

EFNEP

3rd to 5th Grade

Survey

Facilitation Protocol

Expanded Food and Nutrition Education Program (EFNEP)

May, 2018

Survey and Protocol Developed by the EFNEP Youth Evaluation Committee:

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General Directions

BEFORE ADMINISTERING THE QUESTIONNAIRE:

- ✓ Print copies of the survey in color, since the pictures are most identifiable in color. *If not possible, print in greyscale on a high-quality printer.*
- ✓ If your program recommends it, pre-fill the pre/post and date sections on each copy before distributing to participants.
- ✓ Bring a common packaged food item with a Nutrition Facts Label to show youth for Question 8. This can be an actual package, a scanned copy, or the scanned package included at the end of this guide.

WHILE ADMINISTERING THE QUESTIONNAIRE:

- ✓ Use the script each time you administer the survey:
 - **Bolded text on the left is what to say to participants, and includes the survey items, their response options, and standardized probes.**
 - Shaded boxes on the right are possible questions to address – do not read these unless needed.
 - ***Read each statement aloud, followed by its answer choices, and then the prompts provided below each item in bold.***
 - Read each item carefully, word for word, loudly, clearly, and at a slow pace.
- ✓ Give youth time to mark their answer to each question before moving on.
- ✓ Answer any youth questions using the responses provided on the right side of the page, or address the question as best you can if not addressed in the guide.

Script for Administering the Questionnaire

A. Before passing out the surveys, introduce the process by saying:

Today you will be answering some questions about what you eat and drink and how active you are. There are no right or wrong answers; I just need you to be as honest as possible and answer the questions based on what you really do. The answers you give will be kept private. This is not a test, and your answers will not affect your grade.

We will work through this form together as a group. Please do not start until I tell you, and do not skip ahead. I will read each question and the answer choices out loud. Check one answer for each question. Usually, the first answer you think of is the best. You can ask me questions at any time by raising your hand.

B. Pass out the surveys and pencils.

C. Per your program's procedures, have youth put their grade and name/initials/ID number into the Youth ID section at the top of the survey, as well as pre/post and date sections if not already done.

Questions

As you answer the first six (6) questions, think about what you ate and drank during the past week. This means thinking about the past 7 days, from last (name of day, 7 days ago) to today. Include what you have eaten so far today. If you cannot remember, give your best estimate of what you usually do. The pictures are examples of the types of foods we are asking about.

Possible Youth Participant Questions for Q1-Q6

Q: What do you mean by “the last week”?

A: The last 7 days.

Q: What if I spend time at more than one house and it is different?

Q: What if it is different on the weekend?

A: Answer what you did in the past 7 days.

Let's begin.

1. In the past week, I drank fruit-flavored drinks or sports drinks...

- **Never in the past week**
- **1-3 days in the past week**
- **4-6 days in the past week**
- **About once a day in the past week**
- **2 or more times a day in the past week**

Do not include 100% juice, like orange juice or apple juice, and do not include soda or pop.

Possible Youth Participant Questions

Q: What are fruit-flavored drinks?

A: Drinks like Capri-Sun, Snapple, Sunny-D, Kool-Aid, Fruit Punch, lemonade, Mondo, Jammers, Sweet Tea, Tang.

Q: What are sports drinks?

A: Gatorade, Powerade

Q: Should I include vitamin water? Flavored water?

A: Yes, if they are sweetened.

Q: Should I include juice?

A: Include fruit-flavored drinks, but not juices like orange juice and apple juice.

Q: What if I drink something that is not pictured? Do I only respond about the drinks in the picture?

A: Include any fruit flavored drinks or sports drinks, pictured or not.

2. In the past week, I drank soda or pop...

- ☐ **Never in the past week**
- ☐ **1-3 days in the past week**
- ☐ **4-6 days in the past week**
- ☐ **About once a day in the past week**
- ☐ **2 or more times a day in the past week**

Do not include diet soda.

Possible Youth Participant Questions

If needed, examples include: Coke, Sprite, Fanta, Pepsi, Root Beer, Dr. Pepper, Mountain Dew, Orange Crush, Sierra Mist, Ginger Ale.

Q: I only drink diet soda. Do I count it?

A: No

Q: What about energy drinks like Red Bull or Monster?

A: Yes, include energy drinks like these.

Q: I drink soda every day, sometimes once and other days twice. How do I answer?

A: Answer whichever way you did most often in the past week. If most of the days you drank only one, choose about once a day. If most of the days you drank 2, answer 2 or more times a day.

3. In the past week, I ate vegetables...

- ☐ **Never**
- ☐ **1-3 days**
- ☐ **4-6 days**
- ☐ **About once a day**
- ☐ **2 or more times a day**

Think about the vegetables you ate in the past week, such as at school, after school, practice, or at home. Include all vegetables, fresh, canned, and frozen.

Possible Youth Participant Questions

Q: Do vegetable juices count, like Carrot, Tomato, or V-8 Juice?

A: Yes

Q: Do potatoes count?

A: Yes, potatoes such as baked and mashed potatoes count. Do not count French Fries or potato chips. Do include sweet potatoes.

Q: Are beans (pinto, black, kidney, lentil, refried) counted as a vegetable?

A: Yes, these count as vegetables.

Now think about what you ate as a snack in the past week - at school, after school, practice, at home, or elsewhere.

4. In the past week, I ate vegetables as a snack...

- ☐ Never
- ☐ 1-3 days
- ☐ 4-6 days
- ☐ About once a day
- ☐ 2 or more times a day

Include all vegetables - fresh, canned, or frozen.

Possible Youth Participant Questions

Q: What counts as a snack?

A: Anything you eat that is not part of breakfast, lunch, supper/dinner, or your main meals.

Please turn the page to number 5.

5. In the past week, I ate fruit as a snack...

- ☐ **Never**
- ☐ **1-3 days**
- ☐ **4-6 days**
- ☐ **About once a day**
- ☐ **2 or more times a day**

**Include fresh fruit (whole or cut-up),
canned fruit, frozen fruit, and dried fruit.**

Possible Youth Participant Questions

Q: Can I include juice?

A: No, do not include juice.

Q: What about fruit roll-ups, fruit gummies, or “fruit snacks”?

A: Do not include these, just real fruit.

Q: I put fruit in my smoothie – do I count it?

A? Yes

Now think about what you ate for lunch in the past week and how often it included a vegetable. Include lunch at school, home, or anywhere else, and include the weekend.

6. In the past week, I ate vegetables at lunch...

- ☐ **Never**
- ☐ **1-3 days**
- ☐ **4-6 days**
- ☐ **Every day**

Include all vegetables - fresh, canned, or frozen.

Possible Youth Participant Questions

Q: I brought my lunch to school. Do I include that?

A: Yes.

7. When I am offered a new food, I will try it...

- ☐ **Never or almost never**
- ☐ **Sometimes**
- ☐ **Most of the time**
- ☐ **Always or almost always**

Include any new food you are offered by your parents or other people you know.

Possible Youth Participant Questions

Q: What about a new ingredient in a dish I have had before, or a food I have eaten before but cooked or prepared in a new way?

A: Yes, include these – each is still a new food.

Q: What about the snack we just tried in this class?

A: Include it if you had not tried it before.

Q: Does it have to be a healthy new food?

A: No, any food that you have not tried before.

Q: What about in after-school or other programs, or at a relatives' – does that count?

A: Yes.

As you read question 8, show youth the Nutrition Facts Label that you brought. If you did not bring one, show youth the one included at the end of this guide.

This is a Nutrition Facts label, which is on the side or back of most packages.

8. I read Nutrition Facts labels...

- ☐ **Never or almost never**
- ☐ **Sometimes**
- ☐ **Most of the time**
- ☐ **Always or almost always**

Possible Youth Participant Questions

Q: I don't know what that is/I have not seen one of those before.

A: If you don't know what it is, answer never or almost never.

Q: I read the words on the front of the box, does that count?

A: No.

Q: I read the ingredient list (e.g., because of allergies), does that count?

A: No.

Q: I read it, but I don't know what it means, does that count?

A: Yes. If you read them, answer how often you do so.

9. I wash fruits and vegetables before I eat them...

- ☐ **Never or almost never**
- ☐ **Sometimes**
- ☐ **Most of the time**
- ☐ **Always or almost always**
- ☐ **Someone else does this for me**

Please turn the page to number 10.

10. When I make myself something to eat, I put cold foods back in the refrigerator right away...

- ☐ **Never or almost never**
- ☐ **Sometimes**
- ☐ **Most of the time**
- ☐ **Always or almost always**
- ☐ **Someone else does this for me**

Right away means when you are finished using it, or within two hours of taking it out of the fridge.

Possible Youth Participant Questions

Q: I don't use soap when I wash them/ I just rinse them in water. Does that count?

A: Yes.

Q: What about fruit I peel, like bananas?

A: Answer how often you wash fruits and vegetables before eating them, in general.

Possible Youth Participant Questions

Q: What do you mean by "cold foods"?

A: Foods such as milk or cheese that need to be stored in the refrigerator.

Q: What if I make myself something to eat but I don't use food from the refrigerator?

A: Only answer about times you use food from the refrigerator.

11. Before I eat or touch food, I wash my hands with warm water and soap for at least 20 seconds...

- ☐ **Never or almost never**
- ☐ **Sometimes**
- ☐ **Most of the time**
- ☐ **Always or almost always**

Possible Youth Participant Questions

Q: What about when I wash my hands using hand sanitizer, like when we go to lunch right after recess?

A: No, only include times you wash your hands in the way written.

Q: What if I wash my hands with cold water or I don't use soap?

A: No, only include times you wash your hands in the way written.

12. In the past week, I did physical activities...

- ☐ **Not at all**
- ☐ **1-2 days**
- ☐ **3-4 days (or some days)**
- ☐ **5-6 days (or most days)**
- ☐ **7 days (every day)**

Think about the physical activities you did in the past week. Include all types, such as walking, running, dancing, and playing active games with others.

Possible Youth Participant Questions

Q: What are "physical activities"?

A: Any time you are actively moving your body.

13. In the past week, for how long did you usually do physical activities?

- ☐ **Less than 15 minutes a day**
- ☐ **About 15 minutes a day**
- ☐ **About 30 minutes a day (or half an hour)**
- ☐ **About an hour a day**
- ☐ **More than an hour a day**

Think about how long you usually did the physical activities you answered about in the previous question.

Possible Youth Participant Questions

Q: I don't know how long I did physical activities.

A: Think about how many minutes PE and recess are, and how much of those you are usually active. What about in after-school or before school? How long does it take you to walk places you go? How long is sports practice?

And here is our last question for today:

14. In the past week, when I was not doing homework, I used a computer, TV, smartphone, tablet, or played video games...

- ☐ **Less than 1 hour a day**
- ☐ **1-2 hours a day**
- ☐ **3-4 hours a day**
- ☐ **5-6 hours a day**
- ☐ **7 or more hours a day**

Possible Youth Participant Questions

Q: It's summertime, I don't have homework.

A: Answer how long you spent on these devices or similar devices with screens.

Q: What about at school for schoolwork?

A: Do not include schoolwork, at home or elsewhere.

Thank you for telling us about your food and physical activities!

BETTER IF USED BY
18APR03 BUBU231603A

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Arrows To Left And Right
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Nutrition Highlights

Calories	Saturated Fat	Sodium	Sugars	Fiber	Calcium
100	0g	190mg	1g	3g	100mg
5%	0%	8%	1%	11%	10%

Amount and % Daily Value per serving

Nutrition Highlights

This is the amount in one serving.
This is the percent of the Daily Value
per serving. Daily Values are
recommended amounts to consume
each day (see Nutrition Facts).
Sugar does not have a Daily Value.

Cheerios®

Toasted Whole Grain Oat Cereal



Enlarged to
Show Detail

Serving
Suggestion

Three grams of soluble fiber daily from whole grain oat foods, like Cheerios cereal, in a diet low in saturated fat and cholesterol, may reduce the risk of heart disease. Cheerios cereal provides 1 gram per serving.

NET WT 14 OZ (396g)

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Nutrition Facts

Serving Size 1 cup (28g)
Children Under 4 - ¼ cup (21g)
Servings Per Container about 14
Children Under 4 - about 19

Amount Per Serving	Cheerios	with skim milk	Cereal for Children Under 4
Calories	100	140	80
Calories from Fat	15	20	10
% Daily Value**			
Total Fat 2g*	3%	3%	1.5g
Saturated Fat 0g	0%	3%	0g
Trans Fat 0g			0g
Polyunsaturated Fat 0.5g			0g
Monounsaturated Fat 0.5g			0g
Cholesterol 0mg	0%	1%	0mg
Sodium 190mg	8%	10%	140mg
Potassium 170mg	5%	11%	130mg
Total Carbohydrate 20g	7%	9%	15g
Dietary Fiber 3g	11%	11%	2g
Soluble Fiber 1g			0g
Sugars 1g			1g
Other Carbohydrate 16g			12g
Protein 3g			2g

		% Daily Value
Protein	-	9%
Vitamin A	10%	15%
Vitamin C	10%	10%
Calcium	10%	25%
Iron	45%	45%
Vitamin D	10%	25%
Thiamin	25%	30%
Riboflavin	25%	35%
Niacin	25%	25%
Vitamin B ₆	25%	25%
Folic Acid	50%	50%
Vitamin B ₁₂	25%	35%
Phosphorus	10%	25%
Magnesium	10%	10%
Zinc	25%	30%
Copper	2%	2%

*Amount in cereal. A serving of cereal plus skim milk provides 2g total fat (0.5g saturated fat, 1g monounsaturated fat, less than 5mg cholesterol, 250mg sodium, 370mg potassium, 25g total carbohydrate (7g sugars) and 7g protein).

**Percent Daily Values are based on a diet of other people's secretaries. Your daily values may be higher or lower depending on your calorie needs.

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	370g
Dietary Fiber		25g	30g

INGREDIENTS: WHOLE GRAIN OATS (INCLUDES THE OAT BRAN), MODIFIED CORN STARCH, SUGAR, SALT, TRICALCIUM PHOSPHATE, OAT FIBER, WHEAT STARCH, VITAMIN E (NATURAL), TOCOPHEROLS ADDED TO PRESERVE FRESHNESS.

VITAMINS AND MINERALS: CALCIUM CARBONATE, IRON AND ZINC (MINERAL NUTRIENTS), VITAMIN C (ASCORBIC ACID), A VITAMIN (RETINOL PALMITATE), VITAMIN B₆ (PYRIDOXINE HYDROCHLORIDE), VITAMIN B₁₂ (CYANOCOBALAMIN), VITAMIN B₁ (THIAMIN MONONITRATE), VITAMIN A (PALMITATE), AND VITAMIN E (TOLUENE).

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