Volume 4, Issue 11: November 2025

# QUESTIONNAIRE

**Start of Block: Introduction** 

**CONSENT** Thank you for accepting our survey request. The information you provide will be used for research purposes. The following form contains an explanation of our study and your rights as a research participant.

#### RESEARCH PARTICIPANT CONSENT FORM

**Key Information:** Please take the time to review this information carefully. This is a research study. Your participation in this study is voluntary, which means you may choose not to participate at any time without penalty. If you decide to take part, please indicate so at the bottom of this form.

**Purpose:** Our goal for this research survey is to track consumer preferences, behaviors, and sentiments concerning the sustainability, quality, and price of food purchased and consumed in the last 30 days.

**Procedures:** This web-based survey will take about 15 minutes to complete. You will answer questions about topics like your food security, food expenditures, and food preferences. We also ask some basic demographic questions.

**Risks of Participation:** The risks associated with this study are minimal. They are not greater than those ordinarily encountered in daily life, and you may stop at any time. Importantly, this survey has a number of questions embedded in it as validity checks to ensure that you are not a robot and are fully reading and answering each question. A unique combination of answers to those questions may result in your survey being rejected.

**Benefits:** This study will help researchers track consumer demand for various food products, understand awareness of food-related issues, and anticipate the impact of current events or activities on the food system.

**Costs:** There are no anticipated costs to participate in this research.

**Confidentiality:** No one will have access to your name. At no point will a data file be constructed in which your name is linked with your responses. The data will be stored by the researchers with no intention to destroy the data. The data will only be released in summaries in which no individual's answers can be identified. The project's research records may be reviewed by departments at Purdue University responsible for regulatory and research oversight.

**Participant Rights:** Your participation in this study is voluntary. You may choose not to participate or, if you agree to participate, you may withdraw your participation at any time without penalty or loss of benefits to which you are otherwise entitled. However, you cannot withdraw the collected data, once the data is transferred to Purdue University's computers.

**Contact Information:** If you have questions or comments about this project, please contact the survey manager Elijah Bryant at ehbryant@purdue.edu or principal investigator Dr. Joseph Balagtas at (765) 494-4298 or balagtas@purdue.edu. To send an anonymous report, visit Purdue's Hotline



at www.purdue.edu/hotline. If you have questions about your rights while taking part in the study or have concerns about the treatment of research participants, please call the Human Research Protection Program at (765) 494-5942, email irb@purdue.edu, or write to: Human Research Protection Program - Purdue University Ernest C. Young Hall, Room 1032, 155 S. Grant St., West Lafayette, IN 47907-2114.

**Documentation of Informed Consent:** I have read and fully understand the consent form. By clicking below, I am indicating that I freely and voluntarily agree to participate in this study and acknowledge that I am at least 18 years of age. It is recommended that you print a copy of this consent page for your records before you begin.

- o Yes, I want to participate in this study. (1)
- o No, I do not want to participate in this study. (2)

**End of Block: Introduction** 

**Start of Block: Quotas** 

**QUO1** What is your age?

- o 17 years or younger (1)
- o 18 24 years old (2)
- o 25 34 years old (3)
- o 35 44 years old (4)
- o 45 54 years old (5)
- o 55 64 years old (6)
- o 65 74 years old (7)
- o 75 years or older (8)

QUO2 Do you describe yourself as male, female, or transgender?

- o Male (1)
- o Female (2)
- o Transgender (3)
- o None of these (4)

**QUO3** What is your race? (select all that apply)

White (1)

Black or African American (2)

American Indian or Alaska Native (3)

Asian Indian (4)



- Chinese (5)
  Filipino (6)
  Japanese (7)
  Korean (8)
  Vietnamese (9)
  Other Asian (10)
  Native Hawaiian (11)
- Guamanian or Chamorro (12)
- Samoan (13)
- Other Pacific Islander (14)
- Some other race (15)

#### QUO4 Are you of Hispanic, Latino, or Spanish origin?

- o No, not of Hispanic, Latino, or Spanish origin (1)
- o Yes, Mexican, Mexican American, Chicano (2)
- o Yes, Puerto Rican (3)
- o Yes, Cuban (4)
- o Yes, another Hispanic, Latino, or Spanish origin (5)

## QUO5 In 2024, what was your total household income before taxes?

- o Less than \$15,000 (1)
- o \$15,000 \$24,999 (2)
- o \$25,000 \$34,999 (3)
- o \$35,000 \$49,999 (4)
- o \$50,000 \$74,999 (5)
- o \$75,000 \$99,999 (6)
- o \$100,000 \$149,999 (7)
- o \$150,000 \$199,999 (8)
- o \$200,000 or more (9)

QUO6 In which region do you live?





#### **UNITED STATES CENSUS REGIONS**

0	Northeast (	(1)

- o Midwest (2)
- o South (3)
- o West (4)

**Taste** 

o Outside the U.S. (5)

End of Block: Quotas

**Start of Block: Values** 

**VAL1** How important are the following attributes when purchasing food? Based on a total of 100 points, please rank the importance of these attributes to you, allocating the most points to the category you consider the most important. NOTE: You must allocate exactly 100 points to proceed.

Nutrition (amount and type of fat, protein, vitamins, etc. are healthy and nourishing) : (1)
Environmental impact (production and consumption improve rather than damage environment): (2)
Social responsibility (farmers, processors, retailers, workers, animals and consumers all benefit) : (3)
Affordability (food prices are reasonable, fit within your budget, and allow you lots of choices) : (4)
Availability (enough safe and desirable food is easy to find and physically accessible) : (5)



(flavor and texture in your mouth are pleasing and high quality): (6)
Total :
End of Block: Values
Start of Block: Attention Check
<b>TRA4</b> We appreciate your participation in this survey. Ensuring that we have quality data is important to us. Please select 3 to show that you are reading each question.
o 1 (1)
o 2 (2)
o 3 (3)
o 4 (4)
End of Block: Attention Check
Start of Block: Risk
<b>RSK1</b> How do you evaluate yourself: Are you in general a more risk-taking person or do you try to avoid risks? Please respond on a scale of 0 (risk averse) to 10 (fully prepared to take risks).
o Risk averse 0 (1)
o 1 (2)
o 2 (3)
o 3 (4)
o 4 (5)
o 5 (6)
o 6 (7)
o 7 (8)
o 8 (9)
o 9 (10)
o Fully prepared to take risks 10 (11)
<b>RSK2</b> One can evaluate different areas of risk in different ways. How do you evaluate your attitude towards risk in the following areas? Please respond on a scale of 0 (risk averse) to 10 (fully prepare to take risks).
Your health (1)
Food consumed at home (2)
Food consumed away from home (from restaurants, fast food places, etc.) (3)

Risk averse 0 (1) 0 1 (2) 0 2 (3) 0 3 (4) 4 (5) 0 5 (6) 0 0 6 (7) 7 (8) 0 8 (9) 0 9 (10) 0 Fully prepared to take risks 10 (11)

**RSK3** How do you see yourself: Are you rather impatient or very patient? Please respond on a scale of 0 (very impatient) to 10 (very patient).

- o Very impatient 0 (1)
- o 1 (2)
- o 2 (3)
- o 3 (4)
- o 4 (5)
- o 5 (6)
- o 6 (7)
- o 7 (8)
- o 8 (9)
- o 9 (10)
- o Very patient 10 (11)

### **End of Block: Risk**

#### **Start of Block: Security**

These next questions are about the food eaten in your household in the LAST 30 DAYS and whether you were able to afford the food you need.

**SEC1** "The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more." Was this statement often, sometimes, or never true for your household in the LAST 30 DAYS?



<ul> <li>Often true (1)</li> <li>Sometimes true (2)</li> <li>Never true (3)</li> <li>Don't know (4)</li> </ul> SEC2 "(I/we) couldn't afford to eat balanced meals." Was this statement often, sometimes, or not be statement of the sometimes.	
o Never true (3) o Don't know (4)	
o Don't know (4)	
· ,	
SEC2 "(I/we) couldn't afford to eat balanced meals" Was this statement often sometimes or n	
true for your household in the LAST 30 DAYS?	ver
o Often true (1)	
o Sometimes true (2)	
o Never true (3)	
o Don't know (4)	
<b>SEC3</b> In the LAST 30 DAYS did you or other adults in your household ever cut the size of your or skip meals because there wasn't enough money for food?	neals
o Yes (1)	

o No (2)

o Don't know (3)

#### Display This Question:

If SEC3 = 1

**SEC4** In the LAST 30 DAYS, how many days did you or other adults in your household cut the size of your meals or skip meals because there wasn't enough money for food?

▼ 1 (1) ... Don't know (31)

**SEC5** In the LAST 30 DAYS, did you ever eat less than you felt you should because there wasn't enough money for food?

o Yes (1)

o No (2)

o Don't know (3)

**SEC6** In the LAST 30 DAYS, were you ever hungry but didn't eat because there wasn't enough money for food?

o Yes (1)

o No (2)

o Don't know (3)

**SEC7** In the LAST 30 DAYS, did you or anyone in your household get free groceries from a food pantry, food bank, church, or other place that provides free food?



o Yes (1)

o No (2)

**SEC8** Do you or does anyone in your household CURRENTLY receive benefits from the Supplemental Nutrition Assistance Program (SNAP) or the Food Stamp Program?

o Yes (1)

o No (2)

### Display This Question:

If SEC8 = 1

**SEC9** How many months have you or anyone in your household been receiving benefits from the Supplemental Nutrition Assistance Program (SNAP) or the Food Stamp Program?

▼ 1 or less (1) ... 24 or more (24)

#### Display This Question:

If SEC8 = 2

**SEC10** Have you or anyone in your household EVER received benefits from the Supplemental Nutrition Assistance Program (SNAP) or the Food Stamp Program?

o Yes (1)

o No (2)

**End of Block: Security** 

Display This Block:

If SEC7 = 1

Start of Block: Ad Hoc

**AH\_SEC\_temp20** Earlier, you responded "yes" to having received free groceries from a food pantry, food bank, church, or other place that provides free food in the LAST 30 DAYS. Thinking about this experience, please answer the following questions.

How many times did your household receive free groceries from a food pantry, food bank, church, or other place that provides free food in the LAST 30 DAYS?

o Once (1)

o 2-3 times (2)

o 4-5 times (3)

o More than 5 times (4)

**AH\_SEC\_temp21** Is this the first time you or anyone in your household has received free groceries from a food pantry, food bank, church, or other place that provides free food?

o Yes (1)



o No (2)

**AH\_SEC\_temp22** How many months have you or anyone in your household been receiving free groceries from a food pantry, food bank, church, or other place that provides free food?

▼ 1 or less (1) ... 24 or more (24)

**AH\_SEC\_temp23** Which of the following statements best describes your situation regarding receiving free groceries from a food pantry, food bank, or other such place that provides free food?

- o (I/We) regularly use these food sources to meet my household's food needs. (1)
- o (I/We) occasionally use these food sources to help supplement my household's food needs. (2)
- o (I/We) began using these food sources recently due to changes in our household's financial situation. (3)
- o (I/We) began using these food sources recently due to concerns or changes related to SNAP benefits. (4)
- o None of the above. (5)

**AH\_SEC\_temp24** Do you expect to continue using food pantries, food banks, or other such places that provide free food in the coming months?

- o Yes, regularly (1)
- o Yes, occasionally (2)
- o No (3)
- o Not sure (4)

**End of Block: Ad Hoc** 

Start of Block: Spending

Now we are going to ask about expenses for food your household has purchased in the LAST 30 DAYS. Think carefully about where you have shopped and what you have eaten recently.

**SPN1** How much of the shopping for food do you do for your household?

- o 100% (1)
- o 75% (2)
- o 50% (3)
- o 25% (4)
- o None (5)

**SPN2** What has been your household's usual WEEKLY expense for food bought during grocery shopping?



▼ \$0 (	1) \$400 or more (81)
SPN3	Where did your household last purchase or pick up groceries?
0	Superstore (1)
0	Grocery store (2)
0	Convenience store (3)
0	Farmers market (4)
0	Food bank or pantry (5)
0	Specialty or natural foods store (6)
0	Other (specify) (7)
0	Club store (e.g., Costco, Sam's Club) (8)
0	Discount or dollar store (e.g., Aldi, Dollar General, Dollar Tree) (9)
SPN4	Were your last groceries
0	Selected and bought in-store (1)
0	Selected and bought online and delivered (2)
0	Selected and bought online and picked up (3)
0	Other (specify) (4)
Displa	ay This Question: If SPN4 != 2
SPN5 groce	Which of the following best describes your household's last trip to purchase or pick up ries?
0	Direct trip (from home to the store) (1)
0	Indirect trip (from the office, errands, or another location to the store) (2)
Displa	ay This Question: If SPN4 != 2
SPN6 groce	How long did you or someone in your household travel to purchase or pick up your last ries?
▼ 5 m	inutes or less (1) 1 hour or more (12) Don't know (13)

# Display This Question: If SPN4 != 2

**SPN7** How did you or someone in your household get to the store?

Car (1)



o Walk (2)
o Bicycle (3)
o Bus, subway, or other public transit (4)
o Taxi, Uber, or other paid driver (5)
<b>SPN8</b> How long did you or someone in your household spend shopping for your last groceries? Note: Estimate time spent shopping online if your groceries were delivered.
▼ 5 minutes or less (1) 1 hour or more (12), Don't know (13)
<b>SPN9</b> In the LAST 30 DAYS, how many times did you or someone in your household go to the store to purchase or pick up groceries?
▼ 1 or less (1) 10 or more (10), Don't know (11)
<b>SPN10</b> What has been your household's usual WEEKLY expense for meals or snacks from restaurants, fast food places, cafeterias, carryout, or other such places?
▼ \$0 (1) \$400 or more (81)
Display This Question:  If SPN7 != 1
<b>SPN11</b> What share of your spending on meals or snacks from restaurants, fast food places, cafeterias, etc. came from the following? Please divide 100 points between these options.
Restaurant (dine-in): (1)
Restaurant (take-away): (2)
Restaurant (delivery): (3)
Fast food (dine-in): (4)
Fast food (take-away/drive-through): (5)
Fast food (delivery): (6)
Cafeteria : (7)
Other: (8)
Total :
<b>SPN12</b> In the LAST 7 DAYS, how many meals did you eat away from home that were purchased from restaurants, fast food places, cafeterias, carryout, or other such places?
▼ 0 (1) 21 or more (22)
<b>SPN13</b> How many days until you or someone in your household receives your next paycheck from a job, benefit from the government, or any other source of income?
▼ 0 (1) Don't know (32)



**SPN14** Will your household have to wait until your next payment to buy groceries again?

- o Yes (1)
- o No (2)

SPN15 Will your household have to wait until your next payment to eat out at a restaurant again?

- o Yes (1)
- o No (2)

**SPN16** Compared to last year at this time, are the prices you paid for food at the grocery store higher or lower?

▼ 10% lower or more (1) ... 10% higher or more (21)

**SPN17** Thinking ahead to next year at this time, do you expect the prices you pay for food at the grocery store to be higher or lower?

▼ 10% lower or more (1) ... 10% higher or more (21)

**End of Block: Spending** 

**Start of Block: Behaviors** 

**BEH1** Below are several statements about common shopping and eating habits. For each statement, please tell us how often that statement applied to you in the LAST 30 DAYS.

Chose organic foods over non-organic foods (1)

Chose local foods over non-local foods (2)

Chose cage-free eggs over conventional eggs (3)

Chose wild-caught fish over farm-raised fish (4)

Chose grass-fed beef over conventional beef (5)

Chose plant-based proteins over animal proteins (6)

Chose generic foods over brand foods (7)

Checked for GMO ingredients (8)

Checked for natural or clean labels (9)

Checked the nutrition label before buying new foods (10)

Checked where my food originated (11)

Checked how my food was produced (12)

Checked the use-by/sell-by date at the store (13)

Checked for food recalls (14)



Ate fruits or vegetables without washing them (15) Ate rare or undercooked meat (16) Ate raw dough or batter (17) Took steps to reduce food waste at home (18) Threw away food past the use-by date (19) Composted food scraps (20) Recycled food packaging (21) Never (1) 0 0 Rarely (2) Sometimes (3) 0 Often (4) 0 Always (5) 0 Does not apply (6) 0 **BEH2** Are you a vegetarian or a vegan? Yes (1) 0 No (2) 0 **BEH3** Is another member of your household vegetarian or vegan? Yes (1) 0 No (2) 0 Does not apply (3) BEH4 How often does your household eat home-cooked meals on a WEEKLY basis? Less than 1 time (1) 0 1 - 3 times (2) 0 4 - 6 times (3) 0 7 or more times (4) 0 **BEH5** Do you CURRENTLY grow your own food in a garden? Yes, I am growing food in a home garden (1) 0 Yes, I am growing food in a community garden (2) 0 No, but I plan to start growing food in a garden this year (3) 0



0	No, and I do not plan to start growing food in a garden this year (4)					
End o	End of Block: Behaviors					
Start	of Block: Trends					
	In the LAST 30 DAYS, have you been unable t sually shop?	to find a specific food product at the stores where				
0	Yes (specify) (1)					
0	No (2)					
TND2 store?		new food products on the shelves at the grocery				
0	Yes (specify) (1)					
0	No (2)					
	In the LAST 30 DAYS, have you removed from fic food, drink, nutrient, ingredient, or brand?	n your diet or tried to limit your intake of a				
0	Yes (specify) (1)					
0	No (2)					
End o	of Block: Trends					
Start	of Block: Trust					
	_ <b>v2</b> How much do you trust information about es? Please select up to 5 most trusted sources	healthy and sustainable food from the following and 5 least trusted sources.				
Most	trusted (select 5 items)	Least trusted (select 5 items)				
Fo	od and Drug Administration (1)	Food and Drug Administration (1)				
De	partment of Agriculture (2)	Department of Agriculture (2)				
Die	etary Guidelines for Americans (3)	Dietary Guidelines for Americans (3)				
An	nerican Medical Association (4)	American Medical Association (4)				
American Farm Bureau Federation (5) American		American Farm Bureau Federation (5)				
Ce	nter for Science in the Public Interest (6)	Center for Science in the Public Interest (6)				
Ne	estlé (7)	Nestlé (7)				
Ty:	son Foods (8)	Tyson Foods (8)				
McDonald's (9)		McDonald's (9)				
Chipotle (10) Chipotle (10)		Chipotle (10)				
New York Times (11)		New York Times (11)				



Fo	x News (12)		Fox News (12)
CN	IN (13)		CNN (13)
NP	PR (14)		NPR (14)
Joe	e Rogan (15)		Joe Rogan (15)
На	rvard University (16)		Harvard University (16)
Pui	rdue University (17)		Purdue University (17)
Pri	mary care physician (18)		Primary care physician (18)
Frie	ends (19)		Friends (19)
Far	mily (20)		Family (20)
End o	f Block: Trust		
Start	of Block: Beliefs		
BLF1	To what extent do you agree or disagree with t	ne fo	ollowing statements?
Genet	ically modified food is safe to eat (1)		
Organ	ic food is more nutritious than non-organic foo	od (2	2)
Local	food is better for the environment (3)		
Grass	-fed beef tastes better than grain-fed beef (4)		
Food	with deoxyribonucleic acid is unsafe to eat (5)		
Eating	g less meat is better for the environment (6)		
Gluter	n-free food is healthier for you (7)		
Agricu	ulture is a significant contributor to climate cha	nge	(8)
Plant-	based milk is healthier than dairy milk (9)		
Climat	te change will impact food prices (10)		
Please	e select 'strongly agree' to show you are paying	ı att	ention (11)
0	Strongly disagree (1)		
0	Somewhat disagree (2)		
0	Neither agree nor disagree (3)		
0	Somewhat agree (4)		
0	Strongly agree (5)		

**End of Block: Beliefs** 



#### Start of Block: Diet Quality<sup>1</sup>

Thinking about the food you ate in the LAST 30 DAYS, please answer the following questions.

**DQ1\_v2** How often did you eat fresh fruits in the LAST 30 DAYS?

Examples: Apples, bananas, pears, oranges, grapes, strawberries, blueberries, etc. Include fresh fruits and frozen fruits with no added sugar. Please do not include preserved or dried fruits or fruit juice in your estimates.

[One serving equals: 1 small apple or ½ large banana (approximately 1 cp, size of a small fist); 1 cup mandarin oranges, melon or raspberries; ¾ cup blueberries; 1½ cup whole strawberries]

- o Less than 1 serving per week
- o 1-2 servings per week
- o 3-4 servings per week
- o 5-6 servings per week
- o 1 serving per day
- o 2-3 servings per day
- o 4 or more servings per day

**DQ2\_v2** How often did you eat vegetables in the LAST 30 DAYS?

Examples: Tomatoes, peppers, cucumbers, broccoli, carrots, green beans, cabbage, spinach, arugula, and other leafy vegetables. Include raw or cooked non-starchy vegetables. Please do not include starchy vegetables (such as potatoes) and fried vegetables in your estimates.

[One serving equals: 1 cup raw vegetables (e.g., tomatoes, baby carrots celery, green peas); ½ cup cooked vegetables (such as broccoli and spinach); 1 cup arugula]

- o Less than 3 servings per week (1)
- o 3-4 servings per week (2)
- o 5-6 servings per week (3)
- o 1 serving per day (4)
- o 2-3 servings per day (5)
- o 4 or more servings per day (6)

DQ3\_v2 How often did you eat legumes, nuts, and seeds in the LAST 30 DAYS?

Examples: Legumes – cooked or canned beans, lentils, chickpeas or peas, miso, tofu, tempeh, hummus

Nuts – almonds, walnuts, hazelnuts, peanuts, etc.

Seeds – sesame, sunflower, pumpkin, flax seeds, etc.



[One serving equals: ½ cup of cooked or canned legumes; 1/3 cup hummus or bean dip; ½ cup tofu; ¼ cup tempeh; a small handful of nuts or seeds]

- o Less than 1 serving per week (1)
- o 1-2 servings per week (2)
- o 3-4 servings per week (3)
- o 5-6 servings per week (4)
- o 1 serving per day (5)
- o 2 or more servings per day (6)

DQ4\_v2 How often did you eat fish or seafood in the LAST 30 DAYS?

Examples: Fresh water fish or sea water fish (e.g., salmon, sardines, trout, Atlantic, Pacific, mackerel, etc.) and seafood. Include canned fish/seafood in your estimates.

[One serving equals: 3 oz. of cooked or canned fish (about the size of a deck of cards); a palm-size piece of raw fish]

- o I did not eat it at all (1)
- o Less than 1 serving per week (2)
- o 1 serving per week (3)
- o 2 or more servings per week (4)

**DQ5\_v2** How often did you eat whole grains in the LAST 30 DAYS?

Examples: Whole grain bread, whole grain bread roll, muesli, unsweetened ready to eat cereal, cooked grits/porridge, brown rice, whole grain pasta, corn tortilla. Please do not include white bread, white roll or bagels, white rice or pasta, or wheat tortilla in your estimates.

[One serving equals: 1 slice of whole grain bread; ½ cup cooked cereal (oats, oatmeal, quinoa); ½ cup cooked brown rice or whole grain pasta; 1 small corn tortilla; ½ cup cooked grits; 1 cup ready-to-eat cereal flakes]

- o I did not eat it at all (1)
- o Less than 1 serving per week (2)
- o 1-2 servings per week (3)
- o 3-4 servings per week (4)
- o 5-6 servings per week (5)
- o 1 serving per day (6)
- o 2 servings or more per day (7)

DQ6\_v2 How often did you eat refined grains in the LAST 30 DAYS?



Examples: White bread; white roll, bagel or English muffin; white rice or pasta, wheat tortilla. Please do not include whole grains considered in the above question (such as whole grain bread or bread roll).

[One serving equals: 1 slice white bread; ½ roll; ½ small white bagel or English muffin; ½ cup cooked white rice or pasta; 1 small wheat tortilla]

- o I did not eat it at all (1)
- o Less than 1 serving per week (2)
- o 1-2 servings per week (3)
- o 3-4 servings per week (4)
- o 5-6 servings per week (5)
- o 1 serving per day (6)
- o 2 servings or more per day (7)

**DQ7 v2** How often did you eat low-fat dairy in the LAST 30 DAYS?

Examples: Low-fat milk (1%) or fat-free (skim) milk or soy milk; yogurt with reduced fat content; low-fat cheese, mozzarella, cottage cheese.

[One serving equals: 1 cup low-fat or skim milk; ¾ cup (6oz.) low-fat yogurt; 1 pre-packaged slice low-fat cheese; 1½ oz. mozzarella]

- o I did not eat it at all (1)
- o Less than 1 serving per week (2)
- o 1-2 servings per week (3)
- o 3-4 servings per week (4)
- o 5-6 servings per week (5)
- o 1 serving per day (6)
- o 2 servings or more per day (7)

**DQ8 v2** How often did you eat high-fat dairy and saturated fats in the LAST 30 DAYS?

Examples: 2% milk or whole milk; butter; cream; cream cheese; cheese with not reduced-fat content; yogurt with 2% or higher milk fat; ice cream. Butter, coconut oil or shortening used for cooking. Please do not include low-fat dairy in the above question in your estimates.

[One serving equals: 1 cup 2% milk and whole milk; ¾ cup (6oz.) yogurt; 1 pre-packaged slice of cheese; 2oz. processed cheese; ½ cup ice cream; 1 teaspoon butter, shortening or coconut oil]

- o I did not eat it at all (1)
- o Less than 1 serving per week (2)



- o 1-2 servings per week (3)
- o 3-4 servings per week (4)
- o 5-6 servings per week (5)
- o 1 serving per day (6)
- o 2 servings or more per day (7)

DQ9\_v2 How often did you eat sweets and sweet foods in the LAST 30 DAYS?

Examples: Commercial sweets, candies, cookies, cakes, pastries, sweet snacks.

[One serving equals: 1.5 oz. gummy candy (e.g., Haribo); 3 pieces hard candy (e.g., Werther's); 1 small piece of cake or pastry; 1 medium doughnut or sweet snack; 2-3 sweet biscuits or cookies (about 1 oz.)]

- o Less than 1 serving per week (1)
- o 1-2 servings per week (2)
- o 3-4 servings per week (3)
- o 5-6 servings per week (4)
- o 1 serving per day (5)
- o 2 or more servings per day (6)

DQ10 In general, how healthy is your overall diet? Would you say it is...

- o Excellent (1)
- o Very good (2)
- o Good (3)
- o Fair (4)
- o Poor (5)

AH\_DQ\_temp14 Are you currently taking a GLP-1 drug? (e.g., Ozempic, Wegovy, etc.)

- o Yes (1)
- o No (2)
- o No, but I am considering taking one. (3)
- o Prefer not to say (4)

Skip to Next Block:

If  $AH_DQ_temp14 = 4$ 

Display This Question:

If  $AH_DQ_{temp14} = 2 \text{ or } 3$ 



AH_D	Q_temp15 Have you taken a GLP-1 drug in the past? (e.g., Ozempic, Wegovy, etc.)
0	Yes (1)
0	No (2)
Displa	ay AH_DQ_temp17: If AH_DQ_temp14 = 1 or AH_DQ_temp15 = 1
	<b>Q_temp17</b> How long have you been taking or did you take a GLP-1 drug? (e.g., Ozempic, vy, etc.)
0	Less than one month (1)
0	1-2 months (2)
0	3-6 months (3)
0	7-12 months (4)
0	Over a year (5)
End o	of Block: Diet Quality
Start	of Block: Demographics
This la	ast section is going to ask additional questions about you and your household.
DEM1	I What is your ZIP Code?
DEM2	In what year were you born?
▼ 1920	0 (1) 2007 (88)
DEM3	3 Where were you born?
0	In the United States (1)
0	Outside the United States (specify) (2)
DEM4	1 Do you speak a language other than English at home?
0	Yes (specify) (1)
0	No (2)
DEM5	5 What is your current marital status?
0	Now married (1)
0	Widowed (2)
0	Divorced (3)
0	Separated (4)



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o Never married (5)

**DEM6** What is the highest level of education you have completed?

- o Less than high school (1)
- o Some high school (2)
- o High school graduate or equivalent (for example: GED) (3)
- o Some college, but degree not received or is in progress (4)
- o 2-year college degree (for example: AA, AS) (5)
- o 4-year college degree (for example: BA, BS) (6)
- o Graduate degree (for example: MA, PhD, MD, JD) (7)

**DEM7** Are you currently a student enrolled at a college or university?

- o Yes (1)
- o No (2)

**DEM8** How many total people (including yourself) live in your household?

▼ 1 (1) ... 10 or more (10)

**DEM9** How many people under 18 years old currently live in your household?

▼ 0 (0) ... 10 or more (10)

Display This Question:

If DEM9 != 0

**DEM10** In your household, are there...

Children under 5 years old? (1)

Children 5 through 11 years old? (2)

Children 12 through 17 years old? (3)

**DEM11** In the LAST WEEK, did you work for pay at a job (or business)?

- o Yes (1)
- o No (2)

**DEM12** During the LAST 4 WEEKS, have you been actively looking for work?

- o Yes (1)
- o No (2)

**DEM13** Are you retired (receive pension or retirement-income)?



- o No (1)
- o Yes, but still working and consider myself a worker (2)
- o Yes, still working but consider myself a retiree (3)
- o Yes, full-time retiree (4)

**DEM14** During the LAST 4 WEEKS, what was your household income?

- o Less than \$2,000 (1)
- o \$2,000 \$2,999 (2)
- o \$3,000 \$3,999 (3)
- o \$4,000 \$4,999 (4)
- o \$5,000 \$5,999 (5)
- o \$6,000 \$6,999 (6)
- o \$7,000 \$7,999 (7)
- o \$8,000 \$8,999 (8)
- o \$9,000 \$9,999 (9)
- o \$10,000 or above (10)

**DEM15** Do you currently farm or ranch for a living?

- o Yes (1)
- o No (2)

**DEM16** Did your parents farm or ranch for a living?

- o Yes (1)
- o No (2)

**DEM17** What is your religion, if any?

- o Protestant (1)
- o Roman Catholic (2)
- o Mormon (3)
- o Orthodox such as Greek or Russian Orthodox (4)
- o Jewish (5)
- o Muslim (6)
- o Buddhist (7)



- o Hindu (8)
- o Atheist (9)
- o Agnostic (10)
- o Something else (11)
- o Nothing in particular (12)

**DEM18** In general, would you describe your political views as...

- o Very liberal (1)
- o Liberal (2)
- o Moderate (3)
- o Conservative (4)
- o Very conservative (5)

**DEM19** With which political party do you most identify?

- o Democratic (1)
- o Republican (2)
- o I am an independent (3)
- o Other (for example: Green, Libertarian) (4)

**DEM20** What is your weight in pounds?

**▼** 50 (1) ... 400 (351)

**DEM21** What is the ideal weight in pounds that you would like to reach or keep?

**▼** 50 (1) ... 400 (351)

**DEM22** What is your height in feet and inches?

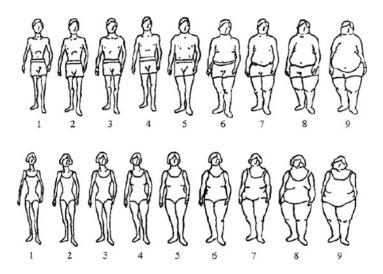
▼ 4ft (1) ... 7ft (37)

**DEM23** In general, would you say your health is...

- o Excellent (1)
- o Very good (2)
- o Good (3)
- o Fair (4)
- o Poor (5)
- o Don't know (6)



**DEM24** Please choose the figure that reflects how you think you look.



- o 1 (1)
- o 2 (2)
- o 3 (3)
- o 4 (4)
- o 5 (5)
- o 6 (6)
- o 7 (7)
- o 8 (8)
- o 9 (9)

**End of Block: Demographics** 

**College of Agriculture** 

**1** The "Diet Quality" question block is a monthly version of the 9-item screener created by researchers from Mayo Clinic for food intake and diet assessment.

Lara-Breitinger KM et al. Validation of a Brief Dietary Questionnaire for Use in Clinical Practice: Mini-EAT (Eating Assessment Tool). J Am Heart Assoc. 2023 Jan 3;12(1):e025064. doi: 10.1161/JAHA.121.025064. Epub 2022 Dec 30. PMID: 36583423; PMCID: PMC9973598.

