

NIS Child Influenza Module (NIS-CIM)

Hard Copy Questionnaire

Q2/2017

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)

LF_INTRO Thank you for your answers, now I have some additional questions about other children in your household.

TERMINATE THE INTERVIEW1 GO TO LF_UNDR18

LF_UNDR18 Please tell me how many people less than 18 years old live in this household.

ENTER NUMBER OF CHILDREN ____

IF NO CHILDREN ENTER 00 IF INCENTIVE > 0
 THEN GO TO ADDRESS_CONF, ELSE GO TO LF_NOCHD

IF GREATER THAN 0 GO TO LF_AGE_X,
 SEE ADDITIONAL INSTRUCTIONS

DON'T KNOW77 GO TO LF_ASK_ANOTHER

REFUSED99 GO to LF_AREF

ADDITIONAL INSTRUCTIONS: VALID VALUES: 0-9, 77, 99

IF C1_A AND C1 ARE NOT MISSING IN NIS, FILL WITH C1-C1A (NUMBER OF PEOPLE LIVING IN THE HOUSEHOLD MINUS NUMBER OF PEOPLE 18 YEARS OF AGE OR OLDER)

ELSE IF P_ASKTEN=1 and ZTUNDR18 not missing, fill with ZTUNDR18

ELSE IF P_ASKTEN=0 THEN DO THE FOLLOWING:

IF LF_UNDR18=0 and S_NUMB > LF_UNDR18, THEN GO TO LF_U18CF
 ELSE IF LF_UNDR18=0 ---> IF INCENTIVE > 0 THEN GO TO ADDRESS_CONF,
 ELSE GO TO LF_NOCHD

IF LF_UNDR18 > 0 and S_NUMB > LF_UNDR18, THEN GO TO LF_U18CF

LF_U18CF WARNING: ACCORDING TO NIS THERE [if S_NUMB=1 then fill: IS / if S_NUMB > 1 then fill: ARE] AT LEAST [FILL S_NUMB] [if S_NUMB=1 then fill: CHILD / if S_NUMB > 1 then fill: CHILDREN] IN THE HOUSEHOLD.
 PLEASE RE-ASK LF_UNDR18 ASKING FOR ALL OF THE CHILDREN IN THE HOUSEHOLD.
 HELP SCREEN: A CHILD IS COUNTED AS "LIVING IN THE HOUSEHOLD" IF THE CHILD:
 - HAS BEEN STAYING THERE (OR IS EXPECTED TO STAY THERE) FOR AT LEAST TWO MONTHS
 - THE LENGTH OF THE CURRENT STAY IS UNKNOWN, BUT THERE IS NO OTHER PLACE WHERE THE CHILD USUALLY STAYS
 - USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR LESS THAN TWO MONTHS (WHETHER TRAVELING, IN THE HOSPITAL, OR AWAY FOR ANY OTHER REASON)

- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR TWO MONTHS OR MORE BECAUSE THEY ARE AT SCHOOL (COLLEGE, BOARDING SCHOOL, MILITARY ACADEMY, PREP SCHOOL, ETC.)
 - ONLY LIVES PART-TIME IN THE HOUSEHOLD BECAUSE OF CUSTODY ISSUES, BUT IS STAYING THERE AT THE TIME OF THE CALL

(01) Count incorrect - change total number of children > go back to LF_UNDR18
 (02) Total number of children confirmed as correct > CONTINUE

LF_AREF The only reason we need to know how many children in this household are in this age group is to determine if you're eligible to participate in this survey.

CONTINUE Go to LF_UNDR18

R STILL REFUSES IF INCENTIVE = 0 THEN GO TO LF_REFKID, IF INCENTIVE > 0 THEN GO TO ADDRESS_CONF

LF_REFKID Since we need to know how many children are in this age group in order to continue, these are all the questions I have at this time. I'd like to thank you on behalf of the [If IAP=105
 DISPLAY: 'Department of Public Health and Social Services and the'] (IF IAP=106
 DISPLAY "Puerto Rico Department of Health and the") Centers for Disease Control and Prevention for the time you have spent answering these questions.

GO TO R1, ON CALLBACK POINT OF RETURN IS LF_UNDER18

LF_ASK_ANOTHER

Is there anyone in your household who knows how many people in this household are less than 18 years old?

NEW PERSON COMES TO PHONE.....1	GO TO LF_NEWR
NO2	GO TO LF_TERM

LF_AGE_X IF S_UNDR18 = 1, FILL "age" AND "child". ELSE, FILL "ages" AND "children".

IF S_NUMB = 0, DISPLAY THIS TEXT WHEN ASKING ABOUT FIRST CHILD:
 "Many of my questions are only for children of certain ages. So, I'll know which questions to ask, please tell me the [age/ages] of the [child/children] less than 18 years old living in this household." FOR ALL SUBSEQUENT CHILDREN (LOOP UNTIL # OF CHILDREN=S_UNDR18) DISPLAY: (READ IF NECESSARY: "Please tell me the age of the next child who lives in this household.")

DISPLAY FOR AGE_1 INTERVIEWER: "IF RESPONDENT PROVIDES AGES FOR ALL CHILDREN UP FRONT, TYPE IN THE AGES AS CATI PROMPTS FOR THEM."

ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

IF AGE IS LESS THAN 1 MONTH OLD, RECORD 0 MONTHS.
 A CHILD IS COUNTED AS "LIVING IN THE HOUSEHOLD" IF THE CHILD:

- HAS BEEN STAYING THERE (OR IS EXPECTED TO STAY THERE) FOR AT LEAST TWO MONTHS
- THE LENGTH OF THE CURRENT STAY IS UNKNOWN, BUT THERE IS NO OTHER PLACE WHERE THE CHILD USUALLY STAYS
- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR LESS THAN TWO MONTHS (WHETHER TRAVELING, IN THE HOSPITAL, OR AWAY FOR ANY OTHER REASON)
- USUALLY STAYS IN THE HOUSEHOLD, BUT IS CURRENTLY AWAY FOR TWO MONTHS OR MORE BECAUSE THEY ARE AT SCHOOL (COLLEGE, BOARDING SCHOOL, MILITARY ACADEMY, PREP SCHOOL, ETC.)
- ONLY LIVES PART-TIME IN THE HOUSEHOLD BECAUSE OF CUSTODY ISSUES, BUT IS STAYING THERE AT THE TIME OF THE CALL

ENTER VALUE _____ GO TO LF_AGE_CONFIRM

IF 99 go to LF_AGERF

IF 77 go to LF_AGEDK

LF_AGEDK

Is there anyone available who would know the child's age?

NEW PERSON COMES TO PHONE..... GO TO LF_NEWR

NO

IF LF_AGEDK=01, THEN GO TO LF_NEWR

IF LF_AGEDK=02 AND THERE ARE REMAINING CHILDREN, THEN GO TO LF_AGE

IF LF_AGEDK=02 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE OTHER VALID AGES IN ROSTER, THEN GO TO LAGECONF

IF LF_AGEDK=02 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO VALID AGES IN ROSTER AND ALL AGES ARE 77, THEN GO TO LF_S1TERM. ON CALLBACK POINT OF RETURN IS LF_AGE.

IF LF_AGEDK=02 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO VALID AGES IN ROSTER AND ALL AGES ARE 77 and 99, AND INCENTIVE=0 THEN GO TO FNOCHILD. ON CALLBACK POINT OF RETURN IS LF_AGE, IF P_INCENT > 0 GO TO VRYADD

LF_AGERF

I understand you may be uncomfortable, however, all information is confidential under Federal Law.

RETURN TO QUESTIONNAIRE.....

R STILL REFUSES.....

IF 01, THEN GO TO LF_AGE

IF 99 AND THERE ARE REMAINING CHILDREN, THEN GO TO LF_AGE

IF 99 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE OTHER VALID AGES IN ROSTER, THEN GO TO LAGECONF

IF 99 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO VALID AGES IN ROSTER AND INCENTIVE>0, THEN GO TO VRYADD

IF 99 AND THERE ARE NO REMAINING CHILDREN AND THERE ARE NO VALID AGES IN ROSTER AND INCENTIVE=0, GO TO FNOCHILD. ON CALLBACK POINT OF RETURN IS LF_AGE_X

LF_AGE_CONFIRM

So, you have a (FILL WITH AGE IN YEARS FOR ALL CHILDREN 2 YEARS OLD OR OLDER, OR AGE IN MONTHS FOR ALL CHILDREN UNDER 2 YEARS OLD, INCLUDING AGE FOR ANY NIS-ELIGIBLE CHILDREN. E.G., 12 month old, 10 year old, and 15 year old, OR IF CHILD IS LESS THAN ONE MONTH OLD FILL WITH newborn/ IF > 1 CHILD, INSERT 'and' BEFORE THE LAST AGEID) [IF Count DK/REF Ages >=1: and (# of children with AGE DK/REF) other child(ren)]. Is that correct?

- (1) YES [GO TO CP_LMULT]
- (2) NO, WRONG AGES OF CHILDREN [Display: PLEASE CORRECT THE AGE OF CHILDREN IN THE HOUSEHOLD, GO TO LFAGE]
- (3) NO, WRONG NUMBER OF CHILDREN [Display: PLEASE CORRECT THE NUMBER OF CHILDREN IN THE HOUSEHOLD; GO TO LF_UNDR18]
- (77) DON'T KNOW [GO TO CP_LMULT]
- (99) REFUSED [GO TO CP_LMULT]

INCLUDE ANY DK (77) or REF (99) AGE AS A COUNT IN TEXT FILL

CP_LMULT

- (1) IF THERE ARE CHILDREN WITH THE SAME AGE SKIP TO LF_NME
- (2) ELSE GO TO LF_CP_SELECTION

LF_NME

Since you have more than one child who is [FILL AGE] years old, I need a way to refer to each of them during the interview. What is the name of your first [FILL AGE] old child?

IF RESPONDENT SAYS DON'T KNOW OR REFUSES ENTER
CHILD1/CHILD2/CHILD3 AND CONTINUE

- (01) CONTINUE > [RECORD NAMES IN LF_NME_1 – LF_NME_9]
- (77) DON'T KNOW
- (99) REFUSED

LF_CP_SELECTION

IF S3_EVAL_R OR TIS_S3_EVAL_R ARE NOT MISSING AND IF HH HAS CHILD OR CHILDREN 0-18 MONTHS AND/OR 36-155 MONTHS [AND ELIG_X = 0 AND TEEN_ELIG_FLAG=2] THEN COMPLETE A RANDOM SELECTION OF THIS/THESE CHILD/CHILDREN AND GO TO C12_INTRO, ELSE

IF S3_EVAL_R AND TIS_S3_EVAL_R ARE MISSING AND IF HH HAS CHILD OR CHILDREN 0-18 MONTHS AND/OR 36-155 MONTHS [AND ELIG_X = 0 AND TEEN_ELIG_FLAG=2] THEN COMPLETE A RANDOM SELECTION OF THIS/THESE CHILD/CHILDREN AND GO TO LF_TIS_S3_INTRO, ELSE GO TO LF_12_EXIT.

IF S3_EVAL_R IS MISSING AND P_ASKTEN=0 AND IF HH HAS CHILD OR CHILDREN NE 6-18 MONTHS AND/OR 36-155 MONTHS (NOT ELIGIBLE FOR FLU) THEN GO TO K_D16.

FNOCHILD Since we need an age in order to continue, these are all the questions I have at this time. I'd like to thank you on behalf of the [If IAP=105 DISPLAY: 'Department of Public Health and Social Services and the' else IF IAP=106 DISPLAY "Puerto Rico Department of Health and the"] Centers for Disease Control and Prevention for the time you spent answering these questions.

LF_TIS_S3_INTRO

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	GO TO'E34aP VTQ RESPONDENT ASKS FOR DESCRIPTION
OF LAW.....	2	GO TO LF_TIS_S3_LAW

LF_TIS_S3_LAW

The Public Health Service Act is Title 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 contractor, NORC at the University of Chicago, and their agents and contractors, 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.

C12_INTRO

Thank you for your answers about your household
[IF CWTYPE=S THEN READ "and [S.C.]'s health"].
[IF S.C. = S.P. THEN READ] "I have just a few more questions about [S.C.] and flu vaccinations."
[ELSE IF NIS or TEEN COMPLETE, READ] "I now have just a few questions about your [AGE ID] and flu vaccinations."
[ELSE READ]: "I now have just a few questions about your [AGE ID] and flu vaccinations. The remainder of the survey will take about 5 minutes. "

CONTINUE1 GO TO LF_C1Q01

LF_C1Q01 Is [S.C.] male or female?

MALE1 GO TO LF_C1Q02
 FEMALE.....2 GO TO LF_C1Q02
 DON'T KNOW77 GO TO LF_C1Q02
 REFUSED99 GO TO LF_C1Q02

Long flu Children <9 year old at LF_AGE_X skip to FS3MTH

FS3MTH So I'll know which vaccination questions to ask, please tell me the month, day, and year of birth of your [FILL AGE FROM LF_AGE, E.G. 7 month old] child.

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

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR EXAMPLE:
 77/12/2012

ENTER BIRTH DATES __ __ ____MM/DD/YYYY

IF YEAR = 7777> GO TO FYDK

IF YEAR = 9999 > GO TO FYRREF

FYRDK The reason we need your child's birth date is to know which immunization questions to ask. Is there anyone available who would know the child's month, day, and year of birth?

(01) YesGO TO LF_NEWR
 (02) NoIF P_INCENT > 0 GO TO VRYADD ELSE GO TO LF_S1TERM

FYRREF I understand you may be uncomfortable, however, all information is confidential under Federal Law. The only reason we need your child's birthdate is to know which immunization questions to ask. IF NECESSARY: If you would feel more comfortable, I can enter only a month and year of birth.

(01) R STILL REFUSES > IF P_INCENT > 0 GO TO VRYADD ELSE GO TO FYRQUIT
 (02) RETURN TO QUESTIONNAIRE > GO TOFS3MTH

FYRQUIT Since we need a birth date in order to continue, these are all the questions I have at this time. I'd like to thank you on behalf of the Centers for Disease Control and Prevention for the time you spent answering these questions.

EXIT

LF_A_CON That would make this child [calculated age from FS3MTH]; is that correct?

(01) YES [IF ELIG, GO TO LF_C1Q02; ELSE GO TO K_D16]

(02) NO [GO TO FS3MTH]

K_D16

Those are all the questions I have. You may be re-contacted in the future to participate in related studies. If you are contacted to participate in future surveys, you have the right to refuse. I'd like to thank you on behalf of the (IF IAP=GUAM DISPLAY: 'Department of Public Health and Social Services and the') (IF IAP= 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. If you have questions about your rights as a survey participant, you may call 1-800-223-8118, and leave a message asking to speak to the Chairperson of the Ethics Review Board.

LF_C1Q02 What is your relationship to [S.C.]?

MOTHER (STEP, FOSTER, ADOPTIVE)
OR FEMALE GUARDIAN..... 1
FATHER (STEP, FOSTER, ADOPTIVE)
OR MALE GUARDIAN 2
SISTER OR BROTHER
(STEP, FOSTER, HALF, ADOPTIVE) 3
IN-LAW OF ANY TYPE 4
AUNT/UNCLE..... 5
GRANDPARENT 6
OTHER FAMILY MEMBER..... 7
FRIEND 8
DON'T KNOW 77
REFUSED 99

ALL GO TO LF_C12Q6

LF_C12Q6 Since July 1, 2016 has [S.C.] had a flu vaccination? There are two types of flu vaccinations. One is a shot and the other is a spray, mist or drop in the nose.

YES1 GO TO LF_C12Q8
NO2
DON'T KNOW77
REFUSED9

IF LF_C12Q6 = 02, 77, 99 THEN DO:

IF QUOTA: NIS_SPRING_FLU=1 GO TO LF_NFLU1

IF QUOTA: NIS_SPRING_FLU=0 GO TO LF_C12Q15

LF_C12Q8 How many flu vaccinations has [S.C.] received since July 1, 2016?

1 VACCINATION OR DOSE1 GO TO LF_C12Q9_M
2 VACCINATIONS OR DOSES.....2 GO TO LF_C12Q9_M
DON'T KNOW77 GO TO LF_C12Q12
REFUSED99 GO TO LF_C12Q12

INTERVIEWER INSTRUCTION: IF R SAYS CHILD HAS RECEIVED MORE THAN TWO VACCINATIONS, SELECT "2 VACCINATIONS OR DOSES." FOLLOW-UP INFORMATION WILL BE COLLECTED ABOUT THE FIRST TWO VACCINATIONS SINCE JULY.

LF_C12Q9_M During what month did [S.C.] receive [his/her] first dose of the flu vaccine, since July 1, 2016?

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

MONTH \[YEAR=fill] [GO TO LF_C12Q9_C]
(77) DON'T KNOW [GO TO LF_C12Q9_A]
(99) REFUSED [GO TO LF_C12Q9_A]

LF_C12Q9_C That was [FILL MONTH] of [FILL YEAR], correct?

YES1 GO TO LF_C12Q9_A
NO2 GO TO LF_C12Q9_M

LF_C12Q9_A Was this a shot or a spray in the nose?

FLU SHOT1 IF LF_C12Q8 = 2 GO TO LF_C12Q10_M, ELSE GO TO LF_C12Q12
FLU NASAL SPRAY OR "FLU MIST"2 IF LF_C12Q8 = 2 GO TO LF_C12Q10_M, ELSE GO TO LF_C12Q12
DON'T KNOW77 IF LF_C12Q8 = 2 GO TO LF_C12Q10_M, ELSE GO TO LF_C12Q12
REFUSED99 IF LF_C12Q8 = 2 GO TO LF_C12Q10_M, ELSE GO TO LF_C12Q12

LF_C12Q10_M

During what month did [S.C.] receive [his/her] second dose of the flu vaccine,
since July 1, 2016?

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

MONTH \[YEAR=fill]	[GO TO LF_C12Q10_C]
(77) DON'T KNOW	[GO TO LF_C12Q10_A]
(99) REFUSED	[GO TO LF_C12Q10_A]

LF_C12Q10_C That was [FILL MONTH] of [FILL YEAR], correct?

YES	1	GO TO LF_C12Q10_A
NO	2	GO TO LF_C12Q10_M

LF_C12Q10_A

Was this a shot or a spray in the nose?

FLU SHOT	1	GO TO LF_C12Q12
FLU NASAL SPRAY OR "FLU MIST"	2	GO TO LF_C12Q12
DON'T KNOW	77	GO TO LF_C12Q12
REFUSED	99	GO TO LF_C12Q12

LF_C12Q12 At what kind of place did [S.C.] get [his/her] most recent flu vaccination?

DOCTOR'S OFFICE [IF IAP=PUERTO RICO INCLUDE: INTERVIEWER NOTE:
DOCTOR'S OFFICE includes private provider and reforma provider] 1
HEALTH DEPARTMENT 2
CLINIC OR HEALTH CENTER..... 3
HOSPITAL 4
OTHER MEDICALLY-RELATED PLACE..... 5
PHARMACY OR DRUG STORE..... 6
WORKPLACE 7
ELEMENTARY/MIDDLE/HIGH SCHOOL 8
OTHER NON-MEDICALLY-RELATED PLACE [IF IAP= PUERTO RICO INCLUDE:
INTERVIEWER NOTE: INCLUDES MASS VACCINATION CLINICS
HELD AT SPORTS ARENAS]..... 9
MALL OUTREACH [DISPLAY ONLY IF IAP=105]..... 10
VILLAGE OUTREACH [DISPLAY ONLY IF IAP=105]..... 11
DON'T KNOW 77
REFUSED 99

IF QUOTA: NIS_SPRING_FLU =1 GO TO LF_C12Q15_VISIT

IF QUOTA: NIS_SPRING_FLU =0 THEN DO:

IF CHILD \geq 8 MONTHS OLD AND $<$ 9 YEARS OLD AS OF AUGUST 1, 2016,
GO TO LF_LIFE;

ELSE GO TO LF_INS

LF_NFLU1 There are many reasons why parents don't get flu vaccinations for their children. I am going to read a list of only a few of the many possible reasons why parents may not get a flu vaccination for their children. Please tell me if each statement is a reason why you did not get a flu vaccination for your child this flu season.

Was one of the reasons that you did not get the flu vaccination for your child because...?:
Your child is unlikely to get very sick from the flu.

YES	1
NO	2
DON'T KNOW	77
REFUSED	99

ALL GO TO LF_NFLU2

LF_NFLU2 Was one of the reasons that you did not get the flu vaccination for your child because...?:
You wanted to get the flu spray for your child but it was not available.

YES	1
NO	2
DON'T KNOW	77
REFUSED	99

ALL GO TO LF_NFLU6

LF_NFLU6 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...?:]
You or your child don't like needles or shots.

YES	1
NO	2
DON'T KNOW	77
REFUSED	99

ALL GO TO LF_NFLU3

LF_NFLU3 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...?]
You were concerned about possible side effects or the safety of the flu vaccination.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

ALL GO TO LF_NFLU4

LF_NFLU4 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...?]
The place where you would usually get your child a flu vaccination did not give flu vaccinations this season.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

ALL GO TO LF_NFLU5

LF_NFLU5 [READ IF NECESSARY: Was one of the reasons that you did not get the flu vaccination for your child because...?:]
You believe that flu vaccines do not work very well.

YES 1
NO 2
DON'T KNOW 77
REFUSED 99

ALL GO TO LF_C12Q15

LF_C12Q15 How likely is [S.C.] to get a flu vaccination between now and the end of June, 2017?
Would you say [FILL VAR: he/she]:

Will definitely get one 1
Will probably get one..... 2
Will probably not get one 3
Will definitely not get one 4
DON'T KNOW 77
REFUSED 99

If QUOTA: NIS_SPRING_FLU =1 GO TO LF_C12Q15_VISIT
If QUOTA: NIS_SPRING_FLU =0 THEN DO:
If CHILD ≥8 MONTHS OLD AND <9 YEARS OLD AS OF AUGUST 1, 2016, GO TO LF_LIFE;
ELSE GO TO LF_INSURE

LF_C12Q15_VISIT

Since July 1st, has [S.C.] had a visit to a doctor or other health professional about [FILL VAR: his/her] health?

YES	1
NO	2
DON'T KNOW	77
REFUSED	99

IF LF_C12Q15_VISIT=01 SKIP TO LF_C12Q15_REC;
ELSE IF LF_C12Q15_VISIT=02, 77, 99 AND CHILD \geq 8 MONTHS OLD AND <9 YEARS
OLD AS OF AUGUST 1, 2016, GO TO LF_LIFE; ELSE GO TO LF_SPRAYLAST

LF_C12Q15_REC

Since July 1st, did a doctor or other health professional tell you they recommend or say it was a good idea for [S.C.] to get a flu vaccination?

IF RESPONDENT SAYS DOCTOR WAS NEUTRAL OR "DOCTOR SAID IT WAS MY
CHOICE," SELECT "NO"

YES	1
NO	2
DON'T KNOW	77
REFUSED	99

IF LF_C12Q15_REC=2 GO TO LF_C12Q15_RECNO
IF LF_C12Q15_REC=01, 77,99 AND CHILD \geq 8 MONTHS OLD AND <9 YEARS OLD AS
OF AUGUST 1, 2016, GO TO LF_LIFE; ELSE GO TO LF_SPRAYLAST

LF_C12Q15_RECNO

You said a doctor or health professional did not recommend a flu vaccination for [S.C.]. Did he or she not mention the flu vaccination, mentioned it but was neutral, recommend not to get a flu vaccination, [IF LF_C12Q6=1 THEN INCLUDE: or did not give a recommendation because your child was already vaccinated]?

Didn't mention flu Vaccination	1
Mentioned flu vaccination but was neutral.....	2
Recommended child not get a flu vaccination.....	3
[IF LF_C12Q6=1 THEN INCLUDE:]	
Didn't give a recommendation because child already vaccinated.....	4
DON'T KNOW	77
REFUSED	99

IF CHILD \geq 8 MONTHS OLD AND < 9 YEARS OLD AS OF AUGUST 1, 2016, GO TO LF_LIFE; ELSE GO TO LF_SPRAYLAST

LF_LIFE Thinking about all of the flu vaccinations [S.C.] received in [FILL VAR: his/her] life before this flu season, that is before July 1, 2016, how many flu vaccinations did [S.C.] receive? Was it 0 vaccinations, 1 vaccination, or 2 or more vaccinations?

[INTERVIEWER NOTE: IF NEEDED, LET THE RESPONDENT KNOW TO INCLUDE BOTH SHOT AND SPRAY WHEN CONSIDERING THE NUMBER OF VACCINATIONS.]

ONE FLU VACCINATION	1
TWO OR MORE FLU VACCINATIONS ...	2
ZERO FLU VACCINATIONS.....	3
DON'T KNOW	77
REFUSED	99

IF QUOTA: NIS_SPRING_FLU =1 THEN DO:
IF LF_LIFE=1, 2 GO TO LF_SPRAYLAST;
ELSE IF LF_LIFE=3, 77, 99 GO TO LF_NOSPRAYREC;
END;

ELSE IF QUOTA: NIS_SPRING_FLU =0 THEN GO TO LF_INSURE

LF_SPRAYLAST

Thinking just about the LAST flu season, did your child receive a flu vaccination anytime between July 1, 2015 and June 30, 2016?

YES	1
NO	2
DON'T KNOW	77
REFUSED	99

IF_LF_SPRAYLAST = 1 GO LF_SPRAYLAST_TYP, ELSE GO TO LF_NOSPRAYREC

LF_SPRAYLAST_TYP

Was this a shot or a spray in the nose.

FLU SHOT	1
FLU NASAL SPRAY OR 'FLU MIST'	2
DON'T KNOW	77
REFUSED	99

ALL GO TO LF_NOSPRAYREC

LF_NOSPRAYREC

What types of influenza vaccines were recommended for children in the United States this flu season? [IF RANDOM VALUE=1 "Only the flu **spray**, only the flu **shot**," IF RANDOM VALUE=2 "Only the flu **shot**, only the flu **spray**,"] either the **spray or the shot**, or **neither**?

ONLY FLU SPRAY	1
ONLY FLU SHOT	2
EITHER FLU SPRAY OR FLU SHOT	3
NEITHER	4
DON'T KNOW	77
REFUSED	99

ALL GO TO LF_INSURE

LF_INSURE

Now I have a few more general questions about [S.C.] and your household. Does [S.C.] have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

YES	1	GO TO LF_INSURE_TYPE
NO	2	GO TO LF_HHSIZE
DON'T KNOW	77	GO TO LF_HHSIZE
REFUSED	99	GO TO LF_HHSIZE

LF_INSURE_TYPE

Is that coverage Medicaid (IF IAP= PUERTO RICO THEN DISPLAY: (plan La Reforma)),
[IF IAP NOT GUAM OR PUERTO RICO THEN DISPLAY: the Children's Health Insurance
Program, CHIP, [fill state CHIP program name],] or some other type of insurance?

[CHECK ALL THAT APPLY]

MEDICAID	1	GO TO LF_HHSIZE [IF IAP NOT GUAM OR PUERTO RICO DISPLAY] CHIP [FILL PROGRAM NAME] 2 GO TO LF_HHSIZE
SOMETHING ELSE/PRIVATE INSURANCE /		
HMO PREPAID PLAN	3	GO TO LF_HHSIZE
DON'T KNOW	77	GO TO LF_HHSIZE
REFUSED	99	GO TO LF_HHSIZE

LF_HHSIZE Including the adults and all the children, how many people live in this household?

ENTER NUMBER.....	___	GO TO LF_11Q01
DON'T KNOW	77	GO TO LF_11Q01
REFUSED	99	GO TO LF_11Q01

LF_11Q01 Is [S.C.] of Hispanic or Latino origin?

INCLUDES MEXICAN, MEXICAN-AMERICAN, CHICANO/A, PUERTO RICAN,
CUBAN, CENTRAL AMERICAN, SOUTH AMERICAN, OR ANOTHER HISPANIC,
LATINO/A, OR SPANISH ORIGIN.

YES	1	GO TO LF_11Q01A
NO	2	GO TO LF_11Q02
DON'T KNOW	77	GO TO LF_11Q02
REFUSED	99	GO TO LF_11Q02

LF_11Q01A Is [S.C.] Mexican, Mexican-American, Chicano/a, Puerto Rican, Cuban, Central American,
South American, (IF IAP=VIRGIN ISLANDS THEN DISPLAY: (Dominican)), or of other
Hispanic, Latino/a, or Spanish origin? CLICK ALL THAT APPLY

MEXICAN/MEXICANO, MEXICAN-AMERICAN, CHICANO/A	1	GO TO LF_11Q02
PUERTO RICAN	2	GO TO LF_11Q02
CUBAN	3	GO TO LF_11Q02
CENTRAL AMERICAN.....	4	GO TO LF_11Q02
SOUTH AMERICAN.....	5	GO TO LF_11Q02
OTHER SPANISH/HISPANIC (SPECIFY).....	10	GO TO LF_11Q01A_OS
(IF IAP= VIRGIN ISLANDS, THEN DISPLAY (DOMINICAN).....	11	GO TO LF_11Q02
DON'T KNOW	77	GO TO LF_11Q02
REFUSED	99	GO TO LF_11Q02

LF_11Q01A_OS

ENTER OTHER_____ GO TO LF_11Q02

LF_11Q02 Now, I am going to read a list of categories. Please choose one or more of the following categories to describe [S.C.]’s race. Is [S.C.] White, Black or African American, American Indian, Alaska Native, Asian, Native Hawaiian or other Pacific Islander? MARK ALL THAT APPLY

WHITE.....	1
BLACK/AFRICAN AMERICAN	2
AMERICAN INDIAN	3
ALASKA NATIVE	4
ASIAN	5
NATIVE HAWAIIAN	6
PACIFIC ISLANDER.....	7
OTHER	8
DON’T KNOW	77
REFUSED.....	99

IF LF_11Q02 INCLUDES 08 GO TO LF_11Q02_OS (FOLLOW THIS LOGIC FIRST)
ELSE IF IAP= GUAM & OPTION 05 OR 07 SELECTED, GO TO LF_AAPI
ELSE IF LF_11Q02 INCLUDES 05 GO TO LF_11Q02A_AS
ELSE IF LF_11Q02 INCLUDES 07 GO TO LF_11Q02A_PI
ELSE IF LF_11Q02 INCLUDES 05,07 GO TO LF_11Q02A_AS FIRST
ELSE GO TO LF_11Q01B

LF_11Q02_OS ENTER OTHER_____ GO TO LF_11Q02

IF IAP=GUAM & OPTION 05 OR 07 SELECTED, GO TO LF_AAPI

ELSE IF LF_11Q02 INCLUDES 05 GO TO LF_11Q02A_AS
ELSE IF LF_11Q02 INCLUDES 07 GO TO LF_11Q02A_PI
ELSE IF LF_11Q02 INCLUDES 05,07 GO TO LF_11Q02A_AS FIRST
ELSE GO TO LF_11Q01B

LF_11Q02A_AS

Is [S.C.] Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or other Asian?

READ IF NECESSARY: "Please choose the one category that describes [S.C.] best."

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

IF LF_11Q02 INCLUDES 07 GO TO LF_11Q02A_PI
ELSE GO TO LF_11Q01B

LF_11Q02A_PI Is [S.C.] Guamanian or Chamorro, Samoan, or another Pacific Islander?

GUAMANIAN OR CHAMORRO	1	GO TO LF_11Q01B
SAMOAN	2	GO TO LF_11Q01B
OTHER PACIFIC ISLANDER	3	GO TO LF_11Q01B
DON'T KNOW	77	GO TO LF_11Q01B
REFUSED	99	GO TO LF_11Q01B

LF_AAPI Is [S.C] Chamorro, Filipino, Chuukese, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: "Please choose the one category that describes [S.C.] best."

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

IF LF_AAPI = 14, GO TO LF_AAPI_OTH
ELSE GO TO LF_Q01B

LF_AAPI_OTH ENTER OTHER SPECIFY _____ GO TO LF_11Q02

GO TO LF_Q01B

LF_11NIS [IF LF_C1Q02<=5, "Are you" ELSE] Is [S.C.'s mother] also the mother of [NIS S.C.]?

YES.....01 [GO TO LF_Q01B]
NO.....02 [IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO
TO LF_Q01B]
DON'T KNOW.....77 [IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO
TO LF_Q01B]
(99) REFUSED.....99 [IF TEEN COMPLETE GO TO LF_11TEEN, ELSE GO
TO LF_Q01B]

LF11TEEN [IF LF_C1Q02<=5, "Are you" ELSE] Is [S.C.'s mother] also the mother of [TEEN S.C.]?

YES.....01 [GO TO LF_Q01B]
NO.....02 [[GO TO LF_Q01B]
DON'T KNOW.....77 [GO TO LF_Q01B]
REFUSED.....99 [GO TO LF_Q01B]

LF_11Q01B [IF LF_C1Q02 = 1 "Are you" ELSE] Is [S.C.'s mother] of Hispanic or Latino origin?

HISPANIC OR LATINO INCLUDES MEXICAN, MEXICAN-AMERICAN, CHICANO/A,
PUERTO RICAN, CUBAN, CENTRAL AMERICAN, SOUTH AMERICAN, OR
ANOTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN.

YES 1 GO TO LF_11Q01B_HISP NO
..... 2 GO TO LF_11Q02B_DON'T
KNOW 77 GO TO LF_11Q02B
REFUSED 99 GO TO LF_11Q02B

LF_11Q01B_HISP

[IF LF_C1Q02 = 1 "Are you" ELSE] Is [S.C.'s mother] Mexican, Mexican-American, Chicana, Puerto Rican, Cuban, Central American, South American, or of other Hispanic, Latina, (IF IAP= VIRGIN ISLANDS THEN DISPLAY: (Dominican)), or of Spanish origin?

CLICK ALL THAT APPLY

MEXICAN/MEXICANO, MEXICAN-AMERICAN, CHICANO/A	1	GO TO LF_11Q02B
PUERTO RICAN	2	GO TO LF_11Q02B
CUBAN.....	3	GO TO LF_11Q02B
CENTRAL AMERICAN.....	4	GO TO LF_11Q02B
SOUTH AMERICAN.....	5	GO TO LF_11Q02B
OTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN (SPECIFY).....	10	GO TO LF_11Q02B
(IF IAP= VIRGIN ISLANDS, THEN DISPLAY (DOMINICAN).....	11	GO TO LF_11Q02_B
DON'T KNOW	77	GO TO LF_11Q01B_ HISPOS
REFUSED.....	99	GO TO LF_11Q02B

LF_11Q01B_HISPOS

ENTER OTHER_____ GO TO LF_11Q02B

LF_11Q02B Now, I'm going to read a list of categories. Please choose one or more of the following categories to describe [IF LF_C1Q02 = 1"your" ELSE] [S.C.'s mother's] race. [IF LF_C1Q02 = 1"Are you" ELSE] Is [S.C.'s mother] White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander? [MARK ALL THAT APPLY]

WHITE1
 BLACK/AFRICAN AMERICAN2
 AMERICAN INDIAN3
 ALASKA NATIVE.....4
 ASIAN.....5
 NATIVE HAWAIIAN6
 PACIFIC ISLANDER.....7
 OTHER8
 DON'T KNOW77
 REFUSED99

IF OPTION 08 IS SELECTED, GO TO LF_11Q02B_OS
 ELSE IF IAP=GUAM & OPTION 05 OR 07 SELECTED, GO TO LF_BAPI
 ELSE IF 05 IS SELECTED, GO TO LF_11Q02B_AS,
 ELSE IF 07 IS SELECTED GO TO LF_11Q02B_PI,
 ELSE IF 05 AND 07 ARE SELECTED GO TO LF_11Q02B_AS FIRST
 ELSE GO TO LF_11Q20

LF_11Q02B_OS

ENTER OTHER _____
 IF IAP=GUAM & LF_Q02B INCLUDES 05 OR 07, GO TO LF_BAPI
 ELSE IF LF_11Q02B INCLUDES 05, GO TO LF_11Q02B_AS,
 ELSE IF LF_11Q02B INCLUDES 07 GO TO LF_11Q02B_PI,
 ELSE IF LF_11Q02B INCLUDES 05 AND 07, GO TO LF_11Q02B_AS FIRST
 ELSE GO TO LF_11Q20

LF_11QO2B_AA

[IF LFC1QO2 = 1 “Are you” ELSE] Is [S.C.’s mother] Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or other Asian?

READ IF NECESSARY: “Please choose the category that describes [IF LFC1QO2 = 1 “you” ELSE] [S.C.’s mother] best.”

ASIAN INDIAN	1
CHINESE	2
FILIPINO	3
JAPANESE	4
KOREAN	5
VIETNAMESE	6
OTHER ASIAN	7
DON’T KNOW	77
REFUSED	99

ELSE IF LF_11QO2B INCLUDES 07 GO TO LF_11QO2B_PI,
ELSE GO TO LF_11Q20

LF_11QO2B_PI

[IF LFC1QO2 = 1 “Are you” ELSE] Is [S.C.’s mother] Guamanian or Chamorro, Samoan, or another Pacific Islander?

READ IF NECESSARY: “Please choose the category that describes [IF LFC1QO2 = 1 “you” ELSE] [S.C.’s mother] best.”

GUAMANIAN OR CHAMORRO	1	GO TO LF_11Q20
SAMOAN	2	GO TO LF_11Q20
OTHER PACIFIC ISLANDER	3	GO TO LF_11Q20
DON’T KNOW	77	GO TO LF_11Q20
REFUSED	99	GO TO LF_11Q20

LF_BAPI Are you/[Is S.C.'s mother] Chamorro, Filipino, Chuukese, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: "Please choose the category that describes [IF LFC1Q02 = 1,2,3,4,5 "you" ELSE] [S.C.'s mother] best."

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

IF LF_BAPI = 14, TO LF_AAPI_OTH
ELSE GO TO LF_11Q20

LF_BAPI_OTH ENTER OTHER SPECIFY _____ GO TO LF_11Q02

GO TO LF_11Q20

LF_11Q20 What is the highest grade or year of school [you have / [S.C.]'s [MOTHER TYPE] has] completed?

NOTE TO INTERVIEWER: AT THIS QUESTION, COLLECT INFORMATION ABOUT THE MOTHER (BIOLOGICAL, STEP, FOSTER, ADOPTIVE) LIVING IN THIS HOUSE.

8th GRADE OR LESS	1	GO TO LF_C19C
9th-12th GRADE NO DIPLOMA	2	GO TO F_C19C HIGH
SCHOOL GRADUATE OR GED COMPLETED	3	GO TO LF_C19C
COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM	4	GO TO LF_C19C SOME
COLLEGE CREDIT BUT NO DEGREE	5	GO TO LF_C19C
ASSOCIATE DEGREE (AA, AS)	6	GO TO LF_C19C
BACHELOR'S DEGREE (BA, BS, AB)	7	GO TO LF_C19C MASTER'S
DEGREE (MA, MS, MSW, MBA)	8	GO TO LF_C19C
DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD)	9	GO TO LF_C19C DON'T
KNOW	77	GO TO LF_C19C
REFUSED	99	GO TO LF_C19C

LF_C19C Which of the following best describes your house or apartment? Is it owned or being bought, rented, or occupied by some other arrangement by you or someone in your household?

OWNED OR BEING BOUGHT	1	GO TO LF_11Q51
RENTED	2	GO TO LF_11Q51
OTHER ARRANGEMENT	3	GO TO LF_11Q51
DON'T KNOW	77	GO TO LF_11Q51
REFUSED	99	GO TO LF_11Q51

LF_11Q51 Now I am going to ask you a few questions about your income. Please think about your total combined FAMILY income during (FILL LAST CALENDAR YEAR) for all members of the family. Can you tell me that amount before taxes?

HELP SCREEN: INCLUDE MONEY FROM JOBS, CHILD SUPPORT, SOCIAL SECURITY, RETIREMENT INCOME, UNEMPLOYMENT PAYMENTS, PUBLIC ASSISTANCE, AND SO FORTH. ALSO, INCLUDE INCOME FROM INTEREST, DIVIDENDS, NET INCOME FROM BUSINESS, FARM, OR RENT, AND ANY OTHER MONEY INCOME RECEIVED.

RECORD INCOME \$		GO TO LF_11Q51_CONF
DON'T KNOW	77	GO TO LF_11Q52
REFUSED	99	GO TO LF_11Q52

LF_11Q51_CONF

Just to confirm that I entered the number correctly, the total combined family income was [FILL RESPONSE, LF_11Q51]?

YES.....	01	[GO TO LF_LNDLN]
NO	02	GO TO LF_11Q51
DON'T KNOW	77	GO TO LF_11Q51
REFUSED	99	GO TO LF_11Q51

LF_11Q52 For the purposes of this survey, it is important to get at least a range for the total income received by all members of your household in [FILL LAST CALENDAR YEAR]. Would you say that the total combined income, before taxes, was above or below \$20,000?

MORE THAN \$20,000	01	GO TO LF_11Q56
\$20,000	02	[GO TO LF_LNDLN]
LESS THAN \$20,000	03	GO TO LF_11Q53
DON'T KNOW	77	[GO TO LF_LNDLN]
REFUSED	99	[GO TO LF_LNDLN]

LF_11Q53	Was the total combined household income more or less than \$10,000?	
	MORE THAN \$10,000	01 GO TO LF_11Q55
	\$10,000	02 [GO TO LF_LNDLN]
	LESS THAN \$10,000	03 GO TO LF_11Q54
	DON'T KNOW	77 [GO TO LF_LNDLN]
	REFUSED	99 GO TO LF_LNDLN]
LF_11Q54	Was it more than \$7,500?	
	YES	01
	NO	02
	DON'T KNOW	77
	REFUSED	99
	[ALL GO TO LF_LNDLN]	
LF_11Q55	Was it more than \$15,000?	
	YES	01 GO TO LF_11Q55A
	NO	02 GO TO LF_11Q55B
	DON'T KNOW	77 [GO TO LF_LNDLN]
	REFUSED	99 [GO TO LF_LNDLN]
LF_11Q55A	Was it more than \$17,500?	
	YES	01
	NO	02
	DON'T KNOW	77
	REFUSED	99
	[ALL GO TO LF_LNDLN]	
LF_11Q55B	Was it more than \$12,500?	
	YES	01
	NO	02
	DON'T KNOW	77
	REFUSED	99
	[ALL GO TO LF_LNDLN]	

LF_11Q56	(READ IF NECESSARY: Was the total combined household income) more or less than \$40,000?		
	MORE THAN \$40,000	01	GO TO LF_11Q56A
	\$40,000	02	[GO TO LF_LNDLN]
	LESS THAN \$40,000	03	GO TO LF_11Q57
	DON'T KNOW	77	[GO TO LF_LNDLN]
	REFUSED	99	[GO TO LF_LNDLN]
LF_11Q56A	(READ IF NECESSARY: Was the total combined household income) more or less than \$60,000?		
	MORE THAN \$60,000	01	GO TO LF_11Q58
	\$60,000	02	[GO TO LF_LNDLN]
	LESS THAN \$60,000	03	GO TO LF_11Q56B
	DON'T KNOW	77	[GO TO LF_LNDLN]
	REFUSED	99	[GO TO LF_LNDLN]
LF_11Q56B	(READ IF NECESSARY: Was the total combined household income) more or less than \$50,000?		
	MORE THAN \$50,000	01	[GO TO LF_LNDLN]
	\$50,000	02	[GO TO LF_LNDLN]
	LESS THAN \$50,000	03	GO TO LF_11Q56C
	DON'T KNOW	77	[GO TO LF_LNDLN]
	REFUSED	99	[GO TO LF_LNDLN]
LF_11Q56C	(READ IF NECESSARY: Was the total combined household income) more or less than \$45,000?		
	MORE THAN \$45,000	01	[GO TO LF_LNDLN]
	\$45,000	02	[GO TO LF_LNDLN]
	LESS THAN \$45,000	03	GO TO LF_11Q57
	DON'T KNOW	77	GO TO LF_LNDLN]
	REFUSED	99	[GO TO LF_LNDLN]
LF_11Q57	(READ IF NECESSARY: Was the total combined household income) more or less than \$30,000?		
	MORE THAN \$30,000	01	GO TO LF_11Q57A
	\$30,000	02	[GO TO LF_LNDLN]
	LESS THAN \$30,000	03	GO TO LF_11Q57B
	DON'T KNOW	77	GO TO LF_LNDLN]
	REFUSED	99	[GO TO LF_LNDLN]

LF_11Q57A (READ IF NECESSARY: Was the total combined household income) more or less than \$35,000?

MORE THAN \$35,000	01
\$35,000	02
LESS THAN \$35,000	03
DON'T KNOW	77
REFUSED	99

[ALL GO TO LF_LNDLN]

LF_11Q57B (READ IF NECESSARY: Was the total combined household income) more or less than \$25,000?

MORE THAN \$25,000	01
\$25,000	02
LESS THAN \$25,000	03
DON'T KNOW	77
REFUSED	99

[ALL GO TO LF_LNDLN]

LF_11Q58 (READ IF NECESSARY: Was the total combined household income) more or less than \$75,000?

MORE THAN \$75,000	01
\$75,000	02
LESS THAN \$75,000	03
DON'T KNOW	77
REFUSED	99

[ALL GO TO LF_LNDLN]

LF_LANDLINE

The next few questions are about the telephones in your household.

Do you have a landline telephone in your household?

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	01	GO TO LF_12Q14
NO	02	GO TO LF_11Q15_CELL
DON'T KNOW	77	GO TO LF_11Q15_CELL
REFUSED	99	GO TO LF_11Q15_CELL

LF_C12Q14 How many landline telephone numbers are residential numbers?

INTERVIEWER INSTRUCTION: THIS QUESTION IS ASKING FOR THE TOTAL NUMBER OF LANDLINE TELEPHONE NUMBERS

ONE	01	GO TO LF_11Q15_CELL
TWO	02	GO TO LF_11Q15_CELL
THREE OR MORE.....	03	GO TO LF_11Q15_CELL
NONE	04	GO TO LF_11Q15_CELL
DON'T KNOW	77	GO TO LF_11Q15_CELL
REFUSED	99	GO TO LF_11Q15_CELL

LF_11Q15_CELL

In total, how many working cell phones do you and your household members have available for personal use? Please do not count cell phones that are used exclusively for business purposes]

[If RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=1 display "INTERVIEWER NOTE: THE NUMBER FOR THIS CASE WAS CHANGED BY THE RESPONDENT ON A PREVIOUS CALL."]

ONE	01	GOTO LF_11Q15_CELL_US
TWO	02	GO TO LF_11Q15_CELL_US
THREE OR MORE.....	03	GO TO LF_11Q15_CELL_US
NONE	04	IF IAP= VIRGIN ISLANDS GO TO LF_ISLAND, ELSE IF IAP=GUAM, SKIP TO LF_VIL ELSE GO TO LF_11Q22
DON'T KNOW	77	GO TO LF_11Q15_CELL_US
REFUSED	99	GO TO LF_11Q15_CELL_US

LF_11Q15_CELL_US

[IF NIS OR TEEN OR NSCH COMPLETED AND (C21_06Q3_CELL = 1, 2, 3 or
TIS_C21_06Q3_CELL = 1, 2, 3 or C11Q15_CELL = 1, 2, 3) AND SAMPLE_USE_CODE
IN (1, 2, 4) READ: Earlier you told me that you have at least one cell phone in your
household.]

[IF NIS OR TEEN COMPLETED AND (C21_06Q3_CELL = 77, 99 or TIS_C21_06Q3_CELL
= 77, 99) AND SAMPLE_USE_CODE IN (1, 2, 4) READ: The next few questions are about
the telephones in your household.]

How many [IF C11Q15_CELL = 1, 2, 3 THEN DISPLAY: "of these"] cell phones do the adults
in this household usually use? [

[IF RDD_NCCELL_CELL=2,3 then display: "INTERVIEWER NOTE: THE
NUMBER WE CALLED IS ASSUMED TO BE USUALLY USED, SO THE
ANSWER MUST BE AT LEAST "ONE""]

[If RDD_NCCELL_CCELL=2,3 and NEWPHONE_FLAG=1 display "INTERVIEWER
NOTE: THE NUMBER FOR THIS CASE WAS CHANGED BY THE RESPONDENT ON
A PREVIOUS CALL.]

ONE	01
TWO	02
THREE OR MORE.....	03
NONE	04
DON'T KNOW	77
REFUSED	99

[IF IAP= VIRGIN ISLANDS & IF LF_LNDLN = 2, 77, OR 99, SKIP TO LF_ISLAND,
ELSE IF IAP=GUAM & IF LF_LNDLN = 2, 77, OR 99, SKIP TO LF_VIL,
ELSE IF LF_LNDLN = 2, 77, OR 99, SKIP TO LF_Q22.
ELSE GO TO LF_11Q16]

LF_11Q16 Of all the telephone calls that you and your household receive, are nearly all received on cell phones, nearly all received on landline phones, or some received on cell phones and some received on landline phones?

NEARLY ALL RECEIVED ON CELL PHONES 1
 NEARLY ALL RECEIVED ON LANDLINE
 PHONES 2
 SOME RECEIVED ON CELL PHONES AND
 SOME RECEIVED ON LANDLINE PHONES 3
 DON'T KNOW 77
 REFUSED 99

[IF IAP = VIRGIN ISLANDS GO TO LF_ISLND

ELSE IF IAP=GUAM GO TO LF_VIL
 ELSE GO TO LF_Q22]

LF_VIL In which village do you live?

AGANA HEIGHTS 01
 AGAT 02
 ASAN 03
 BARRIGADA 04
 CHALAN PAGO 05
 DEDEDO 06
 HAGATNA/AGANA 07
 INARAJAN 08
 MAINA 09
 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
 REFUSED 99

[ALL GO TO LF_Q22]

LF_ISLAND On what island do you live?

SAINT CROIX 01
SAINT THOMAS 02
SAINT JOHN 03
WATER ISLAND 04
DON'T LIVE IN VIRGIN ISLANDS 05
DON'T KNOW 77
REFUSED 99

[ALL GO TO LF_12EXT]

LF_11Q22 Please tell me your zip code.

DON'T KNOW 77777 IF IAP= PUERTO RICO GO
TO LF_11Q22APR; ELSE GO
TO LF_11Q22A
REFUSED 99999 IF IAP= PUERTO RICO GO TO
LF_11Q22APR; ELSE GO TO
LF_11Q22A

ELSE IF IAP=GUAM, GO TO LF_12EXT

LF_11Q22APR In what city and state you live?

CITY _____ IF "NOT IN PUERTO RICO"
SELECTED, GO TO
LF_11Q22A; ELSE GO TO
STATE.
STATE _____ GO TO LF_11Q22D

LF_11Q22A In what city, county, and state you live?

CITY _____
COUNTY _____
STATE _____ GO TO LF_11Q22D

LF_11Q22CONF

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

YES 1 GO TO LF_11Q22F
NO 2 GO TO LF_11Q22B

LF_11Q22D Just to confirm, I have your zip code as [FILL FROM LF_11Q22]. Is that correct?

YES 1 GO TO LF_11Q22F

NO 2 GO TO LF_11Q22E

LF_11Q22E What is your zip code?

ENTER ZIP CODE _____ (IF IAP= PUERTO RICO THEN SKIP TO LF_12_EXIT; ELSE SKIP TO LF_11Q22F)

LF_11Q22F Do you live within city limits?

YES 1 IF INCENTIVE > 0 GO TO ADDRESS_CONF, ELSE GO TO LF_12_EXIT

NO 2 IF INCENTIVE > 0 GO TO ADDRESS_CONF, ELSE GO TO LF_12_EXIT

DON'T KNOW 77 IF INCENTIVE > 0 GO TO ADDRESS_CONF, ELSE GO TO LF_12_EXIT

REFUSED 99 IF INCENTIVE > 0 GO TO ADDRESS_CONF, ELSE GO TO LF_12_EXIT

VRYPADD I need to verify your mailing address so that we can mail your \$10/\$11 for completing this survey.

If P_INCGRP=1:

(01) ADDRESS IS CORRECT

(02) ADDRESS IS NOT CORRECT

(77) DON'T KNOW

(99) REFUSED

If P_INCGRP=2:

(01) DOES NOT WANT TO GIVE ADDRESS

(02) WILL GIVE ADDRESS

(77) DON'T KNOW

(99) REFUSED

LF_12_EXIT Those are all the questions I have. I'd like to thank you on behalf of the (IF IAP=GUAM
DISPLAY: 'Department of Public Health and Social Services and the') (IF IAP= 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. If you
have questions about your rights as a survey participant, you may call the chairman of the
Research Ethics Review Board at 1 - 8 0 0 - 2 2 3 - 8 1 1 8. Thank you again.