



COVID-19 VACCINE ATTITUDES AND BELIEFS

Have you received a vaccine for COVID-19?

- Yes →
- No
- Unsure

When were you vaccinated? \_\_\_\_\_ month \_\_\_\_\_ year

Which vaccine did you receive?

- Moderna
- Pfizer
- AstraZeneca
- Unknown
- Other: \_\_\_\_\_

How many doses did you receive?

- One
- Two

**Skip next question (Do you intend to receive a vaccine)**

Do you intend to receive a coronavirus (COVID-19) vaccine?

- I intend to get it as soon as possible
- I intend to wait to see how it affects others in the community before I get it
- I do not intend on getting it soon, but might sometime in the future
- I do not intend to ever get the vaccine

For these questions, we are asking what factors contribute to your attitudes about a COVID-19 vaccine. For each option, would you agree or disagree that this factor affects your opinion about a vaccine?

	Agree	Disagree
The current politics	<input type="radio"/>	<input type="radio"/>
The rushed/ fast-tracked research and development timeline	<input type="radio"/>	<input type="radio"/>
The frequently changing science of COVID-19	<input type="radio"/>	<input type="radio"/>
Actions and opinions of my friends and family regarding the vaccine	<input type="radio"/>	<input type="radio"/>
My trust in scientists	<input type="radio"/>	<input type="radio"/>
My own reading and research on coronavirus (COVID-19) vaccines	<input type="radio"/>	<input type="radio"/>
The country in which a vaccine is manufactured	<input type="radio"/>	<input type="radio"/>
The potential cost of a coronavirus (COVID-19) vaccine	<input type="radio"/>	<input type="radio"/>
Other (please specify): _____	<input type="radio"/>	<input type="radio"/>



	Much less likely	Somewhat less likely	Somewhat more likely	A lot more likely	No change
When considering your willingness to vaccinate yourself in general, has the global Coronavirus (COVID19) pandemic changed how likely you are to vaccinate yourself compared with one year ago?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Did you receive the influenza (“flu”) vaccine this year (August 2020 or later)?

- Yes
- No
- Unsure

Over the past five years, how often did you get the seasonal flu vaccine?

- Never
- 1-2 years
- 3-4 years
- Every year
- Unsure

Have you received the pneumonia vaccine (“Pneumovax” or “Prevnar”)?

- Yes
- No
- Unsure

Have you received the shingles vaccine?

- Yes
- No
- Unsure

How strongly do you agree or disagree with each of the following statements about vaccines in general?

	Agree	Disagree
Vaccines are important for my health	<input type="radio"/>	<input type="radio"/>
Overall, vaccines are safe	<input type="radio"/>	<input type="radio"/>
Overall, vaccines are effective	<input type="radio"/>	<input type="radio"/>
The information I receive about vaccines from public health authorities/my healthcare provider is reliable and trustworthy	<input type="radio"/>	<input type="radio"/>
I am concerned about serious adverse (bad) effects of vaccines	<input type="radio"/>	<input type="radio"/>



Please answer the following questions about your beliefs and attitudes regarding the seasonal influenza vaccine.

	Strongly Agree	Agree	Disagree	Strongly Disagree
The flu vaccine is important	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The flu vaccine is safe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The flu vaccine is effective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The flu vaccine is convenient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The flu vaccine is affordable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am required to get a flu vaccine for my job	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>