



Design of a Survey on Fish Consumption by the Tribes of Idaho

APPENDIX A DRAFT Survey Questionnaire

February 2014



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LIST OF ACRONYMS

CDC	Center for Disease Control and Prevention
FFQ	food frequency questionnaire
NCI	National Cancer Institute



PREFACE

This survey questionnaire will help determine the fish consumption rate of the _____Tribe. The purpose of the questionnaire is to ask Tribal members about their dietary patterns and activities related to fish consumption in the past 24 hours as well as in the preceding 12 months. This will be accomplished by conducting two 24-hour dietary recall interviews (the second of which will be administered only to a select group of high fish consumers) and a food frequency questionnaire (FFQ). Data will be collected regarding fish species consumed, frequency of consumption, and portion size, with additional information gathered about parts eaten, preparation methods, and fishing activities. Data will also be collected regarding changes in fish consumption patterns from the past and expectations for future consumption to develop a qualitative understanding of current-day suppression factors.

Interviewers will be trained in aspects of the survey process prior to implementation. The questionnaire is written such that the trained interviewer can clearly follow the line of questioning, read each question verbatim, and record (in written form, by check box, or circling) the information given by each respondent in the space provided. Words to be spoken by the interviewer are identified in bold text on the questionnaire, and each question will be asked in numeric order. Written information will only be recorded on the questionnaire form by the interviewer. Entry codes, species photographic displays, and portion model displays will be used during the interviews.

Past fish consumption surveys were reviewed, in addition to recent survey questionnaires developed by the Center for Disease Control and Prevention (CDC), for guidance in selecting wording for the current questionnaire. The questionnaire will be pre-tested (during the pilot survey) and revised as necessary prior to implementation. The questionnaire is organized according to the following sections:

- Telephone Screening
- Interview Introduction
- 24-Hour Dietary Recall
- Food Frequency Questionnaire
- General Information
- Second 24-Hour Dietary Recall



1.0 TELEPHONE SCREENING

Potential respondents identified from the tribal membership using contact information supplied by the Tribal enrollment office (as described in the Design Report, Section 3.3) will first be contacted by telephone for screening. Interviewers will place the calls from a project-designated location and/or telephone, such as Tribal headquarters. The initial phone contact will provide an opportunity to briefly introduce the project and to screen fish consumers versus non-fish consumers, attempting to discern general frequency of fish consumption or why fish is not being eaten. Note that determining frequency of fish consumption during screening will identify respondents that may be interviewed in-person and whose information may be evaluated using the National Cancer Institute (NCI) method for dietary analysis. For those who do eat fish, an in-person interview will be requested and, if the respondent is willing, scheduled for a later date.

Each respondent will have a corresponding Telephone Screening Contact Log (Table A-1), which will be completed by the interviewer using the Entry Codes for Use During Telephone Screening (Table A-2). The interviewer will use the statements and questions provided below to conduct the screening. Words to be spoken by the interviewer are identified in bold, and questions will be asked in numeric order.

The interviewer placing the call will complete the log (Table A-1) for each attempt to reach the potential respondent by telephone (up to 15 attempts). Multiple contact attempts will be made at varying days of the week and times of day. If no contact is made before the maximum number of attempts or by the end of the survey implementation phase (whichever comes first), contact attempts will be terminated. Upon contact by phone, the interviewer will record answers to screening questions, including whether or not the respondent eats fish and frequency. If an in-person interview is scheduled over the telephone, the date and location of the scheduled interview will be recorded.

After all interviews are complete, the Telephone Screening Contact Log will be stored separately from the in-person interview forms, as this log will provide the only documentation linking the respondent's name with the respondent's assigned identification number. Subsequent interview forms will only include the respondent identification number (pre-printed on the top of each page) to maintain confidentiality of the respondent.



1. **“Hello, I’m calling on behalf of _____ (name of Tribe and department) . May I please speak with _____ (name of respondent) ?”** (Refer to Table A-2 for response entry codes)

If YES and respondent is speaking or when the respondent comes to the telephone, continue to Question #2.

If NO, probe if he/she lives there, and if so, ask **“When is the best time to reach him/her? (Record on log) “Okay, thank you for your time. Good bye.”**

If NO, not living there, ask **“What is the best way to reach him/her? (Record new number on log) “Okay, thank you for your time. Good bye.”**

2. **“Hello, my name is _____ (your name) . Reintroduce Tribe if necessary. We are conducting a survey to determine the fish consumption rates within our Tribe. The survey is endorsed and supported by _____ (name council / other) . This information will help us protect our environment and promote the health of our Tribal members and families. Today’s survey takes about 3 minutes and we would like to include your input, if now is a good time?”**

If YES, continue to Question #3.

If NO, ask **“When is a good time to call back? (Record on log) “Okay, thank you for your time. Good bye.”**

3. **“I’d like to ask you about what you ate yesterday. Did you eat any fish yesterday? This includes ANY amount of fish, shellfish, or seafood eaten for breakfast, lunch, dinner, or snacks, by itself or within a dish such as soup.”** (Record on log)

If YES, skip to Question #8.

If NO, continue to Question #4.

4. **“Did you eat any fish in the past week (or if not, in the past month)?”**
(Record on log)

If YES, skip to Question #7.

If NO, continue to Question #5.



5. **“Did you eat any fish in the past year?”** (Record on log)

If YES, skip to Question #7.

If NO, continue to Question #6.

6. **“Thank you. Just to be thorough, is it possible that during the past year you ate fish at a restaurant, a friend’s house or another place, or someone brought fish to you?”** (Record on log)

If YES, continue to Question #7.

If NO, skip to Question #9.

7. **“How many days did you eat fish in the past week (or month or year – depending on previous answers)?”** (This information will determine applicability of the NCI Method; Record on log as number per week, month, or year)

7a. **“In general, how many days do you eat fish – each week, each month, or each year?”** (Record on log as number per week, month, or year)

8. **Thank you. We are also conducting survey interviews that have been endorsed by _____ (endorsing authority) _____. The information that you provide will remain strictly confidential and it will help to protect the health of our Tribe. We will conduct in-person interviews in a convenient location. Your participation is very important. If you do agree to participate, you may withdraw at any time and there would be no consequence for you. May we meet with you for the survey interview?** (Record on log)

If YES, **“Great, thank you for your willingness to participate in this important survey. Let’s schedule a time and place. We have Tribal interviewers available to meet 7 days a week from 8:00 am until 7:00 pm; which day in the next two weeks is best for you?”** If don’t know, schedule a call-back time to set interview. Record on log, skip to #10.

If NO, **“I understand. This survey is very important. We don’t have to do it immediately, we have several months to schedule it. I’d like to call you back at a later date. We want to make sure we represent the whole Tribe.”**



If ACCEPT or SOFT REFUSAL, schedule re-call and skip to #10.
If HARD REFUSAL, “Okay, thank you for your time today. Good bye.”

9. “Can you please tell me the main reasons why you haven’t eaten fish?”

Allow respondent to answer question unaided, then state “**now I will list some other reasons people do not eat fish; please let know if any of these apply to you.**” List the following items (of those not already noted by the respondent). Check left and right columns:

Contamination:

A. “Do you not eat fish because of fish advisories?”

Yes Answered unaided
 No Answered by prompt

B. “Do you not eat fish because of pollution?”

Yes Answered unaided
 No Answered by prompt

C. “Do you not eat fish because of other environmental concerns (for example, eating fish is not sustainable)?”

Yes Answered unaided
 No Answered by prompt

Fish Availability:

D. “Do you not eat fish because there is not enough fish available to catch?”

Yes Answered unaided
 No Answered by prompt

E. “Do you not eat fish because it is hard to find fresh fish and seafood?”

Yes Answered unaided
 No Answered by prompt



Access to Fishing:

F. "Do you not eat fish because of limited access to fishing areas?"

Yes Answered unaided
 No Answered by prompt

G. "Do you not eat fish because of you used to have access to a boat or fishing gear, but don't anymore?"

Yes Answered unaided
 No Answered by prompt

Other Reasons:

H. "Do you not eat fish because of you do not like fish or you prefer other foods?"

Yes Answered unaided
 No Answered by prompt

I. "Do you not eat fish because you are too busy to catch and/or prepare fish?"

Yes Answered unaided
 No Answered by prompt

J. "Do you not eat fish because you do not know how to prepare fish?"

Yes Answered unaided
 No Answered by prompt

K. "Do you not eat fish because you cannot afford it?"

Yes Answered unaided
 No Answered by prompt

L. "Do you not eat fish because of allergies or other health concerns?"

Yes Answered unaided
 No Answered by prompt

M. "Do you not eat fish because you are a vegetarian or vegan?"

Yes Answered unaided
 No Answered by prompt



N. "Do you not eat fish because you observe religious customs?"

Yes

Answered unaided

No

Answered by prompt

10. Finally, please tell me in which zip code you live? (Enter)

This concludes the interview. Thank you very much for your cooperation.
We really appreciate your time today. That is all. Good bye."

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Table A-1. Telephone Screening Contact Log

Respondent Name:					Respondent ID #:			
Respondent Telephone Number <i>(strike-out incorrect numbers, record new):</i>								
Scheduled Call-Back Time for Telephone Screen <i>(if necessary to re-schedule):</i>								
When Called					Who Contacted		Results (of call & questions)	
Attempt	Date	Day	Time	Circle	Caller Name	Caller ID	Codes	Notes
1				AM PM				
2				AM PM				
3				AM PM				
4				AM PM				
5				AM PM				
6				AM PM				
7				AM PM				
8				AM PM				
9				AM PM				

DRAFT - DO NOT USE OR CITE

When Called					Who Contacted		Results	
Attempt	Date	Day	Time	AM/PM	Caller Name	Caller ID	Code	Notes
10				AM PM				
11				AM PM				
12				AM PM				
13				AM PM				
14				AM PM				
15				AM PM				
Reported eating fish <u>yesterday</u> (circle):				YES / NO / No Answer				
Reported eating fish during past <u>week</u> (circle):				YES / NO / No Answer / Not Applicable				
Reported eating fish during past <u>month</u> (circle):				YES / NO / No Answer / Not Applicable				
Reported eating fish during past <u>year</u> (circle):				YES / NO / No Answer / Not Applicable				
Number of <u>days ate fish</u> (enter number, circle unit):				_____ in past	Week / Month / Year			
Number of <u>days generally eat fish</u> (enter number, circle unit):				_____ times per	Week / Month / Year			
Schedule in-person interview? (circle, enter):				YES / NO	(If NO, enter call-back time at top of form)			
Date: _____ (mm/dd/yyyy)				Day: _____	Time: _____ am / pm	Location: _____		

Table A-2. Entry Codes for Use During Telephone Screening

01	Completed interview
02	Mid-termination
03	Refusal
04	Invalid number: out of service, disconnected, fast busy
05	No answer
06	Busy signal
07	Answering machine
08	Appointment set
09	Language barrier: non-English
10	Disability: hearing-impaired, otherwise disabled

Note: Interviewers will be trained on how to respond to telephone inquiries (leaving a message, handling refusals, etc.)

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2.0 INTERVIEW INTRODUCTION

Basic information about the interview (e.g., location) will be recorded by the interviewer prior to the in-person interview. The interviewer will then provide a brief introduction to the respondent about the project. Words to be spoken by the interviewer are identified in bold. Answers are written, checked, and/or circled, as indicated.

2.1 Administrative Information

General administrative information will be completed by the interviewer at the time of the interview, but prior to questioning the respondent.

2.1.1 Interviewer Identification

1. Interviewer Name _____
2. Interviewer ID: _____

2.1.2 Respondent Identification

3. Respondent ID: _____

2.1.3 Interview Date, Time, and Location

4. Date: _____ / _____ / _____ (mm/dd/yyyy)
5. Day (of the week): _____
6. Start time: _____ AM / PM (*circle*)
7. City, State: _____
8. Location/Venue (check): Home Central Location
 Tribal Office Other (coffee shop, etc.)

2.2 Introduction to Interview

To begin the in-person interview, the interviewer will introduce the purpose of the survey and provide a brief overview of its structure.

“Hello, my name is _____, and I represent _____. We appreciate your willingness to participate in our fish consumption survey. The survey is endorsed by _____.

The information you provide as part of this survey will help us understand the rates of fish consumption, how fish is prepared, and the species or types of fish regularly eaten by members of the _____ Tribe. This information will help us protect our environment and promote the health of our Tribal members and families.

The information that you provide during this interview is confidential. Your responses to the questions will be combined with those of others so that your answers cannot be identified. In the meantime, if you have any questions, you are welcome to call me. Here is my contact information. (Provide contact information)

This interview will take about an hour. The questionnaire has 3 parts. In the first part, I will ask you to tell me how much fish you ate yesterday. The second part focuses on the past 12 months: the types of fish you ate, how often you ate it, where you got it, and how it was prepared, as well as fishing activities and special events. Finally, in the third part, I will ask you for some general information about yourself.

If at any time, you do not know an answer or do not feel comfortable answering a question, we can skip to the next question.”

3.0 24-HOUR DIETARY RECALL

The first part of the in-person interview is a 24-hour dietary recall. Words to be spoken by the interviewer are identified in bold. Each question will be asked in numeric order. Photographic and portion model displays will be available for use during questioning.

3.1 Fish Consumption

“The first questions are about your fish consumption yesterday. Please consider what you ate yesterday. I am going to ask you about EACH time you ate.”

9. **“Please think about the first time you ate yesterday; when was that (name the eating occasion)? Did you eat fish during that occasion (which includes finfish, shellfish, and seafood)? Consider all meals and snacks, including fish within dishes such as soups. Include fish bought from a store, from a restaurant, or caught by you or someone else. Did you eat fish?”** (Check)

_____ Yes

_____ No

If YES, continue to Question #10.

If NO, skip to Question #11.

10. **“What type of fish did you eat?”** (Refer to species display, enter in Table A-3).

10a. **“How much of (species type mentioned) did you eat?** (See quantity display).

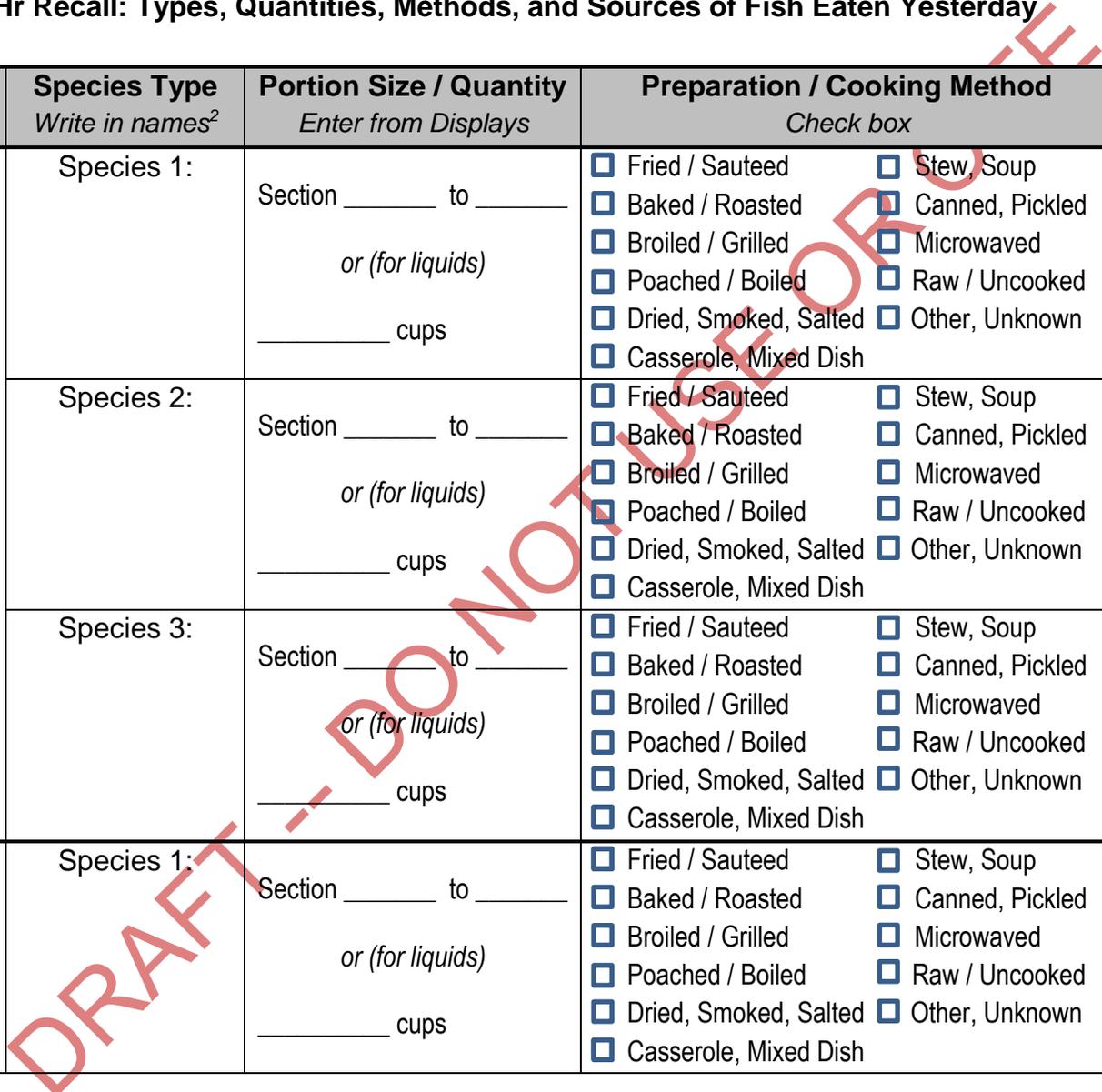
10b. **“How was (species type mentioned) prepared or cooked?** (Unprompted, check box in table).

10c. **“Where did (species type mentioned) come from? Was it from a market or store? From a restaurant? Or was it caught? If caught, was it caught in Idaho waters or outside of Idaho?”** (Check box in table).

Repeat Question #10 for first/second/third species type mentioned for that eating occasion and complete Table A-3.

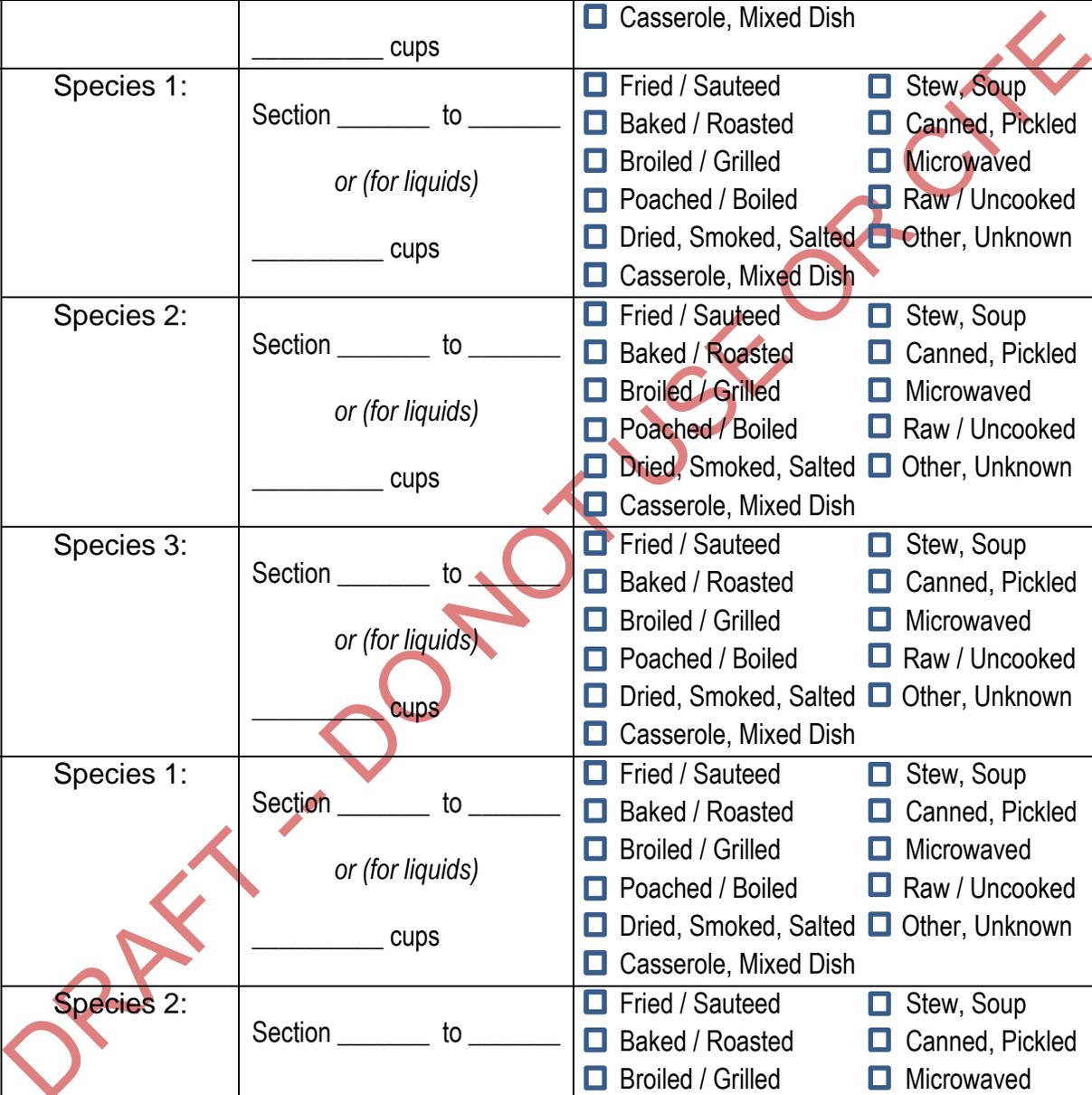
Table A-3. 24-Hr Recall: Types, Quantities, Methods, and Sources of Fish Eaten Yesterday

Occasion # & Description ¹	Species Type <i>Write in names²</i>	Portion Size / Quantity <i>Enter from Displays</i>	Preparation / Cooking Method <i>Check box</i>	Source <i>Check box</i>
1	Species 1: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 2: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 3: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
2	Species 1: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho



3		Species 2:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 1:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 2:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	Section _____ to _____ <i>or (for liquids)</i>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of

			_____ cups	<input type="checkbox"/> Casserole, Mixed Dish	Idaho
4	Species 1:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 2:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 3:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
5	Species 1:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 2:	Section _____ to _____	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught



6			<p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 1:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 2:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho

1. "Description" refers to a distinct fish-eating occasion defined by the respondent (breakfast, lunch, dinner, snack, or a time).
2. Write in name, will be coded later by species and anadromous, freshwater resident, or marine fish and shellfish.

11. **“Please think about the NEXT time you ate yesterday; when was that (name the eating occasion)? Did you eat fish? (Check)**

_____ Yes

_____ No

If YES, repeat Question #10 above for up to 6 eating occasions.
If NO, repeat Question #11 for all eating occasions yesterday.

3.2 Other Dietary Information

“Now I will ask you general questions about your diet.”

12. **“Was the amount of fish you ate yesterday more, less, or about the same as usual?” (Check)**

_____ More than usual

_____ Less than usual

_____ About the same as usual

13. **“Are you currently on any kind of diet, either to lose weight or for some other reason?” (Check)**

_____ Yes

_____ No

_____ Prefer not to answer

4.0 FOOD FREQUENCY QUESTIONNAIRE

The second part of the in-person interview is a food frequency questionnaire (FFQ) based on the past year (12 months), and includes questions on dietary patterns and related activities that may affect fish consumption.

4.1 Fish Consumption

“The next questions are about your fish consumption (and activities involving fish) over the past year.”

4.1.1 Species, Frequency, Quantities

14. **“Did you eat fish in the past 12 months? That includes finfish, shellfish, and seafood. Consider all meals and snacks, including fish within dishes such as soups. Include fish bought from a store, from a restaurant, or caught by you or someone else.” Did you eat fish in the past 12 months? (Check)**

_____ Yes

_____ No

If YES, continue to Question #15.

If NO, ask **“Please consider ANY amount of fish you may have eaten in the past year.”** If still NO, terminate interview (skip to Section 5.2, Interview End).

15. **“Please tell me which types of fish you ate in the past 12 months (including the fillet and any parts). For each fish type I mention, I will ask you how often you ate it and how much you usually ate. You will be able to respond according to two periods: what you identify as a higher fish-eating period and a lower fish-eating period. Higher and lower fish-eating periods together must total 12 months. Remember to consider breakfast, lunch, dinner, and snacks, and include fillets, stews, and other dishes. Do NOT include special events, such as feasts and ceremonies; I will ask about that later.”**

Substitute each species name listed in Table A-4 for each of the questions below, and complete the table accordingly. Be prepared to show species and portion displays. Ask all questions for each species one-by-one, and record frequency according to high and low fish consumption periods.

16. "In the past 12 months, did you eat (Species X) ?"

If YES, check box in table and continue to Question #17.
If NO, repeat question for next species on list.

17. "Did you eat about the same amount of (Species X) throughout the year or did you eat more during certain periods and less during other periods of the year?"

If SAME, ask Questions #18-19 and complete table for one period; enter length of period as 12 months. If contradiction occurs (e.g., reports only 3 months), ask "what about the rest of the year?" (and consider as NOT SAME below).

If NOT SAME, skip to Question #20 and complete table for both high and low fish-eating periods.

18. "In the past 12 months, how often did you eat (Species X) ?" Enter value and check the units (portions per day, per week, per month, or per year).

19. Please tell me what your typical portion or serving size was when you ate (Species X) ." Refer to portion displays.

REPEAT Question #16 for each species type listed on table.

20. "In the past 12 months, how often did you eat (Species X) during your higher fish-eating period? Enter value and check the units (portions per day, per week, per month, or per year).

21. Please tell me what your typical portion or serving size was when you ate (Species X) during your higher fish-eating period." Refer to portion displays.

22. "How long is that higher fish-eating period (in months)?" Enter value.

23. "In the past 12 months, how often did you eat (Species X) during your lower fish-eating period? Enter value and check the units (portions per day, per week, per month, or per year).

24. **Please tell me what your typical portion or serving size was when you ate (*Species X*) during the lower fish-eating period.** Refer to portion displays.

25. **“How long is that lower fish-eating period (in months)?”** Higher and lower fish-eating seasons should total 12 months.

REPEAT Question #16 for each species type listed on table.

26. **“Are there any other fish or shellfish species that you ate that we have not mentioned here?”**

REPEAT this question and Question #17 for each new species.

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Table A-4. FFQ: Types, Frequency, and Quantity of Species Eaten in Past 12 Months

Fish Species ¹	Check if eaten	Higher Fish Eating Period ² (Or Same Consumption Year Round)				Lower Fish Eating Period (Blank if Same Consumption Year Round)			
		Number of Portions	Portions per day, week, month, or year (circle)	Typical Portion Size (section #s or cups)	Length of period (months)	Number of Portions	Portions per day, week, month, or year (circle)	Typical Portion Size (section #s or cups)	Length of period (months)
SALMON									
Chinook (King)			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Coho (silver)			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Sockeye (red)			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Kokanee			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Chum (dog)			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Pink			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Steelhead			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Unknown/all			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
TROUT									
Cutthroat			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Bull (Dolly Varden)			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Rainbow			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Brook			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Lake			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Unknown/all			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		

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Fish Species ¹	Check if eaten	Higher Fish Eating Period ² (Or Same Consumption Year Round)				Lower Fish Eating Period (Blank if Same Consumption Year Round)			
		Number of Portions	Portions per day, week, month, or year (circle)	Typical Portion Size (code)	Length of period (months)	Number of Portions	Portions per day, week, month, or year (circle)	Typical Portion Size (code)	Length of period (months)
FRESHWATER									
Sturgeon			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Lamprey			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Whitefish			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Sucker			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Burbot/lingcod			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Bass			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
No.Pikeminnow			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Walleye			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Crappie			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Sunfish			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Catfish			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Bluegill			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Crayfish			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Clams			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Mussels			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Unknown/all			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		

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Fish Species ¹	Check if eaten	Higher Fish Eating Period ² (Or Same Consumption Year Round)				Lower Fish Eating Period (Blank if Same Consumption Year Round)			
		Number of Portions	Portions per day, week, month, or year (circle)	Typical Portion Size (code)	Length of period (months)	Number of Portions	Portions per day, week, month, or year (circle)	Typical Portion Size (code)	Length of period (months)
SEAFOOD / MARINE									
Tuna			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Crab			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Clams			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Mussels			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		
Other: _____			Day Wk. Mo. Yr.				Day Wk. Mo. Yr.		

Notes

1. Species list may change and local language may be applied based on the pilot study.
2. Periods are based on respondents perception or experience related to harvest and consumption; biological seasons (e.g., fish runs) will be evaluated after the interview during data analysis.

DRAFT - DO NOT USE OR

4.1.2 Parts of Fish Consumed, Preparation Methods, and Sources

The following questions relate to parts of fish consumed, methods of preparation, and source (where acquired) according to general groups of species type, which are 1) anadromous (migratory) fish such as salmon, 2) freshwater resident fish and shellfish, and 3) seafood (marine species). Complete Table A-5 for the following questions.

27. **“When you eat a fish fillet, what percent of the time do you eat (species group) with skin and what percent of the time do you eat it without skin (your 2 answers should total 100%)?”**

ASK question for 1) anadromous fish such as salmon, 2) freshwater resident fish and shellfish, and 3) seafood (marine species). Complete table.

28. **“When you eat (species group), what percent of the time do you eat the eggs and what percent of the time do you eat other organs (including head and bones) ?”**

ASK question for 1) anadromous fish such as salmon, 2) freshwater resident fish and shellfish, and 3) seafood (marine species). Complete table.

29. **“Thinking about how you prepare the fish that you eat, what percent of the time do you prepare (species group) that is 1) Baked, Soup, Stew, Roasted/Barbecued, Poached, 2) Smoked, Fried, Canned, Raw/Uncooked, or 3) other method?”**

ASK question for 1) anadromous fish such as salmon, 2) freshwater resident fish and shellfish, and 3) seafood (marine species). Complete table.

30. **“Thinking about where the fish comes from that you eat, what percent of the time do you get (species type) from the following sources (your answers should total 100%)?”**

- Bought from a store (grocery or market)?
- From a restaurant?
- Caught by you or someone else in Idaho waters?
- Caught by you or someone else outside of Idaho waters?

ASK question for 1) anadromous fish such as salmon, 2) freshwater resident fish and shellfish, and 3) seafood (marine species). Complete table.

Table A-5. FFQ: Fish Parts Eaten, Preparation Methods, and Sources

Species Group:	Anadromous / Migratory Fish (e.g., salmon)	Freshwater Resident Fish and Shellfish	Marine Fish and Shellfish
FISH SKIN EATEN (%)			
Fillet with skin			
Fillet without skin			
TOTAL	100%	100%	100%
FISH PARTS EATEN (%)			
Eat eggs			
Eat head, bone, organs			
FISH PREPARATION METHODS (%)			
Baked, Soup, Stew, Roasted/Barbecued, Poached			
Smoked, Fried, Canned, or Raw/Uncooked			
Other / Don't know:			
SOURCES OF FISH EATEN (%)			
Bought from a store (grocery or market)			
From a restaurant			
Caught by you or someone else (in Idaho waters)			
Caught by you or someone else (outside of Idaho waters)			
Other / Don't know			
TOTAL	100%	100%	100%

4.2 Special Events and Gatherings

“I will now ask questions related to your fish consumption during special events and gatherings, including ceremonies or other community events.” Complete Table A-6 for the following questions.

31. “In the past 12 months, how many special events and gatherings did you attend (either per week, month or year)?” (Enter number and circle unit)

_____ Events per Week / Month / Year

32. “Did you eat fish at these special events and gatherings? If NO, skip to next section. If so, did you eat anadromous fish (such as salmon), freshwater resident fish and shellfish, or seafood? (Circle answer for each in table)

_____ Yes

_____ No

33. “What was your typical portion size or serving size for (species group) at the special events and gatherings?” ASK for all species groups in Table A-6. (See portion models, complete table)

34. “At what percent of the special events and gatherings did you eat (species group) ?” ASK for all species groups in Table A-6. (complete table)

Table A-6. FFQ: Fish Consumption at Gatherings

Species Group	Consumed (circle)	Typical Portion Size (enter display section numbers or cups)	Percent of Time Eaten at Gatherings
Anadromous / Migratory Fish	YES NO		%
Freshwater Resident Fish and Shellfish	YES NO		%
Marine Fish and Shellfish	YES NO		%

4.3 Fishing Activities

“I am now going to ask you some questions about fishing.”

35. “Over the past 12 months, did you take part in any fishing-related activities?” (Check)

- Yes
 No
 Prefer not to answer

If YES, continue to next question.

If NO, ask “**Why not**”? (Check and skip to next section)

If prefer not to answer, skip to next section.

- Fish advisories
 Pollution
 Other environmental concerns
 Not enough fish available to catch
 Limited access to fishing areas
 Used to access to boat/fishing gear, not anymore
 Too far from fishing areas
 Too busy, no time
 Prefer other activities
 Prefer other foods
 Don't know how to fish
 Prefer not to answer
 Other _____

36. “Now I’m going to ask you the approximate number of times you go fishing (for fish and shellfish) each month. How many times do you go fishing during each if the following months?” (List and enter value for each)

- _____ Times in January
- _____ Times in February
- _____ Times in March
- _____ Times in April
- _____ Times in May
- _____ Times in June
- _____ Times in July
- _____ Times in August
- _____ Times in September
- _____ Times in October
- _____ Times in November
- _____ Times in December

37. **“What percent of the fish that you harvest do you keep for you and your household, what percent do you give/distribute to others outside your household, and what percent do you sell (your answers should total 100%)?”** (Enter)

- _____ Percent Keep
- _____ Percent Give to others
- _____ Percent Sell
- 100% Total**

38. **“Do you own or have access to fishing gear?”** (Check)

- _____ Yes
- _____ No
- _____ Prefer not to answer

39. **“Do you own or have access to a boat?”** (Check)

- _____ Yes
- _____ No
- _____ Prefer not to answer

4.4 Changes in Fish Consumption

“I am now going to ask you questions about changes in fish consumption and availability. Some of these may be open-ended questions.”

40. **“Has there been a change over time in your fish consumption?”** (Check)

- Yes
- No
- Prefer not to answer / Don't know

If YES, continue to next question.
If NO or other, skip to Question #41.

40a. **“How has it changed most recently?”** (Check)

- Increased consumption
- Decreased consumption
- Other change _____

40b. **“When did it change?”**

- Within past 5 years
- In the 2000s (or 5 to 15 years ago)
- In the 1990s (or 15 to 25 years ago)
- In the 1980s (or 25 to 35 years ago)
- In the 1970s (or 35-45 years ago)
- In the 1960s or earlier (more than 45 years ago)

40c. **“Why did it change?”** (Multiple choice options may be developed in Pilot Test)

41. **“Has there been a change in the number or types of species of fish that you consume?”** (Check)

- _____ Yes
- _____ No
- _____ Prefer not to answer / Don't know

If YES, continue to next question.
If NO or other, skip to Question #42.

41a. **“How has it changed most recently?”** (Check)

- _____ Increase in number of species
- _____ Decrease in number of species
- _____ Other change _____

41b. **“When did it change?”**

- _____ Within past 5 years
- _____ In the 2000s (or 5 to 15 years ago)
- _____ In the 1990s (or 15 to 25 years ago)
- _____ In the 1980s (or 25 to 35 years ago)
- _____ In the 1970s (or 35-45 years ago)
- _____ In the 1960s or earlier (more than 45 years ago)

41c. **“Why did it change?”** (Multiple choice options may be developed in Pilot Test)

42. **“Has there been a change in access to fish and fishing (for you or others)?”**
(Check)

- _____ Yes
- _____ No
- _____ Prefer not to answer / Don't know

If YES, continue to next question.
If NO or other, skip to Question #43.

42a. **"How has it changed?"** (Check)

- _____ More access to fishing
- _____ Less access to fishing
- _____ Other change _____

42b. **"When did it change?"**

- _____ Within past 5 years
- _____ In the 2000s (or 5 to 15 years ago)
- _____ In the 1990s (or 15 to 25 years ago)
- _____ In the 1980s (or 25 to 35 years ago)
- _____ In the 1970s (or 35-45 years ago)
- _____ In the 1960s or earlier (more than 45 years ago)

42c. **"Why did it change?"** (Multiple choice options may be developed in Pilot Test)

43. **"Has there been a change in frequency of fishing (for you or others)?"**
(Check)

- _____ Yes
- _____ No
- _____ Prefer not to answer / Don't know

If YES, continue to next question.
If NO or other, skip to Question #44.

43a. **“How has it changed most recently?”** (Check)

- Increased frequency
- Decreased frequency
- Other change _____

43b. **“When did it change?”**

- Within past 5 years
- In the 2000s (or 5 to 15 years ago)
- In the 1990s (or 15 to 25 years ago)
- In the 1980s (or 25 to 35 years ago)
- In the 1970s (or 35-45 years ago)
- In the 1960s or earlier (more than 45 years ago)

43c. **“Why did it change?”** (Multiple choice options may be developed in Pilot Test)

44. **“Has there been a change in the way you prepare or use fish?”** (Check)

- Yes
- No
- Prefer not to answer / Don't know

If YES, continue to next question.
If NO or other, skip to Question #45.

44a. **“How has it changed most recently?”**

- _____ Different cooking method
- _____ Different use
- _____ Prefer not to answer / Don't know

44b. "When did it change?"

- _____ Within past 5 years
- _____ In the 2000s (or 5 to 15 years ago)
- _____ In the 1990s (or 15 to 25 years ago)
- _____ In the 1980s (or 25 to 35 years ago)
- _____ In the 1970s (or 35-45 years ago)
- _____ In the 1960s or earlier (more than 45 years ago)

44c. "Why did it change?" (Multiple choice options may be developed in Pilot Test)

45. "Compared to your fish consumption now, how much/how frequently would you like to consume fish in the future?" (Check)

- _____ Increase consumption
- _____ Decrease consumption
- _____ Maintain same consumption
- _____ Prefer not to answer / Don't know

If INCREASED, continue to next question.
If DECREASED or other, skip to next section.

46. "If you prefer to eat more fish or seafood than you're currently eating, what would have to occur for you to eat that amount in the future?"

5.0 GENERAL INFORMATION

The third and final part of the in-person interview involves collecting general information from the respondent and recording final administrative data.

5.1 Respondent Information

Respondents will be asked demographic questions as well as (for female respondents) questions related to breastfeeding history.

5.1.1 Demographic Information

“This is the final part of the interview. I have a few general questions and then we will be done.” (Check or enter – if respondent prefers not to say, enter 999)

47. Gender (check):

_____ Male

_____ Female

48. **“What is your age?”** _____ (years)

49. **“What is your height?”** _____ feet _____ inches

50. **“How much do you weigh?”** _____ pounds

51. **“How many people live in your household, including yourself?”** _____

52. **“Do you live on your Tribe’s Reservation?”** (Check)

_____ Yes

_____ No

_____ Prefer not to say

53. **“What is the highest level of education that you’ve completed?”** (Check)

- Elementary School
- Middle School
- High School / GED
- Associates Degree
- Bachelor’s Degree
- Master’s Degree
- Doctorate
- Prefer not to say

54. **“What is your approximate household income per year?”** (List all options below, except “prefer not to say” and check)

- \$15,000 or less
- More than \$15,000 up to \$25,000
- More than \$25,000 up to \$35,000
- More than \$35,000 up to \$45,000
- More than \$45,000 up to \$55,000
- More than \$55,000 up to \$65,000
- More than \$65,000
- Prefer not to say

5.1.2 Breastfeeding History

The following questions are for female respondents only; if male, skip to next section.

55. **“Have you ever given birth?”** (Check)

- Yes
- No
- Prefer not to answer

If YES, continue to next question.
Otherwise, skip to next section.

56. "When did you most recently give birth? _____ / _____ (MM, YYYY)

57. "Was this baby ever breastfed or fed breast milk? (Check)

- Yes
- No
- Prefer not to answer

If YES, continue to next question.
Otherwise, skip to next section.

58. "If the youngest child is no longer breastfeeding, at what age did you stop feeding breast milk to this child?" (Provide in months or check other option)

- Stopped at _____ (months old)
- Still breastfeeding
- Prefer not to answer
- Not applicable (not biological mother, etc.)

5.2 Interview End

Upon completing the interview, the interviewer will offer appreciation and complete the remaining administrative information, including signing a form verifying participation.

"This concludes the interview. Thank you SO very much for your time and cooperation today. Your participation will contribute significantly to the overall success of this survey and help protect the health of our Tribe. It would also benefit the survey if you could participate in a second, follow-up interview over the phone in the next one to four weeks. This second interview will be much shorter and should only take about 15 minutes."

59. "Is it okay if I contact you again for a follow-up call?"

_____ Yes

_____ No

59a. If YES, "what is the best phone number to reach you?" _____

59b. If YES, "Thank you. I am going to leave photographs of the portion display models with you so that you will have them for reference when I call." Leave photographs with the respondent.

59c. If NO, remind respondent of the importance of this study and ask again.

60. "Thank you again for your time today, that is all." Complete information below.

Record interview end time and calculate interview length.

61. End time: _____ AM / PM (circle)

62. Length of interview: _____ (hours and/or minutes)

63. Was the interview conducted in private or were others present? (Check)

_____ In private

_____ Others were present

5.3 Post-Interview

Following the interview, the interviewer will assess and record the respondent's level of participation and the interviewer will acknowledge that he/she recorded the information truthfully and to the best of his/her ability by signing the following guarantee of authenticity.

5.3.1 Interview Quality

64. Respondents cooperation: (Check)

_____ Very good

_____ Good

_____ Fair

_____ Poor

65. Respondent's reliability: (Check)

_____ Highly reliable

_____ Generally reliable

_____ Questionable

_____ Unreliable

Notes / Reasons for opinions:

5.3.2 Interviewer Guarantee of Authenticity

66. I, _____ (printed name of interviewer) hereby affirm that the answers recorded on this questionnaire reflect a complete and accurate accounting of my interview with the respondent.

Signature of Interviewer

Date

6.0 SECOND 24-HOUR DIETARY RECALL

Based on the results of the first interview, which includes a 24-hour dietary recall, food frequency questionnaire, and general demographic information, a subset of individuals will be selected as “high” fish consumers for participation in a second 24-hour dietary recall by telephone. Words to be spoken by the interviewer are identified in bold. Questions will be asked in numeric order.

6.1 Administrative Information

Since this telephone interview will be conducted at a later date, general administrative information will be completed similar to the first interview (prior to questioning the respondent).

6.1.1 Interviewer Identification

1. Interviewer Name _____
2. Interviewer ID: _____

6.1.2 Respondent Identification

3. Respondent ID: _____
4. Phone number: _____

6.1.3 Interview Date, Time, and Location

5. Date: _____ / _____ / _____ (MM/DD/YYYY)
6. Day (of the week): _____
7. Start time: _____ AM / PM (circle)
8. City, State: _____

6.2 Introduction

“Hello, my name is _____, and I represent the _____ Tribe. We appreciate your continued willingness to participate in our fish consumption survey.

The information you provide during this interview, as well as your previous answers, will help us understand the rates of fish consumption, how fish is prepared, and the species or types of fish regularly eaten by members of the _____ Tribe.

The information that you provide during this interview is confidential. Your responses to the questions will be combined with those of others so that your answers cannot be identified. If you have any questions, please call me. Give phone number, if needed.

This follow-up survey is much shorter and should only take about 15 minutes. I will ask you to tell me how much fish you ate in the last 24 hours. If you do not know an answer or do not feel comfortable answering, we can skip that question.”

6.3 Fish Consumption

“The first questions are about your fish consumption yesterday. Please consider what you ate yesterday. I am going to ask you about EACH time you ate.”

9. “Please think about the first time you ate yesterday; when was that (name the eating occasion)? Did you eat fish during that occasion (which includes finfish, shellfish, and seafood)? Consider all meals and snacks, including fish within dishes such as soups. Include fish bought from a store, from a restaurant, or caught by you or someone else. Did you eat fish?” (Check)

_____ Yes

_____ No

If YES, continue to Question #10.

If NO, skip to Question #11.

10. **“What type of fish did you eat?”** (Refer to species display, enter in Table A-7).

10a. **“How much of (species type mentioned) did you eat?** (Refer to quantity display).

10b. **“How was (species type mentioned) prepared or cooked?** (Unprompted, check box in table).

10c. **“Where did (species type mentioned) come from? Was it from a market or store? From a restaurant? Or was it caught? If caught, was it caught in Idaho waters or outside of Idaho?”** (Check box in table).

Repeat Question #10 for first/second/third species type mentioned for that eating occasion and complete Table A-7.

11. **“Please think about the NEXT time you ate yesterday; when was that (name the eating occasion)? Did you eat fish? (Check)**

_____ Yes

_____ No

If YES, repeat Question #10 above for up to 6 eating occasions.

If NO, repeat Question #11 for all eating occasions yesterday.

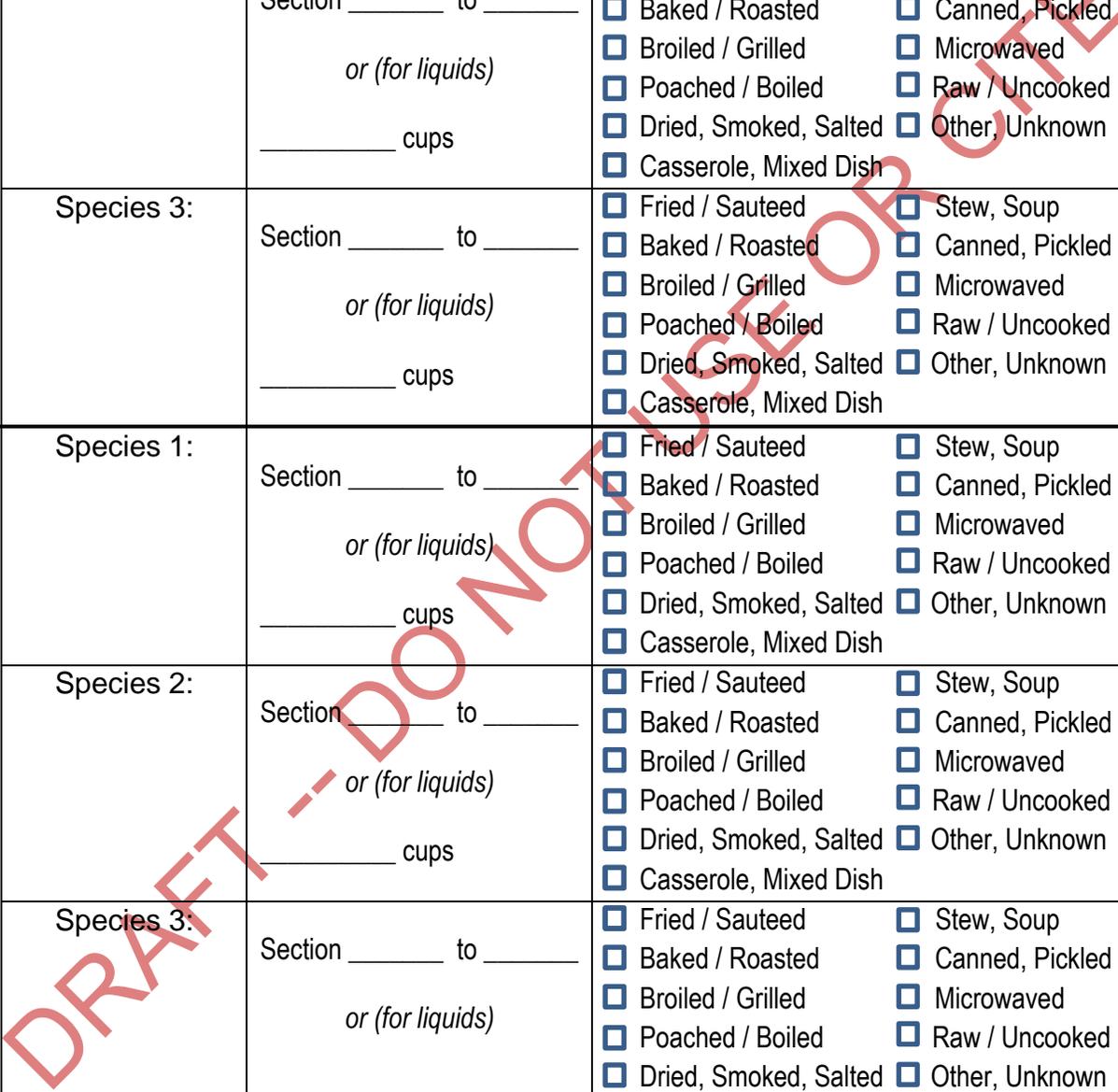
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Table A-7. 24-Hr Recall: Types, Quantities, Methods, and Sources of Fish Eaten Yesterday

Occasion # & Description ¹	Species Type <i>Write in names²</i>	Portion Size / Quantity <i>Enter from Displays</i>	Preparation / Cooking Method <i>Check box</i>	Source <i>Check box</i>
1	Species 1: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 2: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 3: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
2	Species 1: Section _____ to _____ <i>or (for liquids)</i> _____ cups		<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Stew, Soup <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Microwaved <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Other, Unknown <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho

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3		Species 2:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 1:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 2:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	Section _____ to _____ <i>or (for liquids)</i>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of



			_____ cups	<input type="checkbox"/> Casserole, Mixed Dish	Idaho
4	Species 1:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 2:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 3:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
5	Species 1:	Section _____ to _____ <i>or (for liquids)</i> _____ cups	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
	Species 2:	Section _____ to _____	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught

6			<p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 1:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 2:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho
		Species 3:	<p>Section _____ to _____</p> <p style="text-align: center;"><i>or (for liquids)</i></p> <p>_____ cups</p>	<input type="checkbox"/> Fried / Sauteed <input type="checkbox"/> Baked / Roasted <input type="checkbox"/> Broiled / Grilled <input type="checkbox"/> Poached / Boiled <input type="checkbox"/> Dried, Smoked, Salted <input type="checkbox"/> Casserole, Mixed Dish	<input type="checkbox"/> Stew, Soup <input type="checkbox"/> Canned, Pickled <input type="checkbox"/> Microwaved <input type="checkbox"/> Raw / Uncooked <input type="checkbox"/> Other, Unknown	<input type="checkbox"/> Market / Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Caught <input type="checkbox"/> In Idaho <input type="checkbox"/> Outside of Idaho

1. "Description" refers to a distinct fish-eating occasion defined by the respondent (breakfast, lunch, dinner, snack, or a time).
2. Write in name, will be coded later by species and anadromous, freshwater resident, or marine fish and shellfish.

6.4 Other Dietary Information

“Now I will ask you general questions about your diet.”

12. **“Was the amount of fish you ate yesterday more, less, or about the same as usual?”** (Check)

- More than usual
 Less than usual
 About the same as usual

13. **“Are you currently on any kind of diet, either to lose weight or for some other reason?”** (Check)

- Yes
 No
 Prefer not to answer

“This concludes the interview. Thank you SO very much for your time and cooperation today. Your participation will contribute significantly to the overall success of this survey and help protect the health of our Tribe. We will be calling a few people back just as a quality control measure. Thanks again for your time; that is all.”

6.5 Post-Interview

Following the interview, the interviewer will record the telephone interview end time and length and acknowledge that he/she recorded the information truthfully and to the best of his/her ability by signing the following guarantee of authenticity.

Record interview end time and calculate interview length.

14. End time: _____ AM / PM (circle)

15. Length of interview: _____ (hours and/or minutes)

16.I, _____ (printed name of interviewer) hereby affirm that the answers recorded on this questionnaire reflect a complete and accurate accounting of my interview with the respondent.

Signature of Interviewer

Date

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Questionnaire End

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