



Messaging Matrix: Wave 6 – Updated Vaccines, Parents, and Testing to Treat Questionnaire

Welcome

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

Most people take about 20 minutes to complete the survey.

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

[Checkbox] Frequently Asked Questions

[Checkbox] Contact Us

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

Privacy Advisory

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

Thank you for your time and participation.

[Continue]

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

[Why is this study being conducted?](#)

[Why should I participate?](#)

[Do I have to answer all questions?](#)

[Will my answers be kept private?](#)

[Can I withdraw answers once I have started the survey?](#)

[What are the costs and benefits of participating?](#)

[How will my responses be used?](#)

[Will I see the results of the survey?](#)

Why is this study being conducted? [Top](#)

- This study is being conducted to understand people's opinions of, experiences with, and behaviors related to COVID-19 as well as reactions to messages about COVID-19.

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

Will my answers be kept private? [Top](#)

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

Can I withdraw answers once I have started the survey? [Top](#)

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

What are the costs and benefits of participating? [Top](#)

- There is no cost to you for participating in this study.
- This study is for research purposes only. There is no direct benefit to you for taking part in this study. Any compensation you receive is a small token to thank you for participating, if you choose to do so.
- If you decide to participate, you will receive \$5 for your time.

How will my responses be used? [Top](#)

- Your responses will be used to inform a public education campaign on scientifically proven behaviors on how to decrease COVID-19 infection rates. This is your chance to be heard on issues that directly affect you. 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

If you have questions or concerns about this survey, such as payment questions or technical issues you may experience, please visit https://prodegesupport.zendesk.com/hc/en-us/requests/new?ticket_form_id=360001213252.

An external institutional review board (IRB), which is an independent committee established to help protect the rights of research subjects, has approved this study. If you have 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: 516-318-6877
- Or by email: info@brany.com
- Or by visiting this website: www.branyirb.com/concerns-about-research.

Please reference the following number when contacting the Study Subject Adviser: [21-006-821].

[TERMINATION LANGUAGE]

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

//PROGRAMMING NOTE: TERM ALL SCREENING QUESTIONS AT THE END OF SCREENER (NOT AT THE END OF EACH QUESTION) UNLESS OTHERWISE NOTED. ALL SCREENER QUESTIONS ARE REQUIRED.//

SAMPLE BALANCING

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

Item #: DEM2

Question Type: Single Punch

Variable Name: Gender

Variable Text: What is your gender?

Variable Label: Gender

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

Value	Value Label
1	Man
2	Woman
3	Non-binary
4	Prefer to self-describe [OPEN END TEXT BOX]

Item #: DEM5

Question Type: Numeric Open End

Variable Name: ZIP Code

Variable Text: In what ZIP code do you live?

Variable Label: ZIP

//PROGRAMMING NOTE: ONLY ALLOW FIVE DIGITS, CODE INTO STATE AND CENSUS REGIONS, ALLOW U.S. ZIPS ONLY//

Item #: DEM6

Question Type: Numeric Open End

Variable Name: Age

Variable Text: What is your age?

Variable Label: Age

//PROGRAMMING NOTE: SET RANGE AS: 0-115, CONTINUE IF DEM6=18+, OTHERWISE DISPLAY TERMINATION LANGUAGE AND IMMEDIATELY TERMINATE//

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

Item #: DEM11

Question Type: Single Punch

Variable Name: Hispanic/Latino

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

Variable Label: Hispanic/Latino Ethnicity

Value	Value Label
1	Yes
2	No

Item #: DEM12

Question Type: Multi Punch

Variable Name: Race

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

Variable Label: Race

Variable Name	Text	Variable Label
RACE_1	White	RACE_1 WHITE
RACE_2	Black or African American	RACE_2 BLACK OR AFRICAN AMERICAN
RACE_3	American Indian or Alaska Native	RACE_3 AMERICAN INDIAN OR ALASKA NATIVE

RACE_4	Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese)	RACE_4 ASIAN
RACE_5	Native Hawaiian or other Pacific Islander (e.g., Native Hawaiian Samoan, Chamorro, Tongan, Fijian, Marshallese)	RACE_5 NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

Value	Value Label
1	Yes
2	No

Item #: DEM13

Question Type: Single Punch

Variable Name: Education

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

Variable Label: Education Completion

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

Item #: DEM1

Question Type: Single Punch

Variable Name: Employment Status

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

Variable Label: Employment Status

Variable Name	Text	Variable Label
DEM1_1	Working – as a paid employee	DEM1_1 EMPLOYED PAID
DEM1_2	Working – self-employed	DEM1_2 EMPLOYED SELF
DEM1_3	Not working – on temporary layoff from a job	DEM1_3 TEMP UN

DEM1_4	Not working – looking for work	DEM1_4 LOOKING
DEM1_5	Not working – retired	DEM1_5 RETIRED
DEM1_6	Not working – disabled	DEM1_6 DISABLED
DEM1_7	Not working – other [Specify]	DEM1_7 Other
DEM1_8	Other [Specify]	DEM1_8 OTHER

Value	Value Label
1	Yes
2	No

[PROGRAMMING NOTE: DISPLAY TEXT]

The U.S. Food and Drug Administration (FDA) has authorized vaccines that protect against COVID-19, and we want to learn more about your beliefs and plans related to the vaccine.

Item #: BEH1a

Question type: Single punch

Variable Name: BEH1a

Variable Text: Have you received all required doses of the initial series of an authorized COVID-19 vaccine? That is, have you received:

- Two doses of either the Pfizer or Moderna vaccines,
- Two doses of the Novavax vaccine, or
- One dose of the Johnson & Johnson vaccine?

Variable Label: BEH1a: Vaccination status

//TERMINATE IF BEH1a=0 (No) or 2 (I don't know)//

Value	Value Label
0	No
1	Yes
2	I don't know

Item #: BEH1b

Question type: Single punch

Variable Name: BEH1b

Variable Text: Which initial series COVID-19 vaccine did you receive?

Variable Label: BEH1b: Vaccine type

//ASK IF BEH1a=1 (Yes, I have received all required doses of a vaccine). TERMINATE IF BEH1b=5 or 6 (Received "Other" vaccine or don't remember).//

Value	Value Label
1	Johnson & Johnson/Janssen
2	Moderna
3	Pfizer-BioNTech
4	Novavax
5	Other
6	I don't remember

Item #: BEH1c

Question type: Dropdown Selection

Variable Name: BEH1c

Variable Text: In which month and year did you received your final dose in your initial vaccine series? Final vaccine dose refers to either:

- The second dose of the Pfizer or Moderna vaccine,
- The second dose of the Novavax vaccine, or
- A single dose of the Johnson & Johnson vaccine.

Please do not consider booster shots for this question. If you do not remember the specific month, give your best guess.

Variable Label: BEH1c: Vaccine date

//ASK IF BEH1b=1, 2, 3, or 4 (I have completed an initial series of J&J, Moderna, Pfizer, or Novavax).//

Value	Value Label
Month drop-down selection	January - December
Year drop-down	2020, 2021, 2022

Item #: BEH2a

Question Type: Grid

Variable Name: BEH2a

Variable Text: U.S. health officials and medical experts now recommend additional COVID-19 doses after the initial vaccine series (two doses of Pfizer, Moderna, or Novavax; or one dose of Johnson & Johnson).

Boosters are additional doses you may have received after your initial series. Boosters were available from August 2021 to the end of August 2022.

Updated vaccines are COVID-19 vaccines reformulated to better target Omicron variants, sometimes called “updated boosters” or “bivalent boosters.” Updated vaccines became available in early September 2022.

Have you received a COVID-19 booster or updated vaccine?

Variable Label: BEH2a: Additional dose status

// Ask if CAM5_VaccUptake = 2 //

Variable Name	Variable Text	Variable Label
BEH2a_1	I have received one or more booster dose(s) (available August 2021-August 2022)	BEH2a_1: Booster
BEH2a_2	I have received an updated vaccine (available starting September 2022)	BEH2a_2: Updated vaccine

Value	Value Label
0	No
1	Yes
-99	Refused
-100	Valid skip

Item #: BEH3a

Question type: Single punch

Variable Name: BEH3a

Variable Text: How likely are you to get an updated COVID-19 vaccine?

Updated vaccines are COVID-19 vaccines reformulated to better target Omicron variants, sometimes called “updated boosters” or “bivalent boosters.” Updated vaccines became available in early September 2022.

Variable Label: BEH3a: Intention to get an updated vaccine

//ASK IF BEH1b=1, 2, 3, or 4 (I have completed an initial series of J&J, Moderna, Pfizer, or Novavax) and BEH2a_2=0.//

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

Item #: BEH3b

Question type: Single punch

Variable Name: BEH3b

Variable Text: How soon will you get the updated vaccine?

Variable Label: BEH3b: Wait to get updated vaccine

//ASK IF BEH1b=1, 2, 3, or 4 (I have completed an initial series of J&J, Moderna, Pfizer, or Novavax) and BEH2a_2=0. TERMINATE IF BEH3b=3 (I will never get an updated vaccine).//

Value	Value Label
1	I will get the updated vaccine as soon as I can
2	I will wait to get the updated vaccine for one or more reasons
3	I will never get the updated vaccine

Item #: BEH3c

Question type: Single punch

Variable Name: BEH3c

Variable Text: You responded that you will get an updated vaccine as soon as you can. How soon will you get the vaccine?

Variable Label: BEH3c: How soon to get updated vaccine

//Ask if BEH3b = 1 (I will get the updated vaccine as soon as I can).//

Value	Value Label
1	Within the next few weeks
2	Within the next few months
3	More than 6 months from now

Item #: BEH3d

Question type: Single punch

Variable Name: BEH3d

Variable Text: You responded that you will wait to get the updated vaccine. How long will you wait?

Variable Label: BEH3d: Length of updated vaccine wait

// ASK ONLY IF BEH3a = 2 (I will wait to get the updated vaccine for one or more reasons).//

Value	Value Label
1	A few weeks
2	A few months
3	More than 6 months
-99	REFUSED
-100	VALID SKIP

Item #: DEM17

Question Type: Multi Punch

Variable Name: DEM17

Variable Text: Are you the parent of a child or children in the following age groups? Please check all that apply.

Variable Label: DEM17: Parental_Status

Value	Value Label
1	Younger than 6 months old
2	6 months to <2 years old
3	2 to 4 years old
4	5 to 11 years old
5	12 to 15 years old
6	16 to 17 years old
98	None of the above, I do not have children in those age groups (EXCLUSIVE)

Item #: BEH6a

Question Type: Single punch

Variable Name: BEH6a

Variable Text: Children aged 6 months and older are now eligible to get Food and Drug Administration (FDA)-authorized vaccines to prevent COVID-19. Has your child(ren) aged 6 months – 11 years old completed an initial series of a COVID-19 vaccine?

Variable Label: BEH6a: 5-11 vaccination status

// PROGRAMMING NOTE: ASK IF DEM17=2, 3, 4 (is a parent of a child 6 months to <2 years old, 2 years to 4 years, or 5 years to 11 years)//

//TERMINATE IF BEH6a=2 (All of my children have received an initial series)//

Value	Value Label
0	No, none of my children have completed an initial series of a COVID-19 vaccine.
1	Some but not all of my children aged 6 months–11 years have completed their initial series of a COVID-19 vaccine
2	All of my children aged 6 months–11 years have completed their initial series of a COVID-19 vaccine
60	I do not have children aged 6 months–11 years
-100	Valid Skip

INFORMED CONSENT

SURVEY PARTICIPANT CONSENT FORM

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

What is the key information?

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

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

What do I need to know about this study?

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

What are the potential risks of being in this study?

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

Does participating in this project provide any benefits?

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

Are there alternatives to participating?

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

Will it cost me anything to participate in the project?

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

Do I have to be in this project?

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

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

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

All of the information we collect, including any answers to the survey, information collected during screening, and open-ended answers will be stored on a password-protected computer and/or in locked cabinets that only the project team can access. We will collect some personal information from you, like your age and race, but we will not collect any information that could

identify you personally. After three years, all of the collected information will be destroyed by securely shredding documents or permanently deleting electronic information. Results from this project might appear in professional journals or scientific conferences or shared with other project teams. No individual participants will be identified or linked to the results. We will not disclose your identity in any report or presentation.

Whom to contact about this study:

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

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

- By mail:
Study Subject Adviser BRANY IRB
1981 Marcus Ave, Ste 210
Lake Success, NY 11042
- or call toll free: 516-318-6877
- or by email: info@brany.com
- or by visiting this website: www.branyirb.com/concerns-about-research.

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

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

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

Suicide Prevention Lifeline

- Text or call 988
- Online chat: <https://suicidepreventionlifeline.org/> and click “Chat”

Statement of Consent

Item #: CONSENT

Question type: Single punch

Variable Name: Informed consent

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

Variable Label: CONSENT: Informed consent

//PROGRAMMING NOTE: TERMINATE IF CONSENT=2 OR -99//

Value	Value Label
1	Yes, I agree to participate
2	No, I do not agree to participate

PROGRAMMING NOTE: ALL QUESTIONS IN THE MAIN SURVEY ARE OPTIONAL- THE RESPONDENT CAN CLICK CONTINUE WITHOUT CHOOSING AN OPTION. THEY SHOULD RECEIVE ONE SOFT PROMPT (“We encourage you to answer the question.”) AND BE ALLOWED TO CONTINUE. IF THEY CONTINUE WITHOUT PROVIDING AN ANSWER, CODE AS -99.

//PROGRAMMING NOTE: DISPLAY TEXT ON ITS OWN SCREEN// Next, you are going to see a series of messages pertaining to COVID-19. Below each one, you will see four questions. Please think about the message on your screen when answering all four questions.

Item #: Group
Question type: Single punch
Variable Name: Group
Variable Label: Group: Group Assignment

Value	Value Label
1	Parent <ul style="list-style-type: none"> (BEH6a=0 or 1)
2	Updated Vaccine (BEH2a_2=0)
3	Both <ul style="list-style-type: none"> Qualifies for both the parent and updated vaccine group Need to be reassigned into a group

//PROGRAMMING NOTE: ASSIGN A GROUP FOR MESSAGES. IF A PARTICIPANT QUALIFIES FOR BOTH GROUPS, ASSIGN THEM TO EITHER GROUP DEPENDING ON WHICH NEEDS THEIR SPECIFIC DEMOGRAPHICS FOR QUOTAS (E.G., AGE, RACE/ETHNICITY).//

//Programming Note: Please use a hidden variable to code for final group assignments.//

FINAL_GROUP
 1 = Parent
 2 = Updated Vaccine

Updated Vaccine Messages

//PROGRAMMING NOTE: SHOW IF FINAL_GROUP=UPDATED VACCINE. RANDOMIZE ORDER THAT THESE MESSAGES APPEAR ACROSS RESPONDENTS.//

[WE WILL ENTER THE FINALIZED UPDATED VACCINE MESSAGES HERE]

//PROGRAMMING NOTE: RANDOMIZE ORDER THAT THESE FOUR QUESTIONS APPEAR ACROSS RESPONDENTS. KEEP IN SAME ORDER FOR ALL MESSAGES RATED BY RESPONDENT.

Item #: VAXCONV
Question Type: Single Punch
Variable Name: VAXCONV
Variable Text: How convincing is this to you personally as a reason to get an updated COVID-19 vaccine?
Variable Label: VAXCONV: Convincing to get updated vaccine
//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE VAXCONV1, VAXCONV2, VAXCONV3, ETC.//

Value	Value Label

1	Not at all convincing
2	Not too convincing
3	Somewhat convincing
4	Very convincing
5	Extremely convincing
-99	Refused

Item #: BELIEVE

Question Type: Single Punch

Variable Name: BELIEVE

Variable Text: How believable is this message?

Variable Label: BELIEVABLE: Message believability

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE BELIEVE1, BELIEVE2, BELIEVE3, ETC.//

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

Item #: DIFFICULT

Question type: Single punch

Variable Name: DIFFICULT

Variable Text: How difficult was it to understand this message?

Variable Label: DIFFICULT: Difficulty of message

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE DIFFICULT1, DIFFICULT2, DIFFICULT3, ETC.//

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

Item #: LIKELY

Question type: Single punch

Variable Name: LIKELY

Variable Text: How likely are you to get an updated COVID-19 vaccine after reading this message?

Variable Label: LIKELY : Likelihood of getting vaccine

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE LIKELY1, LIKELY2, LIKELY3, ETC.//

Value	Value Label
1	Not at all likely
2	Not too likely
3	Somewhat likely
4	Very likely

5	Extremely likely
-99	Refused

Parent Messages

//PROGRAMMING NOTE: SHOW IF FINAL_GROUP=PARENT. RANDOMIZE ORDER THAT THESE MESSAGES APPEAR ACROSS RESPONDENTS.//

//DISPLAY TEXT AT TOP OF SCREEN FOR ALL TESTING TO TREAT MESSAGES.//

When reading this message and answering the questions below, please think of your child aged 6 months – 11 years who is **not** currently vaccinated for COVID-19.

[WE WILL ENTER THE FINALIZED PARENT MESSAGES HERE]

//PROGRAMMING NOTE: RANDOMIZE ORDER THAT THESE FOUR QUESTIONS APPEAR ACROSS RESPONDENTS. KEEP IN SAME ORDER FOR ALL MESSAGES RATED BY RESPONDENT.

Item #: CHILDCONV

Question Type: Single Punch

Variable Name: CHILDCONV

Variable Text: How convincing is this **to you personally** as a reason to get a COVID-19 vaccine for your child?

Variable Label: CHILDCONV: Convincing to Get Vaccinated

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE CHILDCONV1, CHILDCONV2, CHILDCONV3, ETC. //

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

Item #: BELIEVE

Question Type: Single Punch

Variable Name: BELIEVE

Variable Text: How believable is this message?

Variable Label: BELIEVABLE: Message believability

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE BELIEVE1, BELIEVE2, BELIEVE3, ETC.//

Value	Value Label
1	Not at all believable
2	Not too believable
3	Somewhat believable
4	Very believable

5	Extremely believable
-99	Refused

Item #: DIFFICULT

Question type: Single punch

Variable Name: DIFFICULT

Variable Text: How difficult was it to understand this message?

Variable Label: DIFFICULT: Difficulty of message

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE DIFFICULT1, DIFFICULT2, DIFFICULT3, ETC.//

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

Item #: LIKELY_CHILD

Question type: Single punch

Variable Name: LIKELY_CHILD

Variable Text: How likely are you to get a COVID-19 vaccine for your child after reading this message?

Variable Label: LIKELY_CHILD: Likelihood of getting child vaccine

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE LIKELY1, LIKELY2, LIKELY3, ETC.//

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

Testing to Treat Messages

//PROGRAMMING NOTE: ALL PARTICIPANTS SHOULD VIEW THESE MESSAGES. RANDOMIZE ORDER THAT THESE MESSAGES APPEAR ACROSS RESPONDENTS.//

[WE WILL ENTER THE FINALIZED TESTING TO TREAT HERE]

//PROGRAMMING NOTE: RANDOMIZE ORDER THAT THESE FOUR QUESTIONS APPEAR ACROSS RESPONDENTS. KEEP IN SAME ORDER FOR ALL MESSAGES RATED BY RESPONDENT.

Item #: TESTCONV

Question Type: Single Punch

Variable Name: TESTCONV

Variable Text: How convincing is this **to you personally** as a reason to talk to your doctor or another health care provider for testing and treatment if you experience COVID symptoms?

Variable Label: TESTCONV: Convincingness to test

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE TESTCONV1, TESTCONV2, TESTCONV3, ETC.//

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

Item #: BELIEVE

Question Type: Single Punch

Variable Name: BELIEVE

Variable Text: How believable is this message?

Variable Label: BELIEVABLE: Message believability

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE BELIEVE1, BELIEVE2, BELIEVE3, ETC.//

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

Item #: DIFFICULT

Question type: Single punch

Variable Name: DIFFICULT

Variable Text: How difficult was it to understand this message?

Variable Label: DIFFICULT: Difficulty of message

//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE DIFFICULT1, DIFFICULT2, DIFFICULT3, ETC.//

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

Item #: LIKELY_TEST

Question type: Single punch

Variable Name: LIKELY_TEST

Variable Text: After reading this message, how likely are you to talk to your doctor or another health care provider for COVID testing and treatment if you experience COVID symptoms?

Variable Label: LIKELY_TEST: Likelihood of getting vaccine
//PROGRAMMING NOTE: CAPTURE THE MESSAGE NUMBER SO THAT WE HAVE LIKELY_TEST1, LIKELY_TEST2, LIKELY_TEST3, ETC.//

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

//PROGRAMMING NOTE: AFTER LAST MESSAGE IS SHOWN, CONTINUE WITH SURVEY.//

INTEREST AND INTENTIONS FOR COVID-19 PREVENTIVE BEHAVIORS

Item #: OUTCOME

Question type: Grid

Variable Text: Thinking about the messages you viewed, how likely are you to do each of the following as a result?

//PROGRAMMING NOTE: Randomize subitems. //

Variable Name	Variable Text	Variable Label
OUTCOME_1	Get an updated COVID-19 vaccine. //ASK IF FINAL_GROUP=UPDATED VACCINE//	OUTCOME_1: Vaccine
OUTCOME_2	Talk to my doctor about the updated COVID-19 vaccines. //ASK IF FINAL_GROUP =UPDATED VACCINE//	OUTCOME_2: Doctor
OUTCOME_3	Visit vaccines.gov for more information about the updated COVID-19 vaccines. //ASK IF FINAL_GROUP=UPDATED VACCINE//	OUTCOME_3: Website
OUTCOME_4	I would share the information in the messages with a friend or family member who wants to know more about the updated COVID-19 vaccines. //ASK IF FINAL_GROUP=UPDATED VACCINE//	OUTCOME_4: Share
OUTCOME_7	Get a COVID-19 vaccine for my child. //ASK IF FINAL_GROUP=PARENT//	OUTCOME_7: Child
OUTCOME_8	Talk to my child's doctor or pediatrician about COVID-19 vaccines for my child. //ASK IF FINAL_GROUP=PARENT//	OUTCOME_8: Pediatrician
OUTCOME_9	Visit vaccines.gov for more information about COVID-19 vaccines for my child. //ASK IF FINAL_GROUP=PARENT//	OUTCOME_9: Website_child

OUTCOME_10	Talk to my doctor or another health care provider for COVID testing and treatment if I experience COVID symptoms. //ASK ALL PARTICIPANTS//	OUTCOME_10: Testing
OUTCOME_11	Talk to my doctor or another health care provider about testing and treatment if I experience COVID symptoms. //ASK ALL PARTICIPANTS//	OUTCOME_11: HCP

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

FINAL DEMOS

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

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

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Item #: DEM8

Question Type: Open-End Numeric

Variable Name: DEM8

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

Variable Label: DEM8: Number of minors living in household

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

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Item #: DEM10

Question Type: Single Punch

Variable Name: DEM10

Variable Text: Last year, that is in 2021, what was your total household income from all sources, before taxes?

Variable Label: DEM10: Family income

Value	Value Label
1	Less than \$15,000
2	\$15,000 to \$24,999

3	\$25,000 to \$34,999
4	\$35,000 to \$49,999
5	\$50,000 to \$74,999
6	\$75,000 to \$99,999
7	\$100,000 to \$149,999
8	\$150,000 to \$199,999
9	\$200,000 and over
-99	Don't know/Refused

Item #: DEM16

Question Type: Single Punch

Variable Name: DEM16

Variable Text: In general, do you think of yourself as...?

Variable Label: DEM16: Political_View

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

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