

## HOUSEHOLD FOOD INSECURITY ACCESS SCALE (HFIAS)

ID NUMBER:

FORM CODE: FIS  
 VERSION: 1.0 09/03/2024

Event: \_\_\_\_\_

0a) Date of Collection:   /   /

0b) Staff Code:

**Instructions:** This form should be administered by research staff during the participant's in-person clinic visit.  
[Click here to see the HFIAS interview guide for administering instructions.](#)

- 1) In the past four weeks (30 days), did you worry that your household would not have enough food?
- No<sub>0</sub> → **Go to 2**
- Yes<sub>1</sub>

1a) How often did this happen?

- Rarely (once or twice in the past four weeks)<sub>1</sub>
- Sometimes (three to ten times in the past four weeks)<sub>2</sub>
- Often (more than ten times in the past four weeks)<sub>3</sub>

- 2) In the past four weeks (30 days), were you or any household member not able to eat the kinds of foods you preferred because of a lack of resources?

- No<sub>0</sub> → **Go to 3**
- Yes<sub>1</sub>

2a) How often did this happen?

- Rarely (once or twice in the past four weeks)<sub>1</sub>
- Sometimes (three to ten times in the past four weeks)<sub>2</sub>
- Often (more than ten times in the past four weeks)<sub>3</sub>

- 3) In the past four weeks (30 days), did you or any household member have to eat a limited variety of foods due to a lack of resources?

- No<sub>0</sub> → **Go to 4**
- Yes<sub>1</sub>

3a) How often did this happen?

- Rarely (once or twice in the past four weeks)<sub>1</sub>
- Sometimes (three to ten times in the past four weeks)<sub>2</sub>
- Often (more than ten times in the past four weeks)<sub>3</sub>

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4) In the past four weeks (30 days), did you or any household member have to eat some foods that you really did not want to eat because of a lack of resources to obtain other types of food?

No<sub>0</sub> → **Go to 5**

Yes<sub>1</sub>

4a) How often did this happen?

Rarely (once or twice in the past four weeks)<sub>1</sub>

Sometimes (three to ten times in the past four weeks)<sub>2</sub>

Often (more than ten times in the past four weeks)<sub>3</sub>

5) In the past four weeks (30 days), did you or any household member have to eat a smaller meal than you felt you needed because there was not enough food?

No<sub>0</sub> → **Go to 6**

Yes<sub>1</sub>

5a) How often did this happen?

Rarely (once or twice in the past four weeks)<sub>1</sub>

Sometimes (three to ten times in the past four weeks)<sub>2</sub>

Often (more than ten times in the past four weeks)<sub>3</sub>

6) In the past four weeks (30 days), did you or any household member have to eat fewer meals in a day because there was not enough food?

No<sub>0</sub> → **Go to 7**

Yes<sub>1</sub>

6a) How often did this happen?

Rarely (once or twice in the past four weeks)<sub>1</sub>

Sometimes (three to ten times in the past four weeks)<sub>2</sub>

Often (more than ten times in the past four weeks)<sub>3</sub>

7) In the past four weeks (30 days), was there ever no food to eat of any kind in your household because of lack of resources to get food?

No<sub>0</sub> → **Go to 8**

Yes<sub>1</sub>

7a) How often did this happen?

Rarely (once or twice in the past four weeks)<sub>1</sub>

Sometimes (three to ten times in the past four weeks)<sub>2</sub>

Often (more than ten times in the past four weeks)<sub>3</sub>

8) In the past four weeks (30 days), did you or any household member go to sleep at night hungry because there was not enough food?

No<sub>0</sub> → **Go to 9**

Yes<sub>1</sub>

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8a) How often did this happen?

- Rarely (once or twice in the past four weeks)<sub>1</sub>
- Sometimes (three to ten times in the past four weeks)<sub>2</sub>
- Often (more than ten times in the past four weeks)<sub>3</sub>

9) In the past four weeks (30 days), did you or any household member go a whole day and night without eating anything because there was not enough food?

- No<sub>0</sub> → **Go to End**
- Yes<sub>1</sub>

9a) How often did this happen?

- Rarely (once or twice in the past four weeks)<sub>1</sub>
- Sometimes (three to ten times in the past four weeks)<sub>2</sub>
- Often (more than ten times in the past four weeks)<sub>3</sub>

**END OF FORM**