



COVID-19 Attitudes and Beliefs Survey (CABS)

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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

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 skip questions.

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 survey where 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.

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.

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	
2	
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.

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
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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
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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

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
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
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.

00	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

HHS COVID-19 PUBLIC EDUCATION CAMPAIGN

A campaign to increase vaccine acceptance while reinforcing basic prevention measures



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
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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
ATT8_5	Through the air while outdoors and in close contact with an infected person	ATT8_5: Transmitted through the air
ATT8_6	Through the air while indoors and in close contact with an infected person	ATT8_6: Transmitted through the air

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
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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	ATT12_3: Not as

	media claims it to be.	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 <u>receive a COVID-19 vaccine</u> .	ATT13a_1: People important to me will receive a vaccine
ATT13a_2	People who are important to me <u>wear a face mask</u> 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 <u>maintain a social distance from</u>	ATT13a_3: People important to me will

	<u>individuals outside of their household.</u>	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 <u>believe that I should</u> 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 <u>believe that I should</u> 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 <u>believe that I should</u> 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	SCI2_6:

	experts in the past. [Reverse coded]	Misled by experts
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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

HHS COVID-19 PUBLIC EDUCATION CAMPAIGN

A campaign to increase vaccine acceptance while reinforcing basic prevention measures



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

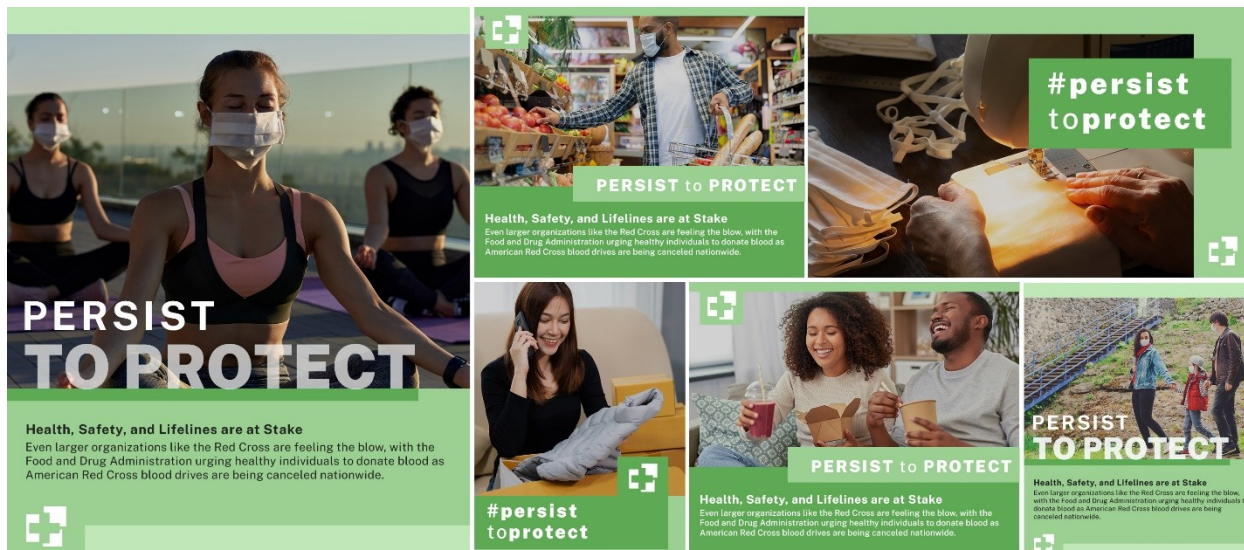
Item #: CAM9

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 NIAID
CAM16_8	The Surgeon General of the United States	CAM16_8: Past 7-day info from Surgeon
CAM16_9	My state, county, or city health department	CAM16_9: Past 7-day info from 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. //

CAM17_2	Breitbart News	CAM17_2: Past 7-day info from Breitbart
CAM17_9	MSNBC	CAM17_9: Past 7-day info from MSNBC
CAM17_10	CNN	CAM17_10: Past 7-day info from CNN
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. //

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.*

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_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	CAM22_7: Trust in Fauci/Collins/NIID
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
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

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

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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	COV8_3: Extended family

	my household has tested positive for COVID-19.	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"). //

Month (Dropdown)	Year (Open-End)
------------------	-----------------

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	MOB1_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
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0	No
1	Yes
-99	REFUSED

HHS COVID-19 PUBLIC EDUCATION CAMPAIGN

A campaign to increase vaccine acceptance while reinforcing basic prevention measures



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
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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