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Childhood COVID-19 Immunization Coverage Survey (CCICS), 2023

Methodological Report

Prepared for the Public Health Agency of Canada

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Ce rapport est aussi disponible en français.

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This report presents the methodological details for the *Childhood COVID-19 Immunization Coverage Survey (CCICS), 2023* conducted by Advanis Inc. on behalf of the Public Health Agency of Canada (PHAC). The survey was administered among 11,395 members of the adult Canadian general public, between April 11 and July 26, 2023.

Ce rapport est aussi disponible en français sous le titre: Enquête sur la couverture vaccinale des enfants contre la COVID-19 (ECVEC), 2023

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1. Executive Summary

1.1 Background

In December 2020, COVID-19 vaccines were authorized for use in individuals 16 years of age and older. In August 2021, Health Canada subsequently expanded the Interim Order authorization for adolescents 12 to 17 years of age. In March 2022, COVID-19 vaccine was authorized for use among children 5 to 11 years of age, in July 2022 the vaccine was authorized for children 6 months to 4 years. Furthermore, in December 2022, NACI recommended one bivalent booster dose for children 5 to 11 years of age, especially those considered high risk. This is consistent with recommendations for children 12 years and older that came out prior to this. Throughout this period of incremental vaccine rollout to children, PHAC has adapted existing surveillance tools and created new approaches to enable national and jurisdictional coverage assessment of COVID-19 vaccine uptake as more age groups become eligible.

NACI recommends continuous monitoring of COVID-19 vaccine uptake, particularly according to the socioeconomic status of families with children, and for decision makers to consider measures to reduce the risk of socioeconomic disparities in vaccine confidence and uptake. Coverage assessment for COVID-19 vaccination is measured for eligible age groups through provincial and territorial immunization registries. However, immunization registries do not provide information on socioeconomic determinants of health, Sex and Gender based Analysis (SGBA)+ indicators, and parental knowledge, attitudes and beliefs (KAB). Another surveillance tool, the childhood National Immunization Coverage survey (cNICS) is a biennial survey that measures routine childhood immunization coverage among children aged 2, 7, 14 and 17 year olds. The cNICS 2021 included questions on COVID-19 vaccination among 14 and 17 years old (coverage rates and reasons for not getting the vaccine) as well as intentions to get vaccinated (all children). Yet, cNICS does not collect information on a representative sample of Canadian children aged 6 months to younger than 18 years old; therefore, its sampling frame is not suitable to collect information on COVID-19 and flu vaccines.

Monitoring parental attitudes is essential to predict expected vaccine uptake and to guide education and awareness efforts to promote vaccination. In October 2021, public opinion research in Canada indicated that while more than half (51%) of elementary school parents intended to vaccinate their children as soon as the COVID-19 vaccine became available, 23% indicated they would not vaccinate their children and a further 18% would wait a while before doing so. In July 2022, just 40% of parents of children <5 years of age indicated they had or would vaccinate their children and 42% will not get their children vaccinated. Parents with higher income (>\$100,000) and education (university education or higher) reported higher intentions to vaccinate their children. Parents who were undecided or did not intend to vaccinate their child against COVID-19 reported concerns about the safety of the vaccine, the speed of vaccine development and that it was a new vaccine as their top three reasons for not vaccinating their child. Parents also reported not enough information about the risk of long COVID were their primary reasons or that their child had already had COVID-19 and recovered quickly with minimal symptoms.

Continued monitoring of parental knowledge and views are important to adapt public communication and education accordingly.

There is also a continued need to collect information on flu vaccine coverage among children especially in the midst of the COVID-19 pandemic to investigate any relationships with COVID-19 vaccination. Flu is also a public health concern among children with immunocompromised status or children who have chronic medical conditions. CCICS was implemented in 2022 to close knowledge gaps around annual flu vaccine

coverage among children. The only other source that collected some information on flu vaccination among children was the Canadian Health Survey on Children and Youth (CHSCY) 2019.

In addition, there are challenges with estimating influenza vaccination coverage among children because influenza vaccines are not consistently recorded in parent-held records and therefore results reported from parents are subject to recall bias. All efforts shall be made to minimize parental recall bias for the proposed survey. For example, attempts will be made to collect data in spring right after the flu season.

1.2 Objectives

The primary objective of this research is to continue a surveillance program established in 2022 that will provide both national and provincial/territorial level estimates on an annual basis.

Specifically, this research aims to:

- Provide data on:
 - COVID-19 immunization coverage among children in Canada younger than 18 years of age who are eligible for vaccination.
 - Parental intentions to vaccinate children who have not yet been vaccinated.
- Determine parental knowledge, attitudes and beliefs towards their child's COVID-19 vaccination.
- Determine barriers to COVID-19 immunization among children (e.g., vaccine hesitancy).

Secondary objectives of this research are to:

- Collect information on key indicators of childhood seasonal influenza vaccine coverage, for example:
 - Vaccine coverage in the past flu season
 - Knowledge, attitudes and beliefs around flu vaccines
 - Impact of COVID-19 on flu vaccine uptake
- Collect information on chronic medical conditions and socioeconomic indicators to examine vulnerable children or those at higher risk of COVID-19 and influenza complications by applying SGBA+ analysis (when possible).

Results will be used by PHAC to promote vaccine uptake, leverage public opinion research to address evolving issues relating to vaccine hesitancy.

1.3 Methodology

Data collection started April 11, 2023, and ended July 26, 2023, and was conducted by Advanis.

Advanis sought a probability-based sample of 11,200 Canadian parents/guardians aged 18 or older through the use of Advanis' General Population Representative Sample (GPRS) sample and through Random digit dialing (RDD).

Data was collected using a multimodal approach, collecting survey responses online and on the phone, to obtain a nationally representative sample. First, participants taken from our GPRS sample were recruited by phone and were invited to participate in a Web survey. Those who agreed to participate received an email or SMS inviting them to take part in the survey. In hard-to-reach populations, the survey was also offered by phone, using a Computer Assisted Telephone Interviewing (CATI) methodology.

Survey results were weighted by region, children's age group and children's sex at birth. The results for 2023 are based on responses from 11,395 parents/guardians (18 years of age or older) with children younger than 18 years of age across all provinces and territories. Recruitment ensured quotas were reached for key sub-populations to ensure statistical relevance and representativeness.

Weighted results can be extrapolated to the broader population. Cross tabulations must align with the weighted categories to be extrapolated to the broader population.

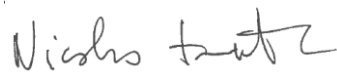
1.4 Contract Value

The contract value for this survey was \$296,462.85 (including HST).

1.5 Political Neutrality Requirement

I hereby certify as a Senior Officer of Advanis that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the Communications Policy of the Government of Canada and Procedures for Planning and Contracting Public Opinion Research.

Specifically, the deliverables do not contain any reference to electoral voting intentions, political party preferences, standings with the electorate, or ratings of the performance of a political party or its leader.



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2. Methodology

PHAC contracted Advanis to conduct the *Childhood COVID-19 Immunization Coverage Survey 2023* (CCICS), a survey of Canadian parents/guardians of children and adolescents younger than 18 years of age. Data collection started April 11, 2023, and ended July 26, 2023, and was conducted by Advanis.

The project used Advanis' proprietary General Population Random Sample (GPRS), using an IVR-to-Web and CATI-to-Web methodology to contact potential respondents. This consists of using our proprietary interactive voice response (IVR) system and our in-house CATI call center to conduct random digit dialing (RDD) to recruit respondents to be part of the GPRS sample.

This method is probability-based; that is, every recruit has an equal and known chance of being invited to participate since Advanis uses a random sampling approach when selecting people to invite from its GPRS sample. Advanis then used a two-step approach where people who are part of our GPRS sample were recruited by telephone to participate in an online web survey.

The study used Advanis' proprietary, probability-based General Population Representative Sample (GPRS) to recruit respondents to participate in a web survey and random digit dialing (RDD) for harder to reach populations. The probability-based study was conducted using a two-step approach where respondents were recruited by phone to participate in an online web survey. Respondents were invited to participate in the online survey by either email or SMS (text message), based on their preference at the time of recruitment. After the initial invitation, if respondents had not yet completed the survey, they were sent up to two (2) reminder messages. Reminder messages were sent 3 and 6 days after the initial recruitment.

There can be an unknown bias since not everyone agrees to participate in studies. The inherent potential bias of our GPRS sample is similar to other random sampling approaches.

2.1 Survey Design

The questions for this survey were designed by the Public Health Agency of Canada and supplied to Advanis. Advanis was responsible for the French survey translation. The questionnaire contained questions for the parent and the child on demographics, immunization for influenza and COVID-19, and knowledge, attitudes and beliefs (KAB) questions on COVID-19 and influenza vaccines.

The Government of Canada's standards for pre-testing were adhered to. The pretest was conducted in both English and French. The pretest was conducted in two phases. The first phase was conducted April 11, 2023. The second phase was conducted from April 19th to April 21, 2023. In the first phase, Advanis conducted phone surveys with 10 participants from across Canada (6 English and 4 French). Respondents were recruited by wireless numbers. During the first phase the phone survey length averaged 28.6 minutes, the target was 18 minutes. The pretest was then paused to shorten the survey.

The second phase also started with a phone survey to determine if the length now met requirements. This resulted in 8 English and 7 French phone completes. The average length during the second phone pretest was around 21 minutes which was in line with requirements once interviewers became more familiar with the survey. A recruit to online pre-test was conducted next. Of the 121 people recruited to the web survey 41 completed the online survey (26 English and 15 French). The pretest data was cleaned and retained for the final analysis since most of the revisions included hiding questions and levels as well as adding instructions for respondents.

The average survey length for completing the survey online was 14.0 minutes and 18.7 minutes for completing it on the phone.

2.2 Sampling and Administration

The target audience for this project was Canadian parents/guardians of children and adolescents younger than 18 years old living in the 10 provinces and three territories. The targeted number of completed surveys was 11,200 Canadian adults. Key sub-population that required quotas were :

- Parents/guardians with children in the following age groups: 0-4 years, 5-11 years, 12-17 years
- Parents/guardians in specific regions (individual provinces and territories)
- Children of both sexes (50% males, 50% females)

Respondents needed to be parents/legal guardians of children aged 18 or less and living in Canada in order to be eligible for the survey. Participants were taken from our GPRS sample and others were reached through Random digit dialing (RDD). If a participant expressed the desire to complete the survey online, they were sent an email or SMS invitation.

To target parents/guardians in Atlantic and Northern provinces/territories who are often more difficult to reach online, prospective participants were reached on the phone and were asked if they wanted to complete the survey with an interviewer. Those who agreed to participate in the survey were interviewed with the use of Computer Assisted Telephone Interviewing (CATI) methodology.

A total of 11,395 responses were obtained (9,142 in English and 2,253 in French) to reach quotas, where possible (Table 1). Overall, 51.1% of children were male and 48.9% were female.

Table 1: Completes and targets

Population Groups by Province	Total Completes	Total target	0 to 4 Completes	0 to 4 Target	5 to 11 Completes	5 to 11 Target	12 to 17 Completes	12 to 17 Target
NF	442	400	92	90	175	90	175	90
NS	495	475	125	90	178	90	192	90
PEI	400	400	93	90	152	90	155	90
NB	483	475	123	90	180	90	180	90
QC	2,163	2,100	707	450	762	450	694	450
ON	3,262	3,250	832	700	1,148	700	1,282	700
MB	509	500	139	100	178	100	192	100
SK	505	500	146	100	169	120	190	120
AB	1,371	1,350	382	300	497	300	492	300
BC	1,355	1,300	340	310	510	310	505	310
NT	175	150	33	30	71	30	71	30
NU*	36	150	14	30	11	30	11	30
YT	199	150	43	30	77	30	79	30

Total	11,395	11,200	3,069	2,415	4,108	2,435	4,218	2,435
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*Only targets for Nunavut were not met. It was agreed with PHAC during data collection that the numbers represented the best effort given the resources available and the timeline.

2.3. Web methodology

Invitations were sent by SMS/email and grouped by province, to ensure that they were sent out during appropriate hours within each time zone. Invitations were sent to a targeted sample that matched the target audience characteristics based on already compiled information in our GPRS sample.

Overall, 35,927 people were recruited to the web survey, with 10,729 participating, for a response rate of 29.9%. However, 695 were screened out either for refusing to provide the number of children, not being a parent or legal guardian, or for living outside Canada. Hence, 10,034 eligible participants completed the web survey.

After sending the initial invitation, a reminder message was sent three days later to applicants who did not complete a survey or who were not screened out of the survey. The majority of respondents were sent two reminder messages. English respondents in the PEI, NB, NL and Northern territories were sent three reminder messages. Overall, 79,806 SMS and email messages were sent during data collection for this study.

Table 2: Number of invitations/reminders sent

Message ID	Purpose	Total Sent
1	Invitation (EN)	28,670
2	Invitation (FR)	7,257
3	Reminder 1 (EN)	19,695
4	Reminder 1 (FR)	4,479
5	Reminder 2 (EN)	15,242
6	Reminder 2 (FR)	3,320
7	Reminder 3 (EN)	1,143
Total		79,806

Each survey had a unique number embedded in the hyperlink to eliminate the possibility of duplicate responses from any participant.

2.4. CATI methodology

Participants who completed the survey on the phone were reached between April 11, 2023, and July 25, 2023. Interviews were offered in French or English based on respondent preference. In total, 129,496 potential respondents were called and 16,284 agreed to participate in the survey. The response rate for the CATI portion of the study was 15.0%. Of those who agreed to participate, 14,923 were ineligible. In total, 1,361 respondents completed the survey on the phone.

Overall, 11,395 respondents completed the survey (web or CATI), with a response rate of 18.7%, and a margin of error of +/-0.92% (19 times out of 20 at a 95% confidence interval). More detailed data collection statistics can be found in Appendix B.

2.5 Weighting and Data Cleaning

A direct weighting approach was conducted using three variables: age, sex assigned at birth and province. The population sizes are based on the latest Statistics Canada census results published for the 2021 census. This weight and its corresponding weighting scheme identifier are provided in the final clean data. Detailed weight values can be found in Appendix A.

Bootstrap weights were generated by drawing random samples with replacement from the primary sampling units; each bootstrap sample generated the same number of responses as the original data set. These weights were calculated using the same method implemented in the direct approach described above. There was no need to reduce the risk to contravening confidentiality, since all the different groups described in the weighting scheme participated in the study. The final number of weights created equals the number of bootstrap samples generated. A total of 500 mean bootstrap weight variables are provided in a separate file.

The database was cleaned to remove any errors at the end of the data-collection phase, and all unique identifiers in the client profiles were removed in the final data set provided to PHAC. The verbatim responses were reviewed, and no unique identifiers were found. For verbatim responses, if the verbatim response aligned with an existing question level the response was recoded to match the existing level. New levels were created when needed.

2.6. Quality Control

Advanis employs several quality control measures to ensure success across the entire life cycle of the project. These measures are detailed below.

Survey Programming: Advanis utilizes technology to maximize quality control in survey programming. Having developed a proprietary survey engine tool, Advanis professionals are able to design and program a survey in a browser-based environment, eliminating the need to involve a programmer who is less familiar with the survey subject matter. The survey was thoroughly pre-tested by Advanis' project team members, as well as by non-team members (non-team members provide "fresh eyes" for catching potential errors).

CATI Methodology: The CATI recruit script was programmed on Advanis' proprietary CATI platform with no unforeseen challenges. Advanis was able to leverage its experience for the survey programming and

the reminder process to achieve high quality standards. Advanis implemented the following to ensure the highest quality data collection:

- Trained the interviewers to best understand the survey's objectives and to ensure that they were able to pronounce and understand the survey wording.
- Detailed call records were kept by the automated CATI system, and were monitored for productivity analysis (i.e., not subject to human error).
- The recruit scripts were pre-tested for best possible flow.
- Our average interviewer employment tenure is very high compared to industry standards, resulting in a team of interviewers who are more experienced and knowledgeable regarding the target audience.
- Advanis' Quality Assurance team listened to the actual recordings of ten percent of completed surveys and compared the responses to those entered by the interviewer, to ensure that responses were properly recorded. This is in addition to the live monitoring done by field supervisors.
- Team Supervisors conduct regular, more formal evaluations with each interviewer, in addition to nightly monitoring of each interviewer on their team.

To ensure high interview quality, our interviewers are trained to use various interviewing techniques. As well as maintaining a professional attitude, our interviewers must also be convincing, read word-for-word, take notes, systematically confirm the information given and listen to the respondent. Advanis has also created internal tools within the survey script for interviewers allowing them to use the phonetic alphabet to confirm email address spelling (e.g., a for alpha, b for bravo, etc.) to help reduce the amount of bounced email addresses. However, should bounced emails occur, Advanis has also developed additional tools that allow for someone to re-listen to the recording and easily adjust to correct the email address.

Web Methodology: All Advanis web surveys are hosted internally by Advanis, and employ a rigorous and stringent set of data collection control mechanisms to ensure the highest quality for the data collected, including:

- Respondents have a unique access code to ensure that only that respondent can complete the online survey.
- Extensive internal logic checks are programmed directly into the survey to ensure logical responses.
- Web surveys are implemented using Advanis' proprietary software (which is designed to handle complicated survey formats).
- Advanis administered a detailed internal test and an external pretest to ensure that the survey instrument was working as planned.
- Tested the questionnaire in multiple browsers and provided PHAC with a link so they could do internal testing.

Data Handling and Reporting: For the data collected, Advanis develops rules to check the validity of the data. These rules include items such as:

- Time taken to complete the survey.
- Checking for verbatims that are gibberish or don't make sense.
- Rigorous checks are completed to ensure the data is accurate and error-free according to the questionnaire logic (skip patterns).

All data cleaning performed on projects are outlined and tracked in an internal spec document so they can be QA'd and signed off on. The original raw data file is never overwritten, so that if an error is discovered

in our code, we can quickly and easily rerun things to produce a new data file. Individuals developing code incorporate internal checks in their code (e.g., crosstabs) to ensure the adjustment had the desired effect. In addition, all recoding is reviewed by another team member or technical specialist for accuracy.

3. Non-response Bias and Limitations

Non-response bias occurs when non-responders differ in a meaningful way from respondents and this difference impacts the information gathered. It is difficult to assess the presence of non-response bias since information about why non-responders did not participate is usually unavailable. One way to gauge the potential impacts of non-response bias is to evaluate if the sample is representative by comparing the respondents' characteristics and gauge if they reflect known population characteristics. Where possible, we can check the distribution of respondents across various demographic (e.g., age and gender) and geographic categories and compare those distributions against known population characteristics. If the variation is fairly small and we have no reason to believe there are other factors impacting respondents' willingness to participate, we can conclude that the likelihood of non-response bias impacting the information gathered in the survey is minimal. This is the case with the current survey.

Several strategies were employed to increase response rates and reduce the effects of non-response bias. These include:

- Recruiting respondents by telephone (cellular).
- Outpulsing a local phone number (rather than a toll-free number) which increases pick-up rates (reducing call screening).
- Systematically setting the next call date and time based on the outcome of the current call, which ensures that each respondent is called methodically across days of the week and times of the day. Especially for respondents that are difficult to reach, this maximizes the likelihood of reaching them.
- Sending an SMS text message to recruits, which assures a seamless transition from the telephone survey to the online survey, as receipt can be confirmed in real time and encourages respondents to complete the survey as soon as the call ends.
- Collecting both email address and telephone number for recruitment so that if the email address does bounce, we can contact them via SMS message if they agree.
- Offering the survey in both official languages to maximize ease of completion.

4. Guidelines for Analysis and Release

When doing an analysis, it is important to align the analysis plan with the weighting scheme. The weights adjust the data to better reflect the population based on parameters that have been chosen to maximize the level of detail without creating distortions due to extreme weights (an extreme weight will occur when a population group is represented by a proportionally smaller subset of respondents compared to other population groups, thus introducing an important risk of bias due to their specific profile).

For this survey, the basic sociodemographic information that should be used in the analysis of results are:

- Provinces and Territories
- Age: 0 to 4, 5 to 11 and 12 to 17, or any unaltered grouping of these ranges (i.e., 0 to 11 or 5 to 17)
- Sex: male or female

Using age groupings other than the ones described above could potentially produce distorted data. As these results would be inaccurate based on how the weights were calculated, we strongly advise not to report any results that are not aligned with these specified categories.

Any results with an unweighted base size (denominator) of less than 30 should not be reported, due to statistical robustness.¹⁻² This is due to the increased coefficient of variation and, hence, there are larger confidence intervals around results with smaller bases. Furthermore, for confidentiality purposes, any estimates with an unweighted numerator of less than 5 (i.e., 1 to 4) should be suppressed.

For all estimates based on a denominator size of 30 or more, the following guidelines for data suppression related to coefficient of variations (CV) should be used when reporting estimates:²

Type of Estimate	CV (in %) ³	Guidelines
Acceptable	CV ≤ 15.0	Estimates can be considered for general unrestricted release. Requires no special notation.
Marginal	15.0 < CV ≤ 35.0	Estimates can be considered for general unrestricted release but should be accompanied by a warning cautioning users of the high sampling variability associated with the estimate.
Unacceptable	CV > 35.0	It is recommended to not release estimates of unacceptable quality.

Examining the confidence interval of the estimate will provide further indication of the quality of the estimate in terms of the variability. Long confidence intervals indicate less precision in the estimate while smaller confidence intervals indicate greater precision. When assessing the trustworthiness of sample proportions, the confidence intervals of estimates should be taken into account.²

4.1 Rounding Guidelines

Users are urged to adhere to the following rounding guidelines for estimates.

- Estimates in the main body of a statistical table are to be rounded to the nearest hundred units using the normal rounding technique. In normal rounding, if the first or only digit to be dropped is 0 to 4, the last digit to be retained is not changed. If the first or only digit to be dropped is 5 to 9, the last digit to be retained is raised by one. For example, in normal rounding to the nearest 100, if the last two digits are between 00 and 49, they are changed to 00 and the preceding digit (the hundreds digits) is left unchanged. If the last digits are between 50 and 99, they are changed to 00 and the preceding digit is increased by 1.
- Marginal sub-totals and totals in statistical tables are to be derived from their corresponding unrounded components and then are to be rounded themselves to the nearest 100 units using normal rounding.
- Averages, rates and percentages are to be computed from unrounded components (i.e., numerators and/or denominators) and then are to be rounded themselves to one decimal using

¹ CDC. National Center for Health Statistics Data Presentation Standards for Proportions. 2017. Available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf

² Statistics Canada. Canadian Community Health Survey User Guide. 2021.

³ CV= (standard error / coefficient) * 100 where the coefficient is either the regression coefficient or the proportion estimate.

normal rounding. In normal rounding to a single digit, if the final or only digit to be dropped is 0 to 4, the last digit to be retained is not changed. If the first or only digit to be dropped is 5 to 9, the last digit to be retained is increased by 1.

- Under no circumstances are unrounded estimates to be published or otherwise released by users. Unrounded estimates imply greater precision than actually exists.

Appendices

APPENDIX A: WEIGHTS FOR THE DIRECT WEIGHTING METHOD

Weight Category	Unweighted N	Weighted N	Weight
Male, 0 to 4, Alberta (AB)	192	208	1.08587981
Male, 0 to 4, British Columbia (BC)	173	182	1.05249066
Male, 0 to 4, Manitoba (MB)	76	66	0.87119475
Male, 0 to 4, New Brunswick (NB)	51	27	0.52191476
Male, 0 to 4, Newfoundland and Labrador (NL)	43	16	0.36831568
Male, 0 to 4, Northwest Territories (NT)	20	2	0.12151229
Male, 0 to 4, Nova Scotia (NS)	72	34	0.46534618
Male, 0 to 4, Nunavut (NU)	6	3	0.53558918
Male, 0 to 4, Ontario (ON)	424	576	1.35862755
Male, 0 to 4, Prince Edward Island (PE)	51	6	0.11399986
Male, 0 to 4, Quebec (QC)	363	341	0.93935585
Male, 0 to 4, Saskatchewan (SK)	72	58	0.81043215
Male, 0 to 4, Yukon (YT)	17	2	0.1109714
Male, 5 to 11, Alberta (AB)	254	316	1.24329916
Male, 5 to 11, British Columbia (BC)	268	281	1.04923933
Male, 5 to 11, Manitoba (MB)	90	101	1.12756539
Male, 5 to 11, New Brunswick (NB)	89	44	0.49053642
Male, 5 to 11, Newfoundland and Labrador (NL)	96	27	0.28212666
Male, 5 to 11, Northwest Territories (NT)	40	3	0.08341165
Male, 5 to 11, Nova Scotia (NS)	98	54	0.54646597
Male, 5 to 11, Nunavut (NU)	7	5	0.67837044
Male, 5 to 11, Ontario (ON)	588	865	1.4711803
Male, 5 to 11, Prince Edward Island (PE)	77	9	0.12295119
Male, 5 to 11, Quebec (QC)	385	523	1.35968007
Male, 5 to 11, Saskatchewan (SK)	84	89	1.05438609
Male, 5 to 11, Yukon (YT)	47	3	0.06287373
Male, 12 to 17, Alberta (AB)	263	260	0.98708921
Male, 12 to 17, British Columbia (BC)	253	243	0.96055276
Male, 12 to 17, Manitoba (MB)	103	81	0.78214173
Male, 12 to 17, New Brunswick (NB)	99	39	0.39335601
Male, 12 to 17, Newfoundland and Labrador (NL)	81	25	0.31427303
Male, 12 to 17, Northwest Territories (NT)	37	3	0.07411623
Male, 12 to 17, Nova Scotia (NS)	84	47	0.55784129
Male, 12 to 17, Nunavut (NU)	8	4	0.43991073
Male, 12 to 17, Ontario (ON)	644	773	1.20023865
Male, 12 to 17, Prince Edward Island (PE)	72	9	0.12098257
Male, 12 to 17, Quebec (QC)	364	425	1.1668763

Male, 12 to 17, Saskatchewan (SK)	92	71	0.77700232
Male, 12 to 17, Yukon (YT)	39	2	0.05415094
Female, 0 to 4, Alberta (AB)	190	199	1.04832862
Female, 0 to 4, British Columbia (BC)	167	171	1.02410179
Female, 0 to 4, Manitoba (MB)	63	63	1.00688615
Female, 0 to 4, New Brunswick (NB)	72	25	0.35371038
Female, 0 to 4, Newfoundland and Labrador (NL)	49	15	0.30578293
Female, 0 to 4, Northwest Territories (NT)	13	2	0.15857335
Female, 0 to 4, Nova Scotia (NS)	53	32	0.60043955
Female, 0 to 4, Nunavut (NU)	8	3	0.40110087
Female, 0 to 4, Ontario (ON)	408	547	1.34159968
Female, 0 to 4, Prince Edward Island (PE)	42	5	0.12780892
Female, 0 to 4, Quebec (QC)	344	324	0.94064083
Female, 0 to 4, Saskatchewan (SK)	74	56	0.76248141
Female, 0 to 4, Yukon (YT)	26	2	0.06104104
Female, 5 to 11, Alberta (AB)	243	303	1.24529454
Female, 5 to 11, British Columbia (BC)	242	264	1.09143019
Female, 5 to 11, Manitoba (MB)	88	96	1.09403684
Female, 5 to 11, New Brunswick (NB)	91	42	0.46063516
Female, 5 to 11, Newfoundland and Labrador (NL)	79	25	0.32023432
Female, 5 to 11, Northwest Territories (NT)	31	3	0.11047496
Female, 5 to 11, Nova Scotia (NS)	80	51	0.63575276
Female, 5 to 11, Nunavut (NU)	4	5	1.13710916
Female, 5 to 11, Ontario (ON)	560	830	1.48187522
Female, 5 to 11, Prince Edward Island (PE)	75	9	0.12156482
Female, 5 to 11, Quebec (QC)	377	502	1.33024867
Female, 5 to 11, Saskatchewan (SK)	85	85	0.9998736
Female, 5 to 11, Yukon (YT)	30	3	0.08951878
Female, 12 to 17, Alberta (AB)	229	249	1.08813852
Female, 12 to 17, British Columbia (BC)	252	236	0.93647116
Female, 12 to 17, Manitoba (MB)	89	79	0.89187636
Female, 12 to 17, New Brunswick (NB)	81	37	0.4626927
Female, 12 to 17, Newfoundland and Labrador (NL)	94	24	0.25652482
Female, 12 to 17, Northwest Territories (NT)	34	3	0.08246371
Female, 12 to 17, Nova Scotia (NS)	108	45	0.41424909
Female, 12 to 17, Nunavut (NU)	3	3	1.15996166
Female, 12 to 17, Ontario (ON)	638	743	1.16452426
Female, 12 to 17, Prince Edward Island (PE)	83	9	0.10348663
Female, 12 to 17, Quebec (QC)	330	410	1.2413567
Female, 12 to 17, Saskatchewan (SK)	98	69	0.70749492
Female, 12 to 17, Yukon (YT)	40	2	0.05027551

APPENDIX B: RESPONSE RATE CALCULATION

Canada Response Rate	CATI – (RDD)	Web – (GPRS)	Total	TOTAL
Generated	129,496	35,927	165,423	100.0%
Used	129,496	35,927	165,423	100.0%
No service	14,102	-	14,102	8.5%
Not residential/business	1,035	-	1,035	0.6%
Line problems	4,937	-	4,937	3.0%
Fax	413	-	413	0.2%
Wrong number	39	-	39	0.0%
Invalid⁴	20,526	0	20,526	12.4%
Potentially Eligible	108,970	35,927	144,897	87.6%
U. No answer	30,837	25,198	56,035	38.7%
U. Busy	206	-	206	0.1%
U. Answering machine/voicemail	52,555	-	52,555	36.3%
U. Unresolved⁵	83,598	25,198	108,796	65.8%
IS. Language barrier	246	-	246	0.2%
IS. Illness/incapacity	70	-	70	0.0%
IS. Household refusals	1,626	-	1,626	1.1%
IS. Respondent refusal	3,981	-	3,981	2.7%
IS. Appointments	2,559	-	2,559	1.8%
IS. In-Scope Non-Responding⁶	8,482	-	8,482	5.1%
R. Non eligible	14,923	695	15,618	10.8%
R. Quota Blocked	0	0	0	0.0%
R. Completed	1,361	10,034	11,395	7.9%
R. Responding Units⁷	16,284	10,729	27,013	18.6%
% REFUSAL⁸	5.1%	n/a	3.9%	
% COMPLETED⁹	1.2%	27.9%	7.9%	
COOPERATION RATE¹⁰	64.2%	n/a	74.8%	
RESPONSE RATE¹¹	15.0% ¹²	29.9% ¹³	18.7%	

⁴ No possible contact

⁵ Cases that cannot be determined whether call/invitation was made to eligible or ineligible respondent

⁶ Includes refusals, break-offs, and other eligible non-respondents

⁷ Includes cases who would have participate but were disqualified, completes and partial completes

⁸ Household + Respondent Refusal / Potentially Eligible Sample

⁹ Completed / Potentially Eligible Sample

¹⁰ Responding Units / (Potentially Eligible - Unresolved)

¹¹ Responding Units / (Unresolved + In Scope Non-Responding + Responding Units)

¹² CATI Responding Units / (CATI Unresolved + CATI In Scope Non-Responding + CATI Responding Units)

¹³ Web Responding Units / (Invited to participate in the web survey)

PHAC CCICS Parent Survey 2023
Government of Canada (Non-protected)



Languages: English

Page RECRUIT TO WEB INTRO

RecruitParent

Hello, this is _____ calling from TellCityHall and the Government of Canada. We are conducting an **online** study about **children's** healthcare in Canada. Your answers will help to make informed recommendations to our Government.

Are you a parent or legal guardian of a child under the age of 18?

- 1 Yes, continue
- 2 Refused
- 3 Call back
- 4 Not a parent/guardian of a child that is under 18

RecruitInt *Show if Recruit parent continue (RecruitParent = 1)*

Great, we would like to send you an EMAIL with a link to the study, but if you prefer we can also send you a SMS.

IF NEEDED: We will only send you a message for the purposes of administering this specific survey.

ONLINE SURVEY LENGTH: If asked; the online survey will take approximately 10-15 minutes depending on your answers.

IF PERSON IS ANGRY ABOUT BEING CALLED: We would be happy to put you on our do-not-call list. Thank you for your time today.

Respondent too busy (refusal/appointment): We will send you the study via text message or email and you can complete it when it's more convenient.

If needed: You've completed a study for us in the past, and said you might participate in public policy surveys in the future. TellCityHall is a public policy initiative of Advanis, a market and social research company. Tell City Hall is a service that provides survey information to all levels of government and non-profits. All of your responses are completely anonymous and only group results will be reported. The study can be completed on a smartphone, tablet, or computer.

- 6 Yes - Send email message
- 4 Send SMS/text message to current phone number *(Show if is mobile (phone_source = 2,3)*
- 5 Send SMS/text message to a different number
- 3 Callback later (use sparingly)
- 2 No - Refused (did not agree to email or SMS)
- 7 Not a parent/guardian of a child that is under 18

- 8 Continue on the phone (Special request)

Refcontactmethod Show if Recruit refused ((RecruitParent = 2) OR (RecruitInt = 2))

Thank you for your time. Good-bye.

Status Code: 1000

CBcontactmethod Show if Recruit callback ((RecruitParent = 3) OR (RecruitInt = 3))

Arrange callback.

Status Code: 1001

ParentTermRecruit Show if Recruit notparent ((RecruitParent = 4) OR (RecruitInt = 7))

We're sorry but for this survey we are looking for people who are parents or guardians of children under the age of 18. Thank you for your time.

Status Code: 502

EndSMS Show if send sms (((RecruitInt = 5) OR (CATInt = 5) OR (knowninbound = 5)) OR (RecruitInt = 4) OR (CATInt = 4,5) OR (knowninbound = 4))

Thank you for agreeing to participate. We will send you a text message with a link to the study. Goodbye and have a great day/evening!

Status Code: 480

Section Login page

Page Consent

wcag

Si vous préférez répondre à l'étude en français, veuillez cliquer sur français

You have been invited to participate in the 2023 Childhood COVID-19 Immunization Coverage Survey (CCICS). The Public Health Agency of Canada has contracted an independent public opinion research company, [Advanis \(opens in a new window\) \(http://advanis.net\)](http://advanis.net), to conduct this research on behalf of the Public Health Agency of Canada. TellCityHall is one of Advanis' data collection methods. The online survey is voluntary and will take approximately 10-15 minutes to complete.

This research has been approved by the Public Health Agency of Canada Research Ethics Board.

If you agree to participate in this survey, please click on the following button to continue:

START SURVEY

Participation in this study is voluntary and you can withdraw at any time. There will be no consequences if you decide not to participate. Your decision to participate does not waive your right to legal recourse in the event of research-related harm. You may skip questions that you do not feel comfortable

answering by clicking “Prefer not to answer” where applicable. You may also complete the survey in several sessions and from different devices. If you get interrupted while doing the survey, you **can click on the same link** to pick up right where you left off. Once data has been collected, please note that researchers have no way of knowing which data belongs to which participant.

Why are we collecting your information?

The aim of the ***Childhood COVID-19 Immunization Coverage Survey*** is to measure how many children and teens in Canada have received COVID-19 and flu vaccines. The survey will also ask parents about their views on these vaccines.

Your answers will help develop vaccination programs in Canada. You will be asked questions, such as age, gender, and ethnicity. Your answers will remain confidential and we will not ask you to provide us with any information that could directly identify you or your child, such as name(s), or full date of birth. The protection of your personal information is very important to us and we will make every effort to safeguard it and reduce the risk that you are identified.

What is the Authority to Collect the Information?

The information you provide to the Public Health Agency of Canada is collected under the authority of section 4 of the *Department of Health Act* and section 3 of the *Public Health Agency of Canada Act* and handled in accordance with the *Privacy Act*.

Will we use or share your personal information for any other reason?

The survey firm, Advanis, will be responsible for collecting survey data from all participants. Once data collection is complete, Advanis will provide the Public Health Agency of Canada (PHAC) with a dataset that will not include any personal identifiers to ensure your and your child’s confidentiality. The dataset will also be available to federal and provincial governments and researchers across Canada, if requested. Any reports or publications produced based on this research will use grouped data and will not identify you/your child or link you to these survey results.

What are your rights?

You have a right to complain to the Privacy Commissioner of Canada if you feel your personal information has not been handled properly.

If you have any questions or concerns about the survey or the information we are collecting, please e-mail: sday+ccic@tellcityhall.ca (<mailto:sday+ccic@tellcityhall.ca>)

What You Will Be Asked to Do

You will be asked to complete a 15-minute survey to answer questions related to the COVID-19 and flu vaccines. Please note that certain questions will be asked at the start of the survey, to determine if you are eligible to participate. If you are not eligible to participate, your data will be removed and destroyed.

Benefits

By participating in this study you will help advance understanding of Canadian children’s uptake of COVID-19 and flu vaccines.

Confidentiality

The CCICS will not collect information that directly identifies you or your child and data will be stored on

password-protected computers. Responses will be grouped for analysis and presented in grouped form. Your responses will remain anonymous.

For technical support with the survey, accessibility requirements, or to request to complete the survey over the phone you can contact TellCityHall and Advanis at sday+ccic@tellcityhall.ca (<mailto:sday+ccic@tellcityhall.ca>).

For more information about COVID-19 vaccination: <https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19/vaccines.html> (opens in a new window) (<https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19/vaccines.html>)

This survey is registered with the Canadian Research Insights Council's (CRIC) Research Verification Service. The project verification number is: 20230327-AD528. Click [here](https://www.canadianresearchinsightscouncil.ca/rvs/home/) (opens in a new window) (<https://www.canadianresearchinsightscouncil.ca/rvs/home/>) to verify the legitimacy of this survey.

Section Screeners

S3, S3b, S3c, T4, record, RecordTerm, AgeChildren, B0, Q4, T6, A5, T7, B2ageunder6months, B2age6monthslessthan5, B2ageChild5to11, B2ageChild12to17

Page Your household

S3

(Show if CATI) Would you prefer to continue in English or French? ([switch language based on the response and continue](#))

How many children under the age of 18 currently live in your household (primary or secondary residence)?

DO NOT READ LIST.

(Show if Web) How many children under the age of 18 currently live in your household (primary or secondary residence)?

- 0 None
- 1 1
- 2 2
- 3 3
- 4 4
- 5 5
- 6 6
- 7 7
- 8 8
- 9 9
- 10 10 or more
- 8 I prefer not to answer

S3b Show if Number of children Not provided (S3 = I prefer not to answer)

For our analysis of the data, we **need to know** how many children under the age of 18 you are the parent/legal guardian/person most knowledgeable of.

Are you sure you don't want to give this information?

- ₁ Yes, I'm sure
- ₂ No, I will answer

S3c Show if WillAnswer AND Number not provided ((S3b = 2) AND (S3 = I prefer not to answer))

T4 Show if NoChildren OR Confirmed Number not provided ((S3 = 0) OR (S3b = 1))

We're sorry but for this survey we need to speak with parents/legal guardians of children aged 18 or less that live in your household. Thank you for your time.

Status Code: 503

record Show if isCATI (custom: <<current_mode_is("cati")>>)

Thank you, before we get started please note that this call may be recorded for quality assurance purposes. Participation in this study survey is voluntary and you can withdraw at any time. This research has been approved by the Public Health Agency of Canada Research Ethics Board. Your answers will remain confidential and we will not ask you to provide us with any information that could directly identify you or your child, such as name(s), or full date of birth. This project also has been registered with the Canadian Research Insights Council.

Can we begin?

(Show if CATI) IF MORE DETAIL REQUESTED:

The aim of the Childhood COVID-19 Immunization Coverage Survey (CCICS) is to measure how many children and teens in Canada have received COVID-19 and flu vaccines. The survey will also ask parents about their views on these vaccines. Your answers will help develop vaccination programs in Canada. You will be asked questions, such as age, gender, and ethnicity. Your answers will remain confidential and we will not ask you to provide us with any information that could directly identify you or your child, such as name(s), or full date of birth. The protection of your personal information is very important to us and we will make every effort to safeguard it and reduce the risk that you are identified.

*Participation in this study is voluntary and you can withdraw at any time, and there will be no consequences if you decide not to participate. Your decision to participate does not waive your right to legal recourse in the event of research-related harm. You may skip any questions that you do not feel comfortable answering. You may also complete the survey in several sessions and from different devices. If you get interrupted while doing the survey, you **can click on the same link** to pick up right where you left off. Once data has been collected, please note that researchers have no way of knowing which data belongs to which participant.*

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For technical support with the survey, you can contact TellCityHall and Advanis at sday+ccic@tellcityhall.ca (<mailto:sday+ccic@tellcityhall.ca>).

For more information about COVID-19 vaccination: <https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19/vaccines.html> (<https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19/vaccines.html>)

- 1 Yes
- 2 No, I do not wish to participate

RecordTerm Show if No consent (record = 2)

Thank you for your time. Good-bye.

Status Code: 551

Page Your household

AgeChildren

How old is each child living in your household, starting with the oldest child?

(Show if CATI) Wait for the respondent to say age and then select appropriate level. DO NOT READ AGE BUCKETS UNLESS NEEDED.

- 1. 1st child
- 2. 2nd child *(Show if 2 or more children (S3 = 2,3,4,5,6,7,8,9,10))*
- 3. 3rd child *(Show if 3 or more children (S3 = 3,4,5,6,7,8,9,10))*
- 4. 4th child *(Show if 4 or more children (S3 = 4,5,6,7,8,9,10))*
- 5. 5th child *(Show if 5 or more children (S3 = 5,6,7,8,9,10))*

- 6. 6th child *(Show if 6 or more children (S3 = 6,7,8,9,10))*
- 7. 7th child *(Show if 7 or more children (S3 = 7,8,9,10))*
- 8. 8th child *(Show if 8 or more children (S3 = 8,9,10))*
- 9. 9th child *(Show if 9 or more children (S3 = 9,10))*
- 10. 10th child *(Show if 10 children (S3 = 10))*

- 1 under 6 months
- 2 6 months to less than 5 years
- 4 5 years to less than 12 years
- 5 12 years to less than 18 years

B0

(if Default) During the survey we would like to ask you about your child who is <<ChildAgeInsert>> old. You will be asked questions about this child's vaccination history for COVID-19 and the flu. In order to simplify your responses for the rest of the survey, please provide their initial(s) or a nickname which will be used to refer to this child throughout the survey. This information will not be kept or associated with any of your responses. It will only be used for you as a reference as you are completing this survey.

(Show if CATI) IF NEEDED: Please do not use your child's full name.

(Show if Web) Please do not use your child's full name.

Q4

What is your relationship to <<B0.text>>?

(Show if CATI) READ LIST IF NEEDED

NOTE: If they have more than one child in this age group ask them to please think of the oldest. If family has twins, ask respondent to select one

- 1 Mother
- 2 Father
- 3 I am a legal guardian
- 4 Relative (non-guardian)
- 5 Unrelated

T6 *Show if Unrelated or not legal guardian (Q4 = 4,5)*

We're sorry but for this survey we need to speak with the parent/legal guardian. Thank you for your time.

Status Code: 507

A5

In which province or territory do you reside?

(Show if CATI) DO NOT READ LIST.

- 1 Newfoundland and Labrador
- 2 Prince Edward Island
- 3 Nova Scotia
- 4 New Brunswick
- 5 Quebec
- 6 Ontario
- 7 Manitoba
- 8 Saskatchewan
- 9 Alberta
- 10 British Columbia
- 11 Nunavut
- 12 Northwest Territories
- 13 Yukon
- 14 I live outside of Canada

T7 *Show if Live outside Canada (A5 = 14)*

We're sorry but for this survey we need to speak with those that live in Canada. Thank you for your time.

Status Code: 505

Page Demographic information for your child

B2ageunder6months *Show if Selected Child Under6months (SelectedChild = 1)*

What is the exact age of <<B0.text>>?

- 1 1 month
- 2 2 months
- 3 3 months
- 4 4 months
- 5 5 months
- 8 I prefer not to answer

B2age6monthslessthan5 *Show if 6monthsless5 (SelectedChild = 2)*

What is the exact age of <<B0.text>>?

- 1 6 months
- 2 7 months
- 3 8 months
- 4 9 months
- 5 10 months

- 6 11 months
- 7 1 year old
- 8 2 years old
- 9 3 years old
- 10 4 years old
- 8 I prefer not to answer

B2ageChild5to11 Show if Child5to11 (SelectedChild = 4)

What is the exact age of <<B0.text>>?

- 1 5 years old
- 2 6 years old
- 3 7 years old
- 4 8 years old
- 5 9 years old
- 6 10 years old
- 7 11 years old
- 8 I prefer not to answer

B2ageChild12to17 Show if Child12to17 (SelectedChild = 5)

What is the exact age of <<B0.text>>?

- 1 12 years old
- 2 13 years old
- 3 14 years old
- 4 15 years old
- 5 16 years old
- 6 17 years old
- 8 I prefer not to answer

Section Demographic information of child

B2, B4, B5, G5, G6, F1

Page Demographic information of your child

B2

The next few questions will help us understand background characteristics of children in this survey. Remember that all the information you provide is completely anonymous and will be kept confidential. What was <<B0.text>>'s assigned sex at birth?

(Show if CATI) DO NOT READ.

- 1 Male
- 2 Female
- 3 [DO NOT READ /] Don't know (Exclusive)

- 4 [DO NOT READ /] Prefer not to answer (Exclusive)

B4

What is <<B0.text>>'s racial or ethnic background?

(Show if CATI) READ LIST UNTIL INTERRUPTED, AFTER, PROMPT FOR 'ANY OTHERS?'

IF NEEDED: We recognize this list of racial or ethnic identifiers may not exactly match how you would describe your child.

Select all that apply.

(Show if Web) We recognize this list of racial or ethnic identifiers may not exactly match how you would describe your child.

Select all that apply.

- 1 Black (African, Afro-Caribbean, African descent)
- 2 East/Southeast Asian (e.g., Chinese, Korean, Japanese, Taiwanese, Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent)
- 3 Indigenous (First Nations, Métis, Inuit)
- 4 Latin American
- 5 Middle Eastern and North African (Arab, Algerian, Egyptian, West Asian descent (e.g., Iranian, Israeli, Lebanese, Turkish, Kurdish, etc.))
- 6 South Asian descent (e.g., Afghan, Indian, Pakistani, Bangladeshi, Sri Lankan, etc.)
- 7 White European descent
- 8 Other, please specify: _____
- 9 [DO NOT READ /] Don't know (Exclusive)
- 10 [DO NOT READ /] Prefer not to answer (Exclusive)

B5 *Show if Child identifies as indigenous (B4_3 = 1)*

Does <<B0.text>> identify as First Nations, Métis and/or Inuit?

(Show if CATI) DO NOT READ LIST. Select all that apply.

(Show if Web) Select all that apply.

- 1 First Nations (includes status and non status individuals)
- 2 Métis
- 3 Inuit
- 4 [DO NOT READ /] Don't know (Exclusive)
- 5 [DO NOT READ /] Prefer not to answer (Exclusive)

G5 *Show if Identifies as First Nation (B5_1 = 1)*

Is <<B0.text>>'s primary residence on a reserve?

(Show if CATI) DO NOT READ LIST.

- 1 Yes

- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

G6 *Show if Identifies as Inuit (B5_3 = 1)*

Is <<B0.text>>'s primary residence in Inuit Nunangat (Inuvialuit, Nunavik, Nunatsiavut, or Nunavut)?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

F1

Has <<B0.text>> received all recommended routine vaccinations for their age? Do not include COVID-19 and flu vaccines.

(Show if CATI) READ LIST IF NEEDED.

IF NEEDED: Routine childhood vaccinations for children 0-17 years of age include vaccines against infections such as measles, mumps, rubella, chickenpox, hepatitis B, tetanus, diphtheria, Human papillomavirus, etc.

(Show if Web) Routine childhood vaccinations for children 0-17 years of age include vaccines against infections such as measles, mumps, rubella, chickenpox, hepatitis B, tetanus, diphtheria, Human papillomavirus, etc.

- 1 Yes
- 2 No, only some were received
- 3 No, none
- 4 [DO NOT READ /] Don't know *(Exclusive)*
- 5 [DO NOT READ /] Prefer not to answer *(Exclusive)*

Section COVID 19 and Influenza Immunization

D2, D3, D4, D5, D6, D7, D8, D11, D12, D13, DXa, DXb, DXX, DXXI, DXXII, DXXIII, D14, D15, D19, D20, D21, D23, D22, DX3, D24, D18, Dx2

Page COVID-19 Immunization *Show if Child is 6 months and older (SelectedChild > 1)*

D2

The next few questions are about your child's experience with vaccination against COVID-19. How many doses of a COVID-19 vaccine has <<B0.text>> received so far?

(Show if CATI) IF NEEDED: The vaccine Pfizer-BioNTech Comirnaty and Moderna Spikevax COVID-19 vaccine are currently authorized for use in children in Canada. These vaccines are available for children 6 months and above.

READ LIST.

(Show if Web) The vaccine Pfizer-BioNTech Comirnaty and Moderna Spikevax COVID-19 vaccine are currently authorized for use in children in Canada. These vaccines are available for children 6 months and above.

- 1 1 dose
- 2 2 doses
- 3 3 doses
- 4 4 or more doses
- 0 Has not received a COVID-19 vaccine
- 5 [DO NOT READ /] Don't know (Exclusive)
- 6 [DO NOT READ /] Prefer not to answer (Exclusive)

D3

Did a health care provider recommend that <<B0.text>> receive a COVID-19 vaccine?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

D4 *Show if Child Not COVID19 vaccinated (D2 = 0,5,6)*

In the future, how likely is it that you will get <<B0.text>> vaccinated against COVID-19?

(Show if CATI) READ LIST.

- 1 Definitely will
- 2 Probably will
- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know
- 6 [DO NOT READ /] Prefer not to answer

Page COVID-19 Immunization

D5 *Show if Child is less than 6 months (SelectedChild = 1)*

In the future, when <<B0.text>> becomes eligible for a COVID-19 vaccine, how likely is it that you will get <<B0.text>> vaccinated?

(Show if CATI) READ LIST.

- 1 Definitely will
- 2 Probably will

- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know
- 6 [DO NOT READ /] Prefer not to answer

D6 Show if Child COVID19 vaccinated (D2 = 1,2,3,4)

(Show if CATI) Why did <<B0.text>> receive a COVID-19 vaccine?

For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Why did <<B0.text>> receive a COVID-19 vaccine?

Select all that apply.

- 1 To protect them and household members against COVID-19 infection and/or severe outcomes *
- 2 To protect them against long COVID [IF NEEDED /] (symptoms lasting 4 or more weeks) *
- 3 Based on public health recommendations *
- 4 To prevent the spread of COVID-19 in my community *
- 5 It was recommended by a health care professional *
- 7 [READ IF NO RESPONSE SELECTED /] Other, please specify:

- 8 [DO NOT READ /] Don't know (Exclusive)
- 9 [DO NOT READ /] Prefer not to answer (Exclusive)

*Levels marked with * are randomized*

D7

Has <<B0.text>> ever been diagnosed with COVID-19?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

D8 Show if Child diagnosed COVID19 (D7 = 1)

(Show if CATI) Has a health care provider ever diagnosed <<B0.text>> with any of the following conditions, after a COVID-19 infection?

For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Has a health care provider ever diagnosed <<B0.text>> with any of the following conditions, after a COVID-19 infection?

Select all that apply.

- 1 Multisystem inflammatory syndrome in children (MIS-C) [IF NEEDED /] (high fever and inflammation in their body or organs) *
- 2 Long COVID [IF NEEDED /] (i.e., symptoms experienced 4 or more weeks after COVID-19 infections) *
- 6 None of the above conditions (Exclusive)
- 7 [DO NOT READ /] Don't know (Exclusive)
- 8 [DO NOT READ /] Prefer not to answer(Exclusive)

*Levels marked with * are randomized*

Page COVID-19 Immunization Show if Child is 6 months and older (SelectedChild > 1)

D11 Show if Child Not COVID19 vaccinated (D2 = 0,5,6)

(Show if CATI) Did any obstacles prevent <<B0.text>> from getting the COVID-19 vaccine?

For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Did any obstacles prevent <<B0.text>> from getting the COVID-19 vaccine?

Select all that apply.

- 1 No obstacles (Exclusive)
- 2 Difficulty to book time off work/school for a vaccine appointment
- 3 Live in a remote area (limited transportation)
- 6 My child fears needles
- 7 I/my child had an adverse reaction to a previous vaccine
- 8 At least one parent opposed it
- 10 [READ IF NO RESPONSE SELECTED /] Other, please specify:

- 11 [DO NOT READ /] Don't know (Exclusive)
- 12 [DO NOT READ /] Prefer not to answer(Exclusive)

D12

(Show if CATI) Have you ever been reluctant or hesitant to vaccinate <<B0.text>> against COVID-19?

Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.

DO NOT READ LIST.

(Show if Web) Have you ever been reluctant or hesitant to vaccinate <<B0.text>> against COVID-19?

Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

D13 Show if Child reluctant COVID19 vaccine (D12 = 1)

(Show if CATI) Why were you reluctant or hesitant to get a COVID-19 vaccine for <<B0.text>>?

For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Why were you reluctant or hesitant to get a COVID-19 vaccine for <<B0.text>>?

Select all that apply.

- 1 My child fears needles *
 - 2 My child is not at risk of getting COVID-19 *
 - 3 I wanted to discuss COVID-19 vaccines with my child's health care practitioner *
 - 4 Concerns that not enough research on the vaccine has been done in children *
 - 5 Concerns about the effectiveness *
 - 6 Concerns about the safety *
 - 7 My child had a bad experience with previous vaccinations *
 - 8 Did not know where to get reliable information *
 - 9 Religious or philosophical reasons *
 - 11 [READ IF NO RESPONSE SELECTED /] Other, please specify:
-
- 12 [DO NOT READ /] Don't know (Exclusive)
 - 13 [DO NOT READ /] Prefer not to answer (Exclusive)

*Levels marked with * are randomized*

DXa Show if Child Not COVID19 vaccinated (D2 = 0,5,6)

Did you refuse to get a COVID-19 vaccine for <<B0.text>>?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No

- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

DXb Show if Refused COVID19 for child (DXa = 1)

(Show if CATI) Why did you refuse a COVID-19 vaccine for <<B0.text>>?

For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Why did you refuse a COVID-19 vaccine for <<B0.text>>?

Select all that apply.

- 1 Do not consider it necessary for my child *
- 2 Do not think the vaccine is safe/concerned about side effects *
- 3 Do not think the vaccine was effective *
- 4 Religious or philosophical reasons *
- 5 Lack of trust in the government and/or pharmaceutical companies *
- 6 I am opposed to COVID-19 vaccines *
- 10 My child has a medical exemption *
- 7 Other reason, please specify: _____
- 8 [DO NOT READ /] Don't know (Exclusive)
- 9 [DO NOT READ /] Prefer not to answer

*Levels marked with * are randomized*

DXX Show if Child eligible COVID19 booster and COVID19 vaccinated ((D2 = 1,2,3,4) AND (SelectedChild >= 4))

Did <<B0.text>> receive a COVID-19 booster dose?

(Show if CATI) IF NEEDED: Booster doses are received after completing the primary series (i.e., after receiving 2 doses of a COVID-19 vaccine). For some children (e.g., those with low immune system), more than 2 doses are recommended to complete the primary series. For these children, the third dose is not referred to as a booster dose.

DO NOT READ LIST.

(Show if Web) Booster doses are received after completing the primary series (i.e., after receiving 2 doses of a COVID-19 vaccine). For some children (e.g., those with low immune system), more than 2 doses are recommended to complete the primary series. For these children, the third dose is not referred to as a booster dose.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

DXXI Show if Child did not receive COVID19 booster (DXX = 2,3,4)

In the future, how likely is it that <<B0.text>> will get a COVID-19 booster dose?

(Show if CATI) READ LIST.

- 1 Definitely will
- 2 Probably will
- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know (Exclusive)
- 6 [DO NOT READ /] Prefer not to answer(Exclusive)

Page COVID-19 Immunization

DXXII Show if Child not eligible to get COVID19 booster (SelectedChild < 4)

In the future, when <<B0.text>> becomes eligible for a COVID-19 booster dose, how likely will you get <<B0.text>> vaccinated?

(Show if CATI) IF NEEDED: Booster doses are received after completing the primary series (i.e., after receiving 2 doses of a COVID-19 vaccine). For some children (e.g., those with low immune system), more than 2 doses are recommended to complete the primary series. For these children, the third dose is not referred to as a booster dose.

READ LIST.

(Show if Web) Booster doses are received after completing the primary series (i.e., after receiving 2 doses of a COVID-19 vaccine). For some children (e.g., those with low immune system), more than 2 doses are recommended to complete the primary series. For these children, the third dose is not referred to as a booster dose.

- 1 Definitely will
- 2 Probably will
- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know (Exclusive)
- 6 [DO NOT READ /] Prefer not to answer(Exclusive)

DXXIII

Have you seen any COVID-19 vaccination awareness campaigns for children and adolescents?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

Page Influenza Immunization *Show if Child is 6 months and older (SelectedChild > 1)*

D14

(Show if CATI) The next few questions are about <<B0.text>>'s experience with vaccination against the flu (influenza). Children 6 months of age and older are eligible for the influenza vaccine.

Prior to the 2022-2023 flu season, how often did <<B0.text>> receive their flu vaccine? Would you say...

READ LIST.

(Show if Web) The next few questions are about <<B0.text>>'s experience with vaccination against the flu (influenza). Children 6 months of age and older are eligible for the influenza vaccine.

Prior to the 2022-2023 flu season, how often did <<B0.text>> receive their flu vaccine?

- 1 Every flu season
- 2 Most flu seasons
- 3 Some flu seasons (including once only)
- 4 Never
- 5 [DO NOT READ /] Don't know *(Exclusive)*
- 6 [DO NOT READ /] Prefer not to answer *(Exclusive)*

D15

Did <<B0.text>> receive a flu vaccine this flu season, between September 2022 and March 2023?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: There are two general types of flu vaccinations. One is a shot and the other is a spray, mist or drop in the nose. If your child was between 6 months and 9 years when they received a flu vaccine for the first time, they may have been recommended to receive two doses.

(Show if Web) There are two general types of flu vaccinations. One is a shot and the other is a spray, mist or drop in the nose. If your child was between 6 months and 9 years old when they received a flu vaccine for the first time, they may have been recommended to receive two doses.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

D19 *Show if Child received flu vaccine this season (D15 = 1)*

(Show if CATI) Why did <<B0.text>> receive a flu vaccine this flu season?

For each option please answer yes or no.

READ LIST. Select all that apply.

IF NEEDED: Flu season: between September 2022 and March 2023.

(Show if Web) Why did <<B0.text>> receive a flu vaccine this flu season?

Flu season: between September 2022 and March 2023.

Select all that apply.

- 1 To protect themselves and/or household members *
- 2 It was offered at the same time when my child was getting a COVID-19 vaccine *
- 3 Based on public health recommendations *
- 4 To prevent the spread of the flu in my community *
- 5 It was recommended by a health care provider *
- 6 It is available and free *
- 7 Increased concerns about flu because of the COVID-19 pandemic *
- 8 My child receives it every year *
- 9 [\[READ IF NO RESPONSE SELECTED / \]](#) Other, please specify:

- 10 [\[DO NOT READ / \]](#) Don't know (Exclusive)
- 11 [\[DO NOT READ / \]](#) Prefer not to answer (Exclusive)

*Levels marked with * are randomized*

D20 Show if Child did NOT receive flu vaccine this season (D15 = 2,3,4)

(Show if CATI) Did any obstacles prevent <<B0.text>> from getting the flu vaccine this flu season?

For each option please answer yes or no.

READ LIST. Select all that apply.

IF NEEDED: Flu season: between September 2022 and March 2023.

(Show if Web) Did any obstacles prevent <<B0.text>> from getting the flu vaccine this flu season?

Flu season: between September 2022 and March 2023.

Select all that apply.

- 19 No obstacles (Exclusive)
- 2 Difficulty to book time off work/school for a vaccine appointment
- 3 At least one parent opposed it
- 4 Living in a remote area (limited transportation)
- 6 I/my child had an adverse reaction to a previous vaccine
- 9 My child fears needles
- 10 [\[READ IF NO RESPONSE SELECTED / \]](#) Other, please specify:

- 11 [\[DO NOT READ / \]](#) Don't know (Exclusive)

12 [DO NOT READ /] Prefer not to answer (*Exclusive*)

D21

(Show if CATI) Were you reluctant or hesitant to vaccinate <<B0.text>> against the flu during this flu season?

Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.

DO NOT READ LIST.

IF NEEDED: Flu season: between September 2022 and March 2023.

(Show if Web) Were you reluctant or hesitant to vaccinate <<B0.text>> against the flu during this flu season?

Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.

Flu season: between September 2022 and March 2023.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

D23 Show if Child reluctant flu (D21 = 1)

(Show if CATI) Why were you reluctant or hesitant to get the flu vaccine for <<B0.text>>?

For each option please answer yes or no.

IF NEEDED: Flu season: between September 2022 and March 2023.

READ LIST. Select all that apply.

(Show if Web) Why were you reluctant or hesitant to get the flu vaccine for <<B0.text>>?

Flu season: between September 2022 and March 2023.

Select all that apply.

- 1 My child fears needles *
- 2 My child is not at risk of getting the flu or at risk of severe infection *
- 3 I wanted to discuss the flu vaccine with my child's health care practitioner *
- 4 I was concerned about the effectiveness *
- 5 I had concerns about the safety *
- 7 My child had a bad experience with previous vaccines *
- 8 I did not know where to get reliable information *
- 9 Religious or philosophical reasons *
- 12 [READ IF NO RESPONSE SELECTED /] Other, please specify:

13 [DO NOT READ /] Don't know (*Exclusive*)

14 [DO NOT READ /] Prefer not to answer (*Exclusive*)

Levels marked with * are randomized

D22 Show if Child did NOT receive flu vaccine this season (D15 = 2,3,4)

Did you refuse to get the flu vaccine for <<B0.text>>, during this flu season?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: Flu season: between September 2022 and March 2023.

(Show if Web) Flu season: between September 2022 and March 2023.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

DX3 Show if Child refused flu vaccine (D22 = 1)

(Show if CATI) Why did you refuse the flu vaccine for <<B0.text>> this season?

For each option please answer yes or no.

READ LIST. Select all that apply.

IF NEEDED: Flu season: between September 2023 and March 2023.

(Show if Web) Why did you refuse the flu vaccine for <<B0.text>> this season?

Flu season: between September 2022 and March 2023.

Select all that apply.

- 1 My child is not at risk of getting the flu *
 - 4 Concerns about the safety/side effects of the flu vaccine *
 - 5 Concerns about receiving a COVID-19 and flu vaccine at the same time *
 - 6 Religious or philosophical reasons *
 - 7 The flu vaccine does not work *
 - 8 Did not consider it necessary for my child *
 - 9 [READ IF NO RESPONSE SELECTED /] Other, please specify:
-
- 10 [DO NOT READ /] Don't know (Exclusive)
 - 11 [DO NOT READ /] Prefer not to answer (Exclusive)

Levels marked with * are randomized

D24

Did the COVID-19 pandemic affect your decision to get <<B0.text>> vaccinated against the flu during this flu season?

(Show if CATI) IF YES: Prompt with first two response options.

IF NEEDED: Flu season: between September 2022 and March 2023.

(Show if Web) Flu season: between September 2022 and March 2023.

- 1 Yes, it motivated me to get my child vaccinated
- 2 Yes, it made me not want to get my child vaccinated
- 3 No, it did not impact my decision
- 4 [DO NOT READ /] Don't know
- 5 [DO NOT READ /] Prefer not to answer

D18

How likely are you to get <<B0.text>> vaccinated against the flu in the next flu season, as of September 1, 2023?

(Show if CATI) READ LIST.

- 1 Definitely will
- 2 Probably will
- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know
- 6 [DO NOT READ /] Prefer not to answer

Dx2

Did a health care provider recommend that <<B0.text>> receive the flu shot this flu season?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: Flu season: between September 2022 and March 2023.

(Show if Web) Flu season: between September 2022 and March 2023.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

Section Lifestyle/Risk of contracting infection

C1, C2

Page Demographic information of child

C1

(Show if CATI) Does <<B0.text>> have any of the following conditions?

For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Does <<B0.text>> have any of the following conditions?

Select all that apply.

- 1 Sickle cell anemia or thalassemia major *
- 3 Neurologic or neurodevelopmental disorders[IF NEEDED /] (e.g., epilepsy, etc.) *
- 5 Asthma or other chronic lung disease[IF NEEDED /] (e.g., cystic fibrosis, etc.) *
- 6 Chronic liver, heart or kidney disease *
- 8 Diabetes, obesity or Down syndrome *
- 11 Immune suppression[IF NEEDED /] (e.g., chemotherapy, radiation, steroid use or an organ transplant, HIV/AIDS, etc.) *
- 12 Cancer *
- 13 [READ IF NO RESPONSE SELECTED /] Other medical condition, please specify:

- 14 None of these conditions (Exclusive)
- 15 [DO NOT READ /] Don't know (Exclusive)
- 16 [DO NOT READ /] Prefer not to answer (Exclusive)

*Levels marked with * are randomized*

C2

Does <<B0.text>> identify as a person with a disability?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: A person with a disability is a person who has a long-term or recurring impairment (such as vision, hearing, mobility, flexibility, dexterity, pain, learning, developmental, memory or mental health-related) which limits their daily activities inside or outside the home (such as at school, work, or in the community in general).

(Show if Web) A person with a disability is a person who has a long-term or recurring impairment (such as vision, hearing, mobility, flexibility, dexterity, pain, learning, developmental, memory or mental health-related) which limits their daily activities inside or outside the home (such as at school, work, or in the community in general).

- 1 Yes
- 2 No

- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

Section COVID-19 and Influenza immunization history - PARENT

E2, E3, E6, EX, E8, E9, E13, E14, E11

Page COVID-19 immunization of parent/legal guardian

E2

The next few questions are about **your** experiences with vaccination against COVID-19 and the flu (influenza).

How many doses of a COVID-19 vaccine have you received?

(Show if CATI) READ LIST IF NEEDED.

IF NEEDED: The vaccines that are currently authorized for use among adults in Canada, include AstraZeneca Vaxzevria, Janssen (Johnson & Johnson), Moderna Spikevax, Pfizer-BioNTech Comirnaty, Novavax Nuvaxovid and Medicago Covifenz.

(Show if Web) The vaccines that are currently authorized for use among adults in Canada, include AstraZeneca Vaxzevria, Janssen (Johnson & Johnson), Moderna Spikevax, Pfizer-BioNTech Comirnaty, Novavax Nuvaxovid and Medicago Covifenz.

- 1 1 dose
- 2 2 doses
- 3 3 doses
- 4 4 or more doses
- 0 I have not received a COVID-19 vaccine
- 5 [DO NOT READ /] Don't know *(Exclusive)*
- 6 [DO NOT READ /] Prefer not to answer *(Exclusive)*

E3 *Show if Parent did NOT receive COVID19 vaccine (E2 = 0,5,6)*

In the future, how likely is it that you will be vaccinated against COVID-19?

(Show if CATI) READ LIST.

- 1 Definitely will
- 2 Probably will
- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know *(Exclusive)*
- 6 [DO NOT READ /] Prefer not to answer *(Exclusive)*

E6

Have you ever been reluctant or hesitant to get a COVID-19 vaccine?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.

(Show if Web) Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

EX *Show if Parent did NOT receive COVID19 vaccine (E2 = 0,5,6)*

Did you refuse to get a COVID-19 vaccine?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

Page Influenza Immunization of parent/legal guardian

E8

Prior to the 2022-2023 flu season, how often did you receive the flu vaccine?

(Show if CATI) READ LIST.

- 1 Every flu season
- 2 Most flu seasons
- 3 Some flu seasons (including once only)
- 4 Never
- 5 [DO NOT READ /] Don't know *(Exclusive)*
- 6 [DO NOT READ /] Prefer not to answer *(Exclusive)*

E9

Did you get the flu vaccine during this flu season?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: Between September 2022 and March 2023.

(Show if Web) Flu season was between September 2022 and March 2023.

- 1 Yes

- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

E13

Were you hesitant about getting the flu vaccine during this flu season?

(Show if CATI) DO NOT READ LIST.

IF NEEDED: Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability. Flu season: between September 2022 and March 2023.

(Show if Web) Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability. Flu season: between September 2022 and March 2023.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

E14 Show if Parent did NOT receive flu vaccine (E9 = 2)

Did you refuse to get the flu vaccine, during this flu season?

(Show if CATI) DO NOT READ LIST.

- 1 Yes
- 2 No
- 3 [DO NOT READ /] Don't know
- 4 [DO NOT READ /] Prefer not to answer

E11

How likely are you to get vaccinated against the flu in the next flu season, as of September 1, 2023?

(Show if CATI) READ LIST.

- 1 Definitely will
- 2 Probably will
- 3 Probably won't
- 4 Definitely won't
- 5 [DO NOT READ /] Don't know *(Exclusive)*
- 6 [DO NOT READ /] Prefer not to answer *(Exclusive)*

Section Knowledge, Attitudes and Behaviours

F2, F3

Page Knowledge, Attitudes and Behaviours

F2

What is your most trusted source of information about COVID-19 vaccines?

(Show if CATI) SINGLE RESPONSE READ LIST.

- 1 Health care providers
- 2 Family/Friends
- 3 Social media (e.g., Twitter, Facebook)
- 4 Scientific publications/journals
- 5 My local public health unit/clinic
- 6 Public Health Agency of Canada/Health Canada
- 8 Community nursing stations or clinics
- 9 News/media
- 10 National Advisory Committee on Immunization (NACI)
- 11 International sources (e.g., World Health Organization (WHO))
- 12 Other
- 13 [DO NOT READ /] Don't know *(Exclusive)*
- 14 [DO NOT READ /] Prefer not to answer *(Exclusive)*

F3

(Show if CATI) To what extent do you agree with the following statements?

Read statement, then probe:

Would you say you strongly disagree, somewhat disagree, somewhat agree or strongly agree?

(Show if Web) To what extent do you agree with the following statements?

1. In general, vaccines are safe *
2. In general, vaccines are effective *
3. In general, COVID-19 vaccines are safe *
4. In general, COVID-19 vaccines are effective *
5. I know where to get a COVID-19 vaccine for my child *
6. Close family and friends want me to get my child vaccinated against COVID-19 *
7. Additional COVID-19 doses are important to continue to protect myself from the virus *
8. Vaccination is a safer way to build immunity against COVID-19 than getting infected *
9. My child needs to be vaccinated against COVID-19 even after infection *
13. I have access to enough trustworthy information about COVID-19 vaccines to make an informed decision *
14. In general, the flu vaccine is safe *
15. In general, the flu vaccine is effective *

*Levels marked with * are randomized*

- 1 Strongly agree
- 2 Somewhat agree
- 3 Somewhat disagree
- 4 Strongly disagree
- 5 [DO NOT READ /] Don't know (Exclusive)
- 6 [DO NOT READ /] Prefer not to answer (Exclusive)

Section Demographic Information of parent/legal guardian

G1, G2, A3, G3, G7, G8, G9, G10, G11, G12

Page Demographic Information of parent/legal guardian

G1

These last few questions are about **you** and will be used to help us better understand the background of parents in this survey.

What was your assigned sex at birth?

(Show if CATI) DO NOT READ.

- 1 Male
- 2 Female
- 3 [DO NOT READ /] Don't know (Exclusive)
- 4 [DO NOT READ /] Prefer not to answer (Exclusive)

G2

Do you live in an urban or rural area?

(Show if CATI) DO NOT READ.

IF NEEDED: An urban area is a city, town or village with a population of 1000 people or more, while a rural area is any other area of lower population.

(Show if Web) An urban area is a city, town or village with a population of 1000 people or more, while a rural area is any other area of lower population.

- 1 Urban
- 2 Rural
- 3 [DO NOT READ /] Don't know (Exclusive)
- 4 [DO NOT READ /] Prefer not to answer (Exclusive)

A3

How old are **you**?

Minimum: 18, Maximum: 120

_____ years old

- .8 <<catiDoNotRead>> Prefer not to answer

G3

What is your racial or ethnic background?

(Show if CATI) READ LIST UNTIL INTERRUPTED, AFTER, PROMPT FOR 'ANY OTHERS'?

IF NEEDED: We recognize this list of racial or ethnic identifiers may not exactly match how you would describe yourself.

Select all that apply.

(Show if Web) We recognize this list of racial or ethnic identifiers may not exactly match how you would describe yourself.

Select all that apply.

- 1 Black (African, Afro-Caribbean, African descent)
- 2 East/Southeast Asian (e.g., Chinese, Korean, Japanese, Taiwanese, Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent)
- 3 Indigenous (First Nations, Métis, Inuit)
- 5 Latin American
- 6 Middle Eastern and North African (Arab, Algerian, Egyptian, West Asian descent (e.g., Iranian, Israeli, Lebanese, Turkish, Kurdish, etc.))
- 7 South Asian descent (e.g., Afghan, Indian, Pakistani, Bangladeshi, Sri Lankan, etc.)
- 8 White European descent
- 9 Other, please specify: _____
- 10 [DO NOT READ /] Don't know *(Exclusive)*
- 11 [DO NOT READ /] Prefer not to answer *(Exclusive)*

G7

Which group best defines your citizenship status in Canada?

(Show if CATI) READ LIST AS NEEDED.

- 1 Canadian citizen by birth[IF NEEDED /] (i.e., born in Canada or born outside Canada with at least one of the parents being Canadian.)
- 2 Canadian citizen by naturalization[IF NEEDED /] (i.e., a person who was not born as a Canadian citizen who was granted citizenship of Canada under the Citizenship Act.)
- 3 Permanent resident/landed immigrant
- 4 Other (e.g., refugee, holds work or study permit)
- 6 [DO NOT READ /] Don't know *(Exclusive)*
- 7 [DO NOT READ /] Prefer not to answer *(Exclusive)*

G8 Show if Parent citizenship not by birth (G7 = 2,3,4,5)

How many years have you been living in Canada?

(Show if CATI) Enter 0 if less than a year.

(Show if Web) If less than a year please enter 0.

Minimum: 0, Maximum: 9999999

_____ years

- .8 Prefer not to answer
- .9 Don't know

G9

What is the highest level of formal education you have completed?

(Show if CATI) READ LIST AS NEEDED.

- 1 Grade 8 or less / Secondaire II in Québec or less
- 2 Some high school
- 3 High school / Secondary school / École secondaire diploma or equivalent
- 4 Registered apprenticeship or other trade certificate or diploma
- 5 College / CEGEP or other non-university certificate or diploma
- 6 University certificate or diploma below bachelor's level
- 7 University – bachelor's degree
- 8 University – post-graduate degree above bachelor's level
- 9 [\[DO NOT READ / \]](#) Other, please specify:

- 10 [\[DO NOT READ / \]](#) Don't know *(Exclusive)*
- 11 [\[DO NOT READ / \]](#) Prefer not to answer *(Exclusive)*

G10

Which best describes your current employment status? Are you...

(Show if CATI) READ LIST UNTIL INTERRUPTED.

- 1 Working full-time, 35 or more hours per week
- 2 Working part-time, less than 35 hours per week
- 3 Self-employed
- 4 Unemployed, but looking for work
- 5 A student attending school full-time or part-time
- 6 Retired
- 7 Not in the workforce (full-time homemaker, unemployed, not looking for work)
- 8 [\[DO NOT READ / \]](#) Other
- 9 [\[DO NOT READ / \]](#) Don't know *(Exclusive)*
- 10 [\[DO NOT READ / \]](#) Prefer not to answer *(Exclusive)*

G11

(Show if CATI) Are you currently working or volunteering in any of the following sectors?
We are interested in jobs that put employees at high-risk of vaccine preventable diseases. For each option please answer yes or no.

READ LIST. Select all that apply.

(Show if Web) Are you currently working or volunteering in any of the following sectors?
We are interested in jobs that put employees at high-risk of vaccine preventable diseases.

Select all that apply.

- 1 Health care or laboratory worker[IF NEEDED /] (e.g., physician, nurse, occupational/physical therapist, etc., those who work, study, or volunteer in hospitals, long-term care, nursing home, and community settings)
- 2 Child care or schools [IF NEEDED /] (e.g., teacher, daycare worker)
- 3 Exposed to animals or their materials[IF NEEDED /] (e.g., veterinarian)
- 4 Emergency services worker[IF NEEDED /] (e.g., police, fire fighter, EMT)
- 5 Other[IF NEEDED /] (e.g., worker in a correction facility, on a crew ship or aircraft, military personnel, humanitarian relief or essential community service)
- 6 I don't work in any of the above sectors(*Exclusive*)
- 7 [DO NOT READ /] Don't know (*Exclusive*)
- 8 [DO NOT READ /] Prefer not to answer (*Exclusive*)

G12

(Show if CATI) What was your total household income, before taxes and deductions, for the year ending December 31, 2022.

READ LIST UNTIL INTERRUPTED.

(Show if Web) Please indicate your total household income, before taxes and deductions, for the year ending December 31, 2022.

- 1 Under \$20,000 (*Show if FALSE (custom: False)*)
- 2 \$20,000 to \$39,999 (*Show if FALSE (custom: False)*)
- 3 \$40,000 to \$59,999 (*Show if FALSE (custom: False)*)
- 4 \$60,000 to \$79,999 (*Show if FALSE (custom: False)*)
- 5 \$80,000 to \$99,999 (*Show if FALSE (custom: False)*)
- 6 \$100,000 to \$149,999 (*Show if FALSE (custom: False)*)
- 7 \$150,000 and above (*Show if FALSE (custom: False)*)
- 10 Under \$40,000
- 11 \$40,000 to \$79,999
- 12 \$80,000 to \$149,999
- 13 \$150,000 and above
- 8 [DO NOT READ /] Don't know (*Exclusive*)
- 9 [DO NOT READ /] Prefer not to answer (*Exclusive*)

Section Survey End
WebEndTCH, CATIEnd

Page Survey End

WebEndTCH *Show if isWeb (custom: <<current_mode_is("web")>>)*
(if is WCAG (wcag = 1))

This survey was conducted on behalf of the Public Health Agency of Canada. We hope you've found it interesting, and we sincerely thank you for your time.

Status Code: -1

CATIEnd *Show if isCATI (custom: <<current_mode_is("cati")>>)*

We hope you've found it interesting, and we sincerely thank you for your time.

The Public Health Agency of Canada has contracted an independent public opinion research company Advanis to conduct this research.

Status Code: -1