

NIS Child Influenza Module (NIS-CIM)
Hard Copy Questionnaire
Q2/2024

Confidential Information

Information contained on this form which would permit identification of any individual or establishment will be held in strict confidence by NORC and CDC, will be used only for purposes stated in this study, and will not be disclosed or released to anyone other than authorized staff of CDC or its agent without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242.m)

Variable Name	Response Definition
P_INCENT	0 - no incentive offer 1-3 - \$20 incentive 4-6 - \$10 incentive
P_ASKADULT	0 - Do not ask Adult COVID Module interview 1 – Invoke Adult COVID Module interview
NIS_SPRING_FLU	0- Do not ask Spring Flu questions 1- Invoke Spring Flu questions

LF_INTRO Thank you for your answers, now I have some questions about other children in your household.

CONTINUE TO LF_UNDR18 1

LF_UNDR18 Please tell me how many people less than 18 years old live in this household.

ENTER NUMBER OF CHILDREN _____

IF NO CHILDREN ENTER 0

IF P_ASKADULT=1
THEN GO TO
ADLT_INTRO; ELSE IF
P_ASKADULT=0 AND
P_INCENT>0 GO TO
VRYADD; ELSE GO TO
LF_NOCHILD
SEE ADDITIONAL
INSTRUCTIONS
GO TO
LF_ASK_ANOTHER
GO TO LF_AREF

IF GREATER THAN 0

DON'T KNOW 77

REFUSED 99

ADDITIONAL INSTRUCTIONS:
ELSE IF P_ASKTEN=0 THEN DO:

IF LF_UNDR18=0 and S_NUMB > LF_UNDR18, THEN GO TO LF_U18CF
ELSE IF LF_UNDR18=0 AND IF P_ASKADULT=1, THEN GO TO ADLT_INTRO
ELSE IF LF_UNDR18=0 AND P_ASKADULT=0 AND P_INCENT > 0, THEN GO TO
VRYADD
ELSE IF LF_UNDR18=0, THEN GO TO LF_NOCHILD
ELSE IF LF_UNDR18 > 0 AND S_NUMB > LF_UNDR18, THEN GO TO LF_U18CF
ELSE IF LF_UNDR18 > 0, THEN GO TO LF_AGE

LF_U18CF WARNING: ACCORDING TO NIS THERE [IF S_NUMB=1 THEN FILL: IS / IF S_NUMB >1 THEN FILL: ARE] AT LEAST [FILL: S_NUMB] [IF S_NUMB = 1 THEN FILL: CHILD / IF S_NUMB > 1 then FILL: CHILDREN] IN THE HOUSEHOLD.

PLEASE RE-ASK LF_UNDR18 ASKING FOR ALL OF THE CHILDREN IN THE HOUSEHOLD.

HELP SCREEN: A CHILD IS COUNTED AS "LIVING IN THE HOUSEHOLD" IF THE CHILD:

- HAS BEEN STAYING THERE (OR IS EXPECTED TO STAY THERE) FOR AT LEAST TWO MONTHS
- THE LENGTH OF THE CURRENT STAY IS UNKNOWN, BUT THERE IS NO OTHER PLACE WHERE THE CHILD USUALLY STAYS
- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR LESS THAN TWO MONTHS (WHETHER TRAVELING, IN THE HOSPITAL, OR AWAY FOR ANY OTHER REASON)
- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR TWO MONTHS OR MORE BECAUSE THEY ARE AT SCHOOL (COLLEGE, BOARDING SCHOOL, MILITARY ACADEMY, PREP SCHOOL, ETC.)
- ONLY LIVES PART-TIME IN THE HOUSEHOLD BECAUSE OF CUSTODY ISSUES, BUT IS STAYING THERE AT THE TIME OF THE CALL

Count incorrect-change total number of children	1	GO BACK TO LF_UNDR18
Total number of children confirmed as correct	2	SEE ADDITIONAL INSTRUCTIONS

ADDITIONAL INSTRUCTIONS:
IF P_ASKADULT = 1 THEN GO TO ADLT_INTRO
ELSE IF P_ASKADULT=0 AND P_INCENT > 0 & LF_U18CF = 2 & LF_UNDR18 = 0 GO TO VRYADD
ELSE IF P_INCENT = 0 & LF_U18CF = 2 & LF_UNDR18 = 0 GO TO LF_NOCHILD

LF_AREF The only reason we need to know how many children in this household are in this age group is to determine if you're eligible to participate in this survey.

CONTINUE	1	GO TO LF_UNDR18
R STILL REFUSES	99	IF P_INCENT = 0 THEN GO TO LF_REFKID, IF P_INCENT > 0 THEN GO TO VRYADD

LF_REFKID Since we need to know how many children are in this age group in order to continue, these are all the questions I have at this time. I'd like to thank you on behalf of the [If GUAM DISPLAY: 'Department of Public Health and Social Services and the'] (IF PUERTO RICO DISPLAY "Puerto Rico Department of Health and the") Centers for Disease Control and Prevention for the time you have spent answering these questions.

EXIT SURVEY

LF_ASK_ANOTHER

Is there anyone in your household who knows how many people in this household are less than 18 years old?

NEW PERSON COMES TO PHONE 1
NO 2 GO TO LF_TERM

LF_NEWR

Hello, my name is _____. I'm calling on behalf of the [IF GUAM DISPLAY: "Department of Public Health and Social Services and the"] [IF PUERTO RICO DISPLAY: "Puerto Rico Department of Health and the"] Centers for Disease Control and Prevention. We are doing a nationwide survey about the health of children and teenagers, and I was told that you were the person to talk with about the children in this household.

Before we continue, I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time with no impact on the benefits you may receive. We are required by Federal laws to develop and follow strict procedures to protect your information and use your answers only for statistical analyses. This call will be recorded or monitored. I'd like to continue now unless you have any questions.

YES, I AM THAT PERSON (recording ok) 1 IF FS3MTH = 7777
THEN GO TO FS3MTH,
IF LF_AGE=77 then GO
TO LF_AGE, ELSE GO
TO LF_UNDR18

YES, I AM THAT PERSON (no recording) 2
NO, I AM NOT THAT PERSON 3 IF LF_AGE=77 THEN
GO TO LF_S1TERM, If
FS3MTH=7777 then GO
TO LF_S1TERM, ELSE
GO TO
LF_ASK_ANOTHER

LF_TIS_S3_EVAL_R

(ADD RECORDING MASK HERE TO TURN OFF RECORDING)
(02) Respondent wants to continue without recording > IF FS3MTH = 7777 THEN GO TO FS3MTH, IF LF_AGE = 77 THEN GO TO LF_AGE, ELSE GO TO LF_UNDR18

LF_TERM/LF_S1TERM

Thank you, we'll try back another time.

EXIT SURVEY

LF_NOCHILD

Those are all the questions I have. I'd like to thank you on behalf of the (IF GUAM DISPLAY: "Department of Public Health and Social Services and the") (IF PUERTO RICO DISPLAY "Puerto Rico Department of Health and the") Centers for Disease Control and Prevention for the time and effort you've spent answering these questions.

EXIT SURVEY

LF_AGE

IF LF_UNDR18 = 1, FILL: ["age" AND "child"]. ELSE, FILL: ["ages" and "children"].
IF S_NUMB = 0, DISPLAY THIS TEXT WHEN ASKING ABOUT FIRST CHILD:
"Many of my questions are only for children of certain ages. So, I'll know which questions to ask, please tell me the [age/ages] of the [child/children] less than 18 years old living in this household."
FOR ALL SUBSEQUENT CHILDREN (LOOP UNTIL # OF CHILDREN = LF_UNDR18) DISPLAY: (READ IF NECESSARY: Please tell me the age of the next child who lives in this household.)

DISPLAY FOR LF_AGE_1: (INTERVIEWER NOTE: IF RESPONDENT PROVIDES AGES FOR ALL CHILDREN UP FRONT, TYPE IN THE AGES AS CATI PROMPTS FOR THEM.)

ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

IF AGE IS LESS THAN 1 MONTH OLD, RECORD 0 MONTHS.

A CHILD IS COUNTED AS "LIVING IN THE HOUSEHOLD" IF THE CHILD:
- HAS BEEN STAYING THERE (OR IS EXPECTED TO STAY THERE) FOR AT LEAST TWO MONTHS
- THE LENGTH OF THE CURRENT STAY IS UNKNOWN, BUT THERE IS NO OTHER PLACE WHERE THE CHILD USUALLY STAYS
- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR LESS THAN TWO MONTHS (WHETHER TRAVELING, IN THE HOSPITAL, OR AWAY FOR ANY OTHER REASON)
- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR TWO MONTHS OR MORE BECAUSE THEY ARE AT SCHOOL (COLLEGE, BOARDING SCHOOL, MILITARY ACADEMY, PREP SCHOOL, ETC.)
- ONLY LIVES PART-TIME IN THE HOUSEHOLD BECAUSE OF CUSTODY ISSUES, BUT IS STAYING THERE AT THE TIME OF THE CALL

ENTER VALUE _____ GO TO LAGECONF
IF 77 GO TO LF_AGEDK
IF 99 GO TO LF_AGERF

LF_AGEDK Is there anyone available who would know the child's age?

NEW PERSON COMES TO PHONE 1 GO TO LF_NEWR
NO 2

IF 2 AND THERE ARE REMAINING CHILDREN, THEN GO TO LF_AGE
ELSE IF 2 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE
OTHER VALID AGES IN ROSTER, THEN GO TO LAGECONF
ELSE IF 2 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO
VALID AGES IN ROSTER AND ALL AGES ARE 77, THEN GO TO LF_S1TERM. ON
CALLBACK POINT OF RETURN IS LF_AGE
ELSE IF 2 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO
VALID AGES IN ROSTER AND ALL AGES ARE 77 AND 99, AND P_INCENT = 0
THEN GO TO FNOCHILD. ON CALLBACK POINT OF RETURN IS LF_AGE
ELSE IF P_INCENT > 0 GO TO VRYADD

LF_AGERF I understand you may be uncomfortable, however, all information is confidential under
Federal Law.

RETURN TO QUESTIONNAIRE 1 GO TO LF_AGE
R STILL REFUSES 99

IF 99 AND THERE ARE REMAINING CHILDREN, THEN GO TO LF_AGE
ELSE IF 99 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE
OTHER VALID AGES IN ROSTER, THEN GO TO LAGECONF
ELSE IF 99 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO
VALID AGES IN ROSTER AND P_INCENT > 0, THEN GO TO VRYADD
ELSE IF 99 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO
VALID AGES IN ROSTER AND P_INCENT = 0, GO TO FNOCHILD
ON CALLBACK POINT OF RETURN IS LF_AGE

LAGECONF

So, you have a [FILL WITH AGE IN YEARS FOR ALL CHILDREN 2 YEARS OLD OR
OLDER, OR AGE IN MONTHS FOR ALL CHILDREN UNDER 2 YEARS OLD,
INCLUDING AGE FOR ANY NIS-ELIGIBLE CHILDREN. E.G., 12 month old, 10 year
old, and 15 year old, OR IF CHILD IS LESS THAN ONE MONTH OLD FILL WITH
newborn/IF > 1 CHILD, INSERT 'and' BEFORE THE LAST AGEID] [IF Count DK/REF
Ages >= 1: and (# of children with AGE DK/REF) other child(ren)]. Is that correct?

YES..... 1
NO, WRONG AGES OF CHILDREN [DISPLAY:
PLEASE CORRECT THE AGE OF CHILDREN IN
THE HOUSEHOLD] 2 GO TO LF_AGE
NO, WRONG NUMBER OF CHILDREN [DISPLAY:
PLEASE CORRECT THE NUMBER OF CHILDREN
IN THE HOUSEHOLD] 3 GO TO LF_UNDR18
DON'T KNOW 77
REFUSED 99

INCLUDE ANY DK (77) OR REF (99) AGE AS A COUNT IN TEXT FILL

CP_LMULT

(1) IF THERE ARE CHILDREN WITH THE SAME AGE GO TO LF_NAME
(2) ELSE GO TO LF_CP_SELECTION

LF_NAME

Since you have more than one child who is [FILL: AGE] years old, I need a way to refer to each of them during the interview. What is the name of your first [FILL: AGE] old child?

IF RESPONDENT SAYS DON'T KNOW OR REFUSES ENTER CHILD1/CHILD2/CHILD3 AND CONTINUE

CONTINUE > [RECORD NAMES IN LF_NAME_1 – LF_NAME_9]

..... 1	LOOP FOR ALL LF_NAME. THEN GO TO LF_CP_SELECTION
DON'T KNOW	77 LOOP FOR ALL LF_NAME. THEN GOTO LF_CP_SELECTION
REFUSED	99 LOOP FOR ALL LF_NAME. THEN GO TO LF_CP_SELECTION

LF_CP_SELECTION

IF S3_EVAL_R OR TIS_S3_EVAL_R ARE NOT MISSING AND IF HH HAS CHILD OR CHILDREN 0-18 MONTHS AND/OR 36-155 MONTHS [AND ELIG_X = 0 AND TEEN_ELIG_FLAG = 2] THEN COMPLETE A RANDOM SELECTION OF THIS/THESE CHILD/CHILDREN AND GO TO C12_INTRO

ELSE IF S3_EVAL_R AND TIS_S3_EVAL_R ARE MISSING AND IF HH HAS CHILD OR CHILDREN 0-18 MONTHS AND/OR 36-155 MONTHS [AND ELIG_X = 0 AND TEEN_ELIG_FLAG = 2] THEN COMPLETE A RANDOM SELECTION OF THIS/THESE CHILD/CHILDREN AND GO TO LF_TIS_S3_INTRO

ELSE IF P_ASKADULT = 0 GO TO LF_12_EXIT; ELSE IF P_ASKADULT = 1 GO TO ADLT_INTRO

ELSE IF S3_EVAL_R IS MISSING AND P_ASKTEN = 0 AND IF HH HAS CHILD OR CHILDREN NE 6-18 MONTHS AND/OR 36-155 MONTHS [NOT ELIGIBLE FOR FLU] AND P_ASKADULT = 0 THEN GO TO K_D16

ELSE IF P_ASKADULT = 1 GO TO ADLT_INTRO

FNOCHILD

Since we need an age in order to continue, these are all the questions I have at this time. I'd like to thank you on behalf of the [IF GUAM DISPLAY: "Department of Public Health and Social Services and the" ELSE [IF PUERTO RICO DISPLAY "Puerto Rico Department of Health and the"]] Centers for Disease Control and Prevention for the time you spent answering these questions.

EXIT SURVEY

LF_TIS_S3_INTRO

Before we continue, I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time with no impact on the benefits you may receive. We are required by Federal laws to develop and follow strict procedures to protect your information and use your answers only for statistical analyses. I can describe these laws if you wish. I'd like to continue now unless you have any questions.

CONTINUE 1 GO TO C12_INTRO

RESPONDENT ASKS FOR DESCRIPTION
OF LAW 2

LF_TIS_S3_LAW

The Public Health Service Act is Volume 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. Through the National Center for Immunization and Respiratory Diseases, the confidentiality of your responses is assured by Section 308d of this Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ:

The information you provide will be used for statistical purposes only. In accordance with Section 308d of the Public Health Service Act, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. Every employee who works on this survey, from the National Center for Immunization and Respiratory Diseases and its collaborating agency and contractor, NORC at the University of Chicago, and their agents and contractors who work on this survey has taken an oath to protect the confidentiality of your information. These employees are subject to disciplinary action, including fines and criminal charges that may result in imprisonment, if he or she willingly discloses ANY identifiable information about you or your household members. Additionally, in compliance with applicable federal law requiring the protection of federal computer networks from cybersecurity risks like hacking, internet attacks, and other security weaknesses, computer network experts working for, or on behalf, of the government, may intercept and review information sent through government networks for cyber threats if the information sent through the government network triggers a cyber threat indicator.

CONTINUE 1

C12_INTRO Thank you for your answers about your household.

[IF NIS OR TEEN COMPLETE, DISPLAY]: I now have a few questions about your [S.C.] and flu vaccinations.

[ELSE DISPLAY]: I now have a few questions about your [S.C.] and flu vaccinations. The remainder of the survey will take about 5 minutes.

CONTINUE 1

LF_C1Q01 Is [S.C.] male or female?

MALE 1
 FEMALE 2
 DON'T KNOW 77
 REFUSED 99

IF CIM Children \leq 9 year old at LF_AGE GO TO FS3MTH
 ELSE GO TO LF_C1Q02

FS3MTH So I'll know which vaccination questions to ask, please tell me the month, day, and year of birth of your [FILL: AGE FROM LF_AGE, E.G. 7 month old] child.

ENTER 77 / 77 / 7777 FOR DON'T KNOW
 ENTER 99 / 99 / 9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR
 EXAMPLE: 77/12/2012

ENTER BIRTH DATES ____MM/DD/YYYY
 IF YEAR = 7777 GO TO FYRDK
 IF YEAR = 9999 GO TO FYRREF

FYRDK The reason we need your child's birth date is to know which immunization questions to ask. Is there anyone available who would know the child's month, day, and year of birth?

NEW PERSON COMES TO PHONE 1 GO TO LF_NEWR
 NO 2 IF P_INCENT>0 GO
 TO VRYADD, ELSE GO
 TO LF_S1TERM

FYRREF I understand you may be uncomfortable, however, all information is confidential under Federal Law. The only reason we need your child's birthdate is to know which immunization questions to ask. READ IF NECESSARY: If you would feel more comfortable, I can enter only a month and year of birth.

RETURN TO QUESITONNAIRE 1 GO TO FS3MTH
 R STILL REFUSES 2 IF P_INCENT>0 GO TO
 VRYADD; ELSE GO TO
 FYRQUIT

FYRQUIT Since we need a birth date in order to continue, these are all the questions I have at this time. I'd like to thank you on behalf of the Centers for Disease Control and Prevention for the time you spent answering these questions.

EXIT SURVEY

LF_A_CON That would make this child [calculated age from FS3MTH]; is that correct?

YES 1 IF ELIG, GO TO
LF_C1Q02; ELSE GO
TO K_D16

NO 2 GO TO FS3MTH

K_D16 Those are all the questions I have. [FILL: Your [child’s age does/children’s ages do] not
qualify your household for the survey at this time. You may be re-contacted in the future to
participate in related studies. If you are contacted to participate in future surveys, you have
the right to refuse. I'd like to thank you again on behalf of the [IF GUAM DISPLAY:
“Department of Public Health and Social Services and the”] [IF PUERTO RICO DISPLAY
“Puerto Rico Department of Health and the”] Centers for Disease Control and Prevention
for the time and effort you’ve spent answering these questions. If you would like more
information about the National Immunization Survey, please call, 1-877-220-4805.

EXIT SURVEY

LF_C1Q02 What is your relationship to [FILL: him/her]?

MOTHER (STEP, FOSTER, ADOPTIVE)
OR FEMALE GUARDIAN 1

FATHER (STEP, FOSTER, ADOPTIVE)
OR MALE GUARDIAN 2

SISTER OR BROTHER
(STEP, FOSTER, HALF, ADOPTIVE) 3

IN-LAW OF ANY TYPE 4

AUNT/UNCLE 5

GRANDPARENT 6

OTHER FAMILY MEMBER 7

FRIEND 8

DON'T KNOW 77

REFUSED 99

LF_C12Q6 Since July 1, 2023 has [S.C.] had a flu vaccination? There are two types of flu vaccinations. One is a shot and the other is a spray, mist or drop in the nose.

YES 1
 NO 2

IF QUOTA
 NIS_SPRING_FLU=1
 GO TO LF_NFLU7;
 ELSE IF CHILD >=8
 MONTHS OLD AND <9
 YEARS OLD AS OF
 AUGUST 1, 2023, GO
 TO LF_LIFE; ELSE GO
 TO LF_CCM1

DON'T KNOW 77

IF QUOTA
 NIS_SPRING_FLU=1
 GO TO LF_NFLU7;
 ELSE IF CHILD >=8
 MONTHS OLD AND <9
 YEARS OLD AS OF
 AUGUST 1, 2023, GO
 TO LF_LIFE; ELSE GO
 TO LF_CCM1

REFUSED 99

IF QUOTA
 NIS_SPRING_FLU=1
 GO TO LF_NFLU7;
 ELSE IF CHILD >=8
 MONTHS OLD AND <9
 YEARS OLD AS OF
 AUGUST 1, 2023, GO
 TO LF_LIFE; ELSE GO
 TO LF_CCM1

LF_C12Q8 How many flu vaccinations has [S.C.] received since July 1, 2023?

INTERVIEWER NOTE: IF R SAYS CHILD HAS RECEIVED MORE THAN TWO VACCINATIONS, SELECT "2 VACCINATIONS OR DOSES." FOLLOW-UP INFORMATION WILL BE COLLECTED ABOUT THE FIRST TWO VACCINATIONS SINCE JULY.

1 VACCINATION OR DOSE 1
 2 VACCINATIONS OR DOSES 2
 DON'T KNOW 77
 REFUSED 99

GO TO LF_C12Q12
 GO TO LF_C12Q12

LF_C12Q9_M During what month did [S.C.] receive [his/her] first dose of the flu vaccine, since July 1, 2023?

INTERVIEWER NOTE: ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

MONTH \ [FILL: YEAR]
DON'T KNOW 77 IF LF_C12Q8=2 GO TO LF_C12Q10_M; ELSE GO TO LF_C12Q12
REFUSED 99 IF LF_C12Q8=2 GO TO LF_C12Q10_M; ELSE GO TO LF_C12Q12

LF_C12Q9_C That was [FILL: MONTH] of [FILL: YEAR], correct?

YES 1
NO 2 GO TO LF_C12Q9_M

LF_WEEK_CHK

IF LF_C12Q9C = THE CURRENT MONTH GO TO LF_WEEK
ELSE GO TO LF_C12Q12

LF_WEEK Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"]; ELSE [FILL: "on or after Sunday, [FILL: Date with most recent Sunday's date]]?

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

IF LF_C12Q8 = 2 GO TO LF_C12Q10_M
ELSE GO TO LF_C12Q12

LF_C12Q10_M

During what month did [S.C.] receive [FILL: his/her] second dose of the flu vaccine, since July 1, 2023?

INTERVIEWER NOTE: ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

MONTH \ [FILL: YEAR]
DON'T KNOW 77 GO TO LF_C12Q12
REFUSED 99 GO TO LF_C12Q12

LF_C12Q10_C

That was [FILL: MONTH] of [FILL: YEAR], correct?

YES 1
NO 2 GO TO LF_C12Q10_M

LF_WEEK_CHK2

IF LF_C12Q10C = THE CURRENT MONTH GO TO LF_WEEK2
ELSE GO TO LF_C12Q12

LF_WEEK2 Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"]; ELSE
[FILL: "on or after Sunday, [FILL: Date with most recent Sunday's date]]?

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

LF_C12Q12 At what kind of place did [S.C.] get [his/her] most recent flu vaccination?

READ RESPONSES IF NECESSARY

INTERVIEWER NOTE: IF RESPONDENT SAYS VACCINATION WAS RECEIVED
AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF
PLACE BELOW PROVIDED THIS OPTION.

DOCTOR'S OFFICE [IF PUERTO RICO INCLUDE: INTERVIEWER NOTE:

- DOCTOR'S OFFICE includes private provider and
reforma provider] 1
- HEALTH DEPARTMENT 2
- CLINIC OR HEALTH CENTER 3
- HOSPITAL 4
- OTHER MEDICALLY-RELATED PLACE 5
- PHARMACY OR DRUG STORE 6
- WORKPLACE 7
- ELEMENTARY/MIDDLE/HIGH SCHOOL 8
- OTHER NON-MEDICALLY-RELATED PLACE [IF PUERTO RICO INCLUDE:
INTERVIEWER NOTE: INCLUDES MASS VACCINATION CLINICS
HELD AT SPORTS ARENAS] 9
- MALL OUTREACH [DISPLAY ONLY IF GUAM] 10
- VILLAGE OUTREACH [DISPLAY
ONLY IF GUAM] 11
- DON'T KNOW 77
- REFUSED 99

IF (5) or (9) GO TO LF_Q12Q12OTH
ELSE IF QUOTA NIS_SPRING_FLU = 1 GO TO LF_C12Q15_VISIT
ELSE IF CHILD >= 8 MONTHS OLD AND < 9 YEARS OLD AS OF AUGUST 1, 2023,
GO TO LF_LIFE
ELSE GO TO LF_CCM1

LF_Q12Q12OTH

Other location: _____

ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED
IF QUOTA NIS_SPRING_FLU = 1 GO TO LF_C12Q15_VISIT
ELSE IF CHILD >= 8 MONTHS OLD AND < 9 YEARS OLD AS OF AUGUST 1, 2023,
GO TO LF_LIFE
ELSE GO TO LF_CCM1

LF_NFLU7 There are many reasons why parents don't get flu vaccinations for their children. I am going to read a list of only a few of the many possible reasons why parents may not get a flu vaccination for their children. Please tell me if each statement is a reason why you did not get a flu vaccination for your child this flu season.

Was one of the reasons that you did not get the flu vaccination for your child because...

Your child is unlikely to get the flu.

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

LF_NFLU1 Was one of the reasons that you did not get the flu vaccination for your child because....

Even if your child does get the flu, [FILL: she/he] is unlikely to get very sick from the flu.

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

LF_NFLU8 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...]

It costs too much to get the flu vaccination.

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

LF_NFLU9 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...]

It was too hard to find a time or place to get the flu vaccination.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

LF_NFLU6 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...]

You or your child don't like needles or shots.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

LF_NFLU3 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...]

You were concerned about possible side effects or the safety of the flu vaccination.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

LF_NFLU5 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...]

You believe that flu vaccines do not work very well.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

LF_C12Q15_VISIT

Since July 1st, has [S.C.] had a visit to a doctor or other health professional about [FILL: his/her] health?

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

LF_C12Q15_HPRX

Since July 1st, has a doctor, or nurse, or other health professional recommended that you get a flu vaccine for [S.C.]?

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

IF CHILD >= 8 MONTHS OLD AND < 9 YEARS OLD AS OF AUGUST 1, 2023 GO TO LF_LIFE;
ELSE GO TO LF_CCM1

LF_LIFE

Thinking about all of the flu vaccinations [S.C.] received in [FILL: his/her] life before this flu season, that is before July 1, 2023, how many flu vaccinations did [S.C.] receive? Was it 0 vaccinations, 1 vaccination, or 2 or more vaccinations?

INTERVIEWER NOTE: IF NEEDED, LET THE RESPONDENT KNOW TO INCLUDE BOTH SHOT AND SPRAY WHEN CONSIDERING THE NUMBER OF VACCINATIONS.

- ONE FLU VACCINATION 1
- TWO OR MORE FLU VACCINATIONS 2
- ZERO FLU VACCINATIONS 3
- DON'T KNOW 77
- REFUSED 99

LF_CCM1

Next, we have a few questions for you about [S.C.] and COVID-19.

Has [S.C.] received at least one dose of a COVID-19 vaccine?

- YES 1
- NO 2 GO TO LF_CCMINTUV
- DON'T KNOW 77 GO TO LF_CCMINTUV
- REFUSED 99 GO TO LF_CCMINTUV

LF_CCMSEP

Since September 14, 2023, has [S.C.] had a COVID-19 vaccination?

READ IF NECESSARY: This vaccine is sometimes called the 'updated vaccine' or the '2023-24 vaccine'.

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

IF 1 AND AGE < 5 THEN GO TO LF_CCM3B
ELSE IF 1 AND AGE > 4 GO TO LF_CCM4M
ELSE GO TO LF_CCMINTV

LF_CCM3B Which brand of the COVID-19 vaccine did [S.C.] receive for their most recent dose?

PFIZER-BIONTECH/COMIRNATY 1
 MODERNA/SPIKEVAX 2
 DON'T KNOW 77
 REFUSED 99

LF_CCM2 How many doses of a COVID-19 vaccine has [S.C.] received?

ONE 1
 TWO 2
 THREE 3
 FOUR 4
 FIVE OR MORE 5
 DON'T KNOW 77
 REFUSED 99

IF AGE < 5 THEN DO:
 IF LF_CCM3B IN (1,5,77,99) AND LF_CCM2 IN (3,4,5) GO TO LF_CCM4M
 ELSE IF LF_CCM3B IN (2,4) AND LF_CCM2 IN (2,3,4,5) GO TO LF_CCM4M
 ELSE GO TO LF_CCMINTV

LF_CCM4M During what month did [FILL: S.C.] receive their **most recent** COVID-19 vaccine?

ENTER 77/7777 FOR DON'T KNOW
 ENTER 99/9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR
 EXAMPLE, 77/2023.

[IF DATE IS BEFORE 9/2023, DISPLAY: DATE MUST BE AFTER 9/2023]

MONTH/YEAR
 DON'T KNOW 77/7777
 REFUSED 99/9999

IF LF_CCM4M IN (77,99) THEN DO: IF CHILD OR TEEN COMPLETE GO TO
 LF_MISS
 ELSE GO TO LF_HESINTRO
 ELSE GO TO LF_CCM4C

LF_CCM4C That was [FILL: MONTH] of [FILL: YEAR], correct?

YES 1
 NO 2 GO TO LF_CCM4M

LCV_WK_CHK

IF LF_CCM4M = THE CURRENT MONTH GO TO LF_CCMWK
 ELSE IF CHILD OR TEEN COMPLETE GO TO LF_MISS
 ELSE GO TO LF_HESINTRO

LF_CCMWK Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: [“today”]; ELSE [“on or after Sunday [FILL: PREVIOUS SUNDAY’S DATE]”].

- YES 1
- NO 2
- DON’T KNOW 77
- REFUSED 99

IF CHILD OR TEEN COMPLETE GO TO LF_MISS
ELSE GO TO LF_HESINTRO

LF_CCMINTV How likely are you to get [S.C.] another COVID-19 vaccine?

Would you say you would definitely get another vaccine, probably get another vaccine, probably not get another vaccine, definitely not get another vaccine, or are not sure?

- DEFINITELY GET ANOTHER VACCINE 1
- PROBABLY GET ANOTHER VACCINE 2
- PROBABLY NOT GET ANOTHER VACCINE 3
- DEFINITELY NOT GET ANOTHER VACCINE 4
- NOT SURE 5
- DON’T KNOW 77
- REFUSED 99

IF CHILD OR TEEN COMPLETE GO TO LF_MISS
ELSE GO TO LF_HESINTRO

LF_CCMINTUV

How likely are you to get [S.C.] a COVID-19 vaccine?

Would you say you would definitely get a vaccine, probably get a vaccine, probably not get a vaccine, definitely not get a vaccine, or are not sure?

- DEFINITELY GET A VACCINE 1
- PROBABLY GET A VACCINE 2
- PROBABLY NOT GET A VACCINE 3
- DEFINITELY NOT GET A VACCINE 4
- NOT SURE 5
- DON’T KNOW 77
- REFUSED 99

IF CHILD OR TEEN COMPLETE GO TO LF_MISS
ELSE GO TO LF_HESINTRO

LF_HESINTRO

Next, I'm going to ask a few questions about your feelings toward some specific vaccines for your child.

CONTINUE.....1

RANDOMIZE ORDER OF LF_HESHPV (IF S.C. IS >= 9 YEARS OLD), LF_HESFLU, LF_HESCOV

LF_HESHPV How hesitant are you about the HPV vaccine for your child? Would you say not at all hesitant, not that hesitant, somewhat hesitant, or very hesitant?

- NOT AT ALL HESITANT 1
- NOT THAT HESITANT 2
- SOMEWHAT HESITANT 3
- VERY HESITANT 4
- DON'T KNOW 77
- REFUSED 99

LF_HESFLU How hesitant are you about the flu vaccine for your child? Would you say not at all hesitant, not that hesitant, somewhat hesitant, or very hesitant?

- NOT AT ALL HESITANT 1
- NOT THAT HESITANT 2
- SOMEWHAT HESITANT 3
- VERY HESITANT 4
- DON'T KNOW 77
- REFUSED 99

LF_HESCOV How hesitant are you about the COVID-19 vaccine for your child?

READ IF NECESSARY: Would you say not at all hesitant, not that hesitant, somewhat hesitant, or very hesitant?

- NOT AT ALL HESITANT 1
- NOT THAT HESITANT 2
- SOMEWHAT HESITANT 3
- VERY HESITANT 4
- DON'T KNOW 77
- REFUSED 99

LF_HES2 Now, please think about all other routine vaccines, such as those for measles, polio, and tetanus. Overall, how hesitant are you about those other vaccines for your child?

READ IF NECESSARY: Would you say not at all hesitant, not that hesitant, somewhat hesitant, or very hesitant?

- NOT AT ALL HESITANT 1
- NOT THAT HESITANT 2
- SOMEWHAT HESITANT 3
- VERY HESITANT 4
- DON'T KNOW 77
- REFUSED 99

LF_MISS In the last two months, was a medical check-up, well child visit, or vaccination appointment for [S.C] delayed, missed, or not scheduled for any reason?

- YES 1
- NO 2
- DON'T KNOW 77
- REFUSED 99

LF_INSURE Now I have a few more general questions about [S.C.] and your household. Does [S.C.] have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

- YES 1
- NO 2 GO TO LF_HHSIZE
- DON'T KNOW 77 GO TO LF_HHSIZE
- REFUSED 99 GO TO LF_HHSIZE

LF_INSURE_TYPE

Is that coverage Medicaid, [IF STATE FILL NOT "Medicaid" THEN FILL: "[STATE MEDICAID PROGRAM NAME],"] the Children's Health Insurance Program, CHIP, [IF STATE FILL NOT "CHIP", "Children's Health Insurance Program", or the same as the Medicaid name, THEN FILL: "[STATE CHIP PROGRAM NAME],"] or some other type of insurance?"

CHECK ALL THAT APPLY

- MEDICAID 1
- CHIP [FILL: PROGRAM NAME] 2
- SOMETHING ELSE/PRIVATE INSURANCE /
- HMO PREPAID PLAN 3
- DON'T KNOW 77
- REFUSED 99

LF_HHSIZE Including the adults and all the children, how many people live in this household?

- ENTER NUMBER _____
- DON'T KNOW 77
- REFUSED 99

LF_11Q01 Is [S.C.] of Hispanic or Latino origin?

INCLUDES MEXICAN, MEXICAN-AMERICAN, CHICANO/A, PUERTO RICAN, CUBAN, CENTRAL AMERICAN, SOUTH AMERICAN, OR ANOTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN.

YES	1	
NO	2	GO TO LF_11Q02
DON'T KNOW	77	GO TO LF_11Q02
REFUSED	99	GO TO LF_11Q02

LF_11Q01A Is [S.C.] Mexican, Mexican-American, Chicano/a, Puerto Rican, Cuban, Central American, South American, [IF VIRGIN ISLANDS THEN DISPLAY: Dominican], or of other Hispanic, Latino/a, or Spanish origin?

CHECK ALL THAT APPLY

MEXICAN/MEXICANO, MEXICAN-AMERICAN, CHICANO/A	1	GO TO LF_11Q02
PUERTO RICAN	2	GO TO LF_11Q02
CUBAN	3	GO TO LF_11Q02
CENTRAL AMERICAN	4	GO TO LF_11Q02
SOUTH AMERICAN	5	GO TO LF_11Q02
OTHER SPANISH/HISPANIC (SPECIFY).....	10	
(IF VIRGIN ISLANDS, THEN DISPLAY (DOMINICAN)	11	GO TO LF_11Q02
DON'T KNOW	77	GO TO LF_11Q02
REFUSED	99	GO TO LF_11Q02

LF_11Q01A_OS

ENTER OTHER _____

LF_11Q02 Now, I am going to read a list of categories. Please choose one or more of the following categories to describe [S.C.]’s race. Is [S.C.] White, Black or African American, American Indian, Alaska Native, Asian, Native Hawaiian or other Pacific Islander?

CHECK ALL THAT APPLY

- WHITE 1
- BLACK/AFRICAN AMERICAN 2
- AMERICAN INDIAN 3
- ALASKA NATIVE 4
- ASIAN 5
- NATIVE HAWAIIAN 6
- PACIFIC ISLANDER 7
- OTHER 8
- DON’T KNOW 77
- REFUSED 99

IF LF_11Q02 INCLUDES 8 GO TO LF_11Q02_OS [FOLLOW THIS LOGIC FIRST]
ELSE IF GUAM & OPTION 5 OR 7 SELECTED GO TO LF_AAPIO
ELSE IF LF_11Q02 INCLUDES 5 GO TO LF_11Q02A_AS
ELSE IF LF_11Q02 INCLUDES 7 GO TO LF_11Q02A_PI
ELSE IF LF_11Q02 INCLUDES 5,7 GO TO LF_11Q02A_AS FIRST
ELSE IF NIS COMPLETE GO TO LF_11NIS
ELSE IF TEEN COMPLETE GO TO LF_11TEEN
ELSE GO TO LF_11Q01B

LF_11Q02_OS ENTER OTHER_____

IF GUAM & OPTION 5 OR 7 SELECTED GO TO LF_AAPIO
ELSE IF LF_11Q02 INCLUDES 5 GO TO LF_11Q02A_AS
ELSE IF LF_11Q02 INCLUDES 7 GO TO LF_11Q02A_PI
ELSE IF LF_11Q02 INCLUDES 5, 07 GO TO LF_11Q02A_AS FIRST
ELSE IF NIS COMPLETE GO TO LF_11NIS
ELSE IF TEEN COMPLETE GO TO LF_11TEEN
ELSE GO TO LF_11Q01B

LF_11Q02A_AS

Is [S.C.] Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or other Asian?

READ IF NECESSARY: Please choose the one category that describes [S.C.] best.

ASIAN INDIAN	1
CHINESE	2
FILIPINO	3
JAPANESE	4
KOREAN	5
VIETNAMESE	6
OTHER ASIAN	7
DON'T KNOW	77
REFUSED	99

IF LF_11Q02 INCLUDES 7 GO TO LF_11Q02A_PI
ELSE IF NIS COMPLETE GO TO LF_11NIS
ELSE IF TEEN COMPLETE GO TO LF_11TEEN
ELSE GO TO LF_11Q01B

LF_11Q02A_PI

Is [S.C.] Guamanian or Chamorro, Samoan, or another Pacific Islander?

GUAMANIAN OR CHAMORRO	1
SAMOAN	2
OTHER PACIFIC ISLANDER	3
DON'T KNOW	77
REFUSED	99

IF NIS COMPLETE GO TO LF_11NIS
ELSE IF TEEN COMPLETE GO TO LF_11TEEN
ELSE GO TO LF_11Q01B

LF_AAPI Is [S.C] Chamorro, Filipino, Chuukese, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: Please choose the one category that describes [S.C.] best.

- CHAMORRO 1
- FILIPINO 2
- CHUUKESE 3
- POHNPEIAN 4
- PALAUAN 5
- YAPESE 6
- KOSRAEAN 7
- MARSHALLESE 8
- JAPANESE 9
- KOREAN 10
- CHINESE 11
- VIETNAMESE 12
- THAI 13
- OTHER 14
- DON'T KNOW 77
- REFUSED 99

IF LF_AAPI = 14 GO TO LF_AAPI_OTH
ELSE IF NIS COMPLETE GO TO LF_11NIS
ELSE IF TEEN COMPLETE GO TO LF_11TEEN
ELSE GO TO LF_11Q01B

LF_AAPI_OTH

ENTER OTHER_____

IF NIS COMPLETE GO TO LF_11NIS
ELSE IF TEEN COMPLETE GO TO LF_11TEEN
ELSE GO TO LF_11Q01B

LF_11NIS [IF LF_C1Q02 = 1, "Are you"] ELSE [Is [S.C.]'s mother] also the mother of [NIS S.C.]?

YES	1	IF P_ASKADULT=1 GO TO ADLT_INTRO; ELSE IF P_ASKADULT=0 AND P_INCENT > 0 GO TO VRYADD; ELSE IF P_ASKADULT=0 GO TO K_D16
NO	2	IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO TO LF_11Q01B
DON'T KNOW	77	IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO TO LF_11Q01B
REFUSED	99	IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO TO LF_11Q01B

LF_11TEEN [IF LF_C1Q02 = 1, "Are you"] ELSE [Is [S.C.]'s mother] also the mother of [TEEN S.C.]?

YES	1	IF P_ASKADULT=1 GO TO ADLT_INTRO; ELSE IF P_ASKADULT=0 AND P_INCENT > 0 GO TO VRYADD; ELSE IF P_ASKADULT=0 GO TO K_D16
NO	2	
DON'T KNOW	77	
REFUSED	99	

LF_11Q01B [IF LF_C1Q02 = 1, "Are you"] ELSE [Is [S.C.]'s mother] of Hispanic or Latino origin?

INCLUDES: HISPANIC OR LATINO INCLUDES MEXICAN, MEXICAN-AMERICAN, CHICANO/A, PUERTO RICAN, CUBAN, CENTRAL AMERICAN, SOUTH AMERICAN, OR ANOTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN.

YES	1	
NO	2	GO TO LF_11Q02B
DON'T KNOW	77	GO TO LF_11Q02B
REFUSED	99	GO TO LF_11Q02B

LF_11Q01B_HISP

[IF LF_C1Q02 = 1", Are you"] ELSE [Is [S.C.]'s mother] Mexican, Mexican-American, Chicana, Puerto Rican, Cuban, Central American, South American, or of other Hispanic, Latina, [IF VIRGIN ISLANDS THEN DISPLAY: Dominican], or of Spanish origin?

CHECK ALL THAT APPLY

- MEXICAN/MEXICANO, MEXICAN-AMERICAN, CHICANO/A 1 GO TO LF_11Q02B
- PUERTO RICAN 2 GO TO LF_11Q02B
- CUBAN 3 GO TO LF_11Q02B
- CENTRAL AMERICAN 4 GO TO LF_11Q02B
- SOUTH AMERICAN 5 GO TO LF_11Q02B
- OTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN (SPECIFY) 10
- (IF VIRGIN ISLANDS, THEN DISPLAY (DOMINICAN) 11 GO TO LF_11Q02B
- DON'T KNOW 77
- REFUSED 99 GO TO LF_11Q02B

LF_11Q01B_HISPOS

ENTER OTHER_____

LF_11Q02B Now, I'm going to read a list of categories. Please choose one or more of the following categories to describe [IF LF_C1Q02 = 1, "your"] ELSE [[S.C.]'s mother's] race. [IF LF_C1Q02 = 1", Are you"] ELSE [Is [S.C.]'s mother] White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander?

CHECK ALL THAT APPLY

- WHITE 1
- BLACK/AFRICAN AMERICAN 2
- AMERICAN INDIAN 3
- ALASKA NATIVE 4
- ASIAN 5
- NATIVE HAWAIIAN 6
- PACIFIC ISLANDER..... 7
- OTHER 8
- DON'T KNOW 77
- REFUSED 99

IF OPTION 8 IS SELECTED GO TO LF_11Q02B_OS
ELSE IF GUAM & OPTION 5 OR 7 SELECTED GO TO LF_BAPI
ELSE IF 5 IS SELECTED GO TO LF_11Q02B_AS
ELSE IF 7 IS SELECTED GO TO LF_11Q02B_PI
ELSE IF 5 AND 7 ARE SELECTED GO TO LF_11Q02B_AS FIRST
ELSE GO TO LF_11Q20

LF_11Q02B_OS

ENTER OTHER_____

IF GUAM & LF_11Q02B INCLUDES 5 OR 7 GO TO LF_BAPI
ELSE IF LF_11Q02B INCLUDES 5 GO TO LF_11Q02B_AS
ELSE IF LF_11Q02B INCLUDES 7 GO TO LF_11Q02B_PI
ELSE IF LF_11Q02B INCLUDES 5 AND 7 GO TO LF_11Q02B_AS FIRST
ELSE GO TO LF_11Q20

LF_11Q02B_AS

[IF LFC1Q02 = 1, "Are you"] ELSE [Is [S.C.]'s mother] Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or other Asian?

READ IF NECESSARY: Please choose the category that describes [IF LFC1Q02 = 1, "you"] ELSE [[S.C.]'s mother] best.

- ASIAN INDIAN 1
CHINESE 2
FILIPINO 3
JAPANESE 4
KOREAN 5
VIETNAMESE 6
OTHER ASIAN 7
DON'T KNOW 77
REFUSED 99

ELSE IF LF_11Q02B INCLUDES 7 GO TO LF_11Q02B_PI
ELSE GO TO LF_11Q20

LF_11Q02B_PI

[IF LFC1Q02 = 1, "Are you"] ELSE [Is [S.C.]'s mother] Guamanian or Chamorro, Samoan, or another Pacific Islander?

READ IF NECESSARY: Please choose the category that describes [IF LFC1Q02 = 1, "you"] ELSE [[S.C.]'s mother] best.

- GUAMANIAN OR CHAMORRO 1 GO TO LF_11Q20
SAMOAN 2 GO TO LF_11Q20
OTHER PACIFIC ISLANDER 3 GO TO LF_11Q20
DON'T KNOW 77 GO TO LF_11Q20
REFUSED 99 GO TO LF_11Q20

LF_BAPI [IF LFC1QO2 = 1, “Are you”] ELSE [Is [S.C.]’s mother] Chamorro, Filipino, Chuukese, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: Please choose the category that describes [IF LFC1QO2 = 1, “you”] ELSE [[S.C.]’s mother] best.

- CHAMORRO 1
- FILIPINO 2
- CHUUKESE 3
- POHNPEIAN 4
- PALAUAN 5
- YAPESE 6
- KOSRAEAN 7
- MARSHALLESE 8
- JAPANESE 9
- KOREAN 10
- CHINESE 11
- VIETNAMESE 12
- THAI 13
- OTHER 14
- DON’T KNOW 77
- REFUSED 99

IF LF_BAPI = 14 GO TO LF_BAPI_OTH
ELSE GO TO LF_11Q20

LF_BAPI_OTH

ENTER OTHER_____

LF_11Q20 What is the highest grade or year of school [IF LFC1QO2 = 1, “you have”] ELSE [[S.C.]’s mother has] completed?

INTERVIEWER NOTE: AT THIS QUESTION, COLLECT INFORMATION ABOUT THE MOTHER (BIOLOGICAL, STEP, FOSTER, ADOPTIVE) LIVING IN THIS HOUSE.

- 8TH GRADE OR LESS 1
- 9TH-12TH GRADE NO DIPLOMA 2
- HIGH SCHOOL GRADUATE OR
GED COMPLETED 3
- COMPLETED A VOCATIONAL, TRADE,
OR BUSINESS SCHOOL PROGRAM 4
- SOME COLLEGE CREDIT BUT NO DEGREE 5
- ASSOCIATE DEGREE (AA, AS) 6
- BACHELOR’S DEGREE (BA, BS, AB) 7
- MASTER’S DEGREE (MA, MS, MSW, MBA) 8
- DOCTORATE (PhD, EdD) or PROFESSIONAL
DEGREE (MD, DDS, DVM, JD) 9
- DON’T KNOW 77
- REFUSED 99

LF_C19C Which of the following best describes your house or apartment? Is it owned or being bought, rented, or occupied by some other arrangement by you or someone in your household?

- OWNED OR BEING BOUGHT 1
- RENTED 2
- OTHER ARRANGEMENT 3
- DON'T KNOW 77
- REFUSED 99

LF_11Q51 Now I am going to ask you a few questions about your income. Please think about your total combined FAMILY income during [FILL: LAST CALENDAR YEAR] for all members of the family. Can you tell me that amount before taxes?

HELP SCREEN: INCLUDE MONEY FROM JOBS, CHILD SUPPORT, SOCIAL SECURITY, RETIREMENT INCOME, UNEMPLOYMENT PAYMENTS, PUBLIC ASSISTANCE, AND SO FORTH. ALSO, INCLUDE INCOME FROM INTEREST, DIVIDENDS, NET INCOME FROM BUSINESS, FARM, OR RENT, AND ANY OTHER MONEY INCOME RECEIVED.

- ENTER INCOME \$
- DON'T KNOW 77 GO TO LF_11Q52
- REFUSED 99 GO TO LF_11Q52

LF_11Q51_CONF

Just to confirm that I entered the number correctly, the total combined family income was [FILL: FROM LF_11Q51]?

- YES 1 GO TO LF_LNDLN
- NO 2 GO TO LF_11Q51
- DON'T KNOW 77 GO TO LF_11Q51
- REFUSED 99 GO TO LF_11Q51

LF_11Q52 For the purposes of this survey, it is important to get at least a range for the total income received by all members of your household in [FILL: LAST CALENDAR YEAR]. Would you say that the total combined income, before taxes, was above or below \$20,000?

- MORE THAN \$20,000 1 GO TO LF_11Q56
- \$20,000 2 GO TO LF_LNDLN
- LESS THAN \$20,000 3
- DON'T KNOW 77 GO TO LF_LNDLN
- REFUSED 99 GO TO LF_LNDLN

LF_11Q53 Was the total combined household income more or less than \$10,000?

- MORE THAN \$10,000 1 GO TO LF_11Q55
- \$10,000 2 GO TO LF_LNDLN
- LESS THAN \$10,000 3
- DON'T KNOW 77 GO TO LF_LNDLN
- REFUSED 99 GO TO LF_LNDLN

LF_11Q54	Was it more than \$7,500?		
	YES	1	GO TO LF_LNDLN
	NO	2	GO TO LF_LNDLN
	DON'T KNOW	77	GO TO LF_LNDLN
	REFUSED	99	GO TO LF_LNDLN
LF_11Q55	Was it more than \$15,000?		
	YES	1	
	NO	2	GO TO LF_11Q55B
	DON'T KNOW	77	GO TO LF_LNDLN
	REFUSED	99	GO TO LF_LNDLN
LF_11Q55A	Was it more than \$17,500?		
	YES	1	GO TO LF_LNDLN
	NO	2	GO TO LF_LNDLN
	DON'T KNOW	77	GO TO LF_LNDLN
	REFUSED	99	GO TO LF_LNDLN
LF_11Q55B	Was it more than \$12,500?		
	YES.....	1	GO TO LF_LNDLN
	NO.....	2	GO TO LF_LNDLN
	DON'T KNOW.....	77	GO TO LF_LNDLN
	REFUSED.....	99	GO TO LF_LNDLN
LF_11Q56	READ IF NECESSARY: Was the total combined household income more or less than \$40,000?		
	MORE THAN \$40,000	1	
	\$40,000	2	GO TO LF_LNDLN
	LESS THAN \$40,000	3	GO TO LF_11Q57
	DON'T KNOW	77	GO TO LF_LNDLN
	REFUSED	99	GO TO LF_LNDLN
LF_11Q56A	READ IF NECESSARY: Was the total combined household income more or less than \$60,000?		
	MORE THAN \$60,000	1	GO TO LF_11Q58
	\$60,000	2	GO TO LF_LNDLN
	LESS THAN \$60,000	3	
	DON'T KNOW	77	GO TO LF_LNDLN
	REFUSED	99	GO TO LF_LNDLN

LF_11Q56B READ IF NECESSARY: Was the total combined household income more or less than \$50,000?

MORE THAN \$50,000	1	GO TO LF_LNDLN
\$50,000	2	GO TO LF_LNDLN
LESS THAN \$50,000	3	
DON'T KNOW	77	GO TO LF_LNDLN
REFUSED	99	GO TO LF_LNDLN

LF_11Q56C READ IF NECESSARY: Was the total combined household income more or less than \$45,000?

MORE THAN \$45,000	1	GO TO LF_LNDLN
\$45,000	2	GO TO LF_LNDLN
LESS THAN \$45,000	3	
DON'T KNOW	77	GO TO LF_LNDLN
REFUSED	99	GO TO LF_LNDLN

LF_11Q57 READ IF NECESSARY: Was the total combined household income more or less than \$30,000?

MORE THAN \$30,000	1	
\$30,000	2	GO TO LF_LNDLN
LESS THAN \$30,000	3	GO TO LF_11Q57B
DON'T KNOW	77	GO TO LF_LNDLN
REFUSED	99	GO TO LF_LNDLN

LF_11Q57A READ IF NECESSARY: Was the total combined household income more or less than \$35,000?

MORE THAN \$35,000	1	GO TO LF_LNDLN
\$35,000	2	GO TO LF_LNDLN
LESS THAN \$35,000	3	GO TO LF_LNDLN
DON'T KNOW	77	GO TO LF_LNDLN
REFUSED	99	GO TO LF_LNDLN

LF_11Q57B READ IF NECESSARY: Was the total combined household income more or less than \$25,000?

MORE THAN \$25,000	1	GO TO LF_LNDLN
\$25,000	2	GO TO LF_LNDLN
LESS THAN \$25,000	3	GO TO LF_LNDLN
DON'T KNOW	77	GO TO LF_LNDLN
REFUSED	99	GO TO LF_LNDLN

LF_11Q58 READ IF NECESSARY: Was the total combined household income more or less than \$75,000?

MORE THAN \$75,000	1
\$75,000	2
LESS THAN \$75,000	3
DON'T KNOW	77
REFUSED	99

LF_LANDLINE

The next few questions are about the telephones in your household.
Do you have a landline telephone in your household?

READ IF NECESSARY: Please do not include

- modem-only lines,
- fax-only lines,
- lines used just for home security systems,
- beepers,
- Skype
- pagers, or
- cell phones.

Please include Voice Over I.P. or VOIP numbers

YES	1	
NO	2	GO TO
		LF_11Q15_CELL
DON'T KNOW	77	GO TO
		LF_11Q15_CELL
REFUSED	99	GO TO
		LF_11Q15_CELL

LF_C12Q14 How many landline telephone numbers are residential numbers?

INTERVIEWER NOTE: THIS QUESTION IS ASKING FOR THE TOTAL NUMBER OF LANDLINE TELEPHONE NUMBERS

ONE	1
TWO	2
THREE OR MORE	3
NONE	4
DON'T KNOW	77
REFUSED	99

LF_11Q15_CELL

In total, how many working cell phones do you and your household members have available for personal use? Please do not count cell phones that are used exclusively for business purposes]

- ONE 1
- TWO 2
- THREE OR MORE 3
- NONE 4

IF VIRGIN ISLANDS
GO TO LF_ISLAND,
ELSE IF GUAM, GO TO
LF_VIL ELSE GO TO
LF_11Q22

- DON'T KNOW 77
- REFUSED 99

LF_11Q15_CELL_US

How many [IF C11Q15_CELL = 1, 2, 3 THEN DISPLAY: "of these"] cell phones do the adults in this household usually use?

- ONE 1
- TWO 2
- THREE OR MORE 3
- NONE 4
- DON'T KNOW 77
- REFUSED 99

IF VIRGIN ISLANDS & IF LF_LNDLN = 2, 77, OR 99 GO TO LF_ISLAND ELSE IF
GUAM & IF LF_LNDLN = 2, 77, OR 99 GO TO LF_VIL
ELSE IF LF_LNDLN = 2, 77, OR 99 GO TO LF_Q22
ELSE GO TO LF_11Q16

LF_11Q16

Of all the telephone calls that you and your household receive, are nearly all received on cell phones, nearly all received on landline phones, or some received on cell phones and some received on landline phones?

- NEARLY ALL RECEIVED ON CELL PHONES 1
- NEARLY ALL RECEIVED ON LANDLINE
PHONES 2
- SOME RECEIVED ON CELL PHONES AND
SOME RECEIVED ON LANDLINE PHONES 3
- DON'T KNOW 77
- REFUSED 99

IF VIRGIN ISLANDS GO TO LF_ISLND
ELSE IF GUAM GO TO LF_VIL
ELSE GO TO LF_Q22

LF_VIL

In which village do you live?

AGANA HEIGHTS	1	GO TO LF_Q22
AGAT	2	GO TO LF_Q22
ASAN	3	GO TO LF_Q22
BARRIGADA	4	GO TO LF_Q22
CHALAN PAGO	5	GO TO LF_Q22
DEDEDO	6	GO TO LF_Q22
HAGATNA/AGANA	7	GO TO LF_Q22
INARAJAN.....	8	GO TO LF_Q22
MAINA	9	GO TO LF_Q22
MAITE	10	GO TO LF_Q22
MANGILAO	11	GO TO LF_Q22
MERIZO	12	GO TO LF_Q22
MONGMONG	13	GO TO LF_Q22
ORDOT	14	GO TO LF_Q22
PITI	15	GO TO LF_Q22
SANTA RITA	16	GO TO LF_Q22
SINAJANA	17	GO TO LF_Q22
TALOFOFO	18	GO TO LF_Q22
TAMUNING-TUMON	19	GO TO LF_Q22
TOTO	20	GO TO LF_Q22
UMATAC	21	GO TO LF_Q22
YIGO	22	GO TO LF_Q22
YONA	23	GO TO LF_Q22
DON'T KNOW	77	GO TO LF_Q22
DO NOT LIVE IN GUAM	98	GO TO LF_Q22
REFUSED	99	GO TO LF_Q22

LF_ISLND

On what island do you live?

SAINT CROIX	1
SAINT THOMAS	2
SAINT JOHN	3
WATER ISLAND	4
DON'T LIVE IN VIRGIN ISLANDS	5
DON'T KNOW	77
REFUSED	99

IF P_ASKADULT = 1 GO TO ADLT_INTRO
ELSE GO TO K_D16

LF_11Q22 Please tell me your zip code.

GO TO LF_11Q22CONF

DON'T KNOW 7777 IF PUERTO RICO GO TO LF_11Q22APR; ELSE GO TO LF_11Q22A

REFUSED 9999 IF PUERTO RICO GO TO LF_11Q22APR; ELSE GO TO LF_11Q22A

IF GUAM, LF_VIL = 98 AND P_ASKADULT=1 GO TO ADLT_INTRO ELSE GO TO K_D16

LF_11Q22APR_CITY

In what city and state do you live?

CITY _____

IF "NOT IN PUERTO RICO" SELECTED, GO TO LF_11Q22A; ELSE GO TO STATE. GO TO LF_11Q22D

STATE _____

LF_11Q22A In what city, county, and state do you live?

CITY _____

COUNTY _____

STATE _____

IF LF_11Q22 = 77777 OR 99999 GO TO LF_11Q22F ELSE GO TO LF_11Q22CONF

LF_11Q22CONF

To confirm, you live in [FILL: CITY], [FILL: COUNTY] county, [FILL: STATE]. Is that correct?

YES 1 GO TO LF_11Q22F NO 2 GO TO LF_11Q22B

LF_11Q22D Just to confirm, I have your zip code as [FILL: FROM LF_11Q22]. Is that correct?

YES 1 GO TO LF_11Q22F NO 2

LF_11Q22E What is your zip code?

 ENTER ZIP CODE _____

 IF PUERTO RICO GO TO K_D16
 ELSE GO TO LF_11Q22F

LF_11Q22F Do you live within city limits?

 YES 1
 NO 2
 DON'T KNOW 77
 REFUSED 99

 IF P_INCENT > 0 GO TO VRYADD
 ELSE IF P_ASKADULT = 1 GO TO ADLT_INTRO
 ELSE GO TO K_D16

VRYADD I need to verify your mailing address so that we can mail your \$10/\$20 for completing this survey.

 DOES NOT WANT TO GIVE ADDRESS 1
 WILL GIVE ADDRESS 2 GO TO AC_NAME
 DON'T KNOW 77
 REFUSED 99

K_D16 Those are all the questions I have. I'd like to thank you on behalf of the [IF GUAM
 DISPLAY: "Department of Public Health and Social Services and the"] [IF PUERTO
 RICO DISPLAY: "Puerto Rico Department of Health and the"] Centers for Disease
 Control and Prevention for the time and effort you've spent answering these questions. If
 you would like more information about the National Immunization Survey, please call 1-877-220-
 4805. Thank you again.

 EXIT SURVEY