Healthfulness Choice

*Note: Question numbering refers to the unique item identifiers referenced in the user’s guidance documents. Feel free to note these unique identifiers and then modify the numbering as needed. Delete this note and any additional notes as well, prior to using.*

**The following questions ask about your household's ability to be able to decide what you eat.**

**N5.** In the last 12 months, (I/we) could control if (I/we) were able to eat quality fruits and vegetables.

* Never
* Rarely
* Sometimes
* Often
* Always
* Don’t know

**N6.** In the last 12 months, (I/we) could control if (I was/we were) able to eat foods that were good for (my/our) health and well-being.

* Never
* Rarely
* Sometimes
* Often
* Always
* Don’t know

**N7.** In the last 12 months, (I/we) could control if (I/we) did or didn’t have only processed foods from a box, bag, or can to eat (e.g., mac and cheese, ramen noodles, canned ravioli, frozen TV dinners, or other processed foods).

* Never
* Rarely
* Sometimes
* Often
* Always
* Don’t know