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## 2022 Childhood COVID-19 Immunization Coverage Survey Methodological Report

Prepared for the Public Health Agency of Canada

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Canada 

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This report presents the methodological details for the **2022 Childhood COVID-19 Immunization Coverage Survey (CCICS)** conducted by Advanis Inc. on behalf of the Public Health Agency of Canada (PHAC). The survey was administered among 10,536 members of the adult Canadian general public, between April 7 and July 21, 2022.

Ce rapport est aussi disponible en français sous le titre: *l'Enquête sur la couverture vaccinale des enfants contre la COVID-19, 2022*

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# 1. EXECUTIVE SUMMARY

## 1.1 BACKGROUND

In December 2020, COVID-19 vaccines were authorized for use in individuals 18 years of age and older. Health Canada subsequently expanded the Interim Order authorization for adolescents 12 to 17 years of age and in late 2021, mRNA COVID-19 vaccines were authorized for use among children 5 to 11 years of age.<sup>1</sup> Throughout this period of incremental vaccine rollout to children, PHAC adapted existing surveillance tools and created new approaches to enable national and jurisdictional coverage assessment of COVID-19 vaccine uptake as more age groups became eligible. In July 2022, children 6 months to 5 years of age became eligible for Moderna Spikevax COVID-19 vaccine; this group was not eligible at the time of data collection of this study (April to July, 2022).<sup>2</sup>

NACI recommends continuous monitoring of COVID-19 vaccine uptake, particularly according to the socioeconomic status of families with children aged 5-11 years, and for decision makers to consider measures to reduce the risk of socioeconomic disparities in vaccine confidence and uptake. Currently, 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 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.<sup>3</sup> 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 also essential to predict expected vaccine uptake and to guide education and awareness efforts to promote vaccination. A baseline assessment of parental knowledge and views as well as continued monitoring of those views is 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. There is currently a knowledge gap around flu vaccine coverage estimates among children. The only source that currently collects information on flu vaccine coverage among children is the Canadian Health Survey on Children and Youth (CHSCY).<sup>4</sup>

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 may be subject to recall bias. All efforts were made to minimize parental recall bias for the proposed survey.

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<sup>1</sup> Health Canada. Approved COVID-19 Vaccines. Available from: <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/vaccines.html>

<sup>2</sup> National Advisory Committee on Immunization. Recommendations on the use of Moderna Spikevax COVID-19 vaccine in children 6 months to 5 years of age. 2022. Available from: <https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-moderna-spikevax-covid-19-vaccine-children-6-months-5-years.html>

<sup>3</sup> Statistics Canada. Childhood National Immunization Coverage Survey (cNICS). 2019. Available from: <https://www23.statcan.gc.ca/imdb/p2SV.pl?Function=getSurvey&id=1257279>

<sup>4</sup> Statistics Canada. Canadian Health Survey on Children and Youth (CHSCY). Available from: <https://www23.statcan.gc.ca/imdb/p2SV.pl?Function=getSurvey&SDDS=5233>

## 1.2 OBJECTIVES

The purpose of the *2022 Childhood COVID-19 Immunization Coverage Survey (CCICS)* was to establish a surveillance tool that will provide both national and provincial/territorial level estimates on an annual basis on the following:

- COVID-19 and flu immunization coverage among children in Canada younger than 18 years of age who were eligible for vaccination.
- Parental intentions to vaccinate children who were not eligible for vaccination or who were eligible but had not yet been vaccinated.
- Parental knowledge, attitudes and beliefs (KAB) towards their children's COVID-19 and flu vaccination (e.g., vaccine hesitancy).
- Barriers and/or facilitators to COVID-19 and flu immunization among children.

## 1.3 METHODOLOGY

Data collection started April 20, 2022 and ended July 21, 2022, and was conducted by Advanis.

Advanis sought a probability-based sample of 10,500 Canadian parents/guardians aged 18 or older through the use of Advanis' General Population Representative Sample (GPRS) sample and through Random digit dialing (RDD). The study was drawn from a random sample and can be extrapolated to the broader population on a national level.

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, child's age group and child's sex at birth. The results for 2022 are based on responses from 10, 536 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.

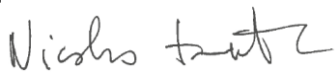
## 1.4 CONTRACT VALUE

The contract value for this study was \$249,280.83 (including HST).

## 1.5 POLITICAL NEUTRALITY REQUIREMENT

I hereby certify as Senior Officer of Advanis that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the Policy on Communications and Federal Identity and the Directive on the Management of Communications. Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate or ratings of the performance of a political party or its leaders.

Signed:



Nicolas Toutant, Vice-President, Research and Evaluation

## 2. SAMPLING

This study was completed from April 7 to July 21, 2022, respondents were offered an online or phone survey through the use of Advanis' General Population Representative Sample (GPRS) sample and through Random digit dialing (RDD). Advanis sought a probability-based sample of 10,500 Canadian parents/guardians of children and adolescents younger than 18 years old living across Canada.

### 2.1 SAMPLING PLAN

The target audience for this project were Canadian parents/guardians of children and adolescents younger than 18 years old living across Canada. The targeted number of completed surveys was 10,500 Canadian adults. Questions within the survey further filtered out responses from anyone under the age of 18 years. 10,536 responses were obtained (9,106 in English and 1,430 in French) to reach quotas, where possible (Table 1).

Advanis also worked to obtain nationally representative coverage of the following key sub-populations:

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

To target parents in Atlantic and Northern provinces/territories who are often more difficult to reach online, other 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 answered it on the phone with the use of a Computer Assisted Telephone Interviewing (CATI) methodology. These 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.

### 2.2 COMPLETES AND TARGETS

Overall, 10,536 people completed the survey, with a response rate of 26.1%, and a margin of error of 0.96% (19 times out of 20 at a 95% confidence interval). The average survey length of the survey was 16.3 minutes on the phone and 9.8 online. As seen in Table 1, overall, 100.3% of target completes were successfully achieved; 100% or more target completes were reached in each provinces and 76.2% in the territories combined. Table 2 provides information on the number of completes and target completes by the selected child's age group.

**Table 1: Number of completes and targeted number of completes**

Provinces and Territories	Completed the survey	CATI	Online	Target Population
Alberta	1,275	58	1,217	1,250
British Columbia	1,374	7	1,367	1,300
Manitoba	409	3	406	400
New Brunswick	396	135	261	400
Newfoundland and Labrador	400	200	200	400
Northwest Territories	137	88	49	150
Nova Scotia	418	42	376	400
Nunavut	65	57	8	150
Ontario	3,109	28	3,081	3,100
Prince Edward Island	400	313	87	400
Quebec	2,000	37	1,963	2,000
Saskatchewan	412	2	410	400
Yukon	141	70	71	150
<b>Total</b>	<b>10,536</b>	<b>1,040</b>	<b>9,496</b>	<b>10,500</b>

**Table 2: Number of completes and targeted number of completes by selected child age**

Age	Completed the survey	Minimum targets
Selected child age: 0-4	2,734	2,415
Selected child age: 5-11	3,779	2,435
Selected child age: 12-17	4,023	2,435
<b>Total</b>	<b>10,536</b>	

\*The overall goal was to achieve the target completes. The quota for the 3 age groups was distributed as presented in the above table for 2/3 of the data collection, and the last 1/3 of the target completes were randomly distributed across the age groups.

## 2.2 PRE-TESTING

The pre-test was conducted in two phases. The first phase was conducted April 7th, 2022. The second phase was conducted from April 20th to April 22nd, 2022. The pre-test was conducted in both English and French. In the first phase Advanis conducted phone surveys with 16 participants from across Canada. Respondents were recruited by wireless numbers. During the first phase the phone survey length averaged 27.09 minutes, the target was 15 minutes. The pre-test was then paused to shorten the survey.

The second phase started with a phone survey again to determine if the length now met requirements. This resulted in 13 English and 10 French phone completes. The average length during the second phone phase was approximately 17 minutes which met requirements. A recruit to online pre-test was conducted next. This resulted in 20 English and 18 French online surveys. The distribution of those sent an SMS invite versus an email invite to the survey was 95% requesting and receiving an SMS message, and 5% requesting



email. Of the 108 people recruited to the web survey 38 completed the online survey. The average survey length for the web survey was approximately 11 minutes.

The data from phase one of the pre-test was removed. The survey was changed significantly after phase one due to the length. All pre-test cases from phase two were kept in the final data. PHAC agreed that the survey did not change significantly enough after the phase two pre-test to warrant data removal.

### **3. SURVEY DESIGN**

The survey draft and the French translations were provided by PHAC and were programmed using SurveyBuilder, a software program that is proprietary to Advanis. The surveys were available to be completed online and on the phone.

The online survey was compatible with both desktop computers and mobile devices (tablets and smartphones). The surveys were housed on a website hosted by Advanis.

The surveys were designed to include multiple-choice questions, single response questions, including scaled, open-ended and demographic questions. Skip logic was applied throughout, including thank-you messages used for the screening out of ineligible participants (not having a child under 18 living in the household, not a legal parent/guardian, refusing to provide their children's age). The survey was thoroughly pre-tested to ensure that skip patterns and survey questions were correctly programmed. The survey included the following sections:

- Screeners
- COVID-19 and Influenza Immunization History – CHILD
- Influenza Immunization History - CHILD
- Demographic information - CHILD
- Lifestyle/Risk of contracting infection
- COVID-19 and Influenza immunization history – PARENT/GUARDIAN
- Influenza Immunization History – PARENT/GUARDIAN
- Knowledge, Attitudes and Behaviours – PARENT/GUARDIAN
- Demographic Information - PARENT/GUARDIAN

### **4. WEB METHODOLOGY AND QUALITY CONTROL**

#### **4.1 DETAILS OF EMAIL AND SMS INVITES/REMINDERS**

Invitations were sent by SMS/email and grouped by province, to ensure that they were sent out during appropriate hours within each time zone.

A total of 26,805 people received an SMS invitation in English (23,243) and in French (3,562) to participate in the survey (Table 3) and 196 agreed to receive an email invitation in English (165) and in French (31) (Table 4). Of those, 9,496 completed the web version of the survey for a response rate of 35.42% among recruits.

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. Respondents in the Atlantic and Northern territories were sent three reminder messages. Overall, 56,501 SMS messages and 376 email messages were sent during data collection for this study.

**Table 3: Number of SMS invitations/reminders sent**

Message ID	Purpose	Total Sent
1	Invitation (EN)	23,243
2	Invitation (FR)	3,562
3	Reminder 1 (EN)	15,699
4	Reminder 1 (FR)	1,499
5	Reminder 2 (EN)	10,732
6	Reminder 2 (FR)	1,177
	Reminder 3 (FR) Atlantic and North	589
<b>Total</b>		<b>56,501</b>

**Table 4: Number of Email invitations/reminders sent**

Message ID	Purpose	Total Sent
1	Invitation (EN)	165
2	Invitation (FR)	31
3	Reminder 1 (EN)	94
4	Reminder 1 (FR)	14
5	Reminder 2 (EN)	60
6	Reminder 2 (FR)	12
<b>Total</b>		<b>376</b>

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

#### 4.2 WEB QUALITY CONTROL

All Advanis Web surveys are hosted internally by Advanis, and we 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 participant 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.
- We tested the questionnaire in multiple browsers and provided PHAC with a link so they could do internal testing.

## 5. CATI METHODOLOGY AND QUALITY CONTROL

Participants who completed the survey on the phone were mainly reached throughout the survey fielding dates. Interviews were offered in French or English based on respondent preference. Responses were collected using a Computer Assisted Telephone Interview (CATI) system. In total, 106,946 potential respondents were called and 19,889 agreed to participate in the survey for a response rate of 26.1%. Of those who agreed to participate, 9,353 were ineligible. In total, 1,040 respondents completed the survey on the phone (Table 1). More detailed calling statistics can be found in Appendix B.

### 5.1 CATI QUALITY CONTROL

The CATI script was programmed on Advanis' proprietary CATI platform with no unforeseen challenges. Advanis was able to leverage its experience with 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 study'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 supplemented by output files to SPSS for productivity analysis (i.e., not subject to human error);
- Screening scripts contained a description of the importance of the research and the importance of respondent participation, serving as a motivator for respondents;
- The scripts were pretested for best possible flow;
- Briefing was done on an ongoing basis to ensure that all interviewers are up to date on current information regarding the project;
- 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; and
- 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, probe deeper on semi-open and open questions, systematically confirm the information provided and listen to the respondents.

## 6. 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 not available. 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 demographics (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 study is minimal. This is the case with the current study.

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

- Outpulsing a local phone number (rather than a toll-free number) and the name of the study sponsor ("GovCanada"), 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.
- Informing the potential respondent of the study sponsor to enhance credibility and reassure the respondent that the call is not a scam.
- Offering the survey in both official languages to maximize ease of completion.
- Routing calls from respondents to a live interviewer when they call the number that we out-pulse, allowing us to recruit them.
- Clearly stating the name of the interviewer and of Advanis to show that we are a legitimate survey firm and, again, to reduce the perception that it is a scam.

## **7. WEIGHTING**

### **7.1 DIRECT WEIGHTS**

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—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.

### **7.2 BOOTSTRAP WEIGHTS**

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.

## **8. DATA CLEANING AND HANDLING**

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.

There were 189 records that were removed from the dataset due to inconsistent or inappropriate answers from respondents. The majority of these cases were dropped due to the fact that the selected child's age did not match their birth year. The verbatim responses were reviewed and no unique identifiers were

found. Corrections were made to the verbatim responses, including the gender and the ethnicity questions. For these questions if the verbatim response aligned with an existing question level the response was recoded to match the existing level.

### 8.1 DATA QUALITY CONTROL

For all of 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 (those who completed the survey too quickly are removed);
- Data consistency check (respondents who answered multiple questions in inconsistent ways are removed);
- Straight-lining of answers to responses (checks against respondents who provide the same response to every question); and
- Rigorous checks are completed to ensure the data is accurate and error-free according to the questionnaire logic (skip patterns).

Advanis staff have used the SPSS Statistics Software for over 20 years and are very proficient users of the software. All data cleaning performed on projects are outlined in syntax files with intermediate data files saved throughout the process. This ensures that the original raw data file is never overwritten, and that if an error is discovered in our code, we can quickly and easily rerun the syntax to produce a new data file. Individuals developing code incorporate internal checks in their code (e.g., crosstabs) to ensure the syntax had the desired effect. In addition, all syntax is reviewed by another team member or technical specialist for accuracy.

## 9. 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 denominator size of less than 30 should not be reported, due to statistical robustness.<sup>5-6</sup> The reason for suppressing results with small cell sizes is due to the increased coefficient of variation and, hence, there are larger confidence intervals around results with smaller bases. Furthermore, for confidentiality purposes, estimates with a numerator of less than 5 (i.e., 1 to 4) should be suppressed.<sup>7,8,9</sup>

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.<sup>6</sup>

Type of Estimate	CV (in %) <sup>10</sup>	Guidelines
Acceptable	$CV \leq 15.0$	Estimates can be considered for general unrestricted release. Requires no special notation.
Marginal	$15.0 < CV \leq 35.0$	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.<sup>6</sup>

### 9.1 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.

<sup>5</sup> 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](https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf)

<sup>6</sup> Statistics Canada. Canadian Community Health Survey User Guide. 2021.

<sup>7</sup> Statistics Canada. Microdata User Guide Childhood National Immunization Coverage Survey – Childhood vaccinations. 2019.

<sup>8</sup> Canadian Institute for Health Information. Information on Data Quality, Suppression and Other Interpretation Notes for the Your Health System Web Tool. 2021. Available from: <https://www.cihi.ca/sites/default/files/document/data-quality-suppression-en.pdf>

<sup>9</sup> Public Health Agency of Canada. COVID-19 Dashboard <https://health-infobase.canada.ca/covid-19/vaccination-coverage/technical-notes.html>

<sup>10</sup>  $CV = (\text{standard error} / \text{coefficient}) * 100$  where the coefficient is either the regression coefficient or the proportion estimate.

- Marginal sub-totals and totals in statistical tables are to be derived from their corresponding un-rounded 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 un-rounded components (i.e. numerators and/or denominators) and then are to be rounded themselves to one decimal using 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 un-rounded estimates to be published or otherwise released by users. Un-rounded 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)	141	193	1.3672
Male, 0 to 4, British Columbia (BC)	182	168	0.9250
Male, 0 to 4, Manitoba (MB)	57	61	1.0740
Male, 0 to 4, New Brunswick (NB)	55	25	0.4475
Male, 0 to 4, Newfoundland and Labrador (NL)	52	15	0.2816
Male, 0 to 4, Northwest Territories (NT)	19	2	0.1183
Male, 0 to 4, Nova Scotia (NS)	51	31	0.6074
Male, 0 to 4, Nunavut (NU)	16	3	0.1857
Male, 0 to 4, Ontario (ON)	403	533	1.3217
Male, 0 to 4, Prince Edward Island (PE)	55	5	0.0977
Male, 0 to 4, Quebec (QC)	295	315	1.0688
Male, 0 to 4, Saskatchewan (SK)	64	54	0.8430
Male, 0 to 4, Yukon (YT)	18	2	0.0969
Male, 5 to 11, Alberta (AB)	246	292	1.1870
Male, 5 to 11, British Columbia (BC)	254	260	1.0236
Male, 5 to 11, Manitoba (MB)	58	94	1.6178
Male, 5 to 11, New Brunswick (NB)	68	40	0.5936
Male, 5 to 11, Newfoundland and Labrador (NL)	84	25	0.2981
Male, 5 to 11, Northwest Territories (NT)	25	3	0.1234
Male, 5 to 11, Nova Scotia (NS)	85	50	0.5825
Male, 5 to 11, Nunavut (NU)	10	4	0.4391
Male, 5 to 11, Ontario (ON)	614	800	1.3027
Male, 5 to 11, Prince Edward Island (PE)	62	9	0.1412
Male, 5 to 11, Quebec (QC)	359	484	1.3482
Male, 5 to 11, Saskatchewan (SK)	86	82	0.9522
Male, 5 to 11, Yukon (YT)	25	3	0.1093
Male, 12 to 17, Alberta (AB)	278	240	0.8634
Male, 12 to 17, British Columbia (BC)	281	225	0.7996
Male, 12 to 17, Manitoba (MB)	84	74	0.8868
Male, 12 to 17, New Brunswick (NB)	74	36	0.4866
Male, 12 to 17, Newfoundland and Labrador (NL)	81	24	0.2906
Male, 12 to 17, Northwest Territories (NT)	24	3	0.1056
Male, 12 to 17, Nova Scotia (NS)	79	43	0.5484
Male, 12 to 17, Nunavut (NU)	7	3	0.4649
Male, 12 to 17, Ontario (ON)	613	715	1.1659
Male, 12 to 17, Prince Edward Island (PE)	75	8	0.1074
Male, 12 to 17, Quebec (QC)	377	393	1.0417



Male, 12 to 17, Saskatchewan (SK)	80	66	0.8262
Male, 12 to 17, Yukon (YT)	33	2	0.0592
Female, 0 to 4, Alberta (AB)	153	184	1.2037
Female, 0 to 4, British Columbia (BC)	150	158	1.0542
Female, 0 to 4, Manitoba (MB)	53	59	1.1066
Female, 0 to 4, New Brunswick (NB)	53	24	0.4443
Female, 0 to 4, Newfoundland and Labrador (NL)	43	14	0.3222
Female, 0 to 4, Northwest Territories (NT)	18	2	0.1059
Female, 0 to 4, Nova Scotia (NS)	61	29	0.4824
Female, 0 to 4, Nunavut (NU)	7	3	0.4238
Female, 0 to 4, Ontario (ON)	372	506	1.3605
Female, 0 to 4, Prince Edward Island (PE)	58	5	0.0856
Female, 0 to 4, Quebec (QC)	289	299	1.0353
Female, 0 to 4, Saskatchewan (SK)	50	52	1.0434
Female, 0 to 4, Yukon (YT)	19	1	0.0772
Female, 5 to 11, Alberta (AB)	212	280	1.3198
Female, 5 to 11, British Columbia (BC)	241	244	1.0133
Female, 5 to 11, Manitoba (MB)	84	89	1.0597
Female, 5 to 11, New Brunswick (NB)	78	39	0.4969
Female, 5 to 11, Newfoundland and Labrador (NL)	56	23	0.4177
Female, 5 to 11, Northwest Territories (NT)	22	3	0.1439
Female, 5 to 11, Nova Scotia (NS)	75	47	0.6270
Female, 5 to 11, Nunavut (NU)	14	4	0.3004
Female, 5 to 11, Ontario (ON)	524	767	1.4643
Female, 5 to 11, Prince Edward Island (PE)	72	8	0.1171
Female, 5 to 11, Quebec (QC)	336	464	1.3801
Female, 5 to 11, Saskatchewan (SK)	63	79	1.2473
Female, 5 to 11, Yukon (YT)	26	2	0.0955
Female, 12 to 17, Alberta (AB)	245	230	0.9404
Female, 12 to 17, British Columbia (BC)	266	218	0.8203
Female, 12 to 17, Manitoba (MB)	73	73	1.0054
Female, 12 to 17, New Brunswick (NB)	68	35	0.5096
Female, 12 to 17, Newfoundland and Labrador (NL)	84	22	0.2654
Female, 12 to 17, Northwest Territories (NT)	29	3	0.0894
Female, 12 to 17, Nova Scotia (NS)	67	41	0.6174
Female, 12 to 17, Nunavut (NU)	11	3	0.2925
Female, 12 to 17, Ontario (ON)	583	687	1.1783
Female, 12 to 17, Prince Edward Island (PE)	78	8	0.1018
Female, 12 to 17, Quebec (QC)	344	379	1.1011
Female, 12 to 17, Saskatchewan (SK)	69	64	0.9291
Female, 12 to 17, Yukon (YT)	20	2	0.0930

APPENDIX B: RESPONSE RATE CALCULATION (PHONE SURVEY)

<b>Canada Response Rate</b>	Total	<b>TOTAL</b>
Generated	106946	<b>100.0%</b>
<b>Used</b>	<b>89021</b>	<b>83.2%</b>
No service	6123	<b>6.9%</b>
Not residential/business	808	<b>0.9%</b>
Line problems	1943	<b>2.2%</b>
Fax	496	<b>0.6%</b>
Wrong number	72	<b>0.1%</b>
<b>Invalid<sup>11</sup></b>	<b>9442</b>	<b>10.6%</b>
<b>Potentially Eligible</b>	<b>79579</b>	<b>89.4%</b>
U. No answer	20114	<b>25.3%</b>
U. Busy	35	<b>0.0%</b>
U. Answering machine/voicemail	26568	<b>33.4%</b>
<b>U. Unresolved<sup>12</sup></b>	<b>46717</b>	<b>52.5%</b>
IS. Language barrier	151	<b>0.2%</b>
IS. Illness/incapacity	33	<b>0.0%</b>
IS. Household refusals	2795	<b>3.5%</b>
IS. Respondent refusal	4028	<b>5.1%</b>
IS. Appointments	2590	<b>3.3%</b>
<b>IS. In-Scope Non-Responding<sup>13</sup></b>	<b>9597</b>	<b>10.8%</b>
R. Non eligible	9353	<b>11.8%</b>
R. Quota Blocked	0	<b>0.0%</b>
R. Completed	10536	<b>13.2%</b>
<b>R. Responding Units<sup>14</sup></b>	<b>19889</b>	<b>25.0%</b>
<b>% REFUSAL<sup>15</sup></b>	<b>8.6%</b>	
<b>% COMPLETED<sup>16</sup></b>	<b>13.2%</b>	
<b>COOPERATION RATE<sup>17</sup></b>	<b>60.5%</b>	
<b>RESPONSE RATE<sup>18</sup></b>	<b>26.1%</b>	

<sup>11</sup> No possible contact at this number

<sup>12</sup> Cases that could not be established as to whether call was made to eligible or ineligible respondent

<sup>13</sup> Includes refusals, break-offs, and other eligible non-respondents

<sup>14</sup> Includes cases who would have participated but were disqualified, completes and partial completes

<sup>15</sup> Household + Respondent Refusal / Potentially Eligible Sample

<sup>16</sup> Completed / Potentially Eligible Sample

<sup>17</sup> Responding Units / (Potentially Eligible - Unresolved)

<sup>18</sup> Responding Units / (Unresolved + In Scope Non-Responding + Responding Units)

# 2022 Childhood COVID-19 Immunization Coverage Survey

Government of Canada (Non-protected)

Generated on 2022-08-04 at 06:55:45 MT



**Languages:** English, French

## Section CATI Only

*Show if isCATI*

IntRDD, T1, RDDref, t2, CB1

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## Page CATI Recruit

*Show if Outbound*

**Int2** *Show if GPRS*

Hello, my name is \_\_\_\_\_ and I am calling on behalf of the Public Health Agency of Canada from TellCityHall. We are doing an important study on childhood COVID-19 immunizations. Your answers will help to make informed recommendations to our Government. The survey is being conducted online and will take approximately 10-15 minutes to complete.

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

*LENGTH: The online survey will take approximately 15 minutes.*

*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 and you can complete it when it's more convenient.*

*If needed: You've completed a survey for us in the past, and said you might participate in public policy studies in the future. TellCityHall is a public policy initiative of Advanis, a market and social research company. TellCityHall is a service that provides information to all levels of government and non-profits. We are based in Edmonton. 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.*

- 1 Yes, continue
- 2 Refused
- 3 Call back
- 6 Not a parent or all children over 18

**IntRDD** *Show if RDD*

Hello, my name is \_\_\_\_\_ and I am calling from Advanis on behalf of the Public Health Agency of Canada. We are doing an important study on immunizations. Your answers will help to make informed recommendations to our Government. This study will take approximately 15 minutes to complete on the phone.

Our first question is about your household, does anyone under 18 live with you?

- 1 Yes, continue

- 2 Refusal
- 3 Call back
- 4 Not a parent or all children over 18

**T1** *Show if refusal intRDD*

Thank you for your time. Goodbye.

Status Code: 1000

**RDDref** *Show if IntrRDD refusal*

Instead would you be interested in completing the survey online?

**IF YES:** Great, we have three quick questions to confirm you qualify before sending you a text or email to the online survey. Can I continue?

**REFUSAL HELP:**

*This is an important study on childhood COVID-19 immunizations that is being conducted across Canada. Your answers will help to make informed recommendations to our Government.*

**IF NEEDED:** *The survey will take approximately 10-15 minutes online.*

- 1 Yes, continue
- 2 Refused
- 3 Call back

**t2** *Show if Int not a parent*

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

**CB1** *Show if callback outbound*

Status Code: 1001

## Section Screeners

Q2, T4, Q3, A5, Q4, T6, Q5, refsend

---

### Page A Screening questions & selection of child

**Q2**

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) (if Is GPRS) Great, I just have four quick questions to ensure you will qualify.

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
- 8 Refused

**T4** *Show if Q2 None*

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

**Q3**

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 Q2 2 or more)*
  - 3. 3rd child *(Show if Q2 3 or more)*
  - 4. 4th child *(Show if Q2 4 or more)*
  - 5. 5th child *(Show if Q2 5 or more)*
  - 6. 6th child *(Show if Q2 6 or more)*
  - 7. 7th child *(Show if Q2 7 or more)*
  - 8. 8th child *(Show if Q2 8 or more)*
  - 9. 9th child *(Show if Q2 9 or more)*
  - 10. 10th child *(Show if Q2 10 children)*
- 
- 1 under 6 months
  - 2 6 months to less than 2 and a half years
  - 3 2 and a half years to less than 5 years
  - 4 5 years to less than 12 years
  - 5 12 years to less than 18 years

**A5**

In which province or territory do you reside?

*(Show if CATI) DO NOT READ LIST.*

- 1 Alberta (AB)
- 2 British Columbia (BC)
- 3 Manitoba (MB)
- 4 New Brunswick (NB)
- 5 Newfoundland and Labrador (NL)
- 6 Northwest Territories (NT)
- 7 Nova Scotia (NS)
- 8 Nunavut (NU)
- 9 Ontario (ON)
- 10 Prince Edward Island (PE)
- 11 Quebec (QC)
- 12 Saskatchewan (SK)
- 13 Yukon (YT)

**Q4**

*(Show if CATI) (if Under6months)* During the survey we would like to ask you about your child who is **under 6 months old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

*(if 6monthslessthan2half)* During the survey we would like to ask you about your child who is **6 months to less than 2 and a half years old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

*(if 2halflessthan5)* During the survey we would like to ask you about your child who is **2 and a half years to less than 5 years old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

*(if Child5to11)* During the survey we would like to ask you about your child who is **5 years to less than 12 years**

**old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

*(if Child12to17)* During the survey we would like to ask you about your child who is **12 years to less than 18 years old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

*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*

(Show if Web) (if Under6months) During the survey we would like to ask you about your child who is **under 6 months old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

(if 6monthslessthan2half) During the survey we would like to ask you about your child who is **6 months to less than 2 and a half years old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

(if 2halflessthan5) During the survey we would like to ask you about your child who is **2 and a half years to less than 5 years old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

(if Child5to11) During the survey we would like to ask you about your child who is **5 years to less than 12 years**

**old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

(if Child12to17) During the survey we would like to ask you about your child who is **12 years to less than 18 years old**. If you have more than one child in this age group please think of the oldest. You will be asked questions about this child's vaccination history for COVID-19 and the flu.

What is your relationship to this child?

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

**T6** *Show if Q4 not legalguardian*

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

Status Code: 507

**Q5** *Show if OnlineCont*

(if HasEmail OR Landline) Can I send you a text or email with a link to the survey?

(if Default) Can I send you a text with a link to the survey?

- 1 Yes, send SMS/text message (*Show if Wireless*)
- 2 Yes, send SMS/text message to [a DIFFERENT / a] mobile number
- 3 [Yes, please send me an email / LAST resort send email instead of SMS (Used if they don't have a smartphone or SMS plan) / LAST resort send email instead of SMS (Used if they don't have a smartphone or SMS plan)]
- 4 No - Refused

**refsend** *Show if Q5 refused*  
Thank you for your time, goodbye.

Status Code: 505

## Section A Start of Main Survey

confirmemail, refemail, EndEmail, confirmsms, EndSMS, Info, Info1, A2a, A2b

---

**Page CATI Recruit to Web** *Show if isCATI and Q5 online recruit*

**confirmemail** *Show if sendemail*

What email address would you like us to send the survey link to?

*(Show if CATI) Please take down email address and then read back and confirm using phonetic alphabet.*

---

-8 Refused

**refemail** *Show if Refused Email*  
Thank you for your time. Good-bye.

Status Code: 505

**EndEmail** *Show if Provided Email*

(if Is GPRS) You will be receiving an email message shortly with the survey address and login details. The email will come from 'sday+ccic@telldcityhall.ca'. Have a nice day.

(if Is RDD) You will be receiving an email message shortly with the survey address and login details. The email will come from 'sday+ccic@advanis.ca'. Have a nice day.

(if Default) You will be receiving an email message shortly with the survey address and login details. The email will come from 'sday+ccic@telldcityhall.ca'. Have a nice day.

Status Code: 480

**confirmsms** *Show if sendsms new*

What mobile phone number would you like us to send the survey link to?

*(Show if CATI) Read back phone number to confirm*

---

**EndSMS** *Show if sendsms*

You will be receiving an SMS message shortly with a link to the survey from 13333.

Status Code: 480

## Page A

**Info** *Show if isCATI*

Please note that this call may be recorded for quality assurance purposes. Participation in this study 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.

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.*

***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) (<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, you can contact TellCityHall and Advanis at [sday+ccic@tellcityhall.ca](mailto: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>)*

<health/services/diseases/coronavirus-disease-covid-19/vaccines.html>)

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

**Info1** *Show if noconsent*

Thank you for your time. Good-bye.

Status Code: 551

## Section Web login

Show if isWeb

LoginTCHAdvanisRun, LoginRDD

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## Page Web Login

LoginTCHAdvanisRun

Show if Is GPRS

You have been invited to participate in the 2022 Childhood COVID-19 Immunization Coverage Survey (CCICS), which is distributed by the survey firm Advanis using their TellCityHall data collection methodology on behalf of the **Public Health Agency of Canada**. 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:**

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) (<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) (<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>)

The Public Health Agency of Canada has contracted an independent public opinion research company, Advanis (<http://advanis.net>), to conduct the research on PHAC's behalf. This survey uses Advanis' TellCityHall (<http://www.tellcityhall.ca>) data collection methodology. This project has been registered with CRIC under number 20220314-AD673. [CRIC website](https://www.canadianresearchinsightscouncil.ca/rvs/home/?lang=en) (<https://www.canadianresearchinsightscouncil.ca/rvs/home/?lang=en>)

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### **LoginRDD** *Show if Is RDD*

You have been invited to participate in the 2022 Childhood COVID-19 Immunization Coverage Survey (CCICS), which is distributed by the survey firm Advanis on behalf of the **Public Health Agency of Canada**. 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:**

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@advanis.ca](mailto:sday+ccic@advanis.ca) (<mailto:sday+ccic@advanis.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 Advanis at [sday+ccic@advanis.ca](mailto:sday+ccic@advanis.ca) (<mailto:sday+ccic@advanis.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>)

The Public Health Agency of Canada has contracted an independent public opinion research company, Advanis (<http://advanis.net>), to conduct the research on PHAC's behalf. This project has been registered with CRIC under number 20220314-AD673. [CRIC website](#)

(<https://www.canadianresearchinsightscouncil.ca/rvs/home/?lang=en>)

© 2022 Privacy Policy ([https://www.advanis.net/privacy\\_policy2.html](https://www.advanis.net/privacy_policy2.html)) CRIC Pledge  
(<https://www.canadianresearchinsightscouncil.ca/wp-content/uploads/2020/09/CRIC-Pledge-to-Canadians.pdf>)

## A2a

(if Under6months) The remainder of this survey will be about your child who is **under 6 months old**.

What month was your child born in?

(if 6monthslessthan2half) The remainder of this survey will be about your child who is **6 months to less than 2 and a half years of age**.

What month was your child born in?

(if 2halflessthan5) The remainder of this survey will be about your child who is **2 and a half years to less than 5 years of age**.

What month was your child born in?

(if Child5to11) The remainder of this survey will be about your child who is **5 years to less than 12 years of age**.

What month was your child born in?

(if Child12to17) The remainder of this survey will be about your child who is **12 years to less than 18 years of age**.

What month was your child born in?

*(Show if CATI) DO NOT READ LIST.*

*If they have more than one child in this age group ask them to please think of the oldest.*

*(Show if Web) If you have more than one child in this age group please think of the oldest.*

- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December

**A2b**

What year was your child born in?

Minimum: 2004, Maximum: 2022

<strong><span style="color: blue;">Please enter year of birth:&nbsp;  </span></strong> \_\_\_\_\_

## Section D COVID-19 and Influenza Immunization History - CHILD

DInt, D1, D2, D4, D5, D9, D10, D11, D12, D13, D14, D15, D16, D19, D20, D21, D22, D23, D24, D18

---

**Page D****DInt**

The next few questions are about your child's experience with vaccination against COVID-19.

**D1** *Show if Child of immunization age*

(Show if CATI) Has your child received at least one dose of a COVID-19 vaccine that has been approved in Canada?

**IF NEEDED:** The vaccine Pfizer-BioNTech Comirnaty and Moderna Spikevax COVID-19 vaccine are currently authorized for use in children in Canada. Pfizer-BioNTech Comirnaty is available for children 5 years and above. Moderna Spikevax is available for children 6 years and above.

*DO NOT READ LIST.*

(Show if Web) Has your child received at least one dose of a COVID-19 vaccine that has been approved in Canada?

The vaccine Pfizer-BioNTech Comirnaty and Moderna Spikevax COVID-19 vaccine are currently authorized for use in children in Canada. Pfizer-BioNTech Comirnaty is available for children 5 years old and above. Moderna Spikevax is available for children 6 years and above.

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

**D2** *Show if D1 At least one dose*

How many doses of a COVID-19 vaccine has your child received so far?

*(Show if CATI) READ LIST.*

- 1 1 dose
- 2 2 doses
- 3 3 or more doses
- 4 [DO NOT READ]Don't know
- 5 [DO NOT READ]Prefer not to answer

**D4** *Show if D1 Not vaccinated*

In the future, how likely is it that you will get your child 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

**D5** *Show if Child NOT immunization age*

In the future, if your child becomes eligible for the COVID-19 vaccine, how likely is it that you will get your child 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

**D9** *Show if D1 At least one dose*

Why did your child receive a COVID-19 vaccine?

*(Show if CATI) READ LIST. Select all that apply*

*(Show if Web) Select all that apply*

- 1 To protect themselves and/or household members against COVID-19 infection
- 3 Based on public health recommendations
- 4 To prevent the spread of COVID-19 in my community
- 7 The COVID-19 vaccine was recommended by a health care professional
- 9 To help restore a more normal life [IF NEEDED: / / ](e.g., to lift public health measures, participate in extra-curricular activities, travel, etc.)
- 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)*

**D10** *Show if D1 Not vaccinated*

Why didn't your child receive a COVID-19 vaccine?

*(Show if CATI) READ LIST.*

- 1 My child has an appointment in the future



- 2 My child has a medical exemption
- 3 I was hesitant to get my child vaccinated
- 8 My child was hesitant to get vaccinated
- 4 I decided not to vaccinate my child
- 9 My child decided they did not want to be vaccinated
- 5 Faced an obstacle beyond my/my child control
- 6 [DO NOT READ]Don't know
- 7 [DO NOT READ]Prefer not to answer

**D11** *Show if D1 No*

Did any obstacles prevent your child from getting the COVID-19 vaccine?

*(Show if CATI) READ LIST. Select all that apply*

*(Show if Web) Select all that apply*

- 1 No obstacles *(Exclusive)*
  - 2 Difficulty to book time off work/school for a vaccine appointment
  - 5 Live in a remote area (limited transportation)
  - 6 No reliable internet access
  - 10 Language barrier [IF NEEDED: / ] (e.g. lack of access to relevant information in my language)
  - 11 Concerns about racism or discrimination
  - 12 My child fears needles
  - 13 [READ IF NO RESPONSE SELECTED: / / ] Other, please specify:
- 
- 14 [DO NOT READ]Don't know *(Exclusive)*
  - 15 [DO NOT READ]Prefer not to answer *(Exclusive)*

**D12** *Show if Everyone except D10 Hesitant to get child vaccinated*

*(Show if CATI)* Are you/have you ever been hesitant to vaccinate your child against COVID-19?

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

*DO NOT READ LIST.*

*(Show if Web)* Are you/have you ever been hesitant **\*?\*** to vaccinate your child 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 D10 Hesitant OR D10 Decided not to OR D12 Yes*

*(if D12 yes OR D10 hesitant to vaccinate child)* Why were you hesitant to get a COVID-19 vaccine for your child?

*(if D10 Decided not to)* Why did you decide not to get a COVID-19 vaccine for your child?

(if Default) Why were you hesitant to get a COVID-19 vaccine for your child?

*(Show if CATI) READ LIST. Select all that apply*

*(Show if Web) Select all that apply*

- 2 My child is not at risk of getting COVID-19 or at risk of severe infection
  - 3 I wanted to first 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 of COVID-19 vaccines
  - 6 Concerns about the safety of COVID-19 vaccines and/or side effects
  - 8 My child had a bad experience with previous vaccinations
  - 11 Do/did not know where to get reliable information
  - 13 Religious or philosophical reasons
  - 14 My child had a bad experience with healthcare providers
  - 15 Concerns about racism or discrimination
  - 16 **[READ IF NO RESPONSE SELECTED: / / ]**Other; please specify
- 
- 17 **[DO NOT READ]**Don't know *(Exclusive)*
  - 18 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

## **Page Influenza Immunization History** *Show if Older than 6 months*

**D14** *Show if SelectedChild Age 2 and half or older*

*(Show if CATI)* The next few questions are about your child's experience with vaccination against the flu (influenza).

Prior to the COVID-19 pandemic (March 2020), how often did your child receive their flu vaccine? Would you say...

**READ LIST.**

*(Show if Web)* The next few questions are about your child's experience with vaccination against the flu (influenza).

Prior to the COVID-19 pandemic (March 2020), how often did your child 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
- 6 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

### **D15**

*(Show if CATI)* Did your child receive a flu vaccine this flu season, that is, between September 2021 and March 2022?

**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 receiving their flu vaccine for the first time, they may have been

recommended to receive two doses.

*DO NOT READ LIST.*

(Show if Web) Did your child receive a flu vaccine this flu season, that is, between September 2021 and March 2022? **\*?\***

\*?\* 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 receiving their 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

**D16** *Show if D15 Yes*

(Show if CATI) In what month did your child receive the flu shot? [IF NEEDED: If your child received two doses, what was the month of the first dose?]

**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 receiving their flu vaccine for the first time, they may have been recommended to receive two doses.

*DO NOT READ LIST.*

(Show if Web) In what month did your child receive the flu shot? **\*?\***

If your child received two doses, select the month of the first dose.

\*?\* 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 receiving their flu vaccine for the first time, they may have been recommended to receive two doses.

- 1 September 2021
- 2 October 2021
- 3 November 2021
- 4 December 2021
- 5 January 2022
- 6 February 2022
- 7 March 2022
- 8 Don't know
- 9 Prefer not to answer

**D19** *Show if D15 Yes*

(Show if CATI) Why did your child receive a flu vaccine this flu season?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

*READ LIST. Select all that apply*

(Show if Web) Why did your child receive a flu vaccine this flu season? **\*?\***

*Select all that apply*

**\*?\*** Flu season: between September 2021 and March 2022

- 1 To protect themselves and/or household members from the flu
  - 3 Based on public health recommendations
  - 4 To prevent the spread of the flu in my community
  - 7 The flu vaccine was recommended by a health care professional
  - 9 The flu vaccine is available and free
  - 10 Increased concerns about flu because of the COVID-19 pandemic
  - 11 My child receives it every year
  - 13 **[READ IF NO RESPONSE SELECTED: / / ]**Other; please specify
- 
- 14 **[DO NOT READ]**Don't know *(Exclusive)*
  - 15 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

**D20** *Show if D15 No*

(Show if CATI) Did any obstacles prevent your child from getting the flu vaccine this flu season?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

*READ LIST. Select all that apply*

(Show if Web) Did any obstacles prevent your child from getting the flu vaccine this flu season? **\*?\***

*Select all that apply*

**\*?\*** Flu season: between September 2021 and March 2022

- 1 No obstacles *(Exclusive)*
  - 2 Difficulty to book time off work/school for a vaccine appointment
  - 5 Living in a remote area (limited transportation)
  - 6 No reliable internet access
  - 10 Cost of the vaccine
  - 11 Language barrier **[IF NEEDED: / ]**(e.g. lack of access to relevant information my language)
  - 12 Concerns about racism or discrimination
  - 13 My child fears needles
  - 14 **[DO NOT READ]**Other, please specify
- 
- 15 **[DO NOT READ]**Don't know *(Exclusive)*
  - 16 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

**D21**

(Show if CATI) Were you hesitant to vaccinate your child against the flu, during this flu season?

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

**IF NEEDED:** Flu season: between September 2021 and March 2022.

*DO NOT READ LIST.*

(Show if Web) Were you hesitant to vaccinate your child 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 2021 and March 2022

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

**D22** *Show if D15 No*

(Show if CATI) Did you refuse to get the flu vaccine for your child, during this flu season?

**IF NEEDED:** Flu season: between September 2021 and March 2022.]]

*DO NOT READ LIST.*

(Show if Web) Did you refuse to get the flu vaccine for your child, during this flu season? **\*?\***

\*?\* Flu season: between September 2021 and March 2022.

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

**D23** *Show if D21 Yes OR D22 Yes*

(Show if CATI) (if D21 Yes AND D22 NOTYes) Why were you hesitant to get the flu vaccine for your child?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

(if D21 NOTYes AND D22 Yes) Why did you decide not to get the flu vaccine for your child?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

(if D21 Yes AND D22 Yes) Why were you hesitant and decided not to get the flu vaccine for your child?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

(if Default) Why were you hesitant to get the flu vaccine for your child?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

*READ LIST. Select all that apply*

(Show if Web) (if D21 Yes AND D22 NOTYes) Why were you hesitant to get the flu vaccine for your child?

**\*?\***

(if D21 NOTYes AND D22 Yes) Why did you decide not to get the flu vaccine for your child? **\*?\***

(if D21 Yes AND D22 Yes) Why were you hesitant and decided not to get the flu vaccine for your child?

**\*?\***

(if Default) Why were you hesitant to get the flu vaccine for your child? \*\*?

Select all that apply

\*\* Flu season: between September 2021 and March 2022.

- 2 My child is not at risk of getting the flu or at risk of severe infection
  - 3 I wanted to first discuss the flu vaccine with my child's health care practitioner
  - 4 I was concerned about the effectiveness of the flu vaccine
  - 5 I had concerns about the safety of the flu vaccine and/or side effects
  - 7 My child had a bad experience with previous vaccines
  - 10 I did not know where to get reliable information
  - 11 Religious or philosophical reasons
  - 13 My child had a bad experience with healthcare providers
  - 14 Concerns about racism or discrimination
  - 15 [READ IF NO RESPONSE SELECTED: / / ]Other; please specify
- 
- 16 [DO NOT READ]Don't know (Exclusive)
  - 17 [DO NOT READ]Prefer not to answer (Exclusive)

#### D24

(Show if CATI) Did the COVID-19 pandemic affect your decision to get your child vaccinated against the flu during this flu season?

IF YES: Prompt with first two response options.

IF NEEDED: Flu season: between September 2021 and March 2022.

(Show if Web) Did the COVID-19 pandemic affect your decision to get your child vaccinated against the flu during this flu season? \*\*?

\*\* Flu season: between September 2021 and March 2022.

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

#### D18

How likely is it that you will get your child vaccinated against the flu in the next flu season, that is, as of September 1, 2022?

(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

## Section B Demographic information of child

B1, B2, B3, B4, B5, F1

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### Page B

#### B1

The next few questions will help us understand the background characteristics of children in this survey. Remember that all the information you provide is completely anonymous and will be kept confidential.

What school or grade is your child in?

*(Show if CATI) DO NOT READ UNLESS NEEDED.*

- 1 Day care or preschool
- 2 Kindergarten
- 3 Grades 1 to 6
- 4 [Secondary I-III / Grades 7 to 9 ]
- 5 [Secondary IV- V / Grades 10 to 12]
- 6 CEGEP, college or university
- 7 [DO NOT READ]None of the above
- 8 [DO NOT READ]Don't know
- 9 [DO NOT READ]Prefer not to answer

#### B2

What was your child's assigned sex at birth?

*(Show if CATI) DO NOT READ.*

- 1 Male
- 2 Female

#### B3

*(Show if CATI)* What is your child's gender?

**IF NEEDED:** Gender refers to current gender which may be different from sex assigned at birth and may be different from what is indicated on legal documents.

*READ LIST.*

*(Show if Web)* What is your child's gender?

Gender refers to current gender which may be different from sex assigned at birth and may be different from what is indicated on legal documents.

- 1 Boy
- 2 Girl
- 3 Other, please specify \_\_\_\_\_
- 4 [DO NOT READ]Don't know
- 5 [DO NOT READ]Prefer not to answer

**B4**

(Show if CATI) What is your child's racial or ethnic background?

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

*READ LIST UNTIL INTERRUPTED, AFTER, PROMPT FOR 'ANY OTHERS?'*  
*Select all that apply.*

(Show if Web) What is your child's racial or ethnic background?

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, Inuk/Inuit)
- 4 Indigenous from another part of the world
- 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]**Do not know *(Exclusive)*
- 11 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

**B5** *Show if B4 Indigenous FNations Metis or Inuk Inuit*

Does your child identify as First Nations, Métis and/or Inuk/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 Inuk/Inuit
- 4 **[DO NOT READ]**Don't know *(Exclusive)*
- 5 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

**F1** *Show if A2b born before 2020*

(Show if CATI) Prior to the start of the COVID-19 pandemic in March 2020, did your child receive all recommended routine vaccinations for their age? Do not include COVID-19 and Flu vaccines.

**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 papilloma



virus, etc.

*READ LIST IF NEEDED.*

(Show if Web) Prior to the start of the COVID-19 pandemic in March 2020, did your child receive all recommended routine vaccinations for their age? Do not include COVID-19 and Flu vaccines.

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 papilloma virus, etc.

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

## Section C Lifestyle/Risk of contracting infection

C1, C2

### Page C

#### C1

Does your child have any of the following conditions?

*(Show if CATI) READ LIST. Select all that apply*

*(Show if Web) 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 *(Exclusive)*
  - 15 [DO NOT READ]Don't know *(Exclusive)*
  - 16 [DO NOT READ]Prefer not to answer *(Exclusive)*

#### C2

(Show if CATI) Does your child identify as a person with a disability?

**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).

*DO NOT READ LIST.*

(Show if Web) Does your child identify as a person with a disability?

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 E COVID-19 and Influenza immunization history - PARENT

E1, E2, E2a, E3, E5, E6, E7, E8, E9, E13, E14, E15, E11

---

### Page E

#### E1

(Show if CATI) The next few questions are about **your** experiences with vaccination against COVID-19.

Have you received at least one dose of a COVID-19 vaccine that has been approved in Canada?

**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.

*DO NOT READ LIST.*

(Show if Web) The next few questions are about **your** experiences with vaccination against COVID-19.

Have you received at least one dose of a COVID-19 vaccine that has been approved in Canada? **\*?\***

**\*?\*** 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 Yes
- 2 No
- 3 [DO NOT READ]Don't know
- 4 [DO NOT READ]Prefer not to answer

**E2** *Show if E1 Yes*

(Show if CATI) And, how many doses of a COVID-19 vaccine have you received so far?

*READ LIST IF NEEDED.*

(Show if Web) How many doses of a COVID-19 vaccine have you received so far?

- 1 1 dose
- 2 2 doses
- 3 3 doses
- 4 4 or more doses
- 5 Don't know
- 6 Prefer not to answer

**E2a** *Show if E2 1 dose*

Was your vaccine Johnson and Johnson's Janssen?

*(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

**E3** *Show if E1 No*

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
- 6 [DO NOT READ]Prefer not to answer

**E5** *Show if E1 No*

What is the main reason why you did not receive a COVID-19 vaccine?

*(Show if CATI) READ LIST.*

- 1 I have an appointment in the future
- 2 I have a medical exemption
- 3 I was hesitant to get vaccinated
- 4 I decided not to get vaccinated
- 5 I faced an obstacle beyond my control
- 6 [DO NOT READ]Don't know
- 7 [DO NOT READ]Prefer not to answer

**E6** *Show if E5 NOT Hesitant*

(Show if CATI) Have you ever been hesitant to vaccinate yourself against COVID-19?

**IF NEEDED:** 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 hesitant to vaccinate yourself 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

**E7** *Show if E6 Yes OR E5 Hesitant or decided not to vaccinate*

(if E6 Yes OR E5 Hesitant) Why were you hesitant to get a COVID-19 vaccine?

(if E5 Decided not to vaccinate) Why did you decide not to get a COVID-19 vaccine?

(if Default) Why were you hesitant to get a COVID-19 vaccine?

*(Show if CATI) READ LIST. Select all that apply*

*(Show if Web) Select all that apply*

- 2 I am not at risk of getting COVID-19 or at risk of severe infection
  - 3 I want/wanted to first discuss COVID-19 vaccines with my health care practitioner
  - 4 Concerns that not enough research on the vaccine has been done
  - 5 Concerns about the effectiveness of COVID-19 vaccines
  - 6 Concerns about the safety of COVID-19 vaccines and/or side effects
  - 8 Bad experience or reaction with previous vaccination
  - 11 Do/did not know where to get reliable information
  - 13 Religious or philosophical reasons
  - 14 I had a bad experience with healthcare providers
  - 15 Concerns about racism or discrimination
  - 16 [READ IF NO RESPONSE SELECTED: / / ]Other; please specify
- 
- 17 [DO NOT READ]Don't know *(Exclusive)*
  - 18 [DO NOT READ]Prefer not to answer *(Exclusive)*

## **Page Influenza Immunization History of the Parent**

**E8**

The next few questions are about your experiences with vaccination against the flu or influenza.

Prior to the COVID-19 pandemic in March 2020, 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
- 6 [DO NOT READ]Prefer not to answer (Exclusive)

**E9**

Did you get the flu vaccine during this flu season (between September 2021 and March 2022)?

*(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

**E13**

*(Show if CATI)* Were you hesitant about getting the flu vaccine, during this flu season?

**IF NEEDED:** Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability.  
Flu season: between September 2021 and March 2022

*DO NOT READ LIST.*

*(Show if Web)* Were you hesitant about getting the flu vaccine, during this flu season? **\*?\***

\*?\* Vaccine hesitancy refers to a delay in acceptance or refusal of vaccines despite availability  
Flu season: between September 2021 and March 2022

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

**E14** *Show if E9 No*

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

**E15** *Show if E13 or E14 Yes*

*(Show if CATI)* (if E13 Yes AND E14 NOTYes) Why were you hesitant to get the flu vaccine this flu season?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

*(if E13 NOTYes AND E14 Yes)* Why did you decide not to get the flu vaccine this flu season?

**IF NEEDED:** Flu season: between September 2021 and March 2022.

*(if E13 Yes AND E14 Yes)* Why were you hesitant and decided not to get the flu vaccine this flu season?

**IF NEEDED:** Flu season: between September 2021 and March 2022.  
(if Default) Why were you hesitant to get the flu vaccine this flu season?  
**IF NEEDED:** Flu season: between September 2021 and March 2022.

*READ LIST. Select all that apply*

(Show if Web) (if E13 Yes AND E14 NOTYes) Why were you hesitant to get the flu vaccine this flu season? **\*?\***  
(if E13 NOTYes AND E14 Yes) Why did you decide not to get the flu vaccine this flu season? **\*?\***  
(if E13 Yes AND E14 Yes) Why were you hesitant and decided not to get the flu vaccine this flu season? **\*?\***  
(if Default) Why were you hesitant to get the flu vaccine this flu season? **\*?\***

*Select all that apply*

\*?\* Flu season: between September 2021 and March 2022.

- 2 I am not at risk of getting the flu or at risk of severe infection
  - 3 I wanted to first discuss the flu vaccine with my health care practitioner
  - 4 I was concerned about the effectiveness of the flu vaccine
  - 5 I had concerns about the safety of the flu vaccine and/or side effects
  - 7 I had a bad experience with previous vaccines
  - 10 I did not know where to get reliable information
  - 11 Religious or philosophical reasons
  - 13 I had a bad experience with healthcare providers
  - 14 Concerns about racism or discrimination
  - 15 **[READ IF NO RESPONSE SELECTED: / / ]**Other; please specify
- 
- 16 **[DO NOT READ]**Don't know *(Exclusive)*
  - 17 **[DO NOT READ]**Prefer not to answer *(Exclusive)*

**E11**

How likely are you to get vaccinated against the flu in the next flu season, that is, as of September 1, 2022?

*(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

## Section F Knowledge, Attitudes and Behaviours

F2, F3

### Page F

#### 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
- 5 My local public health unit/clinic
- 6 Public Health Agency of Canada/Health Canada
- 8 Community nursing stations or clinics
- 11 News/media/social media
- 13 National Advisory Committee on Immunization (NACI)
- 14 International sources (e.g., World Health Organization (WHO))
- 15 Other, please specify: \_\_\_\_\_
- 16 [DO NOT READ] Don't know *(Exclusive)*
- 17 [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
  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
  11. Public health measures are important to prevent and/or reduce the spread of COVID-19
  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
- 1 Strongly agree
  - 2 Somewhat agree
  - 3 Somewhat disagree
  - 4 Strongly disagree

- 5 [DO NOT READ]Don't know
- 6 [DO NOT READ]Prefer not to answer

## Section G Demographic Information of parent/legal guardian

G1, G2, A3, G3, G4, G5, G6, G7, G8, G9, G10, G11, G12

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### Page G

#### 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
- 4 [DO NOT READ]Prefer not to answer

#### G2

*(Show if CATI)* Do you live in an urban or rural area?

**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.

*DO NOT READ.*

*(Show if Web)* Do you live in an urban or rural area?

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
- 4 [DO NOT READ]Prefer not to answer

#### A3

How old are **you**?

*(Show if Web)* To expand the category select the "+" and make your selection within the group.

- 15 \_\_TREE\_QUESTION\_\_
- 18 18 to 19|18
- 19 18 to 19|19
- 20 20 to 29|20
- 21 20 to 29|21



- 22 20 to 29|22
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- 91 90 to 99|91
- 92 90 to 99|92
- 93 90 to 99|93
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- 95 90 to 99|95
- 96 90 to 99|96
- 97 90 to 99|97
- 98 90 to 99|98
- 99 90 to 99|99
- 100 100 or more|100 or more
- 8 <<catiDoNotRead>>Prefer not to answer

**G3**

(Show if CATI) What is your racial or ethnic background?

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

describe yourself

*READ LIST UNTIL INTERRUPTED, AFTER, PROMPT FOR 'ANY OTHERS?'*

*Select all that apply*

(Show if Web) What is your racial or ethnic background?

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, Inuk/Inuit)
- 4 Indigenous from another part of the world
- 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]Do not know *(Exclusive)*
- 11 [DO NOT READ]Prefer not to answer *(Exclusive)*

**G4** *Show if G3 Indigenous FNations Metis or Inuk Inuit*

Do you identify as First Nations, Métis and/or Inuk/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 Inuk/Inuit
- 4 [DO NOT READ]Don't know *(Exclusive)*
- 5 [DO NOT READ]Prefer not to answer *(Exclusive)*

**G5** *Show if G4 First Nations*

Is your primary residence on reserve?

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

**G6** *Show if G4 Inuk Inuit*

Is your 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

**G7**

Which group best defines your citizenship status in Canada?

*(Show if CATI) READ LIST.*

- 1 Canadian citizen by birth [[[Born in Canada or born outside Canada with at least one of the parents being Canadian]] / IF NEEDED: this means born in Canada or born outside Canada with at least one Canadian parent]
- 2 Canadian citizen by naturalization [[[Canadian citizen by naturalization refers to a person who was not born as a Canadian citizen who was granted citizenship of Canada under the Citizenship Act]] / IF NEEDED: Canadian citizen by naturalization refers to a person who was not born as a Canadian citizen and was granted citizenship of Canada under the Citizenship Act]
- 3 Permanent Resident/landed immigrant
- 4 Refugee claimant/Asylum seekers
- 5 Temporary resident in Canada (e.g., international student, etc.)
- 6 [DO NOT READ]Don't know
- 7 [DO NOT READ]Prefer not to answer

**G8** *Show if G7 2 to 5*

(Show if CATI) How many years have you been living in Canada?

*Enter 0 if less than a year.*

(Show if Web) How many years have you been living in Canada?

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
  - 11 [DO NOT READ]Prefer not to answer

**G10**

What is your current employment status? Are you...

*(Show if CATI) READ LIST UNTIL INTERRUPTED.*

- 1 Working full-time, that is, 35 or more hours per week
- 2 Working part-time, that is, 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
- 10 [DO NOT READ]Prefer not to answer

**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.

*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 [[e.g.: physician, nurse, occupational/physical therapist, etc., those who work, study, or volunteer in hospitals, long-term care, nursing home, and community settings.]] / IF NEEDED: For example physician, nurse, occupational/physical therapist, or employees who work, study, or volunteer in hospitals, long-term care, nursing home, and community settings.]
- 3 Child care or schools [IF NEEDED: For example a teacher or daycare worker / [[e.g., teacher, daycare worker]]]

- 4 Exposed to animals or their materials [IF NEEDED: For example a veterinarian / [[e.g., veterinarian]]]
- 6 Emergency services worker [IF NEEDED: For example a police officer, fire fighter or paramedic / [[e.g., police, fire fighter, EMT]]]
- 15 Other [READ: For example worker in a correction facility, on a crew ship or aircraft, military personnel, humanitarian relief or essential community service / [[e.g., For example worker in a correction facility, on a crew ship or aircraft, military personnel, humanitarian relief or essential community service]]]
- 12 I don't work in any of the above sectors (Exclusive)
- 13 [DO NOT READ] Don't know (Exclusive)
- 14 [DO NOT READ] Prefer not to answer (Exclusive)

**G12**

(Show if CATI) And what was your total household income, before taxes and deductions, for the year ending December 31, 2021.

*READ LIST UNTIL INTERRUPTED.*

(Show if Web) Please indicate your total household income, before taxes and deductions, for the year ending December 31, 2021.

- 1 Under \$20,000
- 2 \$20,000 to \$39,999
- 3 \$40,000 to \$59,999
- 4 \$60,000 to \$79,999
- 5 \$80,000 to \$99,999
- 6 \$100,000 to \$149,999
- 7 \$150,000 and above
- 8 [DO NOT READ] Don't know
- 9 [DO NOT READ] Prefer not to answer

**Section End Pages**

EndTCH, EndCATI, childrensages

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**Page Ene1**

**End** *Show if isWeb*

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.

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Status Code: -1

**EndCATI**      *Show if isCATI*

Those are all our questions. Thank you for your time.

Status Code: -1