AUSTRALIA SURVEY

2025 SURVEY (WAVE 9)

DECEMBER 16, 2025

SUGGESTED CITATION

HAMMOND D. INTERNATIONAL FOOD POLICY STUDY: AUSTRALIA SURVEY – 2025 SURVEY (WAVE 9). UNIVERSITY OF WATERLOO. DECEMBER 2025.

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LIST OF MEASURES

NIELSEN INVITATION & PRESCREENER

DOMAIN SOURCE	QUESTION
SAMPLE INVITATION NEW 2019 REVISED 2023	We've found a survey for you! Simply click "Continue" to begin the survey. NOTE TO ETHICS: This is an email and dashboard app invitation sent to panelists by Nielsen and their partner panels. If panelists select 'continue' they will be directed to a webpage showing the questions below. Partner panels will have slightly different text shown in their email/dashboard app invitations about panel incentives.
PANELIST AGE NEW 2019	What is your age? *[numeric]* *[If <18 or >100:* TERMINATE] NOTE TO ETHICS: This is used as a quota screener by Nielsen; data not provided to researchers.
PANELIST SEX NEW 2019 REVISED 2021	What sex were you assigned at birth, meaning on your original birth certificate? Male Female NOTE TO ETHICS: This is used as a quota screener by Nielsen; data not provided to researchers.
PARENTAL STATUS NEW 2019	Please choose the options that best describe your household: [PROGRAMMER NOTE: Allow participants to select more than one of the first 3 options] I am pregnant/expecting a child within the next 9 months I have one or more children under the age of 18 living in my household I have one or more children aged 18 or older living in my household I have no children living in my household and I am not pregnant/expecting a child within the next 9 months PROGRAMMER NOTE: If no children under age of 18 living in household show: "Thank you for your interest, unfortunately you do not qualify for this study. We appreciate your participation and thank you for your time. You have earned [panel incentive]." NOTE TO ETHICS: This screen is shown by Nielsen and their partner panels to help identify panelists who should also be contacted for the related study 'International Food Policy Study – Youth'. This question is not used to determine eligibility for the present study. The data will not be provided to researchers.
CHILD AGE AND GENDER NEW 2019 REVISED 2020	*UNIVERSE: Respondents who indicated they had a child under the age of 18 living in the household.* Please indicate the age and gender of any children under the age of 18 living in your household: [PROGRAMMER NOTE: Allow participants to select more than one option] Boy under age 1 Girl under age 1 Boy age 1 Girl age 1 Boy age 2 Girl age 2

Boy age 3
Girl age 3
Boy age 4
Girl age 4
Boy age 5
Girl age 5
Boy age 6
Girl age 6
Boy age 7
Girl age 7
Boy age 8
Girl age 8
Boy age 9
Girl age 9
Boy age 10
Girl age 10
Boy age 11
Girl age 11
Boy age 12
Girl age 12
Boy age 13
Girl age 13
Boy age 14
Girl age 14
Boy age 15
Girl age 15
Boy age 16
Girl age 16
Boy age 17
Girl age 17
None of the above

NOTE TO ETHICS: This screen is shown by Nielsen and their partner panels to help identify panelists who should also be contacted for the related study 'International Food Policy Study – Youth'. This question is not used to determine eligibility for the present study. The data will not be provided to researchers.

ELIGIBILITY SCREENER & INFORMATION/CONSENT (IN ALCHEMER)

DOMAIN SOURCE	QUESTION
ELIGIBILITY INTRO <mark>REVISED 2024</mark> *RECAPTCHA*	Before you continue to the study information, we need to confirm your eligibility with a few short questions. Please check the box below, and click 'Next' to proceed with the survey. ☐ I'm not a robot reCAPTCHA Privacy - Terms *[PROGRAMMER NOTE: Utilize ReCAPTCHA and Duplicate Protection function based on IP address in Alchemer]*
AGE <mark>REVISED 2019</mark> *AGE*	How old are you? *[numeric]* [*If <18 or >100:* "Unfortunately, you are not eligible for the study. Thank you for your time. You will now be redirected back to the survey company."]
SEX AT BIRTH CIHR SUGGESTED METHOD (GRETA BAUER, WESTERN) <mark>REVISED 2024</mark> *SEX*	What sex were you assigned at birth, meaning on your original birth certificate? Male Female Don't know Refuse to answer
SEX AT BIRTH FOLLOW-UP <mark>NEW 2024</mark> *SEX2*	*UNIVERSE: Sex = 'Don't know' or 'Refuse to answer'* We know this can be a sensitive question for some people. We ask about sex-at-birth because it helps us to understand the profile of survey respondents. If you are not comfortable answering the question, you can choose 'Don't know' or 'Refuse to answer'. (We'll ask about your gender identity later in the survey). What sex were you assigned at birth, meaning on your original birth certificate? Male Female X (not specified on birth certificate) Don't know Refuse to answer
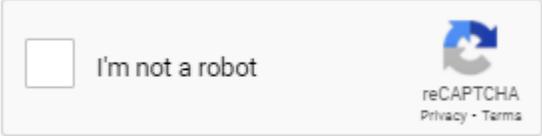
| INFO

REVISED 2019-2025 | Before you start the survey, please read the following information and let us know if you agree to participate.
- The survey will examine eating patterns in different countries. The study is being conducted by Professor David Hammond at the University of Waterloo, Canada.
- You must be 18 years of age or older to participate in the study.
- The survey will ask you questions about your diet and nutrition, and other health-related behaviours such as smoking and alcohol use. The survey will take about 30 minutes.
- Participation is voluntary. You can click 'refuse to answer' to any question you do not wish to answer. You can choose to stop the study at any time without penalty. If you choose to stop participating, you may receive your incentive by selecting 'refuse to answer' for 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.
- 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 study data will be collected using Alchemer software. Internet protocol (IP) addresses may be recorded by the software program used for this study to avoid duplicate responses in the dataset, but this information will not be used by the researchers or the owners of the program to identify you personally. 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).
- The data will be stored for a minimum of 7 years on a secure University of Waterloo server in Canada. Analyses may also be conducted by international research team members, but only using de-identified data stored on password-protected computers.
- This project has been reviewed and received ethics clearance through a University of Waterloo Research Ethics Board (REB #30829). However, the final decision about participation is yours. Participants who have concerns or questions about their involvement in the project may contact the Office of Research Ethics in Canada at 0011-1-519-888-4440 or reb@uwaterloo.ca.
- If you have any other questions about the study, please contact Professor David Hammond of the University of Waterloo in Canada at 0011-1-519-888-4567 ext. 46462 or dhammond@uwaterloo.ca or Associate Professor Gary Sacks, a local study researcher from Deakin University in Australia at 03 9251 7105 or gary.sacks@deakin.edu.au. |
| CONSENT

REVISED 2021
REVISED 2025

CONSENT | *By providing your consent, you are not waiving your legal rights or releasing the investigator(s) or involved institution(s) from their legal and professional responsibilities.*

Based on the information you received, do you agree to take part in this research study?
Yes → [*continue to survey*]
No → Thank you for your time. You will now be redirected back to the survey company. [*TERMINATE*] |

DEMOGRAPHICS

DOMAIN SOURCE	QUESTION
PREAMBLE REVISED 2020	**First, we'd like to ask a few questions about your background.**
GENDER CIHR SUGGESTED METHOD (GRETA BAUER, WESTERN) *GENDER* *GENDER_OTEXT*	**What is your current gender identity?** Man Woman Trans male/trans man Trans female/trans woman Gender queer/gender non-conforming Different identity → Please specify: [*open-ended*] Don't know Refuse to answer
STUDENT STATUS *STUDENT*	**Are you currently a student?** No Yes, full-time Yes, part-time Don't know Refuse to answer
CHILDREN – ANY REVISED 2024 *CHILD_ANY*	**Do you have any children (including step-children)?** Yes No Don't know Refuse to answer

CHILDREN IN HOME - NUMBER
BRFSS ADAPTED
 	
REVISED 2024
 	
CHILD_HOME
	UNIVERSE: Respondents with children (child_any=yes)
	How many of your children <u>under the age of 18 live in your household</u> (including step-children)?
	   [dropdown with numbers from 0 to 10]
	   Don't know
	   Refuse to answer

CHILDREN IN HOME – AGES REVISED 2019 *CHILD#_AGE* *CHILD#_DKR*	*UNIVERSE: Respondents with at least 1 child <18 in household (child_home>0)* **Please enter the age[s] of your child[ren] who [is/are] <u>under 18 that live[s] in your household</u>, in years, in the box(es) below.** Child #1 Age: [*numeric, decimal allowed*] Child #2 Age: [*numeric, decimal allowed*] Child #… [PROGRAMMER NOTE: add rows based on response to number of children living in household, up to 10 children] Don't know Refuse to answer

FOOD SOURCES

DOMAIN SOURCE	QUESTION
FOOD SOURCE – EATING OUT FREQUENCY NHANES adapted *EATOUT* *EATOUT_DKR*	**Next, I'm going to ask you about meals. By meal, I mean BREAKFAST, LUNCH AND DINNER.** **During the PAST 7 DAYS, how many meals did you get that were PREPARED AWAY FROM HOME in places such as restaurants, fast food or take-away places, food stands, or from vending machines?** Only include snacks if they counted as your meal. Do NOT include today. Enter number: _____ meals [numeric 0-21] Don't know Refuse to answer
FOOD SOURCE – PURCHASE FORMAT FOR FOOD PREPARED OUTSIDE THE HOME ==REVISED 2019== ==REVISED 2025== *FROM_DELSERV* *FROM_DELDIRECT* *FROM_NEAR* *FROM_FAR* *FROM_INPERSON* *FROM_DKR*	*UNIVERSE: Respondents who had at least 1 meal prepared away from home (eatout>0)* **You said you had [#] meal(s) prepared outside the home in the past 7 days.** **How many of those meals were…** *[numeric]* Ordered using a food delivery service (e.g., UberEats, Foodora, Deliveroo) and delivered to you *[numeric]* Ordered directly from a restaurant and delivered to you [PROGRAMMER NOTE: Randomize 50% of respondents to complete both of the 'in-person' items with specifications on distance, and the other 50% to complete a general 'in-person' item (no distance specification).] *[numeric]* Purchased **in person at a restaurant / food outlet within 5 minutes of your home** (using your usual mode of transportation, e.g., walk, drive, or public transport), **excluding delivery** *[numeric]* Purchased **in person at a restaurant / food outlet more than 5 minutes away from your home** (using your usual mode of transportation, e.g., walk, drive, or public transport), **excluding delivery** *[numeric]* Purchased in person at a restaurant / food outlet, excluding delivery Don't know Refuse to answer
FOOD SOURCE – PERCENTAGE EAT OUT% PREPARED OUTSIDE HOME *EATOUT_PERC* *EATOUT_PERC_DKR*	**Thinking about ALL THE FOOD YOU ATE during the past 7 days, INCLUDING SNACKS, what percentage was prepared outside the home?** Enter percentage: _____ [*numeric percentage, 0 to 100%*] Don't know Refuse to answer
FOOD SOURCE – AT HOME INTRO	**We are now going to ask you about the food you ate during the past 7 days that was PREPARED AT HOME.** 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 "prepared at home". Include food prepared by you or someone else at home. DO NOT include drinks.

FOOD SOURCE – PURCHASE LOCATIONS FOR FOOD PREPARED AT HOME REVISED 2019 COUNTRY SPECIFIC WORDING *HS_1…3, HS_5…6, HS_8…14* *HS_DK* *HS_R* *HS_10_OTEXT* *HS_NONE*	Please think about the food you ate that was <u>PREPARED AT HOME DURING THE PAST 7 DAYS</u>. **Where was it PURCHASED?** Select all that apply. Supermarket Fruit and veg shop Butcher Deli Fresh food market or farmer's market Convenience / corner store Warehouse club (e.g., Costco) Ethnic or specialty food store/market (e.g., Asian grocer) Farm box delivery (e.g., Farmers Direct, HelloFresh) Food bank Grown by you or someone you know Some other place → Please specify: [*open-ended*] I have not prepared any food at home in the past 7 days Don't know Refuse to answer
FOOD SOURCE – PURCHASE METHOD FOR FOOD PREPARED AT HOME NEW 2020 *PM_STORE* *PM_ONLINE* *PM_FRIEND* *PM_BANK* *PM_GROW* *PM_OTHER* *PM_OTEXT* *PM_DK* *PM_R*	*UNIVERSE: Skip if previously selected "I have not prepared any food at home in the past 7 days" (HS14=Checked)* **Still thinking about the food PREPARED AT HOME IN THE PAST 7 DAYS, how/where did you get the food?** Select all that apply. In-store Ordered online (delivery or pick-up) Someone outside my household (e.g., friend, relative) purchased my groceries and delivered them Food bank Grown by you or someone you know Some other source→ Please specify: [*open-ended*] Don't know Refuse to answer
READY-TO-EAT MEALS *READY* *READY_DKR*	*UNIVERSE: Respondents who did NOT indicate they "have not prepared any food at home in the past 7 days" (HS_none not selected)* **Thinking about the MEALS PREPARED AT HOME in the past 7 days, what percentage was "ready-to-eat" or "box food" (e.g., microwave, frozen or packaged meals)?** This includes foods like frozen pizza, chicken nuggets, frozen dinner, 2 minute noodles, canned soup, baking mixes, instant oats, etc. Enter percentage: _____ [*numeric percentage, 0 to 100%*] Don't know Refuse to answer

FOOD SOURCE – MEAL DELIVERY SERVICE USE FOR FOOD PREPARED AT HOME NEW 2022 COUNTRY SPECIFIC WORDING *MEALKIT* NEW 2025 COUNTRY SPECIFIC WORDING *MEALKIT_FREQ*	One last question about the food prepared at home: Was any of the food purchased in the past 7 days from a meal kit delivery service (e.g., HelloFresh, Marley Spoon)? Yes No Don't know Refuse to answer *UNIVERSE: Respondents who indicated they purchased food through a meal kit delivery service* In the past 7 days, how many days did you eat food from a meal kit delivery service (e.g., HelloFresh, Marley Spoon)? 0 days 1 day 2 days 3 days 4 days 5 days 6 days 7 days (every day) Don't know Refuse to answer
ONLINE ORDERING NEW 2022 COUNTRY SPECIFIC WORDING *ONLN_REST* *ONLN_GSTORE* *ONLN_GONLN* *ONLN_CONV* *ONLN_ALC* *ONLN_NONE* *ONLN_DK* *ONLN_R*	Have you ordered any of the following <u>online or using an app,</u> for pick-up or delivery in the past 30 days? We want to know if YOU have done this (don't include if your family or others have ordered for you). (Select all that apply). Meals/food/drinks from a restaurant or take-away Groceries from a supermarket Groceries from an online-only store (e.g., Amazon) Snacks/food/drinks from a convenience store Alcohol None of the above Don't know Refuse to answer
ONLINE ORDERING FREQUENCY NEW 2022 COUNTRY SPECIFIC WORDING *ONLN_REST_FREQ* *ONLN_GSTORE_FREQ* *ONLN_GONLN_FREQ*	*UNIVERSE: Respondents who ordered food online/using an app from a convenience store and/or a restaurant, and/or groceries from a supermarket and/or groceries from an online-only stores, and/or alcohol* [PROGRAMMER NOTE: Only show items selected in previous question.] How often have you ordered <u>meals/food/drinks from a restaurant or take-away </u>online or using an app in the past 30 days? Less than once a week Once a week A few times a week Every day Don't know

ONLN_CONV_FREQ *ONLN_ALC_FREQ*	Refuse to answer **How often have you ordered <u>groceries from a supermarket</u> online or using an app in the past 30 days?** Less than once a week Once a week A few times a week Every day Don't know Refuse to answer **How often have you ordered <u>groceries from an online-only store (e.g., Amazon)</u> online or using an app in the past 30 days?** Less than once a week Once a week A few times a week Every day Don't know Refuse to answer **How often have you ordered <u>snacks/food/drinks from a convenience store</u> online or using an app in the past 30 days?** Less than once a week Once a week A few times a week Every day Don't know Refuse to answer **How often have you ordered <u>alcohol</u> online or using an app in the past 30 days?** Less than once a week Once a week A few times a week Every day Don't know Refuse to answer

FOOD BANK USE Adapted from Canadian Household Panel Survey – 2008 NEW 2022 COUNTRY SPECIFIC WORDING *FDBANK_USE* *COMSERV_USE*	In the past 12 months, has anyone in your household used the following: Food bank Yes No Don't know Refuse to answer Other community service that provides free food to people in need Yes No Don't know Refuse to answer
FOOD BANK USE FREQUENCY NEW 2022 *FDBANK_FREQ* COUNTRY SPECIFIC WORDING COMSERV_FREQ	*UNIVERSE: Respondents who indicated they used a food bank* How many times did anyone in your household use a <u>food bank in the past 30 days</u>? None Once Twice Three times Four or more times Don't know Refuse to answer *UNIVERSE: Respondents who indicated they used a community service to access free food* How many times did anyone in your household use <u>another community service that provides free food to people in need in the past 30 days</u>? None Once Twice Three times Four or more times Don't know Refuse to answer
FOOD AFFORDABILITY NEW 2022 *AFF*	Has food become more expensive for you in the last 12 months? Much less expensive A little less expensive No change A little more expensive Much more expensive Don't know Refuse to answer
FOOD AFFORDABILITY ACTIONS	*UNIVERSE: Respondents who indicated that food is a little or much more expensive* Have you done anything different in the last 12 months because food is more expensive? (Select all that apply).

NEW 2022 COUNTRY SPECIFIC WORDING *AFF_ACT_BRAND* *AFF_ACT_LESS* *AFF_ACT_TYPES* *AFF_ACT_CHAIN* *AFF_ACT_BULK* *AFF_ACT_DISC* *AFF_ACT_GREW* *AFF_ACT_SCRATCH* *AFF_ACT_FDBANK* *AFF_ACT_REST* *AFF_ACT_NONE* *AFF_ACT_DK* *AFF_ACT_R*	[PROGRAMMER NOTE: RANDOMIZE ORDER OF ITEM PRESENTATION.] Switched to less expensive brands Bought less food Changed the types of foods I buy Shopped at lower-priced supermarkets or discount chains Bought in bulk or value sizes Used more discount coupons or sales Grew more of my own food Baked or cooked from scratch more Used a food bank or other food assistance Bought less restaurant or take-away food None of the above Don't know Refuse to answer
FOOD AFFORDABILITY - FOOD PURCHASE IMPACT NEW 2022 REVISED 2024 (universe) COUNTRY SPECIFIC WORDING *AFF_BUY_FV* *AFF_BUY_MEAT* *AFF_BUY_MILK* *AFF_BUY_SNACK* *AFF_BUY_DESSERT* *AFF_BUY_BEV* *AFF_BUY_READY*	*UNIVERSE: Respondents who indicated that food is a little or much more expensive, or a little or much less expensive* **Has price affected how much you buy of these foods?** [PROGRAMMER NOTE: RANDOMIZE ORDER OF ITEM PRESENTATION.] **Fresh fruits and vegetables** **Meat** **Milk and cheese** **Snacks** like crackers, chips or muesli bars **Desserts or treats** like biscuits, ice cream or lollies **Non-alcoholic beverages** like soft drinks and juice **Microwave, frozen or pre-prepared meals** [PROGRAMMER NOTE: Use table format] Buy less Buy more No change Don't know Refuse to answer

BEVERAGE INTAKE

DOMAIN SOURCE	QUESTION
BEVERAGE FREQUENCY CONDITION <mark>NEW 2025</mark>	[PROGRAMMER NOTE: Randomize 50% respondents per country to complete the original Beverage Frequency Questionnaire, and 50% respondents per country to complete the modified Beverage Frequency Questionnaire.]
BEVERAGE FREQUENCY INTRO	*UNIVERSE: Respondents randomized to the original Beverage Frequency Questionnaire* [PROGRAMMER NOTE: Hide back button] Next, we'd like to ask you about the drinks you've had over the PAST 7 DAYS. We'll be asking you about different categories of drinks. First, we'll ask you the TOTAL NUMBER OF DRINKS you've had in each category. Second, we'll ask you about your USUAL SIZE OF DRINK in each category.

BEVERAGE FREQUENCY QUESTIONNAIRE (BFQ) – NUMBER OF DRINKS BY TYPE ADAPTED FROM SEVERAL OTHER PAPER FFQS FOR BEVERAGES. REVISED 2019 *BFQ_#_N* *BFQ_NONE* *BFQ_DK_N* *BFQ_R_N*	*UNIVERSE: Respondents randomized to the original Beverage Frequency Questionnaire* **During the PAST 7 DAYS, HOW MANY DRINKS did you have in each category below?** For example, if you had 2 regular soft drinks during the past 7 days, you would enter 2 in that box. If you had 1 regular soft drink EACH day, you would enter 7 in that box. [PROGRAMMER NOTE: Responses must be numeric and between 0-100; only allow participant to select 1 of none of the above, DK or R] [*numeric*] **Regular soft drink** (Coke, Pepsi, Fanta, Sprite, ginger beer, etc.) ***Not including diet soft drink*** [*numeric*] **Diet soft drink** (Pepsi Max, Diet Coke, etc.) [*numeric*] **100% fruit or vegetable juice** (orange juice, apple juice, etc.) [numeric] **Sweetened fruit drinks** (Prima, fruit punch/cocktail, iced tea, etc.) [numeric] **Low-/no-calorie fruit drinks** (diet lemonade, unsweetened iced tea, etc.) [*numeric*] **Tap water** [*numeric*] **Plain bottled water** [*numeric*] **Regular** flavoured waters or vitamin waters <u>with</u> calories (cordial, Vitaminwater, Pump flavoured water) [*numeric*] **Low-/no-calorie** flavoured waters or vitamin waters (diet cordial, LQD+, Cottees Squirtz, etc.) [*numeric*] **Regular** sports drinks (Gatorade, Powerade, etc.) [*numeric*] **Low-/no-calorie sports drinks** (G2, Powerade Zero, etc.) [*numeric*] **Regular** energy drinks (Red Bull, V, Mother, etc.) [*numeric*] **Low-/no-calorie** energy drinks (Red Bull Sugarfree, etc.) [*numeric*] **Dairy milk** or unsweetened milk alternatives (unsweetened soy, almond, etc.) as a beverage *NOT including milk consumed in cereal, etc*. [*numeric*] **Flavoured milk**, incl. chocolate milk and hot chocolate, or sweetened milk alternatives (sweetened soy, almond, etc.) [*numeric*] **Coffee or tea**, <u>with</u> sugar (with or without milk) [*numeric*] **Coffee or tea**, <u>no sugar</u> (with or without milk or artificial sweetener) [*numeric*] **Sweetened specialty coffees or teas** (mochas, frappuccinos, chai lattes, iced coffee, etc.) [*numeric*] **Sweetened smoothies, protein shakes, or drinkable yogurt** [*numeric*] **Unsweetened** smoothies, protein shakes, or drinkable yogurt [*numeric*] **Beer, cider, alcopop** [*numeric*] **Wine** (red, white or sparkling) [*numeric*] **Spirits** <u>with mixer</u>, cocktails that have calories/sugar (rum & coke, gin & tonic, margarita, martini, etc.) [*numeric*] **Spirits** <u>with no mixer</u> or diet/non-caloric mix (shots, whiskey on the rocks, vodka & soda, rum & diet coke, etc.) None of the above Don't know Refuse to answer
BFQ SIZE INTRO NEW 2019	*UNIVERSE: Respondents randomized to the original Beverage Frequency Questionnaire* **Now we'll ask you about your USUAL SIZE OF DRINK in each category.** [PROGRAMMER NOTE: Hidden custom script identifies which drink categories were consumed and should be shown in the following usual size section]

BFQ – USUAL SIZE ADAPTED FROM SEVERAL OTHER PAPER FFQS FOR BEVERAGES. REVISED 2019 *BFQ_#_SIZE_AUS* *BFQ_#_SIZE_DK_AUS* *BFQ_#_SIZE_R_AUS*	[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. Show each category on a separate page with the question header.] **For each type of drink, what size did you USUALLY have?** If you had different sizes, select the picture that is closest to the average size. **Regular soft drink** (Coke, Pepsi, Fanta, Sprite, ginger beer, etc.) *NOT including diet soft drink* **Diet soft drink** (Diet Pepsi, Coke Zero, etc.)

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

Less				
Less than 250 mL	1 cup (250 mL)	Juicebox (250 mL)	Can (375 mL)	Bottle (375 mL)

	More
Large bottle (500 mL)	More than 500 mL

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

Less				
Less than 250 mL	1 cup (250 mL)	Juicebox (250mL)	Can (375 mL)	Small bottle (500 mL)

		More
Large bottle (600 mL)	Tall can (710 mL)	More than 710 mL

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

Less				
Less than 250 mL	1 cup (250 mL)	Juicebox (250 mL)	Can (375 mL)	Small bottle (500 mL)

		More
Large bottle (600 mL)	Tall can (710 mL)	More than 710 mL

Tap water

| Less | 1 cup (250 mL) | 1.5 cups (375 mL) | 2 cups (500 mL) | Reusable bottle (750 mL) |

Less than 250 mL

More

More than 750 mL

Plain bottled water

Less than 250 mL | Small bottle (250 mL) | Bottle (500 mL) | Large bottle (1 L) | More than 1 L

Regular flavoured waters or vitamin waters **with** calories (cordial, Vitaminwater, Pump flavoured water)

Less than 250 mL | 1 cup (250 mL) | Small bottle (330 mL) | Can (375 mL) | Bottle (600 mL)

Extra large bottle (1 L) | More than 1 L

Low-/no-calorie flavoured waters or vitamin waters (diet cordial, LQD+, Cottees Squirtz, etc.)

Less	1 cup (250 mL)	Small bottle (330 mL)	Can (375 mL)	Bottle (600 mL)
Less than 250 mL				

Extra large bottle (1 L)	More / More than 1 L

Regular sports drinks (Gatorade, Powerade, etc.)

Less	1 cup (250 mL)	Bottle (600 mL)	XL Bottle (1 L)	More
Less than 250 mL				More than 1 L

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

Less	1 cup (250 mL)	Bottle (600 mL)	XL Bottle (1 L)	More
Less than 250 mL				More than 1L

Regular energy drinks (Red Bull, V, Mother, etc.)

Less	Small can (250 mL)	Can (375 mL)	Tall can (500 mL)	Bottle (591 mL)

XL Can (710 mL)	More than 710 mL

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

Less	Small can (250 mL)	Can (375 mL)	Tall can (500 mL)	Bottle (591 mL)

XL Can (710 mL)	More than 710 mL

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

Less	1 cup (250 mL)	Box (250 mL)	Small carton (250 mL)	Medium carton (500 mL)

Large carton (1 L)	More than 1 L

Flavoured milk, incl. chocolate milk and hot chocolate, or sweetened milk alternatives (sweetened soy, almond, etc.)

| Less than 250 mL | 1 cup (250 mL) | Small carton (250 mL) | Bottle (500 mL) | Medium carton (500 mL) |

| Large carton (1 L) | More than 1 L |

Coffee or tea, with sugar (with or without milk)

| Less than 295 mL | Small (295 mL) | 1.5 cups (375 mL) | Medium (415 mL) | Large (473 mL) |

| Extra large (591 mL) | More than 591 mL |

Coffee or tea, no sugar (with or without milk or artificial sweetener)

| Less than 295 mL | Small (295 mL) | 1.5 cups (375 mL) | Medium (415 mL) | Large (473 mL) |

| Extra large (591 mL) | More than 591 mL |

Sweetened specialty coffees or teas (mochas, frappuccinos, chai lattes, iced coffee, etc.)

Less				
Less than 295 mL	Small (295 mL)	1.5 cups (375 mL)	Bottle (400 mL)	Medium (415 mL)

		More
Large (473 mL)	Extra large (591 mL)	More than 591 mL

Sweetened smoothies, protein shakes, or drinkable yogurt

Less				
Less than 93 mL	Small bottle (93 mL)	Bottle (200 mL)	1 cup (250 mL)	1.5 cups (375 mL)

		More
2 cups (500 mL)	Large cup (710 mL)	More than 710 mL

Unsweetened smoothies, protein shakes, or drinkable yogurt

Less				
Less than 93 mL	Small bottle (93 mL)	Bottle (200 mL)	1 cup (250 mL)	1.5 cups (375 mL)

		More
2 cups (500 mL)	Large cup (710 mL)	More than 710 mL

Beer, cider, alcopop

| Less | Pot/middy (285 mL) | Bottle (330 mL) | Can (375 mL) | Large can (440 mL) |

Less than 285 mL

| Pint (570 mL) | Large bottle (750 mL) | More |

More than 750 mL

Wine (red, white or sparkling)

| Less | 150 mL glass | 250 mL glass | More |

Less than 150 mL

More than 250 mL

Spirits <u>with mixer</u>**, cocktails that have calories/sugar**
(rum & coke, gin & tonic, margarita, martini, etc.)

| Less | 1 cup (250 mL) | Can (375 mL) | 1.5 cups (375 mL) | 2 cups (500 mL) |

Less than 250 mL

| More |

More than 500 mL

Spirits <u>with no mixer</u> or diet/non-caloric mix
(shots, whiskey on the rocks, vodka & soda, rum & diet coke, etc.)

Shot (30 mL) | Less than 250 mL | 1 cup (250 mL) | Can (375 mL) | 1.5 cups (375 mL)

2 cups (500 mL) | More than 500 mL

Don't know [*for each type*]
Refuse to answer [*for each type*]

| BFQ – BULK SIZE CONFIRMATION

NEW 2023

BFQ_1_BULK
BFQ_2_BULK
BFQ_7_BULK
BFQ_8_BULK
BFQ_9_BULK
BFQ_10_BULK
BFQ_11_BULK
BFQ_14_BULK
BFQ_15_BULK | *UNIVERSE: Respondents randomized to the original Beverage Frequency Questionnaire*
[PROGRAMMER NOTE: For each selection of a large bulk bottle size (2L pop, 2L diet pop, 1L bottled water OR >1L bottled water, 1L regular flavoured water, 1L low-no calorie flavoured water, 1L regular sports drink, 1L low/no calorie sport drinks, 1L milk OR >1L milk, 1L chocolate milk OR >1L chocolate milk), ask a follow-up question about number of bottles consumed.]

Just to check…
About <u>how many of these [bottles/cartons]</u> did you drink in the past 7 days, in total?
Don't include sharing with others. Only include the amount that you drank.
[show image of bottle selected]
[PROGRAMMER NOTE: refer to carton for milk and chocolate milk; elsewhere refer to bottle]

Less than half a [bottle/carton]
About half a [bottle/carton]
1 [bottle/carton]
2 [bottles/cartons]
3 [bottles/cartons]
4 [bottles/cartons]
5 [bottles/cartons]
6 [bottles/cartons]
7 [bottles/cartons]
8 [bottles/cartons]
9 [bottles/cartons]
10 [bottles/cartons]
More than 10 [bottles/cartons]
Don't know
Refuse to answer |

BFQ - CONSUME DEALCOHOLIZED DRINKS NEW 2023 *NONALC_CONS*	*UNIVERSE: Respondents randomized to the original Beverage Frequency Questionnaire* **During the PAST 7 DAYS, did you have any <u>non-alcoholic</u> beer, wine or spirits?** Yes No Don't know Refuse to answer
BFQ V2 – INTRO NEW 2025	*UNIVERSE: Respondents randomized to the modified Beverage Frequency Questionnaire* [PROGRAMMER NOTE: Hide back button] **Next, we're going to ask you about the drinks you had in the <u>last 7 days</u>.**
BFQ V2 – NON-ALCOHOLIC BEVERAGE CONSUMPTION NEW 2025 *BFQ2_[1-14]*	*UNIVERSE: Respondents randomized to the modified Beverage Frequency Questionnaire* **Did you have any of these drinks in the last 7 days?** **Regular soft drinks** like Coke, Pepsi, Fanta, Sprite, ginger beer **Diet soft drinks** like Pepsi Max, Diet Coke **100% fruit or vegetable juice** like orange juice, apple juice **Fruit drinks** like cordial, tropical punch, iced tea, flavoured/vitamin waters **Tap water** including from a filter or water cooler **Plain bottled water** **Carbonated or sparkling water (low or no-kilojoule)** like Mount Franklin **Sports drinks** like Gatorade, Powerade **Energy drinks** like Red Bull, V, Monster **Milk or alternatives** like unsweetened soy or almond milk *Don't include milk in cereal, coffee or tea.* **Flavoured milk or alternatives** like chocolate milk or sweetened soy or almond milk **Coffee or tea** **Sweetened specialty coffees or teas** like mochas, frappuccinos, chai lattes, iced coffees, bubble tea **Smoothies, protein shakes, or drinkable yogurt** [PROGRAMMER NOTE: Use table with 'Yes'/'No'/'Don't know'/'Refuse to answer' for each drink type] Yes No Don't know Refuse to answer

BFQ V2 - ALCOHOLIC BEVERAGE CONSUMPTION NEW 2025 *BFQ2_[15-20]*	*UNIVERSE: Respondents randomized to the modified Beverage Frequency Questionnaire* **Did you have any of these drinks in the last 7 days?** **Beer** **Wine** **Cider** (alcoholic) **Premixed drinks, spirits with mixers, hard seltzers, or cocktails** **Spirits with <u>no mixer</u>** **Non-alcoholic beer, wine or spirits or mocktails** [PROGRAMMER NOTE: Use table with 'Yes'/'No'/'Don't know'/'Refuse to answer' for each drink type] Yes No Don't know Refuse to answer
BFQ V2 - AMOUNT PREAMBLE NEW 2025	*UNIVERSE: Respondents randomized to the modified Beverage Frequency Questionnaire* **Next, we're going to ask about <u>how much</u> you drank in the last 7 days for each category.**
BFQ V2 – ANY DIET FRUIT DRINKS NEW 2025 *BFQ2_4_ANYDIET*	[PROGRAMMER NOTE: Ask the following 'ANY DIET…' questions <u>immediately before</u> the corresponding 'BFQ – CONTAINER SIZE' and 'BFQ – NUMBER OF DRINKS' questions for Fruit drinks, Sports drinks, Energy drinks, Smoothies/protein shakes/drinkable yogurt, and Mixed drinks/coolers/seltzers/cocktails.] *UNIVERSE: Selected "Yes" for 'Fruit drinks' in last 7 days.* **You told us you had FRUIT DRINKS in the last 7 days.** **Were any of the fruit drinks <u>diet, low-kilojoule or no-kilojoule</u>?** (like diet cordial, unsweetened iced tea) No Some fruit drinks were diet, low-kilojoule or no-kilojoule All fruit drinks were diet, low-kilojoule or no-kilojoule Don't know Refuse to answer

BFQ V2 – ANY DIET SPORTS DRINKS NEW 2025 *BFQ2_8_ANYDIET*	*UNIVERSE: Selected "Yes" for 'Sports drinks' in last 7 days.* **You told us you had SPORTS DRINKS in the last 7 days.** **Were any of the sports drinks <u>diet, low-kilojoule or no-kilojoule</u>?** (like G2, Powerade Zero) No Some sports drinks were diet, low-kilojoule or no-kilojoule All sports drinks were diet, low-kilojoule or no-kilojoule Don't know Refuse to answer
BFQ V2 – ANY DIET ENERGY DRINKS NEW 2025 *BFQ2_9_ANYDIET*	*UNIVERSE: Selected "Yes" for 'Energy drinks' in last 7 days.* **You told us you had ENERGY DRINKS in the last 7 days.** **Were any of the energy drinks <u>diet, low-kilojoule or no-kilojoule</u>?** (like Red Bull Sugarfree, Celsius) No Some energy drinks were diet, low-kilojoule or no-kilojoule All energy drinks were diet, low-kilojoule or no-kilojoule Don't know Refuse to answer
BFQ V2 – ANY DIET SMOOTHIES NEW 2025 *BFQ2_14_ANYDIET*	*UNIVERSE: Selected "Yes" for 'Smoothies, protein shakes or drinkable yogurt' in last 7 days.* **You told us you had SMOOTHIES, PROTEIN SHAKES, OR DRINKABLE YOGURT in the last 7 days.** **Were any of the smoothies, protein shakes, or drinkable yogurt <u>unsweetened, diet or low-kilojoule</u>?** (like low-sugar protein shakes or low-sugar drinkable yogurt) No Some were unsweetened, diet or low-kilojoule All were unsweetened, diet or low-kilojoule Don't know Refuse to answer

BFQ V2 – ANY DIET MIXED DRINKS NEW 2025 *BFQ2_18_ANYDIET*	*UNIVERSE: Selected "Yes" for 'Mixed drinks/coolers/seltzers/cocktails' in last 7 days.* **You told us you had PREMIXED DRINKS, SPIRITS WITH MIXERS, HARD SELTZERS, OR COCKTAILS in the last 7 days.** **Were any of the premixed drinks, spirits with mixers, hard seltzers or cocktails <u>diet or low-kilojoule</u>?** (like vodka & soda, rum & diet coke, White Claw, or sugar-free cocktails or seltzers) No Some were diet or low-kilojoule All were diet or low-kilojoule Don't know Refuse to answer
BFQ V2 – CONTAINER SIZE NEW 2025 *BFQ2_[1-20]_SIZE_AU BFQ2_#_SIZE_AU _DKR* *BFQ2_4DIET_SIZE_AU BFQ2_4REG_SIZE_AU* *BFQ2_8DIET_SIZE_AU BFQ2_8REG_SIZE_AU* *BFQ2_9DIET_SIZE_AU BFQ2_9REG_SIZE_AU* *BFQ2_14DIET_SIZE_AU BFQ2_14REG_SIZE_AU* *BFQ2_18DIET_SIZE_AU BFQ2_18REG_SIZE_AU*	*UNIVERSE: Selected "Yes" for the corresponding beverage categories, as indicated below.* [PROGRAMMER NOTE: Ask this container size question for each beverage category previously selected, using category specific text/images shown below. Ask about each relevant category on a separate screen. Images will be clickable. Respondents may select <u>one</u> container image, or DK/R.] **We want to know how much [BEVERAGE CATEGORY] you had in the last 7 days.** (like [examples of beverage category, where relevant]) **What size container would you like to use to report this?** [Display array of container images corresponding to the beverage category, as illustrated below.] Don't know Refuse to answer [PROGRAMMER NOTE: Ask above question for relevant categories using the below text/image] *UNIVERSE: Selected "Yes" for 'Regular soft drink' in last 7 days.* **REGULAR SOFT DRINK** (like Coke, Pepsi, Fanta, Sprite, ginger beer)

UNIVERSE: Selected "Yes" for 'Diet soft drinks' in last 7 days.

DIET SOFT DRINK
(like Pepsi Max, Diet Coke)

| 1 cup (250 mL) | Small can (250 mL) | Can (375 mL) | Fountain cup (473 mL) | Fountain cup (591 mL) | Bottle (600 mL) | Fountain cup (710 mL) | Large bottle (1.25 L) |

UNIVERSE: Selected "Yes" for '100% fruit or vegetable juice' in last 7 days.

100% FRUIT OR VEGETABLE JUICE
(like orange juice, apple juice)

| 1 cup (250 mL) | Juicebox (250 mL) | Bottle (350 mL) | Carton (1 L) |

UNIVERSE: Selected "Some…" or "All…" for 'Diet/low cal fruit drinks' in last 7 days.

DIET, LOW-KILOJOULE OR NO-KILOJOULE FRUIT DRINK
(like diet cordial, unsweetened iced tea)

| 1 cup (250 mL) | Juicebox (250 mL) | Bottle (350 mL) | Can (375 mL) | Tall can (680 mL) | Carton (1 L) |

UNIVERSE: Selected "None" or "Some…" for 'Diet/low cal fruit drinks' in last 7 days.

SWEETENED FRUIT DRINK
(like cordial, tropical punch, iced tea, flavoured/vitamin waters)

| 1 cup (250 mL) | Juicebox (250 mL) | Bottle (350 mL) | Can (375 mL) | Tall can (680 mL) | Carton (1 L) |

UNIVERSE: Selected "Yes" for 'Tap water' in last 7 days.

TAP WATER
(including from a filter or water cooler)

| 1 cup (250 mL) | 1.5 cups (375 mL) | 2 cups (500 mL) | Reusable bottle (750 mL) | Reusable bottle (1 L) |

UNIVERSE: Selected "Yes" for 'Plain bottled water' in last 7 days.

PLAIN BOTTLED WATER

| 1 cup (250 mL) | Small bottle (250 mL) | Bottle (600 mL) | Large bottle (1 L) |

UNIVERSE: Selected "Yes" for 'Carbonated or sparkling water' in last 7 days.

CARBONATED OR SPARKLING WATER (LOW OR NO-KILOJOULE)
(like Mount Franklin)

| 1 cup (250 mL) | Small can (250 mL) | Can (375 mL) | Bottle (500 mL) | Large bottle (750 mL) | Extra large bottle (1.25 L) |

UNIVERSE: Selected "Some…" or "All…" for 'Diet/low cal sports drinks' in last 7 days.

DIET, LOW-KILOJOULE OR NO-KILOJOULE SPORTS DRINK
(like G2, Powerade Zero)

| 1 cup (250 mL) | Bottle (600 mL) | XL bottle (1 L) |

UNIVERSE: Selected "None" or "Some…" for 'Diet/low cal sports drinks' in last 7 days.

REGULAR SPORTS DRINK
   (like Gatorade, Powerade)

| 1 cup (250 mL) | Bottle (600 mL) | XL bottle (1 L) |

UNIVERSE: Selected "Some…" or "All…" for 'Diet/low cal energy drinks' in last 7 days.

DIET, LOW-KILOJOULE OR NO-KILOJOULE ENERGY DRINK
   (like Red Bull Sugarfree, Celsius)

| Small can (250 mL) | Can (350 mL) | Tall can (500 mL) | Bottle (591 mL) | XL can (710 mL) |
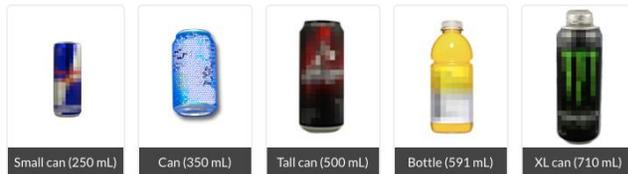
UNIVERSE: Selected "None" or "Some…" for 'Diet/low cal energy drinks' in last 7 days.

REGULAR ENERGY DRINK
   (like Red Bull, V, Monster)

| Small can (250 mL) | Can (350 mL) | Tall can (500 mL) | Bottle (591 mL) | XL can (710 mL) |

UNIVERSE: Selected "Yes" for 'Dairy milk or alternatives' in last 7 days.

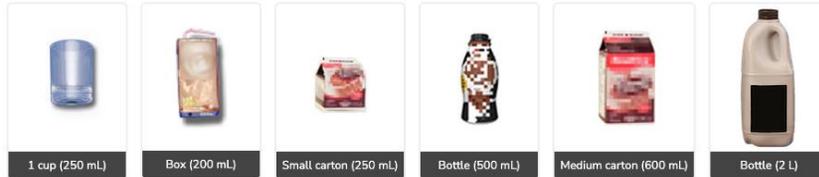## MILK OR ALTERNATIVES
   (like unsweetened soy or almond milk)
   Don't include milk in cereal, coffee or tea.

| 1 cup (250 mL) | Box (200 mL) | Small carton (250 mL) | Medium carton (500 mL) | Bottle (1 L) |
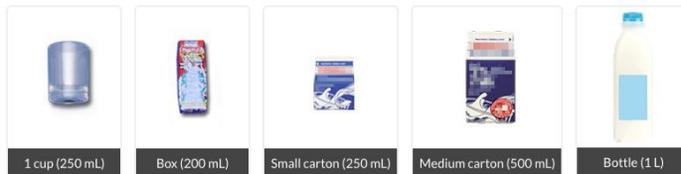
UNIVERSE: Selected "Yes" for 'Flavoured milk' in last 7 days.

FLAVOURED MILK OR ALTERNATIVES
    (like chocolate milk or sweetened soy or almond milk)

| 1 cup (250 mL) | Box (200 mL) | Small carton (250 mL) | Bottle (500 mL) | Medium carton (600 mL) | Bottle (2 L) |

UNIVERSE: Selected "Yes" for 'Coffee or tea' in last 7 days.

COFFEE OR TEA

| Small (295 mL) | 1.5 cups (375 mL) | Medium (415 mL) | Large (473 mL) | Extra large (591 mL) |

UNIVERSE: Selected "Yes" for 'Sweetened specialty coffee or tea' in last 7 days.

SWEETENED SPECIALTY COFFEE OR TEA
    (like mochas, frappuccinos, chai lattes, iced coffees, bubble tea)

| Small (295 mL) | 1.5 cups (375 mL) | Medium (415 mL) | Large (473 mL) | Extra large (591 mL) |

UNIVERSE: Selected "Some…" or "All…" for 'Unsweetened/diet smoothies/protein shakes/yogurt' in last 7 days.

UNSWEETENED, DIET OR LOW-KILOJOULE SMOOTHIES, PROTEIN SHAKES, OR DRINKABLE YOGURT
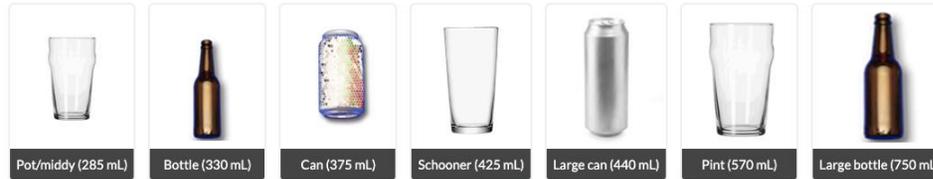   (like low-sugar protein shakes or low-sugar drinkable yogurt)

| Small bottle (65 mL) | 1 cup (250 mL) | Bottle (330 mL) | 1.5 cups (375 mL) | 2 cups (500 mL) | Large cup (710 mL) |

UNIVERSE: Selected "None" or "Some…" for 'Unsweetened/diet smoothies/protein shakes/yogurt' in last 7 days.

SWEETENED SMOOTHIES, PROTEIN SHAKES, OR DRINKABLE YOGURT

| Small bottle (65 mL) | 1 cup (250 mL) | Bottle (330 mL) | 1.5 cups (375 mL) | 2 cups (500 mL) | Large cup (710 mL) |

UNIVERSE: Selected "Yes" for 'Beer' in last 7 days.

BEER

| Pot/middy (285 mL) | Bottle (330 mL) | Can (375 mL) | Schooner (425 mL) | Large can (440 mL) | Pint (570 mL) | Large bottle (750 mL) |

UNIVERSE: Selected "Yes" for 'Wine' in last 7 days.

WINE

| 150 mL glass | 250 mL glass |

UNIVERSE: Selected "Yes" for 'Cider' in last 7 days.

CIDER (ALCOHOLIC)

| Pot/middy (285 mL) | Bottle (330 mL) | Can (375 mL) | Schooner (425 mL) | Large can (440 mL) | Pint (570 mL) | Large bottle (750 mL) |
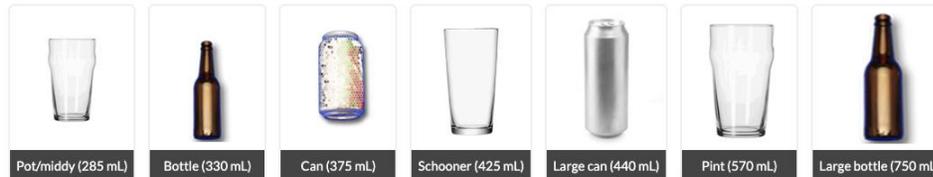
UNIVERSE: Selected "Some…" or "All…" for 'Diet/low cal premixes' in last 7 days.

DIET OR LOW-KILOJOULE PREMIXED DRINKS, SPIRITS WITH MIXERS, HARD SELTZERS, OR COCKTAILS

(like vodka & soda, rum & diet coke, White Claw, other sugar-free cocktails or seltzers)

Small can (250 mL) | 1 cup (250 mL) | Bottle (275 mL) | Can (375 mL) | 1.5 cups (375 mL) | 2 cups (500 mL)

UNIVERSE: Selected "None" or "Some…" for 'Diet/low cal premixes' in last 7 days.

SUGARY PREMIXED DRINKS, SPIRITS WITH MIXERS, HARD SELTZERS, OR COCKTAILS

(like whiskey & cola, Vodka Cruiser, gin & tonic, margaritas)

Small can (250 mL) | 1 cup (250 mL) | Bottle (275 mL) | Can (375 mL) | 1.5 cups (375 mL) | 2 cups (500 mL)

UNIVERSE: Selected "Yes" for 'Hard alcohol with no mix' in last 7 days.

SPIRITS WITH NO MIXER

Shot (30 mL) | 1 cup (250 mL)

UNIVERSE: Selected "Yes" for 'Non-alcoholic beer/wine/spirits/mocktails' in last 7 days.

NON-ALCOHOLIC BEER, WINE, SPIRITS OR MOCKTAILS

1 cup (250 mL) | Can (250 mL) | Bottle (330 mL) | Can (375 mL) | Wine glass (150 mL) | Pint (570 mL)

BFQ V2 – NUMBER OF DRINKS NEW 2025 *BFQ2_[1-20]_N_AU#* *BFQ2_[1-20]_N_AU#_N*	*UNIVERSE: Respondents who selected a container size in the corresponding 'BFQ – CONTAINER SIZE' question). Skip for categories where the respondent selected DK/R for the size.* [PROGRAMMER NOTE: Ask respondents to specify the number of drinks for each relevant beverage category (if a container size was selected) using the following question.] **In total, about HOW MANY of these did you drink in the last 7 days?** [**Name** and examples of beverage category] *If you also had [beverage category] from other container sizes, please estimate how many of this container size that would equal.* [Display the container image selected in corresponding 'BFQ V2 – CONTAINER SIZE' question] Number of [glasses/cans/cups/bottles]: _____ [numeric; allow decimals] Don't know Refuse to answer [PROGRAMMER NOTE: Ask above question for each relevant category, using below descriptor] **Regular soft drinks** like Coke, Pepsi, Fanta, Sprite or ginger beer **Diet soft drinks** like Pepsi Max or Diet Coke **100% fruit or vegetable juice** like orange juice or apple juice **Diet, low-kilojoule or no-kilojoule fruit drinks** like diet cordial or unsweetened iced tea **Sweetened fruit drinks** like cordial, tropical punch, iced tea or flavoured/vitamin waters **Tap water** including from a filter or water cooler **Plain bottled water** **Carbonated or sparkling water (low or no-kilojoule)** like Mount Franklin **Diet, low-kilojoule or no-kilojoule sports drinks** like G2 or Powerade Zero **Regular sports drinks** like Gatorade or Powerade **Diet, low-kilojoule or no-kilojoule energy drinks** like Red Bull Sugarfree or Celsius **Regular energy drinks** like Red Bull, V or Monster **Milk or alternatives** like unsweetened soy or almond milk *Don't include milk in cereal, coffee or tea.* **Flavoured milk or alternatives** like chocolate milk or sweetened soy or almond milk **Coffee or tea** **Sweetened specialty coffees or teas** like mochas, frappuccinos, chai lattes, iced coffees, or bubble tea **Unsweetened, diet or low-kilojoule smoothies, protein shakes, or drinkable yogurt** like low-sugar protein shakes or low-sugar drinkable yogurt **Sweetened smoothies, protein shakes, or drinkable yogurt** **Beer** **Wine** **Cider** (alcoholic) **Diet or low-kilojoule premixed drinks, spirits with mixers, hard seltzers, or cocktails** like vodka & soda, rum & diet coke, White Claw, or other sugar-free cocktails or seltzers **Sugary premixed drinks, spirits with mixers, hard seltzers, or cocktails** like whiskey & cola, Vodka Cruiser, gin & tonic or margaritas **Spirits with <u>no mixer</u>** **Non-alcoholic beer, wine or spirits or mocktails**

FOOD PREPARATION AND FOOD SKILLS

DOMAIN SOURCE	QUESTION
FOOD SHOPPING ROLE ADAPTED FROM USDA: AMERICAN TIME USE SURVEY - EATING & HEALTH MODULE 2014-2016 REVISED 2019 *SHOP*	How much of the food shopping do you do in your household? Most Share equally with other(s) Some, but less than other(s) None Don't know Refuse to answer
FREQUENCY OF PREPARING MAIN MEALS UK NATIONAL DIET AND NUTRITION SURVEY (NDNS) *PREP_FREQ*	How often do you prepare a main meal for yourself or others? Never Only for special occasions Less than once a week One or two days a week Some days (3–4 a week) Most days (5–6 a week) Every day Don't know Refuse to answer
COOKING SKILLS – GENERAL *SKILL_OVERALL*	Overall, how would you rate your cooking skills? Poor Fair Good Very good Excellent Don't know Refuse to answer

FOOD SECURITY

DOMAIN SOURCE	QUESTION
FOOD SECURITY – INTRO 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.
FOOD SECURITY – HH1 USDA HFSM *HH1*	Which of these statements best describes the food eaten in your household in the last 12 months: You and other household members always had enough of the kinds of foods you wanted to eat. You and other household members had enough to eat, but not always the <u>kinds</u> of food you wanted. Sometimes you and other household members did <u>not</u> have <u>enough </u>to eat. <u>Often</u> you and other household members didn't have enough to eat. Don't know Refuse to answer
FOOD SECURITY – HH INTRO	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 LAST 12 MONTHS</u> – that is since last [name of current month].
FOOD SECURITY – HH2 USDA HFSM *HH2*	You and other household members worried that food would run out before you got money to buy more. Often true Sometimes true Never true Don't know Refuse to answer
FOOD SECURITY – HH3 USDA HFSM *HH3*	The food that you and other household members bought just didn't last, and there wasn't any money to get more. Often true Sometimes true Never true Don't know Refuse to answer
FOOD SECURITY – HH4 USDA HFSM *HH4*	You and other household members couldn't afford to eat balanced meals. Often true Sometimes true Never true Don't know Refuse to answer
FIRST LEVEL SCREENING	If affirmative response to one or more of HH1-HH4 (i.e., HH1=3 or 4, or HH2-HH4=1 ("often true") or 2 ("sometimes true"), then continue to AD1; otherwise, if children under age 18 are present in the household (child_home>0), skip to CH1; otherwise skip to End of Food Security Module.
FOOD SECURITY – AD1 USDA HFSM *AD1*	*UNIVERSE: Respondents who passed first level screening* 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? Yes No Don't know Refuse to answer

FOOD SECURITY – AD1a USDA HFSM *AD1A*	*UNIVERSE: AD1=1 (yes)* **How often did this happen?** Almost every month Some months but not every month Only 1 or 2 months Don't know Refuse to answer
FOOD SECURITY – AD2 USDA HFSM *AD2*	*UNIVERSE: Respondents who passed first level screening* **In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?** Yes No Don't know Refuse to answer
FOOD SECURITY – AD3 USDA HFSM *AD3*	*UNIVERSE: Respondents who passed first level screening* **In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?** Yes No Don't know Refuse to answer
FOOD SECURITY – AD4 USDA HFSM *AD4*	*UNIVERSE: Respondents who passed first level screening* **In the last 12 months, did you lose weight because there wasn't enough money for food?** Yes No Don't know Refuse to answer
SECOND LEVEL SCREENING	If affirmative response to one or more of AD1-AD4, then continue to AD5; otherwise, if children under age 18 are present in the household (child_home >0), skip to CH1, otherwise skip to End of Food Security Module.
FOOD SECURITY – AD5 USDA HFSM *AD5*	*UNIVERSE: Respondents who passed second level screening* **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?** Yes No Don't know Refuse to answer
FOOD SECURITY – AD5a USDA HFSM *AD5A*	*UNIVERSE: AD5=1 (yes)* **How often did this happen?** Almost every month Some months but not every month Only 1 or 2 months Don't know Refuse to answer
CHILD LEVEL 1 SCREENING	Households with no child under age 18 (child_home=0, DK/R), skip to End of Food Security Module.

FOOD SECURITY CHILD INTRO	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* Now you will see several statements that people have made about the food situation of their children.
FOOD SECURITY – CH1 USDA HFSM CH1	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* 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. Often true Sometimes true Never true Don't know Refuse to answer
FOOD SECURITY – CH2 USDA HFSM CH2	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* You or other adults in your household couldn't feed the children a balanced meal, because you couldn't afford that. Often true Sometimes true Never true Don't know Refuse to answer
FOOD SECURITY – CH3 USDA HFSM CH3	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* The children were not eating enough because you or other adults in your household just couldn't afford enough food. Often true Sometimes true Never true Don't know Refuse to answer
CHILD LEVEL 2 SCREENING	If affirmative response to one or more of CH1-CH3 (i.e., CH1-CH3= 1 ("often true") or 2 ("sometimes true")), then continue to CH4; otherwise skip to End of Food Security Module.
FOOD SECURITY – CH4 USDA HFSM CH4	*UNIVERSE: Respondents who passed child level 2 screening* In the last 12 months, since last [current month] did you ever cut the size of any of the children's meals because there wasn't enough money for food? Yes No Don't know Refuse to answer
FOOD SECURITY – CH5 USDA HFSM CH5	*UNIVERSE: Respondents who passed child level 2 screening* In the last 12 months, did any of the children ever skip meals because there wasn't enough money for food? Yes No Don't know Refuse to answer

FOOD SECURITY – CH5a USDA HFSM *CH5A*	*UNIVERSE: CH5=1 (yes)* **How often did this happen?** Almost every month Some months but not every month Only 1 or 2 months Don't know Refuse to answer
FOOD SECURITY – CH6 USDA HFSM *CH6*	*UNIVERSE: Respondents who passed child level 2 screening* **In the last 12 months, were the children ever hungry but you just couldn't afford more food?** Yes No Don't know Refuse to answer
FOOD SECURITY – CH7 USDA HFSM *CH7*	*UNIVERSE: Respondents who passed child level 2 screening* **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?** Yes No Don't know Refuse to answer
DRINKING WATER SOURCE ==NEW 2021== ==REVISED 2022== COUNTRY SPECIFIC WORDING *WAT_SOURCE* *WAT_SOURCE_OTEXT*	**The next questions are about drinking water.** **What is the MAIN type of water you drink in your home?** Tap water (filtered or unfiltered) Boiled tap water (filtered or unfiltered) Bottled water (any size) Other (specify): _____ Don't know Refuse to answer
WATER SAFETY – DRINK ==NEW 2022== *WAT_SAFETY*	**How safe is it to drink the <u>tap water</u> from your home?** **(Do not include filtered, boiled, or bottled water.)** Not at all safe A little safe Somewhat safe Very safe Don't know Refuse to answer

DIETARY PATTERNS AND EFFORTS

DOMAIN SOURCE	QUESTION
BODY IMAGE AND WEIGHT INTRO	**The following questions are about eating behaviours, body image and weight. If this raises issues for you, please call The Butterfly Foundation on 1800 334 673 or Lifeline on 13 11 14.**
EATING RESTRICTIONS ADAPTED (HEAVILY) FROM TNT 2015 REVISED 2022 REVISED 2023 (universe) *RESTRICT2_[TYPE]* *RESTRICT2_NONE* *RESTRICT2_DK* *RESTRICT2_R* *RESTRICT2_RELTEXT*	Would you describe yourself as: (Select all that apply) Vegetarian (don't eat meat or fish) Vegan (don't eat animal products: no meat/fish, no dairy, no eggs) Pescatarian (eat fish, but no other meat) Following a religious practice for eating → Please specify: [*open-ended*] None of the above Don't know Refuse to answer

DIET MODIFICATION EFFORTS – V3
NEW 2024 REVISED 2025 (AUS)
COUNTRY SPECIFIC WORDING
EFFORT3_[TYPE]

Do you make an effort to consume more or less of the following?

If you don't have any, select 'Consume LESS / NONE'.

	Consume LESS / NONE	Consume MORE	No effort made	Don't Know	Refuse to answer
~~Calories~~Kilojoules					
Fat					
Saturated fat					
Protein					
Fibre					
Sugar / added sugar					
Salt / sodium					
Fruit and vegetables					
Whole grains					
Dairy products					
All meats					
Red or processed meat (e.g., beef, lamb, deli meat) only					
Sugary drinks					
100% fruit juice					
'Artificial' low-kilojoule sweeteners like aspartame					
'Natural' low-kilojoule sweeteners like stevia					
Ultra-processed foods					

[PROGRAMMER: Split on two screens, with first 9 items on screen 1, next 8 items on screen 2]

| PLANT BASED PROTEIN – SPECIAL EFFORT

<mark>NEW 2022</mark>
<mark>REVISED 2023</mark>
<mark>(universe)</mark>

PLANT2

<mark>NEW 2025</mark>

PLANT3_MEAT
PLANT3_NUT
PLANT3_NONE
PLANT3_DK
PLANT3_R | [PROGRAMMER NOTE: Randomize 50% of respondents to complete existing 'plant2' measure and the other 50% to complete the revised 'plant3' measure]

Do you make a <u>special effort</u> to eat <u>plant-based protein foods</u>, like beans, lentils, nuts, seeds, or soy products like tofu?
Yes
No
I'm not sure what plant-based protein foods are [valid option]
Don't know
Refuse to answer

Do you make an effort to eat the following plant-based protein foods?
Select all that apply.

Packaged plant-based meats or veggie burgers.
Nuts, seeds, beans and lentils, soy products like tofu, or peanut butter and other nut-butters. **Do not** include green beans.
None of the above
Don't know
Refuse to answer |

WEIGHT LOSS EFFORTS, BODY PERCEPTIONS, AND WEIGHT STIGMA

DOMAIN SOURCE	QUESTION
PERCEIVED BODY SIZE 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. IMAGES FROM (COLLINS, 1991) <mark>REVISED 2020</mark> *WT_BODY_F* *WT_BODY_F_DK* *WT_BODY_F_R* *WT_BODY_M* *WT_BODY_M_DK* *WT_BODY_M_R*	Which body is most like your own body? *UNIVERSE: gender= 2 (woman) or 4 (trans female/trans woman)* *UNIVERSE: gender= 1 (man) or 3 (trans male/trans man)* Don't know Refuse to answer

BODY SIZE IDEAL ADAPTED FROM GUTS <mark>NEW 2022</mark> *WT_IDEAL_F* *WT_IDEAL_F_DK* *WT_IDEAL_F_R* *WT_IDEAL_M* *WT_IDEAL_M_DK* *WT_IDEAL_M_R*	Which picture looks most like how you <u>WANT</u> YOUR BODY TO LOOK? *UNIVERSE: gender= 2 (woman) or 4 (trans female/trans woman)* *UNIVERSE: gender= 1 (man) or 3 (trans male/trans man)* Don't know Refuse to answer
PERCEIVED WEIGHT CCHS *WT_PERCEIVE*	Do you consider yourself to be… Obese Overweight Underweight Just about right Don't know Refuse to answer
WEIGHT BEHAVIOUR Adapted from: NHANES, 2009-2010 *WT_TRY_LOSS* *WT_TRY_GAIN* *WT_TRY_SAME* *WT_TRY_NOT* *WT_TRY_DK* *WT_TRY_R*	During the <u>past 12 months</u> have you tried to…. (Select all that apply) Lose weight Gain weight Stay the same weight I have not tried to do anything about my weight Don't know Refuse to answer
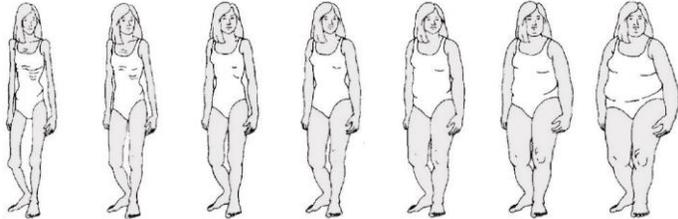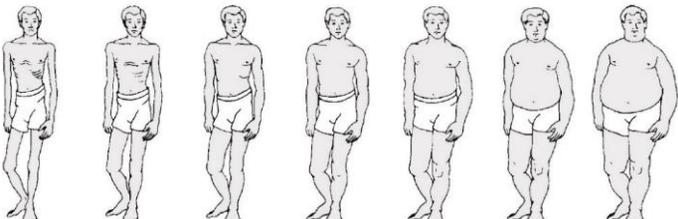
DOCTOR ADVICE NEW 2024 *DOC_ADV*	**In the past 12 months, has a doctor or nurse advised you to do any of the following?** [PROGRAMMER NOTE: Show table with yes/no/DK/R for each item] Lose weight Exercise more Reduce sodium or salt intake Reduce cholesterol in your diet Eat a healthy, balanced diet Take weight loss medication
WEIGHT LOSS OR DIABETES MEDICATIONS – EVER USE NEW 2024 *RX_WTDB*	**Have you EVER taken any prescription medications for weight loss and/or diabetes?** Yes No Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – EVER USE NEW 2024 REVISED 2025 *RX_EVER_SMINJ* *RX_EVER_SMTAB* *RX_EVER_TIRZ* *RX_EVER_LIRA* *RX_EVER_NALT* *RX_EVER_DULA* *RX_EVER_PHEN* *RX_EVER_ORL* *RX_EVER_EXEN* *RX_EVER_SET* *RX_EVER_OTH* *RX_EVER_OTEXT* *RX_EVER_NONE* *RX_EVER_DK* *RX_EVER_R*	*UNIVERSE: rx_wtdb=yes (ever taken a medication for weight loss or diabetes)* **Have you EVER taken any of the following prescription medications?** (Select all that apply) Semaglutide injections (e.g., Ozempic, Wegovy) Semaglutide tablets (e.g., Rybelsus) Tirzepatide (e.g., Mounjaro, Zepbound) Liraglutide (e.g., Saxenda, Victoza) Naltrexone-bupropion (e.g., Contrave, Mysimba) Dulaglutide (e.g., Trulicity) Phentermine and/or topiramate (e.g., Qsymia, Duromine) Orlistat (e.g., Xenical, Alli, Orlos) Exenatide (e.g., BYDUREON BCise) Setmelanotide (e.g., Imcivree) Other prescription weight loss medication (please specify): _____ None of the above Don't know Refuse to answer

| WEIGHT LOSS MEDICATIONS – CURRENT

NEW 2024 REVISED 2025

RX_CURR_SMINJ
RX_CURR_SMTAB
RX_CURR_TIRZ
RX_CURR_LIRA
RX_CURR_NALT
RX_CURR_DULA
RX_CURR_PHEN
RX_CURR_ORL
RX_CURR_EXEN
RX_CURR_SET
RX_CURR_OTH
RX_CURR_OTEXT
RX_CURR_NONE
RX_CURR_DK
RX_CURR_R | *UNIVERSE: rx_ever=ever taken any of 10 pre-specified medications or 'other'*
Are you CURRENTLY taking any of the following prescription medications?
(Select all that apply)

[PROGRAMMER NOTE: only list medications previously selected in 'rx_ever'; as well as 'other prescription weight loss medication', none of the above, don't know and refused].
Semaglutide injections (e.g., Ozempic, Wegovy)
Semaglutide tablets (e.g., Rybelsus)
Tirzepatide (e.g., Mounjaro, Zepbound)
Liraglutide (e.g., Saxenda, Victoza)
Naltrexone-bupropion (e.g., Contrave, Mysimba)
Dulaglutide (e.g., Trulicity)
Phentermine and/or topiramate (e.g., Qsymia, Duromine)
Orlistat (e.g., Xenical, Alli, Orlos)
Exenatide (e.g., BYDUREON BCise)
Setmelanotide (e.g., Imcivree)
Other prescription weight loss medication (please specify): _____
None of the above
Don't know
Refuse to answer |
| WEIGHT LOSS MEDICATIONS – LAST 12 MONTHS

NEW 2024 REVISED 2025

RX_12M_SMINJ
RX_12M_SMTAB
RX_12M_TIRZ
RX_12M_LIRA
RX_12M_NALT
RX_12M_DULA
RX_12M_PHEN
RX_12M_ORL
RX_12M_EXEN
RX_12M_SET
RX_12M_OTH
RX_12M_OTEXT
RX_12M_NONE
RX_12M_DK
RX_12M_R | *UNIVERSE: rx_curr=none (ever took any of the 10 pre-specified medications or 'other', but not currently)*
[PROGRAMMER NOTE: Hide back button]
In the PAST 12 MONTHS, did you take any of the following prescription medications?
(Select all that apply)

[PROGRAMMER NOTE: only list medications previously selected in 'rx_ever'; as well as 'other prescription weight loss medication', none of the above, don't know and refused].
Semaglutide injections (e.g., Ozempic, Wegovy)
Semaglutide tablets (e.g., Rybelsus)
Tirzepatide (e.g., Mounjaro, Zepbound)
Liraglutide (e.g., Saxenda, Victoza)
Naltrexone-bupropion (e.g., Contrave, Mysimba)
Dulaglutide (e.g., Trulicity)
Phentermine and/or topiramate (e.g., Qsymia, Duromine)
Orlistat (e.g., Xenical, Alli, Orlos)
Exenatide (e.g., BYDUREON BCise)
Setmelanotide (e.g., Imcivree)
Other prescription weight loss medication (please specify): _____
None of the above
Don't know
Refuse to answer |

WEIGHT LOSS MEDICATIONS – SEMAGLUTIDE BRAND NEW 2024 *RX_SM_BRD_OZ* *RX_SM_BRD_WE* *RX_SM_BRD_OTH* *RX_SM_BRD_OTEXT* *RX_SM_BRD_DK* *RX_SM_BRD_R*	*UNIVERSE: rx_curr=semaglutide injection* **What is the name of the Semaglutide injection you are taking?** *UNIVERSE: rx_12m=semaglutide injection* **What was the name of the Semaglutide injection you took?** (Select all that apply) [PROGRAMMER NOTE: Allow respondents to select all including "I don't know the name" in combination with other brands (but refused=exclusive)] Ozempic Wegovy Other name(s) (please specify): _____ I don't know the name [valid answer] Refuse to answer
WEIGHT LOSS MEDICATIONS – TIRZEPATIDE BRAND NEW 2024 *RX_TR_BRD_MON* *RX_TR_BRD_ZEP* *RX_TR_BRD_OTH* *RX_TR_BRD_OTEXT* *RX_TR_BRD_DK* *RX_TR_BRD_R*	*UNIVERSE: rx_curr=tirzepatide injection* **What is the name of the Tirzepatide injection you are taking?** *UNIVERSE: rx_12m= tirzepatide injection* **What was the name of the Tirzepatide injection you took?** (Select all that apply) [PROGRAMMER NOTE: Allow respondents to select all including "I don't know the name" in combination with other brands (but refused=exclusive)] Mounjaro Zepbound Other name(s) (please specify): _____ I don't know the name [valid answer] Refuse to answer
WEIGHT LOSS MEDICATION OF INTEREST NEW 2024 *RX_INT*	*UNIVERSE: rx_curr= currently taking two or more of the 10 pre-specified medications* Randomly select the name of 1 medication type from the types selected by the respondent as being 'currently' taken (to insert name in subsequent questions). Exclude any open-text 'other' response options from the randomization choices (i.e., if the respondent selected 1 (or more) of the 10 pre-specified medication types, AND entered an 'other' type, only include the types of medications that were pre-specified in the list in the randomization choices). *UNIVERSE: rx_12m=took two or more of the 10 pre-specified medications in past 12 months but not currently* Randomly select the name of 1 medication type from the types selected by the respondent as taken in the past 12 months (to insert name in subsequent questions). Exclude any open-text 'other' response options from the randomization choices (i.e., if the respondent selected 1 (or more) of the 10 pre-specified medication types, AND entered an 'other' type, only include the types of medications that were pre-specified in the list in the randomization choices).

WEIGHT LOSS MEDICATIONS – REASON NEW 2024 *RX_RSN* *RX_RSN_OTEXT*	*UNIVERSE: Using any of 10 pre-specified medications currently or in past 12 months (skip if only selected 'other')* [PROGRAMMER NOTE: Hide back button. Insert name of randomly selected 'medication of interest' into sentence below. If the respondent only selected 1 medication (among the 10 pre-specified types), then insert that medication name]. **We are going to ask you a few more questions about your use of [name of selected/only medication].** **Was the medication prescribed for diabetes, weight loss, or both?** Diabetes only Weight loss only Diabetes and weight loss Other (please specify): _____ Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – EXPERIENCE 1 NEW 2024 *RX_EXPC_HLTH* *RX_EXPC_UHLTH* *RX_EXPC_ENJ* *RX_EXPC_PA* *RX_EXPC_THNK*	*UNIVERSE: rx_curr=currently taking a pre-specified medication (skip if only selected 'other')* [PROGRAMMER NOTE: Insert name of randomly selected 'medication of interest' into sentence below. If the respondent only selected 1 medication (among the 10 pre-specified types), then insert that medication name]. **We'd like to ask you about your experience taking [name of selected/only medication].** **Since I've taken the medication…** I eat healthy foods less often I eat healthy foods more often No change Don't know Refuse to answer **Since I've taken the medication…** I eat unhealthy foods less often I eat unhealthy foods more often No change Don't know Refuse to answer **Since I've taken the medication…** I get more enjoyment from food I get less enjoyment from food No change Don't know Refuse to answer

	Since I've taken the medication… I get more physical activity I get less physical activity No change Don't know Refuse to answer **Since I've taken the medication…** I spend more time thinking about food I spend less time thinking about food No change Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – EXPERIENCE 2 NEW 2024 *RX_EXPC_EMB* *RX_EXPC_JUD* *RX_EXPC_EFF* *RX_EXPC_COST* *RX_EXPC_QUAL*	*UNIVERSE: rx_curr=currently taking a pre-specified medication (skip if only selected 'other')* **Since I've taken the medication…** I feel embarrassed to tell people I am taking the medication I feel proud to tell people I am taking the medication Both Neither Don't know Refuse to answer **Since I've taken the medication…** I feel like people judge me negatively for taking the medication I feel like people judge me positively for taking the medication Both Neither Don't know Refuse to answer **Since I've taken the medication…** I worry about the long-term side effects of the medication I do not worry about the long-term side effects of the medication Don't know Refuse to answer **Since I've taken the medication…** I worry about the costs / paying for the medication I do not worry about the costs / paying for the medication Don't know Refuse to answer

	Since I've taken the medication… My overall quality of life is better My overall quality of life is worse No change Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – PAST EXPERIENCE 1 NEW 2024 *RX_EXP12_HLTH* *RX_EXP12_UN* *RX_EXP12_ENJ* *RX_EXP12_PA* *RX_EXP12_THNK*	*UNIVERSE: rx_12m= took a pre-specified medication in past 12 months, but not currently* [PROGRAMMER NOTE: Insert name of randomly selected 'medication of interest' into sentence below. If the respondent only selected 1 medication (among the 10 pre-specified types), then insert that medication name]. **We'd like to ask you about your experience taking [name of selected/only medication].** **When I took the medication…** I ate healthy foods less often I ate healthy foods more often No change Don't know Refuse to answer **When I took the medication…** I ate unhealthy foods less often I ate unhealthy foods more often No change Don't know Refuse to answer **When I took the medication…** I got more enjoyment from food I got less enjoyment from food No change Don't know Refuse to answer **When I took the medication…** I got more physical activity I got less physical activity No change Don't know Refuse to answer

	When I took the medication… I spent more time thinking about food I spent less time thinking about food No change Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – PAST EXPERIENCE 2 NEW 2024 *RX_EXP12_EMB* *RX_EXP12_JUD* *RX_EXP12_EFF* *RX_EXP12_COST* *RX_EXP12_QUAL*	*UNIVERSE: rx_12m= took pre-specified medication in past 12 months, but not currently* **When I took the medication…** I felt embarrassed to tell people I was taking the medication I felt proud to tell people I was taking the medication Both Neither Don't know Refuse to answer **When I took the medication…** I felt like people judged me negatively for taking the medication I felt like people judged me positively for taking the medication Both Neither Don't know Refuse to answer **When I took the medication…** I worried about the long-term side effects of the medication I did not worry about the long-term side effects of the medication Don't know Refuse to answer **When I took the medication…** I worried about the costs / paying for the medication I did not worry about the costs / paying for the medication Don't know Refuse to answer **When I took the medication…** My overall quality of life was better My overall quality of life was worse No change Don't know Refuse to answer

WEIGHT LOSS MEDICATIONS – INSURANCE COVERAGE NEW 2025 RX_INSC RX_INS12 RX_INSC_LIM RX_INS12_LIM	*UNIVERSE: rx_curr=currently taking a pre-specified medication (skip if only selected 'other')* **Does insurance cover the cost of the medication?** None of the cost is covered by insurance Some of the cost is covered by insurance All of the cost is covered by insurance Don't know [valid answer] Refuse to answer *UNIVERSE: rx_12m= took a pre-specified medication in past 12 months, but not currently (skip if only selected 'other')* **Did insurance cover the cost of the medication?** None of the cost was covered by insurance Some of the cost was covered by insurance All of the cost was covered by insurance Don't know [valid answer] Refuse to answer *UNIVERSE: rx_curr=currently taking a pre-specified medication (skip if only selected 'other') and some or all of the cost of the medication is covered by insurance* **Is there a limit to how long the insurance will cover the medication?** *UNIVERSE: rx_12m= took a pre-specified medication in past 12 months, but not currently (skip if only selected 'other') and some or all of the cost of the medication was covered by insurance* **Was there a limit to how long the insurance covered the medication?** Yes No Don't know [valid answer] Refuse to answer
WEIGHT LOSS MEDICATIONS – COST NEW 2024 COUNTRY SPECIFIC WORDING RX_COST	*UNIVERSE: rx_curr=currently taking a pre-specified medication (skip if only selected 'other')* **How much do you pay out of pocket for the medication per month?** *UNIVERSE: rx_12m= took a pre-specified medication in past 12 months, but not currently (skip if only selected 'other')* **How much did you pay out of pocket for the medication per month?** Dollars:_____ [currency] Don't know [valid answer] Refuse to answer

WEIGHT LOSS MEDICATIONS – DURATION NEW 2024 *RX_DUR*	*UNIVERSE: rx_curr= currently taking a pre-specified medication* **How long have you been taking the medication?** *UNIVERSE: rx_12m= took pre-specified medication in past 12 months, but not currently* **How long did you take the medication?** Less than a month 1-3 months 4-6 months 7-12 months 1-2 years More than two years Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – WEIGHT CHANGE NEW 2024 *RX_WTCNG_CURR* *RX_WTCNG_12M*	*UNIVERSE: rx_curr= currently taking a pre-specified medication* **Since starting the medication, have you…** Lost weight Gained weight No change Don't know Refuse to answer *UNIVERSE: wt_rx_12m= took pre-specified medication in past 12 months, but not currently* **When you took the medication, did you…** Lose weight Gain weight No change Don't know Refuse to answer

WEIGHT LOSS MEDICATIONS – AMOUNT LOST NEW 2024 *RX_AMT_UNIT* *RX_AMT_LB* *RX_AMT_KG* *RX_AMT_ST* *RX_AMT_STLB*	*UNIVERSE: rx_curr= currently taking a pre-specified medication AND rx_wtcng_curr=lost weight* **Since starting the medication, how much weight have you lost?** *UNIVERSE: rx_12m= took pre-specified medication in past 12 months, but not currently AND rx_wtcng_12m=lose weight* **When you took the medication, how much weight did you lose?** Would you rather answer in: Pounds (lb) Kilograms (kg) Stones and pounds (st/lb) Don't know Refuse to answer [PROGRAMMER NOTE: show based on response to above] *Enter the number of pounds lost*: _____ lb [numeric] *UNIVERSE: rx_amt_unit=kilograms* *Enter the number of kilograms lost*: _____ kg [numeric] *UNIVERSE: rx_amt_unit= stones and pounds (st/lb)* *Enter the number of stones lost*: _____ st [numeric] AND *Enter the number of pounds lost*: _____ lb [numeric, 0-13]
WEIGHT LOSS MEDICATIONS – WEIGHT REGAIN NEW 2024 *RX_REGAIN*	*UNIVERSE: rx_12m=took pre-specified medication in past 12 months, but not currently AND rx_wtcng_12m=lose weight* **Since you stopped the medication, did you regain any of the weight you lost?** I didn't regain any of the weight I regained some of the weight I regained most of the weight I regained all of the weight I didn't lose weight while taking the medication Don't know Refuse to answer

WEIGHT LOSS MEDICATIONS – SIDE EFFECTS https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9486455/ <mark>NEW 2024</mark> *RX_EFF* *RX_EFF_[type]*	*UNIVERSE: rx_curr= currently taking a pre-specified medication (skip if only selected 'other')* **Have you experienced any side effect(s) from taking the medication?** No Yes – mild side effect(s) Yes – moderate effect(s) Yes - severe side effect(s) Don't know Refuse to answer *UNIVERSE: rx_eff= yes mild/moderate/severe* **What side effect(s) have you experienced?** (Select all that apply) Nausea and/or vomiting Diarrhea Fatigue Constipation Abdominal pain Other side effect(s) (please specify): _____ Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – STOPPING REASON <mark>NEW 2024</mark> <mark>REVISED 2025</mark> *RX_STOP*	*UNIVERSE: rx_curr=none (took pre-specified medication previously, but not currently)* **What was the main reason you stopped taking the medication?** (Select all that apply) I didn't lose weight / it didn't work I lost enough weight / it worked Side effects Cost / too expensive / not covered by insurance I didn't bother to renew my prescription Not in stock / supply issues Other (please specify): _____ Don't know Refuse to answer

WEIGHT LOSS MEDICATIONS – ALCOHOL IMPACT NEW 2024 RX_ALC_CURR RX_ALC_12M	*UNIVERSE: rx_curr= currently taking a pre-specified medication* **Has the medication affected how much alcohol you drink?** I don't drink alcohol – not applicable I drink less I drink more No effect Don't know Refuse to answer *UNIVERSE: rx_12m=took pre-specified medication in past 12 months, but not currently* **Did the medication affect how much alcohol you drank?** I don't drink alcohol – not applicable I drank less I drank more No effect Don't know Refuse to answer
WEIGHT LOSS MEDICATIONS – SMOKING IMPACT NEW 2024 RX_SMK_CURR RX_SMK_12M	*UNIVERSE: rx_curr= currently taking a pre-specified medication* **Has the medication affected how much you smoke?** I don't smoke– not applicable I smoke less I quit smoking I smoke more No effect Don't know Refuse to answer *UNIVERSE: rx_12m=took pre-specified medication in past 12 months, but not currently* **Did the medication affect how much you smoked?** I don't smoke– not applicable I smoked less I quit smoking I smoked more No effect Don't know Refuse to answer

EAT-3 BEHAVIOURAL ITEMS HAINES J, ZIYADEH NJ, FRANKO DL, MCDONALD J, MOND JM, AUSTIN SB. SCREENING HIGH SCHOOL STUDENTS FOR EATING DISORDERS: VALIDITY OF BRIEF BEHAVIORAL AND ATTITUDINAL MEASURES. J SCH HEALTH, 2011; 81(9):530-535. ==REVISED 2025 (SP)== *EAT3_BINGE* *EAT3_VOMIT*	In the <u>past 3 months</u>, how often have you: … gone on eating binges? *(Eating a large amount of food while feeling out of control).* … made yourself sick (vomited) to control your weight? Never Less than 1 time a month 1 to 3 times a month Once a week 2 to 6 times a week Once a day More than once a day Don't know Refuse to answer
EAT-3 ATTITUDINAL ITEM HAINES J, ZIYADEH NJ, FRANKO DL, MCDONALD J, MOND JM, AUSTIN SB. SCREENING HIGH SCHOOL STUDENTS FOR EATING DISORDERS: VALIDITY OF BRIEF BEHAVIORAL AND ATTITUDINAL MEASURES. J SCH HEALTH, 2011; 81(9):530-535. *EAT3_THIN*	I am preoccupied with a desire to be thinner. Always Usually Often Sometimes Rarely Never Don't know Refuse to answer
EATING DISORDER CCHS 2024 ==NEW 2024== *WT_ED* *WT_ED_DX*	Do you have an eating disorder such as anorexia or bulimia? Yes No Don't know Refuse to answer *UNIVERSE: WT_ED=yes* Was the eating disorder ever diagnosed by a doctor, nurse, or other health professional? Yes No Don't know Refuse to answer

WEIGHT TEASE Adapted from Project EAT 2003-2004 (B&W) NEW 2022 *WT_TEASE*	Do you get teased or made fun of because of your weight? All the time A lot Sometimes Rarely Never Don't know Refuse to answer
WEIGHT STIGMA Adapted from Nutter et al., 2018 Framing obesity a disease: Indirect effects of affect and controllability beliefs on weight bias. Weiner B. Judgments of responsibility: a foundation for a theory of social conduct. 1995. NEW 2023 *WT_BLAME*	Please tell us whether you agree or disagree with the following: **People are to blame for their body weight.** Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know Refuse to answer

SUGARY DRINKS

DOMAIN SOURCE	QUESTION
POP PERCEIVED HEALTHINESS *SSB_HLTH_POP*	In your opinion, how unhealthy or healthy is this type of drink? 600 mL Very unhealthy Unhealthy A little unhealthy Neither unhealthy nor healthy A little healthy Healthy Very healthy Don't know Refuse to answer
POP ACCEPTABLE FREQUENCY FOR CHILDREN *SSB_CHILD_POP*	Imagine that you have a 10-year old child. Is it okay for them to have this type of drink… 600 mL Never Once per month A few times per month Once per week A few times per week Once per day As often as they would like Don't know Refuse to answer

SSB PERCEPTIONS - CONDITION REVISED 2019 *SSB_CONDITION*	*[PROGRAMMER NOTE: Randomize each respondent to view one beverage and answer the following set of 2 questions with the same beverage image on screen for each question.]* Diet soft drink 100% juice Energy drink Water Specialty Sports drink Chocolate milk Iced tea Milk 600 mL 500 mL 250 mL 355 mL 500 mL 600 mL 500 mL 500 mL 355 mL
SSB PERCEIVED HEALTHINESS *SSB_HLTH_[TYPE]*	In your opinion, how unhealthy or healthy is this type of drink? *[show image with mL label]* Very unhealthy Unhealthy A little unhealthy Neither unhealthy nor healthy A little healthy Healthy Very healthy Don't know Refuse to answer
SSB ACCEPTABLE FREQUENCY FOR CHILDREN *SSB_CHILD_[TYPE]*	Imagine that you have a 10-year old child. Is it okay for them to have this type of drink… *[show image with mL label]* Never Once per month A few times per month Once per week A few times per week Once per day As often as they would like Don't know Refuse to answer

SSB DEFINITION	The next few questions ask about <u>SUGAR AND SUGARY DRINKS</u>. Sugary drinks are drinks that contain added sugar, like soft drinks, fruit drinks, sports drinks, energy drinks, chocolate milk, and specialty coffees that have added sugar.
SSB SOCIAL NORMS – Q3 REVISED 2021 REVISED 2023 *SSB_NORMS3_V1*	People important to me <u>TRY NOT</u> to drink <u>SUGARY DRINKS</u>. Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know Refuse to answer
SWEETENER ACCEPTABILITY FOR CHILDREN NEW 2020 CYCLED OUT 2023 COUNTRY SPECIFIC WORDING *SWT_CHILD*	Please tell us whether you agree or disagree with the following: Children should not consume foods or drinks with artificial or low-kilojoule sweeteners. Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Don't know Refuse to answer

NUTRITION KNOWLEDGE

DOMAIN SOURCE	QUESTION
SELF-REPORTED NUTRITION KNOWLEDGE ADAPTED FROM TNT 2015, HOBIN CFDR *NUT_KNOW*	How would you rate your nutrition knowledge? Not at all knowledgeable A little knowledgeable Somewhat knowledgeable Very knowledgeable Extremely knowledgeable Don't know Refuse to answer

SOURCES OF NUTRITION INFORMATION

DOMAIN SOURCE	QUESTION
PUBLIC EDUCATON <mark>REVISED 2020</mark> (underline) *PUBLIC_ED1*	Do you remember seeing any educational messages or campaigns on <u>healthy eating</u> from the government or health authorities in the past 12 months? Yes No Don't know Refuse to answer

FOOD PACKAGING & LABELLING

DOMAIN SOURCE	QUESTION
NUTRITION INFO IN GROCERY STORES *INFO_GROCERY*	In your opinion, is nutrition information easy or hard to find in <u>supermarkets</u>? Very hard to find Hard to find Neither hard nor easy Easy to find Very easy to find Don't know Refuse to answer
LABEL AWARENESS *LABEL_AWARE_AUS*	We would now like to ask you some questions about food labels on products. How often have you <u>seen</u> this type of food label on packages or in stores? Never Rarely Sometimes Often All the time Don't know Refuse to answer

LABEL USE LABEL_USE_AUS	*UNIVERSE: label_aware_AUS= 'rarely', 'sometimes', 'often', or 'all the time'* **How often do you <u>use</u> this type of food label <u>when deciding to buy a food product</u>?** ![Health Star Rating 3.5] Never Rarely Sometimes Often All the time Don't know Refuse to answer
LABEL UNDERSTANDING *LABEL_UNDERSTAND_AUS*	**Do you find this information…** ![Health Star Rating 3.5] Very hard to understand Hard to understand Neither hard nor easy Easy to understand Very easy to understand Don't know Refuse to answer

| LABEL UNDERSTANDING (OBJECTIVE)

 NEW 2022
 REVISED 2024 (CAN)
 REVISED 2025 (CA/US)

 FOPL_OBJ_HSR | In your opinion, is this product…

 [PROGRAMMER NOTE: Show juicebox image with country-specific FOPL (Health Star Rating in Australia, Warning label in Chile/MEX, Traffic Light in UK; 'High In' label in Canada; randomize half the respondents to no FOPL and half to proposed FDA label in USA); no NFT to be shown in any country]
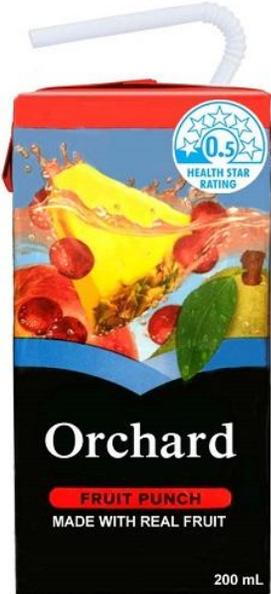
 Very unhealthy
 Unhealthy
 In the middle
 Healthy
 Very healthy
 Don't know
 Refuse to answer |

| **NFT AWARENESS**

NFT_AWARE_AUS | How often have you <u>seen</u> this type of food label on packages or in stores?

Nutrition Information
SERVINGS PER PACKAGE: 11
SERVING SIZE: 23.2 g (4 BISCUITS)

AVG QUANTITY PER SERVING / % DAILY INTAKE * (PER SERVING) / AVG QUANTITY PER 100 g

ENERGY 397 kJ 5% 1,710 kJ
PROTEIN 2.8 g 6% 12.2 g
FAT, TOTAL 2.2 g 3% 9.4 g
-SATURATED 0.3 g 1% 1.1 g
CARBOHYDRATE 14.5 g 5% 62.3 g
-SUGARS 0.4 g 1% 1.8 g
SODIUM 105 mg 5% 452 mg

*Percentage daily intakes are based on an average adult diet of 8700 kJ

Never
Rarely
Sometimes
Often
All the time
Don't know
Refuse to answer |
| **NFT USE**
ADAPTED FROM 2014 FDA HEALTH AND DIET SURVEY

NFT_USE_AUS | *UNIVERSE: nft_aware_AUS= 'rarely', 'sometimes', 'often', or 'all the time'*

How often do you <u>use</u> this type of food label <u>when deciding to buy a food product</u>?

Nutrition Information
SERVINGS PER PACKAGE: 11
SERVING SIZE: 23.2 g (4 BISCUITS)

AVG QUANTITY PER SERVING / % DAILY INTAKE * (PER SERVING) / AVG QUANTITY PER 100 g

ENERGY 397 kJ 5% 1,710 kJ
PROTEIN 2.8 g 6% 12.2 g
FAT, TOTAL 2.2 g 3% 9.4 g
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CARBOHYDRATE 14.5 g 5% 62.3 g
-SUGARS 0.4 g 1% 1.8 g
SODIUM 105 mg 5% 452 mg

*Percentage daily intakes are based on an average adult diet of 8700 kJ

Never
Rarely
Sometimes
Often
All the time
Don't know
Refuse to answer |

NFT UNDERSTANDING *NFT_UNDERSTAND_A US*	Do you find this information… **Nutrition Information** SERVINGS PER PACKAGE: 11 SERVING SIZE: 23.2 g (4 BISCUITS) AVG QUANTITY PER SERVING / % DAILY INTAKE * (PER SERVING) / AVG QUANTITY PER 100 g ENERGY 397 kJ — 5% — 1,710 kJ PROTEIN 2.8 g — 6% — 12.2 g FAT, TOTAL 2.2 g — 3% — 9.4 g -SATURATED 0.3 g — 1% — 1.1 g CARBOHYDRATE 14.5 g — 5% — 62.3 g -SUGARS 0.4 g — 1% — 1.8 g SODIUM 105 mg — 5% — 452 mg *Percentage daily intakes are based on an average adult diet of 8700 kJ Very hard to understand Hard to understand Neither hard nor easy Easy to understand Very easy to understand Don't know Refuse to answer
NFT INFLUENCE *LABEL_OVERALL*	Overall, how much do food labels influence what you eat? No influence at all A little influence Some influence A lot of influence Very strong influence Don't know Refuse to answer
DISCUSS LABELS NEW 2020 *LABEL_DISCUSS*	In the last month, how often have you talked to others about nutrition labels on foods or beverages? Not at all Once A few times Often Very often Don't know Refuse to answer

FOOD PROCESSING KNOWLEDGE

REVISED 2019
REVISED 2020
REVISED 2022
REVISED 2023
REVISED 2025 (CAN)

HLTH1…HLTH11
HLTH1_DKR…HLTH11_DKR
HLTH1V…HLTH11V
HLTH_ORDER
HLTH_ORDER_V

Summary of revisions: 2019 corrected error from 2018 in fat content in milk NFT; and replaced ham deli meat with chicken deli meat. 2020 corrected juice serving size and kJ; deleted "Quaker" from oats ingredient list; corrected milk saturated fat, fat %DV and kJ per 100g; added fish products. 2022 added sugar to applesauce ingredients; increased sodium in tuna; corrected protein per 100g for oats. 2023 deleted 7 products (applesauce, cereal, cheese, deli meat, all 3 fish products). 2025 added High In warnings in Canada. Refer to the User Guide for further information.

[PROGRAMMER NOTE: Randomize order of 8 food products, and record order of randomization. Prevent respondents from using back button to return to previous questions in set. Show scale horizontally on computer browsers, and vertically on smartphone and tablet browsers.]

Overall, how healthy is this food product?

Please answer on a scale from 0 to 10, where 0 = Not at all healthy, and 10 = Extremely healthy.

0   1   2   3   4   5   6   7   8   9   10

Not at all healthy   Extremely healthy

Don't know
Refuse to answer

ULTRA-PROCESSED FOOD TERM AWARENESS NEW 2023 *UPF_AWARE*	[PROGRAMMER NOTE: HIDE BACK BUTTON] **Have you heard of the term 'ultra-processed food'?** Yes No Don't know Refuse to answer
ULTRA PROCESSED FOOD IDENTIFICATION NEW 2024 REVISED 2025 (CAN) *UPF_ID_APPLE* *UPF_ID_JUICE* *UPF_ID_OATS* *UPF_ID_BAR* *UPF_ID_MILK* *UPF_ID_CHEESE* *UPF_ID_CHICK* *UPF_ID_NUGG* *UPF_ID_NDK*	[PROGRAMMER NOTE: HIDE BACK BUTTON] **Which, if any, of the following products are ultra-processed?** *Select all that apply.* [PROGRAMMER NOTE: Show 8 products on screen, in random order (no NFTs). Prevent respondents from using back button to return to previous question]. None of these are ultra-processed Don't know [valid answer] Refuse to answer

MENU LABELLING

DOMAIN SOURCE	QUESTION
ONLINE ORDERING: MENU LABELLING – NOTICING NEW 2023 *ONLN_INFO*	*UNIVERSE: Ordered restaurant food online in the past 30 days (onln_rest=1)* The last time you ordered restaurant food from a website or an app, did you notice any nutrition information? Yes No Don't know Refuse to answer
ONLINE ORDERING: NUTRITION INFO ACCESSIBILITY NEW 2023 *ONLN_INFO_EASE*	*UNIVERSE: Ordered restaurant food online in the past 30 days (onln_rest=1)* In your opinion, is nutrition information easy or hard to find when you are ordering restaurant food online? Very hard to find Hard to find Neither hard nor easy Easy to find Very easy to find Don't know Refuse to answer
ONLINE GROCERY ORDERING: NUTRITION INFO ACCESSIBILITY NEW 2024 *ONLN_INFOGR_EASE*	*UNIVERSE: Ordered groceries online in the past 30 days (onln_gstore=1 or onln_gonln=1)* In your opinion, is nutrition information easy or hard to find when you are ordering GROCERIES ONLINE? Very hard to find Hard to find Neither hard nor easy Easy to find Very easy to find Don't know Refuse to answer

FOOD GUIDE / DIETARY RECOMMENDATIONS

DOMAIN SOURCE	QUESTION
FOOD GUIDE – LAST USE OTTAWA AND CFDR (ADAPTED TIME ANCHORS) *FG_LOOK*	**When was the last time you looked at the Australian Dietary Guidelines, if ever?** In the last month In the last 6 months In the last year More than a year ago Never Don't know Refuse to answer
CHILD – SCHOOL FOOD PROGRAM PARTICIPATION NEW 2023 *SCH_PART*	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* **Does your child get food from a free or reduced-price breakfast or lunch program at their school?** No Yes – from a breakfast program Yes – from a lunch program Yes – from a breakfast and lunch program Does not apply to me [valid answer] Don't know Refuse to answer
CHILD – SCHOOL FOOD PROGRAM PARTICIPATION FREQUENCY NEW 2024 *SCH_PART_FREQ*	*UNIVERSE: Child receives food from a free/reduced-price school food program (sch_prg=2-4)* **How many days per week does your child get food from a free or reduced-price breakfast or lunch program at their school?** Less than once a week 1 day per week 2 days per week 3 days per week 4 days per week 5 days per week Don't know Refuse to answer
CHILD – SCHOOL FOOD PROGRAM AVAILABILITY NEW 2023 *SCH_AVAIL*	*UNIVERSE: Child participates in any school food program (child_home>0 and sch_prg=2-4)* **Can all students in your child's school get food from the free or reduced-price breakfast or lunch program?** All students Only students from families who need extra financial help Don't know [valid answer] Refuse to answer

FOOD MARKETING

DOMAIN SOURCE	QUESTION
EXPOSURE TO UNHEALTHY FOOD MARKETING – LOCATION REVISED 2019 REVISED 2022 REVISED 2023 COUNTRY SPECIFIC WORDING *MKTG_LOC_[TYPE]* *MKTG_LOC_NONE* *MKTG_LOC_DK* *MKTG_LOC_R* *MKTG_LOC_OTEXT*	**In the last 30 days, have you seen or heard advertisements or promotions for <u>'unhealthy foods'</u> in the following places?** (Select all that apply) *Unhealthy foods include processed foods high in sugar, salt, or saturated fat, such as soft drinks, fast food, chips, sugary cereals, biscuits and chocolate bars.* TV (broadcast TV, on-demand, streaming) Radio Online / internet Mobile app / video game Social media (e.g., Twitter/X, Facebook, Instagram) In a text message Magazine or newspaper Billboard or outdoor sign (e.g., posters) On buses, bus stops and other public transport In movies or at movie theatres At school / on campus Signs or displays in supermarkets, convenience stores or restaurants At a recreation/community centre Sports event, concert or community event Giveaways, samples or special offers Other → Please specify: [*open-ended*] I haven't seen any advertising or promotions for unhealthy food in the last 30 days Don't know Refuse to answer
EXPOSURE TO UNHEALTHY FOOD MARKETING – GIVEAWAYS VS SPECIAL OFFERS NEW 2022 *MKTG_LOC_SAMPOF*	*UNIVERSE: Noticed "Giveaways, samples or special offers"* **In the last question you selected "Giveaway, samples, or special offers".** **Did you see…** Giveaways or samples only Special offers only Both Don't know Refuse to answer

EXPOSURE TO UNHEALTHY FOOD MARKETING - FREQUENCY REVISED 2019 *MKTG_FREQ_SD* *MKTG_FREQ_FF* *MKTG_FREQ_CEREAL* *MKTG_FREQ_SNACK* *MKTG_FREQ_DESSERT* *MKTG_FREQ_CANDY*	In the last 30 days, <u>how often</u> did you see or hear advertisements or promotions for the following? Ads for sugary drinks Ads for fast food / take-away Ads for sugary cereals Ads for snacks such as chips Ads for desserts such as cakes, biscuits, and ice cream Ads for lollies or chocolate bars [Show response options for each item as radio button list] Never Less than once a week Once a week A few times a week Every day More than once a day Don't know Refuse to answer
EXPOSURE TO MARKETING STRATEGIES *MKTG_LICENCED* *MKTG_COMPANY* *MKTG_CELEB* *MKTG_PROSPORT* *MKTG_RECSPORT* *MKTG_CULTURE* *MKTG_NONE* *MKTG_DK* *MKTG_R*	[PROGRAMMER NOTE: show note in grey font] *Remember: Unhealthy foods include processed foods high in sugar, salt, or saturated fat, such as soft drinks, fast food, chips, sugary cereals, biscuits and chocolate bars.* **In the last 30 days, have you seen any of the following?** (Select all that apply) Unhealthy food or drinks promoted using characters from movies or TV (e.g., Star Wars, Disney characters) Unhealthy food or drinks with characters created by food companies (e.g., Tony the Tiger, Ronald McDonald) Celebrity endorsements of unhealthy food/drinks Professional sport teams or sporting events sponsored by unhealthy food/drink companies Children's/community sports teams sponsored by unhealthy food/drink companies Cultural or community events sponsored by unhealthy food/drink companies None of the above [Programming note: only allow to select if no other options selected] Don't know Refuse to answer

PESTER POWER NEW 2020 REVISED 2021 (underlining) *PESTER*	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* [PROGRAMMER NOTE: show note in grey font] *Remember: Unhealthy foods include processed foods high in sugar, salt, or saturated fat, such as soft drinks, fast food, chips, sugary cereals, biscuits and chocolate bars.* **How often do your children <u>ask</u> you to buy unhealthy food or drinks they've seen <u>advertised</u>?** Never Only for special occasions Less than once a week Some days Every day Don't know Refuse to answer
UNHEALTHY FOOD CONSUMPTION FREQUENCY ==REVISED 2019== ==(response format)== *EAT_SD* *EAT_FF* *EAT_CEREAL* *EAT_SNACK* *EAT_DESSERT* *EAT_CANDY*	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* **In a typical week, how often <u>do your children eat or drink</u>…** **Sugary drinks** **Fast food / take-away** **Sugary cereals** **Snacks such as chips** **Desserts such as cakes, biscuits, and ice cream** **Lollies or chocolate bars** [Show response options for each item as radio button list] More than once a day Every day A few times a week, but not every day Once a week Only on special occasions Never Don't know Refuse to answer
CONCERN ABOUT CHILD'S EXPOSURE TO MARKETING ==CYCLED OUT 2023== *MKTG_CHILD_CONCERN*	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* **Are you concerned about the amount of marketing for sugary drinks and fast food that your children see?** Not at all concerned A little concerned Somewhat concerned Very concerned Don't know Refuse to answer

SUPPORT FOR BAN ON MARKETING TO KIDS NEW 2023 *M2K_BAN_HSSF*	Would you support or oppose a government policy that would require… A ban on advertising <u>to children</u> for food and drinks that have too much sugar, salt or saturated fat Support Neutral Oppose Don't know Refuse to answer
CHILD'S TOTAL SCREEN TIME Adapted from <u>National Survey of Children's Health (NSCH)</u> NEW 2025 *MEDIA_WD_TOTAL*	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* Thinking about your youngest (or only) child's screen time… On a <u>normal weekday</u>, about how much time does your youngest (or only) child spend in front of a TV, computer, cellphone or other electronic device watching programs, playing games, accessing the internet or using social media? *Do not include time spent doing schoolwork.* Less than 1 hour 1 hour 2 hours 3 hours 4 hours 5 hours 6 or more hours Don't know Refuse to answer
CHILD SOCIAL MEDIA PLATFORM USE NEW 2021 REVISED 2023 REVISED 2025 *MEDIA_SOC_FB* *MEDIA_SOC_IG* *MEDIA_SOC_TIK* *MEDIA_SOC_TWT* *MEDIA_SOC_SC* *MEDIA_SOC_TWITCH* *MEDIA_SOC_YT* *MEDIA_SOC_NONE* *MEDIA_SOC_DK* *MEDIA_SOC_R*	*UNIVERSE: At least 1 child <18 years in household (child_home>0)* Does your youngest (or only) child use…? *Select all that apply.* Facebook Instagram TikTok Twitter/X Snapchat Twitch YouTube None of the above Don't know Refuse to answer

FAVOURITE SOCIAL MEDIA INFLUENCERS NEW 2022 *MEDIA_FAV1-3* *MEDIA_FAV_NDKR*	**Who are your three favourite celebrities or influencers to watch or follow on social media?** Please include entertainment, sports, and other public figures. [3 open text boxes] I don't have any favourites / I don't know [valid answer] Refuse to answer
FAVOURITE SOCIAL MEDIA INFLUENCERS – UNHEALTHY PROMOTION NEW 2023 *MEDIA_FAV_PROM*	*UNIVERSE: Skip respondents who indicated they had no favourites on social media/don't know or refused; allow to skip question* **Thinking about your favourite celebrities or influencers to watch or follow on social media, <u>have you seen or heard them promote an unhealthy food or drink in the past 30 days</u>?** Yes No Don't know Refuse to answer

PRICE / TAXATION

DOMAIN SOURCE	QUESTION
SUGAR TAX REVISED 2019 *DRINKS_COST*	**Do drinks with sugar (e.g., Coke) cost more than drinks without sugar (e.g., Diet Coke) in Australia?** No Yes – a little more Yes – a lot more Don't know Refuse to answer
SUGAR TAX - AWARENESS NEW 2021 *TAX_AWARENESS*	**Is there a special tax on sugary drinks in Australia that makes them more expensive to buy?** No Yes Don't know Refuse to answer

POLICY SUPPORT

DOMAIN SOURCE	QUESTION
POLICY SUPPORT (items in second list from Policy Interventions to Reduce Obesity – Knowledge, Attitudes and Beliefs Survey of the Public (Raine)) REVISED 2019 REVISED 2021 REVISED 2022 REVISED 2023 REVISED 2024 REVISED 2025 COUNTRY SPECIFIC WORDING *POL_TAX_SSB* *POL_TAX_PH* *POL_SCH_PROG* *POL_BAN_DISC* *POL_BAN_DISCVOL* *POL_BAN_ONLINE* *POL_BAN_TV* *POL_BAN_OUT*	[PROGRAMMER NOTE: HIDE BACK BUTTON.] **We are interested in your opinion about food policies. For each statement, please indicate whether you would support or oppose the policy.** **Would you support or oppose a government policy that would require…** Support Neutral Oppose Don't know Refuse to answer [PROGRAMMER NOTE: RANDOMIZE ORDER OF ITEM PRESENTATION. SHOW RESPONSE OPTIONS FOR EACH ITEM AS RADIO BUTTON LIST.] PROGRAMMER NOTE: Randomize respondents to each answer one of the next two taxes on sugary drinks items] Taxes on sugary drinks Taxes on sugary drinks IF the money raised was used to support public health Free breakfast or lunch programs in schools [PROGRAMMER NOTE: Randomize 50% of respondents to each answer one of next two items] A ban on price discounts for unhealthy food and beverages (e.g., 30% off, or 'buy-one-get-one-free') A ban on multibuy deals for unhealthy food and beverages (e.g., 'buy-one-get-one-free', '3 for 2', free soft drink refills) A ban on marketing of unhealthy food and beverages online/on the internet A ban on advertising of unhealthy food and beverages on TV before 9pm A ban on outdoor advertisements (e.g., at bus stops and billboards) for unhealthy food and beverages

REASONS FOR BEHAVIOUR CHANGE EFFORTS – ALL MEAT NEW 2023 CYCLED OUT 2024 REVISED 2025 SUS_MT2_COST SUS_MT2_ENV SUS_MT2_HLTH SUS_MT2_ANIM SUS_MT2_SOC SUS_MT2_DK SUS_MT2_R	*UNIVERSE: Canada, Australia, UK, USA (asked in Belgium earlier)* *UNIVERSE: Respondents who made an effort to consume less 'red or processed meat' (effort3_red=1) or less 'all meats' (effort3_meat=1)* **Earlier you said you've made an effort to consume less meat.** **Can you tell us why you were trying to eat less meat?** **Eating less meat is…** (Select all that apply.) [PROGRAMMING NOTE: Show response options in random order, allow multiple selections] … cheaper … better for the environment … better for my health … better for animal welfare …popular among the people close to me Other reasons Don't know Refuse to answer
PRIORITY IN FOOD PURCHASES NEW 2025 SUS_PRIOR	*UNIVERSE: Australia* **When you buy food, which is MORE important to you?** How healthy the food is How environmentally sustainable the food is They are equally important to me Neither is important to me Don't know Refuse to answer

HEALTH LITERACY

DOMAIN SOURCE	QUESTION
NEWEST VITAL SIGN PFIZER	[PROGRAMMER NOTE: HIDE BACK BUTTON.] **This information is on the back of a container of ice cream.** **Nutrition Information** SERVINGS PER CONTAINER: 4 SERVING SIZE: 125 mL (1/2 cup) AVG QUANTITY PER SERVING / % DAILY INTAKE * (PER SERVING) / AVG QUANTITY PER 100 mL ENERGY — 1000 kJ — 11% — 800 kJ PROTEIN — 4.0 g — 8% — 3.2 g FAT, TOTAL — 13.0 g — 19% — 10.4 g -SATURATED — 9.0 g — 38% — 7.2 g CARBOHYDRATE — 30.0 g — 10% — 24.0 g -SUGARS — 23.0 g — 26% — 18.4 g SODIUM — 55 mg — 2% — 44 mg *Percentage daily intakes are based on an average adult diet of 8700 kJ Ingredients: Cream, Skim milk, Liquid sugar, Water, Egg yolks, Brown sugar, Milkfat, Peanut oil, Sugar, Butter, Salt, Carrageenan, Vanilla extract [PROGRAMMER NOTE: show above NFT and text above each of the following NVS questions]
NVS_CAL *NVS_CAL_N*	**If you eat the entire container, how many kilojoules (kJ) will you eat?** Enter number of kilojoules (kJ): [*open-ended*] Don't know Refuse to answer [*Answer: 4000kJ is the only correct answer*]
NVS_CARB *NVS_CARB_N*	**If you are allowed to eat 60 grams of carbohydrates as a snack, how much ice cream could you have?** Enter number of cup(s): [*open-ended*] Don't know Refuse to answer [*Answer: Any of the following is correct: 1 cup, 250 mL, 2 servings, "half the container" (not "half" or "1/2")*]
NVS_SAT *NVS_SAT_N*	**Your doctor advises you to reduce the amount of saturated fat in your diet. You usually have 42 g of saturated fat each day, which includes one serving of ice cream. If you stop eating ice cream, how many grams of saturated fat would you be consuming each day?** Enter number of grams: [*open-ended*] Don't know Refuse to answer [*Answer: 33 is the only correct answer*]

NVS_DV NVS_DV_N	If you usually eat 10,000 kilojoules (kJ) in a day, what percentage of your daily value of energy will you be eating if you eat one serving? Enter percentage: [*numeric percentage*] Don't know Refuse to answer [*Answer: 10% is the correct answer; 11% is also accepted as correct in Australia only.*]
NVS_ALG NVS_ALG_WHY NVS_ALG_WHYTEXT	Pretend that you are allergic to the following substances: penicillin, peanuts, latex gloves, and bee stings. **Is it safe for you to eat this ice cream?** Yes No Don't know Refuse to answer [*Answer: No*] [If "no", ask:] **Why not?** Enter reason*: [open-ended]* Don't know Refuse to answer [*Answer: Because it has peanut oil or because you might have an allergic reaction*]

FOOD INTAKE SCREENER

DOMAIN SOURCE	QUESTION
FOOD INTAKE SCREENER Adapted from the Canadian Food Intake Screener (2023) NEW 2025	**These next questions are about foods and beverages you ate or drank in the** <u>past month</u>**, that is, the past 30 days. When answering, please include meals and snacks consumed at home, at work or school, in restaurants, and anyplace else.**
FOOD INTAKE SCREENER – FRUIT NEW 2025 COUNTRY SPECIFIC WORDING *FIS_FRUIT*	Over the <u>past month</u>, how often did you eat **fresh, frozen, tinned, or dried fruit**? **Do not include** fruit juices and drinks. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – POTATOES NEW 2025 COUNTRY SPECIFIC WORDING *FIS_POT*	Over the <u>past month</u>, how often did you eat **potatoes, including baked, boiled, or mashed potatoes, or sweet potatoes**? **Do not include** hot chips or hash browns. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – VEGETABLES NEW 2025 COUNTRY SPECIFIC WORDING *FIS_VEG*	Over the <u>past month</u>, how often did you eat **fresh, cooked, frozen, or tinned vegetables**? **Do not include** potatoes, hot chips, or other deep-fried vegetables, or vegetable juices and drinks. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – FAST FOOD NEW 2025 COUNTRY SPECIFIC WORDING *FIS_FF*	Over the <u>past month</u>, how often did you eat **food from fast food restaurants, such as burgers, fish & chips, pizza, fried chicken, chicken schnitzel rolls, pies, or kebabs**? Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – PROCESSED MEAT NEW 2025 COUNTRY SPECIFIC WORDING *FIS_PRMEAT*	Over the <u>past month</u>, how often did you eat **hot dogs, sausages, bacon, ham, or other deli meats**? **Do not include** fast food/takeaway, tinned fish, tinned poultry, or packaged veggie burgers and plant-based meats. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – MEAT NEW 2025 COUNTRY SPECIFIC WORDING *FIS_MEAT*	Over the <u>past month</u>, how often did you eat **eggs, beef, pork, lamb, wild meat, chicken or other poultry, fish, shellfish, or other animal-based sources of protein**? Include **tinned fish and tinned poultry**. **Do not include** fast food/takeaway, hot dogs, sausages, bacon, ham, or other deli meats. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – PLANT-BASED PROTEIN ==NEW 2025== ==COUNTRY SPECIFIC WORDING== *FIS_PLANT*	Over the <u>past month</u>, how often did you eat **nuts, seeds, tofu, beans and lentils, peanut butter or other nut butters, or other plant-based sources of protein**? **Do not include** green beans or packaged veggie burgers and plant-based meats. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – DAIRY PRODUCTS ==NEW 2025== *FIS_DAIRY*	Over the <u>past month</u>, how often did you eat **yogurt, kefir, or cheese**? Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – **WHITE MILK** <mark>NEW 2025</mark> <mark>COUNTRY SPECIFIC</mark> <mark>WORDING</mark> *FIS_MILK*	Over the <u>past month</u>, how often did you have **dairy milk or <u>unsweetened</u> plant-based beverages (e.g., soy, almond, or oat milk)?** **Do not include** small amounts in coffee or tea, or flavoured and other sweetened milk. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – **FLAVOURED MILK** <mark>NEW 2025</mark> <mark>COUNTRY SPECIFIC</mark> <mark>WORDING</mark> *FIS_FLVMILK*	Over the <u>past month</u>, how often did you have **<u>flavoured</u> milk or <u>sweetened</u> plant-based beverages (e.g., soy, almond, or oat milk)**? **Do not include** small amounts in coffee or tea, or diet/artificially-sweetened or sugar-free beverages. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – SUGARY DRINKS NEW 2025 COUNTRY SPECIFIC WORDING *FIS_SDRINK*	Over the <u>past month</u>, how often did you drink **fruit juice, fruit-flavoured drinks, cordial, soft drinks, <u>sweetened</u> sports or energy drinks, <u>sweetened</u> hot or iced coffee or tea, or <u>sweetened</u> waters**? **Do not include** diet/artificially-sweetened or sugar-free beverages, such as diet soft drinks. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – SUGARY FOODS NEW 2025 COUNTRY SPECIFIC WORDING *FIS_SFOOD*	Over the <u>past month</u>, how often did you eat **biscuits, cakes, muffins, pastries, muesli bars, protein bars, ice cream, lollies, chocolate, sugary breakfast cereals, or other sugary foods**? Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – SALTY SNACKS NEW 2025 COUNTRY SPECIFIC WORDING *FIS_SNACK*	Over the <u>past month</u>, how often did you eat **crackers, chips, pretzels, popcorn, or other salty snacks**? Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – REFINED GRAINS (WHITE) NEW 2025 COUNTRY SPECIFIC WORDING *FIS_WHITEGRN*	Over the <u>past month</u>, how often did you eat <u>**white**</u> breads, bagels, crumpets, rice, pasta, noodles, or other refined grains, such as breakfast cereals? **Do not include** whole wheat or whole grain foods. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

FOOD INTAKE SCREENER – WHOLE GRAINS NEW 2025 COUNTRY SPECIFIC WORDING *FIS_WHOLEGRN*	Over the past month, how often did you eat **whole wheat or whole grain** breads, bagels, crumpets, pasta, noodles, quinoa, oats, brown or wild rice, **breakfast cereals, or other whole wheat or whole grain foods**? **Do not include** white breads, bagels, crumpets, pasta, noodles, rice, or refined breakfast cereals. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer
FOOD INTAKE SCREENER – OILS NEW 2025 COUNTRY SPECIFIC WORDING *FIS_OILS*	Over the past month, how often did you have **margarine, olive oil, or other vegetable oils (e.g., canola or sunflower oil)**? **Do not include** lard, coconut oil, palm oil, or butter. Never 1 time in the past month 2-3 times in the past month 1-2 times per week 3-4 times per week 5-6 times per week 1 time per day 2-3 times per day 4-5 times per day 6 or more times per day Don't know Refuse to answer

GENERAL HEALTH STATUS

GENERAL HEALTH CCHS BRFSS CHMS *HLTH_GENERAL*	**In general, would you say your health is…** Poor Fair Good Very good Excellent Don't know Refuse to answer
OVERALL DIET NHANES AND USED IN FCMS *DIET*	**In general, how healthy is your overall diet?** Poor Fair Good Very good Excellent Don't know Refuse to answer
MENTAL HEALTH CCHS AND CHMS *MENTAL*	**In general, would you say your mental health is…** Poor Fair Good Very good Excellent Don't know Refuse to answer
STRESS CHMS *STRESS*	**Thinking about the amount of stress in your life, would you say that most days are…** Not at all stressful Not very stressful A bit stressful Very stressful Extremely stressful Don't know Refuse to answer

CHRONIC DISEASES ADAPTED FROM BRFSS CVDINFR4 NEW 2024 (CAN/AUS/UK) *HBP* *MI* *CHD* *STROKE* *DIABETES* *CHOLEST* *OB* *CA* *DEPRESS*	**Has a doctor, nurse, or other health professional ever told you that you have or had …?**

	Yes	No	Don`t know	Refuse to answer
Hypertension or high blood pressure				
Heart attack (myocardial infarction)				
Angina or coronary heart disease				
Stroke				
Diabetes				
High cholesterol				
Obesity				
Cancer				
Depression				

DIABETES TYPE CCHS 2024 NEW 2024 *DB_T1* *DB_T2* *DB_GEST* *DB_PRE* *DB_OTH* *DB_DK* *DB_R*	*UNIVERSE: Respondents diagnosed with diabetes* **What type of diabetes were you diagnosed with?** Select all that apply. Type 1 diabetes Type 2 diabetes Gestational diabetes (diabetes that develops during pregnancy) Pre-diabetes Other types of diabetes Don't know Refuse to answer

PREGNANCY CCHS 2024 NEW 2024 *PREG*	*UNIVERSE: Female respondents (SEX=2 or SEX2=2)* **To better understand your health information, it is important to know if you are pregnant.** **Are you pregnant?** Yes No Don't know [valid answer] Refuse to answer

OTHER HEALTH BEHAVIOURS

DOMAIN SOURCE	QUESTION
DATA QUALITY CHECK – MONTH *DQ_MONTH*	What is the current month? January February March April May June July August September October November December Don't know Refuse to answer
SMOKING – PAST 30 DAYS CTADS *SMK_30*	Have you smoked cigarettes in the past 30 days? No Yes, occasionally Yes, every day Don't know Refuse to answer
MARIJUANA USE – FREQUENCY CSTADS *MJ_USE*	In the last 12 months, how often did you use marijuana or cannabis (a joint, pot, weed, hash)? I have never used marijuana I have used marijuana but not in the last 12 months Less than once a month Once a month 2 or 3 times a month Once a week 2 or 3 times a week 4 to 6 times a week Every day Don't know Refuse to answer

ALCOHOL USE – FREQUENCY CSTADS CYCLED OUT 2023 *ALC_FREQ*	In the last 12 months, how often did you have a drink of alcohol that was more than just a sip? *A DRINK means: 1 regular sized bottle, can, or draft of beer; 1 glass of wine; 1 bottle or can of alcopop; 1 shot of spirits (rum, whiskey, etc.); or 1 mixed drink (1 shot of spirits with soft drink, juice, energy drink, etc.).* I have never drank alcohol I did not drink alcohol in the last 12 months I have only had a sip of alcohol Less than once a month Once a month 2 or 3 times a month Once a week 2 or 3 times a week 4 to 6 times a week Every day I do not know *[valid answer]* Refuse to answer

SOCIODEMOGRAPHIC MEASURES

DOMAIN SOURCE	QUESTION
ABORIGINAL STATUS ADAPTED FROM AUSTRALIAN CENSUS REVISED 2020 *ABORIG_AUS_1* *ABORIG_AUS_2* *ABORIG_AUS_3* *ABORIG_AUS_DK* *ABORIG_AUS_R*	Are you of Aboriginal or Torres Strait Islander origin? *If you are of both Aboriginal and Torres Strait Islander origin, please select both 'Yes' options.* No Yes, Aboriginal Yes, Torres Strait Islander Don't know Refuse to answer
ETHNICITY ITC 4C ADAPTED *ETH_AUS* *ETH_AUS_LANG1…7* *ETH_AUS_LANG_OTEXT* *ETH_AUS_LANG_DK* *ETH_AUS_LANG_R*	Do you speak a language other than English in the home? Yes No Don't know Refuse to answer [If yes:] **What language is that?** (Select all that apply) Italian Greek Cantonese Mandarin Arabic

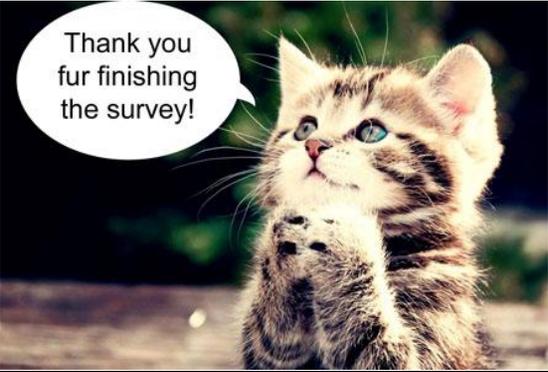|	
	Vietnamese Other (please specify):_____ Don't know Refused
COUNTRY OF BIRTH *BIRTH_AUS*	**Were you born in Australia?** Yes No Don't know Refuse to answer
HIGHEST EDUCATION ADAPTED FROM NHANES 2015-2016, CCHS 2014 *EDUC_COMP_AUS*	**What is the highest level of formal education that you have <u>completed</u>?** Did not complete secondary school Year 12 or equivalent Trade certificate or diploma from a technical/vocational school or apprenticeship training Diploma or certificate from CAE (other than trades certificates or diplomas) Some university, or university certificate/diploma below the bachelor's level Bachelor's degree (e.g., BA, BSc) University degree above the bachelor's level (e.g., Master's, professional school, doctorate) Don't know Refuse to answer
PERCEIVED INCOME ADEQUACY LITWIN & SAPIR 2009 *INCOME_ADEQ*	**Thinking about your total monthly income, how difficult or easy is it for you to make ends meet?** Very difficult Difficult Neither easy nor difficult Easy Very easy Don't know Refuse to answer
HOUSEHOLD SIZE ADAPTED FROM NHANES; FCMS; ONTARIO HEALTH STUDY (OHS) COVID-19 QUESTIONNAIRE, 2020; WATERLOO REGION MATTERS SURVEY – COVID-19 EDITION NEW 2020 *HHLDSIZE_CH* *HHLDSIZE_AD*	**How many children (under 18 years of age) currently live in your household?** [*dropdown with numbers from 0 to 10, more than 10, DK/R*] Don't know Refuse to answer **How many adults (age 18 or older), including yourself, currently live in your household?** [*dropdown with numbers from 1 to 10, more than 10, DK/R*] Don't know Refuse to answer *Include all family members who live with you all or most of the time.* *Do NOT include roommates unless you share income.*

HOUSEHOLD INCOME ADAPTED FROM CANADIAN COMMUNITY HEALTH SURVEY (CCHS) 2020; US CPS CURRENT POPULATION SURVEY (CPS); AUSTRALIAN CENSUS 2016; INTERNATIONAL CANNABIS POLICY STUDY (ICPS) 2020 ==NEW 2020 REVISED 2021 (underlining)== *INCOME_AUS*	What was your <u>total household income</u>, from all sources, before taxes, over the past 12 months? *Include income from work, investments, pensions or government.* *Include income from all family members living with you all, or most of the time. Do NOT include roommates unless you share income.* 1= Less than $10,000 2= $10,000 to less than $20,000 3= $20,000 to less than $30,000 4= $30,000 to less than $40,000 5= $40,000 to less than $50,000 6= $50,000 to less than $60,000 7= $60,000 to less than $70,000 8= $70,000 to less than $80,000 9= $80,000 to less than $90,000 10= $90,000 to less than $100,000 11= $100,000 to less than $150,000 12= $150,000 and over -77= Don't know -88= Refuse to answer
REGION *REGION_AUS* *REGION_AUS_OTEXT*	What state or territory do you live in? New South Wales Victoria Queensland Western Australia South Australia Tasmania Australian Capital Territory Northern Territory Other (please specify):_____ Don't know Refused
POSTAL CODE ==COUNTRY SPECIFIC WORDING== *POSTAL* *POSTAL_TEXT_AUS*	Please enter your postcode: *Postcodes help us to understand the food environment where you live. As a reminder, all information you provide will be kept strictly confidential and will never be shared.* Enter: _____ [format 4 numeric digits] Don't know Refuse to answer

YEAR OF BIRTH NEW 2025 *BIRTH_YR*	What year were you born? Enter: _____ [format YYYY; 1900-2025] Don't know Refuse to answer
SELF-REPORTED HEIGHT *HT_UNIT* *HT_CM* *HT_FT* *HT_IN*	It is helpful to know the height and weight of survey participants. How tall are you without shoes? Would you rather answer in: Feet and inches Centimetres Don't know Refuse to answer [PROGRAMMER NOTE: show based on response to above] *UNIVERSE: ht_unit=feet and inches* *Enter feet*: _____ ft [numeric, 2-7] AND *Enter inches*: _____ in [numeric, 0-11] *UNIVERSE: ht_unit= centimetres* *Enter centimetres*: _____ cm [numeric, 60-250]
SELF-REPORTED HEIGHT CONFIRMATION *HT_FTIN_CONF* *HT_CM_CONF*	*UNIVERSE: ht_unit=feet and inches* You entered [X] feet and [X] inches. Is that correct? Yes No – I need to make a correction Don't know Refuse to answer *UNIVERSE: ht_unit= centimetres* You entered [X] centimetres. Is that correct? Yes No – I need to make a correction Don't know Refuse to answer

SELF-REPORTED HEIGHT CORRECTION HTC_UNIT HTC_FT HTC_IN HTC_CM	*UNIVERSE: ht_ftin_conf, or ht_cm_conf= No – I need to make a correction* **How tall are you without shoes?** Would you rather answer in: Feet and inches Centimetres Don't know Refuse to answer [PROGRAMMER NOTE: show based on response to above] *UNIVERSE: htc_unit=feet and inches* *Enter feet*: _____ ft [numeric, 2-7] AND *Enter inches*: _____ in [numeric, 0-11] *UNIVERSE: htc_unit= centimetres* *Enter centimetres*: _____ cm [numeric, 60-250]
SELF-REPORTED WEIGHT <mark>REVISED 2024</mark> WT_UNIT WT_KG WT_LB WT_ST WT_STLB	*UNIVERSE: All male respondents (SEX=1); females who are not pregnant (SEX=2 and PREG≠1)* **How much do you weigh without clothes or shoes?** *UNIVERSE: Female respondents who are pregnant (SEX=2 and PREG=1)* **How much did you weigh without clothes or shoes <u>before</u> your pregnancy?** Would you rather answer in: Kilograms (kg) Pounds (lb) Stones and pounds (st/lb) Don't know Refuse to answer [PROGRAMMER NOTE: show based on response to above] *UNIVERSE: wt_unit=kilograms* *Enter kilograms*: _____ kg [numeric] *UNIVERSE: wt_unit= pounds* *Enter pounds*: _____ lb [numeric] *UNIVERSE: wt_unit= stones and pounds (st/lb)* *Enter stones*: _____ st [numeric] AND *Enter pounds*: _____ lb [numeric, 0-13]

SELF-REPORTED WEIGHT CONFIRMATION *WT_KG_CONF* *WT_LB_CONF* *WT_STLB_CONF*	*UNIVERSE: wt_unit=kilograms* **You entered [X] kilograms. Is that correct?** Yes No – I need to make a correction Don't know Refuse to answer *UNIVERSE: wt_unit= pounds* **You entered [X] pounds. Is that correct?** Yes No – I need to make a correction Don't know Refuse to answer *UNIVERSE: wt_unit= stones and pounds (st/lb)* **You entered [X] stones and [X] pounds. Is that correct?** Yes No – I need to make a correction Don't know Refuse to answer

| SELF-REPORTED WEIGHT CORRECTION REVISED 2024 WTC_UNIT WTC_KG WTC_LB WTC_ST WTC_STLB | *UNIVERSE: wt_lb_conf, wt_kg_conf, or wt_stlb_conf= No – I need to make a correction*

UNIVERSE: All male respondents (SEX=1); females who are not pregnant (SEX=2 and PREG≠1)
How much do you weigh without clothes or shoes?

UNIVERSE: Female respondents who are pregnant (SEX=2 and PREG=1)
How much did you weigh without clothes or shoes <u>before</u> your pregnancy?
Would you rather answer in:
Kilograms (kg)
Pounds (lb)
Stones and pounds (st/lb)
Don't know
Refuse to answer

[PROGRAMMER NOTE: show based on response to above]

UNIVERSE: wtc_unit=kilograms
Enter kilograms: _____ kg [numeric]

UNIVERSE: wtc_unit= pounds
Enter pounds: _____ lb [numeric]

UNIVERSE: wtc_unit= stones and pounds (st/lb)
Enter stones: _____ st [numeric]
AND
Enter pounds: _____ lb [numeric, 0-13] |

END SCREEN ==REVISED 2024 (universe)== ==REVISED 2025==	You're finished—thank you! As a reminder, this study has been reviewed by and received ethics clearance through a University of Waterloo Research Ethics Board (REB #30829). If you have any comments or concerns resulting from your involvement please contact the Office of Research Ethics in Canada at 0011-1-519-888-4440 or reb@uwaterloo.ca, or Professor David Hammond of the University of Waterloo in Canada at 0011-1-519-888-4567 ext. 46462 or dhammond@uwaterloo.ca, or Associate Professor Gary Sacks, a local study researcher from Deakin University in Australia at 03 9251 7105 or gary.sacks@deakin.edu.au. **Click NEXT to return to the survey company's website.** Thanks again for your help.
REDIRECT TO NIELSEN	You will now be redirected back to the survey company.