COVID-19 Vaccination perceptions of HCWs

* 1. Greetings dear healthcare provider,

We would like you to imagine a situation where a number of vaccines for COVID-19 have been developed. These vaccines have undergone all required testing and have received regulatory approval for use in humans from the health authorities in Saudi and in other countries. Vaccination has also been recommended by the World Health Organisation (WHO).

Kindly take 5 minutes to answer, keeping in mind that all your answers are confidential. This will also give you more insight into several COVID vaccines that are currently in Phase 3 trial.

The study was approved by the Institutional Review Board at the College of Medicine, King Saud University (approval # 20/0065/IRB).

Thank You!

Dr. Hani Temsah, Dr. Mazin Barry
mtemmiah@ksu.edu.sa
  
- I am a healthcare worker in Saudi Arabia, and I **ACCEPT** to participate in this Survey
- I do **NOT** accept to participate in this Survey

* 2. Region:

- Riyadh region
- Makkah region
- Madinah region
- Qassim region
- Eastern Region
- Asir
- Tabuk
- Hail
- The Northern Border region
- Jazan
- Najran
- Al Baha
- Al Jouf
COVID-19 Vaccination perceptions of HCWs

Please Choose Your Answers then Press "Next"

* 3. You are
  - Consultant
  - Assistant consultant
  - Resident
  - Nurse
  - RT
  - Other (please specify)

* 4. What is your age?

   Age in years:

* 5. What is your gender?
  - Female
  - Male

* 6. Are you now married, widowed, divorced, separated, or have you never been married?
  - Married and living with children
  - Married but living alone
  - Widowed
  - Divorced
  - Never married
7. At what Hospital area do you work usually most of the time?
   - Pediatric ICU
   - Adult ICU
   - Pedia ER
   - Adult ER
   - Isolation ward
   - General ward
   - OPD
   - Other (please specify)

8. Do you have a chronic medical condition?
   (like Hypertension, DM, chronic kidney disease, Heart disease, Asthma, COPD, Cancer, Immunocompromised state, SCD, Obesity)
   - No
   - Yes (please specify)

9. Your hospital setting and type of practice?
   
   Hospital Setting: [Dropdown]
   Type: [Dropdown]
   Practice Level: [Dropdown]

10. Have you been previously in contact with Corona (proven or suspected COVID) patients?
    (Please choose all that apply)
    - Yes: With COVID-Infected Patient
    - Yes: With COVID-positive family member or friend
    - Yes: With MERS-CoV Patient
    - No: No contact at all

11. Have you been infected with laboratory-confirmed COVID-19 yourself?
    - Yes
    - No
COVID-19 Vaccination perceptions of HCWs

* 12. Did you take the influenza vaccine during the last 2 years?
   - Yes
   - No

* 13. If an approved MERS-CoV vaccine became available in Saudi Arabia this year, would you take it yourself?
   - Yes
   - No

* 14. If an approved COVID vaccine became available in Saudi Arabia this year, would you take it yourself?
   - Yes
   - No

* 15. If a COVID vaccine became available when you will take it?
   - Get one as soon as possible
   - Delay getting it for few months
   - Never get one
### COVID-19 Vaccination perceptions of HCWs

16. You choose not to get the COVID Vaccine: 
What are your reasons for not taking the vaccine? (Choose what apply)

- [ ] Inadequate data about the safety of a new vaccine
- [ ] I am against vaccine in general (or I avoid medications whenever possible)
- [ ] Vaccine administration is painful or inconvenient
- [ ] I already had COVID infection
- [ ] A concern of adverse effects of the vaccine
- [ ] A concern of acquiring Covid19 from the vaccine
- [ ] A concern of vaccine being ineffective
- [ ] Prior adverse reaction to the vaccine
- [ ] I perceive myself not at high risk to acquire Covid19 infection
- [ ] I perceive myself not at high risk to develop complications if I get infected with Covid19 infection
- [ ] Other (please specify)

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**COVID-19 Vaccination perceptions of HCWs**

**COVID Vaccine**

*17. If a COVID vaccine is announced this year in 2020, would your first thoughts be:*  
- [ ] It is a scientific achievement to find a vaccine that fast  
- [ ] It was probably rushed without enough testing  
- [ ] Other (please specify)  
- [ ] 

*18. COVID vaccine is the most likely way to stop this pandemic.*  
- [ ] Strongly agree  
- [ ] Agree  
- [ ] Neither agree nor disagree  
- [ ] Disagree  
- [ ] Strongly disagree  

*19. Once the vaccine is available and approved, it would be safe.*  
- [ ] Strongly agree  
- [ ] Agree  
- [ ] Neither agree nor disagree  
- [ ] Disagree  
- [ ] Strongly disagree  

*20. The best way to avoid the complications of COVID is by being vaccinated*  
- [ ] Strongly agree  
- [ ] Agree  
- [ ] Neither agree nor disagree  
- [ ] Disagree  
- [ ] Strongly disagree
21. From the following COVID vaccines in phase 3 trials, which do you know?

<table>
<thead>
<tr>
<th>Vaccine Type</th>
<th>Do Not Know This Vaccine</th>
<th>Know About This Vaccine</th>
</tr>
</thead>
<tbody>
<tr>
<td>AstraZeneca: (Oxford/University: British/Swedish) Non-Replicating Viral Vector (chimpanzee adenovirus vectored vaccine (ChAdOx1 nCoV-19))</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Johnson and Johnson (USA): (adenovirus type 26 vector Ad26.COV2-S)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pfizer RNA (BNT162b2 (USA): nucleoside-modified messenger RNA modRNA)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Novavax (USA): protein subunit (Full length recombinant SARS CoV-2 glycoprotein nanoparticle vaccine adjuvanted with Matrix M)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderna RNA (USA): mRNA-1273</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>CanSino (China): (Adenovirus type 5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gamaleya (Russia): Sputnik V non replicating viral vector Adenovirus</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>
* 22. From the following COVID vaccines in phase 3 trials, how likely would you accept each one:

<table>
<thead>
<tr>
<th>Vaccine Type</th>
<th>I will never accept to take</th>
<th>Not sure</th>
<th>Surely I will accept</th>
</tr>
</thead>
<tbody>
<tr>
<td>AstraZeneca: (Oxford/University: British/Swedish)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Non-Replicating Viral Vector (chimpanzee adenovirus vectored vaccine (ChAdOx1 nCoV-19))</td>
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<td>Gamaleya (Russia): Sputnik V non replicating viral vector Adenovirus</td>
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</tbody>
</table>

* 23. What factors affected your choice your answer to the above question?

- [ ] This COVID vaccine(s) seem more efficient on preventing the infection
- [ ] Vaccine availability
- [ ] Company's reputation
- [ ] Manufacturing country
- [ ] Possibly lessor side effects from this vaccine
- [ ] from the Media coverage
- [ ] Personal preferance
- [ ] Other (please specify)
COVID-19 Vaccination perceptions of HCWs

Changes after Corona (MERS)

Please Choose Your Answers then Press "Next"

24. What is/are your usual source(s) of information about COVID vaccine? (Check all that apply)

- Hospital announcements (e.g. roll-ups or newsletters)
- Official statements or press release from MOH (e.g. through SMS or newspapers)
- MOH website
- WHO website
- CDC Website
- Other internet resources
- Social Networks (like YouTube, Facebook, Twitter, WhatsApp)
COVID-19 Vaccination perceptions of HCWs

* 25. On a scale from 1 to 5, please rate how much worry you experienced over the past 2 weeks about contracting COVID19 Infection yourself:

<table>
<thead>
<tr>
<th>Scale</th>
<th>Not worried at all</th>
<th>Little worried</th>
<th>Somewhat worried</th>
<th>Very worried</th>
<th>Extremely worried</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>[ ]</td>
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<td>5</td>
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</tbody>
</table>

* 26. On a scale from 1 to 5, please rate how much worry you experienced over the past 2 weeks about transmitting the COVID19 Infection to your family:

<table>
<thead>
<tr>
<th>Scale</th>
<th>Not worried at all</th>
<th>Little worried</th>
<th>Somewhat worried</th>
<th>Very worried</th>
<th>Extremely worried</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>5</td>
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</tbody>
</table>

* 27. Over the last 2 weeks, how often have you been bothered by the following problems?

<table>
<thead>
<tr>
<th>Feeling</th>
<th>Not at all</th>
<th>Several days</th>
<th>More than half the days</th>
<th>Nearly every day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feeling nervous, anxious or on edge</td>
<td>[ ]</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Not being able to stop or control worrying</td>
<td>[ ]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Worrying too much about different things</td>
<td>[ ]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trouble relaxing</td>
<td>[ ]</td>
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<td></td>
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<tr>
<td>Being so restless that it is hard to sit still</td>
<td>[ ]</td>
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<td></td>
<td></td>
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<tr>
<td>Becoming easily annoyed or irritable</td>
<td>[ ]</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Feeling afraid as if something awful might happen</td>
<td>[ ]</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>