

WIC RFA Grantees- Common Questionnaires

DEMOGRAPHICS

Name:

Your age (*Su edad*): _____ Birthdate: _____

Are you? (*¿Es usted?*) Female (*Feminina*) Male (*Masculino*)

Pregnant Yes No *Embarazada Sí No*

Due date _____

Breastfeeding Yes No *Lactando Sí No*

Are you Hispanic or Latino? (*Mark one.*) *From: NHANES Demographics Questionnaire*
Hispanic or Latino

- What is your country of origin
- Puerto Rican
 - Cuban
 - Mexican
 - South/Central American
 - Other/Unknown/Refused

- What is your race? (*Mark one or more.*) *From: NHANES Demographics Questionnaire*
- American Indian or Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian or other Pacific Islander
 - White
 - Other

- What is your preferred language?
- English
 - Spanish
 - Other _____

- What language(s) do you speak at home? (*Mark all that apply.*) *From: NHANES Demographics Questionnaire*
- English
 - Spanish
 - Other _____

- Which best describes your current status? Are you ...? (*Mark the best answer.*) *From: NHANES Demographics Questionnaire, modified*
- Married
 - Widowed
 - Divorced
 - Separated
 - Single, Never married
 - Living with partner

- What is the highest year or grade you finished in school? (*Mark one.*) *From: FITS 2002 answer choices from US census, modified (Ziegler, 2006)*
- Less than 1 year of school

Elementary (grades 1–8)
Some high school (grades 9–12, no degree)
High school graduate, GED, or equivalent
Some college (1–4 years, no degree)
Associate’s degree (including occupational or academic degrees)
Bachelor’s degree (BA, BS, AB, etc.)
Master’s degree or higher (MA, MS, PhD, MD, etc.)

What is the highest year or grade your spouse/partner finished in school? (*Mark one.*) *From: FITS 2002 answer choices from US census, modified (Ziegler, 2006)*

Less than 1 year of school
Elementary (grades 1–8)
Some high school (grades 9–12, no degree)
High school graduate, GED, or equivalent
Some college (1–4 years, no degree)
Associate’s degree (including occupational or academic degrees)
Bachelor’s degree (BA, BS, AB, etc.)
Master’s degree or higher (MA, MS, PhD, MD, etc.)

Number of children in the household under age 19: ____

Number of other adults in household (don’t count yourself): _____
Número de otros adultos en el hogar (sin incluirse usted)

Are you currently working for pay either full time or part time? *From: WIC NEFPI (Ritchie, 2010) modified*
Yes, full time
Yes, part time
No

Assistance program(s) that your family participates in (circle Yes or No for each program):
Programa(s) de ayuda en el (los) que su familia toma parte en (circule Sí o No para cada programa):

1. WIC (*WIC*) Yes (*Sí*) No (*No*)
2. Food Stamps (*Estampillas*) Yes (*Sí*) No (*No*)
3. FDPIR (*FDPIR*) Yes (*Sí*) No (*No*)
4. Commodities (*Commodities*) Yes (*Sí*) No (*No*)
5. Head Start (*Head Start*) Yes (*Sí*) No (*No*)
6. Child Nutrition (*Nutrición Infantil*) Yes (*Sí*) No (*No*)
7. TANF (*TANF*) Yes (*Sí*) No (*No*)
8. Food from food bank, food pantry or soup kitchen
9. Other (*Otro*): _____ (Specify (*Especifique*))
10. I do not receive any assistance

Total household income last month in dollars:
Ingreso total del hogar en el mes pasado (en dólares):
\$ _____

Food Security

Was this true for your household in the past 12 months?

1. We worried whether our food would run out before we got money to buy more.
 2. The food that we bought just didn’t last, and we didn’t have money to get more
- Responses: Often True; Sometimes True; Never True

From: USDA Household Food Security Survey Module - subset (Hager, 2010)

Yale version-adapted for pregnant Latinas (Hromi-Fiedler et al., 2009^a; Hromi-Fiedler et al., 2009^b)

1) **DURING THE LAST MONTH** have you or other adults in your household **WORRIED** whether your food would run out before you got money to buy more?

1) ¿**DURANTE EL MES PASADO**, usted u otros adultos en su hogar **SE HAN PREOCUPADO** de que la comida se pueda acabar antes de tener dinero para comprar más?

2) Has the food you or other adults in your household **BOUGHT** just not lasted and you didn't have money to buy more **DURING THE LAST MONTH**?

2) ¿**Le ha sucedido** que la comida que usted u otros adultos en su hogar **COMPRARON** no duró mucho, y no tenía dinero para comprar más, **DURANTE EL MES PASADO**?

Responses: Yes (Si); No (No); Don't know(No sabe)

Breastfeeding Status Question [for duration]

Talk through with mom current feeding and then check one of the following for Breast feeding status:

1. Exclusive (nothing but breast milk since birth)--no formula even in hospital (1)
2. Full (nothing but breast milk over last 2 days) (2)
3. Partial/some (more than ½ of feeds are breast milk) (3)
4. Limited/Token (less than ½ of feeds are breastmilk) (4)
5. NICU pumping/medical separation (5)
6. Not breastfeeding (6)

References

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