

Variable	Description
AGE	Respondent age
AGE4	Age - 4 Categories
AGE7	Age - 7 Categories
ALT_TELMED	Does this provider offer telephone or video appointments, so that you don't need to physically visit their office or facility?
ALT_TELMED_TOTALTIME	DATA ONLY: ALT_TELMED Time on Screen (in seconds)
ANXFREQ	How often do you feel worried, nervous or anxious?
ANXFREQ_TOTALTIME	DATA ONLY: ANXFREQ Time on Screen (in seconds)
ANXLEVEL	Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings?
ANXLEVEL_TOTALTIME	DATA ONLY: ANXLEVEL Time on Screen (in seconds)
ANXMED	Do you take prescription medication for these feelings?
ANXMED_TOTALTIME	DATA ONLY: ANXMED Time on Screen (in seconds)
ASEV	[Asthma?] Have you ever been told by a doctor or other health professional that you had...
ASTILL	Do you still have asthma?
BURDEN1	How burdensome was it to complete this survey?
BURDEN2	How difficult was it to answer the questions?
CANEV	[Cancer or a malignancy of any kind?] Have you ever been told by a doctor or other health professional that you had...
CHDEV	[Coronary heart disease?] Have you ever been told by a doctor or other health professional that you had...
CHLEV	[High cholesterol?] Have you ever been told by a doctor or other health professional that you had...
COGMEMDIFF	Do you have difficulty remembering or concentrating?
COMDIFF	Using your usual language, do you have difficulty communicating, for example, understanding or being understood?
COPDEV	[Chronic Obstructive Pulmonary Disease, C.O.P.D., emphysema, or chronic bronchitis?] Have you ever been told by a doctor or other health professional that you had...
COVIDNOCAR_A	[Urgent Care for an Accident or Illness] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_B	[A Surgical Procedure] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_C	[Diagnostic or Medical Screening Test] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_D	[Treatment for Ongoing Condition] For the following, were you unable able to get this

Variable	Description
COVIDNOCAR_E	because of the Coronavirus pandemic? [A Regular Check-up] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_F	[Prescription drugs or medications] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_G	[Dental Care] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_H	[Vision Care] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVIDNOCAR_I	[Hearing Care] For the following, were you unable able to get this because of the Coronavirus pandemic?
COVID_HES	Thinking specifically about potential COVID-19 vaccines, how hesitant would you consider yourself to be?
COVID_IMPACT1	Since the pandemic, is the time you spend doing physical activities or exercise more, less, or about the same?
COVID_IMPACT2	Since the pandemic, do you feel more sad or lonely, less sad or lonely, or about the same?
COVID_IMPACT3	Since the pandemic, do you feel closer to your family, less close to your family, or about the same?
COVID_IMPACT4	Since the pandemic, do you feel more socially connected to friends, less connected, or about the same?
COVID_NOWK	Were you unable to work because you or a family member was sick with the Coronavirus?
COVID_S6A_A	[Shopping] In the last week, did you socially distance when you were...
COVID_S6A_B	[Eating at a restaurant] In the last week, did you socially distance when you were...
COVID_S6A_C	[Visiting with people outside your household] In the last week, did you socially distance when you were...
COVID_S6A_D	[Using public transportation or ride sharing] In the last week, did you socially distance when you were...
COVID_S6A_E	[Working out or exercising] In the last week, did you socially distance when you were...
COVID_S6A_F	[Visiting a medical facility] In the last week, did you socially distance when you were...
COVID_S6A_G	[Receiving nail, hair care, or spa services] In the last week, did you socially distance when you were...
COVID_S6A_H	[Attending a faith or religious service] In the last week, did you socially distance when you were...
COVID_S6A_I	[Attending a gathering with more than 10

Variable	Description
	people] In the last week, did you socially distance when you were...
COVID_S6B_A	[Shopping] Did you do the following activities inside, outside, or both?
COVID_S6B_B	[Eating at a restaurant] Did you do the following activities inside, outside, or both?
COVID_S6B_C	[Visiting with people outside your household] Did you do the following activities inside, outside, or both?
COVID_S6B_E	[Working out or exercising] Did you do the following activities inside, outside, or both?
COVID_S6B_G	[Receiving nail, hair care, or spa services] Did you do the following activities inside, outside, or both?
COVID_S6B_H	[Attending a faith or religious service] Did you do the following activities inside, outside, or both?
COVID_S6B_I	[Attending a gathering with more than 10 people] Did you do the following activities inside, outside, or both?
COVID_S6C_A	[Shopping] When doing the following activities, did you always wear a mask?
COVID_S6C_B	[Eating at a restaurant] When doing the following activities, did you always wear a mask?
COVID_S6C_C	[Visiting with people outside your household] When doing the following activities, did you always wear a mask?
COVID_S6C_D	[Using public transportation or ride sharing] When doing the following activities, did you always wear a mask?
COVID_S6C_E	[Working out or exercising] When doing the following activities, did you always wear a mask?
COVID_S6C_F	[Visiting a medical facility] When doing the following activities, did you always wear a mask?
COVID_S6C_G	[Receiving nail, hair care, or spa services] When doing the following activities, did you always wear a mask?
COVID_S6C_H	[Attending a faith or religious service] When doing the following activities, did you always wear a mask?
COVID_S6C_I	[Attending a gathering with more than 10 people] When doing the following activities, did you always wear a mask?
CaseId	Case ID
DEPFREQ	How often do you feel depressed? Would you say daily, weekly, monthly, a few times a year, or never?
DEPFREQ_TOTALTIME	DATA ONLY: DEPFREQ Time on Screen (in seconds)
DEPLEVEL	Thinking about the last time you felt depressed, how depressed did you feel?

Variable	Description
DEPLEVEL_TOTALTIME	DATA ONLY: DEPLEVEL Time on Screen (in seconds)
DEPMED	Do you take prescription medication for depression?
DEPMED_TOTALTIME	DATA ONLY: DEPMED Time on Screen (in seconds)
DIBEV	[Not including prediabetes] Has a doctor or other health professional ever told you that you had diabetes?
DIFF	Do you have difficulty walking or climbing steps?
DNGCARE	Was there any time when you needed medical care for something other than Coronavirus, but did not get it because of the Coronavirus pandemic?
DOV_ANX	DATA ONLY: Categorization variable of responses to ANXFREQ, ANXMED, ANXLEVEL.
DOV_DEP	DATA ONLY: Categorization variable of responses to DEPFREQ, DEPMED, DEPLEVEL.
DOV_GAD	DATA ONLY: Binary variable of GAD7
DOV_PHQ	DATA ONLY: Binary variable of PHQ
EDUC	Education (Highest Degree Received)
EDUC4	4-level education
EDUC5	5-level education
EMPLASTWK	Last week, did you work for pay at a job or business?
EMPLOY	Current Employment Status
GAD7_A	[Feeling nervous, anxious, or on edge] Over the last 2 weeks, how often have you been bothered by the following problems?
GAD7_B	[Not being able to stop or control worrying] Over the last 2 weeks, how often have you been bothered by the following problems?
GAD7_TOTALTIME	DATA ONLY: GAD7 Time on Screen (in seconds)
SEX	Respondent sex
HEARINGDF	Do you have difficulty hearing, even if using hearing aides?
HH01	Number of HH members age 0-1
HH25	Number of HH members age 2-5
HH612	Number of HH members age 6-12
HH1317	Number of HH members age 13-17
HH18OV	Number of HH members age 18+
HHSIZE	Household size (including children)
HICOV	Are you covered by any kind of health insurance or some other kind of health care plan?
HOME_TYPE	Type of building of panelists' residence
HOUSING	Home Ownership
HYPEV	[Hypertension, also called high blood pressure?] Have you ever been told by a doctor or other health professional that you had...
INCOME	Household Income
INCOME4	4-level Household Income
INCOME9	9-level Household Income
INTERNET	HH internet access via dial-up, DSL, or cable broadband at home

Variable	Description
LIFESAT1	Using a scale of 0 to 10 where 0 means 'Very dissatisfied' and 10 means 'Very satisfied', how do you feel about your life as a whole these days?
LIFESAT2	In general, how satisfied are you with your life? Would you say very satisfied, satisfied, dissatisfied, or very dissatisfied?
LIFESAT1_TOTALTIME	[Your successes and achievements in life] DATA ONLY: LIFESAT1 Time on Screen (in seconds)
LIFESAT2_TOTALTIME	DATA ONLY: LIFESAT2 Time on Screen (in seconds)
MARITAL	Marital Status
METRO	Metropolitan area flag
MODE_PREF	Panelist Profile Variable: Panelist's Self-Selected Survey Mode Preference
NOCARTYP_A	[Urgent Care for an Accident or Illness] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_B	[A Surgical Procedure] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_C	[Diagnostic or Medical Screening Test] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_D	[Treatment for Ongoing Condition] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_E	[A Regular Check-up] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_F	[Prescription drugs or medications] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_G	[Dental Care] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_H	[Vision Care] In the last two months, were you unable to get any of the following types of care for any reason?
NOCARTYP_I	[Hearing Care] In the last two months, were you unable to get any of the following types of care for any reason?
PHONESERVICE	Telephone service for the household
PHQ_A	[Little interest or pleasure in doing things] Over the last 2 weeks, how often have you been bothered by the following problems?
PHQ_B	[Feeling down, depressed, or hopeless] Over the last 2 weeks, how often have you been bothered by the following problems?

Variable	Description
PHQ_TOTALTIME	DATA ONLY: PHQ Time on Screen (in seconds)
PHSTAT	Would you say your health in general is excellent, very good, good, fair, or poor?
PLIFESAT_TOTALTIME	DATA ONLY: PROBE_LIFESAT Time on Screen (in seconds)
PREDIB	Has a doctor or other health professional ever told you that you had prediabetes or borderline diabetes?
PROBE_ANX_1	[Sometimes the feelings can be so intense that my chest hurts and I have trouble breathing.] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_2	[These are positive feelings that help me to accomplish goals and be productive.] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_3	[The feelings sometimes interfere with my life, and I wish that I did not have them.] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_4	[Feeling that way is normal, and everyone feels that way sometimes] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_5	[I have been told by a medical professional that I have anxiety.] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_6	[I have these feelings because of the Coronavirus pandemic] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_7	[I would describe them some other way, please specify:] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_DK	[DON'T KNOW] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_REF	[REFUSED] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_ANX_SKP	[WEB SKIP] Which of the following statements, if any, describe your feelings of being nervous or anxious?
PROBE_DEP_1	[Sometimes the feelings can be so intense that I cannot get out of bed] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_2	[The feelings sometimes interfere with my life, and I wish that I did not have them] Which of the following statements, if any, describe your feelings of being sad or

Variable	Description
PROBE_DEP_3	depressed? [I get over the feelings quickly] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_4	[Feeling that way is normal, and everyone feels that way sometimes] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_5	[I have been told by a medical professional that I have depression] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_6	[I have these feelings because of the Coronavirus pandemic] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_7	[I would describe them some other way, please specify:] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_DK	[DON'T KNOW] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_REF	[REFUSED] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DEP_SKP	[WEB SKIP] Which of the following statements, if any, describe your feelings of being sad or depressed?
PROBE_DIST_TIMER_TOTALTIME	DATA ONLY: PROBE_DISTANCE Time on Screen (in seconds)
PROBE_GETCAR	How much of the care that [your provider/you/you and your provider] delayed or cancelled were you eventually able to reschedule or receive?
PROBE_LIFESAT_1	[Your successes and achievements in life] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_LIFESAT_2	[Your inner strength or mental outlook] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_LIFESAT_3	[Your experiences related to the pandemic] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_LIFESAT_4	[Your feelings related to politics and the direction of the country] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_LIFESAT_5	[Something else, please specify:] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?

Variable	Description
PROBE_LIFESAT_DK	[DON'T KNOW] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_LIFESAT_REF	[REFUSED] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_LIFESAT_SKP	[WEB SKIP] When you answered the previous question about how satisfied [...], which of the following, if any, were you thinking about?
PROBE_MASKTYPE_A	[A neck gaiter] When asked about wearing a mask in the previous question, which of the following, if any, were you thinking about?
PROBE_MASKTYPE_B	[A bandana] When asked about wearing a mask in the previous question, which of the following, if any, were you thinking about?
PROBE_MASKTYPE_C	[A cloth mask] When asked about wearing a mask in the previous question, which of the following, if any, were you thinking about?
PROBE_MASKTYPE_D	[A surgical or medical mask] When asked about wearing a mask in the previous question, which of the following, if any, were you thinking about?
PROBE_MASKTYPE_E	[A mask with a valve] When asked about wearing a mask in the previous question, which of the following, if any, were you thinking about?
PROBE_MASKTYPE_F	[Something else, please specify:] When asked about wearing a mask in the previous question, which of the following, if any, were you thinking about?
PROBE_MASKUSE	Which of the following is most common in your community?
PROBE_NOCAR_A	[Your provider cancelled appointments] Why do you say you were unable to get care because of the pandemic?
PROBE_NOCAR_B	[Your provider delayed appointments] Why do you say you were unable to get care because of the pandemic?
PROBE_NOCAR_C	[You delayed making an appointment] Why do you say you were unable to get care because of the pandemic?
PROBE_NOCAR_D	[You delayed or cancelled an existing appointment] Why do you say you were unable to get care because of the pandemic?
PROBE_NOCAR_E	[Something else, please specify:] Why do you say you were unable to get care because of the pandemic?
PROBE_REL6_TIMER_TOTALTIME	DATA ONLY: PROBE_REL6 Time on Screen (in seconds)
PROBE_TELMEDALT1	When you answered the previous question [...], were you thinking about... Whether or not you had scheduled or participated in a telephone or video appointment

Variable	Description
PROBE_TELMEDALT2	When you answered the previous question [...], were you thinking about... Your provider's ability to do appointments over telephone or video
PROBE_TELMEDALT3	When you answered the previous question [...], were you thinking about... Whether or not your provider contacted you [...] ability to conduct appointments over telephone or video
PROBE_TELMEDORIG_1	[Whether or not you had scheduled or participated in a telephone or video appointment] When you answered the previous question about telephone or video appointments, were you thinking about...
PROBE_TELMEDORIG_2	[Your provider's ability to do appointments over telephone or video] When you answered the previous question about telephone or video appointments, were you thinking about...
PROBE_TELMEDORIG_3	[Whether or not your provider contacted you [...] ability to conduct appointments over telephone or video] When you answered the previous question about telephone or video appointments, were you thinking about...
PROBE_TELMEDORIG_DK	[DON'T KNOW] When you answered the previous question about telephone or video appointments, were you thinking about...
PROBE_TELMEDORIG_REF	[REFUSED] When you answered the previous question about telephone or video appointments, were you thinking about...
PROBE_TELMEDORIG_SKP	[WEB SKIP] When you answered the previous question about telephone or video appointments, were you thinking about...
PROBE_VAX_1	[Overall social benefit of vaccine] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_2	[Long-term health impacts] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_3	[Speed of development] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_4	[Government approval process] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_5	[Personal risk of getting vaccinated] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a

Variable	Description
PROBE_VAX_6	COVID-19 vaccine, which of the following, if any, were you thinking about? [Risk of contracting COVID-19] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_7	[Information you received from a medical provider] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_8	[Information you received from friends or social media] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_9	[Previous experiences with vaccines] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_10	[Something else, please specify:] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_DK	[DON'T KNOW] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_REF	[REFUSED] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_SKP	[WEB SKIP] When thinking about [receiving/your plan to get/your plan not to get/whether to get] a COVID-19 vaccine, which of the following, if any, were you thinking about?
PROBE_VAX_TIMER_TOTALTIME	DATA ONLY: PROBE_VAX Time on Screen (in seconds)
P_LIFEOPEN	DATA ONLY: Custom Preload for PROBE_LIFESAT Open-End 'Other' Response Option Experiment
P_LIFESAT	DATA ONLY: Custom Preload for Life Satisfaction Format Experiment
P_PROBEANXDEP	DATA ONLY: Custom Preload for Open-End Response in PROBE_ANX and PROBE_DEP
P_PROBETEL	DATA ONLY: Custom Preload for TELMED Probe Question Type Experiment
P_TELMEDEXP	DATA ONLY: Custom Preload for Telemedicine Question Type Experiment
P_VAXOPEN	DATA ONLY: Custom Preload for PROBE_VAX Open-End 'Other' Response Option Experiment

Variable	Description
QUAL	DATA-ONLY VARIABLE: QUAL
RACETHNICITY	Combined Race/Ethnicity
REGION4	4-level region
REGION9	9-level region
REL1	In what religion were you raised, if any?
REL2	Which of these were you raised as, if any?
REL3	When you were 14, about how often did you usually attend religious services?
REL4	What religion are you now?
REL5	Which of these are you now, if any?
REL6	Currently, how important is religion in your daily life?
REL7	About how often do you attend religious services?
REL_TOTALTIME	Time spent in RELIGION Section, in minutes
SAMPLE_SOURCE	Panel Sample Source
SMKEV	Have you smoked at least 100 cigarettes in your entire life?
SMKNOW	Do you now smoke cigarettes every day, some days, or not at all?
STATE	State
SUM_GAD7	DATA ONLY: Sum variable of responses to GAD7_A and GAD7_B
SUM_PHQ	DATA ONLY: Sum variable of responses to PHQ_A and PHQ_B
SURV_MODE	Survey interview mode (online or phone)
S_BASEWEIGHT	DATA ONLY: Statistical Variable - Panel baseweight based on panel recruitment
S_INVPROB	DATA ONLY: Statistical Variable - Inverse probability of selection into specific study survey
S_INVPROB_WEB	DATA ONLY: Statistical Variable - Inverse probability of selection for Web-only panelists in study survey
S_NRFU	DATA ONLY: Statistical Variable - Numeric variable to identify NRFU status of panelist (1: NRFU, 0: Non-NRFU)
S_VPSU	DATA ONLY: Statistical Variable - Numeric variable to identify cluster of panelist - Updated
S_VSTRAT	DATA ONLY: Statistical Variable - Numeric variable to identify strata of panelist
S_VSTRAT_SAMP	DATA ONLY: Statistical Variable - Sampling strata (1-96)
TELMED	In the last two months, has this provider offered you an appointment with a doctor, nurse, or other health professional by video or by phone?
TELMEDALT1_TOTALTIME	DATA ONLY: PROBE_TELMEDALT1 Time on Screen (in seconds)
TELMEDALT2_TOTALTIME	DATA ONLY: PROBE_TELMEDALT2 Time on Screen (in seconds)
TELMEDALT3_TOTALTIME	DATA ONLY: PROBE_TELMEDALT3 Time on Screen (in seconds)
TELMEDNEW	Did this provider offer you an appointment with a doctor, nurse, or other health

Variable	Description
TELMEDORIG_TOTALTIME	professional by video or by phone before the Coronavirus pandemic? DATA ONLY: PROBE_TELMEDORIG Time on Screen (in seconds)
TELMEDUSE	In the last two months, have you had an appointment with a doctor, nurse, or other health professional by video or by phone?
TELMED_TOTALTIME	DATA ONLY: TELMED Time on Screen (in seconds)
UPPSLFCR	Do you have difficulty with self-care, such as washing all over or dressing?
USPLKIND	What kind of place [is it/do you go to most often]?
USUALPL	Is there a place that you usually go to if you are sick and need health care?
VAX_BELIEF_A	[They lower your risk for getting the COVID-19 virus] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_BELIEF_B	[You won't spread the virus to other people even if you've been exposed] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_BELIEF_C	[With the vaccine, you no longer need to wear a mask or social distance] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_BELIEF_D	[With the vaccine, you can go into public places like restaurants, sports arenas, and movie theaters] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_BELIEF_E	[They might cause a mild reaction] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_BELIEF_F	[For people with other health conditions, it is important to be vaccinated] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_BELIEF_G	[Many of your family and friends think it's important for you to be vaccinated] Do you agree or disagree with the following about the COVID-19 vaccines?
VAX_COVID	Have you already received a COVID-19 vaccine?
VAX_HERD	Do you believe that getting vaccinated helps protect others from getting disease?
VAX_HES	Overall, how hesitant about vaccines in general would you consider yourself to be?
VAX_KNOW	Do you personally know anyone who has had a serious, long-term side effect from a vaccine?
VAX_MD	Is your doctor or health provider your most trusted source of information about vaccines?
VAX_PLAN	Do you plan on getting a COVID-19 vaccine?
VAX_RISK	How confident are you that the benefits of vaccines outweigh their risks?
VAX_SIDE	Have concerns about serious, long-term side

Variable	Description
VAX_TOTALTIME VISIONDF	effects impacted your decision to get vaccinated in the past? Time spent in VACCINES Section, in minutes Do you have difficulty seeing, even if wearing glasses?
WEIGHT	Normalized Post-Stratification weights - 18+ general population (n=5,458)
duration	Time spent in survey, in minutes
WEIGHT_CALIBRATED	WEIGHT, raked to 2019 NHIS sample adult demographic, geographic, health marginal totals