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Supplemental Table 1. Instrument recoding guidelines for eat more than one kind of fruit (MT1c)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| 24-hour recall  | Cups, open-ended text | 1 = Yes, ate more than 1 kind of fruit during 24-hour recall 0 = No, did not eat more than 1 kind of fruit during 24-hour recall  |
| Do you eat more than one kind of fruit each day? (with image)*Body Quest Parent Survey* | NoYes, sometimesYes, oftenYes, always | 1 = Yes, always/Yes, often0 = Yes, sometimes/No |
| Do you eat more than one kind of fruit each day?*WebNEERS* | N/A(=0) Never (=1) Seldom(=2) Sometimes(=3) Most times (=4) Always (=5) | 1 = Always/Most times0 = Sometimes/Seldom/Never/NA |
| Do you eat more than one kind of fruit each day?*Food Stamp Food Behavior Checklist* | NoYes, sometimesYes, oftenYes, always | 1 = Yes, always/Yes, often0 = Yes, sometimes/No |
| I eat more than one kind of fruit.*Youth Behavior Survey, Grades 3-5 and 6-12**Adult Behavior Survey*  | 0 days1-3 days4-6 days7 days | 1 = 4-6 days/7 days0 = 0 days/1-3 days |
| I (and the people in my home) eat more than one kind of fruit.*Recipe for Success Survey* | NeverSeldomSometimesMost timesAlways | 1 = Always/Often0 = Sometimes/Rarely/Never |
| My child now eats more than one kind of fruit each day.*Parent Survey, Alabama Department of Public Health* | YesNo | 1 = Yes0 = No |
| I eat more than one kind of fruit. *Homestyles*  | 0 days 1-3 days4-6 days 7 days  | 1 = 7 days/4-6 days0 = 1-3 days/0 days |
| My child eats more than one kind of fruit. *MyPlate for my Family* | 0 days 1-3 days4-6 days 7 days  | 1 = 7 days/4-6 days0 = 1-3 days/0 days |
| My child now eats more than one kind of fruit each day.*Alabama Department of Public Health Parent Survey* | NeverSome daysMost daysEvery day. | 1 = Every day/Most days0 = Some days/Never |

Supplemental Table 2. Instrument recoding guidelines for eat more than one kind of vegetable (MT1d)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| 24-hour recall  | Cups, open-ended text | 1 = Yes, ate more than 1 kind of vegetable during 24-hour recall 0 = No, did not eat more than 1 kind of vegetable during 24-hour recall  |
| Do you eat more than one kind of vegetable each day?*WebNEERS* | N/ANever Seldom Sometimes Most times Always | 1 = Always/Most times0 = Sometimes/Seldom/Never/NA |
| Do you eat more than one kind of vegetable each day?*Food Stamp Food Behavior Checklist* | NoYes, sometimesYes, oftenYes, always | 1 = Yes, always/Yes, often0 = Yes, sometimes/No |
| How often do you eat more than one kind of vegetable a day? *Live Well Alabama* | Never RarelySometimes OftenAlways | 1 = Always/Often0 = Sometimes/Rarely/Never |
| How often do you eat more than one KIND of vegetable?*POC (Youth), Steps for Health, North Carolina State University*  | NeverSometimesAlways | 1 = Always0 = Sometimes/Never |
| I eat more than one kind of vegetable.*Youth Behavior Survey, Grades 3-5*  | NeverSome daysMost days Every day | 1 = Every day/Most days0 = Some days/Never |
| I eat more than one kind of vegetable.*Youth Behavior Survey, Grades 6-12**Adult Behavior Survey*  | 0 days 1-3 days 4-6 days 7 days  | 1 = 7 days/4-6 days0 = 1-3 days/0 days |
| My child now eats more than one kind of vegetable eat day. *Alabama Department of Public Health Parent Survey* | No Yes | 1 = Yes0 = No |
| I eat more than one kind of vegetable. *Homestyles*  | 0 days 1-3 days 4-6 days 7 days  | 1 = 7 days/4-6 days0 = 1-3 days/0 days |
| My child eats more than one kind of vegetable. *MyPlate for my Family* | 0 days 1-3 days 4-6 days 7 days  | 1 = 7 days/4-6 days0 = 1-3 days/0 days |
| I (and the people in my home) eat more than one kind of vegetable.*Recipe for Success Survey* | Never Seldom Sometimes Most times Always | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| How often do you eat more than one KIND of vegetable?*WEALTH - Adult* | NeverSeldomSometimesMost of the timeAlways  | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |

Supplemental Table 3. Instrument recoding guidelines for drinking water frequently (MT1g)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| Yesterday, did you drink any water, such as from a bottle, a glass, or a water fountain?*Body Quest* | No, I did not drink any water yesterday.Yes, I drank water 1 time yesterday. Yes, I drank water 2 times yesterday.Yes, I drank water 3 times yesterday.Yes, I drank water 4 times yesterday. Yes, I drank water 5 or more times yesterday. | 1 = Yes, I drank water 1-5 or more times yesterday.0 = No, I did not drink water yesterday. |
| How often do you typically drink a bottle or a glass of water? (Count tap, bottled and sparkling water).*Body Quest Parent* | Not at allOnce a week or lessMore than once a weekOnce a dayMore than once a day | 1 = More than once a day/Once a day0 = More than once a week/Once a week or less/Not at all |
| How often did you drink these beverages in the past week? Unflavored bottled water, tap water, water from a drinking fountain or other unflavored water*Beverage Screener Questionnaire* | Never or less than 1 per week 1 per week 2-4 per week 5-6 per week 1 per day 2-3 per day4+ per day | 1 = 1-4+ per day0 = 5-1 per week/Never or less than 1 per week |
| How often do you typically drink a bottle or glass of water? (Count tap, bottled and sparkling water.)*Cooking Matters (adult, teen)* | Not at all Once a week or less More than once a week Once a day More than once a day | 1 = More than once a day/once a day0 = More than once a week/Once a week or less/Not at all |
| How often do you drink water (count tap, bottled, or sparking water)?*EFNEP* | Never Once in a while Once each day Twice each day 3 or more times a day | 1 = 3 or more times a day/Twice each day0 = Once/Once in a while/Never |
| How often do you typically drink a bottle or glass of water?*WebNEERS* | Don't do1-2 times a day3-4 times a day5 times or more a day | 1 = 1-5 times or more a day0 = Don't do |
| I (and the people in my home) drink plain water.*Recipe for Success Survey* | Never Seldom Sometimes Most times Always | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| Yesterday, did you drink any water, such as from a glass, a bottle, or a water fountain?*Youth Nutrition and Physical Activity Questionnaire* | No Yes 1 time yesterday Yes 2 times yesterday Yes 3 times yesterday Yes 4 times yesterday Yes 5 or more times yesterday | 1 = 1-5 or more times yesterday0 = No |
| How often do typically…drink water?*University of South Carolina* | Not at all Once a week or less More than once a week Once a day More than once a day | 1 = More than once a day/Once a day0 = More than once a week/Once a week or less/Not at all |
| How often do you drink plain water?*POC (Youth), Steps for Health, North Carolina State University* | NeverSometimesAlways | 1 = Always0 = Sometimes/Never |
| How often do you drink plain water?*Alabama Department of Public Health – adults and youth* | None2 or 3 times per weekEvery day  | 1 = Every day0 = 2 or 3 times a week/None |
| I drink plain water.*Homestyles**MyPlate for my Family* | 0 days1-3 days4-6 days7 days | 1 = 7 days/4-6 days0 = 1-3 days/0 days |
| How often do you drink more plain water?*WEALTH (adult)* | NeversSeldomSometimesMost of the timeAlways | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |
| I drink plain water.*Youth Behavior Survey, Grades 6-12**Adult Behavior Survey*  | 0 days 1-3 days 4-6 days 7 days. | 1 = 7 days/4-6 days0 = 1-3 days/0 days |

Supplemental Table 4. Instrument recoding guidelines for drinking fewer sugar-sweetened beverages (MT1h)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| 1: Yesterday, did you drink any punch, sports drinks, or other fruit-flavored drinks? Do not count 100% fruit juice or diet drinks. 2: Yesterday, did you drink any regular (not diet) sodas or soft drinks?*Body Quest* | 1: No, I did not drink any of these drinks yesterday. Yes, I drank one of these drinks 1 time yesterday. Yes, I drank one of these drinks 2 times yesterday.Yes, I drank one of these drinks 3 times yesterday.Yes, I drank one of these drinks 4 times yesterday. Yes, I drank one of these drinks 5 or more times yesterday. 2: No, I did not drink any of these regular (not diet) sodas or soft drinks yesterday. Yes, I drank regular (not diet) sodas or soft drinks 1 time yesterday. Yes, I drank regular (not diet) sodas or soft drinks 2 times yesterday.Yes, I drank regular (not diet) sodas or soft drinks 3 times yesterday.Yes, I drank regular (not diet) sodas or soft drinks 4 times yesterday.Yes, I drank regular (not diet) sodas or soft drinks 5 or more times yesterday. | 1 = No0 = Yes, I drank one of these drinks yesterday…5 or more times yesterday ORYes, I drank regular (not diet) sodas yesterday…5 or more times yesterday. |
| How often do you drink:* Fruit drinks (such as Snapple, flavored teas, Capri Sun and Kool-Aid)
* Sport drinks (such as Gatorade or PowerAde); these drinks usually do not have caffeine
* Flavored waters such as Propel or vitamin waters; these drinks usually do not have caffeine
* Diet soda or pop (include all kinds such as Diet Pepsi, Pepsi One, Diet Coke, Diet 7-Up)
* Regular soda or pop (include all kinds such as Coke, Pepsi, 7-Up, Sprite, root beer)
* Energy drinks (such as Rockstar, Red Bull, Monster and Full Throttle);

How often do you typically drink:* 100% fruit juices like orange juice, apple juice or grape juice? (Do not count punch, Kool-aid, sports drinks or other fruit-flavored drinks.)
* A can, bottle, or glass of regular soda or pop, sports drink, or energy drink? (Do not count diet or zero calorie drinks.)

*Beverage Screener Questionnaire* | Never or less than 1 per week 1 per week 2-4 per week 5-6 per week 1 per day 2-3 per day4+ per day | 1 = Sum of times drinking: Fruit drinks, Sports drinks, Flavored waters, Regular soda, and Energy drinks is Never/Less than 1 per week/1 per week0 = Sum of times drinking: Fruit drinks, Sports drinks, Flavored water, Regular soda, and Energy drinks is 2-6 per week/1-4+ per day |
| How often do you typically drink a can, bottle, or glass of regular soda or pop, sports drink, or energy drink? (Do not count diet or zero calorie drinks.)*Cooking Matters (adult, teen)* | Not at all Once a week or less More than once a week Once a day More than once a day | 1 = Not at all/Once a week or less0 = More than once a week/Once a day/More than once a day |
| Yesterday, how many times did you drink sweetened drinks like soda, fruit-flavored drinks, sports drinks, energy drinks and vitamin water? Do not include 100% fruit juice.How often do you drink regular (not diet) soda?*EFNEP* | None 1 time 2 times 3 times 4 or more times | 1 = None0 = 1-4 or more times |
| How often do you drink regular (not diet) soda?How often do you drink sugar-sweetened beverages?*WebNEERS* | Don't do Seldom Sometimes Most of the time Almost always | 1 = Don't do0 = Seldom/Sometimes/Most of the time/Almost always |
| During the past 7 days, how many times did you drink a can, bottle, or glass of soda, such as Coke, Pepsi or Sprite? (Do not count diet soda)*HealthMPowers* | I never drink sodaI did not drink soda during the past 7 days1 to 3 times during past 7 days4 to 6 times during past 7 days1 time per day; 2 times per day3 times per day4 or more times per day | 1 = I never drink soda/I did not drink soda during the past 7 days0 = 1-6 times during the past 7 days/1-4 or more times per day |
| Yesterday, did you drink any punch, sports drinks, or other fruit flavored drinks? (Do not count 100% fruit juice or diet drinks)*Mississippi State University Extension Service* | No, I didn't drink any of these drinks yesterday. Yes, I drank one of these drinks 1 time yesterday. Yes, I drank one of these drinks 2 times yesterday. Yes, I drank one of these drinks 3 or more times yesterday. | 1 = No, I didn't drink any of these drinks yesterday.0 = Yes, I drank one of these drinks 1-3 or more times yesterday. |
| How often do you typically drink ... regular soda?*University of South Carolina* | Not at all Once a week or less More than once a week Once a day More than once a day | 1 = Not at all/Once a week or less0 = More than once a week/Once a day/More than once day |
| How often do you drink sugary beverages?*POC (Youth), Steps for Health, North Carolina State University* | NeverSometimes Always | 1 = Never0 = Sometimes/Always |
| Yesterday, did you drink any punch, sports drinks or other fruit-flavored drinks? Do not count 100% fruit juice or diet drinks.*Youth Nutrition and Physical Activity Questionnaire* | No, I didn’t drink any punch, sports drinks, or other fruit-flavored drinks yesterday.Yes, I drank punch, sports drinks, or other fruit-flavored drinks 1 time yesterday. Yes, I drank punch, sports drinks, or other fruit-flavored drinks 2 times yesterday. Yes, I drank punch, sports drinks, or other fruit-flavored drinks 3 or more times yesterday. | 1 = No, I didn't drink any punch, sports drinks, or other fruit-flavored drinks (not diet, not 100% juice) yesterday.0 = Yes, I drank punch, sports drinks, or other fruit-flavored drinks (not diet, not 100% juice) 1-3 or more times yesterday. |
| How often do you drink soda or tea?*Alabama Department of Public Health (adults and youth)* | None2 or 3 times a weekEvery day | 1 = None0 = 2 or 3 times a week/Every day |
| I drink sugary beverages (like soda, fruit, drinks, or sports drinks).*Youth Behavior Survey, Grades 3-5, 6-12* | Never Some days Most days Every day | 1 = Never0 = Some days/Most days/Every day |
| I drink sugary beverages (like soda, fruit, drinks, or sports drinks).*Adult Behavior Survey* | 0 days 1-3 days 4-6 days 7 days | 1 = 0 days0 = 1-7 days |
| Yesterday, did you drink any regular (not diet) sodas or soft drinks?*Auburn University* | No I didn't drink any regular (not diet) sodas or soft drinks Yes 1 time Yes 2 times Yes 3 or more times | 1 = No, I didn't drink any regular sodas or soft drinks0 = Yes, 1-3 or more times |
| How often do you typically drink any punch, Kool-Aid, sports drink, fruit flavored drinks?" and "How often do you typically drink any regular soft drinks?*University of South Carolina* | Not at all Once a week More than once a week Once a day More than once a day | 1 = Not at all/Once a week0 = More than once a week/Once a day/More than once a day |
| How often do you drink fewer sugary beverages?*WEALTH (adult)* | Always Most of the time Sometimes Seldom Never | 1= Never/Seldom0 = Sometimes/Most of the time/Always |
| I drink sugary beverages (like soda, fruit, drinks, or sports drinks).*Homestyles**MyPlate for my Family*  | 0 days 1-3 days 4-6 days 7 days | 1 = 0 days0 = 1-7 days |
| How often do you drink regular (not diet) soda, sweet tea, sugar-sweetened fruit drinks (such as lemonade), sports drinks or punch?*University of Georgia* | Almost never1-3 days each week4-6 days each weekOnce each day2 or more times each day | 1 = Almost never0 = 1-3 days each week/4-6 days each week/Once each day/2 or more times each day |

Supplemental Table 5. Instrument recoding guidelines for low-fat or fat-free milk (MT1i)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| What type of milk do you drink most of the time? Choose only one.*Body Quest* | Regular (whole) milk2% milk1% (low-fat) or fat-free (skim/non-fat) milkSoy milk, almond milk, rice milk, or other milkI do not drink milk. I do not know. | 1 = 1% (low-fat) or fat-free (skim/non-fat) milk0 = Regular (whole) milk/2% milk[blank] = soy milk, almond milk, rice milk, or other milk/I do not drink milk/I do not know. |
| How often do you drink 1% or nonfat milk (sometimes called skim, fat-free, or low-fat milk; includes white and chocolate)? *Beverage Screener Questionnaire* | Never or less than 1 per week; 1 per week 2-4 per week 5-6 per week 1 per day 2-3 per day4+ per day | 1 = 1-4+ per day/5-6 per week0 = Never or less than 1 per week/1-4 per week |
| When you have milk, how often do you choose low-fat milk (skim or 1%)?*Cooking Matters (adult, teen)* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Always/Often0 = Sometimes/Rarely/Never/Does not apply |
| Yesterday, how many times did you drink nonfat or 1% low-fat milk? Include low-fat chocolate or flavored milk and low-fat milk on cereal.*EFNEP* | None1 time2 times3 times4 or more times | 1 = 1-4 or more times0 = None |
| How often do you drink low-fat milk (skim or 1%)?*WebNEERS* | N/ANever SeldomSometimesMost times Always  | 1 = Always/most times0 = Sometimes/Seldom/Never/NA |
| I (and the people in my home) drink low-fat or fat-free milk (included with cereal,) milk products (e.g. yogurt or cheese) or fortified soy milk)*Recipe for Success Survey* | NeverSeldomSometimesMost timesAlways | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| How often do you drink low-fat or fat-free milk?*North Carolina State University, Steps for Health, POC (youth)* | AlwaysSometimesNever | 1 = Always0 = Sometimes/Never |
| What milk do you drink?*Alabama Department of Public Health* | Whole milkLow fatNone | 1 = Low fat0 = Whole milk/None |
| I drink low-fat (1%) or non-fat milk (including soy milk or almond milk).*Youth Behavior Survey, Grades 3-5 and Grades 6-12**Adult Behavior Survey*  | 0 days1-3 days4-6 days7 days | 1 = 4-7 days0 = 3-0 days |
| What milk do you drink at home?*Alabama Department of Public Health (youth)* | Whole milkLow fat (school milk)None | 1 = Low fat (school milk)0 = Whole milk/None |
| How often do you drink low-fat or fat-free milk products?*WEALTH (adults)* | AlwaysMost of the timeSometimesSeldomNever | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |
| When you have milk, how often do you choose low-fat milk (skim or 1%)? *Live Well Alabama* | NeverRarelySometimesOftenAlways | 1 = Always/Often0 = Sometimes/Rarely/Never |
| I drink low-fat (1%) or non-fat milk (including soy milk or almond milk).*HomeStyles**MyPlate for my Family*  | 0 days1-3 days4-6 days7 days | 1 = 4-7 days0 = 3-0 days |

Supplemental Table 6. Instrument recoding guidelines for cups of fruit (MT1l)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I (and the people in my home) consume \_\_\_\_\_ cups of fruits per day (per person)*Recipe for Success Survey* | ZeroOneTwoThreeFour | Mean |
| In the past week, how many cups of fruit did you eat each day? This includes fresh, frozen, canned and 100% juice.*Live Well Alabama* | None 1 cup 2 cups 3 cups 4+ cups | Mean |
| On average, how many total cups (use your fist as a measure of a cup) of fruit do you eat each day? Count all that you eat whether in a combination dish or by itself.*Steps for Health, North Carolina State University* | 0 1/2 1 1 1/2 2 2 1/2 3 3 1/2 4 or more | Mean |
| How many total cups of FRUITS do you typically eat in a day?*University of South Carolina* | 1 cup 2 cups 3 or more cups I don't usually eat fruit I don't know | Mean of response categories with recode 4 to 0 |
| *24 Hour Recall* | Cups of fruits | Mean  |

Supplemental Table 7. Instrument recoding guidelines for cups of vegetables (MT1m)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I (and the people in my home) consume \_\_\_\_\_ cups of vegetables per day. *Recipe for Success Survey* | ZeroOneTwoThreeFour | Mean |
| In the past week, how many cups of vegetables did you eat each day? This includes fresh, frozen, canned and 100% juice. *Live Well Alabama* | None 1 cup 2 cups 3 cups 4+ cups | Mean |
| On average, how many total cups (use your fist as a measure of a cup) of vegetables do you eat each day? Count all that you eat whether in a combination dish or by itself.*Steps for Health, North Carolina State University* | 0 1/2 1 1 1/2 2 2 1/2 3 3 1/2 4 or more | Mean |
| How many VEGETABLES do you typically eat in a day?*University of South Carolina* | 1 Cup 2 Cups 3 or more cups I don't usually eat vegetables I don't know | Mean of response categories with recode 4 to 0 |
| *24 Hour Recall* | Cups of vegetables | Mean  |

Supplemental Table 8. Instrument recoding guidelines for choose healthy foods for my family on a budget (MT2a)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I choose healthy foods for my family.*Body Quest Parent* | No Sometimes Often Very Often Almost Always | 1 = Almost Always/Very Often/Often0 = Sometimes/No |
| How confident are you that you can buy healthy foods for your family on a budget? *Cooking Matters (adults)* | Not at all confident Not very confident Neutral Somewhat confident Very confident Does not apply | 1 = Very confident0 = Somewhat confident/Neutral/Not very confident/Not at all confident/Does not apply |
| When deciding what to feed your family, how often do you think about healthy food choices?*WebNEERS* | NeverRarely Sometimes Often Always | 1 = Always/Often0 = Sometimes/Rarely/Never |
| I choose healthy food for my family on a budget.*EFNEP Checklist* | Never Seldom Sometimes Most times Always | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| I can choose and buy healthy foods on a tight budget.*Alabama Department of Public Health (adults)* | True False | 1 = True0 = False |
| *Do you think about healthy food choices when deciding what to feed your family?**Food Stamp Food Behavior Checklist* | Do not do Seldom Sometimes Most of the time Almost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Do not do |
| How often do you choose healthy food for your family on a budget?*WEALTH* | Always Most of the time Sometimes Seldom Never | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |

Supplemental Table 9. Instrument recoding guidelines for read nutrition facts labels or ingredients lists (MT2b)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I use this food label. (with image)*Body Quest Parent* | No Sometimes Often Very Often Almost Always | 1 = Almost Always/Very Often/Often0 = Sometimes/No |
| How often do you use the “nutrition facts” on food labels?*Cooking Matters (adults)* | NeverRarelySometimesOftenAlways Does not apply | 1 = Always/Often0 = Sometimes/Rarely/Never |
| How often do you use the "Nutrition Facts" on the food label to make food choices?*EFNEP* | Don't do Seldom Sometimes Most of the time Almost always  | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Don't do |
| How often do you use the “Nutrition Facts” on the food label to make food choices?*WebNEERS* | NeverRarelySometimesOftenAlways Does not apply | 1 = Always/Often0 = Sometimes/Rarely/Never |
| I read nutrition fact labels or nutrition ingredient list.*EFNEP Checklist* | NeverRarely Sometimes Often Always | 1 = Always/Often0 = Sometimes/Rarely/Never |
| How often do you use the "Nutrition Facts" on food labels to make food choices?*HealthMPowers* | Never Rarely Sometimes Often Always | 1 = Always/Often0 = Sometimes/Rarely/Never |
| Do you use this label when food shopping?*Food Stamp Program Food Behavior Checklist*  | No. Yes sometimes. Yes often. Yes always. | 1 = Yes, always/Yes, often0 = Yes, sometimes/No |
| How do you ... Use "nutrition facts" on food labels?*University of South Carolina* | NeverRarely Sometimes Often Always Does not apply | 1 = Always/Often0 = Sometimes/Rarely/Never/Does not apply |
| How often do you use the "Nutrition Facts" on the food label to make food choices?*Live Well Alabama* | Never Rarely Sometimes Often Always | 1 = Always/Often0 = Sometimes/Rarely/Never |
| How often do you read nutrition fact labels and nutrition ingredient lists?*WEALTH (adults)* | Always Most of the time Sometimes Seldom Never | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |
| I read nutrition facts labels and/or ingredient lists.*Alabama Department of Public Health (adults)* | TrueFalse | 1 = True0 = False |
| Do you use the “Nutrition Facts” label to compare foods when shopping?*University of Georgia* | Do not do Seldom Sometimes Most of the time Almost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Do not do |

Supplemental Table 10. Instrument recoding guidelines for not run out of food before month’s end (MT2g)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I run out of food before the end of the month.*Body Quest Parent* | No Sometimes Often Very often Almost always | 1 = No0 = Sometimes/Often/Very often/Almost always |
| How often do you worry that your food might run out before you get money to buy more?*Cooking Matters (adults)* | Never Rarely Some-times Often Always Does not apply | 1 = Never/Rarely0 = Sometimes/Often/Always/Does not apply |
| How often do you run out of food before the end of the month?*EFNEP* | Don't doSeldomSometimesMost of the timeAlmost always | 1 = Don't do/Seldom0 = Sometimes/Most of the time/Almost always |
| How often do you run out of food before the end of the month?How often do you run out of food before the month's end? *EFNEP* | Never to Always (1-5) | 1 = 1 or 20 = 3, 4, or 5 |
| I (and the people in my home) run out of food before the month’s end.*EFNEP Checklist* | Never Seldom Sometimes Most times Always | 1 = Never/Seldom0 = Sometimes/Most times/Always |
| How often do you ... Run out of money for more food?*University of South Carolina* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Never/Rarely0 = Sometimes/Often/Always/Does not apply |
| How often do you worry that your food might run out before you can buy more?*Steps for Health, North Carolina State University* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Never/Rarely0 = Sometimes/Often/Always/Does not apply |
| I run out of food before the end of the month.*ESBA Checklist* | NoSometimesOftenVery oftenAlmost always | 1 = No0 = Sometimes/Often/Very often/Almost always |
| Do you run out of food before the end of the month?*University of Georgia* | Do not doSeldomSometimesMost of the timeAlmost always | 1 = Do not do/Seldom0 = Sometimes/Most of the time/Almost always |
| How often do you not run out of food before the end of the month?*WEALTH (adults)* | AlwaysMost of the timeSometimesSeldomNever | 1 = Most of the time/Always0 = Sometimes/Seldom/Never |
| How often do you run out of food before the end of the month?*Live Well Alabama* | NeverRarelySometimesOftenAlways | 1 = Never/Rarely0 = Sometimes/Often/Always |

Supplemental Table 11. Instrument recoding guidelines for compare prices before buying foods (MT2h)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I compare prices.*Body Quest Parent* | NoSometimesOftenVery oftenAlmost always | 1 = Often/Very often/Almost always0 = No/Sometimes |
| How often do you compare prices before you buy food?*Cooking Matters (adults)* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Often/Always0 = Never/Rarely/Sometimes/Does not apply |
| How often do you compare prices before you buy food?*EFNEP* | Don't doSeldomSometimesMost of the timeAlmost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Don't do |
| How often do you compare prices before you buy food?*WebNEERS* | Never to Always (1-5) | 1 = 4, 50 = 1, 2, 3 |
| I compare prices before buying food.*EFNEP Checklist* | NeverSeldomSometimesMost TimesAlways | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| Do you compare prices before you buy food?*University of Georgia* | Do not doSeldomSometimesMost of the timeAlmost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Do not do |
| How often do you ... compare prices?*University of South Carolina* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Always/Often0 = Sometimes/Never/Rarely/Does not apply |
| How often do you compare prices before you buy food?*Steps for Health, North Carolina State University* | Never SeldomSometimesMost of the timeAlmost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Never |
| I compare the prices of foods before buying them.*Alabama Department of Public Health (adults)* | Every time I shopOnly sometimes when I shopNever | 1 = Every time I shop0 = Only sometimes when I shop/Never |
| I compare prices.*ESBA Checklist* | NoSometimes Often Very often Almost always | 1 = Almost always/Very often/Often0 = Sometimes/No |
| How often do you compare prices before buying foods?*WEALTH (adults)* | NeverSeldomSometimesMost of the timeAlways  | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |
| How often do you compare prices before you buy food?*Live Well Alabama*  | NeverRarelySometimesOftenAlways | 1 = Always/Often0 = Sometimes/Rarely/Never |

Supplemental Table 12. Instrument recoding guidelines for identify foods on sale or use coupons to save money (MT2i)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I change meals to include some ingredients that are more "budget friendly," like on sale.*Body Quest Parent* | NoSometimesOftenVery oftenAlmost always | 1 = Almost always/Very often/Often0 = Sometimes/No |
| How often do you adjust meals to include specific ingredients that are more “budget-friendly,” like on sale or in your refrigerator or pantry?*Cooking Matters (adults)*  | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Always/Often0 = Sometimes/Rarely/Never/Rarely/Does not apply |
| How often do you use a coupon to identify foods on sale?*WebNEERS* | Never to Always (1-5) | 1 = 5, 40 = 1, 2, 3 |
| I identify foods on sale or coupons to save money.*EFNEP Checklist*  | NeverSeldomSometimesMost TimesAlways | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| How often do you adjust meals to include specific ingredients that are more "budget friendly," like on sale?*HealthMPowers* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Always/Often0 = Sometimes/Rarely/Never/Does not apply  |
| How often do you ... look for foods on sale?*University of South Carolina* | NeverRarelySometimesOftenAlwaysDoes not Apply | 1 = Always/Often0 = Sometimes/Rarely/Never/Does not apply |
| How often do you adjust meals to include some ingredients that are more "budget friendly" like on sale?*Steps for Health, North Carolina State University* | NeverSeldomSometimesMost of the time Almost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Never |
| How often do you identify foods on sale or use coupons to save money?*WEALTH (adults)* | AlwaysMost of the timeSometimesSeldomNever | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |
| I look for items on sale at the grocery store.*Alabama Department of Public Health* | Every time I shopOnly sometimes when I shop Never | 1 = Every time I shop0 = Only sometimes when I shop/Never |

Supplemental Table 13. Instrument recoding guidelines for shop with a list (MT2j)

|  |  |  |
| --- | --- | --- |
| **Question** ***Source(s)*** | **Response Categories** | **Recode of Response Categories**  |
| I shop with a list.*Body Quest Parent* | NoSometimesOftenVery oftenAlmost always | 1 = Almost always/Very often/Often0 = Sometimes/No |
| How often do you use a grocery list when you go grocery shopping?*Cooking Matters (adults)* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Always/Often0 = Sometimes/Rarely/Never/Does not apply |
| How often do you shop with a grocery list?*EFNEP*  | Don't doSeldomSometimesMost of the timeAlmost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Don't do |
| How often do you shop with a grocery list?*WebNEERS* | Never to Always (1-5) | 1 = 5, 40 = 1, 2, 3 |
| I shop with a list.*EFNEP Checklist* | Never SeldomSometimes Most times Always | 1 = Always/Most times0 = Sometimes/Seldom/Never |
| How often do you ... use a shopping list?*University of South Carolina* | NeverRarelySometimesOftenAlwaysDoes not apply | 1 = Always/Often0 = Sometimes/Rarely/Never |
| How often do you shop with a grocery list?*Live Well Alabama*  | NeverRarelySometimesOftenAlways | 1 = Always/Often0 = Sometimes/Rarely/Never |
| How often do you shop with a grocery list?*Steps for Health, North Carolina State University*  | Never SeldomSometimesMost of the timeAlmost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Never |
| How often do you shop with a grocery list?*WEALTH (adults)* | NeverSeldomSometimesMost of the timeAlways | 1 = Always/Most of the time0 = Sometimes/Seldom/Never |
| I always take a list when shopping at the grocery store.*Alabama Department of Public Health (adults)* | TrueFalse  | 1 = True0 = False |
| I shop with a list.*ESBA Checklist* | NoSometimesOftenVery oftenAlmost always | 1 = Almost always/Very often/Often0 = Sometimes/No |
| Do you shop with a grocery list?*University of Georgia* | Do not doSeldomSometimesMost of the timeAlmost always | 1 = Almost always/Most of the time0 = Sometimes/Seldom/Do not do |

Supplemental Table 14. Categories Used to Report Policy, Systems, Environmental, and Promotional Changes (MT5)a

|  |  |  |  |
| --- | --- | --- | --- |
| **POLICY CHANGE (MT5b)** | **SYSTEMS CHANGE (MT5c)** | **ENVIRONMENTAL CHANGE (MT5d)** | **PROMOTIONAL CHANGE (MT5e)** |
| 1. Improvements in hours of operations/time allotted for meals or food service  | 1. Improved child feeding practices (e.g. served family style, adults role model healthy behaviors, etc.) | 1. Improvements in layout or display of food (Smarter Lunchrooms, worksite cafeterias) | 1. Point-of-purchase/distribution prompts |
| 2. Policies for working mothers | 2. Implemented guidelines for healthier competitive foods options | 2. Edible gardens (establish, reinvigorate or maintain food gardens |  2. Menu labeling/calorie/fat/ sodium/added sugar counts |
| 3. Rules on foods served in meetings or in classrooms | 3. Implemented a system to involve youth in food service decision-making | 3. Lactation supports or dedicated lactation space | 3. Vending machine labeling |
| 4. Standards for healthier food policy in other setting | 4. Removing sugar-sweetened beverages from children’s menus | 4. Healthier vending machine initiatives (e.g., access to healthier foods and beverages) | 4. Increased awareness of changes reported by target audience |
| 5. School wellness or child care wellness policy implemented | 5. Enhanced training on menu design and healthy cooking techniques | 5. Improved appeal, layout, or display of healthy snack foods | 5. Used posters/visual displays, taste testing, live demonstrations, audiovisuals, celebrities, etc. |
| 6. Established or improved a monitoring and reporting system for school or child care wellness policies | 6. Use of standardized, healthful recipes | 6. Improved appeal, layout or display of healthy competitive foods | 6. Implemented or enhanced limits on marketing/promotion of less healthy options |
| 7. Established or improved a nutrition policy | 7. Change in/improved menus (variety, quality, offering lighter fares) | 7. Eliminated or reduced amount of competitive foods | 7. School meal foods promoted outside of meal times |
| 8. Improved hours of operation to improve access/convenience | 8. Implemented, improved, or expanded healthy fundraisers | 8. Established or improved salad bar | 8. Meal service staff encourages healthy selections |
| 9. Took policy steps to encourage new food distribution sites - pantries, food banks | 9. Improvements in free water access, taste, quality, smell, or temperature | 9. Decreased shelf space/amount/variety of unhealthy options | 9. Outreach and promotion conducted to increase awareness and access to the site(s) (pantries, farmer's markets, new stores) |
| 10. Took policy steps to encourage new healthy retail outlets | 10. Restrictions on use of food as rewards or during celebrations | 10. Improved quality of healthy options | 10. Took promotional steps to encourage new food distribution sites |
|   | 11. Implemented guidelines for healthier snack options | 11. Created or enhanced healthy check out area | 11. Took promotional steps to encourage new healthy retail outlets |
|   | 12. Improved or increased healthy beverage options | 12. Improved appeal, layout, or display of foods to encourage healthy and discourage unhealthy selections |  |
|   | 13. Implemented a system for youth, parent, and/or client leadership or involvement in decision-making | 13. Increased shelf space/amount/variety of healthy options |  |
|   | 14. Implemented guidelines for foods offered during events, celebrations, education programs, etc., not at schools/day care | 14. Established a new food bank, pantry, or distribution site |  |
|   | 15. Change in/improved vendor agreement towards healthier food(s) | 15. Established a new healthy retail outlet |  |
|   | 16. Change in/improved food purchasing/donation specifications towards healthier food(s) | 16. Improved or expanded cafeteria/dining/serving areas or facilities - if allowable |  |
|   | 17. Prioritized farm-to-table/increase in fresh or local produce | 17. Improved facilities or equipment to accommodate healthier options or make them more convenient/appealing/access-ible - if allowable |  |
|   | 18. Expanded or improved transportation options to the site | 18. Improved or expanded kitchen/food preparation facilities - if allowable |  |
|   | 19. Began offering a federal food program (CACFP, TEFAP, summer meals, etc.) |  |  |
|   | 20. Implemented novel distribution systems to reach high-risk population (e.g. home delivery of the elderly, farmers’ markets) |  |  |
|   | 21. Began acceptance of SNAP/EBT/WIC |  |  |
|   | 22. Farmers market established in food banks |  |  |
|   | 23. Fresh produce made accessible in food pantries |  |  |
|   | 24. Implemented nutrition standards for foods accepted and distributed in food pantries and food banks |  |  |
|   | 25. Collected or accepted donations of excess wholesome food to distribute to clients  |  |  |
|   | 26. Offered on-site enrollment in federal food programs - if allowable |  |  |
|   | 27. Improved enrollment procedures to increase NSLBP meal participation including universal breakfast/lunch - if allowable |  |  |
|   | 28. Implemented price manipulation/coupons/discounts to encourage healthy choices - if allowable |  |  |

a As listed in the SNAP-Ed Evaluation Framework.