

ATTACHMENT D: Follow-Up Telephone Interview

Hello, [respondent name], my name is _____ and I am from the Puerto Rico Department of Health OR the Centers for Disease Control and Prevention.

I am calling you because I spoke with you last month and you gave me permission to call you back. Thanks for being willing to talk with us again. I have just a few questions that will take less than 15 minutes. If we disconnected, I will call you back.

This time, we're going to focus on asking you questions about actions that you and the community might be taking in order to prevent Zika. I'll start by asking you a few questions about what you may or not be doing.

A. Introduction for Interview

Before I begin I want to go over a couple of items:

- This interview is voluntary. You can decline to answer any question and you can end our conversation at any time
- There are no right or wrong answers. I am interested in your opinion. If you don't understand the question, feel free to let me know and I can ask it another way. This is not a test, so feel free to say you don't know or don't have an opinion to offer and "I don't know." This is a perfectly acceptable response to any question I ask you. You may also choose to say that you do not want to answer the question I ask you.
- The information you provide today will not be shared with anyone except those involved in this project. It's important to know that the questions I'm about to ask you will not affect your eligibility for WIC services in any way. Our reports will include the responses of ALL the women who talk with us so that you can provide honest answers without worrying that your answers will hurt you in any way. Your answers cannot be linked back to you.
- Do you have any questions before we begin?

Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx).

Questions about recent performance of key Zika prevention behaviors

1. Yesterday, did you put mosquito repellent on skin that was not covered by clothing?

Yes, Why? *(Do not read, tick all mentioned)*

- To keep from getting bitten by mosquitoes
- To protect me and my baby from Zika
- To keep from getting Dengue or Chikungunya
- People who matter to me encourage me to put it on
- Other response options...

What time or times of the day did you apply repellent? *(Do not read, tick all mentioned)*

- First thing in the morning (after I got dressed)
- Later in the morning (after breakfast or before I went outside)
- In the middle of the day (around lunch time)
- In the early afternoon
- In late afternoon
- In early evening (before the sun went down/before it got dark outside)
- Late evening (after the sun went down/after it got dark outside)
- AM Mid-day and PM
- Other, please specify:
- Refused

Is what you did yesterday with the repellent what you typically do most days of the week?

- Yes
- No
- Don't know/not sure
- Refused

No, Why not? *(Do not read, tick all mentioned)*

- I don't believe it works
- I don't like the smell
- I was not going outside
- I have a bad reaction to it (nausea, skin rash, irritation, etc.)
- I wanted to, but I don't have any
- I forgot about using it
- I'll probably get sick anyways
- Worried repellent is not safe for me/my baby
- I didn't notice any mosquitoes
- Don't know
- Other, please specify:

Refused

2. Is there any other kind of product or substance that you use on your skin to reduce getting bitten?

Yes ... What?

- Vaseline

Vick's vapo-rub
Avon skin-so-soft bath oil
Other type of oil
Others, please specify: _____

No
Refused

3. Yesterday, did you sleep under a mosquito bed net every time you were asleep or took a nap?

Yes, Why? (*Do not read, tick all mentioned*)

To keep from getting bitten by mosquitoes
To protect me and my baby from Zika
To keep from getting dengue or chikungunya
I always sleep under a bed net (habit or custom)
Other, please specify:
Don't know/Not sure
Refused

No, Why not? (*Do not read, tick all mentioned*)

I don't believe it works
I get claustrophobic
Mosquito net makes it too hot
I slept on the couch, sofa, or a place other than my bed
I can't sleep well with net -it makes me anxious
I have air conditioning or a ceiling fan to keep mosquitoes away
It's old fashioned, something my grandmother uses
I wanted to, but I don't have a bed net
I don't know what it is
Too hard to set up
It is dangerous - can get tangled in it or trip on it
Don't know/Not sure
Other, please specify: _____
Refused

Refused

The next questions are about sexual relations with your husband or male partner.

4. Since you became pregnant, have you had sexual intercourse [that is, vaginal, anal, or oral (mouth-to-penis) sex] with any male partner?

No, what was the main reason you have not had sex since becoming pregnant

Partner is no longer around/has left
Don't want to have sex
Trying to avoid getting Zika infection
Other, please specify: _____

After recording response, go to question 9

Yes

Prefer not to answer

5. When you had sex, how often did you use a condom?

Every time I had sex → Go to question 7

Sometimes when I had sex → Go to question 6

I never used a condom when I had sex → Go to question 6

Prefer not to answer

6. What were your reasons for not using condoms every time you had sex since became pregnant?

Check ALL that apply

I am pregnant already so I don't need a condom to prevent pregnancy

I didn't think I needed to use condoms during pregnancy

I didn't know you could get Zika virus from having sex

I didn't think a condom would prevent Zika infection

I didn't think my partner had Zika virus

I was not worried about getting the Zika virus

I didn't want to use condoms/I don't like to use condoms

My partner didn't want to use (refused to use) condoms/My partner doesn't like to use condoms

I could not get condoms when I needed them

I could not afford condoms

I forgot to use condoms

I am embarrassed to buy condoms

I object to using condoms for religious reasons

I have an allergic reaction to condoms

Other, please specify: _____

Refused

7. Has your husband or any male partner gotten a test for Zika virus?

No

Yes

Don't know/not sure

Refused

8. Has a doctor, nurse or other healthcare worker told your husband or any male partner that he has or has had a Zika virus infection?

No

Yes

Don't know/not sure

Refused

The next questions are about your clothing

9. Are you wearing long pants right now?

Yes, Why?

- To keep from getting bitten by mosquitoes
- To protect me and my baby from Zika
- To keep from getting Dengue or Chikungunya
- To comply with dress code of work or school
- Other response options, please specify:

Do you [wear long pants] every day?

- Yes , all day
- Yes, part of the day
- No

No, Why not?

- I don't believe it works
- The weather/climate is too hot to cover up my body
- Being pregnant makes me hot so it's uncomfortable to wear clothing
- I wanted to, but I don't have any long sleeved pants or shirts
- Not fashionable
- I prefer to wear a dress/skirt
- My work/school uniform doesn't allow me to
- Other, please specify:

Refused

10. Are you wearing a long-sleeved shirt right now?

Yes, Why?

- To keep from getting bitten by mosquitoes
- To protect me and my baby from Zika
- To keep from getting dengue or chikungunya
- To comply with dress code of work or school
- Other, please specify: _____

Do you wear long sleeves every day?

- Yes, all day
- Yes, part of the day
- No

No, Why not?

- I don't believe it works
- The weather/climate is too hot to cover up my body
- Being pregnant makes me hot so it's uncomfortable to wear clothing
- I wanted to, but I don't have any long sleeved pants or shirts

Not fashionable
My work/school uniform doesn't allow me to
Other, please specify: _____

Refused

11. In the past week, have you or somebody in your household removed accumulated water and covered up or screened water containers inside and around your home (on your property)?

Yes, Why?

To help reduce the mosquito population (the numbers of mosquitoes)
To protect me and my baby from Zika
To keep my home looking good
Other, please specify: _____

No, Why not?

I do not have a yard or area that I am responsible for taking care of
I have not had time to do this
It has not rained so no water has accumulated in the past week
I don't care (apathy)
There's too much water around me -- it's too much work
It doesn't matter because my neighbors don't take care of the water in and around their property - it's pointless
It rains too much to keep up with this
I am physically unable to do it
The government should do it
Other, please specify: _____

Refused

12. Have you ever put a mosquito dunk in accumulated water around your home?

Yes, Why?

To help reduce the mosquito population (the numbers of mosquitoes)
To protect me and my baby from Zika
Because the Zika Prevention kit told me to
Other, please specify: _____

When did you put the mosquito dunk in water?

In the last week?
In the last month?
In the last several months?
Other, please specify:

No

I do not know what mosquito dunks are
I do not have mosquito dunks
I do not think mosquito dunks work
I do not think mosquito dunks are safe to use, so I will not use them
I do not have a yard or area that I am responsible for taking care of

I have not had time to do this
Someone else in my family has done this so I don't need to
Other, please specify: _____

Refused

13. Is there anything that we haven't discussed that you have been doing to reduce the risk of mosquito bites to avoid getting Zika virus?

No
Yes, What?

Staying indoors
I moved to/spend more time in another location with fewer mosquitoes, or better housing
I have sprayed my house with pesticide by myself or my family
I have had a business come spray my house
Burn mosquito coils
Other, please specify:

Refused

Now I'm going to ask you about what the community may or may not be doing to prevent Zika.

14. How satisfied are you with the actions that your **family members** are taking to help prevent Zika?

Very unsatisfied
Unsatisfied
Neutral
Satisfied
Very satisfied
Refused

15. How satisfied are you with the actions that your **neighbors** are taking to help prevent Zika?

Very unsatisfied
Unsatisfied
Neutral
Satisfied
Very satisfied
Refused

16. How satisfied are you with the actions that your **municipality** is taking to help prevent Zika?

Very unsatisfied
Unsatisfied
Neutral
Satisfied
Very satisfied
Refused

17. How satisfied are you with the actions that the Department of Health is taking to prevent Zika?

- Very unsatisfied
- Unsatisfied
- Neutral
- Satisfied
- Very satisfied
- Refused

18. In the past month, have you seen any of the following activities in your community? Read the list and for each item, check No if they did not see it or Yes, if they did it.

	No	Yes
a. Municipality workers applying larvicide	<input type="checkbox"/>	<input type="checkbox"/>
b. Fumigation trucks spraying insecticide	<input type="checkbox"/>	<input type="checkbox"/>
c. Announcements that aerial spraying will occur	<input type="checkbox"/>	<input type="checkbox"/>
d. Efforts to clean up trash and remove tires	<input type="checkbox"/>	<input type="checkbox"/>
e. Community meetings to discuss Zika	<input type="checkbox"/>	<input type="checkbox"/>
f. Messages telling the community to eliminate accumulated water	<input type="checkbox"/>	<input type="checkbox"/>
g. Volunteers going to homes to teach about reducing mosquito breeding sites	<input type="checkbox"/>	<input type="checkbox"/>
h. Volunteers using smartphone apps to record mosquito breeding sites	<input type="checkbox"/>	<input type="checkbox"/>
i. Volunteers helping to install screen windows and doors	<input type="checkbox"/>	<input type="checkbox"/>
j. Neighbors or volunteers putting mosquito traps around homes	<input type="checkbox"/>	<input type="checkbox"/>
k. Workshops on how to keep mosquitoes out of homes	<input type="checkbox"/>	<input type="checkbox"/>
l. Workshops on how to reduce mosquito breeding sites	<input type="checkbox"/>	<input type="checkbox"/>
m. Neighbors or workers fixing septic tanks, covering pipes	<input type="checkbox"/>	<input type="checkbox"/>
n. School events about Zika	<input type="checkbox"/>	<input type="checkbox"/>
o. Other, please specify:	<input type="checkbox"/>	<input type="checkbox"/>

19. What suggestions do you have for helping to prevent Zika in your community?

Thank you for answering these questions! Your answers will help us in our efforts to keep pregnant women and their babies healthy.