

National Evaluation of Title III-C Services

Follow-up Survey

CATI Questionnaire

March 20, 2012

INTRODUCTION

PROGRAMMER BOX (NUM)

CATI: IF BASELINE RESPONDENT WAS NOT A PROXY, GO TO INTRO
1. IF BASELINE RESPONDENT WAS A PROXY, GO TO INTRO 12.

INTRO1. Hello, my name is [NAME] from Mathematica Policy Research in Princeton, New Jersey. May I please speak with [RESPONDENT NAME]?

SPEAKING TO RESPONDENT	1	GO TO INTRO4
PERSON ASKS WHY YOU ARE CALLING	2	GO TO INTRO2
RESPONDENT IS BUSY	3	GO TO CALLBACK
RESPONDENT IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	4	GO TO INTRO5
RESPONDENT IS DECEASED	5	GO TO INTRO9
RESPONDENT MOVED	6	GO TO INTRO10
NEVER HEARD OF RESPONDENT	7	GO TO END
REFUSED	r	GO TO END

INTRO2. A few months ago, [RESPONDENT NAME] participated in a study sponsored by the U.S. Department of Health and Human Services. I am calling to ask [RESPONDENT NAME] a few follow-up questions. May I speak with [RESPONDENT NAME]?

RESPONDENT COMES TO THE PHONE	1	GO TO INTRO3
RESPONDENT IS BUSY	2	GO TO CALLBACK
RESPONDENT IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	3	GO TO INTRO5
RESPONDENT IS DECEASED	4	GO TO INTRO9
RESPONDENT MOVED	5	GO TO INTRO10
NEVER HEARD OF RESPONDENT	7	GO TO END
REFUSED	r	GO TO END

INTRO3. Hello, my name is [NAME] from Mathematica Policy Research in Princeton, New Jersey. A few months ago, you participated in a study to improve nutrition services for older adults. The study was sponsored by the U.S. Department of Health and Human Services, Administration on Aging, and conducted by Mathematica Policy Research. I am calling to ask you a few follow-up questions. The questions should only take about 5 minutes to complete. We'll mail you a check for \$10 within a few weeks of completing the survey. All of your answers will be kept strictly confidential and your participation is voluntary. May I ask you a few questions now?

YES, BEGIN INTERVIEW 1 GO TO A1
 NOT A GOOD TIME..... 2 GO TO CALLBACK
 REFUSED r GO TO END

INTRO4. A few months ago, you participated in a study to improve nutrition services for older adults. The study was sponsored by the U.S. Department of Health and Human Services, Administration on Aging, and conducted by Mathematica Policy Research. I am calling to ask you a few follow-up questions. The questions should only take about 5 minutes to complete. We'll mail you a check for \$10 within a few weeks of completing the survey. All of your answers will be kept strictly confidential and your participation is voluntary. May I ask you a few questions now?

YES, BEGIN INTERVIEW 1 GO TO A1
 NOT A GOOD TIME..... 2 GO TO CALLBACK
 REFUSED r GO TO END

INTRO5. Will [RESPONDENT NAME] be able to talk on the telephone if I call back later in the week?

YES 1 GO TO CALLBACK
 NO 2 GO TO INTRO6
 DON'T KNOW d GO TO INTRO6
 REFUSED r GO TO INTRO6

INTRO6. A few months ago, [RESPONDENT NAME] participated in a study sponsored by the U.S. Department of Health and Human Services. I am calling to ask [RESPONDENT NAME] a few follow-up questions. Is there someone who could answer the questions for [RESPONDENT NAME]?

YES, SPEAKING TO PROXY 1 GO TO INTRO8
 YES, BUT NOT A GOOD TIME OR PROXY NOT HOME 2 GO TO INTRO7
 PROXY LIVES AT DIFFERENT ADDRESS 3 GO TO INTRO7
 NO PROXY AVAILABLE 0 GO TO END
 REFUSED r GO TO END

INTRO7. May I please have [your/her/his] name? Address? Telephone number?

FIRST NAME (STRING (NUM))

MIDDLE INITIAL/NAME (STRING (NUM))

LAST NAME (STRING (NUM))

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

|_|_|_| - |_|_|_| - |_|_|_|
(RANGE) (RANGE) (RANGE)

DON'T KNOWd GO TO END

REFUSEDr GO TO END

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

INTRO8. May I please have your name? Address? Telephone number?

FIRST NAME (STRING (NUM))

MIDDLE INITIAL/NAME (STRING (NUM))

LAST NAME (STRING (NUM))

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

|_|_|_|_| - |_|_|_|_|_| - |_|_|_|_|_| (RANGE) (RANGE) (RANGE) GO TO A1

DON'T KNOWd GO TO A1

REFUSEDr GO TO A1

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

INTRO9. I am very sorry to hear that (she/he) passed away. GO TO END.

INTRO10. A few months ago, [RESPONDENT NAME] participated in a study sponsored by the U.S. Department of Health and Human Services. I am calling to ask [RESPONDENT NAME] a few follow-up questions. Do you know (her/his) new address? Telephone number?

_____ (STRING (NUM))
FIRST NAME

_____ (STRING (NUM))
MIDDLE INITIAL/NAME

_____ (STRING (NUM))
LAST NAME

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

|_|_|_| - |_|_|_| - |_|_|_|_|
(RANGE) (RANGE) (RANGE)

DON'T KNOWd GO TO END

REFUSEDr GO TO END

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

INTRO11. Hello, my name is [NAME] from Mathematica Policy Research in Princeton, New Jersey. May I please speak with [PROXY NAME]?

SPEAKING TO PROXY	1	GO TO INTRO14
PERSON ASKS WHY YOU ARE CALLING	2	GO TO INTRO12
PROXY IS BUSY	3	GO TO CALLBACK
PROXY IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	4	GO TO INTRO15
PROXY IS DECEASED	5	GO TO INTRO19
PROXY MOVED	6	GO TO INTRO20
NEVER HEARD OF PROXY	7	GO TO END
REFUSED	r	GO TO END

INTRO12. A few months ago, [PROXY NAME] participated in a study sponsored by the U.S. Department of Health and Human Services on behalf of [RESPONDENT NAME]. I am calling to ask [PROXY NAME] a few follow-up questions about [RESPONDENT NAME]. May I speak with [PROXY NAME]?

PROXY COMES TO THE PHONE	1	GO TO INTRO13
PROXY IS BUSY	2	GO TO CALLBACK
PROXY IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	3	GO TO INTRO15
PROXY IS DECEASED	4	GO TO INTRO19
PROXY MOVED	5	GO TO INTRO20
NEVER HEARD OF PROXY	7	GO TO END
REFUSED	r	GO TO END

INTRO13. Hello, my name is [NAME] from Mathematica Policy Research in Princeton, New Jersey. A few months ago, you participated in a study to improve nutrition services for older adults on behalf of [RESPONDENT NAME]. The study was sponsored by the U.S. Department of Health and Human Services, Administration on Aging, and conducted by Mathematica Policy Research. I am calling to ask you a few follow-up questions about [RESPONDENT NAME]. The questions should only take about 5 minutes to complete. We'll mail you a check for \$10 within a few weeks of completing the survey. All of your answers will be kept strictly confidential and your participation is voluntary. May I ask you a few questions now?

YES, BEGIN INTERVIEW	1	GO TO A1
NOT A GOOD TIME	2	GO TO CALLBACK
REFUSED	r	GO TO END

INTRO14. A few months ago, you participated in a study to improve nutrition services for older adults on behalf of [RESPONDENT NAME]. The study was sponsored by the U.S. Department of Health and Human Services, Administration on Aging, and conducted by Mathematica Policy Research. I am calling to ask you a few follow-up questions about [RESPONDENT NAME]. The questions should only take about 5 minutes to complete. We'll mail you a check for \$10 within a few weeks of completing the survey. All of your answers will be kept strictly confidential and your participation is voluntary. May I ask you a few questions now?

YES, BEGIN INTERVIEW	1	GO TO A1
NOT A GOOD TIME.....	2	GO TO CALLBACK
REFUSED	r	GO TO END

INTRO15. Will [PROXY NAME] be able to talk on the telephone if I call back later in the week?

YES	1	GO TO CALLBACK
NO.....	2	GO TO INTRO16
DON'T KNOW	d	GO TO INTRO16
REFUSED	r	GO TO INTRO16

INTRO16. A few months ago, [PROXY NAME] participated in a study sponsored by the U.S. Department of Health and Human Services on behalf of [RESPONDENT NAME]. I am calling to ask [PROXY NAME] a few follow-up questions about [RESPONDENT NAME]. Is there someone else who could answer the questions for [RESPONDENT NAME]?

YES, SPEAKING TO NEW PROXY	1	GO TO INTRO18
YES, BUT NOT A GOOD TIME OR NEW PROXY NOT HOME	2	GO TO INTRO17
NEW PROXY LIVES AT DIFFERENT ADDRESS	3	GO TO INTRO17
NO NEW PROXY AVAILABLE	0	GO TO END
REFUSED	r	GO TO END

INTRO17. May I please have [your/her/his] name? Address? Telephone number?

_____ (STRING (NUM))
FIRST NAME

_____ (STRING (NUM))
MIDDLE INITIAL/NAME

_____ (STRING (NUM))
LAST NAME

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

|_|_|_|_| - |_|_|_|_|_| - |_|_|_|_|_|
(RANGE) (RANGE) (RANGE)

DON'T KNOWd GO TO END

REFUSEDr GO TO END

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

INTRO18. May I please have your name? Address? Telephone number?

_____ (STRING (NUM))
 FIRST NAME

_____ (STRING (NUM))
 MIDDLE INITIAL/NAME

_____ (STRING (NUM))
 LAST NAME

|_|_|_|_| - |_|_|_|_|_| - |_|_|_|_|_| (RANGE) (RANGE) (RANGE) GO TO A1

DON'T KNOWd GO TO A1

REFUSEDr GO TO A1

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

INTRO19. I am very sorry to hear that (she/he) passed away. **GO TO END**

INTRO20. A few months ago, [RESPONDENT NAME] participated in a study sponsored by the U.S. Department of Health and Human Services. I am calling to ask [RESPONDENT NAME] a few follow-up questions. Do you know (her/his) new address? Telephone number?

_____ (STRING (NUM))
FIRST NAME

_____ (STRING (NUM))
MIDDLE INITIAL/NAME

_____ (STRING (NUM))
LAST NAME

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

|_|_|_| - |_|_|_| - |_|_|_|_|
(RANGE) (RANGE) (RANGE)

DON'T KNOWd **GO TO END**

REFUSEDr **GO TO END**

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
--

HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question
--

CALLBACK. When would be a good time to call back?

_____ (SPECIFY)

A. FOLLOW-UP SURVEY

PROGRAMMER BOX (NUM)

CATI: IF BASELINE NONPARTICIPANT GO TO A1. IF BASELINE CONGREGATE PARTICIPANT GO TO A15. IF BASELINE HOME-DELIVERED PARTICIPANT GO TO A23.

A1. During the past 6 months, [have you/has he/has she] eaten at a senior community meal program, for example, at a place like a senior center or community center or somewhere else where older adults get meals on a regular basis, other than a restaurant?

- YES 1
- NO 0 GO TO A8
- DON'T KNOW d GO TO A8
- REFUSED r GO TO A8

A2. How long ago did [you/he/she] first begin eating at a senior community meal program?

PROBE: You may answer in days, weeks, or months. Your best estimate is fine.

-
- DAYS AGO (RANGE 0-45) 2
- WEEKS AGO (RANGE 1-24) 3
- MONTHS AGO (RANGE 1-6) 4
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF DAYS GT 45; I want to be sure I recorded your answer correctly. Did you say [FILL A2] days ago? INTERVIEWER: ANSWER CANNOT EXCEED 45 DAYS AGO.

HARD CHECK: IF WEEKS GT 24; I want to be sure I recorded your answer correctly. Did you say [FILL A2] weeks ago? INTERVIEWER: ANSWER CANNOT EXCEED 24 WEEKS AGO.

HARD CHECK: IF MONTHS GT 6; I want to be sure I recorded your answer correctly. Did you say [FILL A2] months ago? INTERVIEWER: ANSWER CANNOT EXCEED 6 MONTHS AGO.

A3. What is the name of the place where you usually go for the senior community meal program?

_____ (STRING (30))

DON'T KNOWd

REFUSEDr

A4. Excluding [FILL NAME FROM A3], how many other places like [FILL NAME FROM A3] [do you/does he/does she] currently go for [your/his/her] meals? These could be places like senior centers, senior lunch programs, or other congregate meals programs.

____|____| NUMBER OF PLACES (0-10)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF NUMBER OF PLACES GT 10 I want to be sure I recorded your answer correctly. Did you say [FILL A4] places? INTERVIEWER: ANSWER CANNOT EXCEED 10 PLACES.

A5. Currently, how many days [do you/does he/does she] eat at [FILL NAME FROM A3] or another place like it?

____|____| DAYS

PER WEEK (RANGE 0-7).....1

PER MONTH (RANGE 0-31)2

DO NOT EAT THERE REGULARLY3

DON'T KNOWd

REFUSEDr

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A5] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A5] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A6. Thinking about meals [you eat/he eats/she eats] at [FILL NAME FROM A3] or other places like this, how many times per week do [you/he/she] currently get . . .

a. Breakfast there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A6] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

b. Lunch there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A6] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

c. Dinner there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A6] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

A7. How did [you/he/she] first learn about the nutrition program like the one at [FILL NAME FROM A3]?

CODE ALL THAT APPLY

- FROM ANOTHER PERSON..... 1
- MEDICAL DOCTOR.....2
- MEDICAL PERSONNEL OTHER THAN A DOCTOR3
- SOCIAL WORKER.....4
- FAMILY MEMBER5
- FRIEND6
- NEWSPAPER, TV, RADIO, INTERNET7
- POSTERS, SOMETHING IN THE MAIL.....8
- ANNOUNCEMENT IN CLUB OR CHURCH9
- REFERRED BY A COMMUNITY-BASED AGENCY (HOSPITAL, SOCIAL SERVICES AGENCY, ETC.) 10
- OTHER (SPECIFY)..... 99
- _____ (STRING (NUM))
- DON'T KNOWd
- REFUSEDr

PROGRAMMER BOX (NUM)
GO TO B1.

A8. During the past 6 months, [have you/has he/has she] received home-delivered meals or meals-on-wheels where meals are delivered to [your/his/her] home?

YES 1
NO 0 GO TO B1
DON'T KNOW d GO TO B1
REFUSED r GO TO B1

A9. How long ago did [you/he/she] first receive a home-delivered meal?

PROBE: You may answer in days, weeks, or months. Your best estimate is fine.

DAYS AGO (RANGE 0-45) 1
WEEKS AGO (RANGE 1-24) 2
MONTHS AGO (RANGE 1-6) 3
DON'T KNOW d
REFUSED r

HARD CHECK: IF DAYS GT 45; I want to be sure I recorded your answer correctly. Did you say [FILL A9] days ago? INTERVIEWER: ANSWER CANNOT EXCEED 45 DAYS AGO.

HARD CHECK: IF WEEKS GT 24; I want to be sure I recorded your answer correctly. Did you say [FILL A9] weeks ago? INTERVIEWER: ANSWER CANNOT EXCEED 24 WEEKS AGO.

HARD CHECK: IF MONTHS GT 13; I want to be sure I recorded your answer correctly. Did you say [FILL A9] months ago? INTERVIEWER: ANSWER CANNOT EXCEED 6 MONTHS AGO.

A10. What is the name of the organization who usually provides your home-delivered meals or meals-on-wheels?

_____ (STRING (30))
DON'T KNOW d
REFUSED r

A11. Excluding [FILL NAME FROM A10], how many other similar places currently deliver meals to [your/his/her] home?

_____|_____| NUMBER OF PLACES (0-10)
DON'T KNOW d
REFUSED r

HARD CHECK: IF NUMBER OF PLACES GT 10 I want to be sure I recorded your answer correctly. Did you say [FILL A11] places? INTERVIEWER: ANSWER CANNOT EXCEED 10 PLACES.

A12. Currently, how many days does [FILL NAME FROM A10] or another program like it deliver meals to [your/his/her] home?

DAYS

PER WEEK (RANGE 0-7).....1

PER MONTH (RANGE 0-31)2

DON'T KNOWd

REFUSEDr

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A12] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A12] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A13. Thinking about meals [you receive/he receives/she receives] from [FILL NAME FROM A10] or another program like it, how many of each of the following meals [do you/does he/does she] currently receive during a week?

a. Breakfast

MEALS (0-7)

DON'T KNOWd

REFUSEDr

MEALS ARE NOT DESIGNATEDr

GO TO
UNDESIGNATED
MEALS

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A13] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

b. Lunch

MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A13] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

c. Dinner

____ MEALS (0-7)
DON'T KNOWd
REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A13] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

ASK ONLY IF RESPONDENT SAYS MEALS ARE NOT DESIGNATED:

d. Undesignated meals

____ MEALS (0-21)
DON'T KNOWd
REFUSEDr

HARD CHECK: IF MEALS GT 21 I want to be sure I recorded your answer correctly. Did you say [fill A13] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 21 MEALS PER WEEK.

A14. How did [you/he/she] first learn about the home-delivered nutrition program like the one at [FILL NAME FROM A10]?

CODE ALL THAT APPLY

FROM ANOTHER PERSON.....1
MEDICAL DOCTOR.....2
MEDICAL PERSONNEL OTHER THAN A DOCTOR3
SOCIAL WORKER.....4
FAMILY MEMBER5
FRIEND6
NEWSPAPER, TV, RADIO, INTERNET7
POSTERS, SOMETHING IN THE MAIL.....8
ANNOUNCEMENT IN CLUB OR CHURCH.....9
REFERRED BY A COMMUNITY-BASED AGENCY (HOSPITAL, SOCIAL SERVICES AGENCY, ETC.)10
OTHER (SPECIFY).....99
_____ (STRING (NUM))
DON'T KNOWd
REFUSEDr

PROGRAMMER BOX (NUM)
GO TO B1.

A15. When we spoke with you about 6 months ago (that is, last [CURRENT MONTH – 6 MONTHS]), you told us that you ate at [FILL PROGRAM NAME FROM BASELINE] or another place like it [NUMBER] times per [WEEK/MONTH/YEAR]? Are you currently eating at [FILL PROGRAM NAME FROM BASELINE] or another place like it [NUMBER] times per [WEEK/MONTH/YEAR]?

- YES 1 GO TO A21
- FREQUENCY HAS CHANGED 2 GO TO A17
- PROGRAM NAME HAS CHANGED 3 GO TO A16
- CURRENTLY RECEIVING HOME-DELIVERED MEALS 4 GO TO A30
- NO LONGER PARTICIPATING IN ANY MEAL PROGRAMS 5 GO TO A22
- DON'T KNOW d GO TO A20
- REFUSED r GO TO B1

A16. What is the name of the place where you usually go for the senior community meal program?

- _____ (STRING (30))
- DON'T KNOW d
 - REFUSED r

A17. Currently, how many days [do you/does he/does she] eat at [FILL PROGRAM NAME FROM BASELINE OR A16] or another place like it?

- DAYS
- PER WEEK (RANGE 0-7) 1
 - PER MONTH (RANGE 0-31) 2
 - DO NOT EAT THERE REGULARLY 3
 - DON'T KNOW d
 - REFUSED r

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A17] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A17] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A18. Thinking about meals [you eat/he eats/she eats] at [FILL PROGRAM NAME FROM BASELINE OR A16] or other places like this, how many times per week do [you/he/she] currently get . . .

a. Breakfast there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A18] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

b. Lunch there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A18] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

c. Dinner there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A18] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

PROGRAMMER BOX (NUM)

IF [NUMBER] times per [WEEK/MONTH/YEAR] FROM A17 > [NUMBER] times per [WEEK/MONTH/YEAR] FROM BASELINE SURVEY, FILL A19 WITH "MORE OFTEN". IF [NUMBER] times per [WEEK/MONTH/YEAR] FROM A17 < [NUMBER] times per [WEEK/MONTH/YEAR] FROM BASELINE SURVEY, FILL A19 WITH "LESS OFTEN".

A19. Why [do you/does he/does she] eat at [FILL PROGRAM NAME FROM BASELINE OR A16] [MORE OFTEN/LESS OFTEN] than [you/he/she] did 6 months ago?

PROBE: That is, since last [CURRENT MONTH – 6 MONTHS].

CODE ALL THAT APPLY

PEOPLE:

- HAVE FEW OR NO FRIENDS AT MEAL SITE1
- HAVE NO ONE AT HOME TO EAT WITH2
- MADE FRIENDS AT MEAL SITE3

PLACE/PLACE-RELATED:

- HAVE OTHER PLACES TO EAT4
- HAVEN'T GOTTEN INVOLVED OR NOT INTERESTED IN ACTIVITIES AT MEAL SITE5
- CAN'T AFFORD TO DONATE AT MEAL SITE6
- SOMETIMES DIFFICULT TO GET TO MEAL SITE.....7
- I FOUND THAT I DON'T ALWAYS LIKE THE KINDS OF FOODS THEY SERVE8
- GOT INVOLVED IN ACTIVITIES AT MEAL SITE9
- COSTS LESS TO EAT AT MEAL SITE THAN ELSEWHERE10
- THE MEAL SITE IS WARM AND INVITING11

MEALS:

- STILL ABLE TO PREPARE OWN MEALS12
- NO LONGER HAVE A PLACE TO PREPARE MEALS.....13
- PHYSICALLY DIFFICULT TO MAKE OWN MEALS14
- I LIKE THE KINDS OF FOODS THEY SERVE15
- OTHER (SPECIFY).....99
- _____ (STRING 30))
- DON'T KNOWd
- REFUSEDr

PROGRAMMER BOX (NUM)
GO TO B1.

A20. Currently, how many days [do you/does he/does she] eat at [FILL PROGRAM NAME FROM BASELINE] or another place like it?

- DAYS
- PER WEEK (Range 0-7) 1
- PER MONTH (Range 0-31) 2
- DO NOT EAT THERE REGULARLY 3
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A20] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A20] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A21. Thinking about meals [you eat/he eats/she eats] at [FILL PROGRAM NAME FROM BASELINE] or other places like this, how many times per week do [you/he/she] currently get . . .

a. Breakfast there?

- TIMES (0-7)
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A21] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

b. Lunch there?

- TIMES (0-7)
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A21] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

c. Dinner there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A21] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

PROGRAMMER BOX (NUM)
GO TO B1.

A22. Why [did you/did he/did she] stop eating at [FILL PROGRAM NAME FROM BASELINE]?

CODE ALL THAT APPLY

PEOPLE:

HAVE FEW OR NO FRIENDS AT MEAL SITE1

PLACE/PLACE-RELATED:

HAVE OTHER PLACES TO EAT2

HAVEN'T GOTTEN INVOLVED OR NOT INTERESTED IN ACTIVITIES AT MEAL SITE3

CAN'T AFFORD TO DONATE AT MEAL SITE4

SOMETIMES DIFFICULT TO GET TO MEAL SITE.....5

I FOUND THAT I DON'T ALWAYS LIKE THE KINDS OF FOODS THEY SERVE6

MEALS:

STILL ABLE TO PREPARE OWN MEALS7

OTHER (SPECIFY).....99

_____ (STRING 30))

DON'T KNOWd

REFUSEDr

PROGRAMMER BOX (NUM)
GO TO B1.

A23. When we spoke with you about 6 months ago (that is, last [CURRENT MONTH – 6 MONTHS]), you told us that [FILL PROGRAM NAME FROM BASELINE] or another place like it delivered meals to your home [NUMBER] times per [WEEK/MONTH/YEAR]? Does [FILL PROGRAM NAME FROM BASELINE] currently deliver meals to your home [NUMBER] times per [WEEK/MONTH/YEAR]?

- YES 1 GO TO A29
- FREQUENCY HAS CHANGED 2 GO TO A28
- PROGRAM NAME HAS CHANGED 3 GO TO A24
- CURRENTLY RECEIVING CONGREGATE MEALS 4 GO TO A36
- NO LONGER PARTICIPATING IN ANY MEAL PROGRAMS 5 GO TO B1
- DON'T KNOW d GO TO A28
- REFUSED r GO TO B1

A24. What is the name of the place where you usually go for the senior community meal program?

_____ (STRING (30))

- DON'T KNOW d
- REFUSED r

A25. Currently, how many days does [FILL PROGRAM NAME FROM BASELINE OR A24] or another program like it deliver meals to [your/his/her] home?

____|____| DAYS

- PER WEEK (RANGE 0-7) 1
- PER MONTH (RANGE 0-31) 2
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A25] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A25] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A26. Thinking about meals [you receive/he receives/she receives] from [FILL PROGRAM NAME FROM BASELINE OR A24] or another program like it, how many of each of the following meals [do you/does he/does she] do you currently receive during a week?

a. Breakfast

MEALS (0-7)

DON'T KNOWd

REFUSEDr

MEALS ARE NOT DESIGNATEDr

GO TO
UNDESIGNATED
MEALS

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A26] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

b. Lunch

MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A26] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

c. Dinner

MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A26] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

ASK ONLY IF RESPONDENT SAYS MEALS ARE NOT DESIGNATED:

d. Undesignated meals

MEALS (0-21)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 21 I want to be sure I recorded your answer correctly. Did you say [fill A26] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 21 MEALS PER WEEK.

PROGRAMMER BOX (NUM)
IF A26b < 5, ASK A27. ELSE GO TO B1.

A27. [Do you/Does he/Does she] receive fewer than five lunches a week because [you prefer/he prefers/she prefers] it that way, or because [you/he/she] can only get fewer than five lunches a week?

CODE ONE ONLY

- PREFER IT THAT WAY 1
- CANNOT GET MORE LUNCHES 2
- DON'T KNOW d
- REFUSED r

PROGRAMMER BOX (NUM)
GO TO B1.

A28. Currently, how many days does [FILL PROGRAM NAME FROM BASELINE] or another program like it deliver meals to [your/his/her] home?

- ___|___| DAYS
- PER WEEK (RANGE 0-7) 1
 - PER MONTH (RANGE 0-31) 2
 - DON'T KNOW d
 - REFUSED r

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A28] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A28] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A29. Thinking about meals [you receive/he receives/she receives] from [FILL PROGRAM NAME FROM BASELINE] or another program like it, how many of each of the following meals [do you/does he/does she] do you currently receive during a week?

a. Breakfast

MEALS (0-7)

DON'T KNOWd

REFUSEDr

MEALS ARE NOT DESIGNATEDr

GO TO
UNDESIGNATED
MEALS

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A29] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

b. Lunch

MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A29] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

c. Dinner

MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A29] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

ASK ONLY IF RESPONDENT SAYS MEALS ARE NOT DESIGNATED:

d. Undesignated meals

MEALS (0-21)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 21 I want to be sure I recorded your answer correctly. Did you say [fill A29] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 21 MEALS PER WEEK.

PROGRAMMER BOX (NUM)
GO TO B1.

A30. How long ago did [you/he/she] first receive a home-delivered meal?

PROBE: You may answer in days, weeks, or months. Your best estimate is fine.

|_|_|

- DAYS AGO (RANGE 0-45).....1
- WEEKS AGO (RANGE 1-24).....2
- MONTHS AGO (RANGE 1-6).....3
- DON'T KNOWd
- REFUSEDr

HARD CHECK: IF DAYS GT 45; I want to be sure I recorded your answer correctly. Did you say [FILL A30] days ago? INTERVIEWER: ANSWER CANNOT EXCEED 45 DAYS AGO.

HARD CHECK: IF WEEKS GT 24; I want to be sure I recorded your answer correctly. Did you say [FILL A30] weeks ago? INTERVIEWER: ANSWER CANNOT EXCEED 24 WEEKS AGO.

HARD CHECK: IF MONTHS GT 13; I want to be sure I recorded your answer correctly. Did you say [FILL A30] months ago? INTERVIEWER: ANSWER CANNOT EXCEED 6 MONTHS AGO.

A31. What is the name of the organization who usually provides your home-delivered meals or meals-on-wheels?

_____(STRING (30))

- DON'T KNOWd
- REFUSEDr

A32. Excluding [FILL NAME FROM A31], how many other similar places currently deliver meals to [your/his/her] home?

|_|_| NUMBER OF PLACES (0-10)

- DON'T KNOWd
- REFUSEDr

HARD CHECK: IF NUMBER OF PLACES GT 10 I want to be sure I recorded your answer correctly. Did you say [FILL A32] places? INTERVIEWER: ANSWER CANNOT EXCEED 10 PLACES.

A33. Currently, how many days does [FILL NAME FROM A31] or another program like it deliver meals to [your/his/her] home?

DAYS

PER WEEK (RANGE 0-7).....1

PER MONTH (RANGE 0-31)2

DON'T KNOWd

REFUSEDr

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A33] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A33] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A34. Thinking about meals [you receive/he receives/she receives] from [FILL NAME FROM A31] or another program like it, how many of each of the following meals [do you/does he/does she] currently receive during a week?

a. Breakfast

MEALS (0-7)

DON'T KNOWd

REFUSEDr

MEALS ARE NOT DESIGNATEDr

GO TO
UNDESIGNATED
MEALS

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A34] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

b. Lunch

MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A34] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

c. Dinner

|_| MEALS (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A34] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 MEALS PER WEEK.

ASK ONLY IF RESPONDENT SAYS MEALS ARE NOT DESIGNATED:

d. Undesignated meals

|_|_| MEALS (0-21)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF MEALS GT 21 I want to be sure I recorded your answer correctly. Did you say [fill A34] meals per week? INTERVIEWER: ANSWER CANNOT EXCEED 21 MEALS PER WEEK.

A35. How did [you/he/she] first learn about the home-delivered nutrition program like the one at [FILL NAME FROM A31]?

CODE ALL THAT APPLY

FROM ANOTHER PERSON.....1

MEDICAL DOCTOR.....2

MEDICAL PERSONNEL OTHER THAN A DOCTOR3

SOCIAL WORKER.....4

FAMILY MEMBER5

FRIEND6

NEWSPAPER, TV, RADIO, INTERNET7

POSTERS, SOMETHING IN THE MAIL.....8

ANNOUNCEMENT IN CLUB OR CHURCH.....9

REFERRED BY A COMMUNITY-BASED AGENCY (HOSPITAL, SOCIAL SERVICES AGENCY, ETC.)10

OTHER (SPECIFY).....99

_____ (STRING (NUM))

DON'T KNOWd

REFUSEDr

PROGRAMMER BOX (NUM)
GO TO B1.

A36. How long ago did [you/he/she] first begin eating at a senior community meal program?

PROBE: You may answer in days, weeks, or months. Your best estimate is fine.

- DAYS AGO (RANGE 0-45) 1
- WEEKS AGO (RANGE 1-24) 2
- MONTHS AGO (RANGE 1-6) 3
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF DAYS GT 45; I want to be sure I recorded your answer correctly. Did you say [FILL A36] days ago? INTERVIEWER: ANSWER CANNOT EXCEED 45 DAYS AGO.

HARD CHECK: IF WEEKS GT 24; I want to be sure I recorded your answer correctly. Did you say [FILL A36] weeks ago? INTERVIEWER: ANSWER CANNOT EXCEED 24 WEEKS AGO.

HARD CHECK: IF MONTHS GT 6; I want to be sure I recorded your answer correctly. Did you say [FILL A36] months ago? INTERVIEWER: ANSWER CANNOT EXCEED 6 MONTHS AGO.

A37. What is the name of the place where you usually go for the senior community meal program?

_____ (STRING (30))

- DON'T KNOW d
- REFUSED r

A38. Excluding [FILL NAME FROM A37], how many other places like [FILL NAME FROM A37] [do you/does he/does she] currently go for [your/his/her] meals? These could be places like senior centers, senior lunch programs, or other congregate meals programs.

____ NUMBER OF PLACES (0-10)

- DON'T KNOW d
- REFUSED r

HARD CHECK: IF NUMBER OF PLACES GT 10 I want to be sure I recorded your answer correctly. Did you say [FILL A38] places? INTERVIEWER: ANSWER CANNOT EXCEED 10 PLACES.

A39. Currently, how many days [do you/does he/does she] eat at [FILL NAME FROM A37] or another place like it?

DAYS

PER WEEK (RANGE 0-7).....1

PER MONTH (RANGE 0-31)2

DO NOT EAT THERE REGULARLY3

DON'T KNOWd

REFUSEDr

HARD CHECK: IF DAYS PER WEEK GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A39] days per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 DAYS PER WEEK.

HARD CHECK: IF DAYS PER MONTH GT 31 I want to be sure I recorded your answer correctly. Did you say [fill A39] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A40. Thinking about meals [you eat/he eats/she eats] at [FILL NAME FROM A37] or other places like this, how many times per week do [you/he/she] currently get . . .

a. Breakfast there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A40] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

b. Lunch there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A40] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

c. Dinner there?

TIMES (0-7)

DON'T KNOWd

REFUSEDr

HARD CHECK: IF TIMES GT 7 I want to be sure I recorded your answer correctly. Did you say [fill A40] times per week? INTERVIEWER: ANSWER CANNOT EXCEED 7 TIMES PER WEEK.

A41. How did [you/he/she] first learn about the nutrition program like the one at [FILL NAME FROM A37]?

CODE ALL THAT APPLY

FROM ANOTHER PERSON..... 1

MEDICAL DOCTOR.....2

MEDICAL PERSONNEL OTHER THAN A DOCTOR3

SOCIAL WORKER.....4

FAMILY MEMBER5

FRIEND6

NEWSPAPER, TV, RADIO, INTERNET7

POSTERS, SOMETHING IN THE MAIL.....8

ANNOUNCEMENT IN CLUB OR CHURCH.....9

REFERRED BY A COMMUNITY-BASED AGENCY (HOSPITAL, SOCIAL SERVICES AGENCY, ETC.)10

OTHER (SPECIFY).....99

_____ (STRING (NUM))

DON'T KNOWd

REFUSEDr

B. CONTACT INFORMATION

B1. Thank you very much for your time. You have really helped us with this study. I'd like to check your address so we can send you a \$10 check within the next few weeks. According to our records we have...

[FILL NAME, ADDRESS, CITY, STATE, ZIP FROM BASELINE SURVEY]

NAME AND ADDRESS IS CORRECT1 GO TO B2

NAME AND ADDRESS NEEDS UPDATING.....0

_____ (STRING (NUM))
FIRST NAME

_____ (STRING (NUM))
MIDDLE INITIAL/NAME

_____ (STRING (NUM))
LAST NAME

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question

HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

PROGRAMMER BOX (NUM)
IF 6 MONTH FOLLOW-UP, GO TO B2. IF 12 MONTH FOLLOW-UP GO TO THANK YOU.

B2. We would also like to do another 5 minute follow-up interview with you in about 6 months. You will get a \$10 check for participating in that interview. In case we can't reach you at this number, is there another number we should try?

_____|_____|_____| - _____|_____|_____| - _____|_____|_____|
 (RANGE) (RANGE) (RANGE)

DON'T KNOWd GO TO THANK YOU

REFUSEDr GO TO THANK YOU

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

B3. In case we have trouble reaching you in 6 months, please give me the name and telephone number of a relative or friend who would know where you could be reached. Please give me the name of someone not currently living in your household.

May I please have (his/her) name? Address? Telephone number?

_____ (STRING (NUM))
 FIRST NAME

_____ (STRING (NUM))
 MIDDLE INITIAL/NAME

_____ (STRING (NUM))
 LAST NAME

 STREET 1

 STREET 2

 STREET 3

 CITY

 STATE

 ZIP

_____|_____|_____| - _____|_____|_____| - _____|_____|_____|
 (RANGE) (RANGE) (RANGE)

DON'T KNOWd GO TO THANK YOU

REFUSEDr GO TO THANK YOU

SOFT CHECK: IF CONDITION (e.g. Exchange = 555); Soft check statement/question
HARD CHECK: IF CONDITION (e.g. Area code LE 200); Hard check statement/question

B4. What is [NAME FROM ABOVE]’s relationship to you?

- HUSBAND/WIFE/PARTNER 1
- CHILD..... 2
- BROTHER OR SISTER 3
- GRANDCHILD 4
- SON-IN-LAW OR DAUGHTER-IN-LAW 5
- OTHER RELATIVE 6
- NON RELATIVE OR FRIEND 7
- DON'T KNOW d
- REFUSED r

THANK YOU. Thank you very much for your help with this important study. [IF 6 MONTH FOLLOW-UP] We look forward to speaking with you again in about 6 months.

END. Thank you for your time and consideration.