

PARTICIPANT ID \_\_\_ / \_\_\_ / \_\_\_\_\_

For data entry:

FFQ record no.	
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Socio record no.	
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**FIRST NATIONS FOOD, NUTRITION AND ENVIRONMENT STUDY (FNFNES)  
Year 2**

**Fall 2009**

**INTERVIEWER**, KEEP THIS FORM ATTACHED TO THE QUESTIONNAIRE AND USE IT TO CHECK THE RECORD FOR COMPLETENESS. THE NUTRITION RESEARCH COORDINATOR WILL CHECK AGAIN.

		<b>CHECK WHEN COMPLETED</b>	
		<b>CRA</b>	<b>NRC</b>
I.	Consent Form	_____	_____
II.	Traditional Food & Water Questionnaire	_____	_____
III.	24-hr recall	_____	_____
IV.	Social, Health and Lifestyle Questionnaire	_____	_____
V.	Food Security Questionnaire	_____	_____
VI.	Hair sample	_____	_____
VII.	Water sample ( <i>if applicable</i> )	_____	_____
VIII.	Repeated 24hr recall ( <i>if applicable</i> )	_____	_____

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## I. TRADITIONAL FOOD AND WATER QUESTIONNAIRE

Community Number \_\_\_\_\_

Participant's gender (1=female, 2=male) \_\_\_\_\_ Household number \_\_\_\_\_

Participant's age \_\_\_\_\_

Age group 19-40 years old \_\_\_\_\_ 41-60 years old \_\_\_\_\_ 61+ years old \_\_\_\_\_

### For women only:

Currently pregnant: Yes  No

Currently breastfeeding: Yes  No

Interview language: English  Other, please specify \_\_\_\_\_

Interviewer's Initials \_\_\_\_\_

Date of interview (dd/mm/yyyy) \_\_\_\_\_

This section contains 2 parts. The first part asks about the traditional foods that you have eaten in the past year and how often you ate them. The second part asks about the sources of water in your house, your average consumption of beverages and soups likely to contain water and the different sources water in your home used to make the beverages and soups.

### A. TRADITIONAL FOOD

This part is about traditional food – that is, food harvested within British Columbia. It can be in any form – for example: dried, smoked, fermented, fresh, frozen...  
I will begin by asking about fish that were harvested within the past year.

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I. In the past year, have you eaten any **FISH**?

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section - BEACH FOOD)

FISH SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN? (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
<b>SALTWATER</b>					
1. Salmon (any type)	No Yes→				
2. Salmon, Sockeye	No Yes→				
3. Salmon, Chinook (King/Spring)	No Yes→				
4. Salmon, Chum (Dog)	No Yes→				
5. Salmon, Pink	No Yes→				
6. Salmon, Coho	No Yes→				
7. Salmon eggs (pink/chum/coho/sockeye/Chinook)	No Yes→				
8. Pacific Cod (Grey)	No Yes→				
9. Black Cod (Sablefish)	No Yes→				
10. Ling Cod	No Yes→				
11. Rockfish (rock, red snapper, black bass, tiger, quill)	No Yes→				
12. Kelp greenling	No Yes→				
13. Halibut	No Yes→				
14. Starry Flounder/English sole	No Yes→				
15. Herring	No Yes→				
16. Herring roe	No Yes→				
17. Eulachon	No Yes→				
18. Eulachon grease	No Yes→				
<b>FRESHWATER</b>					
19. Trout (any type)	No Yes→				
20. Trout, Bull	No Yes→				
21. Trout, Dolly Varden	No Yes→				
22. Trout, Lake	No Yes→				

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FISH SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN? (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
23. Trout, Brook	No Yes→				
24. Trout, Brown	No Yes→				
25. Trout, Rainbow	No Yes→				
26. Trout, Steelhead	No Yes→				
27. Trout, Cutthroat	No Yes→				
28. Trout, Kokanee	No Yes→				
29. Whitefish (round ,mountain, lake)	No Yes→				
30. Cisco	No Yes→				
31. Inconnu (coney)	No Yes→				
32. Northern pike	No Yes→				
33. Burbot	No Yes→				
34. Arctic grayling	No Yes→				
35. Sucker (longnose, largescaled)	No Yes→				
36. Walleye (aka Pickerel)	No Yes→				
37. Chub (flathead, lake)	No Yes→				
38. Bass (smallmouth, largemouth)	No Yes→				
39. Black Crappie	No Yes→				
40. Yellow Perch	No Yes→				
41. Sturgeon (green/white)	No Yes→				
42. <b>OTHER FISH?</b> <b>LIST:</b>	No Yes→				

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II. In the past year, have you eaten any **BEACH FOODS**?

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section - SEA MAMMALS)

BEACH FOOD SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
43. Clams (any type)	No Yes→				
44. Geoduck	No Yes→	No Yes	No Yes	No Yes	No Yes
45. Horse clam	No Yes→	No Yes	No Yes	No Yes	No Yes
46. Razor clam	No Yes→	No Yes	No Yes	No Yes	No Yes
47. Butters	No Yes→	No Yes	No Yes	No Yes	No Yes
48. Steamers (littleneck/manilas)	No Yes→	No Yes	No Yes	No Yes	No Yes
49. Basket Cockle	No Yes→				
50. Mussels, (large and small)	No Yes→				
51. Oysters	No Yes→				
52. Scallops (Rock, Spiny, Giant Pacific)	No Yes→				
53. Abalone	No Yes→				
54. Crab (Dungeness, King, Tanner) – meat	No Yes→				
55. Crab – guts (hepatopancreas)	No Yes→				
56. Sea prunes (black chitin)	No Yes→				
57. China slippers (gumboot) –	No Yes→				
58. Sea Urchin eggs(green, red, purple)	No Yes→				
59. Sea cucumber	No Yes→				
60. Barnacle (goose neck, giant/acorn)	No Yes→				
61. Shrimp	No Yes→				
62. Prawn	No Yes→				
63. Octopus	No Yes→				

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BEACH FOOD SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
<b>SEAWEED</b>					
64. Laver	No Yes→				
65. Rockweed	No Yes→				
66. Sea lettuce	No Yes→				
67. Kelp	No Yes→				
68. <b>OTHER BEACH FOOD? LIST:</b>	No Yes→				

III. In the past year, have you eaten any **SEA MAMMALS**?

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section - LAND MAMMALS)

SEA MAMMAL SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
69. Harbour Seal meat	No Yes→				
70. Harbour Seal fat:	No Yes→				
71. Harbour Seal organs: specify: a) b) c)	No Yes→				
72. Sea Lion meat	No Yes→				
73. Sea Lion grease	No Yes→				

SEA MAMMAL SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
74. Sea Lion organs: specify: a) b) c)	No Yes→				
75. OTHER SEA MAMMALS LIST:	No Yes→				

IV. In the past year, have you eaten any wild game (**LAND MAMMALS**)?

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  *(If No, go to next section - WILD BIRDS)*

LAND MAMMAL SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
76. Deer meat	No Yes→				
77. Deer liver	No Yes→				
78. Deer kidney	No Yes→				
79. Elk meat	No Yes→				
80. Elk liver	No Yes→				
81. Elk kidney	No Yes→				
82. Moose meat	No Yes→				
83. Moose liver	No Yes→				
84. Moose kidney	No Yes→				
85. Caribou meat	No Yes→				
86. Caribou liver	No Yes→				

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LAND MAMMAL SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
87. Caribou kidney	No Yes→				
88. Sheep meat (Bighorn, Stone/Dall's)	No Yes→				
89. Mountain Goat meat	No Yes→				
90. Beaver meat	No Yes→				
91. Porcupine meat	No Yes→				
92. Groundhog meat	No Yes→				
93. Muskrat meat	No Yes→				
94. Gopher	No Yes→				
95. Black bear meat	No Yes→				
96. Black bear fat	No Yes→				
97. Rabbit (Snowshoe Hare/Jackrabbit meat, rabbit)	No Yes→				
98. <b>OTHER LAND MAMMALS?</b> <b>LIST:</b>	No Yes→				

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V. In the past year, have you eaten any **WILD BIRDS** such as ducks, geese, grouse  
 Yes  For each of the following species, I will be asking you if, in the past year,  
 you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section - BERRIES)

WILD BIRD SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
<b>99. Ducks, non fish-eating (all combined)</b>	No Yes→				
100. Scoter (surf, white winged, common)	No Yes→	No Yes	No Yes	No Yes	No Yes
101. Goldeneye	No Yes→	No Yes	No Yes	No Yes	No Yes
102. Oldsquaw (aka Stellar's Elder Duck, Old Duck)	No Yes→	No Yes	No Yes	No Yes	No Yes
103. Canvasback	No Yes→	No Yes	No Yes	No Yes	No Yes
104. Wood Duck	No Yes→	No Yes	No Yes	No Yes	No Yes
105. Ruddy Duck	No Yes→	No Yes	No Yes	No Yes	No Yes
106. American Wigeon	No Yes→	No Yes	No Yes	No Yes	No Yes
107. Northern Pintail	No Yes→	No Yes	No Yes	No Yes	No Yes
108. Mallard	No Yes→	No Yes	No Yes	No Yes	No Yes
109. Northern Shoveler	No Yes→	No Yes	No Yes	No Yes	No Yes
110. Teal (Green-winged, blue-winged, cinnamon)	No Yes→	No Yes	No Yes	No Yes	No Yes
111. Loon (common, yellow billed, red throated)	No Yes→				
112. Merganser (common, hooded)	No Yes→				
113. Grebe (western, pied billed, horned)	No Yes→				
114. Murre	No Yes→				
115. Geese (Canada, brant, snow, greater white fronted)	No Yes→				
116. Swan (mute, trumpeter)	No Yes→				
117. Grouse (Blue, Ruffed)	No Yes→				

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WILD BIRD SPECIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sept-Nov)
118. Ptarmigan( Willow, white tailed, rock)	No Yes→				
119. Quail	No Yes→				
<b>BIRD EGGS</b>					
120. Seagull eggs	No Yes→				
121. Oystercatcher eggs	No Yes→				
122. Goose eggs	No Yes→				
123. Other bird eggs (specify):	No Yes→				
<b>124. OTHER BIRD OR BIRD egg LIST:</b>	No Yes→				

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This last section asks about your use of wild berries, roots, shoots, greens, tree foods and mushrooms over the last year. At the end, we will also ask about plants obtained from your garden.

VI. In the past year have you eaten any **WILD BERRIES**?

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section - WILD PLANT ROOTS, SHOOTS OR GREENS)

WILD BERRIES	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sep-Nov)
125. Bunchberries	No Yes→				
126. Crowberry	No Yes→				
127. Salal berries	No Yes→				
128. Soapberries	No Yes→				
129. Wild Strawberry	No Yes→				
130. Kinnikinnick Bearberry	No Yes→				
131. Salmonberries	No Yes→				
132. Thimbleberries	No Yes→				
133. Cloudberries	No Yes→				
134. Blackberry, trailing	No Yes→				
135. Blackberry, large (himalyan)	No Yes→				
136. Black caps (black raspberry)	No Yes→				
137. Raspberry (wild, creeping)	No Yes→				
138. Blueberries (alaska, oval leaved, bog)	No Yes→				
139. Cranberry (low-bush/lingonberry, bog)	No Yes→				
140. Highbush Cranberry	No Yes→				
141. Blue huckleberry	No Yes→				
142. Red huckleberry	No Yes→				
143. Elderberry (blue, red)	No Yes→				
144. Gooseberry/currant	No Yes→				

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	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season) <i>(If never eaten write 0 across)</i>			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sep-Nov)
<b>WILD BERRIES</b>					
145. Hazelnut	No Yes→				
146. Rose hips	No Yes→				
147. False Solomon's Seal berries	No Yes→				
148. Oregon Grape (low, dull, tall)	No Yes→				
149. Hawthorn (black, red)	No Yes→				
150. Saskatoon berry	No Yes→				
151. Chokecherry	No Yes→				
152. Crabapple	No Yes→				
153. Indian plum	No Yes→				
154. Juniper berries	No Yes→				
155. <b>OTHER BERRIES LIST:</b>	No Yes→				

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VII. In the past year have you eaten any **WILD PLANT ROOTS, SHOOTS OR GREENS?**

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section – TREE FOODS)

WILD PLANT ROOTS, SHOOTS AND GREENS	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June- Aug)	Spring (March- May)	Winter (Dec-Feb)	Fall (Sep-Nov)
<b>ROOTS</b>					
156. Northern rice root, Tiger or Chocolate lily	No Yes→				
157. Yellow avalanche lily	No Yes→				
158. Camas bulb	No Yes→				
159. Indian potato (Spring beauty)	No Yes→				
160. Balsam root	No Yes→				
161. Bitterroot	No Yes→				
162. Mariposa lily (sweet onion, wild potatoes)	No Yes→				
163. Onion (nodding, hooker's)	No Yes→				
164. Bracken fern root	No Yes→				
165. Spiny wood fern root	No Yes→				
166. Licorice Fern	No Yes→				
167. Wild Ginger	No Yes→				
168. Desert Parsley	No Yes→				
169. Silverweed	No Yes→				
170. Prince's Pine	No Yes→				
171. Springbank Clover root	No Yes→				
172. Thistle	No Yes→				
173. Wapato bulb	No Yes→				
174. Indian potato (Bear root, Eskimo potato, Alaska carrot, sweet vetch)	No Yes→				
175. Rat root	No Yes→				

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WILD PLANT ROOTS, SHOOTS AND GREENS	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season)  (If never eaten write 0 across)			
		Summer (June- Aug)	Spring (March- May)	Winter (Dec-Feb)	Fall (Sep-Nov)
<b>SHOOTS</b>					
176. Thimbleberry, salmonberry shoots	No Yes→				
177. Cow-parsnip shoots	No Yes→				
178. Fireweed shoots	No Yes→				
179. Giant horsetail shoots	No Yes→				
180. Bigleaf Maple shoots	No Yes→				
<b>GREENS</b>					
181. Desert parsley (Swale, barestem, nine-leaved)	No Yes→				
182. Prickly pear cactus	No Yes→				
183. Labrador Tea leaves	No Yes→				
184. Stinging nettle leaves	No Yes→				
185. Sorrel	No Yes→				
186. Sheep sorrel	No Yes→				
187. Western Dock	No Yes→				
187a. Devil's club	No Yes→				
<b>188. OTHER PLANTS LIST:</b>	No Yes→				

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VIII. In the past year, have you eaten any **TREE FOODS**

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section - MUSHROOMS)

<b>TREE FOODS</b> Inner bark=cambium Gum=pitch	Did you have ANY during the past year? (circle the correct answer)	APPROXIMATELY HOW OFTEN (ie. How many DAYS per season) (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sep-Nov)
189. Balsam Tree inner bark	No Yes→				
190. Balsam pitch	No Yes→				
191. Birch inner bark	No Yes→				
192. Birch pitch	No Yes→				
193. Poplar (cottonwood) inner bark	No Yes→				
194. Black poplar buds	No Yes→				
195. Lodgepole pine ('jack pine) inner bark	No Yes→				
196. Pine needle/twig tea	No Yes→				
197. Pine pitch	No Yes→				
198. Spruce (black or white) inner bark	No Yes→				
199. Spruce (black or white) pitch	No Yes→				
200. Red willow (bark)	No Yes→				
201. Red willow root	No Yes→				
202. <b>Other Tree Products (specify)</b>	No Yes→				

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IX. In the past year, have you eaten any **MUSHROOMS**

Yes  For each of the following species, I will be asking you if, in the past year, you ate it and if so, the number of times that you believe you ate this food in each season.

No  (If No, go to next section of survey)

MUSHROOMS	Did you have ANY during the past year? (circle the correct answer)	HOW OFTEN (ie. How many DAYS per season) (If never eaten write 0 across)			
		Summer (June-Aug)	Spring (March-May)	Winter (Dec-Feb)	Fall (Sep-Nov)
203. Cottonwood	No Yes→				
204. Oyster	No Yes→				
205. Pine	No Yes→				
206. Chanterelle	No Yes→				
207. Morel	No Yes→				
208. <b>Other Mushrooms (specify)</b>	No Yes→				

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**X. In the past year, have you eaten any vegetables and fruit from your garden or a community garden?**

No  (If No, go to section B of survey)

Yes  If yes, did you eat vegetables and fruit from (please circle):

a) a private garden (family/friend's garden)

b) a community garden

c) both a + b

Please list the garden grown fruits and vegetables that you ate:

1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

## B. DRINKING AND COOKING WATER

This part of the interview pertains to the drinking water that you consume. It is divided into two sections. In the first section, I will be asking about the sources of water in your house. Then, I will ask about your average consumption of beverages and soups likely to contain water and the different sources water in your home used to make the beverages and soups.

### QUESTIONS ABOUT SOURCE OF WATER

First, I would like to ask a few questions about your home that will provide important background information about how you obtain the water you use in your home.

1. Does your house have tap water? YES  NO
- 2a. Do you drink the tap water in your house? YES  NO
- 2b. Does the taste of chlorine prevent you from drinking the tap water?  
YES  NO  SOMETIMES
3. Do you use the tap water in your house to prepare food? YES  NO
4. *If your house has tap water, where does it come from?*
  - \_\_\_\_\_ Treatment plant
  - \_\_\_\_\_ Well
  - \_\_\_\_\_ Spring
  - \_\_\_\_\_ Stream/river
  - \_\_\_\_\_ Lake/Pond
  - \_\_\_\_\_ Rainwater cistern
  - \_\_\_\_\_ Trucked-in
  - \_\_\_\_\_ Other, please specify: \_\_\_\_\_
5. *If your house does not have tap water or you do not always drink tap water, what type of water do you use for drinking?*
  - \_\_\_\_\_ Bottled water
  - \_\_\_\_\_ Well
  - \_\_\_\_\_ Spring
  - \_\_\_\_\_ Stream/river
  - \_\_\_\_\_ Lake/Pond
  - \_\_\_\_\_ Rainwater cistern
  - \_\_\_\_\_ Trucked-in water
  - \_\_\_\_\_ Other, please specify: \_\_\_\_\_
  - \_\_\_\_\_ Not applicable

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6. *If your house does not have tap water or you do not use the tap water to prepare foods and beverages, what type of water do you use?*

- \_\_\_\_\_ Bottled water
- \_\_\_\_\_ Well
- \_\_\_\_\_ Spring
- \_\_\_\_\_ Stream/river
- \_\_\_\_\_ Lake/Pond
- \_\_\_\_\_ Rainwater cistern
- \_\_\_\_\_ Trucked-in water
- \_\_\_\_\_ Other, please specify: \_\_\_\_\_
- \_\_\_\_\_ Not applicable

7. In what year was this home built? \_\_\_\_\_ Do not know

8a. Has the plumbing been upgraded? YES  NO  (if NO, go to Q. 9)  
Do not know  (if do not know, go to Q. 9)

8b. In what year? \_\_\_\_\_ Do not know

8c. Please describe the upgrades: \_\_\_\_\_

9a. Do you treat the water in your house (e.g. filters, boil, tablets, softeners)?  
YES  NO  (if NO, go to Q. 10)

9b. Please describe: \_\_\_\_\_

10a. Do you have an outside water storage system?  
YES  NO  (if NO, go to Q. 11)

10b. What is it made out of (for example, plastic or galvanized iron)?  
\_\_\_\_\_

10c. How big is it? \_\_\_\_\_

11. **IMPORTANT:** Ask the participant's permission to look under the sink to determine the types of pipes. Once the participant has agreed, look under the sink and record if the pipes are made of metals or plastic:

- \_\_\_\_\_ Plastic pipes
- \_\_\_\_\_ Metal pipes. *Specify type of metal:* \_\_\_\_\_
- \_\_\_\_\_ Plastic pipes with metal fittings *Specify type of metal:* \_\_\_\_\_
- \_\_\_\_\_ Other, *please specify* \_\_\_\_\_

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### **QUANTIFICATION OF WATER CONSUMPTION**

Now, I want to quantify your average consumption of beverages and soups likely to contain water and to identify the different sources of the tap water in your home used to make the beverages and soups. In order to quantify your average consumption of beverages and soups, we will use a cup (250 ml) as a reference (at this point, the interviewer will show the cup to the participant).

On average, how many cups per day of each of the following items do you drink or eat?

<b>ITEM</b>	<b>Daily Use (cups per day)</b>	<b>Main source of water</b>
1. Water		
2. Coffee		
3. Tea (any kind)		
4. Hot chocolate		
5. Juice made from concentrated or crystals		
6. Powdered milk		
7. Broth		
8. Soup		
9. Stew		
10. <b>Other food or beverage. Please specify:</b> a) b) c) d) e)		









Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

1. Yesterday, did you modify your diet to lose weight? YES  NO

2. Do you know your height? YES  NO

Reported height \_\_\_\_\_(centimeters) OR \_\_\_\_\_ (feet and inches)

3. Do you know your weight? YES  NO

Reported weight \_\_\_\_\_ (pounds)

4. Do you want to have your height and weight measured now? YES  NO

Measured height \_\_\_\_\_(centimeters)

Measured weight \_\_\_\_\_(pounds)

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

### III. SOCIAL, HEALTH AND LIFESTYLE QUESTIONNAIRE

This questionnaire is short and addresses questions about your household and the role and use of traditional food in your household. Remember, traditional food is food that is coming from the local land and environment, such as fish, birds, land animals and plants. Can I start with the first question?

1. How many persons, including yourself, live in your household now? (i.e., this month) Include children and adults, but not visitors. To live in your household, this means that they have meals and sleep there at least 3 nights per week.

- a. How many are less than 15 yrs of age \_\_\_\_\_
- b. How many are between 15 and 65 \_\_\_\_\_
- c. How many are over 65 \_\_\_\_\_

2. How many persons, including yourself, living in your household are either self-employed or an employee now? (i.e., this month)

- a. Full-time ( $\geq 35$  hours/week) \_\_\_\_\_
- b. Part-time ( $< 35$  hours/week) \_\_\_\_\_

3. What is your main source of income? (*circle one*)

- a. Wages/salary/self-employment
- b. Pension/seniors benefits
- c. Social assistance
- d. Worker's compensation/employment insurance

4a. How many years of school have you completed? Please don't count partial years, kindergarten or grades repeated \_\_\_\_\_ years

4b. Have you obtained the following diplomas, certificates, or degrees?:

- a. High school diploma YES  NO
- b. GED (high school equivalency) YES  NO  Not applicable
- c. Vocational training certificate YES  NO
- d. CEGEP diploma (Quebec only) YES  NO  Not applicable
- e. Bachelor's degree YES  NO
- f. Master's degree YES  NO
- g. Doctorate degree YES  NO

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

5. During the past year, did you personally:

- a. Hunt or set snares for food? YES  NO
- b. Fish? YES  NO
- c. Collect wild plant food? YES  NO
- d. Collect seafood? YES  NO
- e. Plant a garden? YES  NO

6. During the past year, did anyone else in your household:

- a. Hunt or set snares for food? YES  NO
- b. Fish? YES  NO
- c. Collect wild plant food? YES  NO
- d. Collect seafood? YES  NO
- e. Plant a garden? YES  NO

7. In the following question, we would like to know how you compare traditional (wild) and market (store-bought) foods:

a. What do you think are the most important benefits of traditional food? Please state as many as you wish.

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b. What do you think are the most important benefits of market food? Please state as many as you wish.

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8a. Would your household like to have more traditional food?

YES  NO  (if NO, go to Q. 9)

8b. Can you tell me what prevents your household from using more traditional food?

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Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

8c. Some families might say, “**We worried whether our traditional food would run out before we could get more.**” In the last 12 months, did that happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don't know or refused

8d. Some families might say, “**The traditional food that we got just didn't last, and we couldn't get any more.**” In the last 12 months, did that happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don't know or refused

9a. Have you noticed any significant climate change in your traditional territory in the last 10 years?

YES  NO  (if NO, go to Q. 10)

9b. Can you tell me one way how this has affected traditional food availability in your household?

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10a. Do any of the following affect (or limit) where you can hunt, fish or collect berries?

- |                            |                              |                             |                                      |
|----------------------------|------------------------------|-----------------------------|--------------------------------------|
| a. Mining                  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |
| b. Forestry                | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |
| c. Oil and gas             | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |
| d. Hydro                   | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |
| e. Farming                 | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |
| f. Government restrictions | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |
| g. Other                   | YES <input type="checkbox"/> | NO <input type="checkbox"/> | DO NOT KNOW <input type="checkbox"/> |

if yes, please specify: \_\_\_\_\_



#### IV. FOOD SECURITY QUESTIONNAIRE

This last section asks questions about being able to afford food for your household. Some of the questions are very personal and may be difficult for you to answer. However, this information will help community and health leaders to have a better understanding of problems facing families in this community and to design better programs to help. Like the rest of the questionnaire, this information is strictly confidential and no names will be released to the community or government.

I would like to read a series of statements that describe the experience of some households.

The first statements are about the food eaten in your household in the last 12 months and whether you were able to afford the food you need. For each of these statements, please tell me whether this happened **often**, **sometimes** or **never** for your household in the last 12 months.

1. Some families might say, “**We couldn’t afford to eat healthy meals.**” In the last 12 months, did this happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don’t know or refused

2. Some families might say, “**We worried whether our food would run out before we got money to buy more.**” In the last 12 months, did that happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don’t know or refused

3. Some families might say, “**The food that we bought just didn’t last, and we didn’t have money to get more.**” In the last 12 months, did that happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don’t know or refused

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

**[IF CHILDREN UNDER 18 IN HOUSEHOLD, ASK QUESTIONS 4 AND 5; OTHERWISE SKIP TO 1<sup>ST</sup> LEVEL SCREEN]**

4. Some families might say, “**We could only feed our children less expensive foods because we were running out of money to buy food.**” In the last 12 months, did this happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don't know or refused

5. Some families might say, “**We couldn't feed our children a healthy meal, because we couldn't afford that.**” In the last 12 months, did that happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don't know or refused

**[1<sup>ST</sup> LEVEL SCREEN (SCREENER FOR STAGE 2): IF PARTICIPANT ANSWERS “OFTEN OR SOMETIMES” TO ANY ONE OF QUESTIONS 1 TO 5, THEN CONTINUE TO STAGE 2; OTHERWISE, GO TO *ADDITIONAL COMMENTS*, PAGE 34]**

**STAGE 2 [IF CHILDREN UNDER 18 IN HOUSEHOLD, ASK QUESTION 6; IF NOT, SKIP TO QUESTION 7]**

6. Some families might say, “**The children were not eating enough because we just couldn't afford enough food.**” In the last 12 months, did this happen often, sometimes, or never for your household?

- a. Often
- b. Sometimes
- c. Never
- d. Don't know or refused

7. **Since October** last year, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

- a. Yes
- b. No  (if No, go to Q. 9)
- c. Don't know or refused  (if No, go to Q. 9)

8. **[IF YES ABOVE, ASK]** How often did this happen... almost every month, some months but not every month, or in only 1 or 2 months?

- a. Almost every month
- b. Some months but not every month
- c. Only 1 or 2 months
- d. Don't know or refused

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

9. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

- a. Yes
- b. No
- c. Don't know or refused

10. In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

- a. Yes
- b. No
- c. Don't know or refused

11. In the last 12 months, did you lose weight because you didn't have enough money for food?

- a. Yes
- b. No
- c. Don't know or refused

**2<sup>ND</sup> LEVEL SCREEN (SCREENER FOR STAGE 3): [IF PARTICIPANT ANSWERED "YES" TO ANY ONE OF QUESTIONS 6 TO 11, THEN CONTINUE TO STAGE 3; OTHERWISE, GO TO *ADDITIONAL COMMENTS*, PAGE 34]**

**STAGE 3**

12. In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?

- a. Yes
- b. No  (if No, go to Q. 14)
- c. Don't know or refused  (if No, go to Q.14)

13. **[IF YES ABOVE, ASK]** How often did this happen... almost every month, some months but not every month, or in only 1 or 2 months?

- a. Almost every month
- b. Some months but not every month
- c. Only 1 or 2 months
- d. Don't know or refused

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

**[IF CHILDREN UNDER 18 IN HOUSEHOLD, ASK QUESTIONS 14 to 17; OTHERWISE, GO TO *ADDITIONAL COMMENTS*, PAGE 34]**

**The next 4 questions are about persons living in the household who are under 18 years of age.**

14. In the last 12 months (since October of last year), did you ever cut the size of their meals because there wasn't enough money for food?

- a. Yes
- b. No
- c. Don't know or refused

15. In the last 12 months, did any of the children ever skip meals because there wasn't enough money for food?

- a. Yes
- b. No  (if No, go to Q. 17)
- c. Don't know or refused  (if No, go to Q.17)

16. **[IF YES ABOVE, ASK]** How often did this happen... almost every month, some months but not every month, or in only 1 or 2 months?

- a. Almost every month
- b. Some months but not every month
- c. Only 1 or 2 months
- d. Don't know or refused

17. In the last 12 months, were the children ever hungry but you just couldn't afford more food?

- a. Yes
- b. No
- c. Don't know or refused

18. In the last 12 months, did your children ever not eat for a whole day because there wasn't enough money for food?

- a. Yes
- b. No
- c. Don't know or refused

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

**ADDITIONAL COMMENTS**

Do you have any additional comments to mention regarding traditional food, market food, or any of the points we covered or may have missed?

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Thank you  
**[Interviewer, make sure all the pages have been completed]**

Participant ID: \_\_ \_\_ / \_\_ / \_\_ \_\_ \_\_

## V. HAIR SAMPLE

Now, I would like to ask your permission for a hair sample to measure mercury? Can I explain? (EXPLAIN PROTOCOL AS OUTLINED IN GUIDE)

Would you agree to a hair sample?      YES     NO

*(If YES, proceed with hair sampling)*

***The following parts apply only for the 20 randomly-selected households on the list provided by the Nutrition Research Coordinator. Please check if the participant resides in one of those households. If not, end the interview and thank the participant for his/her time.***

## VI. WATER SAMPLE AND VII REPEATED 24-HR RECALL

I would like to come back and complete a 2<sup>nd</sup> 24-hr recall with you and collect a tap water sample. Can I explain? (EXPLAIN PROTOCOL AS OUTLINED IN GUIDE)

Would you agree?              YES     NO

*(If YES, record proposed date and time)*

Date: \_\_\_\_\_

Time: \_\_\_\_\_

***If the participant agrees to participate in the Drinking Water Component of the FNFNES, use Appendix 3 to make sure that all elements have been done and to record measured water quality parameters***