.)

|                  |   |   |   |                 |
|------------------|---|---|---|-----------------|
| <b>Menos</b>     |  |  |  | <b>Más</b>      |
| Menos de 8 fl oz | 1 vaso (8 fl oz)  | Botella (20 fl oz)  | Botella extra grande (32 fl oz)   | Más de 32 fl oz |






Bebidas deportivas sin/bajas en calorías (G2, Powerade Zero, etc.)

|                  |  |  |  |                 |
|------------------|--|--|--|-----------------|
| <b>Menos</b>     |  |  |  | <b>Más</b>      |
| Menos de 8 fl oz | 1 vaso (8 fl oz)   | Botella (20 fl oz)   | Botella extra grande (32 fl oz)  | Más de 32 fl oz |





Regular energy drinks (Rockstar, Red Bull, Monster, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | Small can (8 fl oz)   | Can (12 fl oz)  | Tall can (16 fl oz)   | Bottle (20 fl oz)  |
|  | <b>More</b>   |   |   |  |
| XL Can (24 fl oz)   | More than 24 fl oz  |   |   |  |



Low-/no-calorie energy drinks (Red Bull Sugarfree, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | Small can (8 fl oz)   | Can (12 fl oz)  | Tall can (16 fl oz)   | Bottle (20 fl oz)  |
|  | <b>More</b>   |   |   |  |
| XL Can (24 fl oz)   | More than 24 fl oz  |   |   |  |


White milk or unsweetened milk alternative (soy, almond, etc.), as a beverage \*NOT including milk consumed in cereal, etc.

|                    |   |   |   |   |
|--------------------|---|---|---|---|
| <b>Less</b>        |  |  |  |  |
| Less than 8 fl oz  | 1 cup (8 fl oz)   | 1 box (8 fl oz)   | Small carton (8 fl oz)  | 1 quart (32 fl oz)  |
| <b>More</b>        |   |   |   |   |
| More than 32 fl oz |   |   |   |   |





Bebidas energéticas normales (Rockstar, Red Bull, Monster, etc.)

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | Lata pequeña (8 fl oz)  | Lata (12 fl oz)   | Lata grande (16 fl oz)  | Botella (20 fl oz)  |
|  | <b>Más</b>  |   |   |   |
| Lata extra grande (24 fl oz)  | Más de 24 fl oz   |   |   |   |







Bebidas energéticas sin/bajas en calorías (Red Bull Sugarfree, etc.)

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | Lata pequeña (8 fl oz)  | Lata (12 fl oz)   | Lata grande (16 fl oz)  | Botella (20 fl oz)  |
|  | <b>Más</b>  |   |   |   |
| Lata extra grande (24 fl oz)  | Más de 24 fl oz   |   |   |   |






Leche blanca o alternativa a la leche sin endulzar (de soya, almendra, arroz, etc.), consumida como bebida \*NO incluye leche consumida con cereal, etc.

|                  |   |   |   |   |
|------------------|---|---|---|---|
| <b>Menos</b>     |  |  |  |  |
| Menos de 8 fl oz | 1 vaso (8 fl oz)  | 1 cartón (8 fl oz)  | 1 cartón pequeña (8 fl oz)  | 1 cuarto (32 fl oz)   |
| <b>Más</b>       |   |   |   |   |
| Más de 32 fl oz  |   |   |   |   |






Chocolate milk (incl. hot chocolate), sweetened milk alternative, or other flavoured milk

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | 1 cup (8 fl oz)   | 1 box (8 fl oz)   | Small carton (8 fl oz)  | Bottle (11 fl oz)  |
|  |  | <b>More</b>   |   |  |
| Large bottle (14 fl oz)   | 1 quart (32 fl oz)  | More than 32 fl oz  |   |  |

Coffee or tea, with cream or sugar

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | Small/short (8 fl oz)   | 1.5 cups (12 fl oz)   | Medium (12 fl oz)   | Large (16 fl oz)  |
|  | <b>More</b>   |   |   |   |
| Extra large (20 fl oz)  | More than 20 fl oz  |   |   |   |





Coffee or tea, no cream or sugar, with or without artificial sweetener

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | Small/short (8 fl oz)   | 1.5 cups (12 fl oz)   | Medium (12 fl oz)   | Large (16 fl oz)  |
|  | <b>More</b>   |   |   |   |
| Extra large (20 fl oz)  | More than 20 fl oz  |   |   |   |






Leche con chocolate (incluido chocolate caliente), alternativa a la leche con azúcar o leche de otro sabor

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | 1 vaso (8 fl oz)  | Cartón (8 fl oz)  | Cartón pequeño (8 fl oz)  | Botella (11 fl oz)  |
|  |  | <b>Más</b>  |   |   |
| Botella grande (14 fl oz)   | 1 cuarto (32 fl oz)   | Más de 32 fl oz   |   |   |







Café o té normal, con crema o azúcar

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | Vaso pequeño (8 fl oz)  | Taza y media (12 fl oz)   | Vaso mediano (12 fl oz)   | Vaso grande (16 fl oz)  |
|  | <b>Más</b>  |   |   |   |
| Vaso extra grade (20 fl oz)   | Más de 20 fl oz   |   |   |   |







Café o té normal, sin crema ni azúcar, con o sin endulzante artificial

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | Vaso pequeño (8 fl oz)  | Taza y media (12 fl oz)   | Vaso mediano (12 fl oz)   | Vaso grande (16 fl oz)  |
|  | <b>Más</b>  |   |   |   |
| Vaso extra grade (20 fl oz)   | Más de 20 fl oz   |   |   |   |


Specialty coffees (lattes, mochas, frappuccinos, macchiatos, etc.)

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 8 fl oz   | Small/short (8 fl oz)   | 1.5 cups (12 fl oz)   | Medium (12 fl oz)   | Bottle (13.7 fl oz)  |
|  |  | <b>More</b>   |   |  |
| Large (16 fl oz)  | Extra large (20 fl oz)  | More than 20 fl oz  |   |  |

Sweetened smoothies, protein shakes, or drinkable yogurt

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 3 fl oz   | Bottle (3 fl oz)  | Bottle (6.7 fl oz)  | 8 fl oz   | 12 fl oz   |
|  |  | <b>More</b>   |   |  |
| 16 fl oz  | 24 fl oz  | More than 24 fl oz  |   |  |

Unsweetened smoothies, protein shakes, or drinkable yogurt

|   |   |   |   |  |
|---|---|---|---|--|
| <b>Less</b>   |  |  |  |  |
| Less than 3 fl oz   | Bottle (3 fl oz)  | Bottle (6.7 fl oz)  | 8 fl oz   | 12 fl oz   |
|  |  | <b>More</b>   |   |  |
| 16 fl oz  | 24 fl oz  | More than 24 fl oz  |   |  |

Cafés de especialidad (lattes, mochas, frappuccinos, macchiatos, etc.)

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 8 fl oz  | Vaso pequeño (8 fl oz)  | Taza y media (12 fl oz)   | Vaso mediano (12 fl oz)   | Botella (13.7 fl oz)  |
|  |  | <b>Más</b>  |   |   |
| Vaso grande (16 fl oz)  | Vaso extra grande (20 fl oz)  | Más de 20 fl oz   |   |   |

Smoothies, licuados de proteína o yogurt para beber con azúcar añadida

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 3 fl oz  | Botella pequeña (3 fl oz)   | Botella (6.7 fl oz)   | 8 fl oz   | 12 fl oz  |
|  |  | <b>Más</b>  |   |   |
| 16 fl oz  | 24 fl oz  | Más de 24 fl oz   |   |   |

Smoothies, licuados de proteína o yogurt para beber sin azúcar añadida

|   |   |   |   |   |
|---|---|---|---|---|
| <b>Menos</b>  |  |  |  |  |
| Menos de 3 fl oz  | Botella pequeña (3 fl oz)   | Botella (6.7 fl oz)   | 8 fl oz   | 12 fl oz  |
|  |  | <b>Más</b>  |   |   |
| 16 fl oz  | 24 fl oz  | Más de 24 fl oz   |   |   |

Beer, cider, coolers

**Less**

Less than 12 fl oz

Bottle (12 fl oz)

Can (12 fl oz)

Tall can (16 fl oz)

Pint (16 fl oz)

**More**

More than 16 fl oz

Wine (red or white)

**Less**

Less than 5 fl oz

Standard glass (5 fl oz)

Large glass (9 fl oz)

**More**

More than 9 fl oz

Hard alcohol with mix, cocktails that have calories  
(rum & coke, gin & tonic, margarita, caesar, etc.)

**Less**

Less than 8 fl oz

1 cup (8 fl oz)

Can (12 fl oz)

1.5 cups (12 fl oz)

2 cups (16 fl oz)

**More**

More than 16 fl oz

Cerveza, sidra, bebidas a base de vino (coolers)

**Menos**

Menos de 12 fl oz

Botella (12 fl oz)

Lata (12 fl oz)

Lata grande (16 fl oz)

1 pinta (16 fl oz)

**Más**

Más de 16 fl oz

Vino (tinto o blanco)

**Menos**

Menos de 5 oz

Copa estándar (5 oz)

Copa grande (9 oz)

**Más**

Más de 9 oz

Bebidas alcohólicas mezcladas, cocteles con calorías  
(ron con Coca-cola, gin & tonic, coctel Margarita, coctel Caesar, etc.)

**Menos**

Menos de 8 fl oz

1 vaso (8 fl oz)

Lata (12 fl oz)

Taza y media (12 fl oz)

2 tazas (16 fl oz)

**Más**

Más de 16 fl oz



| <p>Hard alcohol <u>with no mix</u> or non-caloric mix<br/>(shots, whiskey on the rocks, vodka &amp; soda, rum &amp; diet coke, etc.)</p>  | <p>Bebidas alcohólicas <u>no mezcladas</u>, o con mezclas no calóricas<br/>(shots, whiskey en las rocas, vodka y soda, ron con Coca-cola dietetica, etc.)</p>  |
|---|--|
| <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <br/> <b>Less</b><br/>                     Shot (1 fl oz)<br/>                     Less than 8 fl oz                 </div> <div style="text-align: center;"> <br/>                     1 cup (8 fl oz)                 </div> <div style="text-align: center;"> <br/>                     Can (12 fl oz)                 </div> <div style="text-align: center;"> <br/>                     1.5 cup (12 fl oz)                 </div> </div> | <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <br/> <b>Menos</b><br/>                     Shot (1 oz)<br/>                     Menos de 8 fl oz                 </div> <div style="text-align: center;"> <br/>                     1 vaso (8 fl oz)                 </div> <div style="text-align: center;"> <br/>                     Lata (12 fl oz)                 </div> <div style="text-align: center;"> <br/>                     Taza y media (12 fl oz)                 </div> </div> |
| <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <br/> <b>More</b><br/>                     2 cups (16 fl oz)<br/>                     More than 16 fl oz                 </div> </div>  | <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <br/> <b>Más</b><br/>                     2 tazas (16 fl oz)<br/>                     Más de 16 fl oz                 </div> </div>  |
| <p>Don't know [for each type]<br/>                     Refuse to answer [for each type]</p>   | <p>No sabe [para cada tipo de bebidas]<br/>                     Se negó a responder [para cada tipo de bebidas]</p>  |

## FOOD PREPARATION AND FOOD SKILLS

| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION  |
|---|--|--|
| <b>FOOD SHOPPING<br/>ROLE</b><br>USDA ERS EATING &<br>HEALTH MODULE<br><br><i>SHOP</i>  | <b>Do you do <u>most</u> of the food shopping in your household?</b><br>Yes<br>No<br>Share equally with other(s)<br>Don't know<br>Refuse to answer   | <b>¿Usted compra la <u>mayoría</u> de los alimentos de su hogar?</b><br>Sí<br>No<br>Comparte la tarea por igual con otra(s) persona(s)<br>No sabe<br>Se negó a responder   |
| <b>MEAL PREPARATION<br/>ROLE</b><br>USDA ERS EATING &<br>HEALTH MODULE<br><br><i>PREP</i>   | <b>Do you do <u>most</u> of the food <u>preparation</u> in your household?</b><br>Yes<br>No<br>Share equally with other(s)<br>Don't know<br>Refuse to answer   | <b>¿Usted <u>prepara</u> la mayoría de los alimentos de su hogar?</b><br>Sí<br>No<br>Comparte la tarea por igual con otra(s) persona(s)<br>No sabe<br>Se negó a responder  |
| <b>COOKING SKILLS –<br/>GENERAL</b><br><br><i>SKILL_OVERALL</i>   | <b>How would you rate your cooking skills?</b><br>Poor<br>Fair<br>Good<br>Very good<br>Excellent<br>Don't know<br>Refuse to answer   | <b>¿Cómo calificaría su habilidad para cocinar?</b><br>Deficiente<br>Aceptable<br>Buena<br>Muy buena<br>Excelente<br>No sabe<br>Se negó a responder  |
| <b>COOKING SKILLS –<br/>SPECIFIC</b><br>(HEAVILY ADAPTED<br>FROM CCHS)<br><br><i>SKILL_SALAD</i><br><i>SKILL_SOUP</i><br><i>SKILL_MEAT</i><br><i>SKILL_BAKE</i> | <b>Rate your skill level at making the following foods “from scratch” (i.e., from basic ingredients)?</b><br><br><b>Fresh salad</b><br><b>Soups, stews or curries</b><br><b>Cooking a piece of raw meat/chicken/fish, or a vegetarian option</b><br><b>Baking muffins or cake (not from a mix)</b><br>Poor<br>Fair<br>Good<br>Very good<br>Excellent<br>Don't know<br>Refuse to answer | <b>Evalúa tu habilidad para preparar estos alimentos desde cero (por ejemplo utilizando ingredientes básicos y sin procesar)</b><br><br><b>Ensalada fresca</b><br><b>Sopa, estofado o guisado</b><br><b>Cocinar un trozo de carne cruda/pollo/pescado, o una opción vegetariana</b><br><b>Hornear un pastel o panqué (que no sea una mezcla preparada)</b><br>Deficiente<br>Aceptable<br>Bueno<br>Muy bueno<br>Excelente<br>No sabe<br>Se negó a responder |



## FOOD SECURITY

| DOMAIN<br>SOURCE                                   | ENGLISH  | SPANISH TRANSLATION   |
|--|--|---|
| FOOD SECURITY –<br>INTRO<br>USDA HFSM              | These next questions are about the food eaten in your household in the last 12 months, since [current month] of last year and whether you were able to afford the food you need.   | Las siguientes preguntas se refieren a los alimentos consumidos en su hogar en los últimos 12 meses, desde [mes actual] del año pasado, y si pudo costear los alimentos necesarios.   |
| FOOD SECURITY –<br>HH1<br>USDA HFSM<br><br>SECURE1 | Which of these statements best describes the food eaten in your household in the last 12 months:<br>You and other household members always had enough of the kinds of foods you wanted to eat.<br>You and other household members had enough to eat, but not always the kinds of food you wanted.<br>Sometimes you and other household members did not have enough to eat.<br>Often you and other household members didn't have enough to eat.<br>Don't know<br>Refuse to answer | ¿Cuál de los siguientes enunciados describe mejor los alimentos que se han consumido en su hogar en los últimos 12 meses?<br>Cantidad suficiente del tipo de alimentos que (me/nos) gusta comer<br>Cantidad suficiente, aunque no siempre <u>del tipo</u> de alimentos que (me/nos) gusta comer<br>Algunas veces <u>no hay suficientes</u> alimentos para comer<br><u>Frecuentemente</u> no hay suficientes alimentos para comer<br>No sabe<br>Se negó a responder  |
| FOOD SECURITY –<br>HH2<br>USDA HFSM<br><br>SECURE2 | Now you will see several statements that may be used to describe the food situation for a household. Please indicate if the statement was often true, sometimes true, or never true for you and other household members <u>IN THE PAST 12 MONTHS</u> .<br><br>You and other household members worried that food would run out before you got money to buy more.<br>Often true<br>Sometimes true<br>Never true<br>Don't know<br>Refuse to answer                                  | Ahora leerá varios enunciados que se podrían usar para describir la situación alimentaria en un hogar. Favor de indicar si el enunciado frecuentemente fue verdad, algunas veces fue verdad o nunca fue verdad para usted u otros miembros de su hogar <u>EN LOS ÚLTIMOS 12 MESES</u> .<br><br>Usted y otros miembros de su hogar se preocuparon de que la comida se terminara antes de tener dinero para comprar más.<br>Frecuentemente fue verdad<br>Algunas veces fue verdad<br>Nunca fue verdad<br>No sabe<br>Se negó a responder |
| FOOD SECURITY –<br>HH3<br>USDA HFSM<br><br>SECURE3 | The food that you and other household members bought just didn't last, and there wasn't any money to get more.<br>Often true<br>Sometimes true<br>Never true<br>Don't know<br>Refuse to answer   | Los alimentos que usted y otros miembros de su hogar compraron simplemente no alcanzaron y no hubo dinero para comprar más.<br>Frecuentemente fue verdad<br>Algunas veces fue verdad<br>Nunca fue verdad<br>No sabe<br>Se negó a responder  |

|   |  |   |
|---|--|---|
| <b>FOOD SECURITY – HH4</b><br>USDA HFSM<br><br><i>SECURE4</i>   | <b>You and other household members couldn't afford to eat balanced meals.</b><br>Often true<br>Sometimes true<br>Never true<br>Don't know<br>Refuse to answer  | <b>Usted y otros miembros de su hogar no tuvieron dinero para comidas balanceadas.</b><br>Frecuentemente fue verdad<br>Algunas veces fue verdad<br>Nunca fue verdad<br>No sabe<br>Se negó a responder   |
| <b>FIRST LEVEL SCREENING</b>                                    | If affirmative response (i.e., "often true" or "sometimes true") to one or more of Questions HH2-HH4, OR, response [3] or [4] to question HH1 (if administered), then continue to Adult Stage 2; otherwise, if children under age 18 are present in the household, skip to Child Stage 1, otherwise skip to End of Food Security Module.<br><br><i>A programming error was present that prevented a substantial number of participants from progressing to stage 2 when they should have. In addition, participants with children under age 18 who were not directed to Adult Stage 2 were incorrectly skipped to the end of the Food Security Module instead of to Child Stage 1.</i> | Si la respuesta fue afirmativa (i.e., "Frecuentemente fue verdad " o " Algunas veces fue verdad ") a una o más de las Preguntas HH2-HH4, O Si la respuesta [3] ó [4] a la pregunta HH1 (de haberse preguntado) fue afirmativa, pase a Adulto Etapa 2 (Adult Stage 2); de lo contrario, si en el hogar se encuentran presentes menores de 18 años, pase a Menor Etapa 1 (Child Stage 1) o pase al Final del Módulo de Seguridad Alimentaria.<br><br><i>A programming error was present that prevented a substantial number of participants from progressing to stage 2 when they should have. In addition, participants with children under age 18 who were not directed to Adult Stage 2 were incorrectly skipped to the end of the Food Security Module instead of to Child Stage 1.</i> |
| <b>FOOD SECURITY – AD1</b><br>USDA HFSM<br><br><i>SECURE5</i>   | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>In the last 12 months, since last (name of current month), did 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?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer   | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>En los últimos 12 meses, desde el pasado mes de (nombre del mes actual), ¿usted u otros adultos de su hogar disminuyeron alguna vez el tamaño de sus comidas o dejaron de comer alguna porque no había suficiente dinero para comprar alimentos?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder   |
| <b>FOOD SECURITY – AD1a</b><br>USDA HFSM<br><br><i>SECURE5A</i> | [PROGRAMMER NOTE: If "Yes" for Food Security – AD1. Only ask if passed first level screening]<br><b>How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?</b><br>Almost every month<br>Some months but not every month<br>Only 1 or 2 months<br>Don't know<br>Refuse to answer  | [PROGRAMMER NOTE: If "Yes" for Food Security – AD1. Only ask if passed first level screening]<br><b>¿Cuántas veces le sucedió? ¿Casi todos los meses, algunos meses pero no todos, o sólo un mes o dos?</b><br>Casi todos los meses<br>Algunos meses pero no todos<br>Sólo un mes o dos<br>No sabe<br>Se negó a responder   |
| <b>FOOD SECURITY – AD2</b><br>USDA HFSM<br><br><i>SECURE61</i>  | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer  | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>En los últimos 12 meses, ¿comió usted menos de lo que creyó que debía comer porque no había suficiente dinero para comprar alimentos?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder  |

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| <b>FOOD SECURITY – AD3</b><br>USDA HFSM<br><br><i>SECURE62</i>  | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>In the last 12 months, were you every hungry but didn't eat because there wasn't enough money for food?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer  | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>En los últimos 12 meses, ¿tuvo hambre alguna vez pero no comió porque no había suficiente dinero para comprar alimentos?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder  |
| <b>FOOD SECURITY – AD4</b><br>USDA HFSM<br><br><i>SECURE63</i>  | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>In the last 12 months, did you lose weight because there wasn't enough money for food?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer   | [PROGRAMMER NOTE: Ask if passed first level screening]<br><b>En los últimos 12 meses, ¿bajó de peso porque no había suficiente dinero para comprar alimentos?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder  |
| <b>SECOND LEVEL SCREENING</b>                                   | If affirmative response to one or more of questions AD1 through AD4, then continue to Adult Stage 3; otherwise, if children under age 18 are present in the household, skip to Child Stage 1, otherwise skip to End of Food Security Module.<br><br><b>Participants with children under age 18 who were not directed to Adult Stage 3 were incorrectly skipped to the end of the Food Security Module instead of to Child Stage 1.</b> | Si la respuesta fue afirmativa a una o más preguntas AD1 a AD4, pase a Adulto Etapa 3 (Adult Stage 3); de lo contrario, si en el hogar se encuentran presentes menores de 18 años, pase a Menor Etapa 1 (Child Stage 1) o pase al Final del Módulo de Seguridad Alimentaria.<br><br><b>Participants with children under age 18 who were not directed to Adult Stage 3 were incorrectly skipped to the end of the Food Security Module instead of to Child Stage 1.</b> |
| <b>FOOD SECURITY – AD5</b><br>USDA HFSM<br><br><i>SECURE7</i>   | [PROGRAMMER NOTE: Ask if passed second level screening]<br><b>In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer   | [PROGRAMMER NOTE: Ask if passed second level screening]<br><b>En los últimos 12 meses, ¿usted u otros adultos de su hogar dejaron de comer alguna vez todo un día porque no había suficiente dinero para comprar alimentos?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder  |
| <b>FOOD SECURITY – AD5a</b><br>USDA HFSM<br><br><i>SECURE7A</i> | [PROGRAMMER NOTE: Ask if passed second level screening and if "Yes" to AD5]<br><b>How often did this happen?</b><br>Almost every month<br>Some months but not every month<br>Only 1 or 2 months<br>Don't know<br>Refuse to answer  | [PROGRAMMER NOTE: Ask if passed second level screening and if "Yes" to AD5]<br><b>¿Cuántas veces le sucedió? ¿Casi todos los meses, algunos meses pero no todos, o sólo un mes o dos?</b><br>Casi todos los meses<br>Algunos meses pero no todos<br>Sólo un mes o dos<br>No sabe<br>Se negó a responder  |
| <b>CHILD LEVEL 1 SCREENING</b>                                  | Households with no child under age 18, skip to End of Food Security Module.<br><br><b>Programming was based on presence of children under age 18, but was not specific to whether the child lived in the household.</b>  | Hogares sin menores de 18 años, pasar al Final del Módulo de Seguridad Alimentaria.<br><br><b>Programming was based on presence of children under age 18, but was not specific to whether the child lived in the household.</b>  |
| <b>FOOD SECURITY – CH1</b><br>USDA HFSM                         | [PROGRAMMER NOTE: Ask if passed child level 1 screening]<br><b>Now I'm going to read you several statements that people have made about the food situation of their children.</b>  | [PROGRAMMER NOTE: Ask if passed child level 1 screening]<br><b>Ahora le voy a leer varios enunciados reportados por algunas personas acerca de la situación alimentaria de sus hijos.</b>  |

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| <p><i>CHILD_SECURE1</i></p>  | <p>You or other adults in your household relied on only a few kinds of low-cost food to feed the children because you were running out of money to buy food.</p> <p>Often true<br/>Sometimes true<br/>Never true<br/>Don't know<br/>Refuse to answer</p>  | <p>Usted u otros adultos de su hogar utilizaron unos cuantos tipos de alimentos de bajo costo para alimentar a los niños porque se estaban quedando sin dinero para comprar comida.</p> <p>Frecuentemente fue verdad<br/>Algunas veces fue verdad<br/>Nunca fue verdad<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>FOOD SECURITY – CH2</b><br/>USDA HFSM<br/><i>CHILD_SECURE2</i></p> | <p>[PROGRAMMER NOTE: Ask if passed child level 1 screening]<br/>You or other adults in your household couldn't feed the children a balanced meal, because you couldn't afford it.</p> <p>Often true<br/>Sometimes true<br/>Never true<br/>Don't know<br/>Refuse to answer</p>   | <p>[PROGRAMMER NOTE: Ask if passed child level 1 screening]<br/>Usted u otros adultos de su hogar no pudieron alimentar a los niños con comida balanceada porque no la pudieron pagar.</p> <p>Frecuentemente fue verdad<br/>Algunas veces fue verdad<br/>Nunca fue verdad<br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>FOOD SECURITY – CH3</b><br/>USDA HFSM<br/><i>CHILD_SECURE3</i></p> | <p>[PROGRAMMER NOTE: Ask if passed child level 1 screening]<br/>The children were not eating enough because you and other adult members of the household just couldn't afford enough food.</p> <p>Often true<br/>Sometimes true<br/>Never true<br/>Don't know<br/>Refuse to answer</p>  | <p>[PROGRAMMER NOTE: Ask if passed child level 1 screening]<br/>Los niños no comieron lo suficiente porque usted y otros integrantes adultos de su hogar simplemente no tuvieron dinero para comprar suficientes alimentos.</p> <p>Frecuentemente fue verdad<br/>Algunas veces fue verdad<br/>Nunca fue verdad<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>CHILD LEVEL 2 SCREENING</b></p>                                    | <p>If affirmative response (i.e., "often true" or "sometimes true") to one or more of questions CH1-CH3, then continue to Child Stage 2; otherwise skip to End of Food Security Module.</p>   | <p>Si la respuesta fue afirmativa (i.e., "Frecuentemente fue verdad " o " Algunas veces fue verdad ") a una o más de las Preguntas CH1-CH3, entonces pase a Menor Etapa 2 (Child Stage 2); de lo contrario, pase al Final del Módulo de Seguridad Alimentaria.</p>   |
| <p><b>FOOD SECURITY – CH4</b><br/>USDA HFSM<br/><i>CHILD_SECURE4</i></p> | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/>In the past 12 months, since last [current month] did 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?</p> <p>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p> <p>Error: this question should have refer to "the size of any of the children's meals". Repeated secure5.</p> | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/>En los últimos 12 meses, desde el pasado mes de (nombre del mes actual), ¿usted u otros adultos de su hogar alguna vez disminuyeron el tamaño de sus comidas o dejaron de comer alguna de ellas porque no había suficiente dinero para comprar alimentos?</p> <p>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p> <p>Error: this question should have refer to "the size of any of the children's meals". Repeated secure5.</p> |

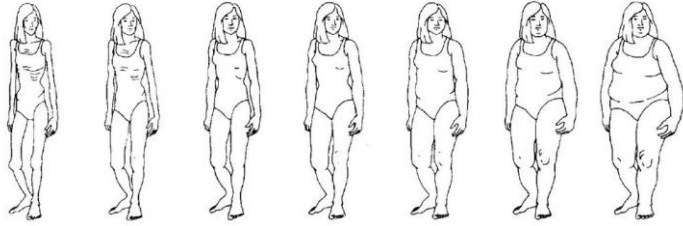
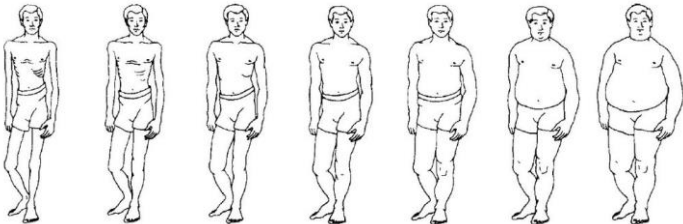
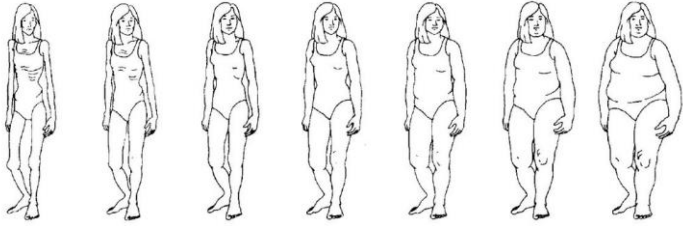
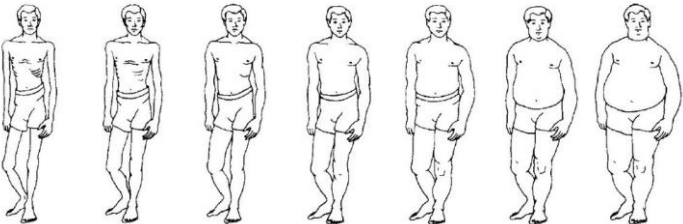
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| <p><b>FOOD SECURITY – CH5</b><br/>USDA HFSM<br/><i>CHILD_SECURE5</i></p>   | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/><b>In the last 12 months, did any of the children ever skip meals because there wasn't enough money for food?</b><br/>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p>              | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/><b>En los últimos 12 meses, ¿alguno de los niños dejó de comer alguno de sus alimentos porque no había suficiente dinero para comprarlos?</b><br/>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p>             |
| <p><b>FOOD SECURITY – CH5a</b><br/>USDA HFSM<br/><i>CHILD_SECURE5A</i></p> | <p>[PROGRAMMER NOTE: Ask if "Yes" to CH5]<br/><b>How often did this happen?</b><br/>Almost every month<br/>Some months but not every month<br/>Only 1 or 2 months<br/>Don't know<br/>Refuse to answer</p>   | <p>[PROGRAMMER NOTE: Ask if "Yes" to CH5]<br/><b>¿Cuántas veces le sucedió? ¿Casi todos los meses, algunos meses pero no todos, o sólo un mes o dos?</b><br/>Casi todos los meses<br/>Algunos meses pero no todos<br/>Sólo un mes o dos<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>FOOD SECURITY – CH6</b><br/>USDA HFSM<br/><i>CHILD_SECURE6</i></p>   | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/><b>In the last 12 months, were the children ever hungry but you just couldn't afford more food?</b><br/>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p>                            | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/><b>En los últimos 12 meses, ¿los niños se quedaron con hambre alguna vez pero usted simplemente no pudo comprar más alimentos?</b><br/>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p>                        |
| <p><b>FOOD SECURITY – CH7</b><br/>USDA HFSM<br/><i>CHILD_SECURE7</i></p>   | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/><b>In the last 12 months, did any of the children ever not eat for a whole day because there wasn't enough money for food?</b><br/>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p> | <p>[PROGRAMMER NOTE: Ask if passed child level 2 screening]<br/><b>En los últimos 12 meses, ¿alguno de los niños dejó de comer todo un día porque no había suficiente dinero para comprar alimentos?</b><br/>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p>                  |

**DIETARY PATTERNS AND EFFORTS**

| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
|---|--|---|-------------------------|--------------|---------------------|------------|---------|----------|--|--|--|--|--|---------------|--|--|--|--|--|-----|--|--|--|--|--|-----------|--|--|--|--|--|---------|--|--|--|--|--|-------|--|--|--|--|--|-------------------|--|--|--|--|--|-------------|--|--|--|--|--|-------------|--|--|--|--|--|-----------|--|--|--|--|--|----------------------|--|--|--|--|--|--------------|--|--|--|--|--|----------------|--|--|--|--|--|-----------|--|--|--|--|--|----------------------------------|--|--|--|--|--|--------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--|---------------|-------------|-------------------------|---------|---------------------|----------|--|--|--|--|--|---------------|--|--|--|--|--|-------|--|--|--|--|--|--------------|--|--|--|--|--|----------|--|--|--|--|--|-------|--|--|--|--|--|-----------------------|--|--|--|--|--|-----------|--|--|--|--|--|------------|--|--|--|--|--|------------|--|--|--|--|--|-------------------|--|--|--|--|--|-------------------|--|--|--|--|--|---------|--|--|--|--|--|--------------------|--|--|--|--|--|--|--|--|--|--|--|--------|--|--|--|--|--|--|--|--|--|--|--|
| <p><b>EATING RESTRICTIONS</b><br/>TNT (HEAVILY ADAPTED)</p> <p><i>RESTRICT_[TYPE]</i><br/><i>RESTRICT_NONE</i><br/><i>RESTRICT_DK</i><br/><i>RESTRICT_R</i><br/><i>RESTRICT_RELTEXT</i></p> | <p><b>Would you describe yourself as:</b> (Select all that apply)</p> <p>Vegetarian<br/>Vegan<br/>Pescatarian</p> <p>Following a religious practice for eating → Please specify: <i>[open-ended]</i></p> <p>None of the above<br/>Don't know<br/>Refuse to answer</p>  | <p><b>Se describiría como:</b> (Seleccione todas las opciones que apliquen)</p> <p>Vegetariano<br/>Vegano<br/>Pescetariano</p> <p>Se apega a una práctica religiosa relacionada con los alimentos → Favor de especificar: <i>[respuesta abierta]</i></p> <p>Ninguna de las anteriores<br/>No sabe<br/>Se negó a responder</p> |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| <p><b>DIET MODIFICATION EFFORTS</b><br/>TNT</p> <p><i>EFFORT_[TYPE]</i><br/><i>EFFORT_OTEXT</i></p>   | <p><b>Have you made an effort to consume more or less of the following in the past year?</b></p> <table border="1" data-bbox="331 654 1073 1500"> <thead> <tr> <th></th> <th>Consume LESS</th> <th>Consume MORE</th> <th>No effort made</th> <th>Don't Know</th> <th>Refused</th> </tr> </thead> <tbody> <tr><td>Calories</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Carbohydrates</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Fat</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Trans fat</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Protein</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Fibre</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Sugar/Added sugar</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Salt/sodium</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Cholesterol</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Vitamin D</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Fruit and vegetables</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Whole grains</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Dairy products</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>All meats</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Red meat (e.g., beef, pork) only</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Gluten</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>'Artificial' low-calorie sweeteners like Aspartame</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>'Natural' low-calorie sweeteners like stevia</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> |   | Consume LESS            | Consume MORE | No effort made      | Don't Know | Refused | Calories |  |  |  |  |  | Carbohydrates |  |  |  |  |  | Fat |  |  |  |  |  | Trans fat |  |  |  |  |  | Protein |  |  |  |  |  | Fibre |  |  |  |  |  | Sugar/Added sugar |  |  |  |  |  | Salt/sodium |  |  |  |  |  | Cholesterol |  |  |  |  |  | Vitamin D |  |  |  |  |  | Fruit and vegetables |  |  |  |  |  | Whole grains |  |  |  |  |  | Dairy products |  |  |  |  |  | All meats |  |  |  |  |  | Red meat (e.g., beef, pork) only |  |  |  |  |  | Gluten |  |  |  |  |  | 'Artificial' low-calorie sweeteners like Aspartame |  |  |  |  |  | 'Natural' low-calorie sweeteners like stevia |  |  |  |  |  | <p><b>Se ha esforzado por consumir más o menos de los siguientes alimentos en el último año?</b></p> <table border="1" data-bbox="1184 654 2011 1471"> <thead> <tr> <th></th> <th>Consume MENOS</th> <th>Consume MÁS</th> <th>No hizo ningún esfuerzo</th> <th>No sabe</th> <th>Se negó a responder</th> </tr> </thead> <tbody> <tr><td>Calorías</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Carbohidratos</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Grasa</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Grasas trans</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Proteína</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Fibra</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Azúcar/Azúcar añadida</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Sal/sodio</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Colesterol</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Vitamina D</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Frutas y verduras</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Granos integrales</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Lácteos</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Todo tipo de carne</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Carne roja (e.g., res, puerco) solamente</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Gluten</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Endulzantes 'artificiales' bajos en calorías como el Aspartame</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> |  | Consume MENOS | Consume MÁS | No hizo ningún esfuerzo | No sabe | Se negó a responder | Calorías |  |  |  |  |  | Carbohidratos |  |  |  |  |  | Grasa |  |  |  |  |  | Grasas trans |  |  |  |  |  | Proteína |  |  |  |  |  | Fibra |  |  |  |  |  | Azúcar/Azúcar añadida |  |  |  |  |  | Sal/sodio |  |  |  |  |  | Colesterol |  |  |  |  |  | Vitamina D |  |  |  |  |  | Frutas y verduras |  |  |  |  |  | Granos integrales |  |  |  |  |  | Lácteos |  |  |  |  |  | Todo tipo de carne |  |  |  |  |  | Carne roja (e.g., res, puerco) solamente |  |  |  |  |  | Gluten |  |  |  |  |  | Endulzantes 'artificiales' bajos en calorías como el Aspartame |  |  |  |  |  |
|   | Consume LESS   | Consume MORE  | No effort made          | Don't Know   | Refused             |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Calories  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Carbohydrates   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Fat   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Trans fat   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Protein   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Fibre   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Sugar/Added sugar   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Salt/sodium   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Cholesterol   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Vitamin D   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Fruit and vegetables  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Whole grains  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Dairy products  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| All meats   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Red meat (e.g., beef, pork) only  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Gluten  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| 'Artificial' low-calorie sweeteners like Aspartame  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| 'Natural' low-calorie sweeteners like stevia  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
|   | Consume MENOS  | Consume MÁS   | No hizo ningún esfuerzo | No sabe      | Se negó a responder |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Calorías  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Carbohidratos   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Grasa   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Grasas trans  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Proteína  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Fibra   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Azúcar/Azúcar añadida   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Sal/sodio   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Colesterol  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Vitamina D  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Frutas y verduras   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Granos integrales   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Lácteos   |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Todo tipo de carne  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Carne roja (e.g., res, puerco) solamente  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Gluten  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Endulzantes 'artificiales' bajos en calorías como el Aspartame  |  |   |                         |              |                     |            |         |          |  |  |  |  |  |               |  |  |  |  |  |     |  |  |  |  |  |           |  |  |  |  |  |         |  |  |  |  |  |       |  |  |  |  |  |                   |  |  |  |  |  |             |  |  |  |  |  |             |  |  |  |  |  |           |  |  |  |  |  |                      |  |  |  |  |  |              |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                                  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |               |             |                         |         |                     |          |  |  |  |  |  |               |  |  |  |  |  |       |  |  |  |  |  |              |  |  |  |  |  |          |  |  |  |  |  |       |  |  |  |  |  |                       |  |  |  |  |  |           |  |  |  |  |  |            |  |  |  |  |  |            |  |  |  |  |  |                   |  |  |  |  |  |                   |  |  |  |  |  |         |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |

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|--|---|--|--|--|--|--|--|---|--|--|--|--|--|--|
|  | Processed foods   |  |  |  |  |  |  | Endulzantes<br>'naturales' bajos en<br>calorías como Stevia                               |  |  |  |  |  |  |
|  | Genetically-<br>modified organisms<br>(GMO)                       |  |  |  |  |  |  | Alimentos<br>procesados   |  |  |  |  |  |  |
|  | Organic foods   |  |  |  |  |  |  | Organismos<br>genéticamente<br>modificados (OGM)  |  |  |  |  |  |  |
|  | Locally-produced<br>foods   |  |  |  |  |  |  | Alimentos orgánicos   |  |  |  |  |  |  |
|  | Ethically-sourced,<br>sustainably-sourced,<br>or fair trade foods |  |  |  |  |  |  | Alimentos de<br>producción local  |  |  |  |  |  |  |
|  | Nuts and seeds  |  |  |  |  |  |  | Alimentos<br>producidos de<br>manera ética,<br>sostenible o<br>mediante comercio<br>justo |  |  |  |  |  |  |
|  | Other → Please<br>specify: [ <i>open-<br/>ended</i> ]             |  |  |  |  |  |  | Frutos secos y<br>semillas  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  | Otros → Favor de<br>especificar:<br>[respuesta abierta]                                   |  |  |  |  |  |  |
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**WEIGHT LOSS EFFORTS, BODY PERCEPTIONS, AND WEIGHT STIGMA**





| DOMAIN<br>SOURCE   | ENGLISH  | SPANISH TRANSLATION  |
|--|--|--|
| <p><b>PERCEIVED BODY SIZE</b></p> <p>K. MAXIMOVA ET AL. THE ROLE OF UNDERESTIMATING BODY SIZE FOR SELF-ESTEEM AND SELF-EFFICACY AMONG GRADE FIVE CHILDREN IN CANADA. ANNALS OF EPIDEMIOLOGY 2015; 25:753-759.</p> <p>IMAGES FROM (COLLINS, 1991)</p> <p>WT_BODY_F<br/>WT_BODY_F_DK<br/>WT_BODY_F_R</p> <p>WT_BODY_M<br/>WT_BODY_M_DK<br/>WT_BODY_M_R</p> | <p>Which body is most like your own body?</p> <p>[Females:]</p>  <p>[Males:]</p>  <p>Don't know<br/>Refuse to answer</p> | <p>¿Qué cuerpo se parece más al de usted?</p> <p>[Mujeres:]</p>  <p>[Hombres:]</p>  <p>No sabe<br/>Se negó a responder</p> |
| <p><b>PERCEIVED WEIGHT</b></p> <p>CCHS</p> <p>WT_PERCEIVE</p>  | <p>Do you consider yourself to be...</p> <p>Obese<br/>Overweight<br/>Underweight<br/>Just about right<br/>Don't know<br/>Refuse to answer</p>  | <p>¿Usted se considera..?</p> <p>Obeso<br/>De peso mayor al normal<br/>De peso menor al normal<br/>De peso adecuado<br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>WEIGHT BEHAVIOUR</b></p> <p>Adapted from:<br/>NHANES, 2009-2010</p> <p>WT_LOSS<br/>WT_GAIN<br/>WT_SAME</p>   | <p>During the <u>past 12 months</u> have you tried to....</p> <p>Select all that apply</p> <p>Lose weight<br/>Gain weight<br/>Stay the same weight</p>   | <p>En los <u>últimos 12 meses</u> ha intentado....</p> <p>Seleccione todas las opciones que apliquen</p> <p>Bajar de peso<br/>Subir de peso<br/>Mantener el mismo peso</p>   |



|  |   |   |
|--|---|---|
| <p>WT_NOT<br/>WT_DK<br/>WT_R</p>   | <p>I have not tried to do anything about my weight<br/>Don't know<br/>Refuse to answer</p>  | <p>No ha intentado hacer nada respecto a su peso<br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>WEIGHT LOSS METHODS</b><br/>NHANES DIET HISTORY QUESTIONNAIRE (ADAPTED)</p> <p>WT_LOSS_[TYPE]<br/>WT_LOSS_NONE<br/>WT_LOSS_DK<br/>WT_LOSS_R<br/>WT_LOSS_DIETTEXT<br/>WT_LOSS_OTEXT</p> <p>WT_SAME_[TYPE]<br/>WT_SAME_NONE<br/>WT_SAME_DK<br/>WT_SAME_R<br/>WT_SAME_DIETTEXT<br/>WT_SAME_OTEXT</p> <p>WT_LOSS_SAME_[TYPE]<br/>WT_LOSS_SAME_NONE<br/>WT_LOSS_SAME_DK<br/>WT_LOSS_SAME_R<br/>WT_LOSS_SAME_DIETTEXT<br/>WT_LOSS_SAME_OTEXT</p> | <p>PROGRAMMER NOTE: If "Yes" to tried to lose weight and "no" to stay the same in past 12 months:<br/><b>How did you try to lose weight <u>in the past 12 months</u>?</b></p> <p>PROGRAMMER NOTE: If "no" to tried to lose weight and "yes" to stay the same in past 12 months:<br/><b>How did you try to 'stay the same weight' <u>in the past 12 months</u>?</b></p> <p>PROGRAMMER NOTE: If "yes" to tried to lose weight and "yes" to stay the same in past 12 months:<br/><b>How did you try to lose weight or 'stay the same weight' <u>in the past 12 months</u>?</b></p> <p>Skipped meals or fasted<br/>Ate less food (amount)<br/>Ate less fat<br/>Ate less candy, sugar or sweets<br/>Ate fewer carbohydrates<br/>Ate more fruits, vegetables or salads<br/>Switched to foods with lower calories<br/>Followed a special diet or weight loss program (e.g., Atkins, Weight Watchers.) → Please specify: [open-ended]<br/>Used a liquid diet formula such as Slimfast or Optifast<br/>Did a cleanse or detox diet<br/>Exercised<br/>Drank a lot of water<br/>Got help from a health professional<br/>Took diet pills prescribed by a doctor<br/>Took other pills, medicines, herbs, or supplements not needing a prescription<br/>Took laxatives or vomited<br/>Started to smoke or began to smoke again<br/>Other → Please specify: [open-ended]<br/>None of the above<br/>Don't know<br/>Refuse to answer</p> | <p>PROGRAMMER NOTE: If "Yes" to tried to lose weight and "no" to stay the same in past 12 months:<br/><b>¿Cómo intentó bajar de peso <u>en los últimos 12 meses</u>?</b></p> <p>PROGRAMMER NOTE: If "no" to tried to lose weight and "yes" to stay the same in past 12 months:<br/><b>¿Cómo intentó "mantener el mismo peso" <u>en los últimos 12 meses</u>?</b></p> <p>PROGRAMMER NOTE: If "yes" to tried to lose weight and "yes" to stay the same in past 12 months:<br/><b>¿Cómo intentó bajar de peso o "mantener el mismo peso" <u>en los últimos 12 meses</u>?</b></p> <p>Dejó de hacer alguna comida o ayunó<br/>Comió menos (menor cantidad)<br/>Comió menos grasa<br/>Comió menos dulces o azúcar<br/>Comió menos carbohidratos<br/>Comió más frutas, verduras o ensaladas<br/>Cambió a alimentos de menos calorías<br/>Siguió una dieta especial o programa para bajar de peso (e.g., Atkins, Weight Watchers) → Favor de especificar: [respuesta abierta]<br/>Usó preparados para bebidas dietéticas como Slimfast u Optifast<br/>Hizo una dieta de limpieza o desintoxicación<br/>Hizo ejercicio<br/>Tomó mucha agua<br/>Recibió ayuda de un profesional de la salud<br/>Tomó pastillas de dieta recetadas por un médico<br/>Tomó otras pastillas, medicinas, hierbas o suplementos que no requieren receta médica<br/>Tomó laxantes o se provocó el vómito<br/>Empezó o volvió a fumar<br/>Otro → Favor de especificar: [respuesta abierta]<br/>Ninguna de las anteriores<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>EAT-3 BEHAVIOURAL ITEMS</b><br/>HAINES J, ZIYADEH NJ, FRANKO DL, MCDONALD J, MOND JM, AUSTIN SB.</p>   | <p><b>In the past 3 months, how often have you:</b><br/><b>... gone on eating binges?</b> (<i>Eating a large amount of food while feeling out of control</i>).<br/><b>... made yourself sick (vomited) to control your weight?</b></p>  | <p><b>En los últimos 3 meses, ¿cuántas veces:</b><br/><b>... comió en exceso?</b> (<i>Comió una gran cantidad de alimentos y se sintió fuera de control</i>).<br/><b>... se provocó el vómito para controlar su peso?</b></p>   |

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| <p>SCREENING HIGH SCHOOL STUDENTS FOR EATING DISORDERS: VALIDITY OF BRIEF BEHAVIORAL AND ATTITUDINAL MEASURES. JOURNAL OF SCHOOL HEALTH, 2011; 81(9):530-535.</p> <p><i>EAT3_BINGE</i><br/><i>EAT3_VOMIT</i></p>  | <p>Never<br/>Less than 1 time a month<br/>1 to 3 times a month<br/>Once a week<br/>2 to 6 times a week<br/>Once a day<br/>More than once a day<br/>Don't know<br/>Refuse to answer</p> | <p>Nunca<br/>Menos de 1 vez al mes<br/>1 a 3 veces al mes<br/>1 vez a la semana<br/>2 a 6 veces a la semana<br/>1 vez al día<br/>Más de 1 vez al día<br/>No sabe<br/>Se negó a responder</p>             |
| <p><b>EAT-3 ATTITUDINAL ITEM</b><br/>HAINES J, ZIYADEH NJ, FRANKO DL, MCDONALND J, MOND JM, AUSTIN SB. SCREENING HIGH SCHOOL STUDENTS FOR EATING DISORDERS: VALIDITY OF BRIEF BEHAVIORAL AND ATTITUDINAL MEASURES. JOURNAL OF SCHOOL HEALTH, 2011; 81(9):530-535.</p> <p><i>EAT3_THIN</i></p>   | <p><b>I am preoccupied with a desire to be thinner.</b><br/>Always<br/>Usually<br/>Often<br/>Sometimes<br/>Rarely<br/>Never<br/>Don't know<br/>Refuse to answer</p>                    | <p><b>Me absorbe el deseo de estar más delgado.</b><br/>Siempre<br/>Usualmente<br/>Frecuentemente<br/>Algunas veces<br/>Rara vez<br/>Nunca<br/>No sabe<br/>Se negó a responder</p>                       |
| <p><b>WEIGHT BIAS</b><br/>ONE ITEM (OF 3) FROM THE FEAR OF FAT SUBSCALE OF THE ANTI-FAT ATTITUDES QUESTIONNAIRE [PUHL RM, LATNER JL, KING K, LUEDICKE J. WEIGHT BIAS AMONG PROFESSIONALS WHO TREAT EATING DISORDERS: ASSOCIATIONS WITH ATTITUDES ABOUT TREATMENT AND PERCEPTIONS OF PATIENT OUTCOMES. INT J EATING DISORD 2014; 47: 65–75.]</p> <p><i>WT_BIAS</i></p> | <p><b>I worry about becoming fat.</b><br/>Strongly disagree<br/>Disagree<br/>Neutral<br/>Agree<br/>Strongly agree<br/>Don't know<br/>Refuse to answer</p>                              | <p><b>Me preocupa engordar.</b><br/>Completamente en desacuerdo<br/>En desacuerdo<br/>Ni de acuerdo ni en desacuerdo<br/>De acuerdo<br/>Completamente de acuerdo<br/>No sabe<br/>Se negó a responder</p> |

SUGARY DRINKS

| DOMAIN<br>SOURCE  | ENGLISH   | SPANISH TRANSLATION  |
|---|---|--|
| <p><b>POP PERCEIVED HEALTHINESS</b></p> <p><i>SSB_HLTH_POP</i></p>              | <p>In your opinion, how unhealthy or healthy is this type of drink?</p>  <p>Very unhealthy<br/>Unhealthy<br/>A little unhealthy<br/>Neither unhealthy nor healthy<br/>A little healthy<br/>Healthy<br/>Very healthy<br/>Don't know<br/>Refuse to answer</p>                                      | <p>En su opinión, ¿qué tan saludable o poco saludable es este tipo de bebida?</p>  <p>Muy mala para la salud<br/>Mala para la salud<br/>Un poco mala para la salud<br/>Ni mala ni buena para la salud<br/>Poco saludable<br/>Saludable<br/>Muy saludable<br/>No sabe<br/>Se negó a responder</p>                  |
| <p><b>POP ACCEPTABLE FREQUENCY FOR CHILDREN</b></p> <p><i>SSB_CHILD_POP</i></p> | <p>Imagine that you have a 10-year old child. Is it okay for them to have this type of drink....</p>  <p>Never<br/>Once per month<br/>A few times per month<br/>Once per week<br/>A few times per week<br/>Once per day<br/>As often as they would like<br/>Don't know<br/>Refuse to answer</p> | <p>Imagine que tiene un hijo de 10 años de edad. ¿Le parece bien que tome este tipo de bebida?</p>  <p>Nunca<br/>Una vez al mes<br/>Unas cuantas veces al mes<br/>Una vez a la semana<br/>Unas cuantas veces a la semana<br/>Una vez al día<br/>Tantas veces como quiera<br/>No sabe<br/>Se negó a responder</p> |

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| <p><b>SSB PERCEPTIONS - CONDITION</b></p> <p>SSB_CONDITION</p> | <p><i>[PROGRAMMER NOTE: Randomize each respondent to view one beverage and answer the following set of 3 questions with the same beverage image on screen for each question.]</i></p> <p>Diet pop (Diet Coke)<br/>                 100% juice (Orange juice)<br/>                 Energy drink (Red Bull)<br/>                 Water<br/>                 Specialty coffee (Starbucks Frappuccino)<br/>                 Sports drink (Gatorade)<br/>                 Chocolate milk<br/>                 Iced tea (Lipton)</p>  | <p><i>[PROGRAMMER NOTE: Randomize each respondent to view one beverage and answer the following set of 3 questions with the same beverage image on screen for each question.]</i></p> <p>Bebida refrescos/gaseosas de dieta (Coca de dieta)<br/>                 100% jugo (jugo de naranja)<br/>                 Bebida energética (Red Bull)<br/>                 Agua<br/>                 Café de especialidad (Frappuccino de Starbucks)<br/>                 Bebida deportivas (Gatorade)<br/>                 Leche con chocolate<br/>                 Té helado (Lipton)</p>  |
| <p><b>SSB PERCEIVED HEALTHINESS</b></p> <p>SSB_HLTH_[TYPE]</p> | <p>In your opinion, how unhealthy or healthy is this type of drink?<br/> <i>[show image]</i></p> <p>Very unhealthy<br/>                 Unhealthy<br/>                 A little unhealthy<br/>                 Neither unhealthy nor healthy<br/>                 A little healthy<br/>                 Healthy<br/>                 Very healthy<br/>                 Don't know<br/>                 Refuse to answer</p>   | <p>En su opinión, ¿qué tan saludable o poco saludable es este tipo de bebida?<br/> <i>[show image]</i></p> <p>Muy mala para la salud<br/>                 Mala para la salud<br/>                 Un poco mala para la salud<br/>                 Ni mala ni buena para la salud<br/>                 Poco saludable<br/>                 Saludable<br/>                 Muy saludable<br/>                 No sabe<br/>                 Se negó a responder</p>  |

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| <p><b>SSB ACCEPTABLE FREQUENCY FOR CHILDREN</b></p> <p><i>SSB_CHILD_[TYPE]</i></p> | <p>Imagine that you have a 10-year old child. Is it okay for them to have this type of drink....</p> <p><i>[show image]</i></p> <p>Never<br/>Once per month<br/>A few times per month<br/>Once per week<br/>A few times per week<br/>Once per day<br/>As often as they would like<br/>Don't know<br/>Refuse to answer</p> | <p>Imagine que tiene un hijo de 10 años de edad. ¿Le parece bien que tome este tipo de bebida?</p> <p><i>[show image]</i></p> <p>Nunca<br/>Una vez al mes<br/>Unas cuantas veces al mes<br/>Una vez a la semana<br/>Unas cuantas veces a la semana<br/>Una vez al día<br/>Tantas veces como quiera<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>SSB SUGAR AMOUNT</b></p> <p><i>SSB_SUGAR_[TYPE]</i></p>                      | <p>A 20 fl oz bottle of Coke has 65 grams of sugar.</p> <p>How much sugar do you think the following beverage contains?</p> <p><i>[show image with mL label]</i></p> <p>Enter number of grams: _____<br/>Don't know<br/>Refuse to answer</p>  | <p>Una botella de Coca de 20 fl oz tiene 65 gramos de azúcar.</p> <p>¿Cuánta azúcar cree usted que contiene la siguiente bebida?</p> <p><i>[show image with mL label]</i></p> <p>Ingrese el número de gramos: _____<br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>SSB DEFINITION</b></p>   | <p>The next few questions ask about <b>SUGAR AND SUGARY DRINKS</b>. These are drinks that contain added sugar, like pop, fruit drinks, sports drinks, energy drinks, chocolate milk, and specialty coffees that have added sugar.</p>   | <p>Las siguientes preguntas se refieren a <b>BEBIDAS AZUCARADAS</b>. Son bebidas que contienen azúcar añadida, como los refrescos/gaseosas, bebidas de fruta, deportivas, energéticas, leche con chocolate y cafés de especialidad a los cuales se les añade azúcar.</p>   |
| <p><b>SSB SELF CONSUMPTION</b></p> <p><i>SSB_SELF</i></p>                          | <p>Is the amount of sugary drinks you typically have in a week...</p> <p>A very unhealthy amount<br/>An unhealthy amount<br/>Neither unhealthy nor healthy amount<br/>A healthy amount<br/>A very healthy amount<br/>Don't know<br/>Refuse to answer</p>  | <p>La cantidad de bebidas azucaradas que normalmente toma a la semana es...</p> <p>Una cantidad muy mala para la salud<br/>Una cantidad mala para la salud<br/>Una cantidad ni mala ni buena para la salud<br/>Una cantidad saludable<br/>Una cantidad muy saludable<br/>No sabe<br/>Se negó a responder</p>                               |
| <p><b>NON-NUTRITIVE SWEETENERS – PERCEPTIONS</b></p> <p><i>SWEETENER_HLTH</i></p>  | <p>Do you think that low-calorie sweeteners (such as Splenda, aspartame, stevia, etc.) are....</p> <p>Very unhealthy<br/>Unhealthy<br/>A little unhealthy<br/>Neither unhealthy nor healthy<br/>A little healthy<br/>Healthy<br/>Very healthy<br/>Don't know</p>  | <p>Usted cree que los endulzantes bajos en calorías (como Splenda, aspartame, stevia, etc.) son....</p> <p>Muy malos para la salud<br/>Malos para la salud<br/>Un poco malos para la salud<br/>Ni malos ni buenos para la salud<br/>Poco saludables<br/>Saludables<br/>Muy saludables<br/>No sabe</p>                                      |

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|  | Refuse to answer  | Se negó a responder  |
| <b>SSB SOCIAL NORMS – Q1</b><br><i>SSB_NORMS1</i>                                | <b>People important to me <u>TRY NOT</u> to eat foods high in <u>SUGAR</u>.</b><br>Strongly agree<br>Agree<br>Neither agree nor disagree<br>Disagree<br>Strongly disagree<br>Don't know<br>Refuse to answer   | <b>Personas que me importan tratan de evitar alimentos con alto contenido de <u>azúcar</u>.</b><br>Completamente de acuerdo<br>De acuerdo<br>Ni de acuerdo ni en desacuerdo<br>En desacuerdo<br>Completamente en desacuerdo<br>No sabe<br>Se negó a responder          |
| <b>SSB SOCIAL NORMS – Q2</b><br><i>SSB_NORMS2</i>                                | <b>People important to me <u>THINK I SHOULD NOT</u> eat foods high in <u>SUGAR</u>.</b><br>Strongly agree<br>Agree<br>Neither agree nor disagree<br>Disagree<br>Strongly disagree<br>Don't know<br>Refuse to answer   | <b>Personas que me importan piensan que no debo comer alimentos con alto contenido de <u>azúcar</u>.</b><br>Completamente de acuerdo<br>De acuerdo<br>Ni de acuerdo ni en desacuerdo<br>En desacuerdo<br>Completamente en desacuerdo<br>No sabe<br>Se negó a responder |
| <b>SSB SOCIAL NORMS – Q3</b><br><i>SSB_NORMS3</i>                                | <b>People important to me <u>TRY NOT</u> to drink <u>SUGARY DRINKS</u>.</b><br>Strongly agree<br>Agree<br>Neither agree nor disagree<br>Disagree<br>Strongly disagree<br>Don't know<br>Refuse to answer   | <b>Personas que me importan tratan de no tomar bebidas azucaradas.</b><br>Completamente de acuerdo<br>De acuerdo<br>Ni de acuerdo ni en desacuerdo<br>En desacuerdo<br>Completamente en desacuerdo<br>No sabe<br>Se negó a responder                                   |
| <b>SSB SOCIAL NORMS – Q4</b><br><i>SSB_NORMS4</i>                                | <b>People important to me <u>THINK I SHOULD NOT</u> drink <u>SUGARY DRINKS</u>.</b><br>Strongly agree<br>Agree<br>Neither agree nor disagree<br>Disagree<br>Strongly disagree<br>Don't know<br>Refuse to answer   | <b>Personas que me importan piensan que no debo tomar bebidas azucaradas.</b><br>Completamente de acuerdo<br>De acuerdo<br>Ni de acuerdo ni en desacuerdo<br>En desacuerdo<br>Completamente en desacuerdo<br>No sabe<br>Se negó a responder                            |
| <b>PUBLIC TRUST</b><br><i>PT_HE_SUGARY_DRINKS</i><br><i>PT_IND_SUGARY_DRINKS</i> | <b>Please tell us whether you agree or disagree with the following:</b><br><br><b>I trust messages from <u>health experts</u> on <u>sugary drinks</u>.</b><br><br><b>I trust messages from the <u>food and beverage industry</u> on <u>sugary drinks</u>.</b> | <b>Favor de indicarnos si está de acuerdo o en desacuerdo con lo siguiente:</b><br><br><b>Confío en los mensajes relacionados con bebidas azucaradas de <u>expertos en salud</u>.</b>  |

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|  | <p>Strongly agree</p> <p>Agree</p> <p>Neither agree nor disagree</p> <p>Disagree</p> <p>Strongly disagree</p> <p>Don't know</p> <p>Refuse to answer</p> | <p>Confío en los mensajes relacionados con bebidas azucaradas de la <u>industria de alimentos y bebidas</u>.</p> <p>Completamente de acuerdo</p> <p>De acuerdo</p> <p>Ni de acuerdo ni en desacuerdo</p> <p>En desacuerdo</p> <p>Completamente en desacuerdo</p> <p>No sabe</p> <p>Se negó a responder</p> |
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## NUTRITION KNOWLEDGE

| DOMAIN<br>SOURCE   | ENGLISH   | SPANISH TRANSLATION  |
|--|---|--|
| <p><b>SELF-REPORTED NUTRITION KNOWLEDGE</b></p> <p>CFDR, OTTAWA, ETC.</p> <p><i>NUT_KNOW</i></p>   | <p><b>How would you rate your nutrition knowledge?</b></p> <p>Not at all knowledgeable</p> <p>A little knowledgeable</p> <p>Somewhat knowledgeable</p> <p>Very knowledgeable</p> <p>Extremely knowledgeable</p> <p>Don't know</p> <p>Refuse to answer</p>   | <p><b>¿Cómo calificaría sus conocimientos sobre nutrición?</b></p> <p>No sé nada del tema</p> <p>Sé muy poco del tema</p> <p>Tengo algunos conocimientos sobre el tema</p> <p>Conozco muy bien el tema</p> <p>Conozco extremadamente bien el tema</p> <p>No sabe</p> <p>Se negó a contestar</p>  |
| <p><b>CALORIE KNOWLEDGE</b></p> <p>ADAPTED FROM PIRON ET AL., 2009; ELBEL ET AL., 2009 USED IN FCMS STUDY</p> <p><i>CAL_KNOW</i><br/><i>CAL_KNOW_N</i></p> | <p>[PROGRAMMER NOTE: Insert sex of participant]</p> <p><b>On average, how many calories should a healthy, moderately active adult [male/female] consume each day to maintain a healthy weight?</b></p> <p>Enter number: <i>[numeric]</i></p> <p>Don't know <i>[valid answer]</i></p> <p>Refuse to answer</p>                          | <p>[PROGRAMMER NOTE: Insert sex of participant]</p> <p><b>En promedio, ¿cuántas calorías debe consumir diariamente un adulto saludable, moderadamente activo [hombre/mujer] para mantener un peso saludable?</b></p> <p>Escriba el número: <i>[numeric]</i></p> <p>No sabe <i>[Respuesta válida]</i></p> <p>Se negó a contestar</p>  |
| <p><b>CALORIE GOAL</b></p> <p><i>CAL_COUNT</i><br/><i>CAL_GOAL</i><br/><i>CAL_GOAL_N</i></p>   | <p><b>Do you count the calories you consume each day?</b></p> <p>Never</p> <p>Sometimes</p> <p>Most of the time</p> <p>Don't know</p> <p>Refuse to answer</p> <p>[If sometimes or most of the time, ask:]</p> <p><b>How many calories do you try to consume each day?</b></p> <p>Enter number: <i>[numeric]</i></p> <p>Don't know</p> | <p><b>¿Cuenta las calorías que consume diariamente?</b></p> <p>Nunca</p> <p>Algunas veces</p> <p>La mayoría de las veces</p> <p>No sabe</p> <p>Se negó a contestar</p> <p>[Si la respuesta es Algunas veces o La mayoría de las veces, pregunte:]</p> <p><b>¿Cuántas calorías trata de consumir diariamente?</b></p> <p>Escriba el número: <i>[numeric]</i></p> <p>No sabe</p> |

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|  | Refuse to answer  | Se negó a contestar   |
| <b>SUGAR KNOWLEDGE</b><br>OTTAWA HOSPITAL<br>STUDY<br><br><i>SUGAR_KNOW</i><br><i>SUGAR_KNOW_N</i> | <b>What is the “upper limit” or “most” sugar you should consume in one day?</b><br>Enter number of grams (g): [ <i>numeric</i> ]<br>Don't know [valid answer]<br>Refuse to answer | <b>¿Cuál es el “límite superior” o la “mayor” cantidad de azúcar que debería consumir en un día?</b><br>Escriba los gramos (g): [ <i>numeric</i> ]<br>No sabe [respuesta válida]<br>Se negó a contestar |

## SOURCES OF NUTRITION INFORMATION









| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION   |
|---|--|---|
| <b>SOURCES OF NUTRITION INFO</b><br><a href="#">CCHS CFG module</a> and TNT integrated content<br>(adapted to be for 12 months rather than 6)<br><br><i>INFO_[TYPE]</i><br><i>INFO_NONE</i><br><i>INFO_DK</i><br><i>INFO_R</i><br><i>INFO_APPTXT</i><br><i>INFO_OTEXT</i> | <b>In the past 12 months, did you get information on food or nutrition from any of the following sources?</b> (Select all that apply)<br>Health professional (e.g., family doctor, nurse, or dietitian)<br>Alternative health practitioner (e.g., chiropractor, naturopath, homeopath, holistic nutritionist)<br>Health association materials or website (e.g., American Heart Association, America Cancer Society, Academy of Nutrition and Dietetics)<br>Fitness programs / personal trainer<br>Weight loss programs (such as Weight Watchers)<br>Your family, friends, or colleagues<br>MyPlate or the Food Guide Pyramid<br>Government / health agency materials, websites or apps<br>Food company materials, advertisements, websites or apps<br>Nutrition Facts Panels on food products<br>Food product labels<br>Grocery store or pharmacy<br>Magazines, newspapers or books<br>TV or radio<br>General research on the internet<br>Social media or blogs (e.g., Facebook, Twitter)<br>Celebrities (e.g., Gwyneth Paltrow, Food Babe)<br>Mobile app → Which app? [open-ended]<br>Other → Please specify: [open-ended]<br>None of the above<br>Don't know<br>Refuse to answer | <b>En los últimos 12 meses, ¿obtuvo información sobre alimentos o nutrición de cualquiera de las siguientes fuentes?</b> (Seleccione todas las opciones que apliquen)<br>Profesional de la salud (e.g., médico familiar, enfermera o nutricionista)<br>Profesional de medicina alternativa (e.g., quiropráctico, naturópata, homeópata, nutriólogo holístico)<br>Materiales o sitio web de una entidad de salud (e.g., American Heart Association, American Cancer Society, Academy of Nutrition and Dietetics)<br>Programas de acondicionamiento físico / entrenador físico personal<br>Programas para bajar de peso (como Weight Watchers)<br>Su familia, amistades o colegas<br>La Guía Nutricional “Mi Plato” o La Guía Pirámide de Alimentos<br>Gobierno / materiales de una agencia de salud, sitios web o apps<br>Materiales de una compañía de productos alimenticios, anuncios comerciales, sitios web o apps<br>Cuadros de datos sobre nutrición relacionados con productos alimenticios<br>Etiquetas de productos alimenticios<br>Tienda de abarrotes o farmacia<br>Revistas, periódicos o libros<br>Televisión o radio<br>Investigación general en internet<br>Redes sociales o blogs (e.g., Facebook, Twitter)<br>Celebridades (e.g., Gwyneth Paltrow, Food Babe)<br>App móvil → ¿Cuál app? [ <i>respuesta abierta</i> ]<br>Otra → Favor de especificar: [ <i>respuesta abierta</i> ]<br>Ninguna de las anteriores<br>No sabe<br>Se negó a contestar |



|   |   |  |
|---|---|--|
| <b>PUBLIC EDUCATON</b><br><br><i>PUBLIC_ED1</i>   | <b>Do you remember seeing any educational messages or campaigns on healthy eating in the past 12 months?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer   | <b>¿Recuerda haber visto mensajes educativos o campañas sobre alimentación saludable en los últimos 12 meses</b> (Seleccione todas las opciones que apliquen)<br>Sí<br>No<br>No sabe<br>Se negó a contestar  |
| <b>PUBLIC EDUCATON – DESCRIPTION</b><br><br><i>PUBLIC_ED2</i>   | <b>Can you briefly describe the message or campaign?</b><br>[OPEN TEXT FIELD]   | <b>¿Podría describir brevemente el mensaje o la campaña?</b><br>[CAMPO ABIERTO PARA TEXTO]   |
| <b>DOCTOR ADVICE</b><br><br><i>DOCADVICE_[TYPE]</i><br><i>DOCADVICE_NONE</i><br><i>DOCADVICE_DK</i><br><i>DOCADVICE_R</i><br><i>DOCADVICE_OTEXT</i> | <b>Has a doctor ever advised you to do any of the following?</b> (Select all that apply)<br>Lose weight<br>Reduce sodium or salt intake<br>Reduce cholesterol in your diet<br>Other diet advice:<br>None of the above<br>Don't know<br>Refuse to answer | <b>¿Un doctor le ha pedido tomar alguna de las siguientes medidas?</b> (Seleccione todas las opciones que apliquen)<br>Bajar de peso<br>Reducir el consumo de sodio o sal<br>Reducir el colesterol de su dieta<br>Otro consejo alimenticio:<br>Ninguno de los anteriores<br>No sabe<br>Se negó a contestar |

## FOOD PACKAGING & LABELLING

| DOMAIN   | ENGLISH   | SPANISH TRANSLATION   |
|--|---|---|
| <b>NFT USE – Q1</b><br>FROM 2014 FDA HEALTH AND DIET SURVEY<br><br><i>LABEL_USE</i>  | <b>How often do you use nutrition information on food labels when deciding to buy a food product?</b><br>Never<br>Rarely<br>Sometimes<br>Most of the time<br>Always<br>Don't know<br>Refuse to answer | <b>¿Con qué frecuencia consulta la información nutricional de las etiquetas de alimentos al decidir qué producto comprar?</b><br>Nunca<br>Rara vez<br>Algunas veces<br>La mayor parte del tiempo<br>Siempre<br>No sabe<br>Se negó a contestar |
| <b>NFT USE – Q2</b><br>FROM 2014 FDA HEALTH AND DIET SURVEY<br><br><i>LABEL_EASY</i> | <b>How difficult or easy is it to identify <u>unhealthy</u> foods using food labels?</b><br>Very difficult<br>Difficult<br>Neither difficult nor easy<br>Easy<br>Very easy                            | <b>¿Qué tan sencillo o difícil es identificar a los alimentos <u>no saludables</u> usando la información de las etiquetas?</b><br>Muy difícil<br>Difícil<br>Ni fácil ni difícil<br>Fácil  |

|  |   |  |   |                                       |                                     |                        |                       |                                  |                                 |                                       |                                     |                                  |   |                    |                             |                             |                                 |                       |                        |                                   |                                     |   |                                       |                                     |
|--|---|--|---|---------------------------------------|-------------------------------------|------------------------|-----------------------|----------------------------------|---------------------------------|---------------------------------------|-------------------------------------|----------------------------------|---|--------------------|-----------------------------|-----------------------------|---------------------------------|-----------------------|------------------------|-----------------------------------|-------------------------------------|---|---------------------------------------|-------------------------------------|
|  | <p>Don't know<br/>Refuse to answer</p>  | <p>Muy fácil<br/>No sabe<br/>Se negó a contestar</p> |   |                                       |                                     |                        |                       |                                  |                                 |                                       |                                     |                                  |   |                    |                             |                             |                                 |                       |                        |                                   |                                     |   |                                       |                                     |
| <p><b>NFT AWARENESS</b><br/><i>NFT_SEEN1...5</i></p> | <p>PROGRAMMER NOTE: Display label images on screen. Repeat NFT_SEEN, NFT_USE, NFT_UNDERSTAND, and NFT_SUPPORT for each label image.</p> <div style="display: flex; justify-content: space-around;">    </div> <p>One serving of 25 g (4 cookies) contains</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td>Calories<br/>95</td> <td>Saturated Fat<br/>1 g<br/>6%</td> <td>Total fat<br/>4.5 g<br/>5%</td> <td>Sugar<br/>4.5 g<br/>5%</td> <td>Sodium<br/>110 mg<br/>7%</td> </tr> </table> <p>% of the daily value</p> <div style="text-align: center;">  </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>per 30g cereal:</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td><b>16</b><br/>SERVINGS</td> <td>ENERGY<br/>460kJ<br/>110kcal<br/>6%</td> <td>FAT<br/><b>0.7g</b><br/>LOW<br/>2%</td> <td>SATURATES<br/><b>0.1g</b><br/>LOW<br/>1%</td> <td>SUGARS<br/><b>5.1g</b><br/>HIGH<br/>6%</td> <td>SALT<br/><b>0.2g</b><br/>MED<br/>4%</td> </tr> </table> <p><small>% of an adult's reference intake.<br/>Typical values per 100g: Energy 1530kJ/360kcal</small></p> </div> | Calories<br>95                                       | Saturated Fat<br>1 g<br>6%                  | Total fat<br>4.5 g<br>5%              | Sugar<br>4.5 g<br>5%                | Sodium<br>110 mg<br>7% | <b>16</b><br>SERVINGS | ENERGY<br>460kJ<br>110kcal<br>6% | FAT<br><b>0.7g</b><br>LOW<br>2% | SATURATES<br><b>0.1g</b><br>LOW<br>1% | SUGARS<br><b>5.1g</b><br>HIGH<br>6% | SALT<br><b>0.2g</b><br>MED<br>4% | <p>PROGRAMMER NOTE: Display label images on screen. Repeat NFT_SEEN, NFT_USE, NFT_UNDERSTAND, and NFT_SUPPORT for each label image.</p> <div style="display: flex; justify-content: space-around;">    </div> <p>Un porcion de 25 g aporta:</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td>Energía<br/>95 kcal</td> <td>Grasa saturada<br/>1 g<br/>6%</td> <td>Otras grasas<br/>4.5 g<br/>5%</td> <td>Azúcares totales<br/>4.5 g<br/>5%</td> <td>Sodio<br/>110 mg<br/>7%</td> </tr> </table> <p>% de los nutrimentos diarios</p> <div style="text-align: center;">  </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>por 30 g de cereales:</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td><b>16</b><br/>porciones</td> <td>ENERGÍA<br/>460kJ<br/>110kcal<br/>6%</td> <td>GRASAS<br/><b>0.7g</b><br/>BAJO<br/>2%</td> <td>GRASA SATURADA<br/><b>0.1g</b><br/>BAJO<br/>1%</td> <td>AZÚCARES<br/><b>5.1g</b><br/>ALTO<br/>6%</td> <td>SODIO<br/><b>0.2g</b><br/>MEDIO<br/>4%</td> </tr> </table> <p><small>% de los nutrimentos diarios<br/>Valores típicos por 100 g: Energía 1530kJ/360 kcal</small></p> </div> | Energía<br>95 kcal | Grasa saturada<br>1 g<br>6% | Otras grasas<br>4.5 g<br>5% | Azúcares totales<br>4.5 g<br>5% | Sodio<br>110 mg<br>7% | <b>16</b><br>porciones | ENERGÍA<br>460kJ<br>110kcal<br>6% | GRASAS<br><b>0.7g</b><br>BAJO<br>2% | GRASA SATURADA<br><b>0.1g</b><br>BAJO<br>1% | AZÚCARES<br><b>5.1g</b><br>ALTO<br>6% | SODIO<br><b>0.2g</b><br>MEDIO<br>4% |
| Calories<br>95                                       | Saturated Fat<br>1 g<br>6%  | Total fat<br>4.5 g<br>5%                             | Sugar<br>4.5 g<br>5%                        | Sodium<br>110 mg<br>7%                |                                     |                        |                       |                                  |                                 |                                       |                                     |                                  |   |                    |                             |                             |                                 |                       |                        |                                   |                                     |   |                                       |                                     |
| <b>16</b><br>SERVINGS                                | ENERGY<br>460kJ<br>110kcal<br>6%  | FAT<br><b>0.7g</b><br>LOW<br>2%                      | SATURATES<br><b>0.1g</b><br>LOW<br>1%       | SUGARS<br><b>5.1g</b><br>HIGH<br>6%   | SALT<br><b>0.2g</b><br>MED<br>4%    |                        |                       |                                  |                                 |                                       |                                     |                                  |   |                    |                             |                             |                                 |                       |                        |                                   |                                     |   |                                       |                                     |
| Energía<br>95 kcal                                   | Grasa saturada<br>1 g<br>6%   | Otras grasas<br>4.5 g<br>5%                          | Azúcares totales<br>4.5 g<br>5%             | Sodio<br>110 mg<br>7%                 |                                     |                        |                       |                                  |                                 |                                       |                                     |                                  |   |                    |                             |                             |                                 |                       |                        |                                   |                                     |   |                                       |                                     |
| <b>16</b><br>porciones                               | ENERGÍA<br>460kJ<br>110kcal<br>6%   | GRASAS<br><b>0.7g</b><br>BAJO<br>2%                  | GRASA SATURADA<br><b>0.1g</b><br>BAJO<br>1% | AZÚCARES<br><b>5.1g</b><br>ALTO<br>6% | SODIO<br><b>0.2g</b><br>MEDIO<br>4% |                        |                       |                                  |                                 |                                       |                                     |                                  |   |                    |                             |                             |                                 |                       |                        |                                   |                                     |   |                                       |                                     |

|  |                             |
|--|-----------------------------|
| <b>Nutrition Facts</b>                                       |                             |
| Serving Size 4 cookies (23 g)                                |                             |
| Servings per container 11                                    |                             |
| <hr/>  |                             |
| Amount Per Serving   |                             |
| <b>Calories</b> 95   | <b>Calories from Fat</b> 10 |
|  | % Daily Value*              |
| <b>Total Fat</b> 2 g   | 3 %                         |
| Saturated 0.3  |                             |
| Trans 0 g  |                             |
| <b>Cholesterol</b> 0 mg                                      |                             |
| <b>Sodium</b> 110 mg   | 5 %                         |
| <b>Total Carbohydrate</b> 15 g                               | 3 %                         |
| Dietary Fibre 3 g  |                             |
| Sugars 1 g   |                             |
| <b>Protein</b> 3 g   |                             |
| Vitamin A 2 %  | Vitamin C 10 %              |
| Calcium 4 %  | Iron 4 %                    |
| * Percentage Daily Values are based on a 2,000 calorie diet. |                             |

Have you seen this type of food label on packages or in stores...?

*[show image]*

- Never
- Sometimes
- Often
- Don't know
- Refuse to answer

|  |                             |
|--|-----------------------------|
| <b>Nutrition Facts</b>                                       |                             |
| Serving Size 4 cookies (23 g)                                |                             |
| Servings per container 11                                    |                             |
| <hr/>  |                             |
| Amount Per Serving   |                             |
| <b>Calories</b> 95   | <b>Calories from Fat</b> 10 |
|  | % Daily Value*              |
| <b>Total Fat</b> 2 g   | 3 %                         |
| Saturated 0.3  |                             |
| Trans 0 g  |                             |
| <b>Cholesterol</b> 0 mg                                      |                             |
| <b>Sodium</b> 110 mg   | 5 %                         |
| <b>Total Carbohydrate</b> 15 g                               | 3 %                         |
| Dietary Fibre 3 g  |                             |
| Sugars 1 g   |                             |
| <b>Protein</b> 3 g   |                             |
| Vitamin A 2 %  | Vitamin C 10 %              |
| Calcium 4 %  | Iron 4 %                    |
| * Percentage Daily Values are based on a 2,000 calorie diet. |                             |

[NFT shown with English text instead of Spanish text]

¿Ha visto este tipo de etiqueta para productos alimenticios en paquetes o en tiendas...?

*[show image]*

- Nunca
- Algunas veces
- Frecuentemente
- No sabe
- Se negó a contestar

**NFT USE**  
NFT\_USE1...5

PROGRAMMER NOTE: ASK IF NFT\_SEEN= 'sometimes' or 'often'

Have you used this type of food label to choose the types of food you buy?

*[show image]*


- Never
- Sometimes
- Often
- Don't know
- Refuse to answer

PROGRAMMER NOTE: ASK IF NFT\_SEEN= 'sometimes' or 'often'

¿Con que frecuencia usa este tipo de etiqueta de productos alimenticios al escoger qué alimentos comprar?

*[show image]*

- Nunca
- Algunas veces
- Frecuentemente
- No sabe
- Se negó a contestar

|   |   |  |
|---|---|--|
| <p><b>NFT UNDERSTANDING</b></p> <p><i>NFT_UNDERSTANDING 1...5</i></p> | <p><b>Do you find this information...</b><br/> <i>[show image]</i><br/>                 Very hard to understand<br/>                 Hard to understand<br/>                 Neither hard nor easy<br/>                 Easy to understand<br/>                 Very easy to understand<br/>                 Don't know<br/>                 Refuse to answer</p> | <p><b>La información la considera...</b><br/> <i>[show image]</i><br/>                 Muy difícil de entender<br/>                 Difícil de entender<br/>                 Ni fácil ni difícil<br/>                 Fácil de entender<br/>                 Muy fácil de entender<br/>                 No sabe<br/>                 Se negó a contestar</p>   |
| <p><b>NFT SUPPORT</b></p> <p><i>NFT_SUPPORT1...5</i></p>              | <p><b>Would you support or oppose a government policy that would require this type of food label...</b><br/> <i>[show image]</i><br/>                 Support<br/>                 Neutral<br/>                 Oppose<br/>                 Don't know<br/>                 Refuse to answer</p>  | <p><b>¿Apoyaría o se opondría a una política gubernamental que exigiera el uso de este tipo de etiqueta en productos alimenticios?</b><br/> <i>[show image]</i><br/>                 La apoyaría<br/>                 No la apoyaría ni me opondría<br/>                 Me opondría<br/>                 No sabe<br/>                 Se negó a contestar</p> |
| <p><b>FOP SETUP</b></p>   | <p><b>On the next screen, you will see an image of a grocery product. The products will disappear after a few seconds, after which we will ask you a few questions.</b></p> <p><b>Click next when you are ready to see the food product.</b></p>  | <p>Not asked in Spanish version</p>  |
| <p><b>FOP VIEW</b></p>  | <p>[PROGRAMMER NOTE: Randomize each participate to one of 11 images. Each image should be displayed on the screen for 4 seconds].</p>  <p>1.</p>  | <p>Not asked in Spanish version</p>  |

|  |  |  |
|--|--|--|
|  | <p>2. </p> <p>3. </p> <p>4. </p> |  |
|--|--|--|

5.



6.



7.



8.





9.

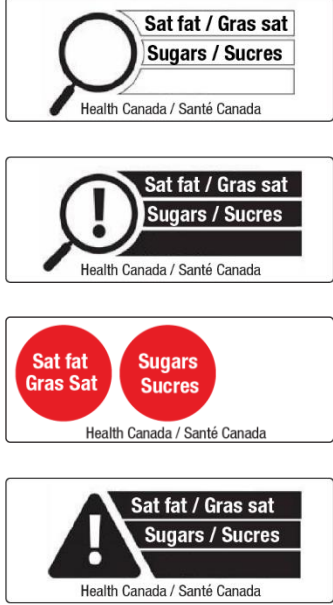


10.



|  |   |                                     |
|--|---|-------------------------------------|
|  | <p>11.</p>   |                                     |
| <p><b>FOP QUESTIONS</b></p> <p><i>AMTSODIUM_[TYPE]</i><br/> <i>AMTFAT_[TYPE]</i><br/> <i>AMTSUGAR_[TYPE]</i></p> | <p>[PROGRAMMER NOTE: RANDOMIZE ORDER OF NEXT 3 QUESTIONS]</p> <p><b>Is this amount of <u>sodium</u> in the product...?</b></p> <p>Low<br/>         Moderate<br/>         High<br/>         Don't know<br/>         Refuse to answer</p> <p><b>Is this amount of <u>saturated fat</u> in the product ....?</b></p> <p>Low<br/>         Moderate<br/>         High<br/>         Don't know<br/>         Refuse to answer</p> <p><b>Is this amount of <u>sugar</u> in the product ....?</b></p> <p>Low<br/>         Moderate<br/>         High<br/>         Don't know<br/>         Refuse to answer</p> | <p>Not asked in Spanish version</p> |
| <p><b>FOP RATE</b></p> <p><i>HIGH_SYMB</i></p>   | <p>PROGRAMMER NOTE: Randomize the order the options appear on the screen.</p> <p><b>Which is the best symbol for informing consumers that a product is 'high in' saturated fat and sugar?</b></p>    | <p>Not asked in Spanish version</p> |



|   |   |  |
|---|---|--|
|   |  <p>Health Canada / Santé Canada</p> <p>Health Canada / Santé Canada</p> <p>Health Canada / Santé Canada</p> <p>Health Canada / Santé Canada</p> <p>Don't know</p> <p>Refuse to answer</p> |  |
| <p><b>NFT INFLUENCE</b></p> <p><i>LABEL_OVERALL</i></p> | <p><b>Overall, how much do food labels influence what you eat?</b></p> <p>No influence at all</p> <p>A little influence</p> <p>A lot of influence</p> <p>Don't know</p> <p>Refuse to answer</p>   | <p><b>En general, ¿qué tanta influencia tienen las etiquetas de productos alimenticios en los alimentos que consume?</b></p> <p>Ningún tipo de influencia</p> <p>Un poco de influencia</p> <p>Mucha influencia</p> <p>No sabe</p> <p>Se negó a contestar</p> |

## RETAIL ENVIRONMENT

| DOMAIN<br>SOURCE   | ENGLISH  | SPANISH TRANSLATION   |
|--|--|---|
| <b>SCHOOL RETAIL</b><br><br>SCHOOL_[TYPE]_NA<br>SCHOOL_[TYPE]_FREE<br>SCHOOL_[TYPE]_BUY<br>SCHOOL_[TYPE]_DK<br>SCHOOL_[TYPE]_R | PROGRAMMER NOTE: Ask only if <i>STUDENT=Yes full/part time</i><br>[Please use table format]<br><b>Please tell us if the following food or drinks are available at your <u>SCHOOL/COLLEGE/UNIVERSITY</u>.</b> Do not include items you bring from home.<br><br>Junk food<br>Fresh fruit or vegetables<br>Other healthy snacks<br>Sugary drinks<br>Clean drinking water<br><br>Not available / Available for free / Available to buy / Don't Know / Refuse to answer | PROGRAMMER NOTE: Ask only if <i>STUDENT=Sí full/part time</i><br>[Please use table format]<br><b>Favor de indicarnos si los siguientes alimentos o bebidas se encuentran disponibles en su <u>ESCUELA</u>.</b> No incluya artículos que trae de su casa.<br><br>Comida chatarra<br>Frutas o verduras frescas<br>Otros refrigerios saludables<br>Bebidas azucaradas<br>Agua potable limpia<br><br>No está disponible / Disponible sin costo / Disponible para su compra / No sabe / Se negó a contestar        |
| <b>WORK RETAIL</b><br><br>WORK_[TYPE]_NA<br>WORK_[TYPE]_FREE<br>WORK_[TYPE]_BUY<br>WORK_[TYPE]_DK<br>WORK_[TYPE]_R             | PROGRAMMER NOTE: Ask only if <i>WORK=yes full/part time</i><br>[Please use table format]<br><b>Please tell us if the following food or drinks are available at your <u>WORKPLACE</u>.</b> Do not include items you bring from home.<br><br>Junk food<br>Fresh fruit or vegetables<br>Other healthy snacks<br>Sugary drinks<br>Clean drinking water<br><br>Not available / Available for free / Available to buy / Don't Know / Refuse to answer                    | PROGRAMMER NOTE: Ask only if <i>WORK=yes full/part time</i><br>[Please use table format]<br><b>Favor de indicarnos si los siguientes alimentos o bebidas se encuentran disponibles en su <u>LUGAR DE TRABAJO</u>.</b> No incluya artículos que trae de su casa.<br><br>Comida chatarra<br>Frutas o verduras frescas<br>Otros refrigerios saludables<br>Bebidas azucaradas<br>Agua potable limpia<br><br>No está disponible / Disponible sin costo / Disponible para su compra / No sabe / Se negó a contestar |
| <b>HOME RETAIL</b><br><br>HOME_[TYPE]_NA<br>HOME_[TYPE]_BUY<br>HOME_[TYPE]_DK<br>HOME_[TYPE]_R                                 | PROGRAMMER NOTE: Ask only if <i>WORK=yes full/part time</i><br>[Please use table format]<br><b>Please tell us if stores with the following food or drinks are available within a <u>5-MINUTE WALK FROM YOUR HOME</u>.</b><br><br>Junk food<br>Fresh fruit or vegetables<br>Other healthy snacks<br>Sugary drinks<br>Clean drinking water   | PROGRAMMER NOTE: Ask only if <i>WORK=yes full/part time</i><br>[Please use table format]<br><b>Favor de indicarnos si las tiendas que venden los siguientes alimentos o bebidas se encuentran disponibles a <u>5 MINUTOS CAMINANDO DESDE SU CASA</u>.</b><br><br>Comida chatarra<br>Fruta o verduras frescas<br>Otros refrigerios saludables<br>Bebidas azucaradas<br>Agua potable limpia   |

|  |  |  |
|--|--|--|
|  | Not available / Available to buy / Don't know / Refuse to answer   | No está disponible / Disponible para su compra / No sabe / Se negó a contestar   |
| <b>NUTRITION INFO IN GROCERY STORES</b><br><br><i>INFO_GROCERY</i> | <b>In your opinion, is nutrition information easy or hard to find in <u>grocery stores</u>?</b><br>Very hard to find<br>Hard to find<br>Neither hard nor easy<br>Easy to find<br>Very easy to find<br>Don't know<br>Refuse to answer | <b>En su opinión, ¿la información sobre nutrición es fácil o difícil de encontrar en <u>tiendas de abarrotes</u>?</b><br>Muy difícil de encontrar<br>Difícil de encontrar<br>Ni fácil ni difícil<br>Fácil de encontrar<br>Muy fácil de encontrar<br>No sabe<br>Se negó a contestar |

## MENU LABELLING

| DOMAIN<br>SOURCE  | ENGLISH   | SPANISH TRANSLATION   |
|---|---|---|
| <b>LAST RESTAURANT VISIT</b><br>FCMS<br><br><i>REST_VISIT</i>   | <b>When was the last time you visited a restaurant (including a fast-food outlet or coffee shop)?</b><br>Within 24 hours<br>Within last 7 days<br>Within last month<br>Within last 3 months<br>Within last 6 months<br>Longer than 6 months<br>Don't know<br>Refuse to answer | <b>¿Cuándo fue la última vez que comió en un restaurante (incluidos establecimientos de comida rápida o cafeterías)?</b><br>En las últimas 24 horas<br>En los últimos 7 días<br>En el último mes<br>En los últimos 3 meses<br>En los últimos 6 meses<br>Hace más de 6 meses<br>No sabe<br>Se negó a contestar |
| <b>MENU LABELLING – NOTICING</b><br>FCMS (ADAPTED)<br><br><i>REST_INFO</i>  | [PROGRAMMER NOTE: If last restaurant visit was in past 6 months]<br><b>The last time you visited a restaurant, did you notice any nutrition information?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer   | [PROGRAMMER NOTE: If last restaurant visit was in past 6 months]<br><b>La última vez que comió en un restaurante, ¿vio en algún lugar información nutricional?</b><br>Sí<br>No<br>No sabe<br>Se negó a contestar  |
| <b>MENU LABELLING – NOTICING LOCATION</b><br><br><i>REST_INFO_[TYPE]</i><br><i>REST_INFO_DK</i><br><i>REST_INFO_R</i> | [If yes to noticing:]<br><b>Where was this information located? (Select all that apply)</b><br>On the menu/menu board<br>On a poster or sign<br>Next to food item   | [Si la respuesta es Sí:]<br><b>¿Dónde se encontraba esa información? (Seleccione todas las opciones que apliquen)</b><br>En el menú / pizarrón del menú<br>En un póster o letrero   |

|  |  |   |
|--|--|---|
| <p><i>REST_INFO_OTEXT</i></p>  | <p>On the item packaging/wrapper<br/> On the tray liner<br/> On a napkin<br/> In a pamphlet or brochure<br/> On a computer screen / At a kiosk<br/> Other → Please specify: [<i>open-ended</i>]<br/> Don't know<br/> Refuse to answer</p>  | <p>Junto al nombre del alimento<br/> En el empaque / envoltorio del alimento<br/> En la manteleta de papel de la charola<br/> En una servilleta<br/> En un panfleto o folleto<br/> En la pantalla de una computadora / En un kiosco<br/> Otro → Favor de especificar: [respuesta abierta]<br/> No sabe<br/> Se negó a contestar</p>   |
| <p><b>MENU LABELLING – ORDER INFLUENCE</b><br/> FCMS<br/> <i>REST_INFO_INFL</i></p>  | <p>[If yes to noticing:]<br/> <b>Did the nutrition information influence what you ordered?</b><br/> Yes<br/> No<br/> Don't know<br/> Refuse to answer</p>  | <p>[Si la respuesta es Sí:]<br/> <b>¿La información sobre nutrición influyó en qué alimentos ordenó?</b><br/> Sí<br/> No<br/> No sabe<br/> Se negó a contestar</p>  |
| <p><b>MENU LABELLING – IMPACT</b><br/> FCMS<br/> <i>REST_ACT_[TYPE]</i><br/> <i>REST_ACT_NONE</i><br/> <i>REST_ACT_DK</i><br/> <i>REST_ACT_R</i></p> | <p>[PROGRAMMER NOTE: If visited restaurant in past 6 months]<br/> <b>In the past 6 months, have you done any of the following because of nutrition information in restaurants?</b> (Select all that apply)<br/> Ordered something different<br/> Ate less of the food you ordered<br/> Changed which restaurants you visit<br/> Ate at restaurants less often<br/> None of the above<br/> Don't know<br/> Refuse to answer</p> | <p>[PROGRAMMER NOTE: If visited restaurant in past 6 months]<br/> <b>En los últimos 6 meses, ¿ha tomado alguna de las siguientes decisiones debido a la información nutricional de los restaurantes?</b> (Seleccione todas las opciones que apliquen)<br/> Ordenó algo diferente<br/> No comió todos los alimentos que ordenó<br/> Cambió de restaurante<br/> Comió en restaurantes con menor frecuencia<br/> Ninguna de las anteriores<br/> No sabe<br/> Se negó a contestar</p> |

## FOOD GUIDE / DIETARY RECOMMENDATIONS

| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION   |
|---|--|---|
| <b>FOOD GUIDE – LAST USE</b><br>OTTAWA AND CFDR<br>(ADAPTED TIME ANCHORS)<br><br><i>CFG_LOOK</i>  | <b>When was the <u>last time</u> you looked at MyPlate or the Food Guide Pyramid, if ever?</b><br>In the last month<br>In the last 6 months<br>In the last year<br>More than a year ago<br>Never<br>Don't know<br>Refuse to answer   | <b>¿Cuándo fue la <u>última vez</u> que leyó La Guía Nutricional “Mi Plato” o La Guía Pirámide de Alimentos, si alguna vez tuvo la oportunidad?</b><br>En el último mes<br>En los últimos 6 meses<br>En el último año<br>Hace más de un año<br>Nunca<br>No sabe<br>Se negó a responder  |
| <b>FOOD GUIDE – USE</b><br>CCHS CFG MODULE<br>(ADAPTED RESPONSE OPTIONS TO SIMPLIFY YOU/HOUSEHOLD)<br><br><i>CFG_USE_[TYPE]</i><br><i>CFG_USE_NONE</i><br><i>CFG_USE_DK</i><br><i>CFG_USE_R</i><br><i>CFG_USE_OTEXT</i> | [PROGRAMMER NOTE: Skip if “never” looked at CFG]<br><b>Have you <u>ever</u> used information from MyPlate or the Food Guide Pyramid?</b><br>(Select all that apply)<br>To choose foods<br>To determine how much you need to eat every day<br>To plan meals or to help with grocery shopping<br>To assess how well you are eating<br>To manage your weight<br>To help make healthy choices when eating away from home<br>Other → Please specify: [ <i>open-ended</i> ]<br>None of the above<br>Don't know<br>Refuse to answer | [PROGRAMMER NOTE: Skip if “never” looked at CFG]<br><b>¿Ha usado <u>alguna vez</u> información de La Guía Nutricional “Mi Plato” o La Guía Pirámide de Alimentos para?</b> (Seleccione todas las opciones que apliquen)<br>Seleccionar alimentos<br>Determinar cuánto necesita comer todos los días<br>Planificar sus comidas o ayudarle a comprar los alimentos<br>Evaluar qué tan bien está comiendo<br>Controlar su peso<br>Ayudarle a tomar decisiones saludables al comer fuera de casa<br>Otra → Favor de especificar: [respuesta abierta]<br>Ninguna de las anteriores<br>No sabe<br>Se negó a responder |

## FOOD MARKETING

| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION  |
|---|--|--|
| <b>EXPOSURE TO MARKETING – SUGARY DRINKS</b><br><br>MKTG_SSB_[TYPE]<br>MKTG_SSB_NONE<br>MKTG_SSB_DK<br>MKTG_SSB_R<br>MKTG_SSB_OTEXT | <p><i>SUGARY DRINKS are drinks that contain added sugar, like pop, fruit drinks, sports drinks, energy drinks, chocolate milk, and specialty coffees that have added sugar.</i></p> <p><b>In the last 30 days, have you seen or heard any advertisements or promotions for <u>SUGARY DRINKS</u> in the following places?</b> (Select all that apply)</p> <p>TV ads<br/> Radio ads<br/> Online / internet ads<br/> Mobile app / video game<br/> Social media (e.g., Twitter, Facebook, Snapchat.)<br/> In a text message<br/> Magazine or newspaper<br/> Billboard or outdoor sign (e.g., posters, transit ads)<br/> In movies<br/> At school / on campus<br/> Signs or displays in stores or restaurants<br/> At a recreation/community centre<br/> Sports event or sponsorship (e.g., logos or links with events, teams or athletes)<br/> Giveaways, samples or special offers<br/> Other → Please specify: [<i>open-ended</i>]<br/> I haven't seen any marketing for sugary drinks in the last 30 days<br/> Don't know<br/> Refuse to answer</p> | <p><i>LAS BEBIDAS AZUCARADAS son aquellas que contienen azúcar añadida, como las refrescos/gaseosas, bebidas de fruta, deportivas, energéticas, leche con chocolate y cafés de especialidad a los cuales se les añade azúcar.</i></p> <p><b>En los últimos 30 días, ¿ha visto o ha escuchado algún tipo de comercial de <u>BEBIDAS AZUCARADAS</u> en los siguientes lugares?</b> (Seleccione todas las opciones que apliquen)</p> <p>Comerciales de televisión<br/> Comerciales de radio<br/> Comerciales en línea / Internet<br/> Apps móviles / videojuegos<br/> Redes sociales (e.g., Twitter, Facebook, Snapchat)<br/> En un mensaje de texto<br/> Revista o periódico<br/> Anuncio espectacular o letrero en exteriores (e.g., pósters, anuncios en vías urbanas)<br/> En películas de cine<br/> En la escuela / universidad<br/> Letreros o exhibidores de tiendas o restaurantes<br/> En un centro recreativo / comunitario<br/> Evento o patrocinio deportivo (e.g., logos o ligas a eventos, equipos o atletas)<br/> Regalos, muestras u ofertas especiales<br/> Otro → Favor de especificar: [respuesta abierta]<br/> No he visto ningún tipo de comercialización de bebidas azucaradas en los últimos 30 días<br/> No sabe<br/> Se negó a responder</p> |
| <b>EXPOSURE TO MARKETING – FAST FOOD</b><br><br>MKTG_FF_[TYPE]<br>MKTG_FF_NONE<br>MKTG_FF_DK<br>MKTG_FF_R<br>MKTG_FF_OTEXT          | <p><b>In the last 30 days, have you seen or heard any advertisements or promotions for <u>FAST FOOD</u> in the following places?</b> (Select all that apply)</p> <p>TV ads<br/> Radio ads<br/> Online / internet ads (including YouTube)<br/> Mobile app / video game<br/> Social media (e.g., Twitter, Facebook, Snapchat)<br/> In a text message<br/> Magazine or newspaper<br/> Billboard or outdoor sign (e.g., posters, transit ads)</p>  | <p><b>En los últimos 30 días, ¿ha visto o escuchado algún tipo de comercial de <u>COMIDA RÁPIDA</u> en los siguientes lugares??</b> (Seleccione todas las opciones que apliquen)</p> <p>Comerciales de televisión<br/> Comerciales de radio<br/> Comerciales en línea / Internet (incluido YouTube)<br/> Apps móviles / videojuegos<br/> Redes sociales (e.g., Twitter, Facebook, Snapchat)<br/> En un mensaje de texto<br/> Revista o periódico</p>   |

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|  | <p>In movies<br/>At school / on campus<br/>Signs or displays in stores or restaurants<br/>At a recreation/community centre<br/>Sports event or sponsorship (e.g., logos or links with events, teams or athletes)<br/>Giveaways, samples or special offers<br/>Other → Please specify: [<i>open-ended</i>]<br/>I haven't seen any marketing for fast food in the last 30 days<br/>Don't know<br/>Refuse to answer</p> | <p>Anuncio espectacular o letrero en exteriores (e.g., pósters, anuncios en vías urbanas)<br/>En películas de cine<br/>En la escuela / universidad<br/>Letreros o exhibidores de tiendas o restaurantes<br/>En un centro recreativo / comunitario<br/>Evento o patrocinio deportivo (e.g., logos o ligas a eventos, equipos o atletas)<br/>Regalos, muestras u ofertas especiales<br/>Otro → Favor de especificar: [respuesta abierta]<br/>No he visto ningún tipo de comercialización de comida rápida en los últimos 30 días<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>PARENT BUY – SSB</b><br/><i>SSB_CHILD_ASK</i></p>                      | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>In the last 30 days, have any of your children asked you to buy <u>sugary drinks</u>?</b><br/>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p>   | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>En los últimos 30 días, ¿alguno de sus hijos le pidió que comprara bebidas azucaradas?</b><br/>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>PARENT BUY – FAST FOOD</b><br/><i>FF_CHILD_ASK</i></p>                 | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>In the last 30 days, have any of your children asked you to buy <u>fast food</u>?</b><br/>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p>   | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>En los últimos 30 días, ¿alguno de sus hijos le pidió que comprara <u>comida rápida</u>?</b><br/>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>EXPOSURE TO MARKETING – PARENTS – Q1</b><br/><i>MKTG_CHILD_ASK</i></p> | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>In the last 30 days, have any of your children asked you to buy <u>any food or drinks that include pictures or characters from children's movies or TV shows (including cartoons and action movies)</u>?</b><br/>Yes<br/>No<br/>Don't know<br/>Refuse to answer</p>  | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>En los últimos 30 días, ¿alguno de sus hijos le pidió que comprara <u>algún alimento o bebida con imágenes o personajes de películas o programas de televisión infantiles</u> (incluidas caricaturas y películas de acción)?</b><br/>Sí<br/>No<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>EXPOSURE TO MARKETING – PARENTS – Q2</b><br/><i>MKTG_CHILD_BUY</i></p> | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>In the last 30 days, <u>have you bought</u> any food or drinks that include pictures or characters from children's movies or TV shows (including cartoons and action movies)?</b><br/>Yes<br/>No<br/>Don't know</p>  | <p>[PROGRAMMER NOTE: If at least 1 child in household]<br/><b>En los últimos 30 días, ¿<u>ha comprado</u> algún alimento o bebida con imágenes o personajes de películas o programas de televisión infantiles (incluidas caricaturas y películas de acción)?</b><br/>Sí<br/>No<br/>No sabe</p>   |

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|  | Refuse to answer   | Se negó a responder  |
| <b>CHILD – TOY</b><br><i>MKTG_CHILD_TOY</i>          | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>Do any of your children own any <u>'happy meal' toys or other toys</u> from fast-food restaurants?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer  | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>¿Alguno de sus hijos tiene <u>juguets de 'cajita feliz' o algún otro juguete</u> de restaurantes de comida rápida?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder   |
| <b>CHILD – PRODUCTS</b><br><i>MKTG_CHILD_PRODUC</i>  | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>Do any of your children own any <u>clothing, posters, stickers, or other products</u> that include a brand of sugary drink or fast-food restaurant?</b><br>Yes<br>No<br>Don't know<br>Refuse to answer   | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>¿Alguno de sus hijos tiene <u>ropa, pósters, pegatinas o demás productos</u> con la marca de una bebida azucarada o de un restaurante de comida rápida?</b><br>Sí<br>No<br>No sabe<br>Se negó a responder  |
| <b>CHILD – ADS – SSB</b><br><i>MKTG_CHILD_SSB_AD</i> | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>In the last 30 days, when watching TV, videos, or movies with your children how often did you see or hear advertisements for SUGARY DRINKS, like pop, fruit drinks, sports drinks, or energy drinks?</b><br>Not at all<br>Rarely<br>Sometimes<br>Often<br>All the time<br>I haven't watched TV, videos, or movies with my children in the last 30 days<br>Don't know<br>Refuse to answer | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>En los últimos 30 días, al ver televisión, videos o películas con sus hijos, ¿con qué frecuencia vieron o escucharon anuncios de BEBIDAS AZUCARADAS, como refrescos/gaseosas, bebidas de frutas, bebidas deportivas o energéticas?</b><br>Ninguna vez<br>Rara vez<br>Algunas veces<br>Frecuentemente<br>Todo el tiempo<br>No he visto televisión, videos ni películas con mis hijos en los últimos 30 días<br>No sabe<br>Se negó a responder |
| <b>CHILD – ADS – FF</b><br><i>MKTG_CHILD_FF_AD</i>   | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>In the last 30 days, when watching TV, videos, or movies with your children, how often did you see or hear advertisements for FAST FOOD restaurants?</b><br>Not at all<br>Rarely<br>Sometimes<br>Often<br>All the time<br>I haven't watched TV, videos, or movies with my children in the last 30 days<br>Don't know<br>Refuse to answer   | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>En los últimos 30 días, al ver televisión, videos o películas con sus hijos, ¿con qué frecuencia vieron o escucharon anuncios de restaurantes de COMIDA RÁPIDA?</b><br>Ninguna vez<br>Rara vez<br>Algunas veces<br>Frecuentemente<br>Todo el tiempo<br>No he visto televisión, videos ni películas con mis hijos en los últimos 30 días<br>No sabe<br>Se negó a responder  |



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| <b>CONCERN ABOUT CHILD'S EXPOSURE TO MARKETING</b><br><br><i>MKTG_CHILD_CONCERN</i><br><i>N</i> | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>Are you concerned about the amount of marketing for sugary drinks and fast food that your children see?</b><br>Not at all concerned<br>A little concerned<br>Somewhat concerned<br>Very concerned<br>Don't know<br>Refuse to answer | [PROGRAMMER NOTE: If at least 1 child in household]<br><b>¿Le preocupa la cantidad de comerciales de bebidas azucaradas y comida rápida que ven sus hijos?</b><br>No me preocupa para nada<br>Me preocupa muy poco<br>Me preocupa poco<br>Me preocupa mucho<br>No sabe<br>Se negó a responder |
|---|---|---|

## PRICE / TAXATION

| DOMAIN<br>SOURCE                           | ENGLISH  | SPANISH TRANSLATION   |
|--|--|---|
| <b>SUGAR TAX</b><br><br><i>DRINKS_COST</i> | <b>Do drinks with sugar (e.g., Coke) cost more than drinks without sugar (e.g., diet coke/light) in the US?</b><br>No<br>Yes – a little more<br>Yes – a lot more<br>Don't know<br>Refuse to answer | <b>Las bebidas azucaradas (e.g., Coca-cola) son más caras que las bebidas sin azúcar (e.g., Coca-cola dietetica) en los Estados Unidos?</b><br>No<br>Sí, un poco más<br>Sí, mucho más<br>No sabe<br>Se negó a responder |

## POLICY SUPPORT

| DOMAIN<br>SOURCE  | ENGLISH  | SPANISH TRANSLATION   |
|---|--|---|
| <p><b>POLICY SUPPORT</b><br/>(items in second list from Policy Interventions to Reduce Obesity – Knowledge, Attitudes and Beliefs Survey of the Public (Raine))</p> <p><i>POL_CAL_REST</i><br/><i>POL_CAL_SCH</i><br/><i>POL_TAX_SSB</i><br/><i>POL_TAX_SUB</i><br/><i>POL_TAX_SUGAR</i><br/><i>POL_TAX_SALT</i><br/><i>POL_FV_SUB</i><br/><i>POL_MAX_SALT</i><br/><i>POL_SCH_PROG</i><br/><i>POL_SCH_STND</i><br/><i>POL_ZONE_FF</i><br/><i>POL_ZONE_CONV</i><br/><i>POL_ALC</i><br/><i>POL_BAN_SSB</i><br/><i>POL_BAN_UNHLTH</i><br/><i>POL_BAN_FOOD</i><br/><i>POL_BAN_ALL</i><br/><i>POL_RESTR_MAXSSB</i><br/><i>POL_RESTR_SPONS</i><br/><i>POL_BAN_TOYFF</i><br/><i>POL_WATERMILK_CHI</i><br/><i>LDF</i></p> | <p><b>We are interested in your opinion about food policies that could be implemented. For each statement, please indicate whether you would support or oppose the policy.</b></p> <p><b>Would you support or oppose a government policy that would require...</b></p> <p>Support<br/>Neutral<br/>Oppose<br/>Don't know<br/>Refuse to answer</p> <p>[PROGRAMMER NOTE: RANDOMIZE ORDER OF ITEMS IN LIST]</p> <p>Calorie amounts on menus of chain restaurants<br/>Calorie amounts on menus in school cafeterias<br/>Taxes on sugary drinks<br/>Taxes on sugary drinks IF the money was spent on subsidizing healthy foods<br/>Taxes on foods with high sugar<br/>Taxes on foods with high salt<br/>Subsidies to reduce the price of fresh fruit and vegetables<br/>A maximum limit on salt levels in pre-packaged foods<br/>Free breakfast or lunch programs in schools<br/>Nutrition standards for school cafeterias<br/>Zoning to restrict the number of fast food restaurants near schools<br/>Zoning to restrict the number of convenience stores near schools<br/>Nutrition Facts Panels (e.g., calories) on alcoholic beverages<br/>A ban on marketing sugary drinks to children<br/>A ban on marketing unhealthy food and beverages to children<br/>A ban on marketing all food and beverages to children<br/>A ban on all marketing to children (i.e. toys, entertainment, food and beverages)<br/>Restrictions on maximum size (e.g., max of 13 fl oz) of single-serve soft drink cans and bottles<br/>Restrictions on sponsorship of sporting events and teams by food companies such as Coca Cola and McDonalds.</p> | <p><b>Nos interesa su opinión sobre las políticas alimentarias que se podrían implementar. Por favor indique para cada enunciado si apoyaría o se opondría a la política.</b></p> <p><b>Apoyaría o se opondría a una política gubernamental que exigiera...</b></p> <p>La apoyaría<br/>No la apoyaría ni me opondría<br/>Me opondría<br/>No sabe<br/>Se negó a responder</p> <p>[PROGRAMMER NOTE: RANDOMIZE ORDER OF ITEMS IN LIST]</p> <p>Que los menús de las cadenas de restaurantes incluyeran la cantidad de calorías de los alimentos<br/>Que los menús de cafeterías escolares incluyeran la cantidad de calorías de los alimentos<br/>Impuestos para bebidas azucaradas<br/>Impuestos para bebidas azucaradas SI el dinero se gastara en subsidiar alimentos saludables<br/>Impuestos para alimentos con alto contenido de azúcar<br/>Impuestos para alimentos con alto contenido de sal<br/>Subsidios para reducir el precio de frutas y verduras frescas<br/>Un límite máximo para los niveles de sal de alimentos preempaquetados<br/>La implementación de programas de desayunos o comidas escolares<br/>La implementación de estándares de nutrición para cafeterías escolares<br/>Que regulara el uso de suelo para restringir la cantidad de restaurantes de comida rápida cerca de escuelas<br/>Que regulara el uso de suelo para restringir la cantidad de tiendas de conveniencia cerca de escuelas<br/>El uso de cuadros de datos de nutrición (e.g. calorías) en bebidas alcohólicas<br/>Prohibir la publicidad de bebidas azucaradas para niños<br/>Prohibir la publicidad de alimentos y bebidas que dañan la salud de los niños<br/>Prohibir la publicidad de todo alimento y bebida para niños<br/>Prohibir toda publicidad dirigida a los niños (i.e., juguetes, entretenimiento, alimentos y bebidas)</p> |

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|   | <p>A ban on the use toys, vouchers or competitions as part of children’s meals at fast-food restaurants</p> <p>Requiring that water or milk are the default drink in children’s fast-food ‘meal deals’.</p>  | <p>Solo permitir hasta cierto tamaño (por ejem., máximo de 13 fl oz) los refrescos que vienen en latas o botellas para una sola persona.</p> <p>La implementación de restricciones de patrocinio de eventos y equipos deportivos de parte de compañías de alimentos tales como Coca Cola y McDonalds</p> <p>Prohibir el uso de juguetes, cupones o concursos durante la comida de los niños en restaurantes de comida rápida</p> <p>Que el agua o la leche fuera la bebida usual en los “paquetes de comida” para niños de restaurantes de comida rápida</p> |
| <p><b>MARKETING AGE RESTRICTION</b></p> <p><i>DEF_CHILD_BAN</i></p> | <p><b>How would you define ‘children’ for a ban on marketing food and beverages to children?</b></p> <p>12 years and under</p> <p>14 years and under</p> <p>16 years and under</p> <p>17 years and under</p> <p>The ban should apply to people of all ages</p> <p>I do not think marketing should be banned at all</p> <p>Don’t know</p> <p>Refuse to answer</p> | <p><b>¿Cómo definiría “niños” para efectos de prohibir la publicidad de alimentos y bebidas para niños?</b></p> <p>12 años o menos</p> <p>14 años o menos</p> <p>16 años o menos</p> <p>17 años o menos</p> <p>La prohibición debería aplicar a personas de todas las edades</p> <p>No creo que la comercialización se debiera prohibir en ningún caso</p> <p>No sabe</p> <p>Se negó a responder</p>   |

## GENERAL HEALTH STATUS &amp; MENTAL HEALTH

| DOMAIN<br>SOURCE  | ENGLISH   | SPANISH TRANSLATION   |
|---|---|---|
| <b>FRUIT CONSUMPTION</b><br>BRFSS<br><br>FRUIT_PREFER<br>FRUIT_DAY_NUM<br>FRUIT_DAY_DK_R<br><br>(DAY/WEEK/MONTH/YEAR) | <p><b>Not including juices, how often did you eat fruit?</b><br/> <i>INCLUDE FRESH, FROZEN OR CANNED FRUIT. DO NOT INCLUDE DRIED FRUITS.</i></p> <p><b>Do you prefer to answer by the number of times per day, week, month or year?</b><br/>           Day<br/>           Week<br/>           Month<br/>           Year<br/>           Don't know<br/>           Refuse to answer</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/> <b>Enter the number of times you eat fruit per day:</b><br/>           ___ per day<br/>           Don't know<br/>           Refuse to answer</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/> <b>Enter the number of times you eat fruit per week:</b><br/>           ___ per week<br/>           Don't know<br/>           Refuse to answer</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/> <b>Enter the number of times you eat fruit per month:</b><br/>           ___ per month<br/>           Don't know<br/>           Refuse to answer</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/> <b>Enter the number of times you eat fruit per year:</b><br/>           ___ per year<br/>           Don't know<br/>           Refuse to answer</p> | <p><b>Sin contar los jugos, ¿con qué frecuencia come frutas?</b><br/> <i>INCLUYA LA FRUTA FRESCA, CONGELADA O ENLATADA. NO INCLUYA FRUTAS SECAS.</i></p> <p><b>¿Prefiere responder usando el número de veces al día, a la semana, al mes o al año?</b><br/>           Al día<br/>           A la semana<br/>           Al mes<br/>           Al año<br/>           No sabe<br/>           Se negó a responder</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/> <b>Escriba el número de veces que usted come fruta al día:</b><br/>           ___ al día<br/>           No sabe<br/>           Se negó a responder</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/> <b>Escriba el número de veces que usted come fruta a la semana:</b><br/>           ___ a la semana<br/>           No sabe<br/>           Se negó a responder</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/> <b>Escriba el número de veces que usted come fruta al mes:</b><br/>           ___ al mes<br/>           No sabe<br/>           Se negó a responder</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/> <b>Escriba el número de veces que usted come fruta al año:</b><br/>           ___ al año<br/>           No sabe<br/>           Se negó a responder</p> |

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| <p><b>FRUIT JUICE CONSUMPTION</b><br/>BRFSS</p> <p>JUICE_PREFER<br/>JUICE_DAY_NUM<br/>JUICE_DAY_DK_R</p> <p>(DAY/WEEK/MONTH/YEAR)</p> | <p><b>Not including fruit-flavored drinks or fruit juices with added sugar, how often did you drink 100% fruit juice such as apple or orange juice?</b></p> <p><u>DO NOT INCLUDE</u> FRUIT-FLAVORED DRINKS WITH ADDED SUGAR LIKE CRANBERRY COCKTAIL, HI-C, LEMONADE, KOOL-AID, GATORADE, TAMPICO, AND SUNNY DELIGHT.<br/><u>INCLUDE ONLY</u> 100% PURE JUICES OR 100% JUICE BLENDS.</p> <p><b>Do you prefer to answer by the number of times per day, week, month or year?</b></p> <p>Day<br/>Week<br/>Month<br/>Year<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/><b>Enter the number of times you drink 100% fruit juice per day:</b><br/>___ per day<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/><b>Enter the number of times you drink 100% fruit juice per week:</b><br/>___ per week<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/><b>Enter the number of times you drink 100% fruit juice per month:</b><br/>___ per month<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/><b>Enter the number of times you drink 100% fruit juice per year:</b><br/>___ per year<br/>Don't know<br/>Refuse to answer</p> | <p><b>Sin incluir bebidas con sabor a fruta ni jugos de frutas a los que se agrega azúcar, ¿con qué frecuencia bebió jugo 100% de fruta como jugo de manzana o naranja?</b></p> <p><u>NO INCLUYA</u> BEBIDAS CON SABOR A FRUTA A LAS QUE SE AGREGA AZÚCAR, COMO BEBIDAS CON ARÁNDANO (CRANBERRY COCKTAIL), HI-C, LEMONADE, KOOL-AID, GATORADE, TAMPICO Y SUNNY DELIGHT. <u>INCLUYA SOLAMENTE</u> JUGOS 100% PUROS O MEZCLAS DE JUGOS 100% PUROS.</p> <p><b>¿Prefiere responder usando el número de veces al día, a la semana, al mes o al año?</b></p> <p>Al día<br/>A la semana<br/>Al mes<br/>Al año<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/><b>Escriba el número de veces que usted toma jugo 100% de fruta al día:</b><br/>___ al día<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/><b>Escriba el número de veces que usted toma jugo 100% de fruta a la semana:</b><br/>___ a la semana<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/><b>Escriba el número de veces que usted toma jugo 100% de fruta al mes:</b><br/>___ al mes<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/><b>Escriba el número de veces que usted toma jugo 100% de fruta al año:</b><br/>___ al año<br/>No sabe<br/>Se negó a responder</p> |
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| <p><b>SALAD CONSUMPTION</b><br/>BRFSS</p> <p>SALAD_PREFER<br/>SALAD_DAY_NUM<br/>SALAD_DAY_DK_R</p> <p>(DAY/WEEK/MONTH/YEAR)</p> | <p><b>How often did you eat a green leafy or lettuce salad, with or without vegetables?</b><br/><i>INCLUDE SPINACH SALADS.</i></p> <p><b>Do you prefer to answer by the number of times per day, week, month or year?</b><br/>Day<br/>Week<br/>Month<br/>Year<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/><b>Enter the number of times you eat a salad per day:</b><br/>___ per day<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/><b>Enter the number of times you eat a salad per week:</b><br/>___ per week<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/><b>Enter the number of times you eat a salad per month:</b><br/>___ per month<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/><b>Enter the number of times you eat a salad per year:</b><br/>___ per year<br/>Don't know<br/>Refuse to answer</p> | <p><b>¿Con qué frecuencia comió una ensalada de hojas verdes o lechuga, con o sin verduras?</b><br/><i>INCLUYA LAS ENSALADAS DE ESPINACAS.</i></p> <p><b>¿Prefiere responder usando el número de veces al día, a la semana, al mes o al año?</b><br/>Al día<br/>A la semana<br/>Al mes<br/>Al año<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/><b>Escriba el número de veces que usted come ensalada al día:</b><br/>___ al día<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/><b>Escriba el número de veces que usted come ensalada a la semana:</b><br/>___ a la semana<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/><b>Escriba el número de veces que usted come ensalada al mes:</b><br/>___ al mes<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/><b>Escriba el número de veces que usted come ensalada al año:</b><br/>___ al año<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>FRIED POTATO CONSUMPTION</b><br/>BRFSS</p> <p>POTATO_PREFER<br/>POTATO_DAY_NUM<br/>POTATO_DAY_DK_R</p>                    | <p><b>How often did you eat any kind of fried potatoes, including french fries, home fries, or hash browns?</b><br/><i>DO NOT INCLUDE POTATO CHIPS.</i></p>   | <p><b>¿Con qué frecuencia usted comió algún tipo de papa frita, incluyendo las papas a la francesa, las papas salteadas (home fries) o papas en gajos (hash browns)?</b></p> <p><i>NO INCLUYA LAS PAPITAS FRITAS O "POTATO CHIPS".</i></p>  |

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| <p>(DAY/WEEK/MONTH/YEAR)</p>  | <p><b>Do you prefer to answer by the number of times per day, week, month or year?</b><br/>         Day<br/>         Week<br/>         Month<br/>         Year<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/> <b>Enter the number of times you eat fried potatoes per day:</b><br/>         ___ per day<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/> <b>Enter the number of times you eat fried potatoes per week:</b><br/>         ___ per week<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/> <b>Enter the number of times you eat fried potatoes per month:</b><br/>         ___ per month<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/> <b>Enter the number of times you eat fried potatoes per year:</b><br/>         ___ per year<br/>         Don't know<br/>         Refuse to answer</p> | <p><b>¿Prefiere responder usando el número de veces al día, a la semana, al mes o al año?</b><br/>         Al día<br/>         A la semana<br/>         Al mes<br/>         Al año<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/> <b>Escriba el número de veces que usted come papas fritas al día:</b><br/>         ___ al día<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/> <b>Escriba el número de veces que usted come papas fritas a la semana:</b><br/>         ___ a la semana<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/> <b>Escriba el número de veces que usted come papas a fritas al mes:</b><br/>         ___ al mes<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/> <b>Escriba el número de veces que usted come papas fritas al año:</b><br/>         ___ al año<br/>         No sabe<br/>         Se negó a responder</p> |
| <p><b>OTHER POTATO CONSUMPTION</b><br/>         BRFSS</p> <p>OTH_POT_PREFER<br/>         OTH_POT_DAY_NUM<br/>         OTH_POT_DAY_DK_R</p> <p>(DAY/WEEK/MONTH/YEAR)</p> | <p><b>How often did you eat any other kind of potatoes, or sweet potatoes, such as baked, boiled, mashed potatoes, or potato salad?</b><br/> <i>INCLUDE ALL TYPES OF POTATOES EXCEPT FRIED. INCLUDE POTATOES AU GRATIN AND SCALLOPED POTATOES.</i></p> <p><b>Do you prefer to answer by the number of times per day, week, month or year?</b><br/>         Day</p>   | <p><b>¿Con qué frecuencia comió usted algún otro tipo de papa o camote, como papas al horno, hervidas, en puré o en ensalada?</b><br/> <i>INCLUYA TODOS LOS TIPOS DE PAPA EXCEPTO LAS FRITAS. INCLUYA LAS PAPAS GRATINADAS Y LAS PAPAS AL ESCALOPE.</i></p> <p><b>¿Prefiere responder usando el número de veces al día, a la semana, al mes o al año?</b><br/>         Al día</p>  |

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|   | <p>Week<br/>Month<br/>Year<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/> <b>Enter the number of times you eat other kinds of potatoes per day:</b><br/>         ___ per day<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/> <b>Enter the number of times you eat other kinds of potatoes per week:</b><br/>         ___ per week<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/> <b>Enter the number of times you eat other kinds of potatoes per month:</b><br/>         ___ per month<br/>         Don't know<br/>         Refuse to answer</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/> <b>Enter the number of times you eat other kinds of potatoes per year:</b><br/>         ___ per year<br/>         Don't know<br/>         Refuse to answer</p> | <p>A la semana<br/>Al mes<br/>Al año<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/> <b>Escriba el número de veces que usted come otro tipo de papas al día:</b><br/>         ___ al día<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/> <b>Escriba el número de veces que usted come otro tipo de papas a la semana:</b><br/>         ___ a la semana<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/> <b>Escriba el número de veces que usted come otro tipo de papas al mes:</b><br/>         ___ al mes<br/>         No sabe<br/>         Se negó a responder</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/> <b>Escriba el número de veces que usted come otro tipo de papas al año:</b><br/>         ___ al año<br/>         No sabe<br/>         Se negó a responder</p> |
| <p><b>OTHER VEGETABLE CONSUMPTION</b><br/>BRFSS</p> <p>VEG_PREFER<br/>VEG_DAY_NUM<br/>VEG_DAY_DK_R</p> <p>(DAY/WEEK/MONTH/YEAR)</p> | <p><b>Not including lettuce salads and potatoes, how often did you eat other vegetables?</b><br/> <u>INCLUDE</u> TOMATOES, GREEN BEANS, CARROTS, CORN, CABBAGE, BEAN SPROUTS, COLLARD GREENS, AND BROCCOLI.<br/> <u>INCLUDE</u> RAW, COOKED, CANNED, OR FROZEN VEGETABLES.<br/> <u>DO NOT INCLUDE</u> RICE.</p> <p><b>Do you prefer to answer by the number of times per day, week, month or year?</b><br/>         Day<br/>         Week<br/>         Month</p>   | <p><b>Sin incluir ensaladas de lechuga ni papas, ¿con qué frecuencia comió otras verduras?</b><br/> <u>INCLUYA</u> TOMATES, EJOTES, ZANAHORIAS, MAÍZ, REPOLLO O COL RIZADA, BROTES O GERMINADOS DE FRIJOL, BERZA O KALE, Y BRÓCOLI. <u>INCLUYA</u> VERDURAS CRUDAS, COCIDAS, ENLATADAS O CONGELADAS. <u>NO INCLUYA</u> EL ARROZ.</p> <p><b>¿Prefiere responder usando el número de veces al día, a la semana, al mes o al año?</b><br/>         Al día<br/>         A la semana<br/>         Al mes</p>  |



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|   | <p>Year<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/><b>Enter the number of times you eat other types of vegetables per day:</b><br/>___ per day<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/><b>Enter the number of times you eat other types of vegetables per week:</b><br/>___ per week<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/><b>Enter the number of times you eat other types of vegetables per month:</b><br/>___ per month<br/>Don't know<br/>Refuse to answer</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/><b>Enter the number of times you eat other types of vegetables per year:</b><br/>___ per year<br/>Don't know<br/>Refuse to answer</p> | <p>Al año<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Day" is selected.]</i><br/><b>Escriba el número de veces que usted comió otro tipo de verduras al día:</b><br/>___ al día<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Week" is selected.]</i><br/><b>Escriba el número de veces que usted come otro tipo de verduras a la semana:</b><br/>___ a la semana<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Month" is selected.]</i><br/><b>Escriba el número de veces que usted come otro tipo de verduras al mes:</b><br/>___ al mes<br/>No sabe<br/>Se negó a responder</p> <p><i>[Programmer: Show if "Year" is selected.]</i><br/><b>Escriba el número de veces que usted come otro tipo de verduras al año:</b><br/>___ al año<br/>No sabe<br/>Se negó a responder</p> |
| <p><b>GENERAL HEALTH</b><br/>CCHS<br/>BRFSS<br/>CHMS<br/><br/><i>HLTH_GENERAL</i></p> | <p><b>In general, would you say your health is...</b><br/>Poor<br/>Fair<br/>Good<br/>Very good<br/>Excellent<br/>Don't know<br/>Refuse to answer</p>  | <p><b>En general, ¿diría usted que su salud es...?</b><br/>Mala<br/>Satisfactoria<br/>Buena<br/>Muy buena<br/>Excelente<br/>No sabe<br/>Se negó a responder</p>  |
| <p><b>OVERALL DIET</b><br/>NHANES AND USED IN FCMS<br/><br/><i>DIET</i></p>           | <p><b>In general, how healthy is your overall diet?</b><br/>Poor<br/>Fair<br/>Good</p>  | <p><b>En general, ¿cuán saludable es su dieta considerando todos sus alimentos?</b><br/>Mala<br/>Satisfactoria<br/>Buena</p>   |

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|  | <p>Very good<br/>Excellent<br/>Don't know<br/>Refuse to answer</p>   | <p>Muy buena<br/>Excelente<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>MENTAL HEALTH</b><br/>CCHS AND CHMS<br/><br/><i>MENTAL</i></p> | <p><b>In general, would you say your mental health is...</b><br/>Poor<br/>Fair<br/>Good<br/>Very good<br/>Excellent<br/>Don't know<br/>Refuse to answer</p>  | <p><b>En general, ¿diría usted que su salud mental es...?</b><br/>Mala<br/>Satisfactoria<br/>Buena<br/>Muy buena<br/>Excelente<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>STRESS</b><br/>CHMS<br/><br/><i>STRESS</i></p>                 | <p><b>Thinking about the amount of stress in your life, would you say that most days are...</b><br/>Not at all stressful<br/>Not very stressful<br/>A bit stressful<br/>Very stressful<br/>Extremely stressful<br/>Don't know<br/>Refuse to answer</p> | <p><b>Pensando en la cantidad de estrés de su vida, ¿diría usted que la mayoría de sus días son...?</b><br/>Nada estresantes<br/>No muy estresantes<br/>Un poco estresantes<br/>Muy estresantes<br/>En extremo estresantes<br/>No sabe<br/>Se negó a responder</p> |

## OTHER HEALTH BEHAVIOURS

| DOMAIN<br>SOURCE  | ENGLISH   | SPANISH TRANSLATION   |
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| <b>DATA QUALITY CHECK – MONTH</b><br><br><i>DQ_MONTH</i>        | <b>What is the current month?</b><br>January<br>February<br>March<br>April<br>May<br>June<br>July<br>August<br>September<br>October<br>November<br>December<br>Don't know<br>Refuse to answer   | <b>¿Cuál es el mes en curso?</b><br>Enero<br>Febrero<br>Marzo<br>Abril<br>Mayo<br>Junio<br>Julio<br>Agosto<br>Septiembre<br>Octubre<br>Noviembre<br>Diciembre<br>No sabe<br>Se negó a responder   |
| <b>SMOKING – PAST 30 DAYS</b><br>CTADS<br><br><i>SMK_30</i>     | <b>Have you smoked cigarettes in the past 30 days?</b><br>No<br>Yes, occasionally<br>Yes, every day<br>Don't know<br>Refuse to answer   | <b>¿Ha fumado cigarrillos en los últimos 30 días?</b><br>No<br>Sí, ocasionalmente<br>Sí, todos los días<br>No sabe<br>Se negó a responder   |
| <b>MARIJUANA USE – FREQUENCY</b><br>CSTADS<br><br><i>MJ_USE</i> | <b>In the last 12 months, how often did you use marijuana or cannabis (a joint, pot, weed, hash)?</b><br>I have never used marijuana<br>I have used marijuana but not in the last 12 months<br>Less than once a month<br>Once a month<br>2 or 3 times a month<br>Once a week<br>2 or 3 times a week<br>4 to 6 times a week<br>Every day<br>Don't know<br>Refuse to answer | <b>En los últimos 12 meses, ¿con qué frecuencia usó marihuana o cannabis (un churro, mota, hierba, hash)?</b><br>Nunca he usado marihuana<br>He usado marihuana pero no en los últimos 12 meses<br>Menos de una vez al mes<br>Una vez al mes<br>2 ó 3 veces al mes<br>Una vez a la semana<br>2 ó 3 veces a la semana<br>4 a 6 veces a la semana<br>Todos los días<br>No sabe<br>Se negó a responder |
| <b>MARIJUANA USE – DRIVEN</b><br>CSTADS ADAPTED                 | [Do not ask if have never used marijuana]<br><b>Have you ever <u>driven</u> a vehicle within 2 hours of using marijuana?</b><br>No, never   | [No haga la siguiente pregunta si el informante dice que nunca ha usado marihuana]<br><b>¿Alguna vez ha <u>conducido</u> un vehículo dentro de las primeras 2 horas de haber usado marihuana?</b>   |

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| <p><i>MJ_DRIVE</i></p>   | <p>Yes, in the last 30 days<br/>Yes, more than 30 days ago<br/>Don't know<br/>Refuse to answer</p>   | <p>No, nunca<br/>Sí, en los últimos 30 días<br/>Sí, hace más de 30 días<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>MARIJUANA USE – PASSENGER</b><br/>CSTADS ADAPTED</p> <p><i>MJ_PASS</i></p> | <p><b>Have you ever been a <u>passenger</u> in a vehicle driven by someone who had been using marijuana in the last 2 hours?</b><br/>No, never<br/>Yes, in the last 30 days<br/>Yes, more than 30 days ago<br/>Don't know<br/>Refuse to answer</p>   | <p><b>¿Alguna vez ha sido <u>pasajero</u> de un vehículo conducido por alguien que había usado mariguana en las últimas 2 horas?</b><br/>No, nunca<br/>Sí, en los últimos 30 días<br/>Sí, hace más de 30 días<br/>No sabe<br/>Se negó a responder</p>   |
| <p><b>ALCOHOL USE – FREQUENCY</b><br/>CSTADS</p> <p><i>ALC_FREQ</i></p>          | <p><b>In the last 12 months, how often did you have a drink of alcohol that was more than just a sip?</b><br/><i>A DRINK means: 1 regular sized bottle, can, or draft of beer; 1 glass of wine; 1 bottle or can of cooler; 1 shot of liquor (rum, whiskey, etc.); or 1 mixed drink (1 shot of liquor with pop, juice, energy drink, etc.).</i><br/>I have never drank alcohol<br/>I did not drink alcohol in the last 12 months<br/>I have only had a sip of alcohol<br/>Less than once a month<br/>Once a month<br/>2 or 3 times a month<br/>Once a week<br/>2 or 3 times a week<br/>4 to 6 times a week<br/>Every day<br/>I do not know <i>[valid answer]</i><br/>Refuse to answer</p> | <p><b>En los últimos 12 meses, ¿con qué frecuencia tomó más de un trago de una bebida alcohólica?</b><br/><i>UNA BEBIDA ALCOHÓLICA significa: 1 botella, lata o tarro de cerveza de tamaño normal; 1 copa de vino; 1 botella o lata de bebida a base de vino (cooler); 1 shot de alguna bebida alcohólica fuerte (ron, whiskey, etc.), o 1 bebida mezclada (1 shot de bebida alcohólica fuerte con refresco/gaseosa, jugo, bebida energética, etc.).</i><br/>Nunca he tomado alcohol<br/>No he tomado alcohol en los últimos 12 meses<br/>Sólo he tomado un trago de alcohol<br/>Menos de una vez al mes<br/>Una vez al mes<br/>2 ó 3 veces al mes<br/>Una vez a la semana<br/>2 ó 3 veces a la semana<br/>4 a 6 veces a la semana<br/>Todos los días<br/>No sabe <i>[respuesta válida]</i><br/>Se negó a responder</p> |
| <p><b>ALCOHOL USE – BINGE DRINKING</b><br/>CSTADS</p> <p><i>ALC_BINGE</i></p>    | <p>[IF DRANK MORE THAN A SIP IN PAST 12 MONTHS. Do not ask if DK/R]<br/><b>In the last 12 months, how often did you have [“5” if male / “4” if female] drinks of alcohol or more on one occasion?</b><br/><i>A DRINK means: 1 regular sized bottle, can, or draft of beer; 1 glass of wine; 1 bottle or can of cooler; 1 shot of liquor (rum, whiskey, etc.); or 1 mixed drink (1 shot of liquor with pop, juice, energy drink, etc.).</i><br/>I have never done this<br/>I did not have [5/4] or more drinks on one occasion in the last 12 months<br/>Less than once a month<br/>Once a month<br/>2 to 3 times a month</p>   | <p>[SI TOMÓ MÁS DE UN TRAGO DE UNA BEBIDA EN LOS ÚLTIMOS 12 MESES. No pregunte si DK/R]<br/><b>En los últimos 12 meses, ¿con qué frecuencia tomó [“5” si es hombre / “4” si es mujer] bebidas alcohólicas o más en una sola ocasión?</b><br/><i>UNA BEBIDA ALCOHÓLICA significa: 1 botella, lata o tarro de cerveza de tamaño normal; 1 copa de vino; 1 botella o lata de bebida a base de vino (cooler); 1 shot de alguna bebida alcohólica fuerte (ron, whiskey, etc.), o 1 bebida mezclada (1 shot de bebida alcohólica fuerte con refresco/gaseosa, jugo, bebida energética, etc.).</i><br/>Nunca lo he hecho<br/>No tomé [5/4] bebidas alcohólicas o más en una sola ocasión en los últimos 12 meses</p>   |

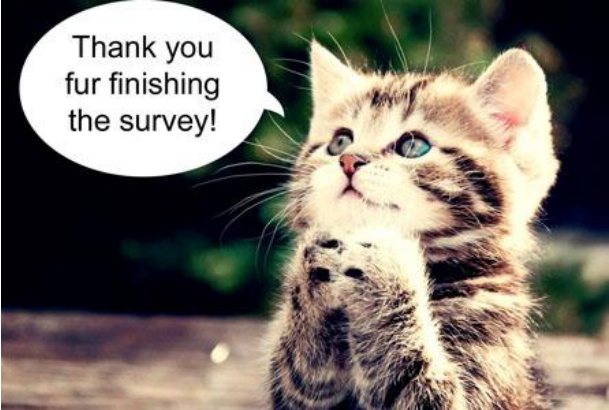

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|  | Once a week<br>2 to 5 times a week<br>Daily or almost daily<br>I do not know <i>[valid answer]</i><br>Refuse to answer | Menos de una vez al mes<br>Una vez al mes<br>2 a 3 veces al mes<br>Una vez a la semana<br>2 a 5 veces a la semana<br>Todos los días o casi todos los días<br>No sabe <i>[respuesta válida]</i><br>Se negó a responder |
|--|--|---|

## SOCIODEMOGRAPHIC MEASURES

| DOMAIN<br>SOURCE  | ENGLISH   | SPANISH TRANSLATION   |
|---|---|---|
| <b>ETHNICITY</b><br>ITC ADAPTED<br><br><i>ETH_USA_[TYPE]</i><br><i>ETH_USA_DK</i><br><i>ETH_USA_R</i><br><i>ETH_USA_OTEXT</i> | <b>People living in the United States come from many different cultural and racial backgrounds. Are you...</b> (Select all that apply.)<br>White<br>Black or African-American<br>Hispanic or Latino<br>Asian or Pacific Islander<br>Native American Indian<br>Other (please specify): _____<br>Don't know<br>Refused  | <b>Gente que vive en los Estados Unidos pertenece de diferentes raíces culturales y étnicas. ¿Qué grupo le describe mejor...?</b> (Seleccione todas las opciones que apliquen.)<br>Blanco<br>Negro o Afroamericano<br>Hispano o Latino<br>Asiático o isleño del Pacífico<br>Indio Americano<br>Otros (especificar) _____<br>No sabe<br>Rehusado   |
| <b>HIGHEST EDUCATION</b><br>ITC ADAPTED<br><br><i>EDUC_COMP_USA</i><br><i>EDUC_COMP_USA_OTEXT</i>                             | <b>What is the highest level of formal education that you have completed?</b><br>1. 8 <sup>th</sup> Grade or lower<br>2. 9 <sup>th</sup> Grade<br>3. 10 <sup>th</sup> Grade<br>4. 11 <sup>th</sup> Grade<br>5. 12 <sup>th</sup> Grade / high school diploma<br>6. Associate's degree or vocational / technical certificate<br>7. Bachelor's degree<br>8. Other (please specify): _____<br>-77 Don't know<br>-88 Refused | <b>¿Cuál es el nivel más alto de estudios formales que usted ha concluido?</b><br>1. Secundaria completa o menos<br>2. Primer año de preparatoria/bachillerato (9th grade de high school)<br>3. Segundo año de preparatoria/bachillerato (10th grade de high school)<br>4. Tercer año de preparatoria/bachillerato (11th grade de high school)<br>5. Preparatoria / bachillerato completo (diplomado de high school)<br>6. Estudios técnicos o comerciales<br>7. Licenciatura o Universidad complete<br>8. Otro (especificar): _____<br>-77 No sabe<br>-88 Rehusado |
| <b>PERCEIVED INCOME ADEQUACY</b><br><br><i>INCOME_ADEQ</i>  | <b>Thinking about your total monthly income, how difficult or easy is it for you to make ends meet?</b><br>Very difficult<br>Difficult  | <b>Pensando en sus ingresos mensuales totales, ¿qué tan difícil o fácil le resulta ganar suficiente dinero para vivir sin deudas?</b><br>Muy difícil<br>Difícil   |

|   |  |  |
|---|--|--|
|   | Neither easy nor difficult<br>Easy<br>Very easy<br>Don't know<br>Refuse to answer  | Ni fácil ni difícil<br>Fácil<br>Muy fácil<br>No sabe<br>Se negó a contestar  |
| <b>REGION</b><br><br><i>REGION_USA</i><br><i>REGION_USA_DKRO</i><br><i>REGION_USA_OTEXT</i> | <b>What state do you live in?</b><br>[Insert drop-down list of US states] <ol style="list-style-type: none"> <li>1. Alabama (AL)</li> <li>2. Alaska (AK)</li> <li>3. Arizona (AZ)</li> <li>4. Arkansas (AR)</li> <li>5. California (CA)</li> <li>6. Colorado (CO)</li> <li>7. Connecticut (CT)</li> <li>8. Delaware (DE)</li> <li>9. District of Columbia (DC)</li> <li>10. Florida (FL)</li> <li>11. Georgia (GA)</li> <li>12. Hawaii (HI)</li> <li>13. Idaho (ID)</li> <li>14. Illinois (IL)</li> <li>15. Indiana (IN)</li> <li>16. Iowa (IA)</li> <li>17. Kansas (KS)</li> <li>18. Kentucky (KY)</li> <li>19. Louisiana (LA)</li> <li>20. Maine (ME)</li> <li>21. Maryland (MD)</li> <li>22. Massachusetts (MA)</li> <li>23. Michigan (MI)</li> <li>24. Minnesota (MN)</li> <li>25. Mississippi (MS)</li> <li>26. Missouri (MO)</li> <li>27. Montana (MT)</li> <li>28. Nebraska (NE)</li> <li>29. Nevada (NV)</li> <li>30. New Hampshire (NH)</li> <li>31. New Jersey (NJ)</li> <li>32. New Mexico (NM)</li> <li>33. New York (NY)</li> </ol> | <b>¿En qué estado vive usted?</b><br>[Insert drop-down list of US states] <ol style="list-style-type: none"> <li>1. Alabama (AL)</li> <li>2. Alaska (AK)</li> <li>3. Arizona (AZ)</li> <li>4. Arkansas (AR)</li> <li>5. California (CA)</li> <li>6. Colorado (CO)</li> <li>7. Connecticut (CT)</li> <li>8. Delaware (DE)</li> <li>9. District of Columbia (DC)</li> <li>10. Florida (FL)</li> <li>11. Georgia (GA)</li> <li>12. Hawaii (HI)</li> <li>13. Idaho (ID)</li> <li>14. Illinois (IL)</li> <li>15. Indiana (IN)</li> <li>16. Iowa (IA)</li> <li>17. Kansas (KS)</li> <li>18. Kentucky (KY)</li> <li>19. Louisiana (LA)</li> <li>20. Maine (ME)</li> <li>21. Maryland (MD)</li> <li>22. Massachusetts (MA)</li> <li>23. Michigan (MI)</li> <li>24. Minnesota (MN)</li> <li>25. Mississippi (MS)</li> <li>26. Missouri (MO)</li> <li>27. Montana (MT)</li> <li>28. Nebraska (NE)</li> <li>29. Nevada (NV)</li> <li>30. New Hampshire (NH)</li> <li>31. New Jersey (NJ)</li> <li>32. New Mexico (NM)</li> <li>33. New York (NY)</li> </ol> |

|  |   |   |
|--|---|---|
|  | <p>34. North Carolina (NC)<br/>         35. North Dakota (ND)<br/>         36. Ohio (OH)<br/>         37. Oklahoma (OK)<br/>         38. Oregon (OR)<br/>         39. Pennsylvania (PA)<br/>         40. Rhode Island (RI)<br/>         41. South Carolina (SC)<br/>         42. South Dakota (SD)<br/>         43. Tennessee (TN)<br/>         44. Texas (TX)<br/>         45. Utah (UT)<br/>         46. Vermont (VT)<br/>         47. Virginia (VA)<br/>         48. Washington (WA)<br/>         49. West Virginia (WV)<br/>         50. Wisconsin (WI)<br/>         51. Wyoming (WY)<br/>         52. Other (please specify): _____<br/>         -77 Don't know<br/>         -88 Refused</p> | <p>34. North Carolina (NC)<br/>         35. North Dakota (ND)<br/>         36. Ohio (OH)<br/>         37. Oklahoma (OK)<br/>         38. Oregon (OR)<br/>         39. Pennsylvania (PA)<br/>         40. Rhode Island (RI)<br/>         41. South Carolina (SC)<br/>         42. South Dakota (SD)<br/>         43. Tennessee (TN)<br/>         44. Texas (TX)<br/>         45. Utah (UT)<br/>         46. Vermont (VT)<br/>         47. Virginia (VA)<br/>         48. Washington (WA)<br/>         49. West Virginia (WV)<br/>         50. Wisconsin (WI)<br/>         51. Wyoming (WY)<br/>         52. Otro (especificar): _____<br/>         -77 No sabe<br/>         -88 Rehusado</p> |
| <p><b>SELF-REPORTED HEIGHT</b></p> <p><i>HT_UNIT</i><br/> <i>HT_CM</i><br/> <i>HT_FT</i><br/> <i>HT_IN</i></p> | <p><b>It is helpful to know the height and weight of survey participants.</b></p> <p><b>How tall are you without shoes?</b><br/>         Would you rather answer in:<br/>         Feet and inches<br/>         Centimetres<br/>         Don't know<br/>         Refuse to answer</p> <p>[PROGRAMMER: show based on response to above]<br/> <i>Enter number:</i> _____ feet [numeric, 3-7]<br/>         AND<br/> <i>Enter number:</i> _____ inches [numeric, 0-12]</p> <p>OR</p> <p><i>Enter number:</i> _____ cm [numeric, 100-250]</p>   | <p><b>Es útil saber la altura y el peso de los participantes de la encuesta.</b></p> <p><b>¿Cuánto mide sin zapatos?</b><br/>         ¿Prefiere responder usando...?<br/>         Pies y pulgadas<br/>         Centímetros<br/>         No sabe<br/>         Se negó a contestar</p> <p>[PROGRAMMER: show based on response to above]<br/> <i>Escriba el número:</i> _____ pies [numeric, 3-7]<br/>         Y<br/> <i>Escriba el número:</i> _____ pulgadas [numeric, 0-12]</p> <p>O</p> <p><i>Escriba el número:</i> _____ cm [numeric, 100-250]</p>   |
| <p><b>SELF-REPORTED WEIGHT</b></p> <p><i>WT_UNIT</i></p>   | <p><b>How much do you weigh without clothes or shoes?</b><br/>         Would you rather answer in:<br/>         Pounds (lb)</p>   | <p><b>¿Cuánto pesa sin ropa ni zapatos?</b><br/>         ¿Prefiere responder usando...?<br/>         Libras (lb)</p>  |

|                                   |   |  |
|-----------------------------------|---|--|
| <p>WT_LB<br/>WT_KG</p>            | <p>Kilograms (kg)<br/>Don't know<br/>Refuse to answer</p> <p><i>Enter weight:</i> _____ [kg/lb] [PROGRAMMER: show based on response to above]</p>   | <p>Kilogramos (kg)<br/>No sabe<br/>Se negó a contestar</p> <p><i>Escriba el número:</i> _____ [kg/lb] [PROGRAMMER: show based on response to above]</p>  |
| <p><b>END SCREEN</b></p>          | <p><b>You're finished—thank you!</b></p> <p>As a reminder, this study has been reviewed by and received ethics clearance through a University of Waterloo Research Ethics Committee. If you have any comments or concerns resulting from your involvement please contact the Chief Ethics Officer, Office of Research Ethics at 519-888-4567, ext. 36005 or <a href="mailto:ore-ceo@uwaterloo.ca">ore-ceo@uwaterloo.ca</a>, or Professor David Hammond at 519-888-4567 ext. 36462 or <a href="mailto:dhammond@uwaterloo.ca">dhammond@uwaterloo.ca</a>.</p> <p>Click NEXT to return to the survey company's website.</p> <p>Thanks again for your help.</p>  | <p><b>¡Ha terminado! ¡Gracias!</b></p> <p>Permítame recordarle que los aspectos éticos del presente estudio fueron revisados y autorizados por el Comité de Ética de la Investigación de la Universidad de Waterloo. Si tiene comentarios o preguntas resultantes de su participación en el proyecto, favor de comunicarse con el Oficial Principal de Ética, en la Oficina de Ética de la Investigación, al teléfono 519-888-4567, ext. 36005 o al correo electrónico <a href="mailto:ore-ceo@uwaterloo.ca">ore-ceo@uwaterloo.ca</a> o con el Profesor David Hammond al teléfono 519-888-4567 ext. 36462 o al correo electrónico <a href="mailto:dhammond@uwaterloo.ca">dhammond@uwaterloo.ca</a></p> <p>Haga clic en "SIGUIENTE" para regresar al sitio web de la empresa de encuestas.</p> <p>Una vez más, gracias por su ayuda.</p>  |
| <p><b>REDIRECT TO NIELSEN</b></p> | <p>You will now be redirected back to the survey company.</p>   | <p>Ahora usted se redirige a la empresa de encuestas.</p>  |