

Intercept Interviews with Community Members in US Virgin Islands To Assess Zika Knowledge, Risk Perceptions, and Trusted Information Sources

A. Introduction for Interview

Hello, [respondent name], my name is _____ and I am working with the USVI Department of Health.

Thank you for your willingness to share your opinions with me. The purpose of this interview is to get your opinions about Zika virus on the island. The information we gather will be used by the USVI Department of Health and the Centers for Disease Control and Prevention. I only have a few questions so this will last less than 10 minutes.

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

- This interview is voluntary. You do not have to answer any questions you don't want to.
- 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 and I can ask it another way. This is not a test, so feel free to say you don't know or you don't have an opinion.
- The information you provide today will be kept private to the extent permitted by law. I will not be asking for your name as part of this interview.
- The report we write will be a summary of all the interviews we are conducting with no way to identify you or your specific answers.
- With your permission, I would like to record our conversation. I do this simply to make sure that I capture all of the information that you share and so I can listen to what you have to say and not worry about taking notes. The recording helps me in writing my report and is used for that purpose only. Is it okay for me to record our conversation?
- Do you have any questions before we begin?

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B. Interview Questions

Current knowledge, information sources, and trusted sources

1. What have you heard about Zika? (Do not read, tick all mentioned)

- Pregnant women should try not to get it [PREGNANT WOMEN]
- It causes microcephaly or brain defects in babies [MICROCEPHALY]
- People get it from mosquitoes, so should avoid getting bitten [MOSQUITOES]
- It can be transmitted by sex from a man to a woman [SEXUALLY TRANSMITTED]
- People in USVI are getting infected with Zika – the virus is here [LOCAL/IN USVI]
- Most people who have it, don't know it (can have Zika and have no symptoms) [ASYMPTOMATIC]
- It causes fever, rash, and conjunctivitis [LISTED SYMPTOMS]
- There is no treatment for Zika [NO TREATMENT]
- There is no vaccine for Zika [NO VACCINE]
- It can be life-threatening – can cause paralysis, GBS [LIFE-THREATENING-GBS]
- People should wear repellent [WEAR REPELLENT]
- People should wear clothing that covers [WEAR CLOTHING]
- People should eliminate standing or accumulated water [REMOVE WATER]
- People should put screens on windows and doors [SCREENS]
- It is like Dengue and Chikungunya [LIKE DENGUE & CHIK]
- It is dangerous [DANGEROUS]
- Haven't heard anything [HEARD NOTHING]
- Other, please specify: [OTHER]
- Refused [REFUSED]

2. In the past month, how often have you and your family members and friends talked about Zika? [READ OPTIONS, PICK ONE]

- Not at all
- Only once or twice
- Sometimes
- Often
- Every day
- Refused [DO NOT READ]

3. How serious of a health concern is Zika to you personally? [READ OPTIONS, PICK ONE]

- 1 Not serious at all
- 2 Somewhat serious
- 3 Serious
- 4 Very Serious
- 99 Refuse

4. How serious of a health concern is Zika to your community? [READ OPTIONS, PICK ONE]

- 1 Not serious at all
- 2 Somewhat serious
- 3 Serious
- 4 Very serious
- 99 Refuse

5. **How do you think that you would ~~you~~ know whether you had a Zika infection or not?**
[RECORD RESPONSE]

6. **In your opinion, how likely do you think it is that you will get infected with the Zika virus?**

(Pick One)

- 1 Very unlikely
- 2 Somewhat unlikely
- 3 Likely
- 4 Very likely
- 99 Refuse

a) What about your experience makes you think you are (*very unlikely/somewhat unlikely/likely/very likely*) to get infected with the Zika virus?

b) If likely/very likely, how will getting a Zika virus infection affect you and your family?

7. What actions have you taken to protect yourself from getting infected with the Zika virus?
(Do not read, tick all mentioned)

Personal behaviors

- Used mosquito repellent or spray on your body [USE REPELLENT]
- Sprayed permethrin on clothes [USE PERMETHRIN]
- Worn clothes that cover my arms and legs (long sleeved shirts and pants) [WEAR CLOTHES THAT COVER]
- Used mosquito net at night [USE BED NET AT NIGHT]
- Used mosquito net during the day [USE BED NET DURING DAY]
- Used a condom/had my partner use a condom in all sexual relations [USE CONDOMS]
- Abstained from sexual intercourse [ABSTAINED]
- Prayed to God [PRAYED]
- Don't go outside at all [DON'T GO OUT AT ALL]
- Don't go outside at night [DON'T GO OUT AT NIGHT]
- Go to doctor [GO TO DOCTOR]
- Got tested and/or got my partner tested for Zika [GOT TESTED]
- Looked for more information about Zika [LOOKED FOR INFO]
- Used mosquito coil/light fires to keep mosquitoes away [LIT CANDLES/COILS]
- Cleaned/scrubbed water source/storage unit/water container(s) [CLEANED CONTAINERS]
- Put cover(s) over the water source/storage unit/water container(s) [COVERED CONTAINERS]
- Removed accumulated water [REMOVED WATER]
- Sprayed or fumigated inside my home [SPRAYED INSIDE HOME]
- Sprayed or fumigated outside of my home [SPRAYED OUTSIDE HOME]
- Used larvicides (like mosquito dunks) [USED LARVICIDE]
- Put screens on windows and doors [PUT SCREENS UP]
- Cleaned household environment [CLEANED HOUSE]
- No answer [NO ANSWER]
- Closed windows and doors [CLOSED WINDOWS AND DOORS]
- Cut grass [CUT GRASS]
- Used air conditioning [USED AIR CONDITIONING]
- Haven't done anything [NOTHING]
- Other, please specify: [OTHER]
- Refused [REFUSED]

Actions taken around the home

8. Where do you get your information about Zika?
Probe for sources such as media, family, friends, and church
9. When it comes to Zika, are there any organizations that you would really trust as a reliable source of information? Probe for organizations, people, or channels of information
10. What types [formats] of information would you like to receive regarding Zika? What would be the most effective way for you to get the information you want?
Probes: Video? Educational pamphlets? Community/public meetings? Internet?
11. Do you have questions about Zika that you want answers to? What are they?
12. Lastly, I'd like to ask you about your opinions about several different approaches to vector (mosquito) control for a neighborhood or community. For each of the approaches, please tell me whether you would Strongly Oppose, Oppose, Support, or Strongly Support the approach.

a. Backpack spraying

- 1 Strongly oppose
- 2 Oppose
- 3 Support
- 4 Strongly support
- 99 Refuse

c. Spraying from airplanes

- 1 Strongly oppose
- 2 Oppose
- 3 Support
- 4 Strongly support
- 99 Refuse

b. Spraying from trucks

- 1 Strongly oppose
- 2 Oppose
- 3 Support
- 4 Strongly support
- 99 Refuse

d. Mosquito traps in my yard

- 1 Strongly oppose
- 2 Oppose
- 3 Support
- 4 Strongly support
- 99 Refuse

Demographic information

13. What is your age? Age _____ (in years)

14. What is the highest degree or level of school that you have completed? Pick one.

- No schooling completed
- Preschool through grade 12, no diploma
- High school graduate
- College or Some College
- College Graduate (associate's, bachelor's degree)
- Post graduate (Master's degree, Doctorate's degree, or professional degree like MD, DVM, JD, etc)

15. Are you of Hispanic or Latino, Latino, or Spanish origin?

No, not Hispanic or Latino

Yes, Hispanic or Latino

16. What is your race?

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

17. What is the person's sex [NOTE THE SEX OF THE PERSON, DO NOT ASK]

Male

Female

Thank you so much for your participation.