

**Evaluation of the National
Nutrition Services Program Title III-C**

12 Month Follow-Up Survey

CATI Questionnaire

April 25, 2016

INTRODUCTION

PROGRAMMER BOX (NUM)

CATI: IF BASELINE RESPONDENT WAS THE SAMPLE MEMBER, 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 to [SAMPLE MEMBER NAME]?

SPEAKING TO SAMPLE MEMBER	1	GO TO INTRO3
SAMPLE MEMBER COMES TO PHONE.....	2	GO TO INTRO3
PERSON ASKS WHAT CALL IS ABOUT	3	GO TO INTRO2
NEED TO CALLBACK	4	GO TO CALLBACK
SAMPLE MEMBER IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	5	GO TO INTRO5
SAMPLE MEMBER IS DECEASED	6	GO TO INTRO9
SAMPLE MEMBER HAS MOVED	7	GO TO INTRO10
NEVER HEARD OF SAMPLE MEMBER/WRONG NUMBER.....	8	GO TO END
HUNG UP DURING INTRODUCTION.....	9	GO TO END
REFUSED	r	GO TO END

INTRO2. About a year ago, [SAMPLE MEMBER NAME] participated in a study for the Administration for Community Living. I am calling to ask [SAMPLE MEMBER NAME] a few follow-up questions. May I please speak with [SAMPLE MEMBER NAME]?

SAMPLE MEMBER COMES TO THE PHONE	1	GO TO INTRO3
NEED TO CALLBACK	2	GO TO CALLBACK
SAMPLE MEMBER IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	3	GO TO INTRO5
SAMPLE MEMBER IS DECEASED	4	GO TO INTRO9
SAMPLE MEMBER MOVED	5	GO TO INTRO10
HUNG UP DURING INTRODUCTION.....	6	GO TO END
SUPERVISOR REVIEW	7	GO TO END
REFUSED	r	GO TO END

INTRO3. Hello, my name is [NAME] from Mathematica Policy Research in Princeton, New Jersey. About a year ago, you participated in a study to find out how some government programs help older adults. The study is sponsored by the U.S. Department of Health and Human Services, Administration for Community Living. I am calling to ask you a few follow-up questions. The questions should take less than 5 minutes to complete. We'll mail you a \$10 gift card within a few weeks of completing the survey. All of your answers will be kept strictly confidential and your participation is voluntary.

BEGIN INTERVIEW	1	GO TO A1
NOT A GOOD TIME.....	2	GO TO CALLBACK
HUNG UP DURING INTRODUCTION.....	3	GO TO END
SUPERVISOR REVIEW	4	GO TO END
REFUSED	r	GO TO END

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

YES/MAYBE - CALLBACK	1	GO TO CALLBACK
NO.....	0	GO TO INTRO6
DON'T KNOW	d	GO TO INTRO6
REFUSED	r	GO TO INTRO6

INTRO6. About a year ago, [SAMPLE MEMBER NAME] participated in a study to find out how some government programs help older adults. The study is sponsored by the U.S. Department of Health and Human Services, Administration for Community Living. I am calling to ask [SAMPLE MEMBER NAME] a few follow-up questions. Is there someone who could answer the questions for [SAMPLE MEMBER NAME]?

YES, SPEAKING TO PROXY	1	GO TO A1
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 AVAILABLE4 GO TO END
 SUPERVISOR REVIEW5 GO TO END
 REFUSEDr GO TO END

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

_____ (STRING (NUM))
 FIRST NAME

_____ (STRING (NUM))
 MIDDLE INITIAL/NAME

_____ (STRING (NUM))
 LAST NAME

INTRO7a. May I please have [your/her/his] telephone number?

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

DON'T KNOWd

REFUSEDr

HARD CHECK: IF AREA CODE LT 200; Area code must be greater than 200

INTRO7b. May I please have [your/her/his] address?

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

DON'T KNOWd

REFUSEDr

HARD CHECK: IF ZIP CODE NE 5 OR 9 DIGITS; The zip code must be 5 or 9 digits.

PROGRAMMER BOX (NUM)
CATI: IF INTRO 6 = 1 GO TO A1. IF INTRO 6 = 2 GO TO CALLBACK. IF
INTRO 6 = 4GO TO END.

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

INTRO10. Do you or anyone there know how to reach [SAMPLE MEMBER NAME]?

YES1 GO TO INTRO10a

NO0 GO TO END

INTRO10a. May I please have [his/her] telephone number?

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

DON'T KNOWd GO TO END

REFUSEDr GO TO END

HARD CHECK: IF AREA CODE LT 200; Area code must be greater than 200

INTRO10b. May I please have (his/her) address?

_____ (STRING (NUM))
FIRST NAME

_____ (STRING (NUM))
MIDDLE INITIAL/NAME

_____ (STRING (NUM))
LAST NAME

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

DON'T KNOWd GO TO END

REFUSEDr GO TO END

HARD CHECK: IF ZIP CODE NE 5 OR 9 DIGITS; The zip code must be 5 or 9 digits, please re-enter

INTRO12. 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
PROXY COMES TO PHONE	2	GO TO INTRO14
PERSON ASKS WHAT CALL IS ABOUT	3	GO TO INTRO 13
NEED TO CALLBACK	4	GO TO CALLBACK
PROXY IS IN HOSPITAL OR PHYSICALLY UNABLE TO RESPOND	5	GO TO INTRO15
PROXY IS DECEASED	6	GO TO INTRO19
PROXY HAS MOVED	7	GO TO INTRO10
NEVER HEARD OF PROXY	8	GO TO END
HUNG UP DURING INTRODUCTION.....	9	GO TO END
REFUSED	r	GO TO END

INTRO13. About a year ago, [PROXY NAME] participated in a study on behalf of [SAMPLE MEMBER NAME]. The study is sponsored by the U.S. Department of Health and Human Services, Administration for Community Living. I am calling to ask [PROXY NAME] a few follow-up questions about [SAMPLE MEMBER NAME]. May I please speak with [PROXY NAME]?

PROXY COMES TO THE PHONE	1	GO TO INTRO14
NEED TO CALLBACK	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
HUNG UP DURING INTRODUCTION.....	6	GO TO END
SUPERVISOR REVIEW	7	GO TO END
REFUSED	r	GO TO END

INTRO14. Hello, my name is [NAME] from Mathematica Policy Research in Princeton, New Jersey. About a year ago, you participated in a study on behalf of [SAMPLE MEMBER NAME]. The purpose of the study is to find out how some government programs help older adults. The study is sponsored by the U.S. Department of Health and Human Services, Administration for Community Living. I am calling to ask you a few follow-up questions about [SAMPLE MEMBER]. The questions should take less than 5 minutes to complete. We'll mail you a \$10 gift card within a few weeks of completing the survey. All of your answers will be kept strictly confidential and your participation is voluntary.

YES, BEGIN INTERVIEW	1	GO TO A1
NOT A GOOD TIME.....	2	GO TO CALLBACK
HUNG UP DURING INTRODUCTION.....	3	GO TO END
SUPERVISOR REVIEW	4	GO TO END
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	0	GO TO INTRO16
DON'T KNOW	d	GO TO INTRO16
REFUSED	r	GO TO INTRO16

INTRO16. Is there someone else who could answer the questions for [SAMPLE MEMBER NAME]?

YES, SPEAKING TO NEW PROXY	1	GO TO A1
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	4	GO TO END
SUPERVISOR REVIEW	5	GO TO END
REFUSED	r	GO TO END

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

FIRST NAME (STRING (NUM))

MIDDLE INITIAL/NAME (STRING (NUM))

LAST NAME (STRING (NUM))

INTRO17a. May I please have [your/her/his] telephone number?

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

DON'T KNOWd

REFUSEDf

HARD CHECK: IF AREA CODE LT 200; Area code must be greater than 200

INTRO17b. May I please have [your/her/his] address?

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

DON'T KNOWd

REFUSEDf

HARD CHECK: IF ZIP CODE NE 5 OR 9 DIGITS; The zip code must be 5 or 9 digits, please re-enter

PROGRAMMER BOX (NUM)

CATI: IF INTRO16 = 1, GO TO A1. IF INTRO16 = 2, GO TO CALLBACK.
IF INTRO16 = 3, GO TO END.

INTRO19. I am very sorry to hear that [she/he] passed away. GO TO END.

INTRO20. Do you or anyone there know how to reach [PROXY NAME]?

YES1 GO TO INTRO20a
NO0 GO TO END

INTRO20a. May I please have [his/her] telephone number?

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

DON'T KNOWd GO TO END
REFUSEDr GO TO END

HARD CHECK: IF AREA CODE LT 200; Area code must be greater than 200

INTRO20b. May I please have [his/her] address?

_____ (STRING (NUM))
FIRST NAME

_____ (STRING (NUM))
MIDDLE INITIAL/NAME

_____ (STRING (NUM))
LAST NAME

STREET 1

STREET 2

STREET 3

CITY

STATE

ZIP

DON'T KNOWd GO TO END
REFUSEDr GO TO END

HARD CHECK: IF ZIP CODE NE 5 OR 9 DIGITS ; The zip code must be 5 or 9 digits, please re-enter

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

_____ (SPECIFY)

A. FOLLOW-UP SURVEY

A1. During the past 12 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?

- YES1
- NO0 GO TO PROGRAMMER BO
- DON'T KNOWd GO TO PROGRAMMER BO
- REFUSEDr GO TO PROGRAMMER BO

IF BASELINE NONPARTICIPANT

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.

- (0-365)
- DAYS AGO (RANGE 0-365).....2
- WEEKS AGO (RANGE 1-52).....3
- MONTHS AGO (RANGE 1-12).....4
- DON'T KNOWd
- REFUSEDr

HARD CHECK: IF A2 GT 365; I want to be sure I recorded your answer correctly. Did you say [fill A2]? INTERVIEWER: ANSWER CANNOT EXCEED 365.

HARD CHECK: IF WEEKS GT 52; I want to be sure I recorded your answer correctly. Did you say [fill A2] weeks ago? INTERVIEWER: ANSWER CANNOT EXCEED 52 WEEKS AGO.

HARD CHECK: IF MONTHS GT 12; I want to be sure I recorded your answer correctly. Did you say [fill A2] months ago? INTERVIEWER: ANSWER CANNOT EXCEED 12 MONTHS AGO.

HARD CHECK: IF WEEKS = 0; I want to be sure I recorded your answer correctly. Did you say [fill A2] weeks ago? INTERVIEWER: ANSWER CANNOT BE LESS THAN 1 WEEK AGO.

HARD CHECK: IF MONTHS = 0; I want to be sure I recorded your answer correctly. Did you say [fill A2] months ago? INTERVIEWER: ANSWER CANNOT BE LESS THAN 1 MONTH AGO.

A3. Currently, how many days per week or per month [do you/does he/does she] eat at a senior community meal program?

____ DAYS (0-31)

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 A3] 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 A3] days per month? INTERVIEWER: ANSWER CANNOT EXCEED 31 DAYS PER MONTH.

A4. About how many of the past 12 months did you eat at a senior community meal program?

____ MONTHS (0-12)

DON'T KNOWd GO TO A5

REFUSEDr GO TO A5

A5. Would you say it was more than half the year or less than half the year?

MORE THAN HALF THE YEAR1 GO TO A6

LESS THAN HALF THE YEAR2 GO TO A7

DON'T KNOWd GO TO PROGRAMMER BO

REFUSEDr GO TO GO TO PROGRAMM

A6. Would you say it was between 6 and 9 months or more than 9 months?

BETWEEN 6 AND 9 MONTHS1 GO TO GO TO PROGRAMM

MORE THAN 9 MONTHS2 GO TO GO TO PROGRAMM

DON'T KNOWd GO TO GO TO PROGRAMM

REFUSEDr GO TO GO TO PROGRAMM

A7. Would you say it was between 3 and 6 months or less than 3 months?

- BETWEEN 6 AND 9 MONTHS1 GO TO GO TO PROGRAMM
- MORE THAN 9 MONTHS2 GO TO GO TO PROGRAMM
- DON'T KNOWd GO TO GO TO PROGRAMM
- REFUSEDr GO TO GO TO PROGRAMM

PROGRAMMER BOX A8

IF BASELINE CONGREGATE MEAL PARTICIPANT AND [NUMBER]
times per [WEEK/MONTH] FROM A3 > [NUMBER] times per
[WEEK/MONTH] FROM BASELINE SURVEY, GO TO A8a. IF [NUMBER]
times per [WEEK/MONTH] FROM A3 < [NUMBER] times per
[WEEK/MONTH] FROM BASELINE SURVEY, GO TO A8b.

A8a. Why [do you/does he/does she] eat at a senior community meal program more often than [you/he/she] did a year ago?

CODE ALL THAT APPLY

PEOPLE:

- HAVE NO ONE AT HOME TO EAT WITH1
- MADE FRIENDS AT MEAL SITE2

PLACE/PLACE-RELATED:

- GOT INVOLVED IN ACTIVITIES AT MEAL SITE3
- COSTS LESS TO EAT AT MEAL SITE THAN ELSEWHERE4
- THE MEAL SITE IS WARM AND INVITING5

MEALS:

- NO LONGER HAVE A PLACE TO PREPARE MEALS6
- PHYSICALLY DIFFICULT TO MAKE OWN MEALS7
- I LIKE THE KINDS OF FOODS THEY SERVE8
- OTHER (PLEASE SPECIFY).....99
- _____ (STRING 30)
- DON'T KNOWd
- REFUSEDr

A8b. Why [do you/does he/does she] eat at a senior community meal program less often than [you/he/she] did a year ago?

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 (PLEASE SPECIFY).....99

_____ (STRING 30)

DON'T KNOWd

REFUSEDr

PROGRAMMER BOX A9
 IF BASELINE CONGREGATE MEAL PARTICIPANT AND A1 = NO, GO
 TO A9. ELSE GO TO A10.

A9. Why [did you/did he/did she] stop eating at a senior community meal program?

CODE ALL THAT APPLY

PEOPLE:

HAVE FEW OR NO FRIENDS AT MEAL SITE 1

PLACE/PLACE-RELATED:

HAVE OTHER PLACES TO EAT 2

HAVEN'T GOTTEN INVOLVED OR NOT INTERESTED IN ACTIVITIES AT
 MEAL SITE 3

CAN'T AFFORD TO DONATE AT MEAL SITE 4

SOMETIMES DIFFICULT TO GET TO MEAL SITE 5

I FOUND THAT I DON'T ALWAYS LIKE THE KINDS OF FOODS THEY
 SERVE 6

MEALS:

STILL ABLE TO PREPARE OWN MEALS 7

OTHER (PLEASE SPECIFY) 99

_____ (STRING 30)

DON'T KNOW d

REFUSED r

A10. During the past 12 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

IF BASELINE NONPARTICIPANT

A11. How long ago did [you/he/she] first receive a home-delivered meal or meals-on-wheels?

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

____ (0-365)

- DAYS AGO (RANGE 0-365)..... 1
- WEEKS AGO (RANGE 1-52)..... 2
- MONTHS AGO (RANGE 1-12) 3
- DON'T KNOW d
- REFUSED r

HARD CHECK: IF DAYS GT 365; I want to be sure I recorded your answer correctly. Did you say [fill A11]? INTERVIEWER: ANSWER CANNOT EXCEED 365.

HARD CHECK: IF WEEKS GT 52; I want to be sure I recorded your answer correctly. Did you say [fill A11] weeks ago? INTERVIEWER: ANSWER CANNOT EXCEED 52 WEEKS AGO.

HARD CHECK: IF MONTHS GT 12; I want to be sure I recorded your answer correctly. Did you say [fill A11] months ago? INTERVIEWER: ANSWER CANNOT EXCEED 12 MONTHS AGO.

HARD CHECK: IF WEEKS = 0; I want to be sure I recorded your answer correctly. Did you say [fill A11] weeks ago? INTERVIEWER: ANSWER CANNOT BE LESS THAN 1 WEEK AGO.

HARD CHECK: IF MONTHS = 0; I want to be sure I recorded your answer correctly. Did you say [fill A11] months ago? INTERVIEWER: ANSWER CANNOT BE LESS THAN 1 MONTH AGO.

A12. Currently, how many lunches per week does the home-delivered meal program provide?

____ LUNCHES PER WEEK (1-7)

- DON'T KNOW d
- REFUSED r

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

A13. About how many of the past 12 months did you receive home-delivered meals or meals-on-wheels?

| | MONTHS (0-12)

DON'T KNOWd GO TO A14
REFUSEDr GO TO A14

A14. Would you say it was more than half the year or less than half the year?

MORE THAN HALF THE YEAR1 GO TO A15
LESS THAN HALF THE YEAR2 GO TO A16
DON'T KNOWd GO TO
REFUSEDr GO TO

A15. Would you say it was between 6 and 9 months or more than 9 months?

BETWEEN 6 AND 9 MONTHS1 GO TO PROGRAMMER BO
MORE THAN 9 MONTHS2 GO TO GO TO PROGRAMM
DON'T KNOWd GO TO GO TO PROGRAMM
REFUSEDr GO TO GO TO PROGRAMM

A16. Would you say it was between 3 and 6 months or less than 3 months?

BETWEEN 6 AND 9 MONTHS1 GO TO GO TO PROGRAMM
MORE THAN 9 MONTHS2 GO TO GO TO PROGRAMM
DON'T KNOWd GO TO GO TO PROGRAMM
REFUSEDr GO TO GO TO PROGRAMM

PROGRAMMER BOX A17
IF A12 < 5, ASK A17. ELSE GO TO B1.

A17. [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

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 gift card. According to our records we have...

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

NAME AND ADDRESS IS CORRECT1 GO TO THANK YOU

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

HARD CHECK: IF ZIP CODE NE 5 OR 9 DIGITS; The zip code must be 5 or 9 digits, please re-enter

THANK YOU. Thank you very much for your help with this important study.

END. Thank you for your time.