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Survey of Parents on Key Issues Related to Immunization

FINAL REPORT

Ce rapport est également disponible en français sur demande.

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EXECUTIVE SUMMARY

Quantitative research was conducted with Canadian parents in order to understand their perceptions and information needs related to childhood immunizations. Telephone interviews were conducted with a random sample of 1,745 Canadian parents, screening for those who had at least one child under the age of 18. Interview questions investigated Canadian parents' knowledge, awareness, attitudes and behaviours related to immunization. Findings from this research will be used to inform public education strategies and initiatives.

Incidence of Immunization

Nine in ten parents indicated that their child's immunizations are up to date, while one in ten reported that their child had missed at least one of the recommended vaccines. The most commonly missed vaccines include: seasonal flu, chicken pox, Hepatitis B and MMR. Twenty-eight per cent of parents who say their child has missed an immunization feel that vaccines are unnecessary, arguing instead that the human body is fully capable of caring for itself. Sixteen per cent of parents within this segment do not believe in vaccine use, either for philosophical reasons or as a consequence of religious beliefs, and a similar proportion has concerns about the safety of vaccines.

The survey also explored the incidence of HPV immunization and parents' attitudes toward this vaccine in particular. Of households where there is at least one girl of eligible age in her province to receive the HPV vaccine, approximately half reported that their daughter had received the vaccine. Another 31 per cent of parents, who had not yet had their daughter immunized, indicated that they would do so in the future. For most parents, protection against cancer is the primary driver of the decision to immunize against HPV.

Finally, the survey also explored the incidence of H1N1 immunization. Half of parents indicated that their child had received the H1N1 vaccine. A similar proportion (44%) reported that they would be highly likely to have their child immunized in the event of a new global flu pandemic; a further 33 per cent stated that they would be moderately likely and the remainder indicated a low likelihood (22%).

Perceptions Regarding Immunization

Parents reported various levels of familiarity with childhood vaccines, with half of respondents reporting high familiarity and a similar proportion reporting moderate familiarity. Only six per cent of parents feel their knowledge about childhood vaccines is relatively limited.

Nine in ten parents believe childhood vaccines in general are effective and important for their child's health. The childhood vaccines for tetanus/ diphtheria/Hib/pertussis/polio, meningococcal disease, measles/mumps/rubella and pneumococcal disease in particular are seen as highly important. The vaccines

for human papillomavirus (HPV) and chicken pox are deemed highly important by about half of parents. Parents are divided regarding the importance of the seasonal flu vaccine: one-quarter feels this vaccine is highly important, and another quarter feels it is of little or no importance, with the remainder deeming the vaccine moderately important.

Most parents are confident in the safety of childhood vaccines, with 65 per cent of parents rating them as highly safe, 30 per cent rating them as moderately safe and very few saying that they are unsafe. By comparison, parents expressed greater caution with regard to the safety of prescription drugs and over the counter medicines. Parents are considerably more concerned with the safety of natural health products, with just one in four rating these as safe. Nonetheless, in response to other lines of inquiry, some safety concerns were expressed with respect to vaccines. In particular, half of parents indicated concern that newer vaccines are not as safe as older vaccines. Four in ten parents are more concerned about the safety of vaccines now than five years ago and a similar proportion agrees that adverse reactions to vaccines don't get enough attention in the media. A third of parents feel that children today receive too many vaccines.

Information and Decision-Making Process

Parents feel that they are well-equipped to make informed decisions when it comes to having their child immunized, as more than eight in ten say they have enough information. Parents generally reported that they had little difficulty in making the decision to immunize their child in the past. That said, one in ten respondents felt that decisions to immunize their child had been difficult, expressing concerns over possible side effects of immunizations and controversial or conflicting evidence about vaccines presented by the media. Parents who do not feel that they have enough information to make informed decisions when it comes to immunizations are most often looking for information that will enable them to assess the risks and side effects associated with the vaccine, as well as the risks associated with the disease it protects against.

Most parents have searched for information regarding childhood vaccines. Sources that are most popular among these parents are Internet-based sources and physicians. Parents who have used the Internet to seek information most commonly used a general Google web search, or consulted various government websites, including Health Canada and provincial or Government of Canada websites generally. Despite the widespread use of the Internet to search for vaccine information, only one quarter of parents see the Internet as their most reliable and trustworthy source of information. Rather, most parents cite physicians as most reliable and trustworthy (68 per cent). This is consistent with the finding that six in ten parents believe there is considerable misinformation about vaccines on the Internet, while only half feel that the Internet is giving parents access to good information to make decisions regarding immunization.

Almost half of parents have had a discussion with a health care professional about a concern related to immunization. Of these, one-third indicated concerns about potential side effects and a further 15 per cent questioned the necessity of getting the vaccine in question. With regard to outcome, 68 per cent of those with concerns ultimately had their child immunized while twenty-three per cent did not. In fact, most

parents surveyed agreed that they usually follow the advice of their child's doctor or nurse and that health care providers clearly explain the risks and benefits of vaccines

Only four per cent of parents in the survey (74 parents) reported adverse reactions to a vaccine. The most frequently reported reactions included fever, tiredness, redness, swelling or hives. Just over half of all Canadian parents are aware that adverse reactions are tracked in Canada, although there is confusion as to how this is done. Thirty-six per cent of parents indicated high confidence in the system for tracking these side effects, with six in ten saying they are moderately confident; few parents described themselves as not confident.

Patterns of Awareness, Perceptions and Information Needs

While most parents feel well equipped to make decisions related to immunization of their children, and while most believe that immunization is important, safe, and effective, there is a smaller group of parents, who believes that they do not have enough information, are confused, or generally have doubts about the need, safety and effectiveness of immunization for their children. This is typically more prevalent among some parent segments. In some cases, parents feel less familiar with the issue and less well-equipped to make the decision, expressing concerns about inadequate or inconsistent information. There is also a segment with doubts about the need and effectiveness of vaccines, although they typically do not express confusion or a need for more information about the issue.

The cost of this research was \$144,600 plus HST.

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To obtain more information on this study, please e-mail por-rop@hc-sc.gc.ca

SOMMAIRE

Une recherche quantitative a été menée auprès des parents canadiens afin de comprendre leurs perceptions et leurs besoins d'information concernant l'immunisation des enfants. Des entretiens téléphoniques se sont déroulés auprès d'un échantillon aléatoire de 1 745 parents canadiens, et l'interlocuteur devait avoir au moins un enfant de moins de 18 ans. Les questions avaient pour but d'établir les connaissances, la sensibilisation, les attitudes et le comportement des parents canadiens en matière d'immunisation. Les observations obtenues seront utiles pour la mise au point de stratégies et d'initiatives d'éducation public.

Incidence de l'immunisation

Neuf parents sur dix affirment que leur enfant est à jour dans ses vaccinations, tandis qu'ils sont un parent sur dix à déclarer que leur enfant n'a pas reçu au moins l'un des vaccins recommandés. Les vaccins non reçus sont le plus souvent le vaccin contre la grippe saisonnière, le vaccin contre la varicelle, le vaccin contre l'hépatite B et le vaccin ROR. Parmi les parents dont les enfants n'ont pas reçu tous les vaccins prévus, 28 p. 100 estiment que la vaccination n'est pas nécessaire parce que le système immunitaire se régénère de lui-même. Dans ce segment, 16 p. 100 des parents ne croient pas dans l'utilité des vaccins, que ce soit pour des raisons philosophiques ou par conviction religieuse et, dans une proportion semblable, ils se méfient de la sécurité des vaccins.

Le sondage a aussi abordé l'incidence de l'immunisation contre le VPH et les attitudes des parents à l'égard de ce vaccin. Parmi les ménages qui comprenaient au moins une fille ayant l'âge voulu dans sa province pour recevoir le vaccin contre le VPH, environ la moitié affirment que leur fille a reçu ce vaccin. Parmi les parents dont leur fille n'a pas encore été immunisée, 31 p. 100 ont manifesté leur intention de la faire vacciner. La protection contre le cancer est le facteur qui incite la plupart des parents à faire vacciner leur fille contre le VPH.

Enfin, le sondage portait également sur l'incidence de la vaccination contre la grippe H1N1. La moitié des parents affirment que leur enfant a reçu le vaccin anti-H1N1. Ils sont une proportion semblable (44 p. 100) à affirmer qu'ils feraient très probablement vacciner leur enfant advenant une nouvelle pandémie de la grippe; 33 p. 100 encore disent qu'il serait assez probable qu'ils le fassent, mais cette probabilité demeure faible pour les autres (22 p. 100).

Perception de l'immunisation

Les connaissances des parents varient en ce qui concerne les vaccins pour les enfants : la moitié des répondants se disent très au courant, et une proportion semblable s'en disent assez bien au courant. Seuls 6 p. 100 des parents estiment ne pas tellement connaître les vaccins pour les enfants.

Neuf parents sur dix croient que les vaccins pour les enfants, en général, sont efficaces et qu'ils sont importants pour la santé de leur enfant. Les vaccins jugés très importants sont, notamment, le vaccin contre le tétanos, la diphtérie, le Hib, la coqueluche et la polio, le vaccin contre la méningococcie, le vaccin contre la rougeole, les oreillons et la rubéole ainsi que le vaccin contre la pneumococcie. Les vaccins contre le virus du papillome humain (VPH) et contre la varicelle paraissent très importants aux yeux d'environ la moitié des parents. Les répondants sont divisés quant à l'importance du vaccin contre la grippe saisonnière : ils sont un quart à lui attribuer beaucoup d'importance et un autre quart à penser qu'il n'a pas beaucoup ou pas du tout d'importance, tandis que les autres le croient assez important.

La plupart des parents font confiance à la sécurité des vaccins pour les enfants, avec 65 p. 100 qui jugent la vaccination des enfants très sécuritaire et 30 p. 100 qui la jugent assez sécuritaire, de sorte que très peu la trouvent non sécuritaire. En comparaison, les parents se montrent plus soucieux au sujet des médicaments d'ordonnance et des médicaments en vente libre. Ils sont beaucoup plus inquiets de la sécurité des produits de santé naturels puisque seulement le quart des parents les qualifient de sécuritaires. D'autres approches permettent néanmoins de constater chez les parents certaines préoccupations concernant la sécurité des vaccins. En particulier, la moitié des parents trouvent que les nouveaux vaccins ne sont pas aussi sûrs que les anciens. Quatre parents sur dix se disent plus préoccupés par la sécurité de la vaccination qu'il y a cinq ans et, dans une proportion semblable, ils s'accordent à dire qu'il n'est pas assez souvent question dans les médias des réactions indésirables aux vaccins. Le tiers des parents sont d'avis que les enfants reçoivent trop de vaccins de nos jours.

Information et prise de décisions

Les parents s'estiment en mesure de prendre des décisions éclairées quant à la vaccination de leurs enfants, soit plus de huit sur dix qui se disent bien renseignés. De façon générale, les parents affirment ne pas avoir eu beaucoup de difficulté à décider de faire vacciner leur enfant. Ils sont tout de même un répondant sur dix à avoir trouvé difficile la décision de faire vacciner leur enfant pour diverses raisons dont les possibles effets indésirables des vaccins et les renseignements controversés ou contradictoires sur les vaccins présentés dans les médias. Les parents qui ne se trouvent pas assez bien renseignés pour prendre des décisions éclairées en matière d'immunisation recherchent le plus souvent des renseignements qui leur permettraient d'évaluer les risques et les effets indésirables associés aux vaccins ainsi que les risques associés à la maladie contre laquelle la vaccination est administrée.

La plupart des parents ont cherché à se renseigner sur les vaccins destinés aux enfants. Leurs sources d'information les plus populaires sont Internet et les médecins. Les parents qui ont recherché de l'information sur Internet ont surtout emprunté le moteur de recherche Google ou ont consulté divers sites Web gouvernementaux dont celui de Santé Canada de même que des sites provinciaux ou fédéraux en général. Malgré l'utilisation très répandue d'Internet comme source d'information sur les vaccins, seulement le quart des parents considèrent Internet comme leur source de renseignements les plus fiables et dignes de confiance. La plupart des parents accordent leur confiance d'abord et avant tout aux médecins (68 p. 100). Cela concorde avec le résultat selon lequel six parents sur dix trouvent qu'il y a beaucoup de

désinformation au sujet des vaccins sur Internet, alors qu'ils ne sont que la moitié à trouver qu'Internet fournit aux parents une information utile à la prise de décisions touchant la vaccination.

Près de la moitié des parents ont déjà discuté avec un professionnel de la santé à propos d'une préoccupation concernant la vaccination. Le tiers d'entre eux craignaient la possibilité d'effets indésirables et 15 p. 100 encore doutaient de la nécessité de recevoir le vaccin en question. La discussion a fait en sorte que 68 p. 100 de ceux qui étaient inquiets ont fini par faire vacciner leur enfant, alors que 23 p. 100 en ont décidé autrement. En fait, la plupart des sondés disent suivre normalement les conseils du médecin ou de l'infirmière qui s'occupe de leur enfant et affirment que les professionnels de la santé expliquent clairement les risques et les bénéfices des vaccins.

Seulement 4 p. 100 des parents du sondage (74 parents) déclarent avoir connu des réactions indésirables à un vaccin. Parmi les plus fréquentes, on mentionne fièvre, fatigue, rougeur, enflure ou urticaire. Un peu plus de la moitié des parents canadiens savent que le suivi des effets ou réactions indésirables est assuré au Canada, mais il y a de la confusion quant à la façon dont cela est effectué. La proportion des parents qui témoignent une confiance élevée dans le suivi de ces effets indésirables est de 36 p. 100, tandis que six sur dix se disent plutôt confiants et que quelques-uns affirment ne pas être du tout confiants.

Tendances quant à la sensibilisation, aux perceptions et aux besoins d'information

Bien que la plupart des parents se sentent en mesure de prendre les bonnes décisions au sujet de la vaccination de leurs enfants et bien qu'ils soient pour la plupart d'avis que la vaccination est importante, sécuritaire et efficace, il existe un petit groupe de parents qui estiment ne pas être suffisamment informés, se disent confus ou, de façon générale, entretiennent des doutes sur la nécessité, la sécurité et l'efficacité de la vaccination pour leurs enfants. Ces parents se retrouvent surtout dans des segments particuliers. Dans certains cas, les parents se disent peu au courant de la question, moins en mesure de prendre des décisions et préoccupés par une information inadéquate ou incohérente. Il existe aussi un segment de parents qui doutent de la nécessité et de l'efficacité des vaccins quoique, de façon générale, ils n'expriment pas de confusion ni le besoin de plus d'information en la matière.

Le coût de cette recherche était 144 600,00 \$ plus TVH.

Nom du fournisseur : Les Associés de recherche EKOS Nº du contrat avec TPSGC : H1011-080016/001/CY

Date d'attribution du contrat : 30/03/2009

Pour de plus amples renseignements sur cette étude, prière d'adresser un courriel à por-rop@hc-sc.qc.ca

1. Introduction

1.1 BACKGROUND AND OBJECTIVES

Despite exhaustive scientific evidence that immunizations are amongst the safest and most cost-effective public health measures, achievement and maintenance of high levels of immunization coverage has remained a challenge. Recommended immunizations for Canadians change over time. At different stages, parents, adolescents, adults and seniors require information to make informed decisions regarding immunization. Thus, ongoing renewal of strategic and comprehensive approaches to immunization education and promotion are required to ensure public acceptance of the recommended immunizations and confidence in immunization providers and in the continued success of immunization programs in Canada. Quantitative research is required with parents of children under the age of 18 in order to understand what the information needs are for particular segments, and how best to communicate the information. The results will also form a baseline against which to track the effectiveness of future communications with this target group.

Specific objectives of the survey are to:

- evaluate parents' attitudes, awareness and knowledge levels around immunization including the issues of vaccine safety, efficacy and importance;
- assess their level of knowledge and confidence in the current system used to report adverse reactions;
- determine parents' barriers and motivators with respect to immunization of their children;
- determine Canadians' information sources as well as the preferred communication medium of Canadians; and
- > obtain immunization status of their child with specific reference to the HPV vaccine.

1.2 METHODOLOGY

A random sample of 1,745 Canadian parents of children under the age of 18 was included in the survey. The sample was based on randomly selected households from across the country, using a Random Digit Dial (RDD) method of sampling households. The survey instrument included roughly 70 items and the questionnaire required an average of 18.5 minutes for parents to complete.

Prior to conducting the survey, the survey instrument was tested with 15 cases in English and 15 cases in French. Testing was done in iterations, with changes made after the first ten and then again after 20, to ensure that any changes addressed the difficulties experienced in the first test interviews. The

testing was monitored by the Project Manager, who was also responsible for outlining the changes. Client representatives also listened to audio files from the pretest and contributed to the discussion regarding need for any potential changes.

Once started, the survey was monitored for sample efficiency (e.g., rotation and number of call-backs) and quotas, as well as for general data quality. The survey was collected over three weeks in March, 2011. Each household entered into the sample was attempted up to eight times before retiring the telephone number and attempts were spread over the data collection period. The response rate of the survey was 23 per cent.

Prior to analysis, the database was reviewed for data quality, outliers, coding requirements, weighting and construction of independent variables used to explore sub-group patterns (e.g., by age, age of children, gender and so on) in the analysis. Following this review and treatment of the data, a deck of the topline results was created (within a few days after the survey was completed), illustrating national results graphically. A series of detailed tables was also provided with the deck featuring the results for a variety of sub-groups (income level, province/territory, age and number of children in the home, etc).

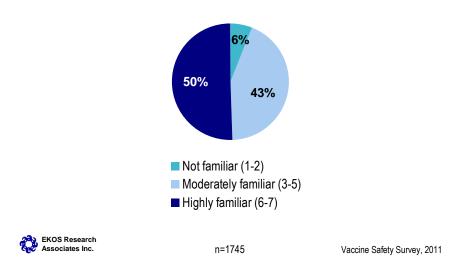
2. Familiarity and Importance

2.1 Familiarity with Childhood Immunizations

In terms of familiarity with recommended childhood immunizations, parents reported various levels of familiarity. Half of respondents (50 per cent) reported they are highly familiar with these vaccines (i.e., 6 or 7 on a 7-point scale). A similar proportion (43 per cent) said they are moderately familiar (3, 4, or 5 on a 7-point scale). Fewer than one in ten respondents (six per cent) feels their knowledge is relatively limited (1 or 2 on a 7-point scale).

Familiarity with Childhood Immunizations

"To what extent would you say that you are familiar with recommended childhood immunizations, that is, which shots are given when and for what?"



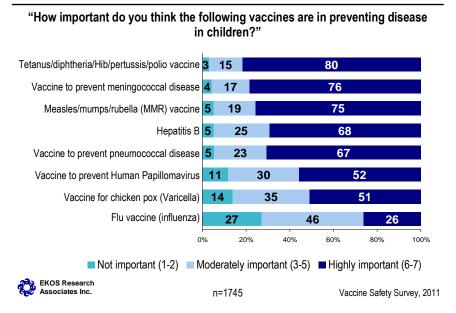
- Parents of young children (under 5 years) are more likely than other parents to consider themselves very familiar with childhood immunizations, particularly those whose children have had a side effect or adverse reaction to a medication.
- Regionally, parents in Alberta are somewhat more likely to feel they are very familiar than others in Canada, while those in Atlantic Canada indicate slightly less familiarity than the national average.

- Familiarity with vaccines increases with education of parents. The most educated parents (i.e., a graduate degree) more often reported themselves to be very familiar with vaccines, while those with the least education reported the least familiarity.
- > Those without a family doctor are slightly more likely to rank their familiarity as low than parents with a family doctor.
- Anglophones are slightly more likely than other parents to provide a high rating for their familiarity.

2.2 RELATIVE IMPORTANCE OF DIFFERENT VACCINES

Respondents were presented with a list of childhood vaccines and asked to rate the importance of each one. Results reveal that most of these vaccines are seen by the majority of parents as highly important, although the seasonal flu vaccine is least likely to be deemed important. Fully 80 per cent of parents feel that the tetanus/diphtheria/Hib/pertussis/polio vaccine is highly important, and three-quarters rated the vaccine to prevent meningococcal disease (76 per cent) and the MMR (measles, mumps, rubella) vaccine (75 per cent) as highly important. Two-thirds of respondents feel that the vaccines to prevent pneumococcal disease and Hepatitis B are highly important (67 and 68 per cent, respectively). Fewer parents rate the importance of the vaccines for human papillomavirus (HPV) and chicken pox as high: in these cases only half of parents rated them as highly important (52 per cent and 51 per cent, respectively). There is considerable divide as to whether seasonal flu vaccines are important: i.e., 26 per cent rated these as highly important, compared with 27 per cent who say they are of little to no importance, with 46 per cent providing a moderate rating.

Relative Importance of Different Vaccines



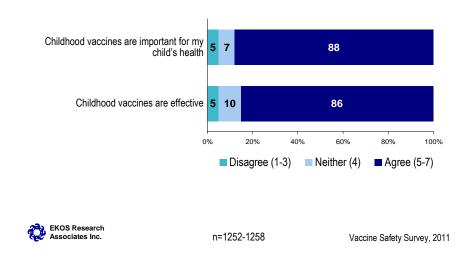
- For most of these vaccines, the perception that they are very important is strongest in Atlantic Canada.
- Residents of Quebec stand out as being somewhat less likely to view the flu vaccine as important than the national average
- Residents of Saskatchewan and Manitoba are less likely than the national average to rate the chicken pox vaccine as important. Those in the territories are less apt to rate the vaccine to prevent pneumococcal disease as important.
- > Parents who say they are familiar with childhood immunizations are more likely than other parents to believe in the importance of all of these vaccines.
- Those with a family doctor are more likely to feel vaccines are important, particularly the vaccines for MMR, chicken pox, pneumococcal disease and meningococcal disease, as well as seasonal flu. Those without a family doctor are more apt to say that seasonal flu vaccines, in particular, are not important.
- Parents in the highest income category (\$120,000+) are much more likely than parents reporting lesser incomes to rank the MMR vaccine as very important. On the other hand, it is parents with less education who are more likely than those with more education to rank the HPV, Hepatitis B and chicken pox vaccines as very important. Those in the lowest income and education categories are more likely than other parents to believe in the importance of seasonal flu vaccines.
- In the case of HPV, parents who have pre-teen/early adolescent children (ages 10-14) are more likely than those with younger children to believe that the vaccine is very important.
- The age of the parent does not play a great role in determining whether they feel strongly about a vaccine's importance, except in the case of chicken pox, where older parents (45 and over) are much more likely than younger parents to believe the vaccine is very important, as well as in the case of seasonal flu, but to a lesser extent. The reverse is true for the pneumococcal vaccine; where parents under 35 are the most likely to feel it is very important, relative to older parents.
- Parents who were not born in Canada are more likely to rate the importance of the HPV vaccine as low compared to parents born in Canada. On the other hand, they are more positive than other parents about the importance of the chicken pox vaccine.

2.3 Perceptions Regarding Importance and Effectiveness of Immunization

Nine in ten parents believe childhood vaccines are important for their child's health (88 per cent) and think childhood vaccines are effective (86 per cent). There is a small group of parents (12 to 15 per cent), however, who are less convinced, although only five per cent actually disagree in each case.

Importance and Effectiveness of Vaccine

"Do you agree or disagree with the following statements?"



- The importance of vaccines overall for children's health is more pronounced among parents in the highest income bracket (\$120,000+) and households with a family doctor, relative to the national average.
- Agreement that vaccines are effective is more pronounced among older parents (40- 44, in particular), parents with a family doctor, those who consider themselves familiar with immunizations, and families with no history of a child experiencing an adverse reaction to medications, relative to other parents.
- Regionally, belief in the effectiveness of vaccines is lowest in British Columbia, relative to the national average, although the majority in that province (79 per cent) agrees that childhood vaccines are effective.

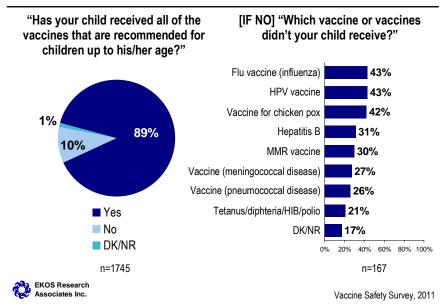
3. IMMUNIZATION DECISION

3.1 Incidence of Immunization

Parents were asked whether their child had received all of the vaccines that are recommended for children their age. Results indicate a high rate of compliance with immunization schedules, with 89 per cent of parents stating that their children are up to date. That said, ten per cent of parents reported their child had missed at least one of the recommended vaccines and one per cent of respondents are uncertain.

The most commonly missed vaccines cited were for seasonal flu (listed by 43 per cent), HPV (43 per cent) and chicken pox (42 per cent). One-third of parents also named the Hepatitis B vaccine (31 per cent). Thirty per cent of all parents cited the MMR as a missed vaccine. Another one-quarter listed the vaccines to prevent pneumococcal disease (26 per cent) and meningococcal disease (27 per cent). Twenty-one per cent of parents who reported missing vaccines said their child had not been given the tetanus/diphtheria/Hib/pertussis/polio vaccine. Seventeen per cent were uncertain about which vaccines their child had missed.

Incidence of Immunization



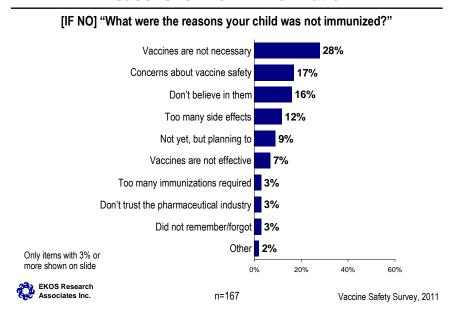
- Residents of Saskatchewan and Manitoba (84 per cent across the two provinces combined) are slightly less likely than others across the country to say their child has received all of the recommended immunizations for their age. Quebecers are slightly more likely to report that their children have received all of their immunizations relative to the national average (92 per cent compared with 89 per cent for the country overall).
- Parents who have young children (less than 5 years) are more likely to say their child has not yet received the MMR vaccine or the chicken pox vaccine. Parents of older children are considerably more likely to have listed the HPV vaccine as one their child has missed.

3.2 Reasons for Non-Immunization

Parents reporting that their children have not received all of the recommended vaccines were asked why this was the case. Just over one in five of these respondents (28 per cent) said that vaccines are unnecessary, arguing instead that the human body is fully capable of caring for itself. This represents three per cent of all parents (based on the full sample). Sixteen per cent do not believe in vaccine use, either for philosophical reasons or as a consequence of religious beliefs, and a similar proportion (17 per cent) raise concerns about the safety of vaccines. One in ten (12 per cent) of these parents believes that vaccines carry too many negative side effects to justify their use. A small percentage (nine per cent) intends to have their child immunized in the future. Each of these segments represents between one and two per cent of all parents (based on the full sample).

Fewer respondents cited ineffectiveness of vaccines (seven per cent), too many vaccines, lack of trust in the industry (three per cent each) and forgetting to obtain the vaccine (two per cent). Other responses were provided with even less frequency.

Reasons for Non-Immunization



Parents of children under five years of age are more likely to cite too many side effects as a reason for not immunizing a child.

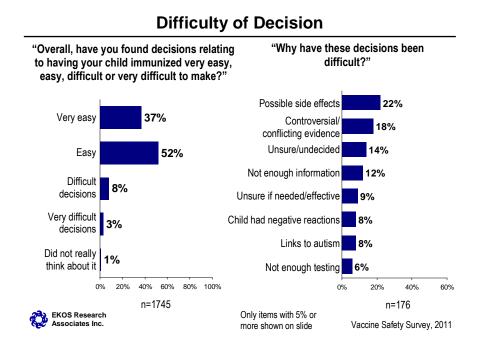
3.3 DIFFICULTY OF DECISION TO IMMUNIZE

Study findings indicate that Canadian parents generally perceive little difficulty in making the decision to immunize their child, with 89 per cent of respondents rating the decision making process as easy (including 37 per cent who rated it as very easy). That said, one in ten respondents (11 per cent) feels the decisions were difficult. This is higher among parents who reported that their children are not up to date with the required vaccines (where 35 per cent said they have found these decisions to be difficult or very difficult). The same pattern is true among parents who do not see vaccines as particularly important or effective.

The relatively small number of respondents who indicated that the decision to immunize their child was difficult (n=176) were asked to elaborate on their answers. These parents offered a wide range of explanations, although the most common responses included concerns over possible side effects (22 per cent) and controversial or conflicting evidence in the media (18 per cent). This represents roughly two per cent of all parents in each case (based on the full sample of parents). Other explanations were cited by small numbers of parents and are presented for information (i.e., they may not be representative of this segment of parents). These explanations included uncertainty in general (14 per cent), a lack of information (12 per cent), and doubts as to whether the vaccines are necessary or truly effective (nine per cent); a further six per cent of respondents were concerned that there has not been enough testing done on

vaccines. Eight per cent cited that the experience of a child's adverse reaction to a past immunization made future decisions difficult. Another eight per cent cited links to autism. Seventeen per cent provided some other reason. These reasons were each cited by less than five per cent and include:

- Access barriers: cost, access to vaccine or doctors, ability to get an appointment
- Differing opinions within the household
- Difficulty getting child to cooperate (e.g., fear of needles, tantrums)
- Prefer not to take it (e.g., body can take care of itself)

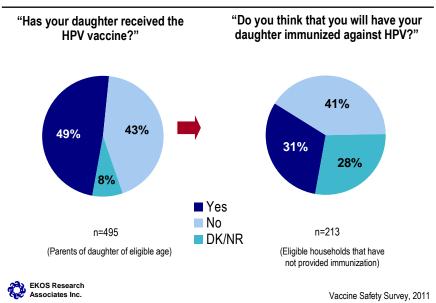


- Those who say they are familiar with childhood immunizations are more likely than other parents to say they have found these decisions to be very easy to make.
- > Those in the highest income category (\$120,000+) are more likely than others to have found these decisions to be very easy to make.
- Among the small number of parents who have found these decisions to be very difficult, those most likely to feel this way are residents of British Columbia, and those who have a child who has experienced a bad reaction to a medication.

3.4 DECISIONS REGARDING THE HPV VACCINE

Looking specifically at the incidence of HPV immunization, of households in the sample where there is at least one girl of an eligible age in her province to receive the HPV vaccine, roughly half (49 per cent) reported that their daughter received the HPV vaccine. Another thirty one per cent of parents whose daughter had not yet received the vaccine said they will have their child immunized against HPV.

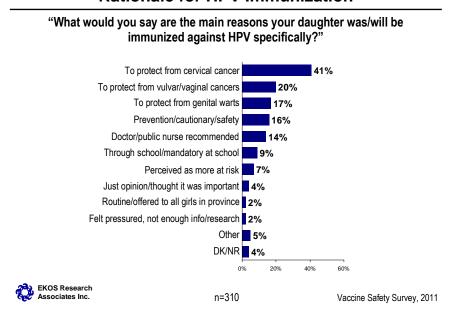




- The HPV vaccine is more likely to have been reported as received in Atlantic Canada and by girls with Canadian born parents compared with girls of parents born outside of Canada. The reported incidence is lowest in Saskatchewan and Manitoba (combined), and also lower in some socio-economic cohorts (e.g., parents with incomes in the ranges of \$40,000-69,000).
- Among parents who have not yet had their daughter immunized, parents in Quebec (and as a consequence, French-speaking Canadians) are more likely than the national average to say their daughter will be getting the HPV vaccine in the future. Anglophones and Ontario households stand out as more likely to say their daughter will not be getting the vaccine, as are those households with a child who is 15 or older, relative to those with younger children.

For most parents, protection against cancer is the primary reason for the decision to immunize against HPV (parents were able to provide more than one reason): four in ten (41 per cent) said they want to protect their daughter from cervical cancer. Another one in five said they had their daughter immunized in order to protect her from vulvar and vaginal cancers (20 per cent). Protection against genital warts was another reason cited by 17 per cent. Other parents were led to the decision by health care workers or the school system. One in seven (14 per cent) attributed their decision to the advice of their doctor or nurse. Nine per cent mentioned that the vaccine was being administered at school, and another two per cent stated that the vaccine was routine or was being administered to all girls in the province. Seven per cent perceived their child as being more at risk, and four per cent just thought it was an important thing to do. Although a small percentage, two per cent decided to go ahead with the immunization despite feeling that there was a lack of information and feeling pressured to do so. Other reasons cited, held by fewer than two per cent each, were that it is socially acceptable because most parents vaccinate their children, and that the adolescent herself made the decision to get immunized.

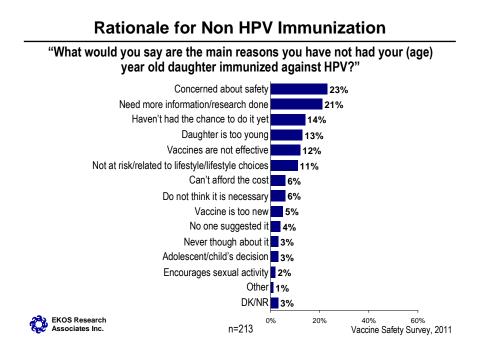
Rationale for HPV Immunization



Parents with a graduate degree were more likely than other parents to point to the recommendation from a doctor or public health nurse as a reason for immunization or intent to get their daughter immunized.

Lack of information and concerns about safety are the primary barriers to HPV immunization cited by parents who had not yet had their daughter immunized. One in four parents indicated concern about safety (23 per cent). Twenty one per cent felt that more information is needed (i.e., more research and testing needs to be done). For other parents it was simply a matter of timing: fourteen per cent of parents haven't had the chance to get their daughter vaccinated yet, and a similar proportion (13 per cent) said their

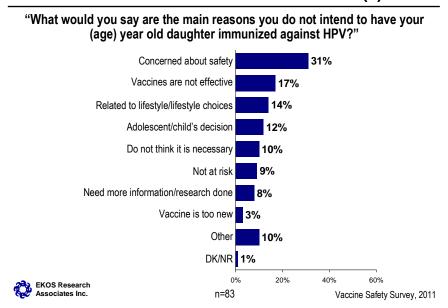
daughter is just too young right now. Smaller proportions of parents are not clear on the need for the vaccine: twelve per cent feel that vaccines are not effective (12 per cent) and eleven per cent do not believe their child is at risk or that their lifestyle choices don't warrant the vaccine. Other reasons (each given by around five per cent of parents) include: financial barriers; they don't think getting the vaccine is necessary; they are concerned that the vaccine is too new; or no one had suggested it. Just three per cent said they had never thought about it before; another three per cent said it was the child's decision. Only two per cent indicated a concern that getting the vaccine encourages sexual activity.



- For those parents who haven't yet had their daughter immunized against HPV, the concern over safety and possible adverse reactions to the immunization is most prevalent among Anglophones compared with other parents. Ontarians are also slightly more concerned about this than the national average.
- Residents of Quebec and Francophones are much more apt than others across the country to feel that their daughter is too young to receive the vaccine as are parents whose child is between 10 and 14 years old. Francophone parents are also more likely than other parents to have said their child has not been immunized because they haven't had the opportunity.

The small number of parents (N=83) who said they have no intention of having their daughter immunized against HPV were asked, unprompted, to elaborate on their position. About a third listed concerns about safety while the remainder indicated a variety of responses. As the number of parents in these subsets is very small, their responses are presented in the graph below for information and should not be considered representative of all parents in this segment.

Rationale for Non HPV Immunization (II)



3.5 H1N1 IMMUNIZATION

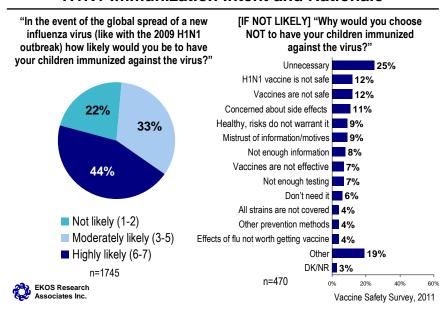
Parents were asked how likely they would be to have their children immunized in the event of a global outbreak of a new influenza virus, such as H1N1 in 2009. The anticipated rate of immunization is similar to the self-reported actual rate of immunization against H1N1 (49 per cent). Forty-four per cent of respondents say they would be highly likely to have their children immunized (i.e., 6 or 7 on a 7-point scale). One-third (33 per cent) say the likelihood would be moderate (i.e., 3, 4, or 5 on a 7-point scale). Another 22 per cent believe they would not be likely to take this route.

Consistent with the overall anticipated rate of immunization, about 47 per cent of parents who reported that their children are up to date with their vaccines say that they would be highly likely to have their children vaccinated for a new influenza virus, with 34 per cent saying the likelihood is moderate and 18 per cent saying it would be low. Among parents who have not had all of the required vaccines administered to their children, only 16 per cent say they would be highly likely to have their children immunized against a new influenza virus. Highlighting that the influenza vaccine is not deemed as important as other vaccines, only about half of parents that rate vaccines overall as important, effective and safe, say they would be likely to vaccinate their children against a new strain of influenza.

Among parents unlikely to have their children immunized, the main reason for a quarter of parents is their belief that the vaccine is simply unnecessary. One in ten said that vaccines in general are not safe (12 per cent), and the same proportion said that the H1N1 vaccine itself is not safe (12 per cent), that they are concerned about potential side effects (11 per cent), or that the risks do not warrant the use of a vaccine (nine per cent). Further to this, one in ten (nine per cent) is mistrustful of information that is out there or feels that they do not have enough information to make the decision. One in seven (14 per cent) expressed scepticism about either the effectiveness of vaccines in general or about the amount of testing that has been done on vaccines. Fewer (four to six per cent) said they don't need it, that there are other preventive methods one can use (e.g., alternative practices), that not all strains of the flu are protected by the vaccine, and that the effects of the flu aren't worth the trouble of getting the vaccine. One in five (19 per cent) provided other reasons that were less frequently cited (by two per cent or less), including:

- Not in a high risk group;
- Not around those at risk;
- Last time the child got a flu vaccine they got sick;
- Child has illness, allergies, or other health concerns;
- Don't trust the motives of drug companies;
- Concerned about Thimerosal or mercury in the vaccine;
- There are too many vaccines now;
- Family member/friend experienced negative side effects.

H1N1 Immunization Intent and Rationale



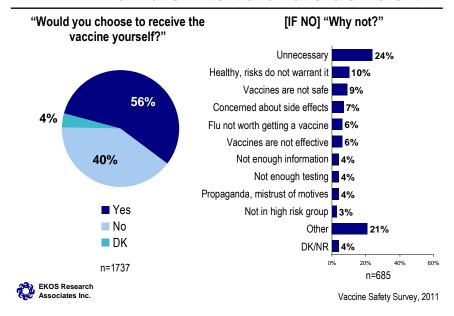
- Parents in Atlantic Canada, and, to a lesser extent, Alberta, are much more likely than average to have their children immunized against a future flu outbreak. The incidence is also higher than average among parents who are familiar with childhood immunizations and those with higher household incomes (\$120,000+) and education. The incidence is slightly greater among those with a family doctor.
- Doubts that the H1N1 vaccine itself is safe are most prevalent among those with no family doctor and those who are not familiar with childhood immunizations relative to their counterparts.
- Parents of older children (15+), and therefore older parents (45 and over), are more likely than other parents to be concerned about the potential side effects of the vaccine, as are parents in Ontario.
- > Those in British Columbia are more apt than average to say their children do not need the vaccine.
- Parents in Saskatchewan and Manitoba are more likely than others to be concerned that there is not enough testing being done on vaccines generally or on a potential vaccine. Parents in Ontario were slightly more likely to say they lack information and that they are concerned about the side effects.

Parents were next asked whether they would receive an influenza vaccine themselves in the event of a global outbreak. Fifty-six per cent say they would choose to receive it, while 40 per cent say they would not receive it. About six in ten parents who are generally more in favour of vaccines (i.e., see them as important, safe and effective) say that they would get the vaccine (60 to 67 per cent).

Barriers again relate to a perceived lack of need and concerns about safety, one in four (24 per cent) believes the vaccine is unnecessary (e.g., one's immune system will take care of itself). One in ten feels that the risks do not warrant receiving the vaccine (10 per cent) or feels that vaccines in general are not safe (nine per cent). Seven per cent are concerned about side effects. One in twenty parents (six per cent) bases their decision on their belief that vaccines are not effective, and similar proportions feel there isn't enough information, or because there isn't enough testing (four to five per cent). Four per cent of parents attribute their decision to mistrust of information and slightly fewer (three per cent) feel they are not in a high risk group. One in five (21 per cent) mentioned reasons other than the top reasons mentioned by this group (each one cited by two per cent or fewer), including:

- > Got sick the last time the flu vaccine was administered;
- > Don't think the H1N1 vaccine will be effective;
- > Don't think the H1N1 vaccine will be safe:
- > Never find the time:
- Confused by all the information about vaccines;
- Have had a negative reaction to the flu vaccine in the past;
- > Aware that not all strains of the flu are covered:
- > Fear of needles:
- Not around those at risk:
- There are other prevention methods, such as alternative medicine.

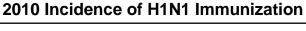
H1N1 Immunization Intent and Rationale: Parent

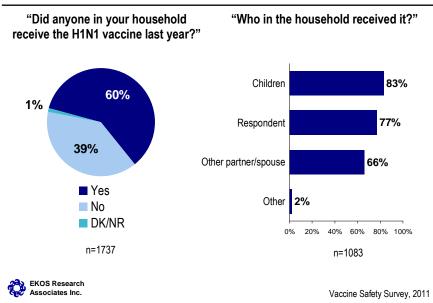


- Intent to receive the vaccine for a future flu outbreak is considerably higher in Atlantic Canada and among upper socioeconomic households (e.g., incomes of \$120,000 or more and parents with graduate degrees), as well as among older parents (45+), relative to the national average. The predisposition is also somewhat higher among those with a family doctor (compared to families without).
- > The intent to receive the vaccine is lowest in British Columbia relative to the national average, and lower among lower income parents and those without a family doctor, relative to other parents.
- Among the 24 per cent of parents saying they are unlikely to get the vaccine because they feel it is unnecessary, parents with kids between the ages of 10 and 14 stand out as being more likely than other parents to say this.
- The nine per cent who believe that vaccines in general are not safe are typically in the lowest socioeconomic cohorts (i.e., lowest income and education) and often have no family doctor, relative to other parents.

3.6 2010 Incidence of H1N1 Immunization

Fully 60 per cent of parents reported that someone in their household had received the H1N1 vaccine. Of the households with at least one H1N1 vaccine recipient, 83 per cent say their child received the vaccine, 77 per cent say they received the vaccine themselves, and 66 per cent reported that their spouse or other partner was vaccinated.





- Peported immunization rates are higher than the national average in the Atlantic Provinces and Quebec, as well as in the territories, and among high income households and those with university-educated parents, relative to their counterparts in each case.
- The reported incidence is lowest in British Columbia and Ontario. Incidence is also lowest with parents in lower socioeconomic strata (i.e., lowest education and income brackets), among immigrant parents (i.e., not born in Canada, whose first language is neither English nor French).

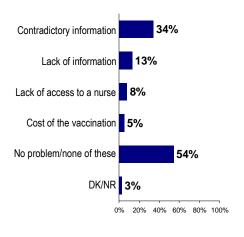
3.7 Barriers to Decision-Making

The majority of Canadian parents did not report any obstacles when making decisions about immunizing their child, according to survey results. In fact, when asked whether they encountered contradictory information, lack of information, lack of access to a nurse, or prohibitive costs of vaccines, just over half (54 per cent) said they had not encountered any of the difficulties presented to them. However, one-third of respondents (34 per cent) said they encountered issues with contradictory information regarding the safety of the vaccines. Thirteen per cent said they lacked information in general and eight per cent did not have access to a nurse, clinic, or doctor to administer the vaccine. A further five per cent saw cost of the vaccine as an impediment.

Six in ten of the small segment of parents that reported that their children are not up to date with their vaccines said that contradictory information has been a barrier for them. Higher than average proportions of parents who are generally not positive about vaccines (i.e., rating them as not very important, unsafe and ineffective) reported contradictory information and a lack of information as problems.

Barriers to Decision-Making

"Have any of the following been a problem or obstacle for you when making decisions about immunizing your child?"





n=1745

Vaccine Safety Survey, 2011

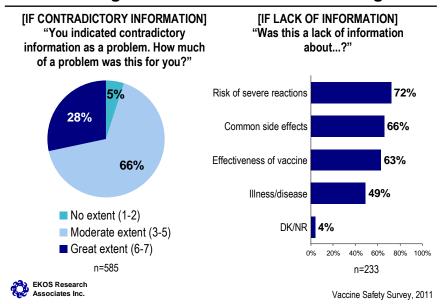
- Parents who are much more likely than average to say contradictory information about vaccines has been a barrier to decision making include those who are relatively unfamiliar with childhood immunization, Francophones, and parents with young children (under 5), as well as those reporting previous side effects from immunization, relative to their counterparts. Those with a university education are also somewhat more likely than those with less education to have encountered contradictory information.
- > Those who have encountered a lack of information about immunization are less like than average to have a family doctor.
- Quebecers (and therefore Francophones), as well as those without a family doctor are more likely than other parents to have reported barriers that have prevented them from accessing a health care worker to get an immunization.

3.8 Information as a Barrier to Decision-Making

Parents who said that contradictory information served as a barrier to making decisions about immunizing their children were asked to rate the seriousness of this problem. Twenty-eight per cent see this as a serious problem, while most (66 per cent) see this as a moderate problem (i.e., 3, 4, or 5 on a 7-point scale).

Parents who pointed to a general lack of information as a barrier to decision-making about immunizing their children were asked to elaborate on the types of missing information from a list provided. The majority of these respondents (72 per cent) said they were missing information on the risks of serious reactions to the vaccine. Two-thirds said they were missing information regarding the more common side effects of the vaccine (66 per cent). Information about the effectiveness of the vaccine was deemed missing by 63 per cent while 49 per cent indicated concern over the lack of information available about the diseases that the vaccines prevent.

Missing Information for Decision-Making



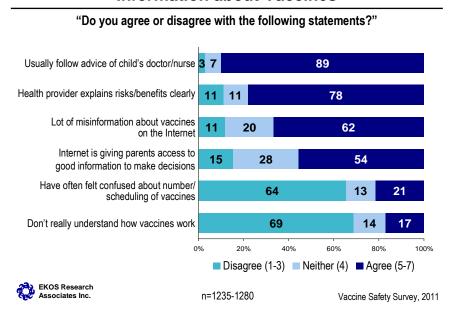
- About half of parents that reported that their children are not up to date with their vaccines, or who are generally not positive in their views about vaccines, said that contradictory information had been a large problem for them in making these decisions (a significantly higher proportion than found among other parents).
- Also, parents with no family doctor were more likely than those with a doctor to have found this to have been a great problem for them.
- Anglophone parents were more likely to cite a lack of information about the potential risk of a severe reaction.

4. Information about Immunization

The majority of parents follow the advice of their child's doctor or nurse (89 per cent), according to survey results. Moreover, more than three-quarters (78 per cent) agree that health providers clearly explain the risks and benefits of vaccines. In terms of the Internet, more than six in ten parents (62 per cent) believe there is a lot of misinformation about vaccines on the Internet. Just over half of parents (54 per cent) feel that the Internet is giving parents access to good information to make decisions, while the remainder appear to be less convinced of this.

Pointing more specifically to a gap in information or understanding, one in five parents agrees with the statement that they often feel confused about the number and scheduling of vaccines (21 per cent) and just slightly fewer agree that they do not understand how vaccines work (17 per cent).

Information about Vaccines



- Confusion over the timing and scheduling of childhood immunizations is naturally most common among parents who consider themselves unfamiliar or only somewhat familiar with immunizations (compared with parents who consider themselves more knowledgeable). It is also more prevalent among those whose first language is neither English nor French. Parents who have reported that their children are not up to date with their vaccines are also more apt to have reported confusion compared with other parents.
- Parents more likely to express confidence in their knowledge of how vaccines work and of the scheduling/timing of immunizations are in the highest income and education categories, are more likely to be Anglophones and, not surprisingly, are significantly more likely to consider themselves to be very familiar with childhood immunizations, relative to the national average. Albertans are less likely than others across the country to say they do not know how vaccines work.
- Parents who have attained high education levels and whose household income is in the higher ranges are more likely than parents with less education and income to disagree with the belief that parents are provided good access to information about immunization through the Internet, and to agree with the statement that there is a lot of misinformation on the Internet. Scepticism about the reliability of information on the Internet is also more common among Anglophones, residents of British Columbia, and parents of young children (under 5 years), compared with other parents.
- Those who believe that the Internet is providing access to good information are more likely to have immigrated to Canada, speak neither English nor French as their first language or live in Ontario, compared with the national average. Those with less than a college education are less likely to believe that the Internet provides misinformation, as are parents who have children age ten and older (compared to those with younger children).
- Not surprisingly, those who are without a family doctor are less likely than those with a doctor to say that the risks and benefits of immunization have been clearly explained to them by their child's health provider. Those parents reporting that their children are not up to date with their vaccines are also much less likely to agree with this statement. On the other hand, parents who have a family doctor, who consider themselves familiar with childhood immunizations, and who have young children (under 5 years) are more likely than other parents to feel that their child's health provider clearly explained the risks and benefits of immunization to them.
- > Following the advice of one's doctor or nurse is, not surprisingly, more common among those who have a family doctor. It is much less common (62 per cent) among parents who have reported that their children are not up to date with their vaccines than among those who reported that their children are up to date (92 per cent).

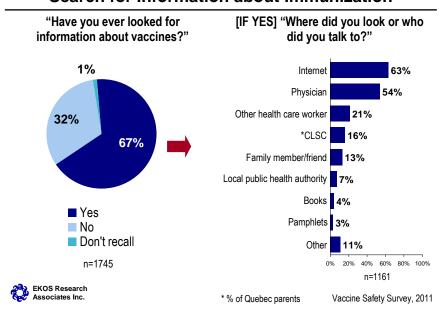
4.1 SEARCHING FOR INFORMATION ABOUT IMMUNIZATION

Two-thirds of respondents (67 per cent) have searched for information regarding vaccines for their children, according to survey results.

Parents rely most on two sources: the Internet (used by 63 per cent of parents) and physicians (54 per cent). One in five parents who have looked for information (21 per cent) said they sought it from a health care worker other than a physician. Four per cent of the national average of parents have consulted a CLSC but this is actually 16 per cent of parents in Quebec (where CLSCs are available) making it comparable to other health care providers in other parts of the country. Thirteen per cent consulted a friend or family member and seven per cent obtained information from their local health authority. Four per cent each referenced books and three per cent had looked at pamphlets. Other types of information were cited by less than three per cent, including:

- > Pharmacists;
- Schools;
- Health clinics, doctors' offices;
- Media (TV/radio);
- > Newspapers;
- Research papers (e.g., scientific, professional journal publications).

Search for Information about Immunization



- Those in the highest income bracket (\$120,000+) are more likely than other parents to have sought out information on vaccines, as are parents with a university degree. Not surprisingly, those who describe themselves as being familiar with childhood immunization are also more likely to have looked for information on their own (through means such as the Internet) as are parents with a child who has had an adverse reaction to a medication, relative to other parents.
- There are also some regional and linguistic differences in seeking out information. Quebec parents are less likely to have looked for information (on their own) than parents in other provinces. As a result, the incidence is also lower among Francophone parents relative to other parents. The incidence of looking for information is highest among Albertans.
- Ontarians are more likely than other parents across the country to be getting this information directly from their physicians and, similarly, those in British Columbia and Alberta are most apt to get this information from other health care providers. This is in notable contrast to parents in Saskatchewan and Manitoba, who use friends or family members as resources more often than parents in other provinces.
- Residents of Quebec seem to be less likely than other Canadian parents to use the Internet to find this information. This is driven, in part, by their greater propensity to be informed by CLSC's physicians.
- Parents in the territories are considerably more apt to have consulted with a health care provider other than a physician (e.g., another health care worker or local public health authority).
- Younger parents (under 35) are slightly less likely than older parents to say they have sought information about immunization; and when they do, it is more often from books (e.g., medical, parenting). It is the 35-39 parent age cohort that is most likely to be searching for information about immunization on the Internet.
- > Use of the Internet as a resource for information on vaccines is related to income levels, with the wealthiest (\$120,000+) being more likely to use this tool than less affluent parents.
- Parents with younger children (under 5) are more likely than those with older children to get this information from books, the Internet, or health care providers other than physicians.

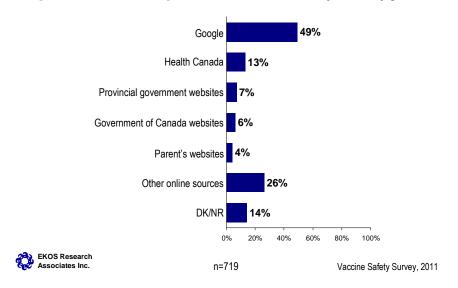
4.2 Sources of Information

Parents who used the Internet to search for information related to vaccines were asked, unprompted, to identify the website that they used. The predominant response, cited by half of these respondents (49 per cent) was the search engine Google (not specifying the actual website). Various government websites, including Health Canada (13 per cent) and provincial (seven per cent) or Government of Canada websites generally (six per cent) round out the top four website mentions. Parents' websites are a source of information for four per cent. Other sources and websites cited by less than four per cent include:

- Mayo Clinic
- > Web-MD
- Unspecified health/medical sites
- Wikis
- World Health Organization
- > PubMed
- Canada Public Health Agency
- MedLine
- Doctissimo
- Regional/local authorities
- Online chatrooms/forums
- Medical journals and universities
- > Reputable/reliable/knowledgeable sources
- Immunization sites (for and against)
- > Other search engines/launchers (e.g. Canoe, Yahoo)
- General searches/various websites

Sources of Information

[IF THROUGH INTERNET] "Where on the Internet would you usually go?"



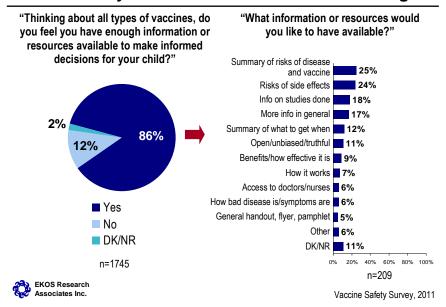
- Parents in Alberta and Anglophones are slightly more likely than other parents to use Google as an Internet source for information on vaccines.
- Parents in Quebec and Francophones are less likely than other parents to use Google. On the other hand, they look to Health Canada for information more often than other parents do, as is also the case with older parents (ages 40-44) compared with younger parents.
- > Use of websites targeted to parents is most common for younger parents (under 35) relative to older parents.
- A preference for provincial government websites is much more pronounced among parents in the highest income category, as well as parents with a university degree (although the pattern is less pronounced), relative to provincial website use among other parents.

4.3 AVAILABILITY OF INFORMATION FOR DECISION-MAKING

Parents were asked whether they felt they had enough information to make informed decisions about their child's immunizations. Despite the finding that 34 per cent of parents indicated contradictory information and 13 per cent of parents indicated a lack of information as problems for them when making immunization decisions, fully 86 per cent of respondents indicated that they felt they did in fact have enough information. This proportion is lower (73 per cent), however, among parents that reported that their children are not up to date with their latest immunization schedule.

Parents who do not feel that they have enough information to make informed decisions when it comes to immunization are most often looking for information that will enable them to assess risk. Twenty-four per cent of parents say they would like additional information regarding the risks and side effects associated with the use of vaccines and 25 per cent would like a summary of the risks associated with diseases and the vaccines that prevent them. Six per cent of parents would like information about how bad the disease and symptoms are. Eighteen per cent would like more information about studies being done (e.g., long term effects of vaccines), which may be sought by parents looking to assess risk or to assess effectiveness. Other responses include a schedule of when vaccines should be received (12 per cent), information regarding the benefits of the vaccine and its effectiveness (nine per cent), information about how the vaccine works (seven per cent), and information on accessing doctors or nurses (e.g., at open houses, information lines) to get questions answered (six per cent). Eleven per cent provided other responses (each cited by five per cent or less). These suggestions include more pamphlets, brochures and handouts in general; information on risks of getting the disease; information about accessing and purchasing the vaccine; and more media coverage.

Availability of Information for Decision-Making

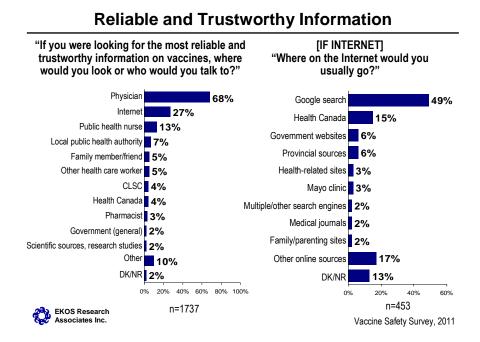


- Parents who feel they are ill-prepared to make informed decisions regarding their child and immunization are more likely to come from a low income household (less than \$40,000), to have a mother tongue that is not English or French, to have been born outside Canada, to have no family doctor, and to be less familiar with childhood immunization relative to the national average of all parents.
- Parents in the highest income category are more likely than parents with less income to want more information on the possible side effects of vaccines, as well as information on the risks of disease and vaccines. Those who are familiar with vaccines are also more likely to want information about side effects compared to other parents.
- Interest in information about research studies, clinical trials and testing of vaccines is more prominent among university educated parents, relative to the interest levels of those with less education.
- Parents who would like more information about the benefits of getting vaccinated are more often those with young children (under 5 years) compared with parents with older children. They are also more likely to have a university education.

4.4 RELIABILITY OF INFORMATION

Respondents were asked, unprompted, where they would look if they were searching for the most reliable and trustworthy information on vaccines. Interestingly, despite the widespread use of the Internet to search for vaccine information expressed earlier, fewer respondents see it as the most reliable and trustworthy source of information. Just one-quarter (27 per cent) say they would use the Internet. A majority of parents (68 per cent) say they would consult a physician and another one in five would consult another health care worker, such as a public health nurse (13 per cent), local public health authority (seven per cent), another health care worker (five per cent), or Health Canada (four per cent). Five per cent would consult a friend or family member and four per cent would rely on a CLSC. Two per cent identify the Government of Canada (in general) as the most reliable and trustworthy source of information top of mind. Ten per cent would look to other sources for reliable information (each mention cited by less than two per cent), including schools, alternative medicine, various provincial sources, Info Santé, books, news media, telehealth lines, and impartial or unbiased sources generally.

Parents who said they would look to the Internet for the most reliable and trustworthy information on vaccines show a preference for the search engine Google (49 per cent) as a way of getting to useful information. Fifteen per cent would rely on the Health Canada site, and equal proportions would rely on Government of Canada websites or provincial sources generally (six per cent each). Seventeen per cent say they would trust some other online source (each cited by less than two per cent), including Passport Santé, Canadian Pediatric Association, Web MD, Centre for Disease Control, various doctor sites (e.g., Dr. Oz, Dr. Sears), and independent/reliable/unbiased sources.



- Canadian parents outside of Central Canada are much more likely to see a public health nurse as a reliable and trustworthy source for information on vaccines. The same is true of health care workers for residents of British Columbia. Residents of Ontario are significantly more likely to feel that a physician is the best source of information.
- Not surprisingly, parents place their trust in the health care provider they know. Those parents with a family doctor are more likely to trust a physician to provide the most reliable information about vaccines than those who do not have a family doctor. Those without a family doctor place greater faith in their local public health authority than those with a family doctor.
- CLSCs are the second most trusted source among Quebecers and Francophones as a result of their accessibility in Quebec.
- > Parents in the territories more often reported trust in a public health nurse or local public health authority.
- Those who were born outside Canada are somewhat more likely to be trusting of physicians. Interestingly, this demographic group of parents, as well as those who have children who were not born in Canada, are more likely than parents overall to trust the reliability of the information they get from the Internet.
- Among parents who said they would find trustworthy and reliable information on the Internet, those with a college education, more modest incomes (between \$40,000-\$69,000) and whose first language is neither English nor French are more likely to say that Google is where they would usually go for this information.
- The Health Canada website is more likely to be cited as a trustworthy website by parents with middle incomes (i.e., \$70,000-\$99,000) and by parents with graduate degrees.

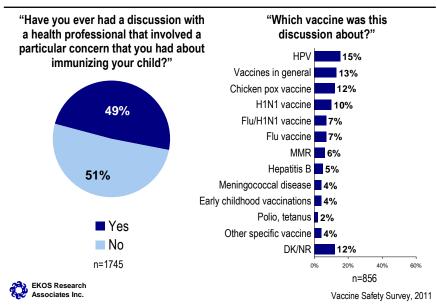
4.5 DISCUSSIONS WITH HEALTH PROFESSIONALS

Discussions with a health professional about concerns regarding immunization are quite common, according to survey results. Fully half (49 per cent) of all parents indicated having had such a conversation. This is considerably higher among parents that reported their children are not up to date with their vaccines (63 per cent).

The vaccine that parents have asked about varies considerably; however, one in seven (15 per cent) raised concerns about the HPV vaccine (the top concern). One in ten parents said they discussed vaccines in general (13 per cent), the chicken pox vaccine (12 per cent), and the H1N1 vaccine (10 per cent). Both the flu *and* the H1N1 vaccines together were brought up by seven per cent, as was the flu vaccine on its own. Less frequent mentions included the MMR vaccine (six per cent), the vaccine to prevent Hepatitis B (five per cent), the vaccine to prevent meningococcal disease (four per cent), early childhood vaccinations (four per cent) and the polio and tetanus vaccine (two per cent). Four per cent

discussed some other vaccine (less than two per cent citing each), including the pneumococcal vaccine, the "whooping cough" vaccine, and specific concerns about autism.

Discussions With Health Professionals



- The likelihood of having had a discussion with a health professional in regard to their child's immunization is more pronounced among parents in Quebec than among other parents across the country. Older parents and those who consider themselves to be familiar with childhood immunization are also more likely to have had a discussion with a health professional, relative to other parents. This likelihood is also more common among more educated and affluent parents, as well as those with young children (under 5 years), compared with their counterparts.
- > Those who were not born in Canada are less likely to have had this kind of discussion than other parents, as are parents in Ontario.
- Those who have had a conversation about vaccines in general with their health professional are more likely to have young children (under 5 years) and to be generally familiar with childhood immunizations compared to other parents. The chicken pox vaccine is more likely to be of concern to young parents (under 35) and, to a lesser extent, parents with a child between the ages of 5 and 9 than other parents. The H1N1 vaccine is also more likely to have been discussed by parents who have children between the ages of 5 and 9, in addition to those who live in Quebec and Atlantic Canada than it is among other parents. The HPV vaccine is of greater interest to older parents with children in their teens.

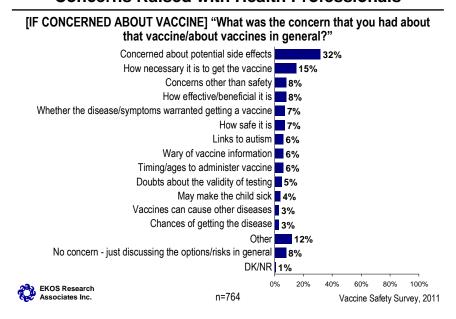
4.6 Concerns Raised with Health Professionals

Among parents who raised concerns about a childhood vaccine with a health professional, one-third (32 per cent) indicated concerns about potential side effects and a further 15 per cent questioned the necessity of getting the vaccine. Eight per cent asked about the benefits/effectiveness of the vaccine and the same proportion raised concerns other than safety (e.g., access to a doctor or clinic). Twelve per cent had some other concern that they brought up with their doctor (with two per cent or less citing each), including:

- That a vaccine might cause the disease it is meant to prevent;
- The ingredients/potency of the vaccine;
- Links to allergies;
- Concerns about the vaccine weakening the immune system;
- Concerns about the child's underlying health issues;
- Mercury in vaccines;
- Concern that the immune system is unable to handle immunizations; and
- > Concern that too many immunizations are required.

Another eight per cent said they had no particular concern – they were just discussing the risks and options in general.

Concerns Raised with Health Professionals



- > Slightly more likely to have brought up concerns about possible side effects of a vaccine were parents from Quebec, those with a college education and income under \$40,000, and those whose first language is neither English nor French, relative to other parent segments.
- Questions regarding the necessity of vaccines were more prevalent among those who are not familiar with childhood immunization.
- > Parents with questions about the effectiveness of a vaccine are more concentrated in Quebec than elsewhere in the country.
- > The concern over a possible connection between vaccines and autism is more likely to have been raised by parents in Alberta than parents in other provinces.

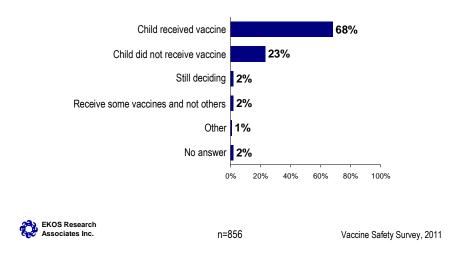
In terms of reaction from the health care provider, in 23 per cent of cases the parent was advised to obtain the immunization, indicating that the benefits outweighed the risk. In 16 per cent of cases the health care provider and parent discussed the pros and cons, and explained the ingredients. In 13 per cent of cases the health care providers assured the parent that the vaccine is safe and represents a minimal risk to children. In eight per cent of cases, the parent reported that the health care provider was generally supportive and re-assuring. In seven per cent of cases parents were provided with some additional factual information to consider.

4.7 OUTCOME OF DISCUSSIONS WITH HEALTH PROFESSIONALS

More than two-thirds of those with concerns (68 per cent) ultimately had their child immunized. Approximately one-quarter (23 per cent), however, did not receive the vaccine and two per cent were still deciding. In a small number of cases (two per cent), some vaccines were received while others were not, or not all dosages of the same vaccine were received.

Outcome of Discussion with Health Professionals

[HAD A DISCUSSION WITH A HEALTH PROFESSIONAL] "What was your final decision on this issue?"



- Those who ultimately decided to have their child receive the vaccine are more likely to be from Alberta or Atlantic Canada than elsewhere in the country. They are also more likely to have a young child (under 5), compared to parents with older children.
- Those who decided against having the vaccine for their child are more likely to be from Ontario than elsewhere in Canada. The incidence is also higher in households with an older child (15 or over).

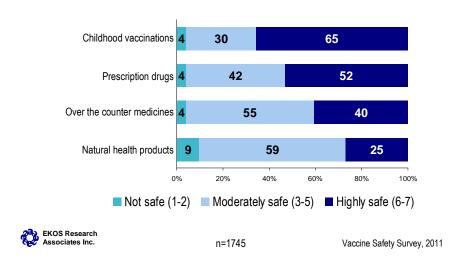
5. Perceptions Regarding Immunization

5.1 PERCEIVED RELATIVE SAFETY OF DIFFERENT HEALTH PRODUCTS

In order to gauge perceptions of the safety of vaccines, parents were presented with a list of health products available in Canada and asked to rate the relative safety of each one. Childhood vaccines garnered the most confidence, with 65 per cent rating them as highly safe (i.e., 6 or 7 on a 7-point scale). By comparison, parents are more cautious when it comes to prescription drugs and over the counter medicines, with 52 per cent and 40 per cent, respectively, rating these products as highly safe. Parents appear considerably more concerned with the safety of natural health products, with just 25 per cent rating them as highly safe. Very few parents rated vaccines (or prescription drugs or over the counter medicines) as unsafe.

Perceived Relative Safety of Different Health Products

"From what you believe to be the case in terms of safety standards, testing and approval, how safe are each of the following in Canada?"



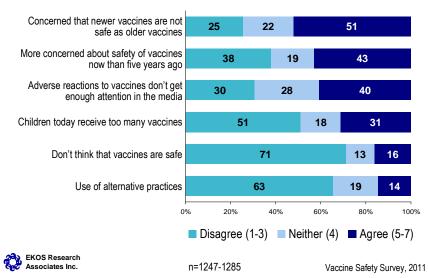
- > Parents that have not had their children fully immunized according the age appropriate schedule perceive over the counter medications, prescription drugs, and vaccines to be less safe than other parents do.
- Residents of Atlantic Canada demonstrate a greater likelihood than others across the country of being confident in the safety of vaccines, as well as prescription drugs and over the counter medications. Ontarians are also slightly more likely to be confident in the safety of vaccines. Parents in the territories are less apt than other parents to rate both over the counter medicines and childhood vaccinations as safe (although in the case of childhood vaccines 48 per cent do rate them as highly safe).
- > Familiarity with childhood immunizations appears to be associated with parents feeling more confident than others in the safety of vaccines. Parents who have a family doctor are also somewhat more likely to feel that vaccines are safe compared with the safety level accorded by those without a family doctor.
- > Older parents (45 and older) are typically more confident in the safety of vaccines than younger parents.

Concerns about safety are significantly outweighed by the prevalence of positive attitudes regarding the importance and effectiveness of vaccines throughout the survey. That said, in response to other lines of inquiry, some safety concerns have been expressed. In particular, half of parents (51 per cent) are concerned that new vaccines are not as safe as older vaccines. Four in ten parents are more concerned about the safety of vaccines now than five years ago (43 per cent) and a similar proportion agrees that adverse reactions to vaccines don't get enough attention in the media (40 per cent). A third of parents feels that children today receive too many vaccines (31 per cent).

To a much smaller extent, 16 per cent of parents agreed with the statement that vaccines are not safe, and a similar proportion agreed that the use of alternative practices can eliminate the need for vaccines (14 per cent).

Concerns about Vaccine Safety





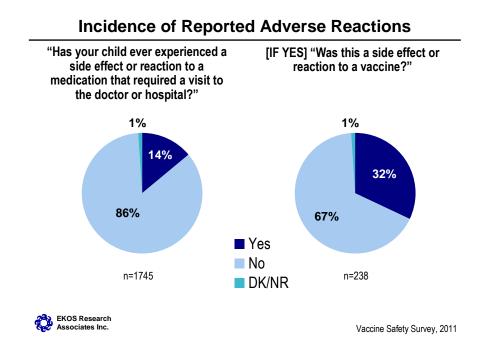
- Parents who reported that their children are not up to date with their immunizations are considerably less positive across each of these areas than parents who are up to date.
- The belief that vaccines are not safe is most prevalent among parents who were not born in Canada and those with the lowest household incomes (under \$40,000). Parents who share this belief are also somewhat more likely to lack a family doctor and to have had some or all of their children born outside of Canada, relative to the incidence among other parent segments.
- Concern over the safety of newer vaccines in comparison to older ones is particularly prevalent among residents of Quebec and Francophones compared with other parents across the country. Parents who also share this concern are less likely to have a family doctor and more likely to have modest household incomes (\$40,000-69,000). They are also more likely to be younger (under 35 years old) relative to the national average.
- > The belief that adverse reactions to vaccines do not receive enough attention in the media these days is more prevalent in the lowest income bracket, among younger parents (under 35) and those who have no family doctor than in other parent segments; this is also the case with parents who are less familiar with immunizations.
- Those expressing greater concern over the safety of vaccines than they did five years ago are significantly more likely to be the parents of young children (under 5 years) compared with those with older children. They are also less likely to have a family doctor, and more often are parents for whom neither English nor French are their first language. The concentration of this

- concern is also higher among those with mid to lower income, as well as among younger parents (under 35) compared with other parents.
- Support for the claim that alternative practices may eliminate the need for vaccines is most prevalent among parents who were born outside Canada. Similarly, parents born outside Canada are much more likely to feel that children today receive too many vaccines.
- While Quebec residents are more likely than others to agree that children receive too many vaccines these days, they are less likely to believe that alternative methods may eliminate the need for so many vaccines.

6. ADVERSE REACTIONS AND MONITORING

6.1 INCIDENCE OF REPORTED ADVERSE REACTIONS

Parents were asked if their child had ever experienced a side effect or reaction to a medication that required a visit to a doctor or hospital. Fourteen per cent reported that they sought medical attention for their child as a result of a reaction to medication. That said, only one-third of these cases (32 per cent) was related to a vaccine (n=74). Parents who reported that their children are not up to date with their vaccines are no more likely than other parents to have reported a side effect experienced by a child.



> There are few significant or meaningful differences in sample segments for these results.

6.2 Nature and Reporting of Adverse Reactions

The small number of respondents whose child had experienced a side effect or reaction to a vaccine (n=74) were asked to describe the side effects that their child experienced. Keeping in mind that the numbers are small, just under half of these parents said their child felt ill or tired on the day of injection, while one in four reported that their child experienced hives or swelling. A small proportion said their child experienced mumps, rash or itching and a similar proportion said their child experienced redness around the area of the injection. A few said their child became ill in the days following the administration of the vaccine. General illness in the following days, diarrhea and vomiting, seizures, and the flu were also mentioned by a few respondents.

Table 6.1: Nature of Adverse Reactions

Side effect or reaction to a vaccine*	Number of Respondents
Felt ill or tired, fever on day of injection	35
Hives, swelling	20
Mumps/rash/itching	9
Redness at the injection	8
Became ill in following days	4
Seizures	4
Vomiting/diarrhea	4
Got the flu	4
Shortness of breath	2
Eye irritation	2
Other	3

n=74

Most of these parents said that they reported the incident. Just over half said they reported the side effect or reaction to the doctor or clinic that administered the vaccine. Another small proportion reported it to a different doctor (who did not deliver the vaccine). Some also reported the reaction to a local public health authority or to a hospital.

Results suggest that parents experienced relatively few problems in reporting these reactions. Of those respondents that had reported their child's reaction, 83 per cent experienced no problems at all, although ten per cent said they had experienced difficulties.

^{*}Multiple answers were permitted

Table 6.2: Details on Reporting of Adverse Reactions

Person/Authority Reported To*	Number of Respondents	
Doctor/clinic that administered vaccine	40	
Different doctor	8	
Local public health authority	8	
Hospital	6	
Pharmacist	1	
Other	2	
DK/NR	2	

n=66

In many cases the reaction from the health care providers was to advise the parent to continue to proceed with the immunization for their child. In some cases the immunization was provided in the same consultation. In a few cases, parents were told that this kind of reaction is possible and in another few cases parents were told to monitor the situation and report any worsening of the problem. In a small number of cases the immunization protocol was terminated. A handful of parents also reported no particular reaction form their health care provider.

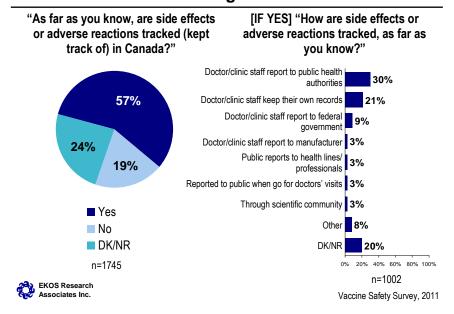
6.3 AWARENESS OF MONITORING FOR ADVERSE REACTIONS

Just over half of parents (57 per cent) indicated that they believe that adverse reactions are tracked in Canada. Respondents offered a range of explanations regarding how adverse reactions are tracked, though the largest proportion (30 per cent) believes doctors and clinic staff report these reactions to public health authorities. One in five (21 per cent) believes that doctors and clinic staff keep their own records. Nine per cent believe that doctors and clinic staff report directly to the federal government and three per cent say that doctors and clinic staff report the reactions to the drug manufacturers. Eight per cent (two per cent or less in each case) suggested that adverse reactions are tracked through some other method including health care databases, registries, records and systems; general reporting to Health Canada; and health professionals reporting the information generally.

Parents who reported that their children are not up to date with their vaccines are less likely to believe that side effects are tracked compared with those parents whose children are up to date.

^{*}Multiple answers were permitted

Awareness of Monitoring for Adverse Reactions



- The perception that there is a system for keeping track of adverse reactions to medications is most common among parents in Alberta compared to other areas of Canada. Those much more likely to doubt the existence of a tracking system are parents in Quebec, Francophones, and those who are not familiar with childhood immunization, relative to others. Residents of Ontario and those with some children who were born outside of Canada are also somewhat less likely to believe that tracking takes place.
- The perception that doctors must report adverse reactions to a public health authority is more commonly held in Manitoba and Saskatchewan than elsewhere in Canada. This is also true of parents with a university education, and those in the highest income bracket relative to those with less education and lower income.
- The perception that doctors and clinics keep their own records is more prevalent among the youngest cohort of parents (under 35) than it is among older parents.
- > Those less likely to believe that doctors and clinics report adverse reactions to the federal government are parents in the lowest income and education categories and younger parents (under 35).

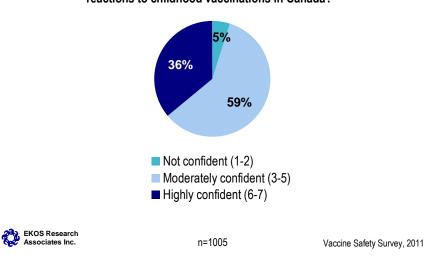
6.4 Confidence in Tracking System

Thirty-six per cent of parents indicate a high degree of confidence in the system for tracking these side effects, rating themselves with a six or seven on a seven point scale. Six in ten (59 per cent) say they are moderately confident. Very few (five per cent) describe themselves as not confident in the system.

Confidence in Tracking System

[IF YES TO SIDE EFFECTS TRACKED IN CANADA]

"How confident are you in the system for tracking side effects or adverse reactions to childhood vaccinations in Canada?"



Those who are familiar with childhood immunization are more confident, relative to other parents. Higher income parents (\$120,000+) are also somewhat more likely to express high confidence than those with less income.

APPENDIX A QUESTIONNAIRE

INTRO

Hello, my name is...and I work for EKOS Research Associates and we are conducting a survey on behalf of the federal government. We are speaking to Canadians 18 years and older about important health-related issues in the news today. Your participation is voluntary and choosing not to participate will not affect your dealings with government, however, it would be very helpful to us to hear your views. Any information you provide will be administered in accordance with the Privacy Act and any other applicable privacy laws, and the government will only receive summary results.

May I begin?

IF ASKED: INTERVIEW WILL BE APPROXIMATELY 15 MINUTES

PRIV

SEX

This call may be recorded for quality control or training purposes.

Record gender of respondent	
DO NOT ASK	
Male	
Famala	,

PARNT

First of all, before proceeding with the interview I would like to ask you if you are a parent or guardian of someone under 18 years of age, who is living with you or somewhere else?

Yes	
No (Thank and terminate)	->THNK2
DK/NR (Thank and terminate)	->THNK2

P2

And do you have shared or primary responsibility for decisions regarding your children's health care?

Yes (primary or shared)	I
No, someone else does	2
No response	
to response	

$\mathbf{O2}$

On a scale of 1 to 7 where 1 is not at all familiar, 7 is very familiar, and the midpoint 4 is moderately familiar, to what extent would you say that you are familiar with recommended childhood immunizations, that is, which shots are given when and for what?

(If respondent asks "What are recommended childhood immunizations?". These include vaccines to prevent tetanus, diphtheria, pertussis (whooping cough), polio and measles, mumps, rubella (MMR) as well as Hib and Hepatitis B.. They also include recommended vaccines to prevent pneumococcal disease, meningococcal disease, chicken pox (varicella) and HPV (cervical, vulvar and vaginal cancers/genital warts)

1 Not at all familiar	1
2	
3	
4 Moderately familiar	
5	
5	
7 Very Familiar	
DK/NR	9

PQ3

On a scale of 1 to 7 where 1 is not at all important, 7 is extremely important and 4 is moderately important, how important do you think the following vaccines are in preventing disease in children?

Q3A

measles/mumps/rubella (MMR) vaccine	
Not at all Important 1	1
2	
3	
Moderately Important 4	
5	
6	
Extremely Important 7	
Don't recognize disease	8
Don't recall/ Don't know	g
Q3B	
Tetanus/diphtheria/Hib/pertussis(pronounced per-ta-sis)/polic	vaccine
(Don't spell out HIB)	
Not at all Important 1	1
2	
3	
Moderately Important 4	
5	
6	
Extremely Important 7	

Don't recognize disease
Q3C
Flu vaccine (influenza)
Not at all Important 1
2
3
Moderately Important 4
55
66
Extremely Important 7
Don't recognize disease
Don't recall/ Don't know9
Q3D
The vaccine for chicken pox (Varicella)
Not at all Important 1
2
3
5
66
Extremely Important 7
Don't recognize disease
Don't recall/ Don't know9
Q3E
Hepatitis B
Not at all Important 1
2
3
Moderately Important 4
55
6
Don't recognize disease
Don't recall/ Don't know
Q3F
Vaccine to prevent pneumococcal (nu-ma'cockle) disease. The pneumococcus bacteri
causes blood infections, pneumonia and meningitis.
Not at all Important 1
22
33
Moderately Important 4
55
66
Extremely Important 7
Don't recognize disease

Don't recall/ Don't know9	
Q3G	
Vaccine to prevent meningococcal (men-in-Ja-cockle) disease, which is a s bacterial illness that causes meningitis (men-in-jy-tuss) and also causes block Not at all Important 1	
2	
Moderately Important 4	
5	
66	
Extremely Important 77	
Don't recognize disease	
Don't recall/ Don't know9	
04	
On the same scale, how important do you think the HPV (Human Papillo	
LO-ma-virus]) vaccine is in the prevention of cervical, vulvar, and vagina	al cancers and
genital warts caused by human papillomavirus (HPV) ?	
1 Not at all Important	
22	
3	
4 Moderately important	
55	
6	
7 Extremely Important	
DOIT recognize disease(s)	
NK	
How many children do you have who are under the age of 18?	
11	
None2	->THNK2
DK/NR	->THNK2 ->THNK2
	> 1111 (112
PK	
(What is that child's age and gender?/What are their ages and genders?)	
If under 12 months, enter '0' (zero)	
K1	
Age	
-	
Child one?	
11	
DK/NR9	

G1 Gender male _______1 **K2** Child two? M DK/NR9 G2 **K3** Child three? M G3CKID6 RANDOM CHILD SELECTED **Q5** (In the next questions we would like you to focus on your <age/youngest> <gender/child>) Has your <age/youngest> <gender/child> received all of the vaccines that are recommended for children up to his/her age?

Q5A

NO

If... Q5 = 2

Which vaccine or vaccines didn't your <age/youngest> <gender/child> receive?

DO NOT READ, TAKE ALL THAT APPLY

measles/mumps/rubella (MMR) vaccine	1	
Tetanus/diphtheria/Hib/pertussis/polio vaccine	2	
Flu vaccine (influenza)	3	
The vaccine for chicken pox (Varicella)	4	
Hepatitis B	5	
Vaccine to prevent pneumococcal disease, including pneumonia, meningitis and		
bacteria in the blood	6	
Vaccine to prevent meningococcal disease including meningitis and bacteria in		
the blood	7	
HPV (Human Papillomavirus) vaccine	8	
Don't know/No response	99 X	K

Q5B

NO Q5

If... Q5 = 2

What are the main reasons for this?

DO NOT READ, TAKE ALL THAT APPLY

If more than 1 vaccine missed and respondent reasons are different for different vaccines - take the most recent reason(s) (for the last decision made/vaccine not obtained)

Not yet, but I'm planning to	
Didn't want the vaccine	
Didn't know how or where to access health care services	I
Did not remember/forgot	I
No access to health care/no doctor available	I
Don't believe in them (e.g., philosophical or religious reasons)	
Too many immunizations required	I
Concerns about vaccine safety	
Vaccines are not effective (they don't work)	I
Vaccines are not necessary (body takes care of itself)	
Cost of the vaccine or it isn't covered by government	I
Child was too sick	I
May cause the disease meant to be prevented	I
Too many side effects	
Doctor said that it was not safe to vaccinate	I
Did not know about the vaccine	I
Vaccines cause chronic disease	I
Vaccines have not been tested (independent studies or random trials)	I
Don't trust the pharmaceutical industry (just want to sell drugs)	
Don't trust the government	I
Vaccines overwhelm the immune system	I
Vaccines contain toxic ingredients like formaldehyde, mercury, anti-freeze 21	I
Too many needles/injections, it traumatizes the child	I
Don't know the schedules of what vaccine is due	I

Other (please specify)
Q5C
DIDN'T WANT VACCINE If Q5B = 98
Why is that?
Please specify
Q6
Overall, have you found decisions relating to having your <age <gender="" child="" younges=""> immunized very easy, easy, difficult or very difficult to make?</age>
Very easy decisions 1 Easy 2 Difficult decisions 3 Very difficult decisions 4 Didn't really think much about it 9
Q6B
DIFFICULT
If Q6 = 3,4
Why do you say that?
Please specify
Q7
Have you ever looked for information about vaccines?
•
Yes
Don't recall 8
No answer9
Q7A YES
If Q7 = 1
(Where did you look or who did you talk to?/Who did you talk to or where did you look
DO NOT READ LIST AND TAKE ALL THAT APPLY Physician
Family member/friend (code above if they are professional in one of above) 6

Internet	
In a medical book/journal, etc (which one?)	
Local Public Health Authority	
Government (specify)	
Other (please specify)	
Don't know/Not sure	
Q7B <i>INTERNET</i> If Q7A = 7	
Where on the Internet would you usually go?	
DO NOT READ LIST AND TAKE ALL THAT APPLY Google	
Don't know/Not sure	
Q8 Thinking about all types of vaccines, do you feel you have enough information resources available to make informed decisions for your <age youngest=""> <gender chil="" td="" yes<=""><td></td></gender></age>	
Q8B	
NO .	
If Q8 = 2	
What information or resources would you like to have available?	
DO NOT READ, TAKE ALL THAT APPLY Risks of getting the disease	

Q9A

If you were looking for the most reliable and trustworthy information on vaccines, (where would you look or who would you talk to?/who would you talk to or where would you look?)

DO NOT READ LIST AND TAKE ALL THAT APPLY
Physician
Public Health Nurse
Other health care worker
Pharmacist
School5
Family member/friend (code above if they are professional in one of above) 6
Internet
In a medical book/journal, etc (which one?)
Local Public Health Authority (Health services/health unit/clinic)12
Government (specify)
Other (please specify)77
Don't know/Not sure
Q9B
INTERNET
If Q9A = 7
Where on the Internet would you usually go?
DO NOT READ LIST AND TAKE ALL THAT APPLY
Google search
Online medical website (which one?)
Online chatrooms/forums 9
Other online sources (specify)
Don't know/Not sure 99 X
Doli t Kilow/Not sure
Q16
Have any of the following been a problem or obstacle for you when making decision
about immunizing your <age youngest=""> <gender child="">?</gender></age>
READ LIST, TAKE ALL THAT APPLY
Cost of the vaccination
Lack of access to a nurse, doctor or clinic to administer the vaccine
Lack of information 3
Contradictory information regarding the safety of vaccines (i.e., I can't tell what
is credible, don't know who to believe)4

Don't recall98

BX

BX

BX

Q16A

-		~	0 TT	****	0 TO 1		TT 0 TT
	A	CK	()F	INH	NRA	IAI	TON

If... Q16 = 3

Was this a lack of information about...?

READ LIST, TAKE ALL THAT APPLY

Lack of information about common side effects of the vaccine	
Lack of information about the risk of severe reactions to the vaccine	
Lack of information about the illness/disease the vaccine is protecting against	
(e.g., how frequently it occurs and how severe it is)	
Lack of information about the effectiveness of the vaccine	
Don't recall	BX
No Response 99	BX

Q16G

CONTRADICTORY INFORMATION

If... Q16 = 4

You indicated contradictory information as a problem. How much of a problem was this for you on a scale from 1 not at all, to 7, a great extent where 4 is to a moderate extent?

To no extent at all	1
)	2
3	
To a moderate extent	
)	5
j	6
7 To a great extent	
VR	

PQ18

The next question refers to some different health-related products. In your opinion, on a scale from 1 not at all safe to 7 extremely safe where 4 is moderately safe, how safe are each of the following in Canada?

Q18A

Q18B Natural health products 6......6 **Q18C** Prescription drugs 3......3 6......6 **Q18D** Childhood vaccinations Not at all safe 1 ______1 6......6 Q19 Has your <age/youngest> <gender/child> ever experienced a side effect or reaction to a medication that required a visit to the doctor or hospital? Q19B **YES** If... Q19 = 1

Was this a side effect or reaction to a vaccine?

Q19C

YES

If Q19B = 1
What was that side effect or reaction to a vaccine?
DO NOT READ; ACCEPT AS MANY AS APPLY
Felt ill or tired/had fever on day of injection
Became ill in following days
Redness at the injection site, or a sore arm
Other (please specify)
Don't know/Not sure
SYMPTOMS EXPERIENCED UNSPECIFIED (EG. MENTIONS OF FEVER,
COUGHING/SORE THROAT, HEAD-ACHE, ACHES, FATIGUE/DIZZINESS)
TATIOUE/DIZZINESS)
Q19D
YES Q19B
If $Q19B = 1$
Did you report this side effect or reaction?
Yes
NO
Q19E
YES
YES If Q19D = 1
YES If Q19D = 1 Who did you report it to?
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77 DK/NR 99
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77 DK/NR 99
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77 DK/NR 99 Q19F YES Q19D, ANSWERED Q19E
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77 DK/NR 99 Q19F YES Q19D, ANSWERED Q19E If Q19D = 1 And Q19E Not = 99 What was the reaction of the (Q19E) when you reported the side effect or reaction? Please specify 77
YES If Q19D = 1 Who did you report it to? doctor or clinic that administered the vaccine 1 local public health authority 2 government 3 school nurse 4 pharmacist 5 vaccine manufacturer 6 Other (specify) 77 DK/NR 99 Q19F YES Q19D, ANSWERED Q19E If Q19D = 1 And Q19E Not = 99 What was the reaction of the (Q19E) when you reported the side effect or reaction

Q19G

YES Q19D
If $Q19D = 1$
Did you encounter any difficulty when you tried to report the reaction?
Yes (specify what it was)
DK/NR
Q20
As far as you know, are side effects or adverse reactions tracked (kept track of) ir Canada?
Yes 1 No 2 DK/NR 9
Q20B YES
If Q20 = 1
How are side effects or adverse reactions tracked, as far as you know?
Doctor or clinic staff report to public health authorities
Q21
YES Q20
If Q20 = 1
How confident are you in the system for tracking side effects or adverse reactions to childhood vaccinations in Canada on a scale where 1 is not at all confident, 7 is

extremely confident and the midpoint 4 is moderately confident?

1 Not at all confident	1
2	
3	
4 Moderately confident	
5	5
6	
7 Extremely confident	
DK/NR	

Q21B

Λ	$J \cap$	T	C	O	VF	m	EN	JT
Ι,	$^{\prime}$				VI . 1			, ,

If... Q21 = 1-3

Why aren't you confident in the system for tracking side effects or adverse reactions to childhood vaccinations in Canada?

Q22

Have you ever had a discussion with a health professional that involved a particular concern that you had about immunizing your <age/youngest> <gender/child>?

Q23

YES

If... Q22 = 1

Which vaccine was this discussion about?

DO NOT READ; Note to interviewers: If there is more than one situation, ask respondent to think of the most recent discussion.

Vaccines in general	1
Chicken Pox vaccine	3
MMR (measles, etc)	4
Polio, tetenus, etc	5
Hepatitis B	6
Pneumococcal disease	
Meningococcal disease	
HPV	
Flu vaccine	10
H1N1 vaccine	
Other specific vaccine (specify)	
DK/NR	

Q24

ANSWERED Q23

If... Q23 = 1-77

What was the concern that you had about that vaccine/about vaccines in general?

DO NOT READ LIST AND TAKE ALL THAT APPLY

Whether the disease/symptoms warranted getting a vaccine	. 1
Chances/likehood of getting the disease	
May make the child sick	
Vaccine can cause the disease it is meant to prevent	. 4
Vaccines can cause other diseases	
Too many vaccinations are required	6

Immune system may not be able to handle vaccination
Q25
YES Q22 but skip if q24 is 98 (no concerns, just discussing)
If Q22 = 1 And Q24 Not = 98
What response did you receive from your health care professional?
Please specify 77 DK/NR 99
Q26 YES Q22
If Q22 = 1
What was your final decision on this issue?
DO NOT READ LIST Child received vaccine
PQ27
To what extent do you agree or disagree with the following statements? Please use a scale from 1, strongly disagree, to 7, strongly agree, where the midpoint, 4, is neither agree nor disagree.
Q27A
2/3 Sample
I don't think that vaccines are safe
(INTERVIEWER: Confirm answer here - if 1-3 "so you think that they are safe", if 5-7
"so you think they are not safe")
Strongly Disagree 1 1 2 2
3
Neither Disagree Nor Agree 4
55
6
NR

Q27B

1	13	0 1	1
1.1	11	Sampl	0
41	$\boldsymbol{\mathcal{I}}$	Sampl	·

I'm concerned that newer vac	ccines are not as safe as o	older vaccines because	they haven't
been tested or tracked for as l	long		

Strongly Disagree 1	1
)	
}	
Neither Disagree Nor Agree 4	
)	5
ý	
Strongly Agree 7	
VR	

Q27C

2/3 Sample

I have often felt confused about the number and scheduling of vaccines for my children (INTERVIEWER: If respondent agrees confirm 'So you find the number and schedule confusing?" just to be sure)

Strongly Disagree 1	1
2	
3	
Neither Disagree Nor Agree 4	
5	5
5	
Strongly Agree 7	
NR	9

Q27E

2/3 Sample

Adverse reactions to vaccines don't get enough attention in the m	edia
Strongly Disagree 1	1
2	
3	
Neither Disagree Nor Agree 4	
5	5
6	6
Strongly Agree 7	
NR	

Q27F

2/3 Sample

The Internet is giving parents access to good information to make informed decisions about vaccination

Strongly Disagree 1	1
2	
3	
Neither Disagree Nor Agree 4	
5	
<u></u>	

Strongly Agree 7	
NR9	
Q27G	
2/3 Sample Childhood vaccines are effective	
Childhood vaccines are effective	
Strongly Disagree 1	
2 3	
Neither Disagree Nor Agree 4	
5	
6	
Strongly Agree 7	
NR9	
0.2511	
Q27H	
2/3 Sample	
Childhood vaccines are important for my child's health	
Strongly Disagree 1	
22	
33	
Neither Disagree Nor Agree 4	
55	
66	
Strongly Agree 7	
NR9	
Q27I	
2/3 Sample	
I don't really understand how vaccines work	
Strongly Disagree 1	
2	
3	
Neither Disagree Nor Agree 4	
5	
66	
Strongly Agree 7	
NR9	
Q27J	
2/3 Sample	
The use of alternative practices, such as homeopathy, or chiropractic treatm	
eliminate the need for vaccination (pronounce : hoe-me-OP-a-thee/k-eye-ro	-PRAK-tics)
Strongly Disagree 1	
22	
3	
Neither Disagree Nor Agree 4	
55	
66	

Strongly Agree 7	
NR	9
Q27K	
2/3 Sample	
•	
Children today receive too many vaccines	1
Strongly Disagree 1	
3	
Neither Disagree Nor Agree 4	
5	
6	6
Strongly Agree 7	7
NR	9
Q27L	
2/3 Sample	
I usually follow the advice of my child's doctor or nurse	
Strongly Disagree 1	1
2	2
3	
Neither Disagree Nor Agree 4	
5	
6	
Strongly Agree 7	
1VK	9
02714	
Q27M	
2/3 Sample	
I am more concerned about the safety of vaccinations than I was	five years ago
Strongly Disagree 1	
2	
3	
Neither Disagree Nor Agree 4	
5	
6Strongly Agree 7	
NR	
Q27N	
2/3 Sample My health provider explains the risks and benefits of vaccines of	aarly
My health provider explains the risks and benefits of vaccines cl	
Strongly Disagree 1	
2	
3Neither Disagree Nor Agree 4	
5	
6	
Strongly Agree 7	

NR
Q27P
2/3 Sample
There is a lot of misinformation about vaccines on the internet
Strongly Disagree 1
2
3
Neither Disagree Nor Agree 4 4 5 5
66
Strongly Agree 7
NR9
Q27R
AGREE Q27F, 1/2 SAMPLE
If $Q27F = 6.7$ And $C27F = 1$
Can you think of any websites offhand that you feel give parents access to good information to make informed decisions about vaccination?
Accept up to 2 sites
(Specify)
Can't think of any98
No Response 99
Q27S
AGREE Q27P, 1/2 SAMPLE
If $Q27P = 6.7$ And $C27P = 1$
Can you think of any websites offhand where you feel that there is misinformation about vaccines?
Accept up to 2 sites
(Specify)
Can't think of any
No Response 99
O28
CONCERNED Q27M
If Q27M = 5-7
You said earlier that you were more concerned about the safety of vaccinations than you were five years ago. Why is that?
Please specify
DK/NR

In the event of the global spread of a new influenza virus (like with the 2009 H1N1 outbreak) how likely would you be to have your children immunized against the virus? Rate your answer on a scale where 1 is not at all likely, 4 is moderately likely and 7 is extremely likely

1 Not at all likely	1
2	
3	
4 Moderately likely	
5	
6	6
7 Extremely likely	
DK/NR	

Q30

UNLIKELY

If... Q29 = 1,2,3

Why would you choose NOT to have your children immunized against the virus?

X

Q30A Would you choose to receive the vaccine yourself? Don't know **Q30B** NO. If... Q30A = 2Why not? DO NOT READ Do not believe that vaccines are safe (in general) ______4 Never find the time......9 Fear of needles 13 DK/NR 99 X **O30C** Did anyone in your household receive the H1N1 vaccine last year? Don't know/No Response9

Q30D YES If... Q30C = 1Who in the household received it? Take all that apply Other partner/spouse 2 Children 3 Other 4 X Don't recall _______8 No Response 9 CKID5 RANDOM GIRL SELECTED FOR HPV BATTERY **O10** Lastly, has your <age> year old daughter received the Chicken Pox (varicella) vaccine? Q11 Has your <age> year old daughter received the HPV vaccine? (That is the vaccine against Human Papillomavirus [pap-LO-ma-virus]) vaccine to prevent cervical, vulvar, and vaginal cancers and genital warts caused by human papillomavirus (HPV) Don't know/Not sure 9 Q12 **NO** If... Q11 = 2

YES	011	OR	YES	012

If... Q11 = 1 Or Q12 = 1

What would you say are the main reasons your <age> year old daughter (was/will be) immunized against HPV specifically?

DO NOT READ LIST AND TAKE ALL THAT APPLY

Doctor/public health nurse recommended	
They are free2	
They are routine/offered to all girls in province	
To protect them from cervical cancer	
Most parents vaccinate/social acceptability	
To protect them from genital warts	
To protect them from vulvar and vaginal cancers	
Other (please specify)	
Don't know/Not sure	X

Q14

NO Q11

If... Q11 = 2

What would you say are the main reasons you have not had your <age> year old daughter immunized against HPV?

DO NOT READ LIST AND TAKE ALL THAT APPLY

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
77	
99	X
	2 4 5 6 7 8 9 10 11 12

Q15

NO Q12

If... Q12 = 2

What would you say are the main reasons you do not intend to have your <age> year old daughter immunized against HPV?

DO NOT READ LIST AND TAKE ALL THAT APPLY

Concerned about safety (i.e., adverse reactions/negative side-effects)	1
No one (e.g., doctor/health care worker) suggested it	2
Encourages sexual activity	

Vaccine is too new
Q31 Now, I would like to get some information to help us group your answers with others that we will receive in this survey.
What is the highest level of formal education that you have completed? I will read a list, stop me when I get to the best answer.
Public/elementary school or less (grade 1-8) 1 Some high school 2 Graduated from high school (grade 12-13) 3 Vocational/technical college or CEGEP 4 Trade certification 5 Some university 6 Bachelor's degree 7 Professional certification 8 Graduate degree 9 DK/NR 99
Q32 What is the gross total income for your household for 2010? I will read a list, stop me when I get to the best answer.
Under \$30,000 1 \$30,000 \$39,999 2 \$40,000 \$49,999 3 \$50,000 \$59,999 4 \$60,000 \$69,999 5 \$70,000 \$79,999 6 \$80,000 \$89,999 7 \$90,000 \$99,999 8 \$100,000 \$119,999 9 \$120,000 and over 10 DK/NR 99
Q33 Were you born in Canada?

No......2

Q34	
Were your children born in Canada?	
Yes	1
Some were	
No	
DK/NR	4
Q35	
NO, Some	
If Q34 = 2,3	\neg
Were your children vaccinated in their birth country?	_
Yes	1
Some were	
No	
DK/NR	4
Q36	
YES, Some	
If Q35 = 1,2	
Were your children's vaccinations repeated or continued in Canada	?
Yes, repeated in Canada (if completed elsewhere)	1
Yes, continued in Canada (if part way through when moved to Canada)	
No, no vaccines given in Canada	3
DK/NR	4
Q37	
What language do you speak most often at home?	
English	1
French	
Other	3
DK/NR	4
Q38	
Do you have a family doctor?	
Yes	1
No	
DK/NR	3

QTHNK

Thank you very much for taking the time to complete this survey.

THNK2

SCREENED OUT

Thank you for your cooperation and time. Based on the information you have provided, unfortunately you are not eligible to complete the remainder of this survey.

QFIL

QUOTA FILLED

We regret but your responses have shown that you are in a group that is already completed. Thank you for taking the time to assist us in our data collection.

INTRO

Bonjour. Je m'appelle... et je travaille pour les Associés de recherche EKOS, inc. Nous effectuons un sondage pour le gouvernement fédéral. Nous communiquons avec les Canadiens âgés de 18 ans et plus afin d'aborder des questions importantes touchant la santé qui sont discutées dans les médias. Votre opinion nous serait très utile. Votre participation au sondage est volontaire et sachez qu'elle n'aura aucun impact sur vos rapports avec le gouvernement. Toute information fournie sera traitée en vertu de la Loi sur la protection des renseignements personnels et autres lois connexes. Le gouvernement ne recevra que le résumé des résultats.

Puis-je commencer?

SI LA QUESTION EST POSÉE : L'ENTREVUE DURERA ENVIRON 15 MINUTES

PRIV

Cet appel peut être enregistré à des fins de contrôle de la qualité ou de formation.

SEX	
Inscrire le sexe du répondant	
NE PAS DEMANDER Homme	
PARNT	
Avant de commencer l'entrevue, j'aimerais savoir si vous êtes un parent ou le tu d'une personne âgée de moins de 18 ans, qu'elle vive avec vous ou une autre personn	
Oui	
P2 Avez-vous la responsabilité principale ou partagée des décisions concernant les soir santé prodigués à vos enfants?	ıs de
Oui (responsabilité principale ou partagée)	

$\mathbf{O2}$

Sur une échelle de 1 à 7, où 1 signifie « pas du tout», 4, « assez bien » et 7, « beaucoup », dans quelle mesure connaissez-vous les vaccinations recommandées pour les enfants, c'est-à-dire pourquoi et quand les faire vacciner?

(Si le répondant pose la question : « Quelles sont les vaccinations recommandées pour les enfants? » Il s'agit des vaccins qui préviennent le tétanos, la diphtérie, la coqueluche, la polio et la rougeole, les oreillons et la rubéole [appelé le vaccin ROR], ainsi que le Hib et l'hépatite B. Ils comprennent également les vaccins recommandés pour prévenir la pneumococcie, la méningococcie, la varicelle et VPH [cancer de la vulve, du vagin ou du col de l'utérus/verrues génitales])

1 Pas du tout	1
2	
3	
4 Assez bien	
5	
6	
7 Beaucoup	
NSP/PDR	9

PQ3

Sur une échelle de 1 à 7, où 1 signifie « pas important », 4, « assez important » et 7, « très important », quelle importance accordez-vous aux vaccins suivants pour prévenir les maladies chez les enfants?

Q3A

 Le vaccin contre la rougeole, les oreillons et la rubéole (ou le vaccin ROR)

 Pas important 1
 1

 2
 2

 3
 3

 Assez important 4
 4

 5
 5

 6
 6

 Très important 7
 7

Q3B

Le vaccin contre le tétanos, la diphtérie, le Hib (prononcer Hib comme un mot), la coqueluche, la polio

Pas important 1	1
2	
3	
Assez important 4	
5	
5	
Frès important 7	

Ne connaît pas les maladies 8 Ne se rappelle pas ou ne connaît pas 9
Q3C
Le vaccin contre la grippe (influenza)
Pas important 1
22
33
Assez important 4
5
6
Très important 7
Ne se rappelle pas ou ne connaît pas
The se tuppene pus ou ne commun pus
Q3D
Le vaccin contre la varicelle
Pas important 1
22
33
Assez important 4
55
6
Très important 7
Ne connaît pas la maladie
The se tappene pas ou ne connan pas
Q3E
Le vaccin contre l'hépatite B
Pas important 1
2
3
Assez important 4
55
66
Très important 7
Ne connaît pas la maladie
Ne se rappelle pas ou ne connaît pas
Q3F
-
Le vaccin contre la pneumococcie (p'neu-mo-koki). Le pneumocoque (p'neu-mo-kok
est une bactérie qui entraîne l'infection du sang, la pneumonie et la méningite.
Pas important 1
2
3
Assez important 4
66
Très important 7

Ne connaît pas la maladie	
Q3G	
Le vaccin contre la méningococcie (ménin-go-koki), qui est une infect	tion hactérienne
	non bactericinic
grave entraînant la méningite ou l'infection du sang	
Pas important 1	
2	
3	
Assez important 4	
55	
66	
Très important 7	
Ne connaît pas la maladie	
Ne se rappelle pas ou ne connaît pas9)
Q4	
Sur la même échelle, quelle importance accordez-vous au vaccin contr	
papillome humain) dans la prévention des verrues génitales et du can	icer de la vulve, du
vagin ou du col de l'utérus, qui sont causés par le virus du papillome h	umain (VPH)?
1 Pas important	
22	
3	
4 Assez important	
5	
66	
7 Très important	
Ne connaît pas la/les maladie(s) 8	
NSP/PDR9	
NSF/FDK	,
NK	
Combien d'enfants âgés de moins de 18 ans avez-vous?	
1	
Aucun	2 ->THNK2
NSP/PDR 9	->THNK2
PK	
(What is that child's age and gender?/What are their ages and genders?	?)
Si moins de 12 mois, entrez « 0 » (zéro)	,
or month de 12 mois, entrez « o » (zero)	
K1	
L'âge	
Du premier enfant?	
1	

G1 Sexe masculin _______1 féminin 2 NSP/PDR 9 **K2** Du deuxième enfant? M NSP/PDR.......9 G2 féminin ______2 **K3** Du troisième enfant? M G3féminin ______2 CKID6 ENFANT CHOISI AU HASARD Q5 (Pendant la prochaine série de questions, nous vous demandons de vous concentrer sur votre <sexe/enfant> <âge/le plus jeune>.) Votre <sexe/enfant> <âge/le plus jeune> a-t-il(elle) reçu tous les vaccins recommandés pour les enfants jusqu'à son âge? Ne sais pas/Pas de réponse _______3

Q5A

NON Q5

If... Q5 = 2

Quel est le vaccin ou quels sont les vaccins que votre <sexe/enfant> <âge/le plus jeune> n'a pas reçus?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Le vaccin contre la rougeole, les oreillons et la rubéole (ou le vaccin ROR)	1	
Le vaccin contre le tétanos, la diphtérie, le Hib, la coqueluche, et la polio	2	
Le vaccin contre la grippe (influenza)	3	
Le vaccin contre la varicelle		
Le vaccin contre l'hépatite B		
Le vaccin contre la pneumococcie. y compris la pneumonie, la méningite et les		
bactéries dans le sang.	6	
Le vaccin contre la méningococcie, y compris la méningite et les bactéries dans		
le sang	7	
Le vaccin contre le VPH (virus du papillome humain)	8	
Ne sais pas/Pas de réponse	. 99	X

Q5B

NON Q5

If... Q5 = 2

Quelles sont les raisons principales pour lesquelles ce vaccin ou ces vaccins n'ont pas été donnés?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Si plus de 1 vaccin n'a pas été donné et si les raisons sont différentes pour les différents vaccins - prendre la raison la plus récente (pour la dernière décision prise / le dernier vaccin qui n'a pas été donné)

ras encore, mais je ie prevois	
Je ne veux pas le ou les vaccins	
Je ne savais pas comment ni où accéder aux services de soins de santé	I
J'ai oublié	I
Je n'ai pas accès aux soins de santé4	I
Je n'ai pas confiance dans les vaccins (p. ex., pour des raisons religieuses ou	
philosophiques)	
Trop de vaccinations sont requises	I
Je ne fais pas confiance à la sécurité des vaccins	
Les vaccins sont inefficaces	I
Les vaccins sont inutiles (puisque l'organisme s'immunise lui-même)	
Le coût du vaccin est prohibitif ou n'est pas pris en charge par le gouvernement 10	I
Mon enfant était trop malade11	I
Le vaccin pourrait provoquer la maladie qu'il est censé prévenir	I
Le vaccin comporte trop d'effets indésirables	
Selon le médecin, il était dangereux d'administrer le vaccin	I
Je ne connaissais pas ce vaccin	I
Les vaccins entraînent les maladies chroniques	I
Les vaccins n'ont pas été testés (avec des études indépendantes ou des essais au	
hasard)	I

Je n'ai pas confiance dans l'industrie pharmaceutique (qui est surtout motivée par	
le profit)	
Je n'ai pas confiance dans le gouvernement	
Les vaccins submergent le système immunitaire	I C
Les vaccins contiennent des ingrédients toxiques, comme du formaldéhyde, du	1 T
mercure, ou de antigel	
Je ne connais pas le calendrier de la vaccination	
Autre (veuillez préciser) 77	
Ne sait pas ou est incertain	
•	
Q5C	
JE NE VEUX PAS LE VACCIN	
If Q5B = 98	
Pourquoi?	
•	_
Veuillez préciser	
Ne sait pas ou est incertain	9 X
0.6	
Q6	
Dans l'ensemble, avez-vous trouvé très facile, facile, difficile ou très	difficile de décider
de faire vacciner votre <sexe enfant=""> <âge/le plus jeune>?</sexe>	
Très facile1	1
Facile	2
Difficile	3
Très difficile	1
N'y a pas beaucoup réfléchi)
Q6B	
DIFFICILE	
If Q6 = 3,4	
Pourquoi affirmez-vous cela?	
Veuillez préciser	7
Ne sait pas ou est incertain	
Q7	
Avez-vous déjà cherché de l'information sur les vaccins?	
Oui	1
Non	
Ne se rappelle pas	
Pas de réponse)

O	7	1	١
$\mathbf{\mathbf{v}}$	•	_	_

	T	77
U	U	

If... Q7 = 1

(Quelles sont vos sources d'information ou à qui avez-vous parlé? / À qui avez-vous parlé ou quelles sont vos sources d'information?)

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Le médecin	1
Autre travailleur de la santé	2
Le pharmacien	3
L'école	4
Une personne dans la collectivité	5
Un membre de la famille ou un ami (coder l'une des catégories précédentes s'il	
s'agit d'un professionnel de la santé)	6
Sur Internet	7
Dans un ouvrage ou un périodique de médecine (lequel?)	11
Une autorité locale de santé publique	12
Le gouvernement (préciser)	13
Autre (veuillez préciser)	77
Ne sait pas ou est incertain	

Q7B

INTERNET

If... Q7A = 7

Quels sites consultez-vous normalement sur Internet?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Google	7
Un site Wikki	
Un site médical sur Internet (lequel?)	8
Un forum ou un salon de clavardage	
D'autres sources en ligne (préciser)	77
Ne sait pas ou est incertain	

Q8

Croyez-vous être bien renseigné(e) ou avoir accès à des ressources suffisantes sur les divers types de vaccins pour prendre des décisions éclairées concernant votre <sexe/enfant> <âge/le plus jeune>?

X

Oui]	Ĺ
Non		
Ne sait pas ou est incertain		

Q8B

NON

If... Q8 = 2

Quels renseignements ou ressources devraient être fournis?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE Sur les risques d'attraper les maladies.....

our les risques à attraper les maiaures	1
Sur la gravité des maladies ou leurs symptômes	2
Sur les risques d'éprouver les effets indésirables des vaccins	3
Des résumés des vaccins et le calendrier	4
Des résumés des risques liés aux maladies et aux vaccins	
Veuillez préciser	77
Ne sait pas ou est incertain	

Q9A

Si vous recherchiez les renseignements les plus fiables ou dignes de confiance sur les vaccins, (où chercheriez-vous cette information ou à qui vous adresseriez-vous? / à qui vous adresseriez-vous ou où cherchez-vous cette information?)

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Le médecin	1
Une infirmière de la santé publique	2
Un autre travailleur de la santé	3
Le pharmacien	4
L'école	
Un membre de la famille ou un ami (coder une des catégories précédentes s'il	
s'agit d'un professionnel de la santé)	6
Sur Internet	7
Dans un ouvrage ou un périodique de médecine (lequel?)	11
Une autorité locale de santé publique (services de santé / unité de santé /	
clinique)	12
Le gouvernement (préciser)	13
Autre (veuillez préciser)	77
Ne sait pas ou est incertain	99

Q9B

INTERNET

If... Q9A = 7

Quels sites consultez-vous normalement sur Internet?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Recherche avec Google	/
Un site médical sur Internet (lequel?)	8
Un forum ou un salon de clavardage	
D'autres sources en ligne (préciser)	
Ne sait pas ou est incertain	
<u>r</u>	

X

X

Parmi les problèmes ou les obstacles suivants, lesquels rencontrez-vous lorsque vous devez prendre une décision concernant la vaccination de votre <sexe/enfant> <âge/le plus jeune>?

LIRE LA LISTE, ACCEPTER TOUTE REPONSE PERTINENTE	
Le coût de la vaccination1	
Le manque d'accès à une infirmière, à un médecin ou à une clinique pour	
administrer le vaccin	
Le manque d'information	
Les renseignements contradictoires concernant la sécurité des vaccins (p. ex. Qui	
ou quoi est fiable en la matière?)4	
Aucune problème/rien de ce qui précède	BX
Ne se rappelle pas	BX
Pas de réponse 99	BX
Q16A	
MANQUE D'INFORMATION	
If Q16 = 3	
Vous manquiez d'information sur quel sujet?	
LIRE LA LISTE, ACCEPTER TOUTE RÉPONSE PERTINENTE Manque d'information concernant les effets indésirables courants d'un vaccin	BX BX
Q16G	
INFORMATION CONTRADICTOIRE	
If Q16 = 4	
Vous avez signalé le problème des renseignements contradictoires. I quelle mesure est-ce un problème, sur une échelle de 1 à 7, où 1 signif 4, « dans une certaine mesure » et 7, « dans une grande mesure »?	
1 Pas du tout	
2	
3	
4 Dans une certaine mesure 4	

 5
 5

 6
 6

 7 Dans une grande mesure
 7

 PDR
 9

PQ18

La prochaine question se rapporte à divers produits liés à la santé. D'après vous, dans quelle mesure sont-ils sécuritaires, sur une échelle de 1 à 7, où 1 signifie « pas du tout », 4, « assez sécuritaire » et 7, « très sécuritaire »?

Q18A

Les médicaments sans ordonnance (p. ex. contre le rhume et la grippe, la douleu	ır et la
fièvre)	
Pas du tout 1	
2	
33	
Assez sécuritaire 4	
5	
56	
Frès sécuritaire 7	
NSP/PDR9	
0100	
Q18B	
Les produits de santé naturels	
Pas du tout 1	
2	
33	
Assez sécuritaire 4	
55	
56	
Frès sécuritaire 7	
NSP/PDR9	
O18C	
Les médicaments d'ordonnance	
Pas du tout 1	
2	
3	
Assez sécuritaire 4	
5	
56	
Γrès sécuritaire 7	
NSP/PDR9	
(i) (i) (ii) (ii) (ii) (ii) (ii) (ii) (
0.100	
Q18D	
La vaccination des enfants	
Pas du tout 1	
2	
33	
Assez sécuritaire 4	
5	

Très sécuritaire 7 7 NSP/PDR 9	
Q19	
Est-ce que votre <sexe enfant=""> <âge/le plus jeune> a éprouvé un effet ou une réaction indésirable à une substance médicale, qui a nécessité une visite chez le médecin ou à l'hôpital?</sexe>	
Oui 1 Non 2 NSP/PDR 3	
Q19B	
OUI	
If Q19 = 1	
S'agissait-il d'un effet ou d'une réaction indésirable à un vaccin?	
Oui	
Non 2	
NSP/PDR 3	
Q19C	
OV.	
If Q19B = 1	
Quel était cet effet ou cette réaction indésirable au vaccin?	
NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE	
Se sentait malade ou fatigué OU a éprouvé de la fièvre le jour de l'injection 1	
A été malade les jours suivants	
Rougeur ou douleur au bras s'est manifestée sur le lieu d'injection	
Urticaire, enflure	
Ne sait pas ou est incertain	
SE SENTAIT MALADE OU FATIGUÉ, DESCRIPTION DES SYMPTÔMES,	
JOUR ET HEURE NON PRÉCISÉS DES SYMPTÔMES (P. EX. MENTION	
DE LA FIÈVRE, DE LA TOUX OU DU MAL DE GORGE, DE MAUX DE	
TÊTE, DE DOULEURS CONTINUES, DE LA FATIGUE OU D'ÉTOURDISSEMENTS)6 I	
D DIOCRDISSENDIVIS)	
Q19D	
OUI Q19B	
If Q19B = 1	
Avez-vous signalé cet effet ou cette réaction indésirable?	
Oui1	
Non	
NSP/PDR 3	

Q19E OUI If... Q19D = 1À qui l'avez-vous signalé? À l'autorité locale de santé publique2 **O19F** OUI Q19D, RÉPONDU Q19E If... Q19D = 1 And Q19E Not = 99 Quelle fut la réponse du/de (Q19E) lorsque vous avez signalé l'effet ou la réaction indésirable? **Q19G OUI 019D** If... Q19D = 1Avez-vous rencontré des difficultés lorsque vous avez signalé la réaction? **Q20** À votre connaissance, assure-t-on le suivi des effets ou réactions indésirables au Canada? **Q20B OUI** If... Q20 = 1À votre connaissance, comment les effets ou réactions indésirables sont-ils suivis Les médecins ou le personnel des cliniques les signalent aux autorités de santé

Les médecins ou le personnel des cliniques tiennent leurs propres dossiers
Q21
OUI Q20
If Q20 = 1
Faites-vous confiance au système pour assurer le suivi des effets ou réactions indésirables des vaccins administrés aux enfants, sur une échelle de 1 à 7, où 1 signifie « pas du tou», 4, « plutôt confiant » et 7, « très confiant »?
1 Pas du tout
2
3
4 Plutôt confiant
66
7 Très confiant
NSP/PDR9
Q21B PAS CONFIANCE If Q21 = 1-3
Pourquoi ne faites-vous pas confiance au système pour assurer le suivi des effets ou réactions indésirables des vaccins administrés aux enfants?
Veuillez préciser 77 NSP/PDR 99 X
Q22 Avez-vous déjà discuté avec un professionnel de la santé à propos d'une préoccupation concernant la vaccination de votre <sexe enfant=""> <âge/le plus jeune>?</sexe>
Oui
Non
Q23
OUI
If Q22 = 1
De quel vaccin s'agissait-il?
NE PAS LIRE. Note à l'intervieweur : si le répondant a eu plusieurs discussions, demandez-lui de décrire la plus récente seulement. Les vaccins en général
Le vaccin ROR (contre la rougeole, etc.)
Les vaccins contre la polio, le tétanos, etc

Le vaccin contre l'hépatite B
Le vaccin contre la pneumococcie
Le vaccin contre la méningococcie
Le vaccin contre le VPH (le virus du papillome humain)
Le vaccin antigrippal
Le vaccin anti-H1N1
Un autre vaccin (préciser)
NSP/PDR 99
Q24
RÉPONDU Q23
If Q23 = 1-77
Quelle était votre préoccupation concernant les vaccins en général ou le particulier?
NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE
Est-ce la maladie ou ses symptômes justifient le vaccin?
La possibilité ou la probabilité d'attraper la maladie
Le vaccin pourrait rendre mon enfant malade
Le vaccin peut provoquer la maladie qu'il est censé prévenir
Les vaccins peuvent provoquer d'autres maladies
Trop de vaccinations sont requises
Le système immunitaire pourrait s'avérer incapable de prendre en charge la
vaccination
Je crains la possibilité des effets indésirables produits par les vaccins8
Il y a du mercure dans les vaccins
Il y a des agents de conservation dans les vaccins
Mon enfant a déjà des problèmes de santé
D'autres préoccupations en dehors de la sécurité (p. ex., l'accès au médecin, le
coût des vaccins)
Pas de préoccupations je discute des choix ou des risques liés aux vaccins en général
général 98 X Autre (préciser) 77
NSP/PDR 99 X
NSP/PDR99 A
Q25
OUI Q22 mais sauter si Q24 = 98 (Pas de préoccupation, discussion)
If Q22 = 1 And Q24 Not = 98
Quelle a été la réponse du professionnel de la santé?
Veuillez préciser
NSP/PDR99

vaccin en

	TT		22	
U	UI	U	'42	

If... Q22 = 1

Quelle a été votre décision concernant cette question?

NE PAS LIRE LA LISTE

L'enfant a reçu le vaccin
N'a pas encore pris de décision
Veuillez spécifier
Pas de réponse

PQ27

Dans quelle mesure êtes-vous d'accord ou en désaccord avec les énoncés suivants? Veuillez utiliser une échelle de 1 à 7, où 1 signifie « entièrement en désaccord », 4, « ni d'accord ni en désaccord » et 7, « entièrement d'accord »

Q27A

2/3 ÉCHANTILLON

Je ne fais pas confiance à la sécurité des vaccins

(INTERVIEWEUR : Confirmer la réponse - si 1-3 « Donc, vous faites confiance à la sécurité des vaccins »; si 5-7 « Donc, vous ne faites pas confiance à la sécurité des vaccins »)

Entièrement en désaccord 1	. 1
2	. 2
3	
Ni d'accord ni en désaccord 4	
5	. 5
5	
Entièrement d'accord 7	
אחק	Q

Q27B

2/3 ÉCHANTILLON

Je me préoccupe de la sécurité des nouveaux vaccins, qui n'ont pas été testés ou suivis comme les anciens vaccins

Entièrement en désaccord 1	1
2	2
3	
Ni d'accord ni en désaccord 4	
5	
6	
Entièrement d'accord 7	
PDR	

Q27C

2/3 ÉCHANTILLON

Je suis désorienté par le nombre de vaccins et le calendrier des vaccins pour mes enfants
(INTERVIEWEUR: Si le répondant est d'accord, confirmer : « Donc, le nombre de
vaccins et le calendrier des vaccins créent de la confusion? », pour assurer une bonne
réponse)

Entièrement en désaccord 1	1
2	
3	
Ni d'accord ni en désaccord 4	
5	
6	6
Entièrement d'accord 7	7
PDR	9

Q27E

2/3 ÉCHANTILLON

Dans les médias, il n'est pas suffisamment question des réactions indésirables aux vaccins

Entièrement en désaccord 1	1
2	2
3	
Ni d'accord ni en désaccord 4	4
5	5
6	6
Entièrement d'accord 7	7
PDR	9

Q27F

2/3 ÉCHANTILLON

Entierement en desaccord 1	
<u>)</u>	2
3	
Ni d'accord ni en désaccord 4	
5	5
ý	
Entièrement d'accord 7	
PDR	Ç

Q27G

2/3 ÉCHANTILLON

Les vaccins pour les enfants sont efficaces

Entièrement en désaccord 1	1
2	
3	
Ni d'accord ni en désaccord 4	
5	

6	
0.4577	
Q27H	
2/3 ÉCHANTILLON	
Les vaccins pour les enfants sont importants pour la santé de mon enfant Entièrement en désaccord 1	
2	
3	
Ni d'accord ni en désaccord 4	
6	
Entièrement d'accord 7	
PDR9	
Q27I	
2/3 ÉCHANTILLON	
Je ne comprends pas vraiment comment les vaccins agissent	
Entièrement en désaccord 1	
2	
33	
Ni d'accord ni en désaccord 4	
55	
66	
Entièrement d'accord 7	
COSTA	
Q27J	
2/3 ÉCHANTILLON	
Le recours à d'autres pratiques médicales, comme l'homéopathie (o-mé-o	-pathie) ou la
chiropratique (kiro-pratique), peut éliminer la nécessité de la vaccination Entièrement en désaccord 1	
22	
3	
Ni d'accord ni en désaccord 4	
55	
6	
Entièrement d'accord 7	
FDK9	
Q27K	
2/3 ÉCHANTILLON	
Aujourd'hui, les enfants reçoivent trop de vaccins	
Entièrement en désaccord 1	
2	
33	
Ni d'accord ni en désaccord 4	

_	~
5	
6	
Entièrement d'accord 7	
PDR	9
Q27L	
2/3 ÉCHANTILLON	
Normalement, je suis les conseils du médecin ou de l'infirmière co	
Entièrement en désaccord 1	1
2	2
3	3
Ni d'accord ni en désaccord 4	4
5	
6	6
Entièrement d'accord 7	
PDR	
OATE #	
Q27M	
2/3 ÉCHANTILLON	
Aujourd'hui, je suis plus préoccupé par la sécurité de la vaccination	n qu'il y a cinq ans
Entièrement en désaccord 1	
2	
3	
Ni d'accord ni en désaccord 4	
5	
6	
Entièrement d'accord 7	
PDR	
	>
Q27N	
2/3 ÉCHANTILLON	1 / /6" 1
Mon professionnel de la santé explique clairement les risques et les	
Entièrement en désaccord 1	
2	
3	
Ni d'accord ni en désaccord 4	
5	
6	
Entièrement d'accord 7	
PDR	9
Q27P	
2/3 ÉCHANTILLON	
Il y a beaucoup de désinformation concernant les vaccins sur l'Inter	rnet
Entièrement en désaccord 1	1
2	
3	
Ni d'accord ni en désaccord 4	
5	

6
Q27R D'ACCORD Q27F, 1/2 ÉCHANTILLON If Q27F = 6,7 And C27F = 1
Spontanément, pouvez-vous indiquer des sites sur Internet qui offrent une information sur la vaccination utile à la prise de décisions éclairées par les parents?
Accepter jusqu'à 2 sites (Préciser) 77 N'indique aucun site 98 Pas de réponse 99
Q27S D'ACCORD Q27P, 1/2 ÉCHANTILLON If Q27P = 6,7 And C27P = 1
Spontanément, pouvez-vous indiquer des sites sur Internet qui présentent de la désinformation sur les vaccins?
(Préciser) 77 N'indique aucun site 98 Pas de réponse 99
Q28 PRÉOCCUPÉ Q27M If Q27M = 5-7
Plus tôt, vous avez dit que vous êtes plus préoccupé aujourd'hui qu'il y a cinq ans par la sécurité des vaccins. Pourquoi?
Veuillez préciser 77 NSP/PDR 99
Q29 Dans le cas de la pandémie d'un nouveau virus grippal (comme la vague de grippe H1N1 en 2009), quelle serait la probabilité que vous fassiez vacciner vos enfants? Veuillez utiliser une échelle de 1 à 7, où 1 signifie « pas du tout », 4, « assez probable » et 7, « très probable ».
1 Pas du tout 1 2 2 3 3 4 Assez probable 4 5 5 6 6 7 Très probable 7
NSP/PDR

PEU PROBABLE

If... Q29 = 1,2,3

Pourquoi décideriez-vous de NE PAS faire vacciner vos enfants contre le virus?

NE PAS LIRE. Coder toute réponse pertinente. Approfondir : y a-t-il d'autres	roicone?
	i aisons :
Les effets de la grippe ne justifient pas un vaccin	
Je suis désorienté par l'abondance d'information sur les vaccins	
Le vaccin n'est pas nécessaire puisque le système immunitaire se régénère lui-	
même	
Je ne fais pas confiance à la sécurité des vaccins (en général)	
Je ne fais pas confiance à la sécurité du vaccin contre la grippe H1N15	
Les vaccins ne sont pas efficaces (en général)	
Le vaccin contre la grippe H1N1 n'est pas efficace	
Mes enfants sont en bonne santé et les risques liés au vaccin ne sont pas justifiés 8	
Manque de temps	
La dernière vaccination contre la grippe a rendu mes enfants malades	
Dans le passé, mes enfants ont éprouvé une réaction indésirable au vaccin	
antigrippal11 I	
Je sais que le vaccin ne protège pas contre toutes les souches de la grippe	
Peur des aiguilles 13 I	
Mes enfants ne fréquentent pas les personnes à risque	
Le médecin ne l'a pas conseillé	
Mes enfants ne font pas partie d'un groupe de personnes à haut risque	
Le coût (si le vaccin n'est pas offert gratuitement)	
Mes enfants n'en ont pas besoin	
Manque d'information	
À cause de la précédente situation de crise du vaccin contre la grippe H1N1, ou	
celle de 1976	
J'ai été saisi ou je suis inquiet des effets indésirables du vaccin	
Je suis préoccupé par le thimérosal ou le mercure dans le vaccin	
Je crains que mes enfants soient atteints du syndrome de Guillain-Barré à suite de	
la vaccination	
E chiant est trop jeune	
Autre (préciser)	
NSP/PDR 99 X	
Q30A	
Est-ce que vous accepteriez le vaccin pour vous-même?	
Oui	
Non	
Ne sais pas9	

Q30B

If... Q30A = 2

Pourquoi?

NE PAS LIRE

Les effets de la grippe ne justifient pas un vaccin
Je suis désorienté par l'abondance d'information sur les vaccins
Le vaccin n'est pas nécessaire puisque le système immunitaire se régénère lui-
même
Je ne fais pas confiance à la sécurité des vaccins (en général)
Je ne fais pas confiance à la sécurité du vaccin contre la grippe H1N1
Les vaccins ne sont pas efficaces (en général)
Le vaccin contre la grippe H1N1 n'est pas efficace
Je suis en bonne santé et les risques liés au vaccin ne sont pas justifiés
Manque de temps
La dernière vaccination contre la grippe m'a rendu malade
Dans le passé, mes enfants ont éprouvé une réaction indésirable au vaccin
antigrippal 11
Je sais que le vaccin ne protège pas contre toutes les souches de la grippe
Peur des aiguilles
Mes enfants ne fréquentent pas les personnes à risque
Le médecin ne l'a pas conseillé
Je ne fais pas partie d'un groupe de personnes à haut risque
Le coût (si le vaccin n'est pas offert gratuitement)
Je n'en ai pas besoin
Manque d'information 19
À cause de la précédente situation de crise du vaccin contre la grippe H1N1, ou
celle de 1976
Je suis inquiet des effets indésirables du vaccin
Je suis préoccupé par le thimérosal ou le mercure dans le vaccin
Je crains que mes enfants soient atteints du syndrome de Guillain-Barré à la suite
de la vaccination
Je suis trop jeune
Autre (préciser)
NSP/PDR99

Q30C

Est-ce des membres de votre ménage ont reçu le vaccin contre la grippe H1N1 l'année dernière?

X

Oui	1
Non	
Ne sais pas/pas de réponse	

Q30D OUI If... Q30C = 1Quels membres de votre ménage l'ont reçu? Accepter toute réponse pertinente Le répondant......1 Autre.......4 X Ne se rappelle pas 8 CKID5 FILLE CHOISIE AU HASARD POUR LES QUESTIONS LIÉES AU VPH, PAR PROVINCE Q10 Enfin, est-ce que votre fille de <âge> ans a reçu le vaccin contre la varicelle? Ne sait pas ou est incertain 9 011 Est-ce que votre fille de <âge> ans a reçu le vaccin contre le virus du papillome humain (ou VPH) afin de prévenir les verrues génitales et le cancer de la vulve, du vagin ou du col de l'utérus? Q12 **NON** If... Q11 = 2

Prévoyez-vous faire vacciner votre fille contre le VPH?

OUI Q11 OU OUI Q12

If... Q11 = 1 Or Q12 = 1

Quelles sont les raisons principales pour lesquelles votre fille de <âge> ans <a été/sera> vacciné contre le VPH en particulier?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Le médecin ou l'infirmière de la santé publique l'a conseillé	1
C'est gratuit	2
C'est une vaccination de routine ou elle est offerte à toutes les filles de la	
province	3
Afin d'assurer une protection contre le cancer du col de l'utérus	4
La plupart des parents choisissent la vaccination ou c'est en lien avec le degré	
d'acceptation dans le groupe d'élèves	5
Afin d'assurer une protection contre les verrues génitales	6
Afin d'assurer une protection contre le cancer de la vulve ou du vagin	7
Autre raison (veuillez préciser)	77
Ne sait pas ou est incertain	99

Q14

NON Q11

If... Q11 = 2

Quelles ont été les raisons principales pour ne pas avoir fait vacciner votre fille de <âge> ans contre le virus du papillome humain?

X

X

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Preoccupation concernant la securité du vaccin (ca-d. les effets ou réactions	
indésirables)	1
N'a pas eu l'occasion de s'occuper de la vaccination	2
Notre fille est trop jeune	3
Personne ne l'a conseillé (p. ex., le médecin ou le travailleur de la santé)	4
Cela encourage l'activité sexuelle	5
Le vaccin est trop récent	
Manque de confiance dans l'efficacité des vaccins ou leur protection à long term	
Pas d'accès à un médecin ou à une clinique	8
Le coût est trop élevé	9
Ma fille a été dispensée de recevoir le vaccin parce qu'elle est malade	10
Nous n'y avons pas pensé	11
Trop de vaccinations sont requises	12
Autre raison (veuillez préciser)	
NSP/PDR	

NON Q12

If... Q12 = 2

Quelles sont les raisons principales pour lesquelles vous n'avez pas l'intention de faire vacciner votre fille de <âge> ans contre le VPH?

NE PAS LIRE, ACCEPTER TOUTE RÉPONSE PERTINENTE

Préoccupation concernant la sécurité du vaccin (cà-d. les effets ou réactions	
indésirables)	
Personne ne l'a conseillé (p. ex., le médecin ou le travailleur de la santé)2	
Cela encourage l'activité sexuelle	
Le vaccin est trop récent	
Manque de confiance dans l'efficacité des vaccins ou leur protection à long terme 5	
Pas d'accès à un médecin ou à une clinique	
Le coût est trop élevé	
Ma fille a été dispensée de recevoir le vaccin parce qu'elle est malade	
Nous n'y avons pas pensé9	
Trop de vaccinations sont requises	
Autre raison (veuillez préciser)	
NSP/PDR99	X

Q31

Je vais vous demander certains renseignements pour nous aider à grouper vos réponses avec celles d'autres personnes nous auront fournies dans le cadre du présent sondage.

Quel est votre niveau de scolarité? Je vais lire une liste; veuillez m'arrêter lorsque vous entendrez la bonne réponse.

École primaire ou moins	. 1
Jn peu d'école secondaire	. 2
Diplôme d'études secondaires	. 3
Diplôme d'un collège communautaire/technique, d'un CEGEP	. 4
Certificat de métier	. 5
Jn peu d'université	. 6
Baccalauréat	. 7
Certificat professionel	. 8
Diplôme d'études supérieures	. 9
NSP/PDR	

Q32

Quel est le revenu brut total de votre ménage en 2010? Je vais lire une liste; veuillez m'arrêter lorsque vous entendrez la bonne réponse.

Moins de 30 000 \$	1
De 30 000 \$ à 39 999 \$	
De 40 000 \$ à 49 999 \$	
De 50 000 \$ à 59 999 \$	
De 60 000 \$ à 69 999 \$	5
De 70 000 \$ à 79 999 \$	6
De 80 000 \$ à 89 999 \$	
De 90 000 \$ à 99 999 \$	8

De 100 000 \$ à 119 999 \$9	
120 000 \$ ou plus	
NSP/PDR 99	
Q33	
· ·	
Êtes-vous né au Canada?	
Oui1	
Non	
NSP/PDR	
Q34	
Est-ce que vos enfants sont nés au Canada?	
Oui	
Certains	
Non	
NSP/PDR 4	
Q35	
NON, certains	
If Q34 = 2,3	
Est-ce que vos enfants ont été vaccinés dans leur pays d'origine?	
1	
Oui	
Certains	
Non	
NSF/FDR4	
Q36	
OUI, certains	
If Q35 = 1,2	
Est-ce que la vaccination de vos enfants a été répétée ou poursuivie au Canada	?
Oui, elle a été répétée au Canada (si la vaccination a été complétée dans un autre	
pays)	
Oui, elle a été poursuivie au Canada (si la vaccination n'était pas complète au moment d'immigrer au Canada)	
Non, il n'y a pas eu de vaccination au Canada	
NSP/PDR 4	
027	
Q37 Ovelle est le len que metamelle modés à le meigen?	
Quelle est la langue maternelle parlée à la maison?	
Anglais	
Français2	
Autre	
1001 /1 DX4	

Avez-vous un médecin de famille?

Oui	. 1
Non	. 2
NSP/PDR	

QTHNK

Merci beaucoup d'avoir pris le temps de répondre à notre sondage.

THNK2

REJETÉ À LA SÉLECTION

Merci de votre collaboration! D'après les renseignements que vous avez donnés, vous n'êtes malheureusement pas admissible pour participer à ce sondage.

QFIL

NOMBRE REQUIS ATTEINT

Nous regrettons, mais vos réponses indiquent que vous faites partie d'un groupe qui est déjà complet. Merci d'avoir pris le temps de collaborer à notre collecte de données.

APPENDIX B RESPONSE RATE

Response Rate Table

	Final Disposition	#	Totals
Unused			4481
A Invalid numbers			6880
	BC - Blocked by Bell	296	
	BU - Business/Fax /Modem	1247	
	DU - Duplicate Number	83	
	NF - Invalid Number	5254	
B Unresolved			11460
	AM - Callback in 2 hrs	8538	
	AP - Callback - Specific time/date	440	
	EV - Evening Call Request		
	FR - French Household	66	
	HO - Head Office - Unreachable 1-800#'s		
	Incomplete		
	NA - Callback in 12 hrs	2406	
	ON - Will go Online to Complete Survey		
	RH - Referred to Head Office		
	RT - Number Retired		
	SA - Soft AP - Date/Time Required		
	X - Exit without Dialing	10	
C Non-responding, unknown eli	gibility		
D Ineligible			6139
	IG - Ineligible	5470	
	LN - Language Barrier	637	
	QF - Quota Filled	32	
E Non-responding, eligible			14340
	IR - Incomplete Refusals	86	
	R2 - Final Refusal	5541	
	RF2 - Refus 2 - Refusal 2nd attempt	1412	
	RF3 - Refus 3 - Refusal 3rd attempt	815	
	RF - Refusal	6453	
	UN - Unavailable within Project Timeframe	33	
F Completed interviews			1759
	Complete	1759	
TOTALS		40578	40578
Response Rate Table			
Empirical Method	Response Rate		23.4%