



# Parents of Children 6 Months to Under 5 Years Old Focus Group Screener

## Notes to Recruiters

- Recruit 8 to seat 4-6
- 18 focus groups with vaccinated parents of children 6 months to under 5 years old
  - 6 focus groups with vaccinated parents who say they will get their child vaccinated as soon as vaccines are authorized and available to them
    - 3 focus groups with parents of children 6 months – under 2 years old
      - 1 Black/African American (B/AA), 1 Hispanic/Latino (English), 1 gen pop
    - 3 focus groups with parents of children ages 2–4
      - 1 B/AA, 1 Hispanic/Latino (English), 1 gen pop
  - 12 focus groups with vaccinated parents who say they will wait to get their child vaccinated once vaccines are authorized and available to them
    - 6 focus groups with parents of children 6 months–under 2 years old
      - 2 B/AA, 2 Hispanic/Latino (English), 2 gen pop
    - 6 focus groups with parents of children ages 2–4
      - 2 B/AA, 2 Hispanic/Latino (English), 2 gen pop
- Do not include anyone who participated in the in-depth interviews for parents of children 6 months to under 5 years of age.
- Please terminate as soon as someone fails to meet an inclusion criterion.
- Please ensure a mix of children ages within the 6-month-to-under-5-year-old group.
- Mix of children ages, gender, race/ethnicity, political ideology, SES, geographic area, education level, etc.
- Please ensure a mix of child vaccination likelihood (Q16) and limit the number of participants who select “somewhat unlikely” to no more than **1** in a focus group.

## Screener

Hello, my name is **[INSERT NAME]** from **[INSERT FACILITY NAME]**, a market research firm. We are recruiting for an upcoming study that will collect feedback about COVID-19. This is not a sales call of any kind. I am only calling to see if you or an eligible member of your household has an interest in participating in a 2-hour focus group that will be conducted virtually for which you would receive a \$100 incentive. I have a few questions I need to ask to see if you are qualified for this study. You don't have to answer any question that you don't want to answer.

1. Are you interested in seeing if you or anyone in your household qualifies to participate in this focus group? **[ACCEPT ONLY 1 PER HOUSEHOLD]**

|     |                          |  |                    |
|-----|--------------------------|--|--------------------|
| Yes | <input type="checkbox"/> |  | > <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> |  | > <b>TERMINATE</b> |

2. In the past 5 years, have you or a member of your immediate family worked in any of the following fields, companies, or organizations?

|   |                          |  |                    |
|---|--------------------------|--|--------------------|
| Market or public opinion research                     | <input type="checkbox"/> |  | > <b>TERMINATE</b> |
| An advertising, public relations, or marketing agency | <input type="checkbox"/> |  | > <b>TERMINATE</b> |



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|--|--------------------------|-------------|
| News, radio, TV, print, media  | <input type="checkbox"/> | > TERMINATE |
| For the U.S. Federal government  | <input type="checkbox"/> | > TERMINATE |
| As a health care provider or medical professional (e.g., physician, nurse) | <input type="checkbox"/> | > TERMINATE |
| At a health care company   | <input type="checkbox"/> | > CONTINUE  |
| Construction, repair, and maintenance                                      | <input type="checkbox"/> | > CONTINUE  |
| Finance  | <input type="checkbox"/> | > CONTINUE  |
| None of these  | <input type="checkbox"/> | > CONTINUE  |

3. In order to participate, you need to have a desktop or laptop computer or a smartphone with an internet connection. You will also need to consent to be recorded during the focus group. Will you be able to meet both of these requirements?

|     |                          |             |
|-----|--------------------------|-------------|
| Yes | <input type="checkbox"/> | > CONTINUE  |
| No  | <input type="checkbox"/> | > TERMINATE |

4. Would you be willing and able to participate in this study via a webcam or smartphone camera?

|     |                          |             |
|-----|--------------------------|-------------|
| Yes | <input type="checkbox"/> | > CONTINUE  |
| No  | <input type="checkbox"/> | > TERMINATE |

5. What is your sex?

|                                   |                          |            |
|-----------------------------------|--------------------------|------------|
| Male                              | <input type="checkbox"/> | > CONTINUE |
| Female                            | <input type="checkbox"/> | > CONTINUE |
| Prefer to self-describe (specify) | <input type="checkbox"/> | > CONTINUE |

6. What is your age? **[RECORD VERBATIM]**

**Note to recruitment: Participants must be 18 years or older.**

7. Are you a parent or guardian of a child under the age of 18?

|     |                          |             |
|-----|--------------------------|-------------|
| Yes | <input type="checkbox"/> | > CONTINUE  |
| No  | <input type="checkbox"/> | > TERMINATE |

8. Have you received all required doses of an authorized COVID-19 vaccine? That is, have you received two doses of either the Pfizer or Moderna vaccines or one dose of the Johnson & Johnson vaccine?

|     |                          |             |
|-----|--------------------------|-------------|
| Yes | <input type="checkbox"/> | > CONTINUE  |
| No  | <input type="checkbox"/> | > TERMINATE |

9. When you became eligible for a vaccine, how long did you wait before getting the first (or only) shot?

|   |                          |            |
|---|--------------------------|------------|
| I got it right away                                       | <input type="checkbox"/> | > CONTINUE |
| I chose to wait to get vaccinated for one or more reasons | <input type="checkbox"/> | > CONTINUE |

10. U.S. health officials and medical experts now recommend COVID-19 vaccine booster shots for people 5 months after their second dose of an mRNA vaccine (Pfizer-BioNTech and Moderna) or 2 months after their dose of the Johnson & Johnson vaccine. Have you received a COVID-19 vaccine booster shot?

|     |                          |                   |
|-----|--------------------------|-------------------|
| Yes | <input type="checkbox"/> | > CONTINUE TO Q12 |
| No  | <input type="checkbox"/> | > CONTINUE TO Q11 |

11. What is the likelihood that you will get a COVID-19 vaccine booster shot?

|                             |                          |            |
|-----------------------------|--------------------------|------------|
| Very unlikely               | <input type="checkbox"/> | > CONTINUE |
| Somewhat unlikely           | <input type="checkbox"/> | > CONTINUE |
| Neither likely nor unlikely | <input type="checkbox"/> | > CONTINUE |
| Somewhat likely             | <input type="checkbox"/> | > CONTINUE |
| Very likely                 | <input type="checkbox"/> | > CONTINUE |

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12. Please provide the ages of each of your children. \_\_\_\_\_ [RECORD VERBATIM, **TERMINATE IF NO CHILDREN ARE 6 MONTHS TO UNDER 5 YEARS OLD**] **Note to recruitment: At least one child must be 6 months to under 5 years old. Record age for all children. If there is more than one child 6 months to under 5 years old in the household for whom respondent is a guardian, ask respondent whose birthday is next. Use this child for Q14-Q19.**

13. Who makes your child(ren)'s primary health-related decisions? Select all that apply.

|                       |                          |   |
|-----------------------|--------------------------|---|
| You:                  | <input type="checkbox"/> | > CONTINUE                                |
| Someone else:         | <input type="checkbox"/> | > TERMINATE                               |
| You and someone else: | <input type="checkbox"/> | > CONTINUE                                |
| Other: _____          | <input type="checkbox"/> | > TERMINATE IF "YOU" IS NOT ALSO SELECTED |

14. Has your child **who is under the age of 5** participated in a COVID-19 vaccine clinical trial?

|      |                          |             |
|------|--------------------------|-------------|
| Yes: | <input type="checkbox"/> | > TERMINATE |
| No:  | <input type="checkbox"/> | > CONTINUE  |

15. What is the likelihood you will get your child **who is under the age of 5** vaccinated when they are eligible? [RECRUIT A MIX]

|                             |                          |             |
|-----------------------------|--------------------------|-------------|
| Very unlikely               | <input type="checkbox"/> | > TERMINATE |
| Somewhat unlikely           | <input type="checkbox"/> | > CONTINUE  |
| Neither likely nor unlikely | <input type="checkbox"/> | > CONTINUE  |
| Somewhat likely             | <input type="checkbox"/> | > CONTINUE  |
| Very likely                 | <input type="checkbox"/> | > CONTINUE  |

16. Once they become eligible, what would make you more likely to get a COVID-19 vaccine for your **child under the age of 5**? [RECRUIT A MIX]

|  |                          |             |
|--|--------------------------|-------------|
| More testing and research becomes available                                | <input type="checkbox"/> | > CONTINUE  |
| It becomes convenient for me to schedule an appointment                    | <input type="checkbox"/> | > CONTINUE  |
| My pediatrician recommends it  | <input type="checkbox"/> | > CONTINUE  |
| Financial incentives are offered   | <input type="checkbox"/> | > CONTINUE  |
| Vaccination is mandated in my area   | <input type="checkbox"/> | > CONTINUE  |
| I am already planning to get my child vaccinated when they become eligible | <input type="checkbox"/> | > CONTINUE  |
| Other: _____   | <input type="checkbox"/> | > CONTINUE  |
| Nothing will make me more likely   | <input type="checkbox"/> | > TERMINATE |

**Note to recruitment: Please record verbatim what they say for "other."**

17. Children ages 5 and older are now eligible to take U.S. Food and Drug Administration (FDA)-authorized vaccines to prevent COVID-19. As the FDA and CDC review clinical trial data, younger children could also become eligible. Once they are eligible, how soon will your child **under the age of 5** get a COVID-19 vaccine?

|   |                          |                   |
|---|--------------------------|-------------------|
| I will get my child vaccinated against COVID-19 as soon as they are eligible                                  | <input type="checkbox"/> | > CONTINUE TO Q19 |
| Once they are eligible, I will still wait to get my child vaccinated against COVID-19 for one or more reasons | <input type="checkbox"/> | > CONTINUE TO Q18 |
| I will never get my child vaccinated against COVID-19   | <input type="checkbox"/> | > TERMINATE       |

18. You responded that you will wait to get your child **under the age of 5** vaccinated against COVID-19. How long will you wait after the vaccine is authorized by the U.S. Food and Drug Administration (FDA) for children under 5? [RECRUIT A MIX]

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|                             |                          |                    |
|-----------------------------|--------------------------|--------------------|
| 0–3 months                  | <input type="checkbox"/> | > CONTINUE         |
| 4–6 months                  | <input type="checkbox"/> | > CONTINUE         |
| 7–11 months                 | <input type="checkbox"/> | > CONTINUE         |
| 1 year to less than 3 years | <input type="checkbox"/> | > CONTINUE         |
| 3 years or more             | <input type="checkbox"/> | > <b>TERMINATE</b> |

19. Has your child **who is older than 5** received a COVID-19 vaccine? **[ASK ONLY FOR THOSE WHO ALSO HAVE A 5 TO UNDER 18-YEAR-OLD]**

|   |                          |            |
|---|--------------------------|------------|
| No, my child has not received a COVID-19 vaccine              | <input type="checkbox"/> | > CONTINUE |
| Yes, my child has had at least one shot of a COVID-19 vaccine | <input type="checkbox"/> | > CONTINUE |

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

|     |                          |            |
|-----|--------------------------|------------|
| Yes | <input type="checkbox"/> | > CONTINUE |
| No  | <input type="checkbox"/> | > CONTINUE |

21. What is your race? Please select all that apply.

|  |                          |            |
|--|--------------------------|------------|
| American Indian or Alaska Native           | <input type="checkbox"/> | > CONTINUE |
| Asian                                      | <input type="checkbox"/> | > CONTINUE |
| Black or African American                  | <input type="checkbox"/> | > CONTINUE |
| Native Hawaiian and Other Pacific Islander | <input type="checkbox"/> | > CONTINUE |
| White/Caucasian                            | <input type="checkbox"/> | > CONTINUE |
| Prefer not to say/Refuse to answer         | <input type="checkbox"/> | > CONTINUE |

22. In what city and state do you live?

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

**Note to recruitment: Recruit a mix of locations.**

23. What is the highest level of school you have completed? **[RECRUIT A MIX, PLEASE TRY TO ENSURE A ROBUST REPRESENTATION OF PARTICIPANTS BELOW A BACHELOR'S DEGREE]**

|   |                          |            |
|---|--------------------------|------------|
| Some high school or less (no diploma)   | <input type="checkbox"/> | > CONTINUE |
| High school diploma or equivalent (GED) | <input type="checkbox"/> | > CONTINUE |
| Some college, no degree                 | <input type="checkbox"/> | > CONTINUE |
| Associate degree                        | <input type="checkbox"/> | > CONTINUE |
| Bachelor's degree                       | <input type="checkbox"/> | > CONTINUE |
| Master's degree                         | <input type="checkbox"/> | > CONTINUE |
| Professional or doctorate degree        | <input type="checkbox"/> | > CONTINUE |

24. Which of the following best describes you? Please select all that apply. **[RECRUIT A MIX]**

|  |                          |            |
|--|--------------------------|------------|
| Employed full time                     | <input type="checkbox"/> | > CONTINUE |
| Employed part time                     | <input type="checkbox"/> | > CONTINUE |
| Self-employed                          | <input type="checkbox"/> | > CONTINUE |
| Not employed, but looking for work     | <input type="checkbox"/> | > CONTINUE |
| Not employed, and not looking for work | <input type="checkbox"/> | > CONTINUE |
| Stay-at-home parent/guardian           | <input type="checkbox"/> | > CONTINUE |
| Student                                | <input type="checkbox"/> | > CONTINUE |
| Retired                                | <input type="checkbox"/> | > CONTINUE |

25. In 2021, what was your total household income from all sources, before taxes? **[RECRUIT A MIX, ENSURE ROBUST REPRESENTATION OF <\$50K]**

|                      |                          |            |
|----------------------|--------------------------|------------|
| Less than \$15,000   | <input type="checkbox"/> | > CONTINUE |
| \$15,000 to \$24,999 | <input type="checkbox"/> | > CONTINUE |
| \$25,000 to \$34,999 | <input type="checkbox"/> | > CONTINUE |
| \$35,000 to \$49,999 | <input type="checkbox"/> | > CONTINUE |

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|------------------------|--------------------------|------------|
| \$50,000 to \$74,999   | <input type="checkbox"/> | > CONTINUE |
| \$75,000 to \$99,999   | <input type="checkbox"/> | > CONTINUE |
| \$100,000 to \$149,999 | <input type="checkbox"/> | > CONTINUE |
| \$150,000 to \$199,999 | <input type="checkbox"/> | > CONTINUE |
| \$200,000 and over     | <input type="checkbox"/> | > CONTINUE |
| Don't know/Refused     | <input type="checkbox"/> | > CONTINUE |

26. In general, do you think of yourself as...? **[RECRUIT A MIX.]**

|                              |                          |            |
|------------------------------|--------------------------|------------|
| Extremely liberal            | <input type="checkbox"/> | > CONTINUE |
| Liberal                      | <input type="checkbox"/> | > CONTINUE |
| Slightly liberal             | <input type="checkbox"/> | > CONTINUE |
| Moderate, middle of the road | <input type="checkbox"/> | > CONTINUE |
| Slightly conservative        | <input type="checkbox"/> | > CONTINUE |
| Conservative                 | <input type="checkbox"/> | > CONTINUE |
| Extremely conservative       | <input type="checkbox"/> | > CONTINUE |

Thank you for taking the time to answer these questions. We will be in touch with additional information on the study. The virtual focus group will last no longer than 2 hours. Thank you again for your time, and we will send additional information soon.

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