*OMB No. 0990-0476*

*Exp. Date 07/31/2021*

# 

# COVID-19 Public Education Media Opinions Survey

**Welcome**

***// Display OMB number and exp in the bottom right off all screens //***

You have been selected to take this survey about COVID-19. The primary purpose of this survey is to help assess, among a large group of U.S. adults, perceptions of potential COVID-19 public education campaign brand. The survey will also assess experience and behaviors, and opinions about creative materials related to COVID-19.

Most people take about 20 minutes to complete the survey.

As mentioned, this survey will show you potential COVID-19 media and then ask you some questions about it. We also have some additional information available to you about this survey. Select the additional pages you would like to read below, if any. You will then be shown a privacy statement before proceeding with the survey.

**[Checkbox]** Frequently Asked Questions

**[Checkbox]** Contact Us

Thank you for your time and participation.

**[Continue]**

For question or concerns about this survey, visit: <https://prodegesupport.zendesk.com/hc/en-us/requests/new?ticket_form_id=360001213252>

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0476. The time required to complete this information collection is estimated to average 20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

**Privacy Advisory**

This survey does NOT collect or use personally identifiable information (PII) such as your name, date of birth, or contact information. Responding to this survey is voluntary. Your responses will be treated as confidential and will be maintained in a secure dataset. There is no penalty to you if you choose not to respond. However, we encourage you to answer all questions so that the data will be complete and will represent typical attitudes and beliefs of all Americans.

**Frequently Asked Questions (FAQ)**

**//FAQs should link to their corresponding page positions below. “TOP” buttons should link back to top of FAQ//**

Why is this study being conducted?

Why should I participate?

Do I have to answer all questions?

Will my answers be kept private?

Can I withdraw answers once I have started the survey?

What are the costs and benefits of participating?

How will my responses be used?

Will I see the results of the survey?

**Why is this study being conducted?** Top

* This study is being conducted to understand people’s opinions of, experience with, and behaviors related to COVID-19 as well as reactions to brand platforms that describe the brand’s approach to COVID-19.

**Why should I participate?** Top

* You may learn more about COVID-19 and ways you can help slow its spread as a result of information you learn by taking part in this survey.

**Do I have to answer all questions?** Top

* No, it is not necessary to answer every question. Your participation in this study is completely voluntary. This means that you are free to withdraw from this survey at any time or to skip any questions. There is no penalty to you if you choose not to respond.
* Some questions in this survey will ask about your personal experiences with COVID-19, which may be uncomfortable to answer. You have the right to skip these questions. Additionally, if you experience any distress taking this survey, you may contact the 1) SAMHSA Disaster Distress Helpline (1-800-985-5990) or the 2) Suicide Prevention Lifeline (1-800-273-8255), which both offer free 24/7 support services.
* At the bottom of your survey screen, you have one control button: *Continue* (>>). Use this button to navigate through the survey or skipquestions.

**Will my answers be kept private?** Top

Responses will remain private to the extent allowable by law. None of the information you provide will be used to contact you for or will be used in future research or distributed to another investigator for future studies. Survey responses will be aggregated (combined), and only group statistics will be reported. You will not be identified even if the results of this study are published.

**Can I withdraw answers once I have started the survey?** Top

* If you wish to withdraw your answers, please notify the survey helpdesk by visiting: https://prodegesupport.zendesk.com/hc/en-us/requests/new?ticket\_form\_id=360001213252.

**What are the costs and benefits of participating?** Top

* There is no cost to you for participating in this study.
* This study is for research purposes only. There is no direct benefit to you for taking part in this study. Any compensation you receive is a small token to thank you for participating, if you choose to do so.
* If you decide to participate, you will receive $5.00 for your time.

**How will my responses be used?** Top

* Your responses will be used to inform a public education campaign on scientifically proven behaviors on how to decrease COVID-19 infection rates. This is your chance to be heard on issues that directly affect you. While your survey responses will be kept confidential, summarized responses may be released to the public.

**Will I see the results of the survey?** Top

* Results from this study might appear in professional journals or scientific conferences or submitted in a report to Congress. No individual participants will be identified or linked to the results. We will not disclose your identity in any report or presentation.

**Contact Us**

If you have questions or concerns about this survey, please visit https://prodegesupport.zendesk.com/hc/en-us/requests/new?ticket\_form\_id=360001213252.

An external institutional review board (IRB), which is an independent committee established to help protect the rights of research subjects, has approved this study. If you have any questions about your rights as a research subject, and/or concerns or complaints regarding this research study, contact the IRB at:

By mail:

BRANY IRB

1981 Marcus Avenue, Suite 210

Lake Success, NY 11042

• Or call toll free: 516-318-6877

• Or by email: [info@brany.com](mailto:info@brany.com)

• Or by visiting this website: www.branyirb.com/concerns-about-research.

Please reference the following number when contacting the Study Subject Adviser: [XX-XXX XXX].

**[TERMINATION LANGUAGE]**

We’re sorry, but you are not eligible for this study. There are many possible reasons why people are not eligible for this study. These reasons were decided earlier by the researchers. However, thank you for your interest in this study and for taking the time to answer our questions today.

**//Programming note: Term at end of screener questions (not at the end of each question).//**

**SAMPLE BALANCING**

[**PROGRAMMING NOTE: DISPLAY TEXT**] This first series of questions is for informational purposes and to determine if you are qualified to participate in this study.

**Item #:** DEM2

**Question Type:** Single Punch

**Variable Name:** Gender

**Variable Text**: What is your gender?

**Variable Label**: Gender

**//PROGRAMMING NOTE: ROTATE RESPONSE OPTIONS 1-2//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Man |
| 2 | Woman |
| 3 | Prefer to self-describe (please specify) |
| -99 | Refused |

**Item #:** DEM5

**Question Type**: Numeric Open End

**Variable Name**: ZIP Code

**Variable Text**: In what ZIP code do you live?

**Variable Label**: ZIP

**//PROGRAMMING NOTE: ONLY ALLOW FIVE DIGITS, CODE INTO STATE AND CENSUS REGIONS//**

|  |
| --- |
|  |

**Item #:** DEM6

**Question Type**: Numeric Open End

**Variable Name**: Age

**Variable Text**: What is your age?

**Variable Label**: Age

**//PROGRAMMING NOTE: SET RANGE AS: 0–115, CONTINUE IF DEM3=18+, OTHERWISE DISPLAY TERMINATION LANGUAGE AND TERMINATE//**

**//PROGRAMMING NOTE: HARD PROMPT: Please enter your age in years using numbers.//**

|  |
| --- |
|  |

**Item #:** DEM11

**Question Type**: Single Punch

**Variable Name**: Hispanic/Latino

**Variable Text**: Are you of Hispanic, Latino, or Spanish origin?

**Variable Label**: Hispanic/Latino Ethnicity

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Yes |
| 2 | No |
| -99 | Refused |

**Item #:** DEM12

**Question Type**: Multi Punch

**Variable Name**: Race

**Variable Text**: What is your race? Please select all that apply.

**Variable Label**: Race

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Text** | **Variable Label** |
| RACE\_1 | White | RACE\_1 White |
| RACE\_2 | Black or African American | RACE\_2 Black or African American |
| RACE\_3 | American Indian or Alaska Native | RACE\_3 American Indian or Alaska Native |
| RACE\_4 | Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese) | RACE\_4 Asian |
| RACE\_5 | Native Hawaiian or other Pacific Islander (e.g., Native Hawaiian Samoan, Chamorro, Tongan, Fijian, Marshallese) | RACE\_5 Native Hawaiian or other Pacific Islander |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Yes |
| 2 | No |
| -99 | Refused |

**Item #:** DEM13

**Question Type**: Single Punch

**Variable Name**: Education

**Variable Text**: What is the highest level of school you have completed?

**Variable Label**: Education Completion

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | 8th grade or less |
| 2 | 9th grade |
| 3 | 10th grade |
| 4 | 11th grade |
| 5 | 12th grade—no diploma |
| 6 | High school diploma |
| 7 | High school equivalent (GED) |
| 8 | Some college, no degree |
| 9 | Associate degree |
| 10 | Bachelor’s degree |
| 11 | Master’s degree |
| 12 | Professional or doctorate degree |

**Item #:** DEM1

**Question Type**: Multi Punch

**Variable Name**: Employment Status

**Variable Text**: Which statement best describes your current employment status?

**Variable Label**: Employment Status

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Text** | **Variable Label** |
| DEM1\_1 | Working – as a paid employee | DEM1\_1 EMPLOYED PAID |
| DEM1\_2 | Working – self-employed | DEM1\_2 EMPLOYED SELF |
| DEM1\_3 | Not working – on temporary layoff from a job | DEM1\_3 TEMP UN |
| DEM1\_4 | Not working – looking for work | DEM1\_4 LOOKING |
| DEM1\_5 | Not working – retired | DEM1\_5 RETIRED |
| DEM1\_6 | Not working – disabled | DEM1\_6 DISABLED |
| DEM1\_7 | Not working – other [Specify] | DEM1\_7 Other |
| DEM1\_8 | Other [Specify] | DEM1\_8 OTHER |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Yes |
| 2 | No |
| -99 | Refused |

**Item #:** DEM14

**Question Type**: Multi Punch

**Variable Name**: Employment Type

**Variable Text**: In the last five years, have you or a member of your immediate family worked in any of the following fields, companies, or organizations? Select all that apply.

**Variable Label**: Employment Type

**//PROGRAMMING NOTE: IF YES TO OPTIONS 1-4, DISPLAY TERMINATION LANGUAGE AND TERMINATE//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Text** | **Variable Label** |
| DEM14\_1 | Market or public opinion research | DEM14\_1 Marketing |
| DEM14\_2 | An advertising, public relations, or marketing agency | DEM14\_2 advertising |
| DEM14\_3 | News, radio, TV, print, media | DEM14\_3 media |
| DEM14\_4 | For the U.S. Federal government | DEM14\_4 US GOVT |
| DEM14\_5 | As a healthcare provider or medical professional (e.g., physician, nurse) | DEM14\_5 HEALTH |
| DEM14\_6 | At a healthcare company | DEM14\_6 Healthcare |
| DEM14\_7 | None of these | DEM14\_7 NONE |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Yes |
| 2 | No |
| -99 | Refused |

**Item #:** DEM15

**Question Type**: Single Punch

**Variable Name**: Camera

**Variable Text**: Are you using a desktop or laptop computer with a working web camera?

**Variable Label**: Camera

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Yes |
| 2 | No |
| -99 | Refused |

**Item #:** BEH0

**Question type:** Single punch

**Variable Name:** BEH0

**Variable Text:**  Have you participated in a COVID-19 vaccine clinical trial?

**Variable Label:** BEH0: COVID-19 vaccine clinical trial participation

**//PROGRAMMING NOTE: IF BEH0=1 or -99, DISPLAY TERMINATION LANGUAGE AND TERMINATE//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | Refused |

**INTEREST AND INTENTIONS FOR COVID-19 PREVENTATIVE BEHAVIORS**

[**PROGRAMMING NOTE: DISPLAY TEXT**] The following questions will ask about your actions and beliefs about COVID-19 vaccine(s). The U.S. Food and Drug Administration (FDA) has authorized vaccines that protect against COVID-19, and we want to learn more about your beliefs and plans related to this vaccine. For the following questions, please assume there are enough vaccines so that everyone who wants a COVID-19 vaccine can get one.

**Item #:** BEH1

**Question type:** Single punch

**Variable Name:** BEH1

**Variable Text:**  A Food and Drug Administration (FDA)-authorized vaccine to prevent COVID-19 is now available at no cost. Have you received a COVID-19 vaccine?

**Variable Label:** BEH1: Vaccination behavior

**//PROGRAMMING NOTE: IF BEH1=2 OR -99, DISPLAY TERMINATION LANGUAGE AND TERMINATE//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No, I have not received a COVID-19 vaccine |
| 1 | Yes, but I have only received one shot out of the two required shots |
| 2 | Yes, I have received all of the required shots |
| -99 | Refused |

**Item #:** BEH2

**Question type:** Single punch

**Variable Name:** BEH2

**Variable Text:** What is the likelihood you will get a COVID-19 vaccine?

**Variable Label:** BEH2: Intention to get vaccinated

**// PROGRAMMING NOTE: Ask if BEH1 (Vaccination behavior) = 0 "No…” or 1 “Yes, but I have only received one shot…” or -99 “Refused” //** **// PIPE: “complete COVID-19 vaccination” to replace “get a COVID-19 vaccine” if BEH1 = 1 //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | Refused |

**Item #:** BEH3a

**Question type:** Single punch

**Variable Name:** BEH3a

**Variable Text:** A Food and Drug Administration (FDA)-authorized vaccine to prevent COVID-19 is now available at no cost. How soon will you get vaccinated? *For this question, assume there is enough vaccine so that everyone who wants it can get it.*

**Variable Label:** BEH3a: Wait to get vaccinated

**//Programming Note: Ask if BEH1=0 “No, I have not received a COVID-19 vaccine.” TERMINATE if BEH3a=3 “I would never get a COVID-19 vaccine.” TERMINATE IF BEH2=1 AND BEH3a=-99//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | I will get a vaccine as soon as I can |
| 2 | I will wait to get a vaccine for one or more reasons |
| 3 | I will never get a COVID-19 vaccine |
| -99 | Refused |

**Item #:** BEH3b

**Question type:** Single punch

**Variable Name:** BEH3b

**Variable Text:** A Food and Drug Administration (FDA)-authorized vaccine to prevent COVID-19 is now available at no cost. How soon will you get the second required dose? *For this question, assume there is enough vaccine so that everyone who wants it can get it.*

**Variable Label:** BEH3b: Wait to complete vaccination

**// Ask if BEH1=1 “Yes, but I have only received one shot…” //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | I will get the second required dose as soon as I can |
| 2 | I will wait to get the second required dose for one or more reasons |
| 3 | I will never get the second required COVID-19 dose |
| -99 | Refused |

**//Programming Note: If participants pass the above questions, show consent form here. If they do not pass, show termination language here.//**

**SURVEY PARTICIPANT CONSENT FORM**

**//Programming note: Show text in the top right corner: “Please save a copy for your records.” Make the text clickable to download a PDF of the consent form.//**

|  |  |
| --- | --- |
| Study Title: | COVID-19 Public Education Campaign Creative Testing Survey |
| Telephone: | 571-858-3757 (24 hours) |

**What is the key information?**

You are being asked to participate in a research study collecting information about educational messaging related to COVID-19. This form describes the purpose, procedures, benefits, risks, and precautions of the information collection. It also describes your right to withdraw at any time.

This information collection is being done to help refine and enhance public education messaging related to COVID-19 that will eventually be disseminated to the public.

**What do I need to know about this study?**

If you agree to be part of the research study, you will be asked to participate in a survey where you will answer questions about your perceptions and reactions to messaging related to COVID-19. The survey will last about 20 minutes. You do not have to answer any questions that you do not want to.

**What are the potential risks of being in this study?**

There are minimal risks associated with this project. There is a possible risk of breach of confidentiality. This risk is minimized by protections described in the “Who will see the results of this project or my information?” section below. Please help protect your privacy and confidentiality by not providing any personally identifiable information in your responses. The study staff will do its due diligence to remove any personally identifying information from the data collected from your survey.

**Does participating in this project provide any benefits?**

This study is for research purposes only. Although you may not directly benefit from participating in this study, others may benefit because the findings of this study will be used to inform messaging and public education efforts pertaining to COVID-19.

**Are there alternatives to participating?**

This research study is for research purposes only. The only alternative is to not participate in this study.

**Will it cost me anything to participate in the project?**

There are no costs to participate in the project. Participants in the survey will receive $5.00 for their participation; you will be paid at the end of your participation in this study.

**Do I have to be in this project?**

Your participation is voluntary, which means you can stop or withdraw at any time. You may choose to not participate, or you may withdraw from the study for any reason without penalty or loss of benefits to which you are otherwise entitled.

**Who will see the results of this project or my information?**

Your answers will only be seen by the study staff. We will be very careful to only let people working on the project see your responses. There is minimal risk that others might find out what you respond, despite all of our best efforts. In the case of a breach of confidentiality, appropriate steps will be taken to notify participants.

All of the information we collect, including any answers to the survey, information collected during screening, and open-ended answers will be stored on a password-protected computer and/or in locked cabinets that only the project team can access. We will collect some personal information from you, like your age and race, but we will not collect any information that could identify you personally. After three years, all of the collected information will be destroyed by securely shredding documents or permanently deleting electronic information. Results from this project might appear in professional journals or scientific conferences or shared with other project teams. No individual participants will be identified or linked to the results. We will not disclose your identity in any report or presentation.

**Whom to contact about this study:**

If you have questions, concerns or complaints about the study, please contact the Principal Investigator at the telephone number listed on the first page of this consent document.

An institutional review board (IRB) is an independent committee established to help protect the rights of research subjects. If you have any questions about your rights as a research subject, and/or concerns or complaints regarding this research study, contact:

1. By mail:

Study Subject Adviser BRANY IRB

1981 Marcus Ave, Ste 210

Lake Success, NY 11042

1. or call toll free: 516-318-6877
2. or by email: [info@brany.com](mailto:info@brany.com)
3. or by visiting this website: www.branyirb.com/concerns-about-research.

Although the questionnaire will primarily ask that you provide feedback and input on messages and creative assets, we recognize the topic of COVID-19 may bring up some discomfort. If you need any additional support, please contact one of the following.

Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Distress Helpline

* Call 1-800-985-5990
* Text TalkWithUs to 66746

Suicide Prevention Lifeline

* Call 1-800-273-8255
* Online chat: <https://suicidepreventionlifeline.org/> and click “Chat”

**Statement of Consent**

**Item #:** INFCON

**Question type:** Single punch

**Variable Name:** Informed consent

**Variable Text:** Do you consent to participate in this study? By consenting, you agree to participate and that you have read, understood, and had time to consider all of the information above.

**Variable Label:** INFCON: Informed consent

**//PROGRAMMING NOTE: TERMINATE IF INFCON=2 OR -99//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Yes, I agree to participate |
| 2 | No, I do not agree to participate |
| -99 | Refused |

**Item #:** ATT

**Question Type**:Grid

**Variable Name:** ATT

**Variable Text:** How much do you agree or disagree with the following statements? *Select one response for each item.*

**Variable Label:** ATT: Importance

**//PROGRAMMING NOTE: Randomize pairs, randomize subitems that comprise the pair.//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT1\_1 | It is important for me to get all of the recommended COVID-19 vaccines. | ATT1\_1: Important for me to get all of the recommended COVID-19 vaccines |
| ATT1\_2 | It is important for everyone to get all of the recommended COVID-19 vaccines. | ATT1\_2: Important for everyone to get all of the recommended COVID-19 vaccines |
| ATT2\_1 | It is important for me to wear a face mask when I am out in public. | ATT2\_1: Important for me to wear mask out in public |
| ATT2\_2 | It is important for everyone to wear a face mask when they are out in public. | ATT2\_2: Important for everyone to wear mask out in public |
| ATT3\_1 | It is important for me to social distance when I am out in public. | ATT3\_1: Important for me to social distance out in public |
| ATT3\_2 | It is important for everyone to social distance when they are out in public. | ATT3\_2: Important for everyone to social distance out in public |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | Refused |

**Item #:** TRAITS

**Question type:** Single punch

**Variable Text:** How important is it to you that each of the following describes a brand providing information about COVID-19 at this time?

**//PROGRAMMING NOTE: Randomize subitems//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| TRAITS\_1 | Trustworthy | TRAITS\_1 TRUSTWORTHY |
| TRAITS\_2 | Scientific | TRAITS\_2 SCIENTIFIC |
| TRAITS\_3 | Easy to understand | TRAITS\_3 UNDERSTAND |
| TRAITS\_4 | Hopeful | TRAITS\_4 HOPEFUL |
| TRAITS\_5 | Motivating | TRAITS\_5 MOTIVATING |
| TRAITS\_6 | Serious | TRAITS\_6 SERIOUS |
| TRAITS\_7 | Realistic | TRAITS\_7 REALISTIC |
| TRAITS\_8 | Expert | TRAITS\_8 EXPERT |
| TRAITS\_9 | Focused on doing what’s right for communities | TRAITS\_9 COMMUNITY |
| TRAITS\_10 | Focused on doing what’s right for individuals | TRAITS\_10 INDIVIDUALS |
| TRAITS\_11 | Strong | TRAITS\_11 STRONG |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all important |
| 2 | Not too important |
| 3 | Somewhat important |
| 4 | Very important |
| 5 | Extremely important |
| -99 | Refused |

**Item #:** CAM22

**Question Type**:Grid

**Variable Name:** CAM22

**Variable Text:** How much do you trust each of the following to provide accurate COVID-19 information?

**//PROGRAMMING NOTE: Randomize subitems.//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| CAM22\_3 | U.S. Department of Health and Human Services (HHS) | CAM22\_3: HHS |
| CAM22\_6 | U.S. Centers for Disease Control and Prevention (CDC) | CAM22\_6: CDC |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all |
| 2 | Somewhat |
| 3 | Mostly |
| 4 | Completely |
| -99 | Refused |

**BRAND TESTING**

//**PROGRAMMING NOTE: DISPLAY TEXT ON ITS OWN SCREEN**// Next, you are going to see a description of a potential COVID-19 public education campaign brand and its logo that the **U.S.** **Department of Health and Human Services (HHS)** could use to communicate about COVID-19.

The description is **not** what would be said in ad—it describes the “big idea” behind the brand (e.g., what it stands for and believes).

Please read the “big idea” brand description carefully because we will be asking you your reactions to it. We recommend that you read it through at least twice.

On the next screen, you will see the first brand. After you have had time to read the “big idea” brand description and look at the images, you will be able to click ‘Continue’ to move forward in the survey.

**//SHOW RANDOMLY ASSIGNED BRAND BLOCK//**

**//Programming note: Each respondent will view 3 of the 5 brands. Brands will be randomly assigned brand in random order.//**

**//Programming note: Programmers will need to append the name of the brand where XX currently is in the Variable Names for easy identification (so we know which brand was shown).//**

**//RANDOMIZE ORDER OF BRAND BLOCKS SHOWN//**

**//Show Brand Block XX description with logo together on its own page. Do not show any questions on that page. Do not allow respondents to hit Continue before 30 seconds have passed. //**

**//PROGRAMMING NOTE: SOFT PROMPT: Please read through the description and look at the logo for 30 seconds before trying to continue.//**

**Item #:** BRXX1

**Question type:** Single punch

**Variable Name:** BRXX1

**Variable Text:** Were you able to see the brand description and images?

**Variable Label:**BRXX1: Viewing confirmation

**//PROGRAMMING NOTE: IF BRXX1=0,-99, SKIP TO NEXT BRAND//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | Refused |

[**PROGRAMMING NOTE: DISPLAY TEXT**] First, we’re going to ask you some questions about your overall impressions of the brand you just saw.

**Item #:** BRXX2

**Question type:** Open-end

**Variable Name:** BRXX2

**Variable Text:** What was the main message of the brand? Please be as specific as possible.

**Variable Label:** BRXX2: OE comprehension

**//Limit to 5,000 characters. //**

**Item #:** BRXX3

**Question type:** Single punch

**Variable Name:** BRXX3

**Variable Text:** How important, if at all, is it for a brand communicating about COVID-19 to use what you just saw as the “big idea” behind all of its advertising?

**Variable Label:**BRXX3: Relevance

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all important |
| 2 | Not too important |
| 3 | Somewhat important |
| 4 | Very important |
| 5 | Extremely important |
| -99 | Refused |

**Item #:** BRXX4

**Question type:** Single punch

**Variable Name:** BRXX4

**Variable Text:** How difficult was it, if at all, to understand the main message of this brand?

**Variable Label:**BRXX4: Difficulty

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all difficult |
| 2 | Slightly difficult |
| 3 | Moderately difficult |
| 4 | Very difficult |
| 5 | Extremely difficult |
| -99 | Refused |

**Item #:** BRXX5

**Question type:** Single punch

**Variable Text:** How much do you agree or disagree with the following statements?

**//PROGRAMMING NOTE: Randomize subitems//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BRXX5\_1 | This brand is for everyone, including me. | BRXX5\_1: People like me |
| BRXX5\_2 | This brand grabbed my attention. | BRXX5\_2: Attention |
| BRXX5\_3 | This brand is powerful. | BRXX5\_3: Powerful |
| BRXX5\_4 | This brand is worth remembering. | BRXX5\_4: Remember |
| BRXX5\_5 | This brand is informative. | BRXX5\_5: Informative |
| BRXX5\_6 | This brand is meaningful to me. | BRXX5\_6: Meaningful |
| BRXX5\_7 | This brand’s message is convincing as a reason to get a COVID-19 vaccine when it is available to me. | BRXX5\_7: Convincing Vaccine |
| BRXX5\_8 | This brand’s message is convincing as a reason to follow preventative measures that help slow the spread of COVID-19. | BRXX5\_8: Convincing Prevention |
| BRXX5\_9 | This brand told me something new. | BRXX5\_9: New |
| BRXX5\_10 | This is a brand I would turn to for information about COVID-19. | BRXX5\_10: Turn to |
| BRXX5\_11 | I would trust the information that this brand shares. | BRXX5\_11: Trust |
| BRXX5\_12 | I like the look of the brand. | BRXX5\_12: Look |
| BRXX5\_13 | I like the feel of the brand. | BRXX5\_12: Feel |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | Refused |

**Item #:** BRXX6

**Question type:** Single punch

**Variable Text:** How well does each of the following describe the brand?

**//PROGRAMMING NOTE: Randomize subitems//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BRXX6\_1 | Trustworthy | BRXX6\_1 TRUSTWORTHY |
| BRXX6\_2 | Scientific | BRXX6\_2 SCIENTIFIC |
| BRXX6\_3 | Easy to understand | BRXX6\_3 UNDERSTAND |
| BRXX6\_4 | Hopeful | BRXX6\_4 HOPEFUL |
| BRXX6\_5 | Motivating | BRXX6\_5 MOTIVATING |
| BRXX6\_6 | Serious | BRXX6\_6 SERIOUS |
| BRXX6\_7 | Realistic | BRXX6\_7 REALISTIC |
| BRXX6\_8 | Expert | BRXX6\_8 EXPERT |
| BRXX6\_9 | Focused on doing what’s right for communities | BRXX6\_9 COMMUNITY |
| BRXX6\_10 | Focused on doing what’s right for individuals | BRXX6\_10 INDIVIDUALS |
| BRXX6\_11 | Strong | BRXX6\_11 STRONG |
| BRXX6\_12 | Confident | BRXX6\_12 CONFIDENT |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all well |
| 2 | Not too well |
| 3 | Somewhat well |
| 4 | Very well |
| 5 | Extremely well |
| -99 | Refused |

**Item #:** BRXX7

**Question type:** Single punch

**Variable Name:** BRXX7

**Variable Text:** How likely are you to recommend this brand as a trusted source of information about COVID-19?

**Variable Label:**BRXX7: Net Promoter Score

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | 0 – definitely would not recommend |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 | 5 – neutral |
| 6 | 6 |
| 7 | 7 |
| 8 | 8 |
| 9 | 9 |
| 10 | 10 – definitely would recommend |
| -99 | Refused |

**Item #:** BRXX7\_2A

**Question type:** Open-end

**Variable Name:** BRXX7\_2A

**Variable Text:** Please describe the main reasons why you rated yourself **[PIPE ANSWER FROM ADXX8\_2]** in terms of your likelihoodtorecommend this brand.

**Variable Label:** BRXX7\_2A: NPS+

**//Limit to 1,000 characters. //**

**Item #:** BRXX8

**Question type:** Single punch

**Variable Text:** To what extent did this brand make you feel each of the following?

**//PROGRAMMING NOTE: Randomize subitems//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BRXX8\_1 | Excited | BRXX8\_1 Excited |
| BRXX8\_2 | Discouraged | BRXX8\_2 Discouraged |
| BRXX8\_3 | Angry | BRXX8\_3 Angry |
| BRXX8\_4 | Worried | BRXX8\_4 Worried |
| BRXX8\_5 | Inspired | BRXX8\_5 Inspired |
| BRXX8\_6 | Determined | BRXX8\_6 Determined |
| BRXX8\_7 | Empowered | BRXX8\_7 Empowered |
| BRXX8\_8 | Stressed | BRXX8\_8 Stressed |
| BRXX8\_9 | Sad | BRXX8\_9 Sad |
| BRXX8\_10 | Motivated | BRXX8\_10 Motivated |
| BRXX8\_11 | Confident | BRXX8\_11 Confident |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all |
| 2 | Not much |
| 3 | Some |
| 4 | A lot |
| -99 | Refused |

**Item #:** BRXX9

**Question type:** Grid

**Variable Text:** When thinking about the brand you viewed, how likely are you to do each of the following as a result?

**//PROGRAMMING NOTE: Randomize subitems//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BRXX9\_1 | Look for more information about the COVID-19 vaccine | BRXX9\_1: More\_Info |
| BRXX9\_2 | Get a COVID-19 vaccine at no cost | BRXX9\_2: Vaccine |
| BRXX9\_3 | Visit the brand’s website for more information | BRXX9\_3: Website |
| BRXX9\_4 | Talk to your doctor about the COVID-19 vaccine | BRXX9\_4: Doctor |
| BRXX9\_5 | Talk about information the brand shares with family and friends | BRXX9\_5: Word of mouth |
| BRXX9\_6 | Wear a mask anytime you leave your home and in public | BRXX9\_6: Mask |
| BRXX9\_7 | Maintain social distance of at least 6 feet from others when outside of your home in public | BRXX9\_7: Social Distance |
| BRXX9\_8 | Follow the brand on social media | BRXX9\_8: Social media |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | Refused |

[**PROGRAMMING NOTE: DISPLAY TEXT AND SHOW LOGO UNDER TEXT**] For these next few questions, please think specifically about the logo you saw. Here is that logo again.

**Item #:** BLXX1

**Question type:** Open-end

**Variable Name:** BLXX1

**Variable Text:** How would you describe the logo in your own words? Please be as specific as possible.

**Variable Label:** BLXX1: OE logo main

**//Limit to 1,000 characters. //**

**Item #:** BLXX2

**Question type:** Open-end

**Variable Name:** BLXX2

**Variable Text:** What, if anything, did you like about the logo? Please be as specific as possible—the look, the feel, the colors, what it means to you.

**Variable Label:** BLXX2: OE logo liked

**//Limit to 1,000 characters. //**

**Item #:** BLXX3

**Question type:** Open-end

**Variable Name:** BLXX3

**Variable Text:** What did you dislike about the logo? Please be as specific as possible—the look, the feel, the colors, what it means to you.

**Variable Label:** BLXX3: OE logo disliked

**//Limit to 1,000 characters. //**

**//Programming Note: When last brand block is viewed, move to the Final Demos block. Otherwise, show next brand testing block. //**

**FINAL DEMOS**

[**PROGRAMMING NOTE: DISPLAY TEXT**] These final questions are about your background, which may be important when understanding your COVID-19 experience.

**Item #:** DEM3

**Question Type:** Single Punch

**Variable Name:** DEM3

**Variable Text:** Does where you work (e.g., state/territory) designate your occupation as providing “essential” services? “Essential” may vary depending on where you live, but may include those who provide:

* Public health and safety (janitors and cleaners, registered nurses, police and sheriff’s patrol officers, physicians and surgeons, EMT’s and paramedics, pharmacists)
* Essential products (cashiers, hand laborers and freight/stock/material movers, delivery truck drivers and driver/sales workers, agricultural workers, food processing workers, postal service workers)
* Other infrastructure support (general maintenance and repair workers, engineers, electricians, computer support specialists, financial managers, plant and system operators, information security analysts, hazard materials removal workers)

**Variable Label:** DEM3: Essential service status

**// PROGRAMMING NOTE: Ask if employed (DEM1\_1-2 (working as a paid employee/working-self-employed//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | No |
| 2 | Yes |
| -99 | Refused |
| -100 | Valid skip |

**Item #:** DEM7

**Question Type:** Open-End Numeric

**Variable Name:** DEM7

**Variable Text:** How many total people – adults and children – currently live in your household, including yourself? *Please enter a number.*

**Variable Label:** DEM7: Total number of people in household

|  |
| --- |
|  |

**Item #:** DEM8

**Question Type:** Open-End Numeric

**Variable Name:** DEM8

**Variable Text:** How many people under 18 years-old currently live in your household? *Please enter a number.*

**Variable Label:** DEM8: Number of minors living in household

**// PROGRAMMING NOTE: Response must be a numerical number between 0-99. If DEM7=1, autopunch DEM8 as “0” and go to DEM9. Response from DEM8 must be LESS than the number in DEM7//**

|  |
| --- |
|  |

**Item #:** DEM9

**Question Type:** Open-end numeric

**Variable Name:** DEM9

**Variable Text:** How many people in your household, excluding yourself, work in occupations that are designated as providing “essential” services? “Essential” may vary depending on where you live, but may include those who provide:

* Public health and safety (janitors and cleaners, registered nurses, police and sheriff’s patrol officers, physicians and surgeons, EMT’s and paramedics, pharmacists)
* Essential products (cashiers, hand laborers and freight/stock/material movers, delivery truck drivers and driver/sales workers, agricultural workers, food processing workers, postal service workers)
* Other infrastructure support (general maintenance and repair workers, engineers, electricians, computer support specialists, financial managers, plant and system operators, information security analysts, hazard materials removal workers)

**Variable Label:** DEM9: Number of essential workers in household (excluding self)

**// PROGRAMMING NOTE: Response cannot exceed total number of people in household, minus one.. If DEM7=1, autopunch DEM9 as “0” and go to DEM10. //**

|  |
| --- |
|  |

**Item #:** DEM10

**Question Type:** Single Punch

**Variable Name:** DEM10

**Variable Text:** Last year, that is in 2020, what was your total household income from all sources, before taxes?

**Variable Label:** DEM10: Family income

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Less than $15,000 |
| 2 | $15,000 to $24,999 |
| 3 | $25,000 to $34,999 |
| 4 | $35,000 to $49,999 |
| 5 | $50,000 to $74,999 |
| 6 | $75,000 to $99,999 |
| 7 | $100,000 to $149,999 |
| 8 | $150,000 to $199,999 |
| 9 | $200,000 and over |
| -99 | Don’t know/Refused |

**Item #:** DEM16

**Question Type:** Single Punch

**Variable Name:** DEM16

**Variable Text:** In general, do you think of yourself as…? **Variable Label:** DEM16: Political\_View

**// Programming Note: For half of participants, show reverse order for answer options. //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Extremely liberal |
| 2 | Liberal |
| 3 | Slightly liberal |
| 4 | Moderate, middle of the road |
| 5 | Slightly conservative |
| 6 | Conservative |
| 7 | Extremely conservative |
| -99 | Refused |