NIS Adult COVID Module (NIS-ACM) Hard Copy Questionnaire Q3/2024

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)

NORC 1

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.
	CONTINUE1
	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
ADULT_S3_LA	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

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CONTINUE1

networks for cyber threats if the information sent through the government network triggers a

cyber threat indicator.

ADULT_TIMI	E The remainder of the survey will take about 8 minutes.
	CONTINUE1
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
VAX_FLUC	That was [FILL MONTH] of [FILL YEAR], correct?
	YES
VAXFL_WK_	CHK IF VAX_FLUM= THE CURRENT MONTH GO TO FLVAX_WEEK; ELSE GO TO FLVAX_PL
FLVAX_WEE	
	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

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]	GO TO FLU REC
	HEALTH DEPARTMENT2	GO TO FLU REC
	CLINIC OR HEALTH CENTER3	GO TO FLU REC
	HOSPITAL4	GO TO FLU REC
	OTHER MEDICALLY-RELATED PLACE5	GO TO FLU REC
	MASS VACCINATION SITE6	GO TO FLU REC
	PHARMACY OR DRUG STORE7	GO TO FLU REC
	WORKPLACE8	GO TO FLU REC
	HIGH SCHOOL/COLLEGE/UNIVERSITY9	GO TO FLU REC
	OTHER NONMEDICALLY-RELATED PLACE10	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 KNOW77	
	REFUSED99	
		_
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 g	et the vaccine, probably not ge
	the vaccine, definitely not get the vaccine, or are not sure?	
	DEFINITELY GET A VACCINE1	
	PROBABLY GET A VACCINE2	
	PROBABLY NOT GET A VACCINE3	
	DEFINITELY NOT GET A VACCINE4	
	NOT SURE5	
	DON'T KNOW	
	REFUSED99	
FLU REC	Has a doctor, nurse, or other health professional recommended the	nat you get a flu vaccine since
_	July 1, 2024?	, ,
	•	
	YES1	
	NO2	
	DON'T KNOW77	
	DEFLICED 00	

VAX_RSV1	There is a vaccine that became available last fall, that is in the Fall of 2023, that helps prevent respiratory virus called RSV. Have you received this RSV vaccine?	
	INTERVIEWER NOTE: THIS VACCINE IS ALSO KNOWN AS RSVPREF3 (AREXVY) OR RSVPREFF (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]	

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]"?

YES1	GO RSVAX_PL
NO2	GO RSVAX PL
DON'T KNOW77	GO RSVAX PL
REFUSED99	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)?	
	YES1	
	NO	
	DON'T KNOW	
	REFUSED	
	TET GSED	
RSVAX_PL	At what kind of place did you get your RSV vaccination?	
	INTERVIEWER NOTE: IF A RESPONDENT SAYS VACCIN	
	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 DEPARTMENT2	GO TO RSV_REC
	CLINIC OR HEALTH CENTER3	GO TO RSV_REC
	HOSPITAL4	GO TO RSV_REC
	OTHER MEDICALLY-RELATED PLACE5	GO TO RSV_REC
	MASS VACCINATION SITE6	GO TO RSV_REC
	PHARMACY OR DRUG STORE7	GO TO RSV_REC
	WORKPLACE8	GO TO RSV_REC
	HIGH SCHOOL/COLLEGE/UNIVERSITY9	GO TO RSV_REC
	OTHER NONMEDICALLY-RELATED PLACE10	_
	MALL OUTREACH [DISPLAY ONLY IF GUAM]11	
	VILLAGE OUTREACH [DISPLAY ONLY IF GUAM]12	
	DON'T KNOW77	_
	REFUSED99	GO TO RSV_REC
VAX RSV3	How likely are you to get the RSV vaccine when you are eligible	e? Would you say you would
_	definitely get the vaccine, probably get the vaccine, probably no	t get the vaccine, definitely not
	get the vaccine, or are not sure?	
	DEFINITELY GET A VACCINE1	
	PROBABLY GET A VACCINE	
	PROBABLY NOT GET A VACCINE3	
	DEFINITELY NOT GET A VACCINE4	
	NOT SURE	
	DON'T KNOW	
	REFUSED	
	KLI 00LD	

RSV_REC	Has a doctor, nurse, or other health professional recommended that you get an RSV vaccine since Fall 2023?	
	YES1	
	NO	
	DON'T KNOW	
	REFUSED99	
VAX2	Have you received at least one dose of a COVID vaccine?	
	YES1	
	NO	
	DON'T KNOW	
	REFUSED99 GO TO VAX6	
VAX2A	Have you received a COVID vaccine after August 22, 2024?	
	YES1	
	NO	
	DON'T KNOW77 GO TO VAX6	
	REFUSED	
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 8/24, DISPLAY: DATE MUST BE ON OR AFTER 8/2024	
	MONTH/[YEAR=FILL]	
	DON'T KNOW	
	REFUSED	
VAXCV WK	CHK	
	IF VAXCOV_M=THE CURRENT MONTH GO TO CVVAX_WEEK; ELSE GO TO VAX_PL	
CVVAX_WEE		
	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]"?	
	YES1	
	NO2	
	DON'T KNOW77	
	REFUSED99	

VAX_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 VAX CONF7A
	HEALTH DEPARTMENT2	GO TO VAX CONF7A
	CLINIC OR HEALTH CENTER3	GO TO VAX CONF7A
	HOSPITAL4	GO TO VAX CONF7A
	OTHER MEDICALLY-RELATED PLACE5	GO TO VAX CONF7A
	MASS VACCINATION SITE6	GO TO VAX_CONF7A
	PHARMACY OR DRUG STORE7	GO TO VAX_CONF7A
	WORKPLACE8	GO TO VAX_CONF7A
	HIGH SCHOOL/COLLEGE/UNIVERSITY9	GO TO VAX_CONF7A
	OTHER NONMEDICALLY-RELATED PLACE10	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 KNOW77	GO TO VAX_CONF7A
	REFUSED99	GO TO VAX_CONF7A
VAX6 How likely are you to get [IF VAX2 EQ 1 then display: 'an updated'; ELSE of vaccine? Would you say you would definitely get [IF VAX2 EQ 1 then display ELSE display: 'a'] vaccine, probably get [IF VAX2 EQ 1 then display: 'an updated'; a'] vaccine, probably not get [IF VAX2 EQ 1 then display: 'an updated'; EI vaccine, or are not sure?		1 then display: 'an updated'; isplay: 'an updated'; ELSE lay: 'an updated'; ELSE display:
	DEFINITELY GET A VACCINE	
	PROBABLY GET A VACCINE2 PROBABLY NOT GET A VACCINE3	
	DEFINITELY NOT GET A VACCINE4	
	NOT SURE5	
	DON'T KNOW	
	REFUSED99	
VAV COM	27 A	
VAX_CONF	Has a doctor, nurse, or other health professional recommended t	hat you get a COVID vaccine
	since July 1, 2024?	nat you get a COVID vaccine
	YES1	
	NO2	
	DON'T KNOW77	

REFUSED99

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 CONCERNED1
	A LITTLE CONCERNED
	MODERATELY CONCERNED
	VERY CONCERNED
	DON'T KNOW
	REFUSED99
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
	SOMEWHAT SAFE2
	VERY SAFE3
	COMPLETELY SAFE4
	DON'T KNOW
	REFUSED99
	KEP USED99
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 IMPORTANT1
	A LITTLE IMPORTANT
	SOMEWHAT IMPORTANT
	VERY IMPORTANT4
	DON'T KNOW
	REFUSED99
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?
	NOT AT ALL CONCERNED1
	A LITTLE CONCERNED
	MODERATELY CONCERNED
	VERY CONCERNED
	DON'T KNOW
	REFUSED99
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 SAFE1
	SOMEWHAT SAFE
	VERY SAFE3
	COMPLETELY SAFE4
	DON'T KNOW77
	REFUSED99

RSV_CONF3	you say it is not at all important, a little important, somewhat important, or very important?
	NOT AT ALL IMPORTANT1
	A LITTLE IMPORTANT
	SOMEWHAT IMPORTANT
	VERY IMPORTANT4
	DON'T KNOW77
	REFUSED99
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 CONCERNED1
	A LITTLE CONCERNED
	MODERATELY CONCERNED
	VERY CONCERNED4
	DON'T KNOW
	REFUSED99
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 SAFE1
	SOMEWHAT SAFE2
	VERY SAFE3
	COMPLETELY SAFE4
	DON'T KNOW
	REFUSED99
	ICH ODED
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 IMPORTANT1
	A LITTLE IMPORTANT
	SOMEWHAT IMPORTANT
	VERY IMPORTANT
	DON'T KNOW
	REFUSED99
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?
	YES1
	NO
	DON'T KNOW
	REFUSED

ACIP4 Can you please tell me what that is?

SELECT ALL THAT APPLY

	CANCER	
	(COPD [CHRONIC OBSTRUCTIVE PULMONARY DISEASE], ASTHMA [MODERATE TO SEVERE], INTERSTITIAL LUNG DISEASE,	
	CYSTIC FIBROSIS,	
	AND PULMONARY HYPERTENSION	GO TO ACIP5
	NEUROLOGICAL CONDITIONS	GO TO ACIP5 IF ACIP4 IN (19) GO TO ACIP4_OTH THEN GO TO ACIP4DM
	DOWN SYNDROME	GO TO ACIP5
	HEART FAILURE, CORONARY ARTERY DISEASE,	
	CARDIOMYOPATHIES OR HYPERTENSION)7	GO TO ACIP5
	HIV INFECTION8	GO TO ACIP5
	IMMUNOCOMPROMISED STATE	
	(WEAKENED IMMUNE SYSTEM)9	GO TO ACIP5
	LIVER DISEASE (CHRONIC LIVER DISEASE,	
	SUCH AS ALCOHOL-RELATED LIVER DISEASE, NONALCOHOLIC FATTY LIVER DISEASE,	
	AND CIRRHOSIS [SCARRING OF THE LIVER])10	GO TO ACIP5
	OVERWEIGHT (HIGH BMI)	GO TO ACIP5
	PREGNANCY	GO TO ACIP5
	SICKLE CELL DISEASE OR THALASSEMIA	
	(HEMOGLOBIN BLOOD DISORDER)13	GO TO ACIP5
	SMOKING (CURRENT OR FORMER)14	GO TO ACIP5
	SOLID ORGAN OR BLOOD STEM CELL	
	TRANSPLANT (INCLUDING	
	BONE MARROW TRANSPLANT)	GO TO ACIP5
	STROKE OR CEREBROVASCULAR DISEASE	GO TO ACIP5
	SUBSTANCE USE DISORDERS (EX: ALCOHOL,	CO TO ACIDS
	OPIOID, OR COCAINE USE DISORDER)17 OLDER AGE18	GO TO ACIP5 GO TO ACIP5
	OTHER	GO TO ACIF3
	DON'T KNOW	GO TO ACIP5
	REFUSED	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 CONF11	1 Δ
VIII_CONTT	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	3
VAX_CONTI	Many things might make it difficult to get a COVID vaccine. Please tell me if anything I list makes it difficult for you.
	CONTINUE
VAX CONF13	3Δ
VIM_CONTI	Getting an appointment online.
	Has this made it difficult for you to get a COVID vaccine?
	YES

VAX_CONF13	D 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 CONF13	E
_	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 CONF13	F
_	Vaccination sites aren't open at convenient times.
	READ IF NECESSARY: Has this made it difficult for you to get a COVID vaccine?
	YES
VAX CONF13	G
VIII_CON 13	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
	IF VAX2 IN (2,77,99) GO TO VAX_CONF13I; ELSE GO TO VAX_CONF13H

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VAX_CONF1:	3H 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_CONF1	
	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_TRANS	
	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
	DON'T KNOW

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_RSVC1; IF (ACM_AGE <50, 777, 999) AND ACM_SEX EQ 2 GO TO ACM_PREG; 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_PREG	Are you currently trying to get pregnant, pregnant, or breastfeeding?		
	TRYING TO GET PREGNANT 1 PREGNANT 2 BREASTFEEDING 3 NONE OF THE ABOVE 4 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		
ACM_BIRTH	Have you given birth to a child since April of 2024?		
	YES		

ACM_INFANT

Do you have any children under the age of 8 months?

YES1	
NO2	IF ACM_PREG IN (1,2,3) OR
	ACIP4 IN (12), GO TO
	ACM_RSVC3; 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 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
DON'T KNOW77	
	ACIP4 IN (12), GO TO
	ACM_RSVC3; 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 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
REFUSED99	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	ACIP4 IN (12), GO TO
	ACM_RSVC3; 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 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_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 SHOT1	AND NIS/TEEN/CIM COMPLETE AND C9/TIS_C9/Z_Q02BZ EQ 2 SKIP TO ACM_RACE_AAB; ELSE C5/TIS_C5/LF_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS_C9/Z_Q02BZ NE 2 SKIP TO ACM_MEDEQ;
PROBABLY GET A SHOT	ELSE GO TO ACM_HISP 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 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 CO TO ACM_HISP
PROBABLY NOT GET A SHOT3	ELSE GO TO ACM_HISP 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 C5/TIS_C5/LF_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS_C9/Z_Q02BZ NE 2 SKIP TO ACM_MEDEQ;
DEFINITELY NOT GET A SHOT4	ELSE GO TO ACM_HISP 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 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
NOT SURE5	IF C5/TIS_C5/LF_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS_C9/Z_Q02BZ EQ 2

	DON'T KNOW	SKIP TO ACM_RACE_AAB; ELSE 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 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 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 IF C5/TIS_C5/LF_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS_C9/Z_Q02BZ EQ 2 SKIP TO ACM_MEDEQ; ELSE GO TO ACM_HISP 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 C5/TIS_C5/LF_C1Q02 EQ 1 AND NIS/TEEN/CIM COMPLETE AND C9/TIS_C9/Z_Q02BZ NE 2 SKIP TO ACM_RACE_AAB; ELSE 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_HISP	Are you of Hispanic or Latino origin?	
	YES 1 NO 2 DON'T KNOW 77 REFUSED 99	GO TO ACM_RACE GO TO ACM_RACE GO TO ACM_RACE

American, (IF USVI THEN DISPLAY: (Dominican)), or of other Hispanic, Latino/a, or Spanish origin? SELECT ALL THAT APPLY MEXICAN/MEXICANO, MEXICAN AMERICAN, CHINCANO/A1 GO TO ACM RACE GO TO ACM RACE CUBAN3 GO TO ACM RACE CENTRAL AMERICAN4 GO TO ACM RACE SOUTH AMERICAN5 GO TO ACM RACE OTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN (SPECIFY)10 DOMINICAN [SHOW ONLY IF USVI]11 GO TO ACM RACE DON'T KNOW77 GO TO ACM RACE REFUSED99 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 GO TO ACM MEDEQ BLACK OR AFRICAN AMERICAN2 GO TO ACM RACE AAB GO TO ACM MEDEQ GO TO ACM MEDEQ ALASKA NATIVE4 ASIAN5 IF GUAM THEN DO: GO TO ACM RACEAAPI; ELSE IF NOT GUAM DO: GO TO ACM RACE AS NATIVE HAWAIIAN6 GO TO ACM MEDEO PACIFIC ISLANDER7 IF GUAM THEN DO: GO TO ACM RACEAAPI; ELSE IF NOT GUAM DO: GO TO ACM RACE PI OTHER8 GO TO ACM MEDEQ

ACM HISP Y Are you Mexican, Mexican-American, Chicano/a, Puerto Rican, Cuban, Central American, South

GO TO ACM MEDEQ

REFUSED99

ACM RACE OS	
ENTER OTHER SPECIFY:	GO TO ACM_MEDEQ
ACM RACE AS	
Are you Asian Indian, Chinese, Filipino, Japanese, Korean, Vie	tnamese, or other Asian?
READ IF NECESSARY: Please choose the one category that d	escribes you best.
ASIAN INDIAN1	GO TO ACM_MEDEQ
CHINESE2	GO TO ACM MEDEQ
FILIPINO3	GO TO ACM MEDEQ
JAPANESE4	GO TO ACM MEDEQ
KOREAN5	GO TO ACM MEDEQ
VIETNAMESE6	GO TO ACM MEDEQ
OTHER7	_
DON'T KNOW77	GO TO ACM_MEDEQ
REFUSED99	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 Isla	nder?
READ IF NECESSARY: Please choose the one category that d	escribes you best.
CHAMORRO/GUAMIAN1	GO TO ACM MEDEQ
SAMOAN2	GO TO ACM MEDEQ
OTHER3	_ `
DON'T KNOW77	GO TO ACM MEDEQ
REFUSED99	_ `
ACM RACE PIO	
FNTER OTHER SPECIFY:	GO TO ACM MEDEO

		~	
ACM	⊢ R A	CFA	ΔPI

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.

	CHAMORRO1	GO TO ACM_MEDEQ
	FILIPINO2	GO TO ACM MEDEQ
	CHUUKESE3	GO TO ACM MEDEQ
	POHNPEIAN4	GO TO ACM MEDEQ
	PALAUAN5	GO TO ACM MEDEQ
	YAPESE6	GO TO ACM MEDEQ
	KOSRAEAN7	GO TO ACM MEDEQ
	MARSHALLESE8	GO TO ACM MEDEQ
	JAPANESE9	GO TO ACM MEDEQ
	KOREAN10	GO TO ACM MEDEQ
	CHINESE11	GO TO ACM MEDEQ
	VIETNAMESE12	GO TO ACM MEDEQ
	THAI13	GO TO ACM_MEDEQ
	OTHER14	_
	DON'T KNOW77	GO TO ACM MEDEQ
	REFUSED99	GO TO ACM_MEDEQ
ACMRAC		
	ENTER OTHER SPECIFY:	GO TO ACM_MEDEQ
ACM RAG	CE AAR	
icivi_iaiv	[IF C5/TIS C5/LF C1Q02 EQ 1 and C9/TIS C9/Z Q02BZ EQ 2 T	HEN DISPLAY:
	"Previously, you indicated you were Black or African American." El	
	you African American, Jamaican, Haitian, Nigerian, Ethiopian, Som	
	,	
	READ IF NECESSARY: Please choose the one category that describ	bes you best.
	AFRICAN AMERICAN1	GO TO ACM_MEDEQ
	JAMAICAN2	GO TO ACM_MEDEQ
	HAITIAN3	GO TO ACM_MEDEQ
	NIGERIAN4	GO TO ACM_MEDEQ
	ETHIOPIAN5	GO TO ACM_MEDEQ
	SOMALI6	GO TO ACM_MEDEQ
	OTHER7	
	DON'T KNOW77	GO TO ACM_MEDEQ
	REFUSED99	GO TO ACM_MEDEQ
ACM DAG	CE A ADO	
AUWI_KA	CEAABO ENTED OTHER SPECIEV.	
	ENTER OTHER SPECIFY:	

ACM_MEDEO)
	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
	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
ACM_INSUR	
	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

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 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	
\$150,001 or more	8
DON'T KNOW	
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]? YES1 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 NO2 GO TO ACM INCOME GO TO ACM INCOME REFUSED99 GO TO ACM_INCOME ACM ISLAND On what island do you live? SAINT CROIX1 GO TO ACM BORN SAINT THOMAS2 GO TO ACM BORN GO TO ACM BORN

GO TO ACM BORN

GO TO ACM C19A

GO TO ACM BORN

GO TO ACM BORN

WATER ISLAND4

NOT IN USVI5

REFUSED99

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	
MONGMONG	13
ORDOT	14
PITI	15
SANTA RITA	16
SINAJANA	
TALOFOFO	18
TAMUNING-TUMON	19
ТОТО	20
UMATAC	21
YIGO	22
YONA	23
DON'T KNOW	77
DO NOT LIVE IN GUAM	98
REFLISED	99

GO TO ACM BORN

REFUSED99

ACM_C19_NE	EWZ 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 NO IN THE DROP DOWN MENU	OT IN PUERTO RICO
	[CITIES IN PUERTO RICO]1-78NOT IN PUERTO RICO98DON'T KNOW88REFUSED99	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 TO ACM_LANG; ELSE GO TO ACM_LTNH	' ANSWERED, SKIP
ACM_FCBOR		
	In which country were you born?	
	ENTER COUNTRY:	
	IF NIS/TEEN/CIM SURVEY ANSWERED, SKIP TO ACM_LANG; EGO TO ACM_LTNH; ELSE GO TO ACM_C1	LSE IF ACM_AGE>=60
ACM_LTNH	Do you currently live in a nursing home?	
	YES	

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	
	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_HHLAN		
	What is this language?	
	SPANISH1	
	MANDARIN2	
	ARABIC3	
	VIETNAMESE	
	RUSSIAN5 PORTUGUESE	
	KOREAN7	
	FRENCH8	
	CANTONESE9	
	HAITIAN CREOLE10	
	NEPALI11	
	OTHER88	
	DON'T KNOW77	
	REFUSED99	
	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_HHLAN	NGO	
_	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