

ARISE Network COVID-19 Round 2 Adolescent Survey

To be administered over the phone to adolescents.

INTERVIEWER QUESTIONS

Interview date and time to be automatically coded by ODK.

Question	Responses
Country/Region	1 = Burkina Nouna 2 = Burkina Ouaga 3 = Ethiopia Addis 4 = Ethiopia Kersa 5 = Nigeria Ibadan 6 = Nigeria Lagos 7 = Tanzania DSM 8 = Tanzania Dodoma 9 = Ghana Kintampo
Data collector's code	
Participant initials (first, middle and last name)	
Was this participant included in the round 1 survey? <i>(omit for Tanzania and Ghana)</i> <i>If Yes, please input the household and participant ID they were assigned in the last survey in the next field. If they are a new participant, assign them a new ID.</i>	0=No 1=Yes
Household ID	
Participant identification number	
Phone number called	
Was the phone call answered?	0=No 1=Yes
If No, how many times have you tried to reach this phone number? <i>Note to interviewer: each phone number should be tried three times on separate days.</i>	0=This was the first attempt 1=This was the second attempt 2=This was the third (final) attempt 99= Don't know
If Yes, what was the outcome of the call?	0=Participant unavailable now but requested a call-back 1=Participant unavailable now but did not want to be called back 2=Participant refused to continue the phone conversation or hung up 3=Participant agreed to proceed with the screening questions 4= Other (specify)
Specify other	

PARTICIPANT QUESTIONS

Screening Question

Are you an adolescent between the ages of 10 and 20? <i>If No, thank the participant and end the interview.</i>	0=Yes 1=No
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Consent/Assent

<i>Does the participant's parent provide permission for the adolescent to participate in the survey?</i>	0 = No 1 = Yes <i>If the response is No, terminate the interview</i>
<i>Does the participant provide assent to participate in the survey?</i>	0 = No 1 = Yes <i>If the response is No, terminate the interview</i>

1. Descriptive Characteristics

Question	Responses
1.1.1. What state/region/province do you currently live in?	<i>Insert dropdown list for each country.</i>
1.1.2. What is your age in years? <i>Refer to completed years</i>	__ __ years
1.1.3. What is your gender?	0 = Female 1 = Male
1.1.4. What is the highest level of education that you have completed?	0 = None, religious school, literacy class 1 = Some primary school education 2 = Completed primary school 3 = Some secondary/high school 4 = Completed secondary/high school 5 = Tertiary education (vocational training, college, university) or higher 99 = Refuse to answer
1.1.5. What is your current occupation? <i>(Select all that apply)</i>	0 = Unemployed 1 = Student 2 = Farmer 3 = Wage employment 4 = Self-employed 6 = Casual, off-farm income 96 = Other (specify) 99 = Refuse to answer

2. COVID-19 Practices

Question	Responses
2.1.1 What measures do you currently take, if any, to reduce your risk of contracting COVID-19?	0 = Nothing 1 = Wash hands with soap and/or use hand sanitizer

<i>Read all options aloud and select all that apply.</i>	2 = Social distancing and/or reduced social gatherings 3 = Wear a face mask 4 = Change/cancel travel plans 5 = Drink/eat lemon, ginger or garlic or ginger tea 6 = Take vitamin C, vitamin D, zinc or other nutritional supplements 7 = Steaming or sauna treatment 96 = Other (specify) 99 = Refuse to answer
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3. Impacts on Behaviors

Question	Responses
3.1. Daily Activities	
3.1.1. What impacts are the COVID-19 pandemic currently having on your daily activities? <i>Read all options aloud and select all that apply.</i>	0 = None 1 = No longer going to school 2 = No longer earning money 3 = Staying at home more often 4 = Increased responsibilities at home (taking care of siblings, cooking, cleaning, etc.) 5 = Gaining weight 6 = Losing weight 96 = Other (specify) 97 = Don't know 99 = Refuse to answer
3.2. Education	
3.3.1. Prior to the COVID-19 pandemic, were you enrolled in school?	0 = No 1 = Yes 97 = Don't know 99 = Refuse to answer <i>If the response is 0 or 99, skip 3.3.4.</i>
3.3.2. Has your school ever been closed in response to the COVID-19 pandemic? <i>If the response is 0 or 99, skip to 3.3.4.</i>	0 = No 1 = Yes 97 = Don't know 99 = Refuse to answer
3.3.3. Approximately how long was your school closed for?	___ months 97 = Don't know 99 = Refuse to answer
3.3.4. Did you return to school AFTER it reopened? <i>If the response is 0 or 99, skip to next section (4.1.)</i>	0 = No 1 = Yes 97 = Don't know 99 = Refuse to answer
3.3.5. Are you currently participating in classes?	0 = No 1 = Yes, in person 2 = Yes, partially in person (e.g. several days per week in person)

	3 = Yes, through take-home materials 4 = Yes, through online coursework 5 = Yes, through homeschooling 6 = Yes, through other methods 97 = Don't know 99 = Refuse to answer
3.3.6. How easy was it for you to catch up on your education after your school reopened? <i>Only show if 3.3.3 = Yes.</i>	0 = Not possible 1 = Very difficult 2 = Slightly difficult 3 = Not easy or difficult 4 = Slightly easy 5 = Very easy 97 = Don't know 99 = Refuse to answer
3.3.7. Did your school provide any meals on one or more days per week before the pandemic?	0 = No 1 = Yes 2 = Not enrolled in school before the pandemic 99 = Refuse to answer
3.3.8. Does your school currently provide any meals on one or more days per week?	0 = No 1 = Yes 2 = Not currently enrolled in school 99 = Refuse to answer
3.3.9. Has the meal service ever been stopped due to the COVID-19 pandemic?	0 = No 1 = Yes 2 = Not applicable/not enrolled in school 99 = Refuse to answer

4. Nutrition and well-being

Question	Responses
4.1. Diet Assessment	
4.2.1. In the last seven days, how many days did you consume these foods?	
a. Staples (e.g. maize, rice, samp, teff, cassava, plantains/cooking banana, yams)	Days per week
b. Pulses (e.g. beans, lentils, peas, groundnuts)	Days per week
c. Fruits (e.g. bananas, oranges, mangoes, any locally available fruits)	Days per week
d. Vegetables (e.g. spinach, cabbage, tomatoes, onions, amaranthus, any locally available vegetables)	Days per week
e. Animal-source foods (e.g. beef, chicken, dairy, eggs, fish)	Days per week

5. Mental Health and Well-being

Question	Responses
5.1.1. Over the last two weeks, how often have you been bothered by the following problems?	

a. Feeling nervous, anxious or on edge	0=Not at all 1=Several days 2=More than half the days 3=Nearly everyday 97 = Don't know 99 = Refuse to answer
b. Not being able to stop or control worrying	0=Not at all 1=Several days 2=More than half the days 3=Nearly everyday 97 = Don't know 99 = Refuse to answer
c. Feeling down, depressed or hopeless	0=Not at all 1=Several days 2=More than half the days 3=Nearly everyday 97 = Don't know 99 = Refuse to answer
d. Little interest or pleasure in doing things	0=Not at all 1=Several days 2=More than half the days 3=Nearly everyday 97 = Don't know 99 = Refuse to answer

6. Vaccines

Question	Responses
6.1. Vaccine knowledge, attitudes, practices	
6.1.1. Have you heard of a vaccine for COVID-19?	0=No 1=Yes 97 = Don't know 99 = Refuse to answer
6.1.2. How much do you agree with this statement? "If a vaccine for COVID-19 were available now, I would definitely get it."	0=No, would definitely not get it 1=Yes, would definitely get it 2=Maybe, would wait and see what others do before getting it 3=Unsure/undecided 99 = Refuse to answer
6.1.3. Which of the following are reasons for why you <i>would</i> get the COVID-19 vaccine? <i>If 6.1.2 = Yes, Maybe, or Unsure/undecided, or if 6.1.1 = 1</i>	
a) I would get the vaccine to keep myself and my family safe	0=Disagree / No 1=Agree / Yes 97 = Don't know 99 = Refuse to answer
b) I would get the vaccine because my parents/family wants me to get it	0=Disagree / No 1=Agree / Yes 97 = Don't know 99 = Refuse to answer
c) I would get the vaccine because my doctor suggested I get it	0=Disagree / No 1=Agree / Yes

	97 = Don't know 99 = Refuse to answer
d) There are additional reasons I would get the vaccine	0=Disagree / No 1=Agree / Yes, (<i>Specify</i>)
6.1.4. What are the reasons why you would <i>not</i> get the COVID-19 vaccine? <i>If 6.1.2 = No or Unsure/undecided</i> <i>(Do not read answer choices aloud; code responses and/or enter "other")</i> <i>(Select all that apply)</i>	1=Do not think it is needed 2=Do not think I am at risk of getting COVID 3=Do not think the vaccine is effective against COVID-19 4= Heard/read negative media reports 5=Do not think the vaccine is safe/ It was developed too fast 6= Concerned about side effects 7= Fear of getting an unlicensed / experimental vaccine, fear that people here will get worse quality vaccines 8=Fear getting COVID-19 disease from the vaccine 9=Fear getting other illnesses / autism from the vaccine 10= Fear the vaccine will cause infertility / sterilization / population control 11=Religious reasons/church or religion advises against 12=Fear of microchipping 13=Fear of New World Order 14= Had a bad experience or reaction with previous vaccinations 15=Concerned because I have a chronic condition e.g. diabetes, hypertension and not sure it is safe for people with my condition 16=Personal liberty / do not want bodily intrusion 96= Other (specify) 97 = Don't know 99 = Refuse to answer
6.2. COVID vaccine awareness and perception	
6.2.1. In general, how safe do you think COVID-19 vaccines are?	1=Very safe 2=Somewhat safe 3=Not very safe 4=Not at all safe 97 = Don't know 99 = Refuse to answer
6.2.2. How safe do you think COVID-19 vaccines are for children and adolescents?	1=Very safe 2=Somewhat safe 3=Not very safe 4=Not at all safe 97 = Don't know 99 = Refuse to answer
6.2.3. In general, how effective do you think the COVID-19 vaccines are in preventing COVID infection?	1=Very effective 2=Somewhat effective 3=Not very effective 4=Not effective at all 97 = Don't know 99 = Refuse to answer
6.2.4. Does the COVID vaccine have any side effects that you are aware of?	0= No side effects 1=Fever

<p><i>(Do not read answer choices aloud; code responses and/or enter "other")</i> <i>(Select all that apply)</i></p>	<p>2=Body ache, including sore arm 3=Nausea 4=Tiredness / exhaustion 96= Other (specify) 97 = Don't know 99 = Refuse to answer</p>
<p>6.3. Willingness to get the COVID vaccine</p>	
<p>6.3.1. Does the COVID-19 vaccine's country of origin affect your willingness to take the vaccine? <i>If no, skip to 6.3.3.</i></p>	<p>0 = No 1 = Yes 97 = Don't know 99 = Refuse to answer</p>
<p>6.3.2. <i>As of now we know that vaccines have been developed by several countries.</i> Which countries or regions would you be willing to take a COVID-19 vaccine developed from? <i>Read all options aloud and select all that the participant lists.</i></p>	<p>1 = US 2 = China 3 = Russia 4 = India 5 = Europe 6 = Other 97 = Don't know 99 = Refuse to answer</p>
<p>6.3.3. If a COVID-19 vaccine had been developed or tested in Africa would that affect your willingness to take it?</p>	<p>0=No, will not change my mind 1=Yes, will decrease my chances of taking it 1=Yes, will increase my chances of taking it 97 = Don't know 99 = Refuse to answer</p>
<p>6.3.4. Do any of the following groups or individuals influence your opinion about whether or not you would take the COVID-19 vaccine?</p>	
<p>a) My parents or other family</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>
<p>b) Religious leaders (imams, pastors, priests)</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>
<p>c) Community/tribal leaders/political leaders</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>
<p>d) Political leaders</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>
<p>e) Celebrities/social media influencers</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>
<p>f) Healthcare workers (nurses, doctors etc.)</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>
<p>g) My school teachers</p>	<p>0=No 1=Yes 97 = Don't know 99 = Refuse to answer</p>

6.4. Information sources	
6.4.1. Which information sources do you trust to provide accurate information about the COVID-19 vaccine?	
a) Television, radio, or newspaper	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
b) Social media (Facebook, WhatsApp, Twitter, etc.)	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
c) Internet	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
d) Friends/family	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
e) Religious bodies/leaders	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
f) Medical professionals	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
g) My schoolteachers	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
h) Government communications/announcements	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
i) Other (specify)	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
6.5. Benefits and expectations of the vaccine campaign	
6.5.1. Would you be willing to participate in a vaccine clinical trial if one were available locally?	1=True / Yes 0=False / No 97 = Don't know 99 = Refuse to answer
6.5.2. When do you think a COVID-19 vaccine will be made available to you?	0=Never 1=Already received the vaccine 2=Before the end of 2021 3=During the first six months of 2022 4=During the last six months of 2022 5=2023 or later 97 = Don't know 99 = Refuse to answer

6.5.3. Once vaccines are available, should people continue to follow preventative guidelines such as social distancing, washing hands, using masks, etc?	0=No 1=Yes 97 = Don't know 99 = Refuse to answer
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7. Follow-up

Question	Responses
7.1.1. What is the best phone number to reach you for a future call?	

This concludes our survey. Thank you for your time and attention.