# COVID-19 Attitudes and Beliefs Survey (CABS)

**COVID-19 Attitudes and Beliefs Survey (CABS)**

**Welcome**

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

*OMB No. 0990-0475*

*Exp. Date 07/31/2021*

You have been selected to participate in a national survey about COVID-19. The purpose of this survey is to help better understand U.S. adults’ experience, opinions, behaviors, and their trusted information sources related to COVID-19. You will receive 18,000 AmeriPoints, or $18, to complete this survey, which will take about 35-minutes to complete. If you complete this survey, you will also be invited to take follow-up surveys on this topic four additional times over the next year and a half, each with an incentive of 18,000 AmeriPoints, In total, you will earn 100,000 AmeriPoints, or $100, for completing all six surveys. **Importantly, you must complete each of these surveys in order to be invited to the next one.**

This survey will provide important feedback on six main topics, including:

* Your interests and intentions about the recommended actions advised by health officials
* Your opinions on COVID-19
* Views on science, research, and medical professionals
* Public health education campaigns
* How COVID-19 has impacted your life
* More about you and other health conditions

You will be shown a privacy statement and additional information about the purpose of this survey and how your survey responses will be used. You will then be asked for your consent to proceed with the survey.

**[Continue]**

For question or concerns about this survey, email: [support@amerispeak.org](mailto:support@amerispeak.org)

**Privacy Advisory**

This survey does *not* collect or use personally identifiable information (PII) such as your name, date of birth, or contact information. As with all AmeriSpeak surveys, 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 the 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?

Can I save my answers and return to the survey later?

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 changes over time of people’s opinions of, experience with, and behaviors related to COVID-19 as well as exposure to and trust of sources on COVID-19 information.

**Why should I participate?** Top

* By participating in this survey, you will contribute to fighting the spread of COVID-19. You may also learn more about COVID-19 and ways you can help slow the spread of COVID-19 as a result of information you learn by taking part in this survey.

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

* No, as with all AmeriSpeak surveys, 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, and you have the right to skip these questions. Additionally, if you experience any distress while taking this survey, you may contact the (1) Substance Abuse and Mental Health Services Administration (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 two control buttons: *Continue* (>>), and *Previous* (<<). Use these buttons to navigate through the survey or to skipquestions.

**Can I save my answers and return to the survey later?** Top

* Yes. If you exit the survey, your progress will be saved. To return to the survey, use the same survey link provided to you. When you return to the survey website, you will be directed to the place in the surveywhere you had stopped. Use the control buttons, *Continue*, and *Previous*, to navigate through the survey to return to unanswered questions.

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

* As with all AmeriSpeak surveys, responses will remain private to the extent allowable by law. None of the information you provide will be used to contact you, 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 sending an email to [support@amerispeak.org](mailto:support@amerispeak.org).

**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 $10 for the first survey and $18 each for the remaining 5 surveys.

**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. Although 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 might be 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**

During this study, if you have any questions or concerns about this survey, such as payment questions or technical issues you may experience, please email [support@amerispeak.org](mailto:support@amerispeak.org).

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 questions about your rights as a research subject, contact the IRB at:

By mail:

BRANY IRB

1981 Marcus Avenue, Suite 210

Lake Success, NY 11042

• Or call toll free: 516-470-6900

• Or by email: info@brany.com

Please reference the following number when contacting the Study Subject Adviser: 20-077-821.

**COVID-19 Attitudes and Beliefs Survey (CABS)**

Thank you for your participation in this survey. If you are willing to take part in this study, please click “continue” below to begin the survey.

**[Continue]**

**Section 1: Your Interest and Intentions About the Actions Recommended by Health Officials**

***COVID-19 Vaccines***

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

**[Page Break]**

**Item #:** BEH1

**Question type:** Single punch

**Variable Name:** BEH1

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

**Variable Label:** BEH1: Vaccination behavior

|  |  |
| --- | --- |
| **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 that you will get a COVID-19 vaccine?

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

**// Ask if BEH1 (Vaccination behavior) = 0 ("No…”) or -99 (“REFUSED”) or 1 (“Yes, but I have only received one shot…”) //**

**// 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 |
| -100 | VALID SKIP |

**Item #:** BEH3a

**Question type:** Single punch

**Variable Name:** BEH3a

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

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

**// Ask if BEH1 (Vaccination behavior) = 0 ("No…”) or -99 (“REFUSED”). //**

|  |  |
| --- | --- |
| **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 |
| -100 | VALID SKIP |

**Item #:** BEH3b

**Question type:** Single punch

**Variable Name:** BEH3b

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

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

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

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | I will get the second required shot as soon as I can. |
| 2 | I will wait to get the second required shot for one or more reasons. |
| 3 | I will never get the second required COVID-19 shot. |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH3c

**Question type:** Single punch

**Variable Name:** BEH3c

**Variable Text:** You responded that you will wait to get [IF BEH3a=2 INSERT: a COVID-19 vaccine] [IF BEH3b=2 INSERT: the second required shot]. How long will you wait?

**Variable Label:** BEH3c: Length of vaccination wait

**// Ask if BEH3a (Wait to get vaccinated) = 2 (“I will wait…”) or BEH3b (Wait to complete vaccination) = 2 (“I will wait…”//**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | 0-3 months |
| 2 | 4-6 months |
| 3 | 7-12 months |
| 4 | 1 year to less than 3 years |
| 5 | 3 years or more |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH4

**Question type:** Grid

**Variable Text:** You responded that you will wait to get a COVID-19 vaccine. For each of the following statements, is this a reason why you will wait to get a COVID-19 vaccine?*Select yes or no for each item.*

**// Randomize order of subitems. //**

**// Ask if BEH3a (Wait to get vaccinated) = 2 ("I will wait to get a vaccine for one or more reasons.”) //**

**// Include soft prompt if BEH4\_11 (Other) = 1 (“Yes”), but no text is entered. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
|  |  |  |
|  |  |  |
| BEH4\_3 | I want to know if the vaccine is effective first. | BEH4\_3: Reasons for waiting - Confirm effectiveness |
|  |  |  |
| BEH4\_5 | I want to talk to my doctor first. | BEH4\_5: Reasons for waiting - Talk to doctor first |
| BEH4\_6 | I want to compare the effectiveness of the different vaccines. | BEH4\_6: Reasons for waiting - Compare vaccines |
| BEH4\_7 | I want to see if my friends and family get the vaccine. | BEH4\_7: Reasons for waiting - Friends/family |
| BEH4\_8 | I want to see if others who get the vaccine first develop any problems. | BEH4\_8: Reasons for waiting - Side effects |
| BEH4\_9 | I want to make sure it is safe for people like me first. | BEH4\_9: Reasons for waiting - Confirm safety |
|  |  |  |
| BEH4\_12 | I already had COVID-19. | BEH4\_12: Reason for waiting - Had COVID |
| BEH4\_13 | I want to wait until more is known about the long-term effects of the vaccines. | BEH4\_13: Reasons for waiting - Long-term effects |
| BEH4\_14 | I am healthy and don’t think my body needs a COVID-19 vaccine. | BEH4\_14: Reasons for waiting - I am healthy |
| BEH4\_15 | I want to wait to see if a COVID-19 vaccine will be mandatory for my work, school, or other activities. | BEH4\_15: Reasons for waiting - Mandatory |
| BEH4\_16 | I want to wait until I have time to take off work/school. | BEH4\_16: Reasons for waiting - Time |
| BEH4\_11 | Other [TEXTBOX] | BEH4\_11: Reasons for waiting - Other |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH4a

**Question type:** Single punch

**Variable Name:** BEH4a

**Variable Text:** Food and Drug Administration (FDA)-authorized vaccines to prevent COVID-19 are available at no cost. How important is it for you to choose which vaccine you get? *For this question, assume there are enough vaccines so that everyone who wants a COVID-19 vaccine can get it.*

**Variable Label:** BEH4a: Importance of vaccine choice

**// Ask if BEH3a (Wait to get vaccinated) = 1 (“I will get a vaccine as soon as I can.”), 2 ("I will wait to get a vaccine for one or more reasons.”), or -99 (“REFUSED”) //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all important |
| 2 | Slightly important |
| 3 | Somewhat important |
| 4 | Quite important |
| 5 | Very important |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH5

**Question type:** Single punch

**Variable Name:** BEH5

**Variable Text:** Food and Drug Administration (FDA)-authorized vaccines to prevent COVID-19 are available at no cost but may need to be given again each year (similar to the flu shot). How likely would you be to get a COVID-19 vaccine? *For this question, assume there are enough vaccines so that everyone who wants a COVID-19 vaccine can get it.*

**Variable Label:** BEH5: Intention to get vaccinated annually

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

**Item #:** BEH6

**Question type:** Single punch

**Variable Name:** BEH6

**Variable Text:** Which of the following best describes your current status on the vaccinations recommended by your health care provider (e.g., primary care doctor)?

**Variable Label:** BEH6: Past vaccine behaviors

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | I am current on all vaccinations. |
| 2 | I am current on some vaccinations. |
| 3 | I am not current on any vaccinations. |
| 4 | I am uncertain |
| -99 | REFUSED |

**Item #:** BEH6a

**Question type:** Single punch

**Variable Name:** BEH6a

**Variable Text:** Have you tried to schedule an appointment to get a COVID-19 vaccine?

**Variable Label:** BEH6a: Scheduled COVID vaccine appointment

**// Ask if BEH1 (Vaccination behavior) = 0 ("No…”) or -99 (“REFUSED”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH6b

**Question type:** Single punch

**Variable Name:** BEH6b

**Variable Text:** How easy or difficult was it for you to schedule an appointment to get a COVID-19 vaccine?

**Variable Label:** BEH6b: Ease of scheduling COVID vaccine appointment

**// Ask if BEH6a (Scheduled COVID vaccine appointment) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very difficult |
| 2 | Somewhat difficult |
| 3 | Neither difficult nor easy |
| 4 | Somewhat easy |
| 5 | Very easy |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH7

**Question type:** Grid

**Variable Text:** The following question asks about your thoughts and behaviors about a COVID-19 vaccine. How much do you agree or disagree with the following statements*? Select one response for each item.*

**// Ask if BEH1 (Vaccination behavior) = 0 ("No…”) or -99 (“REFUSED”) or 1 (“Yes, but I have only received one shot…”) //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH7\_1 | In the next year, it is mostly up to me whether I get a COVID-19 vaccine or not. | BEH7\_1: Up to me – get vaccine |
| BEH7\_2 | In the next year, it would be easy for me to get a COVID-19 vaccine. | BEH7\_2: Easy for me – get vaccine |
| BEH7\_3 | In the next year, I intend to get a COVID-19 vaccine. | BEH7\_3: Intend – get vaccine |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**[Page Break]**

***Face Mask Wearing***

The following questions will ask about your actions and beliefs related to wearing a face mask, meaning a face covering that covers your nostrils, mouth, and chin, and which can include items such as a cloth face mask, an N95 respirator, or a disposable face mask.

**[Page Break]**

**Item #:** BEH8

**Question type:** Single punch

**Variable Name:** BEH8

**Variable Text:** How often do you wear a face mask when you are outside of your home and in public?

**Variable Label:** BEH8: Wear mask

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Very often |
| 5 | Always |
| -99 | REFUSED |

**Item #:** BEH8a

**Question type:** Single punch

**Variable Name:** BEH8a

**Variable Text:** When you wear a face mask, how frequently do you "double mask" or wear two masks at a time?

**Variable Label:** BEH8a: Wear double-mask

**// Ask if BEH8 (Wear mask) = 2-5 (“Rarely” – “Always”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Very often |
| 5 | Always |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH9

**Question type:** Grid

**Variable Text:** There are some public places that individuals may avoid in order to limit the spread of COVID-19. In the past 7 days, have you visited or engaged in any of the following activities? *Select yes or no for each item.*

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH9\_1 | Indoor dining at a restaurant | BEH9\_1: Past 7-day - Indoor dining |
| BEH9\_2 | Outdoor dining at a restaurant | BEH9\_2: Past 7-day - Outdoor dining |
| BEH9\_3 | Gym | BEH9\_3: Past 7-day - Gym |
| BEH9\_4 | Indoor religious service | BEH9\_4: Past 7-day - Indoor religious service |
| BEH9\_5 | Exercising outside | BEH9\_5: Past 7-day - Exercising outside |
| BEH9\_6 | Grocery shopping | BEH9\_6: Past 7-day - Grocery shopping |
| BEH9\_7 | Bars and clubs | BEH9\_7: Past 7-day - Bars/clubs |
| BEH9\_8 | School or college | BEH9\_8: Past 7-day - School/college |
| BEH9\_9 | Attending a sporting event | BEH9\_9: Past 7-day - Sporting event |
| BEH9\_10 | Parks or beaches | BEH9\_10: Past 7-day - Parks/beaches |
| BEH9\_11 | Public transportation (e.g., buses, subway) | BEH9\_11: Past 7-day - Public transportation |
| BEH9\_12 | Close contact with individuals outside household | BEH9\_12: Past 7-day - Close contact |
| BEH9\_13 | Gatherings with 10 or more people including those from outside of your household | BEH9\_13: Past 7-day - Gatherings with 10+ people |
| BEH9\_14 | Traveled by airplane | BEH9\_14: Past 7-day – Airplane |

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

**Item #:** BEH10

**Question type:** Grid

**Variable Text:** For places you indicated that you have visited in the past 7 days, please indicate how often you wore a mask in the following statements.

**Variable Label:** BEH10:Locations: Masks

**// Ask if corresponding subitem from BEH9 = 1 (“Yes”). //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH10\_1 | Indoor dining at a restaurant (except when eating/drinking) | BEH10\_1: Mask use frequency - Indoor dining |
| BEH10\_2 | Outdoor dining at a restaurant (except when eating/drinking) | BEH10\_2: Mask use frequency - Outdoor dining |
| BEH10\_3 | Gym | BEH10\_3: Mask use frequency - Gym |
| BEH10\_4 | Indoor religious service | BEH10\_4: Mask use frequency - Indoor religious service |
| BEH10\_5 | Exercising outside | BEH10\_5: Mask use frequency - Exercising outside |
| BEH10\_6 | Grocery shopping | BEH10\_6: Mask use frequency - Grocery shopping |
| BEH10\_7 | Bars and clubs | BEH10\_7: Mask use frequency - Bars/clubs |
| BEH10\_8 | School or college | BEH10\_8: Mask use frequency - School/college |
| BEH10\_9 | Attending a sporting event | BEH10\_9: Mask use frequency - Sporting event |
| BEH10\_10 | Parks or beaches | BEH10\_10: Mask use frequency - Parks/beaches |
| BEH10\_11 | Public transportation (e.g., buses, subway) | BEH10\_11: Mask use frequency - Public transportation |
| BEH10\_12 | Close contact with individuals outside household | BEH10\_12: Mask use frequency - Close contact |
| BEH10\_13 | Gatherings with 10 or more people including those from outside of your household | BEH10\_13: Mask use frequency - Gatherings with 10+ people |
| [IF BEH9\_14=1] BEH10\_14 | On an airplane | BEH10\_14: Mask use frequency - Airplane |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Most of the time |
| 5 | Always |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH11

**Question type:** Grid

**Variable Text:** The following question asks about your thoughts and behaviors about wearing a face mask to prevent COVID-19 from spreading. How frequently do you do the following? *Select one response for each item.*

**// Randomize order of subitems. //**

**// Ask if BEH8 (Wear mask) = 2-5 (“Rarely” – “Always”). //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH11\_1 | Adjust your face mask while wearing it | BEH11\_1: Adjust mask |
| BEH11\_2 | Share your face mask with others (e.g., friends, family) **[Reverse Coded]** | BEH11\_2: Share mask |
| BEH11\_3 | Cover your chin, mouth, and nostrils with your face mask | BEH11\_3: Cover face with mask |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Very often |
| 5 | Always |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH13

**Question type:** Single punch

**Variable Name:** BEH13

**Variable Text:** How long do you plan to maintain your current level of face mask wearing?

**Variable Label:** BEH13:Sustain mask wearing

**// Ask if BEH8 (Wear mask) = 2-5 (“Rarely” – “Always”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Until I receive a COVID-19 vaccine |
| 2 | Until most people receive a COVID-19 vaccine, including me |
| 3 | Until local, state, or federal mandates no longer require me to wear a face mask |
| 4 | Until after most people receive a COVID-19 vaccine and face masks are no longer required |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH14

**Question type:** Grid

**Variable Text:** The following question asks about your thoughts and behaviors about wearing a face mask to prevent the spread of COVID-19. How much do you agree or disagree with the following statements*? Select one response for each item.*

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH14\_1 | It is mostly up to me whether I wear a face mask or not. | BEH14\_1: Up to me – wear mask |
| BEH14\_2 | It is easy for me to wear a face mask. | BEH14\_2: Easy for me – wear mask |
| BEH14\_3 | In the next week, I intend to wear a face mask. | BEH14\_3: Intend – wear mask |

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

**[Page Break]**

***Social Distancing***

The following questions will ask about your actions and beliefs related to social distancing, which includes limiting your exposure to individuals outside of your household, maintaining physical distance while in public (i.e., staying at least 6 feet apart from other people), avoiding indoor spaces when you are with people from outside of your household, and avoiding crowds.

**[Page Break]**

**Item #:** BEH15

**Question type:** Single punch

**Variable Name:** BEH15

**Variable Text:** How often do you maintain a social distance of at least 6 feet from others when outside your home in public? *Exclude members from your household when responding.*

**Variable Label:** BEH15: Social distanced

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Very often |
| 5 | Always |
| -99 | REFUSED |

**Item #:** BEH16

**Question type:** Single punch

**Variable Name:** BEH16

**Variable Text:** In the last 7 days, how many people outside of your household have you been closer to than 6 feet for more than a few seconds? *Exclude members from your household when responding.*

**Variable Label:** BEH16: Past 7-day close contact

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | None |
| 1 | 1 person |
| 2 | 2–3 people |
| 3 | 4–5 people |
| 4 | 6–9 people |
| 5 | 10–25 people |
| 6 | More than 25 people |
| -99 | REFUSED |

**Item #:** BEH17

**Question type:** Single punch

**Variable Name:** BEH17

**Variable Text:** In the last 7 days, how many times were you in a room with a group of more than 10 people? *Exclude your household and your visits to the supermarket or pharmacy to get essential food or medicine.*

**Variable Label:** BEH17: Past 7-day gatherings 10+ people

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | 0 times |
| 1 | 1 time |
| 2 | 2 times |
| 3 | 3 times |
| 4 | 4 times |
| 5 | 5 or more times |
| -99 | REFUSED |

**Item #:** BEH18

**Question type:** Single punch

**Variable Name:** BEH18

**Variable Text:** How long do you plan to maintain your current level of social distancing?

**Variable Label:** BEH18: Sustain distancing

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Until I receive a COVID-19 vaccine |
| 2 | Until most people receive a COVID-19 vaccine, including me |
| 3 | Until local, state, or federal mandates no longer require me to social distance |
| 4 | Until after most people receive a COVID-19 vaccine and social distancing is no longer required |
| -99 | REFUSED |

**Item #:** BEH19

**Question type:** Grid

**Variable Text:** The following question asks about your thoughts and behaviors about social distancing to prevent the spread of COVID-19. How much do you agree or disagree with the following statements*? Select one response for each item.*

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH19\_1 | It is mostly up to me whether I maintain social distancing or not. | BEH19\_1: Up to me - social distance |
| BEH19\_2 | It is easy for me to maintain social distancing. | BEH19\_2: Easy for me - social distance |
| BEH19\_3 | In the next week, I intend to practice social distancing. | BEH19\_3: Intend - social distance |

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

**[Page Break]**

**Item #:** BEH23

**Question type:** Single punch

**Variable Name:** BEH23

**Variable Text:** Are you the parent or guardian of a child under 18 years old?

**Variable Label:** BEH23: Children under 18

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

**Item #:** BEH24

**Question type:** Single punch

**Variable Name:** BEH24

**Variable Text:** How many children do you have under 18 years old?

**Variable Label:** BEH24: Number of children under 18

**// Ask if BEH23 (Children under 18) = 1 (“Yes”) or -99 (“REFUSED”) //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0-20 |  |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH25

**Question type:** Single punch

**Variable Name:** BEH25

**Variable Text:** Some of the following questions are only for children of specific ages. So that we can more accurately ask you appropriate questions, please provide the month and year in which [IF BEH24>1 INSERT: each of your children was born] [IF BEH24=1 INSERT: your child was born]. We do not require their exact birthdate, and this data will only be used for research purposes.

**Variable Label:** BEH25: Birth month of children under 18

**// Ask if BEH24 (Number of children under 18)** ≥ **1 or = -99 (“REFUSED”) //**

**// DOUBLE PROMPT //**

**// DROPDOWNS FOR MONTH AND YEAR. //**

**// SHOW DROPDOWNS EQUAL TO NUMBER OF RESPONSES GIVEN AT BEH24. //**

**// ASSOCIATE EACH DROPDOWN FOR BEH26 WITH A NUMBERBOX RESPONSE FOR BEH25. //**

**DROPDOWNS:**

1. [IF BEH24>0] Your [IF BEH24>1 INSERT: oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
2. [IF BEH24>1] Your [IF BEH24=2 INSERT: youngest] [IF BEH24>2 INSERT: second oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
3. [IF BEH24>2] Your [IF BEH24=3 INSERT: youngest] [IF BEH24>3 INSERT: third oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
4. [IF BEH24>3] Your [IF BEH24=4 INSERT: youngest] [IF BEH24>4 INSERT: fourth oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
5. [IF BEH24>4 Your [IF BEH24=5 INSERT: youngest] [IF BEH24>5 INSERT: fifth oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
6. [IF BEH24>5 Your [IF BEH24=6 INSERT: youngest] [IF BEH24>6 INSERT: sixth oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
7. [IF BEH24>6] Your [IF BEH24=7 INSERT: youngest] [IF BEH24>7 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
8. [IF BEH24>7] Your [IF BEH24=8 INSERT: youngest] [IF BEH24>8 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
9. [IF BEH24>8] Your [IF BEH24=9 INSERT: youngest] [IF BEH24>9 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
10. [IF BEH24>9] Your [IF BEH24=10 INSERT: youngest] [IF BEH24>10 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
11. [IF BEH24>10] Your [IF BEH24=11 INSERT: youngest] [IF BEH24>11 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
12. [IF BEH24>11] Your [IF BEH24=12 INSERT: youngest] [IF BEH24>12 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
13. [IF BEH24>12] Your [IF BEH24=13 INSERT: youngest] [IF BEH24>13 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
14. [IF BEH24>13] Your [IF BEH24=14 INSERT: youngest] [IF BEH24>14 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
15. [IF BEH24>14 Your [IF BEH24=15 INSERT: youngest] [IF BEH24>15 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
16. [IF BEH24>15] Your [IF BEH24=16 INSERT: youngest] [IF BEH24>16 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
17. [IF BEH24>16] Your [IF BEH24=17 INSERT: youngest] [IF BEH24>17 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
18. [IF BEH24>17] Your [IF BEH24=18 INSERT: youngest] [IF BEH24>18 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
19. [IF BEH24>18] Your [IF BEH24=19 INSERT: youngest] [IF BEH24>19 INSERT: next oldest] child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]
20. [IF BEH24>19] Your youngest child under 18 [MONTH DROPDOWN][YEAR DROPDOWN]

**MONTH DROPDOWN VALUES:**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1-12 | January-December |
| -99 | REFUSED |
| -100 | VALID SKIP |

**YEAR DROPDOWN VALUES:**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 2002-2021 |  |
| -99 | REFUSED |
| -100 | VALID SKIP |

COMPUTE CHILD\_AGE\_x FOR BEH25\_1-BEH25\_20.

COMPUTE CHILD\_AGE\_x=CALCULATED AGE IN YEARS BASED ON MONTH AND YEAR PROVIDED. ASSUME BIRTHDAY IS THE 15TH OF EACH MONTH.

**Item #:** BEH26

**Question type:** Single punch

**Variable Name:** BEH26

**Variable Text:** We understand that you might feel uncomfortable providing the birth month and year of your [IF BEH24=1,-99 INSERT: child; IF BEH24=2-20 INSERT: children] under 18.

[SPACE]

So that we can ask you accurate questions, can you please let us know how old [IF BEH24=1,-99 INSERT: is; IF BEH24=2-20 INSERT: are] your [IF BEH24=1,-99 INSERT: child; IF BEH24=2-20 INSERT: children]?

**Variable Label:** BEH26: Age of children under 18

**// Ask if any BEH25\_1-BEH25\_20\_(Birth month of children under 18) = -99 (“REFUSED”) //**

**// DOUBLE PROMPT //**

**// NUMBERBOXES, RANGE 0-18 //**

**// SHOW NUMBER OF NUMBERBOXES EQUAL TO BEH24 RESPONSE (0-20). //**

NUMBERBOXES:

1. [IF BEH24>0] Your [IF BEH24>1 INSERT: oldest] child under 18 [NUMBERBOX]
2. [IF BEH24>1] Your [IF BEH24=2 INSERT: youngest] [IF BEH24>2 INSERT: second oldest] child under 18 [NUMBERBOX]
3. [IF BEH24>2] Your [IF BEH24=3 INSERT: youngest] [IF BEH24>3 INSERT: third oldest] child under 18 [NUMBERBOX]
4. [IF BEH24>3] Your [IF BEH24=4 INSERT: youngest] [IF BEH24>4 INSERT: fourth oldest] child under 18 [NUMBERBOX]
5. [IF BEH24>4 Your [IF BEH24=5 INSERT: youngest] [IF BEH24>5 INSERT: fifth oldest] child under 18 [NUMBERBOX]
6. [IF BEH24>5 Your [IF BEH24=6 INSERT: youngest] [IF BEH24>6 INSERT: sixth oldest] child under 18 [NUMBERBOX]
7. [IF BEH24>6] Your [IF BEH24=7 INSERT: youngest] [IF BEH24>7 INSERT: next oldest] child under 18 [NUMBERBOX]
8. [IF BEH24>7] Your [IF BEH24=8 INSERT: youngest] [IF BEH24>8 INSERT: next oldest] child under 18 [NUMBERBOX]
9. [IF BEH24>8] Your [IF BEH24=9 INSERT: youngest] [IF BEH24>9 INSERT: next oldest] child under 18 [NUMBERBOX]
10. [IF BEH24>9] Your [IF BEH24=10 INSERT: youngest] [IF BEH24>10 INSERT: next oldest] child under 18 [NUMBERBOX]
11. [IF BEH24>10] Your [IF BEH24=11 INSERT: youngest] [IF BEH24>11 INSERT: next oldest] child under 18 [NUMBERBOX]
12. [IF BEH24>11] Your [IF BEH24=12 INSERT: youngest] [IF BEH24>12 INSERT: next oldest] child under 18 [NUMBERBOX]
13. [IF BEH24>12] Your [IF BEH24=13 INSERT: youngest] [IF BEH24>13 INSERT: next oldest] child under 18 [NUMBERBOX]
14. [IF BEH24>13] Your [IF BEH24=14 INSERT: youngest] [IF BEH24>14 INSERT: next oldest] child under 18 [NUMBERBOX]
15. [IF BEH24>14 Your [IF BEH24=15 INSERT: youngest] [IF BEH24>15 INSERT: next oldest] child under 18 [NUMBERBOX]
16. [IF BEH24>15] Your [IF BEH24=16 INSERT: youngest] [IF BEH24>16 INSERT: next oldest] child under 18 [NUMBERBOX]
17. [IF BEH24>16] Your [IF BEH24=17 INSERT: youngest] [IF BEH24>17 INSERT: next oldest] child under 18 [NUMBERBOX]
18. [IF BEH24>17] Your [IF BEH24=18 INSERT: youngest] [IF BEH24>18 INSERT: next oldest] child under 18 [NUMBERBOX]
19. [IF BEH24>18] Your [IF BEH24=19 INSERT: youngest] [IF BEH24>19 INSERT: next oldest] child under 18 [NUMBERBOX]
20. [IF BEH24>19] Your youngest child under 18 [NUMBERBOX]

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0-17 |  |
| -99 | REFUSED |
| -100 | VALID SKIP |

IF MISSING CHILD\_AGE\_x, CHILD\_AGE\_x= BEH26\_x

**[Page Break]**

**// Ask if BEH24 (Number of children under 18)** ≥ **1 or = -99 (“REFUSED”) //**

***Your Children and COVID-19 Vaccines***

The following questions will ask about your child or children and COVID-19 vaccines. To date, the U.S. Food and Drug Administration (FDA) has authorized several vaccines that protect against COVID-19 for adults and children ages 12 and above, and in the future expects to authorize vaccines for younger children. We want to learn more about your plans related to these vaccines for each of your children to better understand vaccination plans among all Americans. We will not ask for any identifying information about your children, such as their names or dates of birth. For the following questions, please assume there are enough vaccines so that everyone who wants a COVID-19 vaccine can get one.

[IF ANY CHILD\_AGE\_x =0-18]

[LOOP BEH27-BEH28 FOR EACH DISCRETE VALUE PROVIDED IN CHILD\_AGE\_x SERIES (E.G., IF CHILD\_AGE\_1=2 AND CHILD\_AGE\_2=3 AND CHILD\_AGE\_3=4, LOOP 3 TIMES. IF CHILD\_AGE\_1=2 AND CHILD\_AGE\_2=2 AND CHILD\_AGE\_3=4, LOOP 2 TIMES.]

[LOOPS ARE ASSOCIATED WITH ONLY ONE CHILD\_AGE\_x VALUE UNLESS THERE ARE DUPLICATE VALUES IN CHILD\_AGE\_x SERIES. DUPLICATE VALUES WILL ALL BE COMBINED INTO ONE LOOP, SHOWN IN THE CHILD\_AGE\_x SEQUENCE FOR THE FIRST INSTANCE OF THAT VALUE]

[CREATE DOV\_DUPE\_x. IF LOOP IS FOR A SINGLE VALUE IN THE CHILD\_AGE\_x SERIES, DOV\_DUPE\_x=0. IF LOOP IS FOR MULTIPLE DUPLICATE VALUES OF CHILD\_AGE\_x, DOV\_DUPE\_x=1]

**[Page Break]**

The following questions are about your [INSERT\_CHILD\_AGE\_x]-year-old child [IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children].

**[Page Break]**

**Item #:** BEH27

**Question type:** Single punch

**Variable Name:** BEH27

**Variable Text:** [IF DOV\_DUPE\_x=0 INSERT: Has] [IF DOV\_DUPE\_x=1 INSERT: Have] your [INSERT\_CHILD\_AGE\_x]-year-old [IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children] received a COVID-19 vaccine?

**Variable Label:** BEH27: Vaccine uptake for child

**// Ask if CHILD\_AGE\_x=12-17 //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No, my [INSERT\_CHILD\_AGE\_x]-year-old [IF DOV\_DUPE\_x=0 INSERT: child has] [IF DOV\_DUPE\_x=1 INSERT: children have] not received a COVID-19 vaccine. |
| 1 | Yes, but my [INSERT\_CHILD\_AGE\_x]-year-old [IF DOV\_DUPE\_x=0 INSERT: child has] [IF DOV\_DUPE\_x=1 INSERT: children have] only received one shot out of the two required shots. |
| 2 | Yes, my [INSERT\_CHILD\_AGE\_x]-year-old [IF DOV\_DUPE\_x=0 INSERT: child has] [IF DOV\_DUPE\_x=1 INSERT: children have] received all of the required shots. |
| [IF DOV\_DUPE\_x=1] 3 | Other [TEXTBOX] |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH28

**Question type:** Single punch

**Variable Name:** BEH28

**Variable Text:** [IF CHILD\_AGE\_X<12 INSERT: Food and Drug Administration (FDA)-authorized vaccines to prevent COVID-19 will eventually be available at no cost to children.] What is the likelihood that you will get your [INSERT CHILD\_AGE\_x]-year-old [IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children] vaccinated [IF CHILD\_AGE\_X<12 INSERT: when they are eligible for vaccination]?

**Variable Label:** BEH28: Intention to vaccinate child

**// Ask if CHILD\_AGE\_X<12 OR BEH27=0 //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH29

**Question type:** Single punch

**Variable Name:** BEH29

**Variable Text:** [IF CHILD\_AGE\_X<12 INSERT: Food and Drug Administration (FDA)-authorized vaccines to prevent COVID-19 will eventually be available at no cost to children.] How soon will you get your [INSERT CHILD\_AGE\_x]-year-old [IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children] vaccinated? *For this question, assume there are enough vaccines so that everyone who wants a COVID-19 vaccine can get it.*

**Variable Label:** BEH28: Intention to vaccinate child

**// Ask if CHILD\_AGE\_X<12 OR BEH27=0 //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | I will get my [INSERT\_CHILD\_AGE\_x]-year-old[IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children] vaccinated against COVID-19 as soon as I can. |
| 2 | I will wait to get my [INSERT\_CHILD\_AGE\_x]-year-old[IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children] vaccinated against COVID-19 for one or more reasons. |
| 3 | I will never get my [INSERT\_CHILD\_AGE\_x]-year-old[IF DOV\_DUPE\_x=0 INSERT: child] [IF DOV\_DUPE\_x=1 INSERT: children] vaccinated against COVID-19. |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** BEH30

**Question Type**:Grid

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

**// Ask if BEH24 (Number of children under 18)** ≥ **1. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| BEH30\_1 | COVID-19 vaccines are important for my child/children’s health. | BEH30\_1: Vaccine important for child’s health |
| BEH30\_2 | Getting COVID-19 vaccines is a good way to protect my child/children from disease. | BEH30\_2: Vaccine good way to protect child |
| BEH30\_3 | COVID-19 vaccines are effective for children. | BEH30\_3: Vaccine effective for child |
| BEH30\_4 | Having my child/children vaccinated against COVID-19 is important for the health of others in my community. | BEH30\_4: Vaccinating child important for community |
| BEH30\_5 | Generally I do what my doctor or health care provider recommends about vaccines for my child/children | BEH30\_5: Generally follow doctor recommendation for child vaccines |

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

**Section 2: Your Opinions on COVID-19**

This section asks for your opinion on statements related to COVID-19, social distancing (keeping at least a 6-foot distance from others outside of your household), and wearing a face mask.

**[Page Break]**

**Item #:** ATT1

**Question Type**:Grid

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

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT1\_1 | It is important for me to get a COVID-19 vaccine. | ATT1\_1: Important for me to get all of the recommended COVID-19 vaccines |
| ATT1\_2 | It is important for everyone to get a COVID-19 vaccine. | ATT1\_2: Important for everyone to get all of the recommended COVID-19 vaccines |
| ATT1\_3 | Getting a COVID-19 vaccine helps reduce the spread of COVID-19. | ATT1\_3: Getting all recommended vaccines helps reduce COVID-19 |

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

**Item #:** ATT2

**Question Type**:Grid

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

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| 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 |
| ATT2\_3 | Wearing a face mask helps reduce the spread of COVID-19. | ATT2\_3: Wearing mask helps reduce COVID-19 |

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

**Item #:** ATT3

**Question Type**:Grid

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

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| 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 |
| ATT3\_3 | Maintaining a social distance helps reduce the spread of COVID-19. | ATT3\_3: Social distancing helps reduce COVID-19 |

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

**Item #:** ATT5

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT5\_1 | COVID-19 is probably a hoax. | ATT5\_1: COVID-19 probably hoax |
| ATT5\_2 | Public health officials are exaggerating the seriousness of COVID-19. | ATT5\_2: Health officials exaggerating seriousness of COVID-19 |
|  |  |  |
| ATT5\_4 | There are people who want the pandemic to continue for their own personal gain. | ATT5\_4: Continue pandemic for personal gain |
| ATT5\_5 | COVID-19 was created in a lab. | ATT5\_5: COVID-19 created in lab |
| ATT5\_6 | COVID-19 is more dangerous than the flu. | ATT5\_6: COVID-19 not more dangerous than flu |
|  |  |  |
|  |  |  |
| ATT5\_9 | The media portrays news about the COVID-19 vaccines accurately. | ATT5\_9: Media accuracy |

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

**Item #:** ATT6

**Question Type**:Grid

**Variable Text:** How much do you agree or disagree that each of the following actions are effective at keeping you safe from COVID-19? *Select one response for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Text** |
| ATT6\_1 | Wearing a face mask | ATT6\_1: Wearing face mask keeps safe from COVID-19 |
|  |  |  |
| ATT6\_3 | Maintaining a social distance | ATT6\_3: Maintaining social distance keeps safe from COVID-19 |
| ATT6\_4 | Receiving a COVID-19 vaccine | ATT6\_4: Receiving vaccine keeps safe from COVID-19 |

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

**Item #:** ATT8

**Question Type**:Grid

**Variable Text:** Do you think COVID-19 is transmitted in the following ways? *Select yes or no for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT8\_1 | Close contact with an infected person who has symptoms | ATT8\_1: Transmitted through close contact with symptomatic, infected person |
| ATT8\_2 | Close contact with an infected person even if they are not showing symptoms of infection | ATT8\_2: Transmitted through close contact with asymptomatic, infected person |
| ATT8\_3 | Contact with surfaces that an infected person has touched | ATT8\_3: Transmitted through contact with surfaces infected person has touched |
| ATT8\_4 | Contact with someone who previously had COVID-19 | ATT8\_4: Transmitted through contact with someone who had COVID-19 |
| ATT8\_5 | Through the air while outdoors and in close contact with an infected person | ATT8\_5: Transmitted t hrough the air outdoors |
| ATT8\_6 | Through the air while indoors and in close contact with an infected person | ATT8\_6: Transmitted t hrough the air indoors |

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

**Item #:** ATT9

**Question Type**:Grid

**Variable text:** How much do you agree or disagree with the following statements about COVID-19? *Select one response for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT9\_1 | I would accept a COVID-19 vaccine offered during a regularly scheduled appointment with my health care provider. | ATT9\_1: Would get vaccine at regular doctor’s appointment |
| ATT9\_2 | I am worried that a COVID-19 vaccine could give me COVID-19. | ATT9\_2: Worried vaccine will give me COVID-19 |
| ATT9\_3 | I would rather build immunity by exposure to an infected individual than receive a COVID-19 vaccine. | ATT9\_3: Rather build immunity by exposure |
| ATT9\_4 | I would get a COVID-19 vaccine if it would help life return to normal more quickly. | ATT9\_4: Would get vaccine for return to normal |
| ATT9\_5 | I am worried about side effects of a COVID-19 vaccine for myself. | ATT9\_5: Worried about side effects |
| ATT9\_6 | I am worried that side effects of a COVID-19 vaccine could be worse than COVID-19 itself. | ATT9\_6: Side effects worse than COVID-19 |
| ATT9\_7 | I am worried that a COVID-19 vaccine would not protect me against new strains or variants of the virus. | ATT9\_7: Worried about protection against variants |

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

**Item #:** ATT10

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT10\_1 | A COVID-19 vaccine will allow me to spend more time with my loved ones. | ATT10\_1: Vaccine allows more time with loved ones |
| ATT10\_2 | A COVID-19 vaccine will allow me to return to normal day-to-day activities. | ATT10\_2: Vaccine allows normal day-to-day activities |
| ATT10\_3 | A COVID-19 vaccine will improve the economy. | ATT10\_3: Vaccine will improve the economy |
| ATT10\_4 | A COVID-19 vaccine will allow schools and businesses to reopen. | ATT10\_4: Vaccine allows schools/businesses to reopen |
| ATT10\_5 | The benefits of a COVID-19 vaccine outweigh any risks associated with it. | ATT10\_5: Benefits of vaccine outweigh risks |

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

**Item #:** ATT11

**Question Type**:Grid

**Variable text:** How much do you agree or disagree with the following statements about vaccines in general? *Select one response for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT11\_1 | I am completely confident that vaccines are safe. | ATT11\_1: Vaccines are safe |
| ATT11\_2 | Vaccinations are effective. | ATT11\_2: Vaccines are effective |
| ATT11\_3 | I am confident that public authorities decide to approve vaccines when it is in the best interest of the community. | ATT11\_3: Confident in public authorities |
| ATT11\_4 | Diseases that have a vaccine (e.g., shingles, pneumonia) are not so bad that I need to get a vaccine for them. | ATT11\_4: Diseases with vaccines not severe |
| ATT11\_5 | This is a quality control check. Please check “Disagree” for this item. | ATT11\_5: QC check |
| ATT11\_6 | When I think about getting vaccinated, I weigh the benefits and risks to make the best decision possible. | ATT11\_6: Weigh benefits and risks |
| ATT11\_7 | When everyone is vaccinated, I do not have to get vaccinated, too. | ATT11\_7: When everyone is vaccinated, I don’t have to get vaccinated |
| ATT11\_8 | I get vaccinated because it protects people with a weaker immune system. | ATT11\_8: Protects others with weak immune system |

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

**Item #:** ATT12

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT12\_1 | Concerns regarding COVID-19 are overblown. | ATT12\_1: Concerns are overblown |
| ATT12\_2 | There is currently too much panic around COVID-19. | ATT12\_2: Too much panic |
| ATT12\_3 | COVID-19 is not as dangerous as the media claims it to be. | ATT12\_3: Not as dangerous as media claims |
| ATT12\_4 | People should not be worried about COVID-19. | ATT12\_4: People shouldn’t be worried about COVID-19 |
|  |  |  |
|  |  |  |

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

**Item #:** ATT13a

**Question Type**:Grid

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

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT13a\_1 | People who are important to me will receive a COVID-19 vaccine. | ATT13a\_1: People important to me will receive a vaccine |
| ATT13a\_2 | People who are important to me wear a face mask when they are out in public. | ATT13a\_2: People important to me will wear a face mask |
| ATT13a\_3 | People who are important to me maintain a social distance from individuals outside of their household. | ATT13a\_3: People important to me will maintain social distance |
|  |  |  |

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

**Item #:** ATT13b

**Question Type**:Grid

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

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT13b\_1 | People who are important to me believe that I should receive a COVID-19 vaccine. | ATT13b\_1: People important to me think I should receive a vaccine |
| ATT13b\_2 | People who are important to me believe that I should wear a face mask when I am out in public. | ATT13b\_2: People important to me think I should wear a face mask |
| ATT13b\_3 | People who are important to me believe that I should maintain a social distance from individuals outside of my household. | ATT13b\_3: People important to me think I should maintain social distance |
|  |  |  |

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

**Item #:** ATT13c

**Question type:** Single punch

**Variable Name:** ATT13c

**Variable Text:** How many people in your immediate social network (e.g., friends, family, colleagues) have received a COVID-19 vaccine?

**Variable Label:** ATT13c: Immediate social network vaccinated

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | None of them |
| 1 | A few of them |
| 2 | Some of them |
| 3 | Most of them |
| 4 | All of them |
| -77 | Don’t know |
| -99 | REFUSED |

**Item #:** ATT14

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT14\_1 | Getting all of the recommended vaccines is the right thing to do. | ATT14\_1: Get all recommended vaccines is right thing to do |
| ATT14\_2 | Wearing a face mask is the right thing to do. | ATT14\_2: Wear mask is right thing to do |
| ATT14\_3 | Social distancing is the right thing to do. | ATT14\_3: Social distancing is right thing to do |
|  |  |  |

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

**Item #:** ATT15

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| ATT15\_1 | I have heard enough about how important it is to follow the COVID-19 health guidelines. | ATT15\_1: Have heard enough |
| ATT15\_2 | After hearing them for months, messages about COVID-19 seem repetitive. | ATT15\_2: Messages are repetitive |
| ATT15\_3 | I am burned out from hearing that COVID-19 is a serious problem. | ATT15\_3: Burned out from hearing about COVID-19 |
| ATT15\_4 | I want more information regarding COVID-19. | ATT15\_4: Want more information |

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

**[Page Break]**

**Section 3: Views on Science, Research, and Medical Professionals**

The following questions will ask about your trust in individuals in the science, research, and medical fields.

**[Page Break]**

**Item #:** SCI1

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| SCI1\_1 | When scientists change their minds about a scientific idea it diminishes my trust in their work. **[Reverse coded]** | SCI1\_1: Scientists changing minds reduces trust |
| SCI1\_2 | Scientists ignore evidence that contradicts their work**.** **[Reverse coded]** | SCI1\_2: Scientists ignore contradictory evidence |
| SCI1\_3 | We can trust scientists to share their discoveries even if they do not like their findings. | SCI1\_3: Trust scientists to share findings they don’t like |
| SCI1\_4 | We should trust the work of scientists. | SCI1\_4: Should trust work of scientists |
| SCI1\_5 | We cannot trust scientists because they are biased in their perspectives. **[Reverse coded]** | SCI1\_5: Scientists are biased |
| SCI1\_6 | Today's scientists will sacrifice the well-being of others to advance their research. **[Reverse coded]** | SCI1\_6: Scientists will sacrifice well-being of others |

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

**Item #:** SCI2

**Question Type**:Grid

**Variable Text:** How much do you agree or disagree with the following statements regarding government public health experts? A government public health expert is a person with a degree and career in protecting and promoting community health and who works for a government agency such as the Centers for Disease Control and Prevention (CDC) or the U.S. Food and Drug Administration (FDA). *Select one response for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| SCI2\_1 | I trust the information I receive from government public health experts. | SCI2\_1: Trust experts |
| SCI2\_2 | Government public health experts have their own agenda. | SCI2\_2: Experts have agenda |
| SCI2\_3 | Government public health experts have my best interests in mind. | SCI2\_3: Experts have my best interests in mind |
| SCI2\_4 | Information provided by government public health experts changes too often for me. **[Reverse coded]** | SCI2\_4: Information from experts changes too often |
| SCI2\_5 | Information provided by governmental public health experts has been helpful to me in the past. | SCI2\_5: Information from experts has been helpful |
| SCI2\_6 | I have been misled by government public health experts in the past. **[Reverse coded]** | SCI2\_6: Misled by experts |

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

**Item #:** SCI3

**Question type:** Single punch

**Variable Text:** This question is for quality control purposes. Please select “Disagree” from the list below.

**Variable Label:** SCI3: Attention check

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

**Section 4: Public Health Campaigns**

The following questions will ask about your familiarity with public health campaigns and media content related to COVID-19.

**[Page Break]**

On the next screen you will be asked to listen to a short audio clip. Please make sure you are on a device that has speakers, and that you are able to turn them on now.

**[Page Break]**

**Item #:** CAM1

**Question type:**Single punch

**Variable Name:** CAM1

**Variable Text:** In the past four months, have you seen or heard any media content from the U.S. Department of Health and Human Services (HHS) COVID-19 Public Education Campaign? Campaign content would have included the statement “We Can Do This” or “Juntos Sí Podemos” (in Spanish). Some content would have included the images or clip below.

*Below is an audiovisual clip from the campaign. Please make sure your speakers are on and the volume is turned up. You will be able to proceed to the next page after playing the audiovisual clip. Please click on the button below to play the audiovisual clip.*

**[Insert CABS Wave 2 Campaign Clip\_English\_Its Time\_Power\_Video Combined\_Resized]**

**Variable Label:**CAM1: Campaign awareness

**// Soft Prompt: “We would like your response to this question.” //**

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

**Item #:** CAM2

**Question type:**Single punch

**Variable Name:** CAM2

**Variable Text:** In the past four months, how frequently have you seen or heard any media content from the HHS COVID-19 Public Education Campaign? Campaign content would have referred to HHS and may have included the statement “We Can Do This” or “Juntos Sí Podemos” (in Spanish). Some content would have included the images or clip below.

*Below is an audiovisual clip from the campaign. Please make sure your speakers are on and the volume is turned up. You will be able to proceed to the next page after playing the audiovisual clip. Please click on the button below to play the audiovisual clip.*

**[Insert CABS Wave 2 Campaign Clip\_English\_Its Time\_Power\_Video Combined\_Resized]**

**Variable Label:**CAM2: Campaign awareness frequency

**// Soft Prompt: “We would like your response to this question.” //**

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Often |
| 5 | Very often |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAMCHCK

**Question type:** Single punch

**Variable Name:** CAMCHCK

**Variable Text:** Did you have any trouble listening to the audiovisual clip?

**Variable Label:**CAMCHCK

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

**Item #:** CAMCHCK2

**Question type:** Open-End Text

**Variable Name:** CAMCHCK2

**Variable Text:** Can you explain what issues you had with the audiovisual clip?

**Variable Label:**CAMCHCK2

**// Ask if CAMCHCK = 1 (“Yes”). //**

|  |
| --- |
|  |

**Item #:** CAM3

**Question type:** Single punch

**Variable Name:** CAM3

**Variable Text:** How believable do you find the information from the HHS COVID-19 Public Education Campaign?

**Variable Label:**CAM3: Believability of campaign

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unbelievable |
| 2 | Unbelievable |
| 3 | Neither believable nor unbelievable |
| 4 | Believable |
| 5 | Very believable |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM4

**Question type:** Single punch

**Variable Name:** CAM4

**Variable Text:** Do you agree or disagree with the following statement? The HHS COVID-19 Public Education Campaign media content is for everyone, including me.

**Variable Label:**CAM4: Relevance of campaign

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM5

**Question type:** Single punch

**Variable Name:** CAM5

**Variable Text:** Do you agree or disagree with following statement? The HHS COVID-19 Public Education Campaign media content grabbed my attention.

**Variable Label:**CAM5: Attention grabbing of campaign

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM6

**Question type:**Single punch

**Variable Name:** CAM6

**Variable Text:** After seeing or hearing this media content, did you feel more negative, more positive, or no different about a COVID-19 vaccine?

**Variable Label:**CAM6 valence of campaign

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Negative |
| 2 | Positive |
| 3 | No different |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM7

**Question type:**Single punch

**Variable Name:** CAM7

**Variable Text:** After seeing or hearing this media content, did you talk about it with those in your immediate social network (e.g., friends, family, colleagues)?

**Variable Label:**CAM7: Discussed campaign

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM8

**Question Type**:Single Punch

**Variable Name:** CAM28

**Variable Text:** After seeing or hearing this media content, did you post about it or share it on social media?

**Variable Label:** CAM8: Social media sharing

**// Ask if CAM1 (Campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM9

**Question type:**Single punch

**Variable Name:** CAM9

**Variable Text:** In the last four months, have you seen or heard any media content from the Persist to Protect campaign? Campaign content would have included the statement ”Persist to Protect” and may have included the images below.

**[Collage of ads example]**



**// Soft Prompt: “We would like your response to this question.” //**

**Variable Label:**CAM9: Fake campaign awareness

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

**Item #:** CAM10

**Question type:**Single punch

**Variable Name:** CAM10

**Variable Text:** In the past four months, how frequently have you seen or heard any media content from the Persist to Protect campaign? Campaign content would have included the statement “Persist to Protect” and may have included the images below.

**Variable Label:**CAM10: Fake Campaign awareness frequency

**// Soft Prompt: “We would like your response to this question.” //**

**// Ask if CAM9 (Fake campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Rarely |
| 3 | Sometimes |
| 4 | Often |
| 5 | Very often |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM11

**Question type:** Single punch

**Variable Name:** CAM11

**Variable Text:** How believable do you find the information from the Persist to Protect campaign?

**Variable Label:**CAM11: Believability of fake campaign

**// Ask if CAM9 (Fake campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unbelievable |
| 2 | Unbelievable |
| 3 | Neither believable nor unbelievable |
| 4 | Believable |
| 5 | Very believable |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM12

**Question type:** Single punch

**Variable Name:** CAM12

**Variable Text:** Do you agree or disagree with the following statement? The Persist to Protect campaign media content is for everyone, including me.

**Variable Label:**CAM12: Relevance of fake campaign

**// Ask if CAM9 (Fake campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM13

**Question type:** Single punch

**Variable Name:** CAM13

**Variable Text:** Do you agree or disagree with the following statement? The Persist to Protect campaign media content grabbed my attention.

**Variable Label:**CAM13: Attention grabbing of fake campaign

**// Ask if CAM9 (Fake campaign awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM16

**Question Type**:Grid

**Variable Text:** In the last week, have you used the following government sources to get information about COVID-19? *Select yes or no for each item.*

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| CAM16\_1 | Official U.S. government websites | CAM16\_1: Past 7-day info from official government websites |
| CAM16\_2 | The President of the United States/The White House | CAM16\_2: Past 7-day info from President/White House |
| CAM16\_3 | U.S. Department of Health and Human Services (HHS) | CAM16\_3: Past 7-day info from HHS |
| CAM16\_4 | U.S. Food and Drug Administration (FDA) | CAM16\_4: Past 7-day info from FDA |
| CAM16\_5 | World Health Organization (WHO) | CAM16\_5: Past 7-day info from WHO |
| CAM16\_6 | U.S. Centers for Disease Control and Prevention (CDC) | CAM16\_6: Past 7-day info from CDC |
| CAM16\_7 | Dr. Fauci/Dr. Collins/National Institute of Allergy and Infectious Diseases (NIAID) | CAM16\_7: Past 7-day info from Fauci/Collins/NIAID |
| CAM16\_8 | The Surgeon General of the United States | CAM16\_8: Past 7-day info from Surgeon General |
| CAM16\_9 | My state, county, or city health department | CAM16\_9: Past 7-day info from State/County/ City health department |
| CAM16\_10 | My State Governor | CAM16\_10: Past 7-day info from Governor |
| CAM16\_11 | National Institute of Health (NIH) | CAM16\_11: Past 7-day info from NIH |
| CAM16\_12 | U.S. Military/Department of Defense | CAM16\_12: Past 7-day info from DoD |
| CAM16\_13 | U.S. Department of Veterans Affairs | CAM16\_13: Past 7-day info from USVA |

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

**Item #:** CAM17

**Question Type**:Grid

**Variable Text:** In the last week, have you used the following news media sources to get information about COVID-19? *Select yes or no for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Value Label** |
| CAM17\_1 | Fox News | CAM17\_1: Past 7-day info from Fox |
| CAM17\_2 | Breitbart News | CAM17\_2: Past 7-day info from Breitbart |
| CAM17\_3 | One America News (OAN) | CAM17\_3: Past 7-day info from OAN |
| CAM17\_4 | New York Post | CAM17\_4: Past 7-day info from NY Post |
| CAM17\_5 | Wall Street Journal | CAM17\_5: Past 7-day info from WSJ |
| CAM17\_6 | ABC News | CAM17\_6: Past 7-day info from ABC |
| CAM17\_7 | NBC News | CAM17\_7: Past 7-day info from NBC |
| CAM17\_8 | CBS News | CAM17\_8: Past 7-day info from CBS |
| CAM17\_9 | MSNBC | CAM17\_9: Past 7-day info from MSNBC |
| CAM17\_10 | CNN | CAM17\_10: Past 7-day info from CNN |
| CAM17\_11 | New York Times | CAM17\_11: Past 7-day info from NY Times |
| CAM17\_12 | NPR / PBS | CAM17\_12: Past 7-day info from NPR/PBS |

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

**Item #:** CAM18

**Question Type**:Grid

**Variable Text:** In the last week, have you used the following social media sources to get information about COVID-19? *Select yes or no for each item.*

**// Randomize order of subitems except for CAM18\_8 (“Other [TEXTBOX]”) //**

**// Include soft prompt if CAM18\_8 (Other) = 1 (“Yes), but no text is entered. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| CAM18\_1 | Facebook | CAM18\_1: Past 7-day info from Facebook |
| CAM18\_2 | Twitter | CAM18\_2: Past 7-day info from Twitter |
| CAM18\_3 | Instagram | CAM18\_3: Past 7-day info from Instagram |
| CAM18\_4 | Snapchat | CAM18\_4: Past 7-day info from Snapchat |
| CAM18\_5 | YouTube | CAM18\_5: Past 7-day info from YouTube |
| CAM18\_6 | TikTok | CAM18\_6: Past 7-day info from TikTok |
| CAM18\_7 | Reddit | CAM18\_7: Past 7-day info from Reddit |
| CAM18\_8 | Other [TEXTBOX] | CAM18\_8: Past 7-day info from Other [Specify] |

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

**Item #:** CAM19a

**Question Type**:Single Punch

**Variable Name:** CAM19a

**Variable Text:** Before today, have you heard of the website vaccines.gov?

**Variable Label:** CAM19a: vaccines.gov site awareness

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

**Item #:** CAM19b

**Question Type**:Single-Punch

**Variable Name:** CAM19b

**Variable Text:** Before today, have you visited the website vaccines.gov?

**Variable Label:** CAM19b: vaccines.gov site visit

**// Ask if CAM19a (vaccines.gov site awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM19c

**Question Type:** Grid

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

**// Ask if CAM19b (vaccines.gov site visit) = 1 (“Yes”) //**

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| CAM19c\_1 | The information on the website is believable. | CAM19c\_1: vaccines.gov site is believable |
| CAM19c\_2 | The information on the website is helpful. | CAM19c\_2: vaccines.gov site is helpful |
| CAM19c\_3 | The website allows me to take action. | CAM19c\_3: vaccines.gov site allows me to take action |
| CAM19c\_4 | I like the website. | CAM19c\_4: I like the vaccines.gov website |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly Disagree |
| 2 | Disagree |
| 3 | Neither Agree/Disagree |
| 4 | Agree |
| 5 | Strongly Agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM20a

**Question Type**:Single Punch

**Variable Name:** CAM20a

**Variable Text:** Before today, have you heard of the CDC phone number, 800-CDC-INFO (800-232-4636), for scheduling vaccine appointments?

**Variable Label:** CAM20a: CDC phone awareness

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

**Item #:** CAM20b

**Question Type**:Single-Punch

**Variable Name:** CAM20b

**Variable Text:** Before today, have you called the CDC phone number, 800-CDC-INFO (800-232-4636), to schedule a vaccine appointment?

**Variable Label:** CAM20b: CDC phone called

**// Ask if CAM20a (CDC phone awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM20c

**Question Type:** Grid

**Variable Text:** What is the likelihood that you will call the CDC phone number, 800-CDC-INFO (800-232-4636), to schedule a vaccine appointment?

**// Ask if CAM20b (CDC phone called) = 0 (“No”) AND BEH1 (Vaccination behavior) = 0 (“No…”) or -99 (“REFUSED) //**

**Variable Label:** CAM20c: CDC phone intent

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM21a

**Question Type**:Single Punch

**Variable Name:** CAM21a

**Variable Text:** Before today, have you heard of the CDC text messaging number, GETVAX (438829), for scheduling vaccine appointments?

**Variable Label:** CAM21a: CDC short code awareness

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

**Item #:** CAM21b

**Question Type**:Single-Punch

**Variable Name:** CAM21b

**Variable Text:** Before today, have you texted the CDC text messaging number, GETVAX (438829), to schedule a vaccine appointment?

**Variable Label:** CAM21b: CDC short code

**// Ask if CAM21a (CDC short code awareness) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM21c

**Question Type:** Grid

**Variable Text:** What is the likelihood that you will text the CDC text messaging number, GETVAX (438829), to schedule a vaccine appointment?

**// Ask if CAM21b (CDC short code) = 0 (“No”) AND BEH1 (Vaccination behavior) = 0 (“No…”) or -99 (“REFUSED”) //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** CAM22

**Question Type**:Grid

**Variable Text:** How much do you trust each of the following sources to provide accurate COVID-19 information? *Select one response for each item.*

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| CAM22\_1 | Official U.S. government websites | CAM22\_1: Trust in Official government websites |
| CAM22\_2 | The President of the United States/The White House | CAM22\_2: Trust in President/White House |
| CAM22\_3 | U.S. Department of Health and Human Services (HHS) | CAM22\_3: Trust in HHS |
| CAM22\_4 | U.S. Food and Drug Administration (FDA) | CAM22\_4: Trust in FDA |
| CAM22\_5 | World Health Organization (WHO) | CAM22\_5: Trust in WHO |
| CAM22\_6 | U.S. Centers for Disease Control and Prevention (CDC) | CAM22\_6: Trust in CDC |
| CAM22\_7 | Dr. Fauci/Dr. Collins/National Institute of Allergy and Infectious Diseases (NIAID) | CAM22\_7: Trust in Fauci/Collins/NIAID |
| CAM22\_8 | The Surgeon General of the United States | CAM22\_8: Trust in Surgeon General |
| CAM22\_9 | My state, county, or city health department | CAM22\_9: Trust in State/County/ City health department |
| CAM22\_10 | My State Governor | CAM22\_10: Trust in Governor |
| CAM22\_11 | National Institute of Health (NIH) | CAM22\_11: Trust in NIH |
| CAM22\_12 | U.S. Military/Department of Defense | CAM22\_12: Trust in DoD |
| CAM22\_13 | U.S. Department of Veterans Affairs | CAM22\_13: Trust in USVA |

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

**Item #:** CAM23

**Question Type**:Grid

**Variable Text:** How much do you trust each of the following sources to provide accurate COVID-19 information? *Select one response for each item.*

**// Show grid items in same order as CAM17 (after CAM17 is randomized). //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Value Label** |
| CAM23\_1 | Fox News | CAM23\_1: Trust in Fox |
| CAM23\_2 | Breitbart News | CAM23\_2: Trust in Breitbart |
| CAM23\_3 | One America News (OAN) | CAM23\_3: Trust in OAN |
| CAM23\_4 | New York Post | CAM23\_4: Trust in NY Post |
| CAM23\_5 | Wall Street Journal | CAM23\_5: Trust in WSJ |
| CAM23\_6 | ABC News | CAM23\_6: Trust in ABC |
| CAM23\_7 | NBC News | CAM23\_7: Trust in NBC |
| CAM23\_8 | CBS News | CAM23\_8: Trust in CBS |
| CAM23\_9 | MSNBC | CAM23\_9: Trust in MSNBC |
| CAM23\_10 | CNN | CAM23\_10: Trust in CNN |
| CAM23\_11 | New York Times | CAM23\_11: Trust in NY Times |
| CAM23\_12 | NPR / PBS | CAM23\_12: Trust in NPR/PBS |

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

**Item #:** CAM24

**Question Type**:Grid

**Variable Text:** How much do you trust each of the following sources to provide accurate COVID-19 information? *Select one response for each item.*

**// Show grid items in same order as CAM18 (after CAM18 is randomized). //**

**// Include soft prompt if CAM24\_8 (Other) = 1-4 (“Not at all” – “Completely”), but no text is entered. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| CAM24\_1 | Facebook | CAM24\_1: Trust in Facebook |
| CAM24\_2 | Twitter | CAM24\_2: Trust in Twitter |
| CAM24\_3 | Instagram | CAM24\_3: Trust in Instagram |
| CAM24\_4 | Snapchat | CAM24\_4: Trust in Snapchat |
| CAM24\_5 | YouTube | CAM24\_5: Trust in YouTube |
| CAM24\_6 | TikTok | CAM24\_6: Trust in TikTok |
| CAM24\_7 | Reddit | CAM24\_7: Trust in Reddit |
| CAM24\_8 | Other [TEXTBOX] | CAM24\_8: Trust in Other |

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

**Item #:** CAM25

**Question Type**:Single Punch

**Variable Name:** CAM25

**Variable Text:** How often, if ever, do you think governmental public health organizations (HHS, CDC, FDA, etc.) get the facts right about the COVID-19 outbreak?

**Variable Label:** CAM25: Government information accuracy

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Never |
| 2 | Hardly ever |
| 3 | Sometimes |
| 4 | Most of the time |
| 5 | Almost all the time |
| -99 | REFUSED |

**Item #:** CAM27

**Question Type**:Single Punch

**Variable Name:** CAM27

**Variable Text:** How hopeful are you that the U.S. will get COVID-19 under control in the next 6 months?

**Variable Label:** CAM27: Under control in six months

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not hopeful at all |
| 2 | Hardly hopeful |
| 3 | Somewhat hopeful |
| 4 | Hopeful |
| 5 | Very hopeful |
| -99 | REFUSED |

**Item #:** CAM28

**Question Type**:Single Punch

**Variable Name:** CAM28

**Variable Text:** How hopeful are you that the U.S. will get COVID-19 under control in the next year?

**Variable Label:** CAM28: Under control in next year

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not hopeful at all |
| 2 | Hardly hopeful |
| 3 | Somewhat hopeful |
| 4 | Hopeful |
| 5 | Very hopeful |
| -99 | REFUSED |

**Section 5: Your COVID-19 Experience**

The following questions will ask about your experience with COVID-19.

**[Page Break]**

**Item #:** COV1

**Question type:** Single punch

**Variable Name:** COV1

**Variable Text:** Have you ever been tested to find out if you have COVID-19?

**Variable Label:** COV1: Ever tested for COVID

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| 2 | I do not want to share this information |
| -99 | REFUSED |

**Item #:** COV8

**Question type:** Grid

**Variable Text:** Have any of the following people in your life tested positive for COVID-19? *Select yes or no for each item.*

**// Randomize order of subitems except for COV8\_8 (Don’t know anyone who tested positive). //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| COV8\_1 | I have tested positive for COVID-19. | COV8\_1: I tested positive |
| COV8\_2 | An immediate member of my household has tested positive for COVID-19. | COV8\_2: Household member tested positive |
| COV8\_3 | An extended family member outside of my household has tested positive for COVID-19. | COV8\_3: Extended family member tested positive |
| COV8\_4 | A friend outside of my household has tested positive for COVID-19. | COV8\_4: Friend tested positive |
| COV8\_5 | A roommate who lives with me has tested positive for COVID-19. | COV8\_5: Roommate tested positive |
| COV8\_6 | A coworker has tested positive for COVID-19. | COV8\_6: Coworker tested positive |
| COV8\_7 | A friend of a friend has tested positive for COVID-19. | COV8\_7: Friend of a friend tested positive |
| COV8\_8 | I do not know anyone who has tested positive for COVID-19. | COV8\_8: Don’t know anyone who tested positive |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| 60 | I do not want to share this information. |
| -99 | REFUSED |

**Item #:** COV9

**Question type:** Dropdown / Open-End Numeric

**Variable Name:** COV9

**Variable Text:** What month did you first test positive for COVID-19?

**Variable Label:** COV9: Tested date

**// Limit year input to 2019 onwards. //**

**// Ask if COV8\_1 (I tested positive) = 1 (“Yes”). //**

Year (Open-End)

Month (Dropdown)

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** COV13

**Question type:** Single punch

**Variable Name:** COV13

**Variable Text:** How severe was your COVID-19 infection?

**Variable Label:** COV13: Severity of your COVID

**// Ask if COV8\_1 (I tested positive) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | No symptoms or mild symptoms |
| 2 | Moderate symptoms, but did not seek health care |
| 3 | Moderate symptoms and sought health care |
| 4 | Severe symptoms and/or hospitalization |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** COV14

**Question type:** Single punch

**Variable Name:** COV14

**Variable Text:** How much do you agree or disagree that you are fully recovered from your COVID-19 infection?

**Variable Label:** COV14: recovered from COVID

**// Ask if COV8\_1 (I tested positive) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strongly disagree |
| 2 | Disagree |
| 3 | Neither agree nor disagree |
| 4 | Agree |
| 5 | Strongly agree |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** COV16

**Question type:** Single punch

**Variable Name:** COV16

**Variable Text:** Do you know anyone in your immediate social network (e.g., friends, family, colleagues) who has been hospitalized for COVID-19?

**Variable Label:** COV16: Know anyone in social network hospitalized for COVID

**// Ask if COV15 (Hospitalized for COVID) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| 60 | I do not want to share this information. |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** COV18

**Question type:** Single punch

**Variable Name:** COV18

**Variable Text:** Of the people you know who have had COVID-19, has anyone in your immediate social network (e.g., friends, family, colleagues) died as a result of COVID-19?

**Variable Label:** COV18: Know anyone in social network died from COVID

**// Ask if COV17 (Died from COVID) = 1 (“Yes”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| 60 | I do not want to share this information. |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** COV20

**Question Type**:Grid

**Variable Text**. Have you taken the following actions because of the spread of COVID-19? *Select yes or no for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| COV20\_1 | I have stopped shaking hands with people. | COV20\_1: Stopped shaking hands |
| COV20\_2 | I have stopped hugging and kissing close friends or relatives. | COV20\_2: Stopped hugging/kissing |
| COV20\_3 | I have limited my use of public transportation (e.g., buses, ridesharing services). | COV20\_3: Limited public transportation |
| COV20\_4 | I have stayed home instead of going to work, school, or other regular activities. | COV20\_4: Stayed home |
| COV20\_5 | I have avoided places where many people gather, such as shopping centers, markets, movie theaters, sporting events, or restaurants. | COV20\_5: Avoided places with large gatherings |
| COV20\_6 | I have avoided attendance at religious places of worship. | COV20\_6: Avoided religious places of worship |
| COV20\_7 | I have avoided family or personal events, such as parties, wedding ceremonies, or funeral services. | COV20\_7: Avoided family/personal events |
| COV20\_8 | I have stopped traveling outside my local community. | COV20\_8: Stopped traveling outside of local community |
| COV20\_9 | I have limited the number of trips to the grocery store. | COV20\_9: Limited trips to grocery store |
| COV20\_10 | I have avoided traveling by airplane. | COV20\_10: Avoided airplanes |

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

**Item #:** COV23

**Question type:** Grid

**Variable Text:** Have you experienced any of the following symptoms in the past 2 weeks? *Select one response for each item.*

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| COV23\_1 | Feeling nervous, anxious, or on edge | COV23\_1: Past 2 weeks - Nervous |
| COV23\_2 | Not being able to stop or control worrying | COV23\_2: Past 2 weeks - Worried |
| COV23\_3 | Feeling down, depressed, or hopeless | COV23\_3: Past 2 weeks - Depressed |
| COV23\_4 | Little interest or pleasure in doing things | COV23\_4: Past 2 weeks - Little interest/pleasure in things |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Not at all |
| 2 | Several days |
| 3 | More than half the days |
| 4 | Nearly every day |
| -99 | Refusal |

**Item #:** COV24

**Question Type**:Grid

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

**// Randomize order of subitems. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| COV24\_1 | I worry a lot about COVID-19. | COV24\_1: Worry a lot about COVID |
| COV24\_2 | I am afraid of dying because of COVID-19. | COV24\_2: Afraid of losing life due to COVID |
| COV24\_3 | I am afraid of losing my family members because of COVID-19. | COV24\_3: Afraid of family members dying due to COVID |
| COV24\_4 | When watching news and stories about COVID-19 on social media, I become nervous or anxious. | COV24\_4: Watching news makes me nervous about COVID |

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

**Section 6: Other Health Conditions**

The following questions will ask about other health conditions that may be important when understanding your COVID-19 experience.

**[Page Break]**

**Item #:** MOB1

**Question Type:** Grid

**Variable Text:** People with certain health conditions may be more at risk of serious illness when contracting COVID-19. Has a health care provider (e.g., primary care doctor) ever told you that you have any of the following conditions? *Select yes or no for each item.*

**// Randomize order of subitems except for MOB1\_19 (“Other, please specify:”) and MOB1\_20 (“None of the above”). //**

**// Deselect other items if MOB1\_20 is selected and vice versa. //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| MOB1\_1 | High blood pressure or hypertension | MOB1\_1: High blood pressure |
| MOB1\_2 | Diabetes or high blood sugar | MOB1\_2: Diabetes |
| MOB1\_3 | High blood cholesterol level | MOB1\_3: High cholesterol |
| MOB1\_4 | Cancer or a malignant tumor, excluding minor skin cancer | MOB1\_4: Cancer |
| MOB1\_5 | Lung disease such as chronic bronchitis or emphysema | MOB1\_5: Lung disease |
| MOB1\_6 | A heart attack, coronary heart disease, angina, congestive heart failure, or other heart problems | MOB1\_6: Heart attack |
| MOB1\_7 | A stroke | MOB1\_7: Stroke |
| MOB1\_8 | Any emotional, nervous, or psychiatric problem | MOB1\_8: Psychiatric problem |
| MOB1\_9 | Alzheimer’s disease | MOB1\_9: Alzheimer’s |
| MOB1\_10 | Dementia, senility or any other serious memory impairment | MOB1\_10: Dementia |
| MOB1\_11 | Arthritis or rheumatism | MOB1\_11: Arthritis/rheumatism |
| MOB1\_12 | Asthma | MOB1\_12: Asthma |
| MOB1\_13 | Cerebrovascular disease (affects blood vessels and blood supply to the brain) | MOB1\_13: Cerebrovascular disease |
| MOB1\_14 | Chronic kidney disease | MOB1\_14: Chronic kidney disease |
| MOB1\_15 | Sickle cell disease | MOB1\_15: Sickle cell disease |
| MOB1\_16 | Liver disease, including end-stage liver disease | MOB1\_16: Liver disease |
| MOB1\_17 | A compromised immune system | MOB1\_17: Compromised immune system |
| MOB1\_18 | Overweight or obesity | MOB1\_18: Overweight/obesity |
| MOB1\_19 | Other, please specify: [TEXTBOX] | MOB1\_19: Other health conditions |
| MOB1\_20 | None of the above | MOB\_1\_20: None of the above health conditions |

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

**Item #:** MOB2

**Question Type:** Single Punch

**Variable Name:** MOB2

**Variable Text:** Are you currently pregnant?

**Variable Label:** MOB2: Pregnancy status

**// Ask if S\_GENDER (NORC frame variable) = 2 (Female). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | Yes |
| 1 | No |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** MOB5

**Question Type:** Single Punch

**Variable Name:** MOB5

**Variable Text:** In general, how would you rate your mental or emotional health?

**Variable Label:** MOB5: Mental/emotional health

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Poor |
| 2 | Fair |
| 3 | Good |
| 4 | Very Good |
| 5 | Excellent |
| -99 | REFUSED |

**Item #:** MOB6

**Question Type:** Single Punch

**Variable Name:** MOB6

**Variable Text:** Have you ever been diagnosed with an anxiety disorder?

**Variable Label:** MOB6: Anxiety diagnosis

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

**Item #:** MOB7

**Question Type:** Single Punch

**Variable Name:** MOB7

**Variable Text:** Have you ever been diagnosed with depression?

**Variable Label:** MOB7: Depression diagnosis

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

**Section 7: More About You**

The following questions will ask about your background, which may be important when understanding your COVID-19 experience.

**[Page Break]**

**Item #:** DEM1a

**Question Type:** Single Punch

**Variable Name:** DEM1a

**Variable Text:** Would you say that your primary source of income has changed in the past four months?

**Variable Label:** DEM1a: Employment status changed

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

**Item #:** DEM1

**Question Type:** Single Punch

**Variable Name:** DEM1

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

**Variable Label:** DEM1: Employment status

**// Ask if DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Working – as a paid employee |
| 2 | Working – self-employed |
| 3 | Not working – on temporary layoff from a job |
| 4 | Not working – looking for work |
| 5 | Not working – retired |
| 6 | Not working – disabled |
| 7 | Not working – other |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** INDUSTRY20

**Question Type:** Open-End Text

**Variable Name:** DEM1

**Variable Text:** Now we want to ask you about the type of industry you worked in most recently.

**[If DEM1=1, 2, -99 (“Working…” or “REFUSED” AND DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”)]** What kind of business or industry best describes your current employer or business? Include the main activity, product, or service provided at the location where employed. (For example: elementary school, residential construction). Please enter ‘Never Worked’ if you have never worked.

|  |
| --- |
|  |

**[IF DEM1=3-7 (“Not working…”) AND DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”)]** What kind of business or industry best describes your last employer or business? Include the main activity, product, or service provided at the location where employed. (For example: elementary school, residential construction). Please enter ‘Never Worked’ if you have never worked.

**Variable Label:** DEM1: Employment status

|  |
| --- |
|  |

**Item #:** DEM1b

**Question Type:** Open-End Text

**Variable Name:** DEM1b

**Variable Text: [If DEM1=1, 2, -99 (“Working…” or “REFUSED”) AND DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”)]** What kind of work do you do for your current main job?

**[IF DEM1=3-7 (“Not working…”) AND DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”)]** What kind of work did you do for your last main job?

By main job we mean the job at which you usually work the most hours.

**Variable Label:** DEM1: Employment status

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 60 | Never worked **(IF DEM1=3-7, -99 (“Not working…”) or “REFUSED”]** |

**Item #:** DEM2

**Question Type:** Open-End Numeric

**Variable Name:** DEM2

**Variable Text:** In the past four months, how many hours did you usually work per week?

**Variable Label:** DEM2: Number of hours worked per week

**// Ask if DEM1 = 1 | 2 (“Working…”) AND DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”). //**

**// Limit to 168 hours (24 hours x 7 days). Do not allow negative numbers. //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0-168 |  |
| -99 | REFUSED |
| -100 | VALID SKIP |

**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

**// Ask if DEM1 = 1 | 2 (“Working…”) AND DEM1a (Employment status changed) = 1 (“Yes”) or -99 (“REFUSED”). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** DEM4

**Question Type:** Single Punch

**Variable Name:** DEM4

**Variable Text:** Are you now covered by any form of health insurance or health plan? A health plan would include any private insurance plan through your employer or a plan that you purchased yourself, as well as a government program like Medicare or Medicaid.

**Variable Label:** DEM4: Health insurance status

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| 77 | Don’t know |
| -99 | REFUSED |

**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

**// Limit to whole numbers between 0-20. //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0-20 |  |
| -99 | REFUSED |

**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

**// Ask if DEM7 = 2-20. //**

**// Response cannot exceed total number of people living in household. //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1-19 |  |
| -99 | REFUSED |
| -100 | VALID SKIP |

**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)

**// Ask if DEM7 = 2-20. //**

**// Response cannot exceed total number of people in household, minus one. //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1-19 |  |
| -99 | REFUSED |
| -100 | VALID SKIP |

**NOTE:** The following items in red represent those asked by NORC if not already provided by panel registrants.

**Item #:** PID1

**Question Type:** Single Punch

**Variable Name:** PID1

**Variable Text:** Do you consider yourself a Democrat, a Republican, an Independent or none of these?

**Variable Label:**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Democrat |
| 2 | Republican |
| 3 | Independent |
| 4 | None of these |
| -99 | REFUSED |

**Item #:** PIDA

**Question Type:** Single Punch

**Variable Name:** PIDA

**Variable Text:** Do you consider yourself a strong or not so strong Democrat?

**Variable Label:**

**// Ask if PID1 = 1 (Democrat). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strong Democrat |
| 2 | Not so strong Democrat |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** PIDB

**Question Type:** Single Punch

**Variable Name:** PIDB

**Variable Text:** Do you consider yourself a strong or not so strong Republican?

**Variable Label:**

**// Ask if PID1 = 2 (Republican). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Strong Republican |
| 2 | Not so strong Republican |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** PIDi

**Question Type:** Single Punch

**Variable Name:** PIDi

**Variable Text:** Do you lean more toward the Democrats or the Republicans?

**Variable Label:**

**// Ask if PID1 = 3 (Independent) or 4 (None of these) or -99 (REFUSED). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Lean Democrat |
| 2 | Lean Republican |
| 3 | Don’t lean |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** D3

**Question Type:** Single Punch

**Variable Name:** D3

**Variable Text:** Generally speaking, do you consider yourself to be a liberal, moderate, or conservative?

**Variable Label:**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Liberal |
| 2 | Moderate |
| 3 | Conservative |
| -99 | REFUSED |

**Item #:** D4

**Question Type:** Single Punch

**Variable Name:** D4

**Variable Text:** Do you consider yourself:

**Variable Label:**

**// Ask if D3 = 1 (Liberal). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very liberal |
| 2 | Somewhat liberal |
| -99 | REFUSED |
| -100 | VALID SKIP |

**Item #:** D5

**Question Type:** Single Punch

**Variable Name:** D5

**Variable Text:** Do you consider yourself:

**Variable Label:**

**// Ask if D3 = 3 (Conservative). //**

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very conservative |
| 2 | Somewhat conservative |
| -99 | REFUSED |
| -100 | VALID SKIP |