Proposed Survey Questions

Survey I. End User Survey
Objective: This survey will solicit input from users of food security system about degree of food insecurity and barriers to accessing food.

Degree of Food Insecurity
Q1. In the last 12 months, did you ever run short of money and try to make your food, or your food money go further?
   -Yes
   -No

Q2. In the last 12 months, which of these statements best describes the food eaten in your household?
   -Enough of the kinds of food we want to eat
   -Enough but not always the kinds of food we want to eat
   -Sometimes not enough to eat
   -Often not enough to eat
   -Enough of the kinds of food we want to eat
   -Don't know or decline to answer

If participants respond negatively to both questions above (2-item Food Sufficiency Screener) they will be screened out and will not complete the rest of the survey.

Q3. In the last 12 months, the food that I/we bought just did not last, and I/we did not have enough money to get more.
   -Often true
   -Sometimes true
   -Never true
   -Don't Know or Declined to answer

Q4. In the past year, has your household used any of the below strategies to make sure you have food? Check all that apply.
   -Got help from friends/outside family
   -Used the services of a community resource partner (e.g., food bank, school pantry, church food pantry, etc.)
   -Watered down food/drinks to make them last longer
   -Skipped or reduced the size of meals
   -Sold/pawned personal property
   -Purchased less expensive and/or more unhealthy foods/drinks
   -Grew food in own garden
   -Other

Q5. If you sought out food from a community resource partner (like a food bank), how often did you seek out food from a community resource partner?
   -Once a month
   -Once a week
   -Not every week, but more than once a month
Drivers of Food Insecurity

Q6. Do you (your children/someone in your household) have a medical condition or religious restrictions that influence food consumption?
- Yes
- No

If yes:
- Are you (your children/someone in your household) able to meet the dietary needs of [medical condition, if one is specified OR religious restrictions] with your current level of financial resources?

Q7. Which of the following best describes your employment status?
- Homemaker
- Student
- Seasonal work
- Employed for wages
- Out of work for less than 1 year
- Out of work for more than 1 year
- Retired
- Self-employed
- Unable to work

Q8. Do you currently have health coverage?
- Yes.
- No

If yes, check all that apply: whole family, myself, kids only, spouse/partner

Q9. What type of health coverage do ALL household members have? Check all that apply.
- Private Insurance
- Medicare/Medicaid
- Veteran’s Benefits
- Indian Health Services
- Disability

Q10. Which of the following best describes your housing situation? Check all that apply
- Rent
- Own
- Living with a friend and/or family member
- Have experienced rent increases in past 12 months
- Have moved more than once in the past 12 months

Q11. How confident are you that you will be able to pay next month’s rent or mortgage?
- Very confident
- Moderately confident
- Slightly confident
- Not at all confident

Q12. During those times that the food that you bought just did not last, and you did not have enough money to get more” – which of the following made it challenging to purchase more food? Check all that apply.
- Seasonal work
- Irregular work and/or extended periods of unemployment
- Unexpected health care expenses (due to health emergencies)
- Unexpected household expenses (e.g., car repairs)
- Increases in housing/rental costs
- Changes in family living arrangements (e.g., additional family members move in temporarily, frequent moves)

Q13. If you needed food in the last 12 months, but were not able to access it, what are some of the challenges you faced in accessing food? Check all that apply.
- Did not know who to contact or where to find services and food
- Limited transportation options made it difficult to travel to community resources
- Ineligibility/too many restrictions
- Language barriers
- Hours of operation are limited
- Cannot find foods that meet my/our dietary restrictions (cultural, medical)
- Limited physical mobility
- Concerned about interactions with government authorities
- Concerned about the social stigma of seeking resources
- Other. Please list.

Q14. Have you (your children/someone in your HH) sacrificed another basic need (e.g., housing, health care, etc.) to ensure that you were able to eat?
- Yes
- No

If yes, please specify

Q15. Do you or anyone in your household receive food assistance from any of these programs? Check all that apply.
- Commodity Supplemental Food Program/Senior Food Box
- Other Food Pantries
- Soup Kitchen
- School Breakfast/Lunch
- Summer Meal Program
- WIC (Women’s, Infant’s & Children’s Program)
- SNAP (Supplemental Nutrition Assistance Program)

Q16. Do your SNAP benefits run out before the end of the month?
- Yes
- No
- Not applicable (I am not a SNAP recipient)

Q17. Do you use other free or low-cost services to support your household (soup kitchen, medical services, housing services)?
- Yes
- No

If yes:
- Which services do you use?
- How did you learn about those services?
Access to (Healthy) Food

Q18. In the last 12 months, (I/we) couldn’t afford to eat balanced meals.
- Often true
- Sometimes true
- Never true
- Don’t Know or Declined to Answer

Q19. There is a grocery store within 5 miles of my home
- True
- False

Q20. When I shop for groceries, I
- Use my own car
- Borrow a family/friend’s car
- Walk
- Use public transportation

Q21. It is convenient for me to purchase fresh and healthy food.
- Strongly Agree
- Tend to Agree
- Tend to Disagree
- Strongly Disagree

Q22. Eating a fresh and healthy diet is affordable.
- Strongly Agree
- Tend to Agree
- Tend to Disagree
- Strongly Disagree

Q23. In the last 12 months, did you or anyone in your household get free groceries or a free meal?
- Yes
- No

Q24. If you answered yes), where did you get groceries?
A. School
- Pick up meals at a school or other location
- Receive an EBT card to help buy groceries
- Eat meals on-site, at school or other location
- Have meals delivered

B. Church
- Pick up meals at church
- Eat meals on-site, at church or other location
- Have meals delivered
- Participated in drive-through/pop-up

C. Community Food Pantry
- Pick up meals at food pantry
- Eat meals on-site, at food pantry or other location
- Have meals delivered
- Participated in drive-through/pop-up

D. Community Organization
- Pick up meals at community organization site
- Eat meals on-site, at or other location
- Have meals delivered
- Participated in drive-through/pop-up

E. Other (please list)

Q25. When you and your family seek out food, what trusted agencies/locations/resources do you access? Check all that apply.
- Food pantry at church
- Food pantry at school (e.g., provided by school or community organization)
- Local food pantry
- Local community organization (please list) (at site, or drive-thru, pop up, etc.)
- Other
- There are no food pantries in my area

Q26. When you and your family need to seek out food, what agencies or locations would you feel most comfortable accessing? Check all that apply.
- Church
- School
- Government agency
- Library
- Local Community Center
- Local Food Pantry
- Job training center

Demographic information:
- Age
- Military/veteran status
- Marital Status
- Race/ethnicity
- County in which you live
- Kids in the household
- Seniors/dependents in the household
- Documented disability
- Number of families living in household
- Experienced sudden change in the last 12 months
- Education level (high school graduate, less than high school, some college)
Survey II. Community Survey
Objective: To solicit input from providers of food, agency/institutional/community stakeholders (other than end users).

1. I am knowledgeable about food insecurity and how it can adversely affect health.
   a. True/False (T/F) OR
   b. Likert Scale (disagree, neither agree nor disagree, agree)

2. I am knowledgeable about referring patients to resources that address food insecurity (food banks, food pantries, etc.)
   a. T/F OR
   b. Likert Scale (disagree, neither agree nor disagree, agree)

3. Food insecurity is relevant to my client/patient population.
   a. T/F OR
   b. Likert Scale (disagree, neither agree nor disagree, agree)

4. I have referred my clients/patients to local emergency food resources/I plan to refer my clients/patients to emergency food resources.
   a. T/F OR
   b. Likert Scale (disagree, neither agree nor disagree, agree)

5. Food resources are located near low-income neighborhoods.
   a. T/F OR
   b. Likert Scale (disagree, neither agree nor disagree, agree)

6. Public transportation is available between resource centers and low-income neighborhoods.
   a. T/F OR
   b. Likert Scale (strongly disagree, disagree, neither agree nor disagree, agree, strongly agree)

7. Based on your direct experience and conversations with end users, what are the primary reasons community members encounter food insecurity? Open ended

8. Based on your direct experience and conversations with end users, what are the (structural) barriers faced by those who face food insecurity? Check all that apply.
   [ ] High housing costs
   [ ] Limited income
   [ ] Job insecurity/Seasonal work/periods of unemployment
   [ ] Unexpected health expenses
   [ ] Unexpected household expenses
   [ ] Sudden change in number of dependents living in household
   [ ] Other. Please list

9. What barriers limit people’s use of emergency food resources? Check all that apply.
   [ ] Lack of knowledge about where to access food
   [ ] Transportation barriers
   [ ] Ineligibility/too many restrictions
   [ ] Hours of operation are limited
Cannot find foods that meet my/our dietary restrictions
Other. Please list

10. Are there particular months during a 12-month period where demand seems higher or lower? If so, to what do you attribute the change in demand for food?

11. Based on your role and responsibility, do you believe there are gaps in the food security system? If so, what are these?

12. Based on your role and responsibility, do you believe there are unmet needs among those who face food insecurity? If so, what are these?

13. Are there organizational challenges your organization faces in addressing food insecurity among community members (and serving them)?

14. Are there capacity challenges your organization faces in addressing food insecurity among community members (and serving them)?

15. What strategies, policies, or programs are needed to more effectively address the food insecurity faced by community members?

16. What are the biggest challenges Nevada faces to eliminating food insecure individuals?