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)
<table>
<thead>
<tr>
<th>Variable Name</th>
<th>Response Definition</th>
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| P_INCENT      | 0 - no incentive offer  
|               | 1-3 - $20 incentive  
|               | 4-6 - $10 incentive |
| P_ASKTEN      | 0 - Do not ask Teen interview  
|               | 1 - Invoke Teen screener/interview |
| P_ASKFLU      | 0 - Do not ask Flu interview  
|               | 1 - Invoke Flu screener/interview |
| P_ASKADULT    | 0 - Do not ask Adult COVID Module interview  
|               | 1 – Invoke Adult COVID Module interview |
| P_ASKCCM      | 0 - Do not ask Child COVID Module interview  
|               | 1 – Invoke Child COVID Module interview |
| P_ASKCCMSC    | 0 – Do not ask CCM_SC experiment question  
|               | 1 - Ask CCM_SC experiment question |
| CCM Experiment| ON-CCM_SC experiment is enabled  
|               | OFF-CCM_SC experiment is disabled |
| FLUONOFF      | ON-CIM is enabled  
|               | OFF-CIM is disabled |
IF FLUONOFF=OFF, P_ASKFLU=1, P_ASKTEN=0, AND P_ASKCCM=1 AND [C1-C1_A]>S_NUMB THEN GO TO LF_INTRO; ELSE GO TO SUMSUMCCM_SEL
IF FLUONOFF=ON, P_ASKFLU=1 GO TO LF_INTRO

LF_INTRO    Thank you for your answers, now I have some questions about other children in your household.
CONTINUE TO LF_UNDR18..............................1 GO TO LF_UNDR18

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; IF P_ASKADULT=0
AND P_INCENT>0 GO TO VRYADD; ELSE GO TO
LF_NOCHILD.
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 GO TO
VRYADD; ELSE IF LF_UNDR18=0 GO TO LF_NOCHILD; ELSE

IF LF_UNDR18 > 0 and S_NUMB > LF_UNDR18, THEN GO TO LF_U18CF; ELSE
IF LF_UNDR18>0 GO TO LF_AGE_X
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 LF_UND18=0 AND P_ASKADULT=1 THEN GO TO ADLT_INTRO; IF P_ASKADULT=0 AND P_INCENT>0 & LF_UND18CF=2 & LF_UND18=0 GO TO VRYADD; ELSE IF P_INCENT =0 & LF_UND18CF=2 & LF_UND18=0, GO TO LF_NOCHD.

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 IAP=105 DISPLAY: 'Department of Public Health and Social Services and the'] (IF IAP=106 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 GO TO LF_NEWR
NO..............................................................2 GO TO LF_TERM

LF_NEWR  Hello, my name is __________________. I'm calling on behalf of the (IF IAP=GUAM DISPLAY: ‘Department of Public Health and Social Services and the’) (IF IAP=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_UND18

YES, I AM THAT PERSON (no recording).......................2 GO TO LF_S3_EV
NO, I AM NOT THAT PERSON..............................3

LF_S3_EV  (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
Thank you, we’ll try back another time.

Those are all the questions I have. I’d like to thank you on behalf of the (IF IAP=GUAM DISPLAY: ‘Department of Public Health and Social Services and the’) (IF IAP=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 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: "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.

ENTER AGE FOR CHILD X:

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 02 AND THERE ARE REMAINING CHILDREN, THEN GO TO LF_AGE; ELSE
IF 02 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE OTHER
VALID AGES IN ROSTER, THEN GO TO LAGECONF; ELSE 02 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.

IF 02 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, 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_X
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). Is that correct?

YES………………………………………………………1 GO TO CP_LMULT
NO, WRONG AGES OF CHILDREN [Display: PLEASE CORRECT THE AGE OF CHILDREN IN THE HOUSEHOLD]……………………………………….2 GO TO LF_AGE_1
NO, WRONG NUMBER OF CHILDREN [Display: PLEASE CORRECT THE NUMBER OF CHILDREN IN THE HOUSEHOLD]…………………………….3 GO TO LF_UNDR18
DON’T KNOW…………………………………………………….77 GO TO CP_LMULT
REFUSED……………………………………………………99 GO TO CP_LMULT ]

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 SKIP TO LF_NAME
(2) ELSE GO TO SELECTION CHECK POINT

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/next] [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]

DON’T KNOW……………………………………………………

REFUSED……………………………………………………

SUMCCEL_SEL:
IF HH HAS NO ELIGIBLE CHILDREN AND P_ASKADULT=1, GO TO ADLT_INTRO
IF HH HAS NO ELIGIBLE CHILDREN AND P_ASKADULT=0, GO TO K_D16
IF HH HAS ELIGIBLE CHILDREN AND S3_INTRO OR TIS_INTRO1 NE . , THEN DO:
    IF SELECTED CHILD COMPLETED NIS-CHILD, NIS-TEEN, OR NIS-CIM THEN GO TO CCM_INTRO; ELSE GO TO CCM_SUM
IF HH HAS ELIGIBLE CHILDREN AND S3_INTRO OR TIS_INTRO1 EQ ., GO TO LF_TIS_S3_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 IAP=GUAM DISPLAY: ‘Department of Public Health and Social Services and the’ else IF IAP=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 CCM_SUM

RESPONDENT ASKS FOR DESCRIPTION

OF LAW...........................................................................2   GO TO

LF_TIS_S3_LAW

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 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   GO TO CCM_SUM
Thank you for your answers about your household.

[ELSE IF NIS COMPLETE, DISPLAY:]
“I now have a few questions about your [AGE ID] and COVID-19 vaccinations.”

[ELSE, DISPLAY:]
“I now have a few questions about your [AGE ID] and COVID-19 vaccinations. The remainder of the survey will take about 5 minutes.”

CONTINUE.........................................................1  GO LF_C1Q01

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

MALE ..............................................................................1
FEMALE ...........................................................................2
DON’T KNOW ................................................................77
REFUSED ...........................................................................99

IF Child <9 year old at LF_AGE_X 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 ........................................................................................................2

TO LF_S1TERM

CONTINUE.........................................................1  GO LF_C1Q01
I understand you may be uncomfortable, however, all information is confidential under Federal Law. The only reason we need your child’s birth date 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 QUESTIONNAIRE........................................1
RETURN TO FS3MTH
R STILL REFUSES....................................................2
IF P_INCENT > 0
GO TO VRYADD
ELSE GO TO
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 and effort you’ve spent answering these questions.

EXIT SURVEY

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

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 IAP=GUAM
DISPLAY: ‘Department of Public Health and Social Services and the’) (IF IAP=
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. If you have questions about your rights as a survey participant, you may call the NORC Institutional Review Board at 1-866-309-0542.

EXIT SURVEY
What is your relationship to [“him”/ “her” / “him or her”]?

MOTHER (STEP, FOSTER, ADOPTIVE)……………………………..1 GO CCM_VAX1
OR FEMALE GUARDIAN………………………………………….1
FATHER (STEP, FOSTER, ADOPTIVE)……………………………….2 GO CCM_VAX1
OR MALE GUARDIAN…………………………………………….2
SISTER OR BROTHER (STEP, FOSTER, HALF, ADOPTIVE)………………..3 GO CCM_VAX1
IN-LAW OF ANY TYPE……………………………………………….4 GO CCM_VAX1
AUNT/UNCLE………………………………………………………….5 GO CCM_VAX1
GRANDPARENT…………………………………………………………..6 GO CCM_VAX1
OTHER FAMILY MEMBER……………………………………………..7 GO CCM_VAX1
FRIEND…………………………………………………………………...8 GO CCM_VAX1
DON’T KNOW…………………………………………………………….77 GO CCM_VAX1
REFUSED…………………………………………………………………..99 GO CCM_VAX1

Next, we have a few questions for you about [FILL: Child's name] and COVID-19.

CONTINUE…………………………………………………………1 EXIT LOGIC
IF P_ASKCCMSC=1 and CCM Experiment=ON GO TO CCM_SC; ELSE GO TO CCM_VAX1

When giving a COVID-19 vaccine, providers usually give a vaccination card with the date the shot was given and other information on it. Because it is important that we have accurate information, we are asking people to refer to this card. Do you have a COVID-19 vaccination card for [CHILD]?

READ IF NECESSARY (WILL GET CARD): I'll be happy to wait while you go get it.
READ IF NECESSARY (CAN'T/WON'T GET CARD): That's fine. It is common for households not to have the shot records on hand. Let's continue with the interview.

YES………………………………………..……………………...1 GO TO CCM_VAX1
NO……………………………………………...……………….....2 GO TO CCM_VAX1
DON’T KNOW…………………………………………………..77 GO TO CCM_VAX1
REFUSED…………………………………………………………….99 GO TO CCM_VAX1

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

YES………………………………………………………………...1 IF CHILD IS LT 6 YEARS OLD GO TO CCM_VAX3B; ELSE GO TO CCM_VAX2
NO…………………………………………………………………...2 GO TO CCM_VAX5
DON’T KNOW…………………………………………………………77 GO TO CCM_VAX5
REFUSED………………………………………………………………...99 GO TO CCM_VAX5
CCM_VAX3B Which brand of COVID-19 vaccine did [FILL: S.C.] receive for their first dose?

PFIZER-BIONTECH/COMIRNATY..........................................................1 GO TO CCM_VAX2
MODERNASPIKEVAX.................................................................2 GO TO CCM_VAX2
ONE OF THE BRANDS THAT REQUIRE 2 SHOTS BUT
UNSURE OF THE NAME............................................................4 GO TO CCM_VAX2
ONE OF THE BRANDS THAT REQUIRE 3 SHOTS BUT
UNSURE OF THE NAME............................................................5 GO TO CCM_VAX2
DON’T KNOW............................................................................77 GO TO CCM_VAX2
REFUSED......................................................................................99 GO TO CCM_VAX2

CCM_VAX2 How many doses of a COVID-19 vaccine has [FILL: S.C.] received?

ONE............................................................................................1 GO TO CCM_VAX3M
TWO............................................................................................2 GO TO CCM_VAX3M
THREE.........................................................................................3 GO TO CCM_VAX3M
FOUR..........................................................................................4 GO TO CCM_VAX3M
FIVE OR MORE.........................................................................5 GO TO CCM_VAX3M
DON’T KNOW............................................................................77 GO TO CCM_VAX3M
REFUSED......................................................................................99 GO TO CCM_VAX3M


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 77/2021.


MONTH/[YEAR=FILL]................................................................... GO TO CCM_VAX_WK
DON’T KNOW.............................................................................77/7777 GO TO CCM_VAX_WK
REFUSED......................................................................................99/9999 GO TO CCM_VAX_WK
CCM_VAX_WK

IF CCM_VAX3M=THE CURRENT MONTH, GO TO CCM_VAX3_WK; ELSE GO TO CCM_VAX4

IF IN FIRST WEEK OF THE MONTH, SKIP CCM_VAX3_WK

CCM_VAX3_WK

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

YES………………………………………………………………………………1 GO TO CCM_VAX4
NO………………………………………………………………………………..2 GO TO CCM_VAX4
DON’T KNOW……………………………………………………………………77 GO TO CCM_VAX4
REFUSED…………………………………………………………………………..99 GO TO CCM_VAX4

CCM_VAX4

At what kind of place did [FILL: S.C.] get [FILL: his/her] most recent COVID-19 vaccination?

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

READ RESPONSES IF NECESSARY

DOCTOR’S OFFICE [IF PUERTO RICO, THEN SHOW: Interviewer note: DOCTOR’S OFFICE includes private provider and reforma provider]……………………………………………………1 GO TO CCM_VAX6
HEALTH DEPARTMENT…………………………………………………………2 GO TO CCM_VAX6
CLINIC OR HEALTH CENTER………………………………………………3 GO TO CCM_VAX6
HOSPITAL…………………………………………………………………………4 GO TO CCM_VAX6
OTHER MEDICALLY-RELATED PLACE……………………………………5 GO TO CCM_VAX6
MASS VACCINATION SITE…………………………………………………6 GO TO CCM_VAX6
PHARMACY OR DRUG STORE……………………………………………7 GO TO CCM_VAX6
WORKPLACE……………………………………………………………………8 GO TO CCM_VAX6
ELEMENTARY/MIDDLE/HIGH SCHOOL……………………………………9 GO TO CCM_VAX6
OTHER NONMEDICALLY-RELATED PLACE…………………………10 GO TO CCM_VAX6
MALL OUTREACH [DISPLAY ONLY IF GUAM]………………………….11 GO TO CCM_VAX6
VILLAGE OUTREACH [DISPLAY ONLY IF GUAM]……………………12 GO TO CCM_VAX6
DON’T KNOW…………………………………………………………………….77 GO TO CCM_VAX6
REFUSED…………………………………………………………………………..99 GO TO CCM_VAX6
CCM_VAX5 How likely are you to get [FILL: S.C.] a COVID-19 vaccine?

Would you say you would: definitely get a vaccine for [FILL: Child's name]; probably get a vaccine; probably not get a vaccine; definitely not get a vaccine; or are not sure?

DEFINITELY GET A VACCINE……………………………….1 GO TO CCM_VAX6
PROBABLY GET A VACCINE………………………………2 GO TO CCM_VAX6
PROBABLY NOT GET A VACCINE…………………………3 GO TO CCM_VAX6
DEFINITELY NOT GET A VACCINE……………………….4 GO TO CCM_VAX6
NOT SURE……………………………………………………5 GO TO CCM_VAX6
DON’T KNOW………………………………………………..77 GO TO CCM_VAX6
REFUSED……………………………………………………..99 GO TO CCM_VAX6

CCM_VAX6 To your knowledge, has [FILL: S.C.] ever had COVID-19?

INTERVIEWER NOTE: IF R SAYS THEY MIGHT HAVE HAD COVID BUT WERE NOT TESTED, SAY: "To the best of your knowledge, would you say 'yes' or 'no'?"

YES…………………………………………………….1 GO TO CCM_VCON1
NO………………………………………………………2 GO TO CCM_VCON1
DON’T KNOW……………………………………………….77 GO TO CCM_VCON1
REFUSED……………………………………………………99 GO TO CCM_VCON1

CCM_VCON1 How concerned are you about [FILL: S.C.] getting COVID-19 [IF CCM_VAX6 = 1, read: "again"]? Would you say you are: not at all concerned; a little concerned; moderately concerned; or very concerned?

NOT AT ALL CONCERNED………………………………1 GO TO CCM_VCON2
A LITTLE CONCERNED……………………………………2 GO TO CCM_VCON2
MODERATELY CONCERNED…………………………….3 GO TO CCM_VCON2
VERY CONCERNED…………………………………………4 GO TO CCM_VCON2
DON’T KNOW……………………………………………….77 GO TO CCM_VCON2
REFUSED……………………………………………………99 GO TO CCM_VCON2

CCM_VCON2 How safe do you think a COVID-19 vaccine is for [FILL: S.C.]? Would you say not at all safe; somewhat safe; very safe; or completely safe?

NOT AT ALL SAFE……………………………………1 GO TO CCM_VCON2R
SOMewhat SAFE…………………………………………2 GO TO CCM_VCON2R
VERY SAFE………………………………………………3 GO TO CCM_VCON3
COMPLETELY SAFE……………………………………4 GO TO CCM_VCON3
DON’T KNOW……………………………………………….77 GO TO CCM_VCON2R
REFUSED……………………………………………………99 GO TO CCM_VCON2R
CCM_VCON2R

What is your MAIN concern about the safety of COVID-19 vaccination for [FILL: S.C.]?

IF RESPONDENT MENTIONS MORE THAN ONE REASON, PROBE: What would you say is the MAIN reason?

MILD SIDE EFFECTS (INCLUDING SORENESS, TIREDNESS, SWELLING, HEADACHE)……………………………………………………1 GO TO CCM_VCON3
CHILD MAY MISS SCHOOL OR WORK IF VACCINE MAKES THEM SICK……………………………………..2 GO TO CCM_VCON3
BLOOD CLOTS…………………………………………………………3 GO TO CCM_VCON3
INFERTILITY……………………………………………………..4 GO TO CCM_VCON3
MENSTRUAL CYCLE CHANGES……………………….........5 GO TO CCM_VCON3
CHANGES TO DNA………………………………………………6 GO TO CCM_VCON3
CONTAINS FETAL CELLS……………………………………..7 GO TO CCM_VCON3
CARDIAC/HEART PROBLEMS (SUCH AS MYOCARDITIS/PERICARDITIS)……………..….8 GO TO CCM_VCON3
DEATH………………………………………………………..…9 GO TO CCM_VCON3
GET COVID-19 FROM VACCINE/VIRAL SHEDDING…….10 GO TO CCM_VCON3
CHILDREN WHO HAD COVID-19 SHOULD NOT GET VACCINATED………………………………...…..11 GO TO CCM_VCON3
VACCINE IS TOO NEW/WAS DEVELOPED TOO QUICKLY…………………………………………………………12 GO TO CCM_VCON3
VACCINE HAS EMERGENCY-USE AUTHORIZATION/DOESN'T HAVE REGULAR APPROVAL…………………………...….13 GO TO CCM_VCON3
POTENTIAL UNKNOWN LONG-TERM SIDE EFFECTS….14 GO TO CCM_VCON3
PRE-EXISTING HEALTH CONDITION/ALLERGIC TO COMPONENT OF VACCINE .................................15 GO TO CCM_VCON3
OTHER…………………………………………………………16 GO TO CCM_VCON2RO
DON'T KNOW……………………………………………...….77 GO TO CCM_VCON3
REFUSED…………………………………………………………99 GO TO CCM_VCON3

CCM_VCON2RO

OTHER SPECIFY: _____________________                      GO TO CCM_VCON3
CCM_VCON3  How important do you think getting a COVID-19 vaccine is to protect [FILL: S.C.] against COVID-19?

Would you say it is not at all important; a little important; somewhat important; or very important?

NOT AT ALL IMPORTANT…………………………………..1 GO TO CCM_VCON4ALL
A LITTLE IMPORTANT………………………………………2 GO TO CCM_VCON4ALL
SOMETHING IMPORTANT…………………………………...3 GO TO CCM_VCON4ALL
VERY IMPORTANT…………………………………………...4 GO TO CCM_VCON4ALL
DON'T KNOW………………………………………………77 GO TO CCM_VCON4ALL
REFUSED……………………………………………………..99 GO TO CCM_VCON4ALL

CCM_VCON4ALL

If you had to guess, about how many of your family and friends have gotten a COVID-19 vaccine for their children aged [FILL: AGEGRP] years? Would you say none; some; many; or almost all?

NONE………………………………………………………….1 GO TO CCM_VCON5A
SOME………………………………………………………….2 GO TO CCM_VCON5A
MANY…………………………………………………………3 GO TO CCM_VCON5A
ALMOST ALL………………………………………………...4 GO TO CCM_VCON5A
DON'T KNOW……………………………………………....77 GO TO CCM_VCON5A
REFUSED…………………………………………………..99 GO TO CCM_VCON5A

CCM_VCON5A

Has a doctor or nurse, or other health professional ever recommended that you get a COVID-19 vaccine for [FILL: S.C.]?

YES……………………………………………………………1 GO TO CCM_VCON5B
NO……………………………………………………………..2 GO TO CCM_VCON5B
DON'T KNOW………………………………………………77 GO TO CCM_VCON5B
REFUSED……………………………………………………99 GO TO CCM_VCON5B

CCM_VCON5B

Does [FILL: S.C.]'s school or daycare require [FILL: him/her/them] to get a COVID-19 vaccine to attend in-person?

YES…………………………………………………………...1 GO TO CCM_VCON6
NO……………………………………………………………..2 GO TO CCM_VCON6
NOT IN SCHOOL, HOME SCHOOLED……………………….3 GO TO CCM_VCON6
DON'T KNOW………………………………………………77 GO TO CCM_VCON6
REFUSED……………………………………………………...99 GO TO CCM_VCON6
CCM_VCON6 How much do you agree with the following statement:

IF CCM_VAX1=2,77,99 THEN DISPLAY: "If I do not get my child a COVID-19 vaccine, I will regret it."; ELSE DISPLAY: "If I had not gotten my child a COVID-19 vaccine, I would have regretted it."

Would you say you: do not agree; somewhat agree; strongly agree; or very strongly agree?

DO NOT AGREE……………………………………………….1 GO TO CCM_VCON7
SOMEWHAT AGREE………………………………………….2 GO TO CCM_VCON7
STRONGLY AGREE…………………………………………...3 GO TO CCM_VCON7
VERY STRONGLY AGREE……………………………………...4 GO TO CCM_VCON7
DON'T KNOW………………………………………………...77 GO TO CCM_VCON7
REFUSED………………………………………………………99 GO TO CCM_VCON7

CCM_VCON7 How difficult [IF CCM_VAX1=2,77,99 THEN DISPLAY: 'would it be for you'; ELSE DISPLAY: 'was it for you'] to get [FILL: S.C.] a COVID-19 vaccine? Would you say: not at all difficult; a little difficult; somewhat difficult; or very difficult?

NOT AT ALL DIFFICULT…………………………………..…1 GO TO CCM_VCON9
A LITTLE DIFFICULT…………………………………………2 GO TO CCM_VCON8
SOMEWHAT DIFFICULT……………………………………..3 GO TO CCM_VCON8
VERY DIFFICULT……………………………………………..4 GO TO CCM_VCON8
DON'T KNOW……………………………………………….77 GO TO CCM_VCON8
REFUSED………………………………………………………99 GO TO CCM_VCON8

CCM_VCON8 Many things might make it difficult to get a COVID-19 vaccine for [FILL: S.C.]. Please tell me if anything I list [IF CCM_VAX1=01 THEN DISPLAY: 'made'; ELSE DISPLAY: 'makes'] it difficult for you.

CONTINUE………………………………………………………..1 GO TO CCM_VCON8A

CCM_VCON8A It's difficult to get an appointment for [FILL: S.C.].

[IF CCM_VAX1=1 THEN DISPLAY: 'Did'; ELSE DISPLAY: 'Has'] this [IF CCM_VAX1=1 THEN DISPLAY: 'make'; ELSE DISPLAY: 'made'] it difficult for you to get a COVID-19 vaccine for [FILL: S.C.]?

YES………………………………………………………………1 GO TO CCM_VCON8B
NO………………………………………………………………2 GO TO CCM_VCON8B
DON'T KNOW……………………………………………….77 GO TO CCM_VCON8B
REFUSED………………………………………………………99 GO TO CCM_VCON8B
CCM_VCON8B
Not knowing where to get [FILL: S.C.] vaccinated.

READ IF NECESSARY: [IF CCM_VAX1=1 THEN DISPLAY: 'Did'; ELSE DISPLAY: 'Has'] this [IF CCM_VAX1=1 THEN DISPLAY: 'make'; ELSE DISPLAY: 'made'] it difficult for you to get a COVID-19 vaccine for [FILL: S.C.]?

YES…………………………………………………………….1 GO TO CCM_VCON8C
NO………………………………………………………………2 GO TO CCM_VCON8C
DON’T KNOW……………………………………………….77 GO TO CCM_VCON8C
REFUSED…………………………………………………….99 GO TO CCM_VCON8C

CCM_VCON8C
Hard to get to vaccination sites for [FILL: S.C.].

READ IF NECESSARY: [[IF CCM_VAX1=01 THEN DISPLAY: 'Did'; ELSE DISPLAY: 'Has'] this [IF CCM_VAX1=01 THEN DISPLAY: 'make'; ELSE DISPLAY: 'made'] it difficult for you to get a COVID-19 vaccine for [FILL: S.C.]?

YES………………………………………………………………1 GO TO CCM_VCON8D
NO……………………………………………………………….2 GO TO CCM_VCON8D
DON’T KNOW……………………………………………….77 GO TO CCM_VCON8D
REFUSED……………………………………………………...99 GO TO CCM_VCON8D

CCM_VCON8D
Vaccination sites for [FILL: S.C.] aren't open at convenient times.

READ IF NECESSARY: [[IF CCM_VAX1=1 THEN DISPLAY: 'Did'; ELSE DISPLAY: 'Has'] this [IF CCM_VAX1=1 THEN DISPLAY: 'make'; ELSE DISPLAY: 'made'] it difficult for you to get a COVID-19 vaccine for [FILL: S.C.]?

YES………………………………………………………………1 GO TO CCM_VCON9
NO……………………………………………………………….2 GO TO CCM_VCON9
DON’T KNOW……………………………………………….77 GO TO CCM_VCON9
REFUSED……………………………………………………...99 GO TO CCM_VCON9
CCM_VCON9  In the past 7 days, how often has [FILL: S.C.] worn a mask when going into indoor public spaces like schools, stores, restaurants, or other indoor spaces? Would you say: never; rarely; sometimes; often; or always?

NEVER…………………………………………………………1 EXIT LOGIC
RARELY……………………………………………………….2 EXIT LOGIC
SOMETIMES…………………………………………………..3 EXIT LOGIC
OFTEN…………………………………………………………4 EXIT LOGIC
ALWAYS………………………………………………………5 EXIT LOGIC
DIDN'T GO TO STORES/NOT APPLICABLE………………6 EXIT LOGIC
DON’T KNOW……………………………………………..77 EXIT LOGIC
REFUSED……………………………………………………99 EXIT LOGIC

EXIT LOGIC:
IF AGE>35 MONTHS GO TO CCM_VCON10;
ELSE IF FLUONOFF=OFF AND AGE EQ 6-18 MONTHS AND NIS-CHILD NOT COMPLETE GO TO LF_HES2; ELSE IF FLUONOFF=OFF AND IF NIS-CHILD COMPLETE AND P_ASKADULT=1 GO TO ADLT_INTRO;
ELSE IF FLUONOFF=OFF AND IF NIS-CHILD COMPLETE AND P_ASKADULT=0 GO TO K_D16
ELSE IF FLUONOFF=ON AND P_ASKADULT=1 GO TO ADLT_INTRO; ELSE IF FLUONOFF=ON AND P_ASKADULT=0 GO TO K_D16

CCM_VCON10
Would you say [FILL: Child's name]'s mental health is: excellent; very good; good; fair; or poor?

EXCELLENT………………………………………………...…1 EXIT LOGIC
VERY GOOD………………………………………………...…2 EXIT LOGIC
GOOD……………………………………………………...…3 EXIT LOGIC
FAIR…………………………………………………………4 EXIT LOGIC
POOR…………………………………………………………5 EXIT LOGIC
DON’T KNOW…………………………………………......77 EXIT LOGIC
REFUSED…………………………………………………..99 EXIT LOGIC

EXIT LOGIC:
IF FLUONOFF=OFF THEN DO:
    IF NIS-CHILD AND NIS-TEEN NOT COMPLETE GO TO LF_HES2;
    ELSE IF P_ASKADULT=1 GO TO ADLT_INTRO;
    ELSE IF P_ASKADULT=0 GO TO K_D16;

IF FLUONOFF=ON THEN DO:
    IF NIS-CHILD, NIS-TEEN, OR NIS-CIM NOT COMPLETE THEN GO TO LF_HES2; ELSE IF P_ASKADULT=1 GO TO ADLT_INTRO; ELSE IF P_ASKADULT=0 GO TO
This next question is about all recommended childhood vaccines, not just flu vaccination. Overall, how hesitant about childhood shots would you consider yourself to be? 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

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

Was [S.C]’s visit or appointment delayed, missed, or not scheduled because of COVID-19? Please include anything that could be related to COVID-19, such as fear of exposure to COVID, the doctor’s office was closed, COVID-related loss of health insurance, or anything else.

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

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  
- DON’T KNOW: 77  
- REFUSED: 99
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 GO TO LF_HHSIZE
[IF IAP NOT GUAM OR PUERTO RICO DISPLAY] CHIP
[FILL PROGRAM NAME] ...........................................2 GO TO LF_HHSIZE
SOMETHING ELSE/PRIVATE INSURANCE /
HMO PREPAID PLAN ..............................................3 GO TO LF_HHSIZE
DON’T KNOW ....................................................77 GO TO LF_HHSIZE
REFUSED .........................................................99 GO TO LF_HHSIZE

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

ENTER NUMBER .................................................. GO TO LF_11Q01
DON’T KNOW ....................................................77 GO TO LF_11Q01
REFUSED .........................................................99 GO TO LF_11Q01

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 GO TO LF_11Q01A
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 IAP=VIRGIN ISLANDS THEN DISPLAY: (Dominican)), or of other Hispanic, Latino/a, or Spanish origin?

CLICK 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 GO TO LF_11Q01A_OS

(IF IAP= VIRGIN ISLANDS, THEN DISPLAY (DOMINICAN))................................11 GO TO LF_11Q02
DON’T KNOW ....................................................77 GO TO LF_11Q02
REFUSED .........................................................99 GO TO 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?

MARK 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 08 GO TO LF_11Q02 OS (FOLLOW THIS LOGIC FIRST)
ELSE IF IAP= GUAM & OPTION 05 OR 07 SELECTED, GO TO LF_AAPI
ELSE IF LF_11Q02 INCLUDES 05 GO TO LF_11Q02A_AS
ELSE IF LF_11Q02 INCLUDES 07 GO TO LF_11Q02A_PI
ELSE IF LF_11Q02 INCLUDES 05,07 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_Q01B

IF IAP=GUAM & OPTION 05 OR 07 SELECTED, GO TO LF_AAPI
ELSE IF LF_11Q02 INCLUDES 05 GO TO LF_11Q02A_AS
ELSE IF LF_11Q02 INCLUDES 07 GO TO LF_11Q02A_PI
ELSE IF LF_11Q02 INCLUDES 05, 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_Q01B
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 07 GO TO LF_11Q02A_PI IF NIS COMPLETE GO TO LF_11NIS, ELSE IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO TO LF_Q01B

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_Q01B
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; IF NIS COMPLETE GO TO LF_11NIS,
ELSE IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO TO LF_Q01B

LF_AAPI_OTH

ENTER OTHER SPECIFY ____________________________

IF NIS COMPLETE GO TO LF_11NIS, ELSE IF TEEN COMPLETE GO TO
LF_11TEEN, ELSE GO TO LF_Q01B
LF_11NIS  [IF LF_C1Q02<=5, "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 VRY_ADD;
ELSE IF
P_ASKADULT=0
GO TO K_D16

NO………………………………………………………….2
IF TEEN COMPLETE
GO TO LF_11TEEN,
ELSE GO TO
LF_Q01B

DON’T KNOW………………………………………..77
IF TEEN COMPLETE
GO TO LF_11TEEN,
ELSE GO TO
LF_Q01B

REFUSED………………………………………………..99
IF TEEN COMPLETE
GO TO LF_11TEEN,
ELSE GO TO
LF_Q01B

LF11TEEN  [IF LF_C1Q02<=5, "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 VRY_ADD;
ELSE IF
P_ASKADULT=0
GO TO K_D16

NO………………………………………………………….2
GO TO LF_Q01B

DON’T KNOW………………………………………………77
GO TO LF_Q01B

REFUSED………………………………………………..99
GO TO LF_Q01B
**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.

<table>
<thead>
<tr>
<th>Response</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1 GO TO LF_11Q01B_HISP</td>
</tr>
<tr>
<td>NO</td>
<td>2 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>77 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99 GO TO LF_11Q02B</td>
</tr>
</tbody>
</table>

**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 IAP= VIRGIN ISLANDS THEN DISPLAY: (Dominican)), or of Spanish origin?

CLICK ALL THAT APPLY

<table>
<thead>
<tr>
<th>Response</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEXICAN/MEXICANO, MEXICAN-AMERICAN</td>
<td>1 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>CHICANO/A</td>
<td>2 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>PUERTO RICAN</td>
<td>3 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>CUBAN</td>
<td>4 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>CENTRAL AMERICAN</td>
<td>5 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>SOUTH AMERICAN</td>
<td>10 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>OTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN (SPECIFY)</td>
<td>11 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>(IF IAP= VIRGIN ISLANDS, THEN DISPLAY (DOMINICAN))</td>
<td>11 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>77 GO TO LF_11Q02B</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99 GO TO LF_11Q02B</td>
</tr>
</tbody>
</table>

**LF_11Q01B_HISPOS**

ENTER OTHER________  GO TO 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"you" 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?

[MARK 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 08 IS SELECTED, GO TO LF_11Q02B_OS
ELSE IF IAP=GUAM & OPTION 05 OR 07 SELECTED, GO TO LF_BAPI
ELSE IF 05 IS SELECTED, GO TO LF_11Q02B_AS,
ELSE IF 07 IS SELECTED GO TO LF_11Q02B_PI,
ELSE IF 05 AND 07 ARE SELECTED GO TO LF_11Q02B_AS FIRST
ELSE GO TO LF_11Q20

LF_11Q02B_OS
ENTER OTHER_____

IF IAP=GUAM & LF_Q02B INCLUDES 05 OR 07, GO TO LF_BAPI
ELSE IF LF_11Q02B INCLUDES 05, GO TO LF_11Q02B_AS,
ELSE IF LF_11Q02B INCLUDES 07 GO TO LF_11Q02B_PI,
ELSE IF LF_11Q02B INCLUDES 05 AND 07, 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 GO TO LF_11Q20
CHINESE ...............................................................2 GO TO LF_11Q20
FILIPINO ...............................................................3 GO TO LF_11Q20
JAPANESE ..............................................................4 GO TO LF_11Q20
KOREAN .................................................................5 GO TO LF_11Q20
VIETNAMESE ..........................................................6 GO TO LF_11Q20
OTHER ASIAN ........................................................7 GO TO LF_11Q02B_PI
DON'T KNOW .........................................................77 GO TO LF_11Q20
REFUSED ...............................................................99 GO TO LF_11Q20
[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

Are you/[Is S.C.’s mother] Chamorro, Filipino, Chutluke, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: “Please choose the category that describes [IF LFC1Q02 = 1,2,3,4,5 “you” ELSE] [S.C.’s mother] best.”

CHAMORRO…………………………………………….1 GO TO LF_11Q20
FILIPINO………………………………………………..2 GO TO LF_11Q20
CHUUKENESE………………………………………..3 GO TO LF_11Q20
POHNPEIAN…………………………………………..4 GO TO LF_11Q20
PALAUAN………………………………………………5 GO TO LF_11Q20
YAPESE…………………………………………………6 GO TO LF_11Q20
KOSRAEAN……………………………………………..7 GO TO LF_11Q20
MARSHALIANESE……………………………………..8 GO TO LF_11Q20
JAPANESE……………………………………………..9 GO TO LF_11Q20
KOREAN………………………………………………10 GO TO LF_11Q20
CHINESE………………………………………………11 GO TO LF_11Q20
VIETNAMESE…………………………………………12 GO TO LF_11Q20
THAI……………………………………………………13 GO TO LF_11Q20
OTHER…………………………………………………..14 GO TO LF_BAPI_OTH
DON’T KNOW………………………………………….77 GO TO LF_11Q20
REFUSED………………………………………………99 GO TO LF_11Q20

ENTER OTHER SPECIFY____GO TO LF_11Q02
GO TO LF_11Q20
LF_11Q20  What is the highest grade or year of school [you have / [S.C.’s [MOTHER TYPE] has] completed?

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

8th GRADE OR LESS…………………………………..1  GO TO LF_C19C
9th-12th GRADE NO DIPLOMA……………………… 2  GO TO LF_C19C
HIGH SCHOOL GRADUATE OR
GED COMPLETED…………………………………….3  GO TO LF_C19C
COMPLETED A VOCATIONAL, TRADE,
OR BUSINESS SCHOOL PROGRAM…………………4  GO TO LF_C19C
SOME COLLEGE CREDIT BUT NO DEGREE……… 5  GO TO LF_C19C
ASSOCIATE DEGREE (AA, AS)……………………..6  GO TO LF_C19C
BACHELOR’S DEGREE (BA, BS, AB)……………...7  GO TO LF_C19C
MASTER’S DEGREE (MA, MS, MSW, MBA)………...8  GO TO LF_C19C
DOCTORATE (PhD, EdD) or PROFESSIONAL
DEGREE (MD, DDS, DVM, JD)……………………….9  GO TO LF_C19C
DON’T KNOW …………………………………………77  GO TO LF_C19C
REFUSED…………………………………………….99  GO TO LF_C19C

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  GO TO LF_11Q51
RENTED……………………………………………..2  GO TO LF_11Q51
OTHER ARRANGEMENT……………………………..3  GO TO LF_11Q51
DON’T KNOW ………………………………………….77  GO TO LF_11Q51
REFUSED……………………………………………99  GO TO LF_11Q51

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.

RECORD INCOME……………………………………$  GO TO
LF_11Q51_CONF
DON’T KNOW ………………………………………..77  GO TO LF_11Q52
REFUSED…………………………………………….99  GO TO LF_11Q52
Just to confirm that I entered the number correctly, the total combined family income was [FILL RESPONSE, 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

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 GO TO LF_11Q53
DON’T KNOW…………………………………………77 GO TO LF_LNDLN
REFUSED……………………………………………….99 GO TO LF_LNDLN

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 GO TO LF_11Q54
DON’T KNOW…………………………………………77 GO TO LF_LNDLN
REFUSED……………………………………………….99 GO TO LF_LNDLN

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

Was it more than $15,000?

YES………………………………………………………1 GO TO LF_11Q55A
NO………………………………………………………..2 GO TO LF_11Q55B
DON’T KNOW…………………………………………77 GO TO LF_LNDLN
REFUSED……………………………………………….99 GO TO LF_LNDLN

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?

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
<th>Next Page</th>
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</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>77</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
<td>GO TO LF_LNDLN</td>
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**LF_11Q56**  (READ IF NECESSARY: Was the total combined household income) more or less than $40,000?

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<tr>
<th>Response</th>
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<tbody>
<tr>
<td>MORE THAN $40,000</td>
<td>1</td>
<td>GO TO LF_11Q56A</td>
</tr>
<tr>
<td>$40,000</td>
<td>2</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>LESS THAN $40,000</td>
<td>3</td>
<td>GO TO LF_11Q57</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>77</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
<td>GO TO LF_LNDLN</td>
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</tbody>
</table>

**LF_11Q56A**  (READ IF NECESSARY: Was the total combined household income) more or less than $60,000?

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<tr>
<th>Response</th>
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<tbody>
<tr>
<td>MORE THAN $60,000</td>
<td>1</td>
<td>GO TO LF_11Q58</td>
</tr>
<tr>
<td>$60,000</td>
<td>2</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>LESS THAN $60,000</td>
<td>3</td>
<td>GO TO LF_11Q56B</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>77</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
<td>GO TO LF_LNDLN</td>
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**LF_11Q56B**  (READ IF NECESSARY: Was the total combined household income) more or less than $50,000?

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<tr>
<th>Response</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>MORE THAN $50,000</td>
<td>1</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>$50,000</td>
<td>2</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>LESS THAN $50,000</td>
<td>3</td>
<td>GO TO LF_11Q56C</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>77</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
<td>GO TO LF_LNDLN</td>
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</tbody>
</table>

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

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<tr>
<th>Response</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>MORE THAN $45,000</td>
<td>1</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>$45,000</td>
<td>2</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>LESS THAN $45,000</td>
<td>3</td>
<td>GO TO LF_11Q57</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>77</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
<td>GO TO LF_LNDLN</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>MORE THAN $30,000</td>
<td>1</td>
<td>GO TO LF_11Q57A</td>
</tr>
<tr>
<td>$30,000</td>
<td>2</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>LESS THAN $30,000</td>
<td>3</td>
<td>GO TO LF_11Q57B</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>77</td>
<td>GO TO LF_LNDLN</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
<td>GO TO LF_LNDLN</td>
</tr>
</tbody>
</table>

NORC
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 GO TO LF_LNDLN
$75,000…………………………………………………..2 GO TO LF_LNDLN
LESS THAN $75,000……………………………………3 GO TO LF_LNDLN
DON’T KNOW…………………………………………77 GO TO LF_LNDLN
REFUSED……………………………………………….99 GO TO LF_LNDLN

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

READ AS 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 GO TO LF_12Q14
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 INSTRUCTION: THIS QUESTION IS ASKING FOR THE TOTAL NUMBER OF LANDLINE TELEPHONE NUMBERS

ONE.................................................................1  GO TO  LF_11Q15_CELL
TWO...............................................................2  GO TO  LF_11Q15_CELL
THREE OR MORE..............................................3  GO TO  LF_11Q15_CELL
NONE.............................................................4  GO TO  LF_11Q15_CELL
DON’T KNOW.................................................77  GO TO  LF_11Q15_CELL
REFUSED.......................................................99  GO TO  LF_11Q15_CELL

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  GO TO  LF_11Q15_CELL_US
TWO...............................................................2  GO TO  LF_11Q15_CELL_US
THREE OR MORE..............................................3  GO TO  LF_11Q15_CELL_US
NONE.............................................................4  IF IAP= VIRGIN ISLANDS GO TO LF_ISLAND, ELSE IF IAP=GUAM, SKIP TO LF_VIL ELSE GO TO LF_11Q22
DON’T KNOW.................................................77  GO TO  LF_11Q15_CELL_US
REFUSED.......................................................99  GO TO  LF_11Q15_CELL_US
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 IAP= VIRGIN ISLANDS & IF LF_LNDLN = 2, 77, OR 99, SKIP TO LF_ISLAND;
ELSE IF IAP=GUAM & IF LF_LNDLN = 2, 77, OR 99, SKIP TO LF_VIL; ELSE IF
LF_LNDLN = 2, 77, OR 99, SKIP 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 IAP = VIRGIN ISLANDS GO TO LF_ISLND; ELSE IF IAP=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
MAIN...........................................................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_ISLAND  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 ADULTONOFF=ON AND P_ASKADULT=1 GO TO ADLT_INTRO; ELSE GO TO K_D16.
NORC

LF_11Q22 Please tell me your zip code.

___ ___ ___ ___ ___ ____________________________ GO TO

LF_11Q22CONF

DON’T KNOW…………………………………..77777 IF IAP= PUERTO
RICO GO TO
LF_11Q22APR; ELSE
GO TO LF_11Q22A

REFUSED………………………………………….99999 IF IAP= PUERTO
RICO GO TO
LF_11Q22APR; ELSE
GO TO LF_11Q22A

ELSE IF IAP=GUAM, LF_VIL=98, ADULTONOFF=ON, AND P_ASKADULT=1, GO
TO ADLT_INTRO; ELSE IF IAP=GUAM, LF_VIL=98, ADULTONOFF=ON, AND
P_ASKADULT=0 GO TO K_D16; ELSE IF IAP=GUAM, LF_VIL=98, AND
ADULTONOFF=OFF GO TO K_D16.

LF_11Q22APR

In what city and state you live?

CITY……………………………………………….. IF “NOT IN PUERTO
RICO” SELECTED,
GO TO LF_11Q22A;
ELSE GO TO STATE.

STATE……………………………………………….. GO TO LF_11Q22D

LF_11Q22A In what city, county, and state 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 [TEXT FILL: CITY], [TEXT FILL: COUNTY] county, [TEXT
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 GO TO LF_11Q22E
LF_11Q22E  What is your zip code?

ENTER ZIP CODE _______________________

IF IAP= PUERTO RICO, ADULTONOFF=ON AND P_ASKADULT=0, 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 ADULTONOFF=OFF OR P_ASKADULT=0 AND P_INCENT >0, GO TO VRYADD; ELSE GO TO K_D16; IF ADULTONOFF=ON AND P_ASKADULT=1, GO TO ADLT_INTRO; ELSE IF P_INCENT>0, GO TO VRYADD, 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 GO TO K_D16
WILL GIVE ADDRESS………………………………...2 GO TO AC_NAME
DON’T KNOW…………………………………………77 GO TO K_D16
REFUSED………………………………………………99 GO TO K_D16

K_D16  Those are all the questions I have. I’d like to thank you on behalf of the (IF IAP=GUAM DISPLAY: ‘Department of Public Health and Social Services and the’) (IF IAP= 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. If you have questions about your rights as a survey participant, you may call the NORC Institutional Review Board at 1-866-309-0542. Thank you again.