

**NIS Adult COVID Module (NIS-ACM) Hard Copy Questionnaire**

**Q4/2024**

**Confidential Information**

Information contained on this form which would permit identification of any individual or establishment will be held in strict confidence by NORC and CDC, will be used only for purposes stated in this study, and will not be disclosed or released to anyone other than authorized staff of CDC or its agent without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242.m)

ADLT\_INTRO

Thank you for your responses. [(If S\_NUMB=1-9 or ZTUNDR18=1-9 or LF\_UNDR18=1-9) and case did not do any of the 3 surveys, then FILL: "Your ["child's age does" / "children's ages do"] not qualify your household for the questions about childhood vaccinations." We now have a few additional questions for you about vaccines to prevent respiratory diseases.

CONTINUE .....1

IF S3\_INTRO, T\_INTRO1, or LF\_S3\_IN NOT MISSING GO TO ADULT\_TIME; ELSE GO TO AD\_CONSENT

AD\_CONSENT

Before we continue, I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time with no impact on the benefits you may receive. We are required by Federal laws to develop and follow strict procedures to protect your information and use your answers only for statistical analyses. I can describe these laws if you wish. I'd like to continue now unless you have any questions.

CONTINUE .....1  
RESPONDENT ASKS FOR DESCRIPTION OF LAW.....2

GO TO ADULT\_TIME

ADULT\_S3\_LAW

The Public Health Service Act is Volume 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. Through the National Center for Immunization and Respiratory Diseases, the confidentiality of your responses is assured by Section 308d of this Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ:

The information you provide will be used for statistical purposes only. In accordance with Section 308d of the Public Health Service Act, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. Every employee who works on this survey, from the National Center for Immunization and Respiratory Diseases and its collaborating agency and contractor, NORC at the University of Chicago, and their agents and contractors who work on this survey has taken an oath to protect the confidentiality of your information. These employees are subject to disciplinary action, including fines and criminal charges that may result in imprisonment, if he or she willingly discloses ANY identifiable information about you or your household members. Additionally, in compliance with applicable federal law requiring the protection of federal computer networks from cybersecurity risks like hacking, internet attacks, and other security weaknesses, computer network experts working for, or on behalf, of the government, may intercept and review information sent through government networks for cyber threats if the information sent through the government network triggers a cyber threat indicator.

CONTINUE .....1

ADULT\_TIME

The remainder of the survey will take about 8 minutes.

CONTINUE .....1

VAX1

In the past two years, have you received any type of vaccine that was not a COVID vaccine, such as seasonal flu, pneumonia, or a shingles vaccine?

INTERVIEWER NOTE: IF RESPONDENT MENTIONS THEY GOT ANY TYPE OF VACCINE EXCEPT A COVID VACCINE IN THE PAST TWO YEARS, CODE AS YES

YES .....1
NO .....2
DON'T KNOW .....77
REFUSED .....99

VAX\_FLU

Since July 1, 2024, have you received a flu vaccination?

YES .....1
NO .....2 GO TO FLU\_INTENT
DON'T KNOW .....77 GO TO FLU\_INTENT
REFUSED .....99 GO TO FLU\_INTENT

VAX\_FLUM

During what month did you receive your flu vaccine, since July 1, 2024?

INTERVIEWER INSTRUCTION: ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

MONTH/[YEAR=FILL]
DON'T KNOW.....77 GO TO FLVAX\_PL
REFUSED.....99 GO TO FLVAX\_PL

VAX\_FLUC

That was [FILL MONTH] of [FILL YEAR], correct?

YES .....1
NO .....2 GO TO VAX\_FLUM

VAXFL\_WK\_CHK

IF VAX\_FLUM= THE CURRENT MONTH GO TO FLVAX\_WEEK; ELSE GO TO FLVAX\_PL

FLVAX\_WEEK

Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"; ELSE FILL: "on or after Sunday", [FILL DATE WITH MOST RECENT SUNDAY'S DATE]?

YES .....1
NO .....2
DON'T KNOW .....77
REFUSED .....99

FLVAX\_PL

At what kind of place did you get your most recent flu vaccination?

INTERVIEWER NOTE: IF A RESPONDENT SYAS VACCINATION WAS RECEIVED AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF PLACE PROVIDED THIS OPTION.

READ RESPONSES AS NECESSARY.

DOCTOR’S OFFICE [IF PUERTO RICO, THEN SHOW:

INTERVIEWER NOTE: DOCTOR’S OFFICE

INCLUDES PRIVATE PROVIDER AND

|   |    |               |
|---|----|---------------|
| REFORMA PROVIDER] .....                       | 1  | GO TO FLU_REC |
| HEALTH DEPARTMENT .....                       | 2  | GO TO FLU_REC |
| CLINIC OR HEALTH CENTER .....                 | 3  | GO TO FLU_REC |
| HOSPITAL .....                                | 4  | GO TO FLU_REC |
| OTHER MEDICALLY-RELATED PLACE .....           | 5  | GO TO FLU_REC |
| MASS VACCINATION SITE .....                   | 6  | GO TO FLU_REC |
| PHARMACY OR DRUG STORE .....                  | 7  | GO TO FLU_REC |
| WORKPLACE .....                               | 8  | GO TO FLU_REC |
| HIGH SCHOOL/COLLEGE/UNIVERSITY .....          | 9  | GO TO FLU_REC |
| OTHER NONMEDICALLY-RELATED PLACE .....        | 10 | GO TO FLU_REC |
| MALL OUTREACH [DISPLAY ONLY IF GUAM] .....    | 11 | GO TO FLU_REC |
| VILLAGE OUTREACH [DISPLAY ONLY IF GUAM] ..... | 12 | GO TO FLU_REC |
| DON’T KNOW .....                              | 77 | GO TO FLU_REC |
| REFUSED .....                                 | 99 | GO TO FLU_REC |

FLU\_INTENT How likely are you to get a flu vaccination between now and the end of June 2025?

Would you say you would definitely get the vaccine, probably get the vaccine, probably not get the vaccine, definitely not get the vaccine, or are not sure?

|                                    |    |
|------------------------------------|----|
| DEFINITELY GET A VACCINE .....     | 1  |
| PROBABLY GET A VACCINE .....       | 2  |
| PROBABLY NOT GET A VACCINE .....   | 3  |
| DEFINITELY NOT GET A VACCINE ..... | 4  |
| NOT SURE .....                     | 5  |
| DON’T KNOW .....                   | 77 |
| REFUSED .....                      | 99 |

FLU\_REC Has a doctor, nurse, or other health professional recommended that you get a flu vaccine since July 1, 2024?

|                  |    |
|------------------|----|
| YES .....        | 1  |
| NO .....         | 2  |
| DON’T KNOW ..... | 77 |
| REFUSED .....    | 99 |

VAX\_RSV1 There is a vaccine that became available last fall, that is in the Fall of 2023, that helps prevent the respiratory virus called RSV. Have you received this RSV vaccine?

INTERVIEWER NOTE: THIS VACCINE IS ALSO KNOWN AS RSVREF3 (AREXVY) OR RSVREF (ABRYSVO).

INTERVIEWER NOTE: IF RESPONDENT REPORTS MORE THAN 1 DOSE, REMIND THEM THAT THIS VACCINE IS A SINGLE DOSE PER LIFETIME

READ IF NECESSARY: RSV is a respiratory virus that can cause serious illness in infants and older adults.

|                  |    |                |
|------------------|----|----------------|
| YES .....        | 1  |                |
| NO .....         | 2  | GO TO VAX_RSV3 |
| DON'T KNOW ..... | 77 | GO TO VAX_RSV3 |
| REFUSED .....    | 99 | GO TO VAX_RSV3 |

VAX\_RSV2\_M/Y

During what month and year did you receive the RSV vaccine?

ENTER 77 / 7777 FOR DON'T KNOW  
ENTER 99 / 9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR EXAMPLE:  
77/2023

IF MONTH REPORTED IS BEFORE 7/2023, DISPLAY: IF R SAYS SHOT WAS BEFORE JULY 2023, PROBE: An RSV vaccine was not available before July 2023. Were you in a clinical trial?]

INTERVIEWER NOTE: IF RESPONDENT REPORTS MORE THAN 1 VACCINE DATE, ASK FOR THE MOST RECENT

|                        |    |                |
|------------------------|----|----------------|
| MONTH[YEAR=FILL] ..... |    |                |
| DON'T KNOW .....       | 77 | GO TO RSVAX_DK |
| REFUSED .....          | 99 | GO TO RSVAX_DK |

VAXRV\_WK\_CHK

IF VAX\_RSV2\_M=THE CURRENT MONTH GO TO RSVAX\_WEEK; ELSE GO TO RSVAX\_PL

RSVAX\_WEEK

Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"; ELSE FILL: "on or after Sunday, [FILL DATE WITH MOST RECENT SUNDAY'S DATE]"]?

|                  |    |             |
|------------------|----|-------------|
| YES .....        | 1  | GO RSVAX_PL |
| NO .....         | 2  | GO RSVAX_PL |
| DON'T KNOW ..... | 77 | GO RSVAX_PL |
| REFUSED .....    | 99 | GO RSVAX_PL |

RSVAX\_DK Did you receive an RSV vaccine since July 1, 2024, that is in the last [FILL: CURRENT MONTH-7] month(s)?

YES .....1  
 NO .....2  
 DON'T KNOW .....77  
 REFUSED .....99

RSVAX\_PL At what kind of place did you get your RSV vaccination?

INTERVIEWER NOTE: IF A RESPONDENT SAYS VACCINATION WAS RECEIVED AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF PLACE PROVIDED THIS OPTION.

READ RESPONSES AS NECESSARY.

DOCTOR'S OFFICE [IF PUERTO RICO, THEN SHOW:

INTERVIEWER NOTE: DOCTOR'S OFFICE

INCLUDES PRIVATE PROVIDER AND

|   |               |
|---|---------------|
| REFORMA PROVIDER] .....1                        | GO TO RSV_REC |
| HEALTH DEPARTMENT .....2                        | GO TO RSV_REC |
| CLINIC OR HEALTH CENTER .....3                  | GO TO RSV_REC |
| HOSPITAL .....4                                 | GO TO RSV_REC |
| OTHER MEDICALLY-RELATED PLACE .....5            | GO TO RSV_REC |
| MASS VACCINATION SITE .....6                    | GO TO RSV_REC |
| PHARMACY OR DRUG STORE .....7                   | GO TO RSV_REC |
| WORKPLACE .....8                                | GO TO RSV_REC |
| HIGH SCHOOL/COLLEGE/UNIVERSITY .....9           | GO TO RSV_REC |
| OTHER NONMEDICALLY-RELATED PLACE .....10        | GO TO RSV_REC |
| MALL OUTREACH [DISPLAY ONLY IF GUAM] .....11    | GO TO RSV_REC |
| VILLAGE OUTREACH [DISPLAY ONLY IF GUAM] .....12 | GO TO RSV_REC |
| DON'T KNOW .....77                              | GO TO RSV_REC |
| REFUSED .....99                                 | GO TO RSV_REC |

VAX\_RSV3 How likely are you to get the RSV vaccine when you are eligible? Would you say you would definitely get the vaccine, probably get the vaccine, probably not get the vaccine, definitely not get the vaccine, or are not sure?

DEFINITELY GET A VACCINE .....1  
 PROBABLY GET A VACCINE .....2  
 PROBABLY NOT GET A VACCINE .....3  
 DEFINITELY NOT GET A VACCINE .....4  
 NOT SURE .....5  
 DON'T KNOW .....77  
 REFUSED .....99

RSV\_REC Has a doctor, nurse, or other health professional recommended that you get an RSV vaccine since Fall 2023?

YES .....1  
NO .....2  
DON'T KNOW .....77  
REFUSED .....99

VAX2 Have you received at least one dose of a COVID vaccine?

YES .....1  
NO .....2 GO TO VAX6  
DON'T KNOW .....77 GO TO VAX6  
REFUSED .....99 GO TO VAX6

VAX2A Have you received a COVID vaccine after August 22, 2024?

YES .....1  
NO .....2 GO TO VAX6  
DON'T KNOW .....77 GO TO VAX6  
REFUSED .....99 GO TO VAX6

VAXCOV\_M During what month did you receive your most recent COVID vaccine?

ENTER 77 FOR DON'T KNOW  
ENTER 99 FOR REFUSED

IF MONTH IS REPORTED BEFORE 8/22, DISPLAY: DATE MUST BE ON OR AFTER 8/2024

MONTH/[YEAR=FILL]

DON'T KNOW.....77 GO TO VAX\_PL  
REFUSED.....99 GO TO VAX\_PL

VAXCV\_WK\_CHK

IF VAXCOV\_M=THE CURRENT MONTH GO TO CVVAX\_WEEK; ELSE GO TO VAX\_PL

CVVAX\_WEEK

Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"; ELSE FILL: "on or after Sunday, [FILL DATE WITH MOST RECENT SUNDAY'S DATE]"?]

YES .....1  
NO .....2  
DON'T KNOW .....77  
REFUSED .....99

VAX\_PL At what kind of place did you get your COVID vaccination?

INTERVIEWER NOTE: IF A RESPONDENT SAYS VACCINATION WAS RECEIVED AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF PLACE PROVIDED THIS OPTION.

READ RESPONSES AS NECESSARY.

DOCTOR'S OFFICE [IF PUERTO RICO, THEN SHOW:

INTERVIEWER NOTE: DOCTOR'S OFFICE

INCLUDES PRIVATE PROVIDER AND

|   |    |                  |
|---|----|------------------|
| REFORMA PROVIDER] .....                       | 1  | GO TO VAX_CONF7A |
| HEALTH DEPARTMENT .....                       | 2  | GO TO VAX_CONF7A |
| CLINIC OR HEALTH CENTER .....                 | 3  | GO TO VAX_CONF7A |
| HOSPITAL .....                                | 4  | GO TO VAX_CONF7A |
| OTHER MEDICALLY-RELATED PLACE .....           | 5  | GO TO VAX_CONF7A |
| MASS VACCINATION SITE .....                   | 6  | GO TO VAX_CONF7A |
| PHARMACY OR DRUG STORE .....                  | 7  | GO TO VAX_CONF7A |
| WORKPLACE .....                               | 8  | GO TO VAX_CONF7A |
| HIGH SCHOOL/COLLEGE/UNIVERSITY .....          | 9  | GO TO VAX_CONF7A |
| OTHER NONMEDICALLY-RELATED PLACE .....        | 10 | GO TO VAX_CONF7A |
| MALL OUTREACH [DISPLAY ONLY IF GUAM] .....    | 11 | GO TO VAX_CONF7A |
| VILLAGE OUTREACH [DISPLAY ONLY IF GUAM] ..... | 12 | GO TO VAX_CONF7A |
| DON'T KNOW .....                              | 77 | GO TO VAX_CONF7A |
| REFUSED .....                                 | 99 | GO TO VAX_CONF7A |

VAX6 How likely are you to get [IF VAX2 EQ 1 then display: 'an updated'; ELSE display: 'a'] COVID vaccine? Would you say you would definitely get [IF VAX2 EQ 1 then display: 'an updated'; ELSE display: 'a'] vaccine, probably get [IF VAX2 EQ 1 then display: 'an updated'; ELSE display: 'a'] vaccine, probably not get [IF VAX2 EQ 1 then display: 'an updated'; ELSE display: 'a'] vaccine, definitely not get [IF VAX2 EQ 1 then display: 'an updated'; ELSE display: 'a'] vaccine, or are not sure?

|                                    |    |
|------------------------------------|----|
| DEFINITELY GET A VACCINE .....     | 1  |
| PROBABLY GET A VACCINE .....       | 2  |
| PROBABLY NOT GET A VACCINE .....   | 3  |
| DEFINITELY NOT GET A VACCINE ..... | 4  |
| NOT SURE .....                     | 5  |
| DON'T KNOW .....                   | 77 |
| REFUSED .....                      | 99 |

VAX\_CONF7A

Has a doctor, nurse, or other health professional recommended that you get a COVID vaccine since July 1, 2024?

|                  |    |
|------------------|----|
| YES .....        | 1  |
| NO .....         | 2  |
| DON'T KNOW ..... | 77 |
| REFUSED .....    | 99 |



FLU\_CONF2 How concerned are you about getting the flu? Would you say you are: not at all concerned; a little concerned; moderately concerned; or very concerned?

NOT AT ALL CONCERNED .....1  
A LITTLE CONCERNED .....2  
MODERATELY CONCERNED .....3  
VERY CONCERNED .....4  
DON'T KNOW .....77  
REFUSED .....99

FLU\_CONF4 How safe do you think a flu vaccine is for you? Would you say not at all safe; somewhat safe; very safe; or completely safe?

NOT AT ALL SAFE .....1  
SOMEWHAT SAFE .....2  
VERY SAFE .....3  
COMPLETELY SAFE .....4  
DON'T KNOW .....77  
REFUSED .....99

FLU\_CONF5 How important do you think getting a flu vaccine is to protect yourself against the flu? Would you say it is not at all important, a little important, somewhat important, or very important?

NOT AT ALL IMPORTANT .....1  
A LITTLE IMPORTANT .....2  
SOMEWHAT IMPORTANT .....3  
VERY IMPORTANT .....4  
DON'T KNOW .....77  
REFUSED .....99

RSV\_CONF2 How concerned are you about getting RSV? Would you say you are: not at all concerned; a little concerned; moderately concerned; or very concerned?

READ IF NECESSARY: RSV is a respiratory virus that can cause serious illness in infants and older adults.

NOT AT ALL CONCERNED .....1  
A LITTLE CONCERNED .....2  
MODERATELY CONCERNED .....3  
VERY CONCERNED .....4  
DON'T KNOW .....77  
REFUSED .....99

RSV\_CONF4 How safe do you think an RSV vaccine is for you? Would you say not at all safe; somewhat safe; very safe; or completely safe?

NOT AT ALL SAFE .....1  
SOMEWHAT SAFE .....2  
VERY SAFE .....3  
COMPLETELY SAFE .....4  
DON'T KNOW .....77  
REFUSED .....99

RSV\_CONF5 How important do you think getting an RSV vaccine is to protect yourself against RSV? Would you say it is not at all important, a little important, somewhat important, or very important?

NOT AT ALL IMPORTANT .....1  
A LITTLE IMPORTANT .....2  
SOMEWHAT IMPORTANT .....3  
VERY IMPORTANT .....4  
DON'T KNOW .....77  
REFUSED .....99

VAX\_CONF2 How concerned are you about getting COVID? Would you say you are: not at all concerned; a little concerned; moderately concerned; or very concerned?

NOT AT ALL CONCERNED .....1  
A LITTLE CONCERNED .....2  
MODERATELY CONCERNED .....3  
VERY CONCERNED .....4  
DON'T KNOW .....77  
REFUSED .....99

VAX\_CONF4 How safe do you think a COVID vaccine is for you? Would you say not at all safe; somewhat safe; very safe; or completely safe?

NOT AT ALL SAFE .....1  
SOMEWHAT SAFE .....2  
VERY SAFE .....3  
COMPLETELY SAFE .....4  
DON'T KNOW .....77  
REFUSED .....99

VAX\_CONF5 How important do you think getting a COVID vaccine is to protect yourself against COVID? Would you say it is not at all important, a little important, somewhat important, or very important?

NOT AT ALL IMPORTANT .....1  
A LITTLE IMPORTANT .....2  
SOMEWHAT IMPORTANT .....3  
VERY IMPORTANT .....4  
DON'T KNOW .....77  
REFUSED .....99

ACIP3A

Do you have a health condition that may put you at higher risk for getting very sick from respiratory diseases, such as the flu, RSV, or COVID?

|                  |    |             |
|------------------|----|-------------|
| YES .....        | 1  |             |
| NO .....         | 2  | GO TO ACIP5 |
| DON'T KNOW ..... | 77 | GO TO ACIP5 |
| REFUSED .....    | 99 | GO TO ACIP5 |

ACIP4

Can you please tell me what that is?

SELECT ALL THAT APPLY

|   |    |  |
|---|----|--|
| CANCER .....  | 1  |  |
| CHRONIC KIDNEY DISEASE .....  | 2  |  |
| CHRONIC LUNG DISEASES<br>(COPD [CHRONIC OBSTRUCTIVE PULMONARY<br>DISEASE], ASTHMA [MODERATE TO SEVERE],<br>INTERSTITIAL LUNG DISEASE,<br>CYSTIC FIBROSIS,<br>AND PULMONARY HYPERTENSION ..... | 3  | GO TO ACIP5  |
| DEMENTIA OR OTHER<br>NEUROLOGICAL CONDITIONS .....  | 4  | GO TO ACIP5  |
| DIABETES (TYPE 1 OR 2) .....  | 5  | IF ACIP4 IN (19) GO<br>TO ACIP4_OTH<br>THEN GO TO<br>ACIP4DM |
| DOWN SYNDROME .....   | 6  | GO TO ACIP5  |
| HEART CONDITIONS (SUCH AS<br>HEART FAILURE, CORONARY ARTERY DISEASE,<br>CARDIOMYOPATHIES OR HYPERTENSION) .....   | 7  | GO TO ACIP5  |
| HIV INFECTION .....   | 8  | GO TO ACIP5  |
| IMMUNOCOMPROMISED STATE<br>(WEAKENED IMMUNE SYSTEM) .....   | 9  | GO TO ACIP5  |
| LIVER DISEASE (CHRONIC LIVER DISEASE,<br>SUCH AS ALCOHOL-RELATED LIVER DISEASE,<br>NONALCOHOLIC FATTY LIVER DISEASE,<br>AND CIRRHOSIS [SCARRING OF THE LIVER]) .....                          | 10 | GO TO ACIP5  |
| OVERWEIGHT (HIGH BMI) .....   | 11 | GO TO ACIP5  |
| PREGNANCY .....   | 12 | GO TO ACIP5  |
| SICKLE CELL DISEASE OR THALASSEMIA<br>(HEMOGLOBIN BLOOD DISORDER) .....   | 13 | GO TO ACIP5  |
| SMOKING (CURRENT OR FORMER) .....   | 14 | GO TO ACIP5  |
| SOLID ORGAN OR BLOOD STEM CELL<br>TRANSPLANT (INCLUDING<br>BONE MARROW TRANSPLANT) .....  | 15 | GO TO ACIP5  |
| STROKE OR CEREBROVASCULAR DISEASE .....   | 16 | GO TO ACIP5  |
| SUBSTANCE USE DISORDERS (EX: ALCOHOL,<br>OPIOID, OR COCAINE USE DISORDER).....  | 17 | GO TO ACIP5  |
| OLDER AGE .....   | 18 | GO TO ACIP5  |
| OTHER .....   | 19 |  |
| DON'T KNOW .....  | 77 | GO TO ACIP5  |
| REFUSED .....   | 99 | GO TO ACIP5  |

ACIP4\_OTH ENTER OTHER SPECIFY: \_\_\_\_\_

IF ACIP4 IN (5) GO TO ACIP4DM; ELSE GO TO ACIP5

ACIP4DM Do you use insulin to manage your diabetes?

READ IF NECESSARY: Insulin can be taken by shot or pump.

YES .....1  
 NO .....2  
 DON'T KNOW .....77  
 REFUSED .....99

ACIP5 Do you have serious difficulty seeing, hearing, walking, remembering, making decisions, or communicating?

YES .....1  
 NO .....2  
 DON'T KNOW .....77  
 REFUSED .....99

VAX\_CONF11A How difficult would it be for you to get a COVID vaccine? Would you say: not at all difficult, a little difficult, somewhat difficult, or very difficult?

NOT AT ALL DIFFICULT .....1  
 A LITTLE DIFFICULT .....2  
 SOMEWHAT DIFFICULT .....3  
 VERY DIFFICULT .....4  
 DON'T KNOW .....77  
 REFUSED .....99

IF VAX\_CONF11A NE 1 GO TO VAX\_CONF13; ELSE IF C5/TIS\_C5 EQ 1 AND NIS/TEEN COMPLETE GO TO ACM\_SEX1; ELSE GO TO ACM\_AGE

VAX\_CONF13 Many things might make it difficult to get a COVID vaccine. Please tell me if anything I list makes it difficult for you.

CONTINUE .....1

VAX\_CONF13A Getting an appointment online.

Has this made it difficult for you to get a COVID vaccine?

YES .....1  
 NO .....2  
 DON'T KNOW .....77  
 REFUSED .....99

VAX\_CONF13D

Not knowing where to get a vaccine.

READ IF NECESSARY:

Has this made it difficult for you to get a COVID vaccine?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

VAX\_CONF13E

Hard to get to vaccination sites.

READ IF NECESSARY:

Has this made it difficult for you to get a COVID vaccine?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

VAX\_CONF13F

Vaccination sites aren't open at convenient times.

READ IF NECESSARY:

Has this made it difficult for you to get a COVID vaccine?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

VAX\_CONF13G

Not knowing whether you were eligible for an updated vaccine or not.

READ IF NECESSARY:

Has this made it difficult for you to get a COVID vaccine?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

IF VAX2 IN (2,77,99) GO TO VAX\_CONF13I; ELSE GO TO VAX\_CONF13H

VAX\_CONF13H

Having a reaction to a previous dose of the COVID vaccine.

READ IF NECESSARY:

Has this made it difficult for you to get a COVID vaccine?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

VAX\_CONF13I

Cost, including any payments to the clinic, the cost of getting there, or the cost of taking time away from work.

READ IF NECESSARY:

Has this made it difficult for you to get a COVID vaccine?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

IF C5/TIS\_C5 EQ 1 AND NIS/TEEN COMPLETE GO TO ACM\_SEX1; ELSE GO TO ACM\_AGE

ACM\_AGE

What is your current age?

ENTER 999 FOR REFUSED

\_\_\_\_\_ Age

ACM\_SEX1

What sex were you assigned at birth, on your original birth certificate, male or female?

- MALE .....1
- FEMALE .....2
- DON'T KNOW .....77
- REFUSED .....99

ACM\_TRANS1

How do you currently describe yourself: male, female, transgender, or by a different term?

- MALE .....1
- FEMALE .....2
- TRANSGENDER .....3
- A DIFFERENT TERM .....4
- DON'T KNOW .....77
- REFUSED .....99

ACM\_Q93 What best describes your sexual orientation? Is it Heterosexual or straight; Lesbian or gay; Bisexual; or Something else?

- HETEROSEXUAL/STRAIGHT .....1
- LESBIAN OR GAY .....2
- BISEXUAL .....3
- SOMETHING ELSE .....4
- DON'T KNOW .....77
- REFUSED .....99

IF ACIP4 IN (12), GO TO ACM\_BIRTH; IF (ACM\_AGE <50, 777, 999) AND ACM\_SEX EQ 2 GO TO ACM\_PREG1; ELSE IF C5/TIS\_C5/LF\_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS\_C9/Z\_Q02BZ EQ 2 SKIP TO ACM\_RACE\_AAB; ELSE IF C5/TIS\_C5/LF\_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS\_C9/Z\_Q02BZ NE 2 SKIP TO ACM\_MEDEQ; ELSE GO TO ACM\_HISP

ACM\_PREG1 Are you currently pregnant?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

ACM\_BIRTH

Do you have a child less than [MONTH-3]-months old?

READ IF NECESSARY: Was the child born since April of 2024?

- YES .....1
- NO .....2

IF ACIP4 NOT IN (12) AND ACM\_PREG1 NE 1 THEN DO:  
 IF  
 C5/TIS\_C5/LF\_C1Q02  
 EQ 1 AND  
 NIS/TEEN/CIM  
 COMPLETE AND  
 C9/TIS\_C9/Z\_Q02BZ  
 EQ 2 SKIP TO  
 ACM\_RACE\_AAB;  
 ELSE IF  
 C5/TIS\_C5/LF\_C1Q02  
 EQ 1 AND  
 NIS/TEEN/CIM  
 COMPLETE AND  
 C9/TIS\_C9/Z\_Q02BZ  
 NE 2 SKIP TO  
 ACM\_MEDEQ; ELSE  
 GO TO ACM\_HISP; END;  
 ELSE GO TO ACM\_RSVC1  
 IF ACIP4 NOT IN (12) AND  
 ACM\_PREG1 NE 1 THEN DO:

- DON'T KNOW .....77



IF  
 C5/TIS\_C5/LF\_C1Q02  
 EQ 1 AND  
 NIS/TEEN/CIM  
 COMPLETE AND  
 C9/TIS\_C9/Z\_Q02BZ  
 EQ 2 SKIP TO  
 ACM\_RACE\_AAB;  
 ELSE IF  
 C5/TIS\_C5/LF\_C1Q02  
 EQ 1 AND  
 NIS/TEEN/CIM  
 COMPLETE AND  
 C9/TIS\_C9/Z\_Q02BZ  
 NE 2 SKIP TO  
 ACM\_MEDEQ; ELSE  
 GO TO ACM\_HISP;  
 END; ELSE GO TO  
 ACM\_RSVC1

REFUSED .....99 IF ACIP4 NOT IN (12) AND  
 ACM\_PREG1 NE 1 THEN DO:  
 IF  
 C5/TIS\_C5/LF\_C1Q02  
 EQ 1 AND  
 NIS/TEEN/CIM  
 COMPLETE AND  
 C9/TIS\_C9/Z\_Q02BZ  
 EQ 2 SKIP TO  
 ACM\_RACE\_AAB;  
 ELSE IF  
 C5/TIS\_C5/LF\_C1Q02  
 EQ 1 AND  
 NIS/TEEN/CIM  
 COMPLETE AND  
 C9/TIS\_C9/Z\_Q02BZ  
 NE 2 SKIP TO  
 ACM\_MEDEQ; ELSE  
 GO TO ACM\_HISP;  
 END; ELSE GO TO  
 ACM\_RSVC1

ACM\_BIRTH2

In what month was that child born?

ENTER MONTH (1-12) \_\_\_\_\_ GO TO ACM\_RSVC1

DON'T KNOW.....77

REFUSED.....99

ACM\_BIRTHO

I understand that you may be uncomfortable, the only reason we need your child’s birth month is to know which questions to ask.

Is that child less than [MONTH-9]-months old?

- YES .....1
- NO .....2
- DON’T KNOW .....77
- REFUSED .....99

ACM\_RSVC1 RSV is a respiratory virus that can cause serious illness in infants and older adults. Are you aware of the CDC recommendation for infants under the age of 8 months to get a shot to help protect against RSV?

- YES .....1 IF ACM\_PREG1 EQ 1 OR  
ACIP4 IN (12) AND  
ACM\_BIRTH NE 1 GO TO  
ACM\_NRSVP; ELSE GO TO  
ACM\_NRSVC
- NO .....2 IF ACM\_PREG1 EQ 1 OR  
ACIP4 IN (12) AND  
ACM\_BIRTH NE 1 GO TO  
ACM\_NRSVP; ELSE GO TO  
ACM\_NRSVC
- DON’T KNOW .....77 IF ACM\_PREG1 EQ 1 OR  
ACIP4 IN (12) AND  
ACM\_BIRTH NE 1 GO TO  
ACM\_NRSVP; ELSE GO TO  
ACM\_NRSVC
- REFUSED .....99 IF ACM\_PREG1 EQ 1 OR  
ACIP4 IN (12) AND  
ACM\_BIRTH NE 1 GO TO  
ACM\_NRSVP; ELSE GO TO  
ACM\_NRSVC

ACM\_NRSVC Has your baby received an RSV shot?

INTERVIEWER NOTE: THIS IS ALSO KNOWN AS BEYFORTUS (BAY-FOR-TIS) OR NIRSEVIMAB (NURS-EV-EH-MAB), OR A NEW MONOCLONAL ANTIBODY.

|                  |    |  |
|------------------|----|--|
| YES .....        | 1  | IF ACM_BIRTH2 GE 10 OR<br>ACM_BIRTHO EQ 1 THEN<br>GO TO ACM_NRSVP; ELSE<br>GO TO ACM_RSVC3 |
| NO .....         | 2  | IF ACM_BIRTH2 GE 10 OR<br>ACM_BIRTHO EQ 1 THEN<br>GO TO ACM_NRSVP; ELSE<br>GO TO ACM_RSVC3 |
| DON'T KNOW ..... | 77 | IF ACM_BIRTH2 GE 10 OR<br>ACM_BIRTHO EQ 1 THEN<br>GO TO ACM_NRSVP; ELSE<br>GO TO ACM_RSVC3 |
| REFUSED .....    | 99 | IF ACM_BIRTH2 GE 10 OR<br>ACM_BIRTHO EQ 1 THEN<br>GO TO ACM_NRSVP; ELSE<br>GO TO ACM_RSVC3 |

ACM\_NRSVP A person can get an RSV vaccine when they are pregnant to help protect the baby from RSV.

[IF VAX\_RSVP1 EQ 1 THEN DISPLAY 'You previously said you received an RSV vaccine. Did you receive'; ELSE [IF ACM\_PREG1 NE 1 OR ACIP4 NOT IN (12)] THEN DISPLAY: 'Did you receive'; ELSE DISPLAY: 'Have you received'] an RSV vaccine while pregnant]?

YES.....1 IF  
C5/TIS\_C5/LF\_C1Q02  
EQ 1 AND  
NIS/TEEN/CIM  
COMPLETE AND  
C9/TIS\_C9/Z\_Q02BZ  
EQ 2 SKIP TO  
ACM\_RACE\_AAB;  
ELSE IF  
C5/TIS\_C5/LF\_C1Q02  
EQ 1 AND  
NIS/TEEN/CIM  
COMPLETE AND  
C9/TIS\_C9/Z\_Q02BZ  
NE 2 SKIP TO  
ACM\_MEDEQ; ELSE  
GO TO ACM\_HISP

NO.....2 IF ACM\_NRSVC EQ 1  
THEN DO: IF  
C5/TIS\_C5/LF\_C1Q02  
EQ 1 AND  
NIS/TEEN/CIM  
COMPLETE AND  
C9/TIS\_C9/Z\_Q02BZ  
EQ 2 SKIP TO  
ACM\_RACE\_AAB;  
ELSE IF  
C5/TIS\_C5/LF\_C1Q02  
EQ 1 AND  
NIS/TEEN/CIM  
COMPLETE AND  
C9/TIS\_C9/Z\_Q02BZ  
NE 2 SKIP TO  
ACM\_MEDEQ; ELSE  
GO TO ACM\_HISP;  
END; ELSE GO TO  
ACM\_RSVC3

DON'T KNOW.....77 IF ACM\_NRSVC EQ 1  
THEN DO: IF  
C5/TIS\_C5/LF\_C1Q02  
EQ 1 AND  
NIS/TEEN/CIM  
COMPLETE AND  
C9/TIS\_C9/Z\_Q02BZ  
EQ 2 SKIP TO

REFUSED.....99

```

ACM_RACE_AAB;
ELSE IF
C5/TIS_C5/LF_C1Q02
EQ 1 AND
NIS/TEEN/CIM
COMPLETE AND
C9/TIS_C9/Z_Q02BZ
NE 2 SKIP TO
ACM_MEDEQ; ELSE
GO TO ACM_HISP;
END; ELSE GO TO
ACM_RSVC3
IF ACM_NRSVC EQ 1
THEN DO: IF
C5/TIS_C5/LF_C1Q02
EQ 1 AND
NIS/TEEN/CIM
COMPLETE AND
C9/TIS_C9/Z_Q02BZ
EQ 2 SKIP TO
ACM_RACE_AAB;
ELSE IF
C5/TIS_C5/LF_C1Q02
EQ 1 AND
NIS/TEEN/CIM
COMPLETE AND
C9/TIS_C9/Z_Q02BZ
NE 2 SKIP TO
ACM_MEDEQ; ELSE
GO TO ACM_HISP;
END; ELSE GO TO
ACM_RSVC3

```

ACM\_RSVC3 How likely are you to get your baby a shot to help protect against RSV? Would you say you would definitely get it, probably get it, probably not get it, definitely not get, or are not sure?

|                                |   |  |
|--------------------------------|---|--|
| DEFINITELY GET A SHOT .....    | 1 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2<br>SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP |
| PROBABLY GET A SHOT .....      | 2 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2<br>SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP |
| PROBABLY NOT GET A SHOT .....  | 3 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2<br>SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP |
| DEFINITELY NOT GET A SHOT..... | 4 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2<br>SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP |
| NOT SURE .....                 | 5 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2   |

|                  |    |  |
|------------------|----|--|
|                  |    | SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP   |
| DON'T KNOW ..... | 77 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2<br>SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP |
| REFUSED .....    | 99 | IF C5/TIS_C5/LF_C1Q02 EQ 1<br>AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ EQ 2<br>SKIP TO ACM_RACE_AAB;<br>ELSE C5/TIS_C5/LF_C1Q02<br>EQ 1 AND NIS/TEEN/CIM<br>COMPLETE AND<br>C9/TIS_C9/Z_Q02BZ NE 2<br>SKIP TO ACM_MEDEQ;<br>ELSE GO TO ACM_HISP |

|                  |                                       |                |
|------------------|---------------------------------------|----------------|
| ACM_HISP         | Are you of Hispanic or Latino origin? |                |
| YES .....        | 1                                     |                |
| NO .....         | 2                                     | GO TO ACM_RACE |
| DON'T KNOW ..... | 77                                    | GO TO ACM_RACE |
| REFUSED .....    | 99                                    | GO TO ACM_RACE |

ACM\_HISP\_Y Are you Mexican, Mexican-American, Chicano/a, Puerto Rican, Cuban, Central American, South American, (IF USVI THEN DISPLAY: (Dominican)), or of other Hispanic, Latino/a, or Spanish origin?

SELECT ALL THAT APPLY

|  |    |                |
|--|----|----------------|
| MEXICAN/MEXICANO, MEXICAN AMERICAN,<br>CHINCANO/A .....        | 1  | GO TO ACM_RACE |
| PUERTO RICAN .....   | 2  | GO TO ACM_RACE |
| CUBAN .....  | 3  | GO TO ACM_RACE |
| CENTRAL AMERICAN .....   | 4  | GO TO ACM_RACE |
| SOUTH AMERICAN .....   | 5  | GO TO ACM_RACE |
| OTHER HISPANIC, LATINO/A,<br>OR SPANISH ORIGIN (SPECIFY) ..... | 10 |                |
| DOMINICAN [SHOW ONLY IF USVI] .....                            | 11 | GO TO ACM_RACE |
| DON'T KNOW .....   | 77 | GO TO ACM_RACE |
| REFUSED .....  | 99 | GO TO ACM_RACE |

ACM\_HISP\_Y\_O

ENTER OTHER SPECIFY: \_\_\_\_\_

ACM\_RACE Now, I am going to read a list of categories. Please choose one or more of the following categories to describe your race. Are you White, Black or African American, American Indian, Alaska Native, Asian, Native Hawaiian or other Pacific Islander?

SELECT ALL THAT APPLY

|                                 |    |  |
|---------------------------------|----|--|
| WHITE .....                     | 1  | GO TO ACM_MEDEQ  |
| BLACK OR AFRICAN AMERICAN ..... | 2  | GO TO<br>ACM_RACE_AAB  |
| AMERICAN INDIAN .....           | 3  | GO TO ACM_MEDEQ  |
| ALASKA NATIVE .....             | 4  | GO TO ACM_MEDEQ  |
| ASIAN .....                     | 5  | IF GUAM THEN DO:<br>GO TO<br>ACM_RACEAAPI;<br>ELSE IF NOT GUAM<br>DO: GO TO<br>ACM_RACE_AS |
| NATIVE HAWAIIAN .....           | 6  | GO TO ACM_MEDEQ  |
| PACIFIC ISLANDER .....          | 7  | IF GUAM THEN DO:<br>GO TO<br>ACM_RACEAAPI;<br>ELSE IF NOT GUAM<br>DO: GO TO<br>ACM_RACE_PI |
| OTHER .....                     | 8  |  |
| DON'T KNOW .....                | 77 | GO TO ACM_MEDEQ  |
| REFUSED .....                   | 99 | GO TO ACM_MEDEQ  |



ACM\_RACE\_OS  
ENTER OTHER SPECIFY: \_\_\_\_\_ GO TO ACM\_MEDEQ

ACM\_RACE\_AS  
Are you Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or other Asian?

READ IF NECESSARY: Please choose the one category that describes you best.

- |                    |    |                 |
|--------------------|----|-----------------|
| ASIAN INDIAN ..... | 1  | GO TO ACM_MEDEQ |
| CHINESE .....      | 2  | GO TO ACM_MEDEQ |
| FILIPINO .....     | 3  | GO TO ACM_MEDEQ |
| JAPANESE .....     | 4  | GO TO ACM_MEDEQ |
| KOREAN .....       | 5  | GO TO ACM_MEDEQ |
| VIETNAMESE .....   | 6  | GO TO ACM_MEDEQ |
| OTHER .....        | 7  |                 |
| DON'T KNOW .....   | 77 | GO TO ACM_MEDEQ |
| REFUSED .....      | 99 | GO TO ACM_MEDEQ |

ACM\_RACE\_ASO  
ENTER OTHER SPECIFY: \_\_\_\_\_ GO TO ACM\_MEDEQ

ACM\_RACE\_PI  
Are you Guamanian or Chamorro, Samoan, or other Pacific Islander?

READ IF NECESSARY: Please choose the one category that describes you best.

- |                        |    |                 |
|------------------------|----|-----------------|
| CHAMORRO/GUAMIAN ..... | 1  | GO TO ACM_MEDEQ |
| SAMOAN .....           | 2  | GO TO ACM_MEDEQ |
| OTHER .....            | 3  |                 |
| DON'T KNOW .....       | 77 | GO TO ACM_MEDEQ |
| REFUSED .....          | 99 | GO TO ACM_MEDEQ |

ACM\_RACE\_PIO  
ENTER OTHER SPECIFY: \_\_\_\_\_ GO TO ACM\_MEDEQ

ACM\_RACEAAPI

Are you Chamorro, Filipino, Chuukese, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: Please choose the one category that describes you best.

|                   |    |                 |
|-------------------|----|-----------------|
| CHAMORRO .....    | 1  | GO TO ACM_MEDEQ |
| FILIPINO .....    | 2  | GO TO ACM_MEDEQ |
| CHUUKESE .....    | 3  | GO TO ACM_MEDEQ |
| POHNPEIAN .....   | 4  | GO TO ACM_MEDEQ |
| PALAUAN .....     | 5  | GO TO ACM_MEDEQ |
| YAPESE .....      | 6  | GO TO ACM_MEDEQ |
| KOSRAEAN .....    | 7  | GO TO ACM_MEDEQ |
| MARSHALLESE ..... | 8  | GO TO ACM_MEDEQ |
| JAPANESE .....    | 9  | GO TO ACM_MEDEQ |
| KOREAN .....      | 10 | GO TO ACM_MEDEQ |
| CHINESE .....     | 11 | GO TO ACM_MEDEQ |
| VIETNAMESE .....  | 12 | GO TO ACM_MEDEQ |
| THAI .....        | 13 | GO TO ACM_MEDEQ |
| OTHER .....       | 14 |                 |
| DON'T KNOW .....  | 77 | GO TO ACM_MEDEQ |
| REFUSED .....     | 99 | GO TO ACM_MEDEQ |

ACMRACEAAPIO

ENTER OTHER SPECIFY: \_\_\_\_\_

GO TO ACM\_MEDEQ

ACM\_RACE\_AAB

[IF C5/TIS\_C5/LF\_C1Q02 EQ 1 and C9/TIS\_C9/Z\_Q02BZ EQ 2 THEN DISPLAY: "Previously, you indicated you were Black or African American." ELSE JUST DISPLAY:] Are you African American, Jamaican, Haitian, Nigerian, Ethiopian, Somalian, or other?

READ IF NECESSARY: Please choose the one category that describes you best.

|                        |    |                 |
|------------------------|----|-----------------|
| AFRICAN AMERICAN ..... | 1  | GO TO ACM_MEDEQ |
| JAMAICAN .....         | 2  | GO TO ACM_MEDEQ |
| HAITIAN .....          | 3  | GO TO ACM_MEDEQ |
| NIGERIAN .....         | 4  | GO TO ACM_MEDEQ |
| ETHIOPIAN .....        | 5  | GO TO ACM_MEDEQ |
| SOMALI .....           | 6  | GO TO ACM_MEDEQ |
| OTHER .....            | 7  |                 |
| DON'T KNOW .....       | 77 | GO TO ACM_MEDEQ |
| REFUSED .....          | 99 | GO TO ACM_MEDEQ |

ACM\_RACEAABO

ENTER OTHER SPECIFY: \_\_\_\_\_

ACM\_MEDEQ

When seeking health care in the last 2 years, do you feel your experiences were worse than, the same as, or better than people of other races or ethnicities?

- WORSE THAN OTHER RACES OR ETHNICITIES .....1
- THE SAME AS OTHER RACES OR ETHNICITIES .....2
- BETTER THAN OTHER RACES OR ETHNICITIES .....3
- DON'T KNOW .....77
- REFUSED .....99

IF MOTHER WAS RESPONDENT IN NIS/TEEN/CIM SURVEY SKIP TO ACM\_INSURE; ELSE GO TO ACM\_EDUC

ACM\_EDUC What is the highest grade or year of school you have completed?

- 8TH GRADE OR LESS .....1
- 9TH-12TH GRADE NO DIPLOMA .....2
- HIGH SCHOOL GRADUATE OR GED COMPLETED.....3
- COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM .....4
- SOME COLLEGE CREDIT BUT NO DEGREE .....5
- ASSOCIATE DEGREE (AA, AS) .....6
- BACHELOR'S DEGREE (BA, BS, AB) .....7
- MASTER'S DEGREE (MA, MS, MSW, MBA .....8
- DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD) .....9
- DON'T KNOW .....77
- REFUSED .....99

ACM\_INSURE

Do you have any kind of health care coverage? This includes health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service?

- YES .....1
- NO .....2
- DON'T KNOW .....77
- REFUSED .....99

IF NIS/TEEN/CIM INCOME QUESTION ANSWERED, SKIP TO ACM\_BORN; ELSE GO TO ACM\_INCOME

ACM\_INCOME

Please think about your total combined family income during (FILL LAST CALENDAR YEAR) for all members of the family. Include money for jobs, social security, retirement income, unemployment payments, public assistance, and so forth. Also include income from interest, dividends, net income from business, farm, rent, or any other money income received. Can you tell me that amount before taxes?

ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

|                  |                       |
|------------------|-----------------------|
| _____            | GO TO<br>ACM_INC_CONF |
| DON'T KNOW ..... | 77                    |
| REFUSED .....    | 99                    |

ACM\_INC\_RANG

We understand that people might not feel comfortable giving out their exact income. I would like to read you some income ranges, and let you select the category which best describes your total combined family income from all sources for all members of your household during (FILL LAST CALENDAR YEAR), before taxes?

READ LIST UNTIL R STOPS YOU AT THE CORRECT INCOME GROUP

|                          |    |
|--------------------------|----|
| Less than \$5,000 .....  | 1  |
| \$5,001-\$10,000 .....   | 2  |
| \$10,001-\$20,000 .....  | 3  |
| \$20,001-\$40,000 .....  | 4  |
| \$40,001-\$60,000 .....  | 5  |
| \$60,001-\$75,000 .....  | 6  |
| \$75,001-\$150,000 ..... | 7  |
| \$150,001 or more .....  | 8  |
| DON'T KNOW .....         | 77 |
| REFUSED .....            | 99 |

IF NIS/TEEN/CIM SURVEY COMPLETE, SKIP TO ACM\_BORN; ELSE IF USVI, GO TO ACM\_ISLAND; IF GUAM, GO TO ACM\_C19VIL; ELSE GO TO ACM\_C19A

ACM\_INC\_CONF

Just to confirm that I entered the number correctly, the total combined family income was [FILL ACM\_Q91]?

YES .....1

IF NIS/TEEN/CIM SURVEY COMPLETE, SKIP TO ACM\_BORN; ELSE IF USVI, GO TO ACM\_ISLAND; IF GUAM, GO TO ACM\_C19VIL; ELSE GO TO ACM\_C19A GO TO ACM\_INCOME GO TO ACM\_INCOME GO TO ACM\_INCOME

NO .....2

DON'T KNOW .....77

REFUSED .....99

ACM\_ISLAND

On what island do you live?

SAINT CROIX .....1

GO TO ACM\_BORN

SAINT THOMAS .....2

GO TO ACM\_BORN

SAINT JOHN .....3

GO TO ACM\_BORN

WATER ISLAND .....4

GO TO ACM\_BORN

NOT IN USVI .....5

GO TO ACM\_C19A

DON'T KNOW .....77

GO TO ACM\_BORN

REFUSED .....99

GO TO ACM\_BORN

ACM\_C19VIL

In which village do you live?

|                           |    |
|---------------------------|----|
| AGANA HEIGHTS .....       | 1  |
| AGAT .....                | 2  |
| ASAN .....                | 3  |
| BARRIGADA .....           | 4  |
| CHALAN PAGO .....         | 5  |
| DEDEDO .....              | 6  |
| HAGATNA/AGANA .....       | 7  |
| INARAJAN .....            | 8  |
| MAINA .....               | 9  |
| MAITE .....               | 10 |
| MANGILAO .....            | 11 |
| MERIZO .....              | 12 |
| MONGMONG .....            | 13 |
| ORDOT .....               | 14 |
| PITI .....                | 15 |
| SANTA RITA .....          | 16 |
| SINAJANA .....            | 17 |
| TALOFOFO .....            | 18 |
| TAMUNING-TUMON .....      | 19 |
| TOTO .....                | 20 |
| UMATAC .....              | 21 |
| YIGO .....                | 22 |
| YONA .....                | 23 |
| DON'T KNOW .....          | 77 |
| DO NOT LIVE IN GUAM ..... | 98 |
| REFUSED .....             | 99 |

ACM\_C19A What is your zip code?

\_\_\_\_\_

IF GUAM, AND  
ACM\_C19VIL NE 98,  
GO TO ACM\_BORN,  
ELSE IF PUERTO  
RICO GO TO  
ACM\_C19PR (DOES  
NOT GO THROUGH  
LOOKUP TABLE)

DON'T KNOW .....77777

IF ACM\_C19A= 77777  
or 99999 or ZIP Code  
not in the LOOK-UP  
table GO TO  
ACM\_C19 / ELSE GO  
TO ACM\_C19\_CONF  
IF ACM\_C19A= 77777  
or 99999 or ZIP Code  
not in the LOOK-UP  
table GO TO  
ACM\_C19 / ELSE GO  
TO ACM\_C19\_CONF

REFUSED .....99999

ELSE IF a proper zip code entered, then Fill CITY, COUNTY AND STATE from the look-up table.

ACM\_C19 In what city, county and state do you live?

IF CITY OR COUNTY IS DON'T KNOW, ENTER "DK"  
IF CITY OR COUNTY IS REFUSED, ENTER "REF"

IF LOCATION IS OUT OF THE COUNTRY, SELECT 'FC – FOREIGN COUNTRY'

\_\_\_\_\_

ACM\_C19\_CONF

To confirm, you live in [CITY], [COUNTY], [STATE]. Is that correct?

YES .....1  
NO .....2

GO TO ACM\_BORN  
GO TO ACM\_C19

ACM\_C19\_ZIPC

To confirm, I have your zip code as [FILL]. Is that correct?

YES .....1  
NO .....2  
DON'T KNOW .....77  
REFUSED .....99

GO TO ACM\_BORN  
GO TO ACM\_BORN  
GO TO ACM\_BORN

ACM\_C19\_NEWZ

What is your zip code?

ENTER ZIP CODE: \_\_\_\_\_

GO TO ACM\_BORN

ACM\_C19PR In what city and state do you live?

IF RESPONDENT DOES NOT LIVE IN PUERTO RICO, SELECT NOT IN PUERTO RICO IN THE DROP DOWN MENU

|                               |      |
|-------------------------------|------|
| [CITIES IN PUERTO RICO] ..... | 1-78 |
| NOT IN PUERTO RICO .....      | 98   |
| DON'T KNOW .....              | 88   |
| REFUSED .....                 | 99   |

|                |
|----------------|
| GO TO ACM_C19  |
| GO TO ACM_BORN |
| GO TO ACM_BORN |

ACM\_C19PR\_ST

ENTER STATE: \_\_\_\_\_

ACM\_BORN Were you born in the United States?

|                  |    |
|------------------|----|
| YES .....        | 1  |
| NO .....         | 2  |
| DON'T KNOW ..... | 77 |
| REFUSED .....    | 99 |

IF ACM\_BORN IN (1,77,99), THEN DO: IF NIS/TEEN/CIM SURVEY ANSWERED, SKIP TO ACM\_LANG; ELSE GO TO ACM\_LTNH

ACM\_FCBORN

In which country were you born?

ENTER COUNTRY: \_\_\_\_\_

IF NIS/TEEN/CIM SURVEY ANSWERED, SKIP TO ACM\_LANG; ELSE IF ACM\_AGE>=60 GO TO ACM\_LTNH; ELSE GO TO ACM\_C1

ACM\_LTNH Do you currently live in a nursing home?

|                  |    |
|------------------|----|
| YES .....        | 1  |
| NO .....         | 2  |
| DON'T KNOW ..... | 77 |
| REFUSED .....    | 99 |



ACM\_C1 Now I have some questions about your entire household.  
 Including the adults and all the children, how many people live in this household?  
 ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED  
 INTERVIEWER HELP TEXT: IF R LIVES IN A GROUP FACILITY, PROBE FOR NUMBER  
 OF PEOPLE THAT LIVE IN THEIR DIRECT LIVING SPACE.  
 NUMBER OF PEOPLE: \_\_\_\_\_

ACM\_LANG Do you speak a language other than English at home?  
 YES .....1  
 NO .....2  
 DON'T KNOW .....77  
 REFUSED .....99

IF ACM\_LANG IN (2,77,99), THEN DO: IF NIS/TEEN/CIM SURVEY ANSWERED, SKIP  
 TO K\_D16; ELSE GO TO ACM\_LL

ACM\_HHLANG  
 What is this language?

SPANISH .....1  
 MANDARIN .....2  
 ARABIC .....3  
 VIETNAMESE .....4  
 RUSSIAN .....5  
 PORTUGUESE .....6  
 KOREAN .....7  
 FRENCH .....8  
 CANTONESE .....9  
 HAITIAN CREOLE .....10  
 NEPALI .....11  
 OTHER .....88  
 DON'T KNOW .....77  
 REFUSED .....99

IF ACM\_HHLANG IN (1,2,3,4,5,6,7,8,9,10,11,77,99), THEN DO: IF NIS/TEEN/FLU SURVEY  
 ANSWERED, SKIP TO K\_D16; ELSE GO TO ACM\_LL

ACM\_HHLANGO  
 ENTER OTHER SPECIFY: \_\_\_\_\_

IF NIS/TEEN/FLU SURVEY ANSWERED, SKIP TO K\_D16; ELSE GO TO ACM\_LL

ACM\_LL

Do you have a landline telephone in your household?

INTERVIEWER NOTE, READ AS NECESSARY: Please do not include:

- Modem-only lines,
- Fax-only lines,
- Lines used just for home security systems,
- Beepers,
- Skype,
- Pagers, or
- Cell phones.

Please include Voice Over I.P. or VOIP numbers.

|                  |    |
|------------------|----|
| YES .....        | 1  |
| NO .....         | 2  |
| DON'T KNOW ..... | 77 |
| REFUSED .....    | 99 |

K\_D16

Those are all the questions I have. You may be re-contacted in the future to participate in related surveys. If you are contacted to participate in future surveys, you have the right to refuse. I'd like to thank you again on behalf of the [IF GUAM, DISPLAY: "Department of Public Health and Social Services and the"] [IF PUERTO RICO, DISPLAY "Puerto Rico Department of Health and the"] Centers for Disease Control and Prevention for the time and effort you've spent answering these questions. If you would like more information about the National Immunization Survey, please call 1-877-220-4805.

EXIT SURVEY