Background Information

* 1. What is your sex?

- Male
- Female

* 2. What age range do you fit in?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

3. What is your marital status?

- Never married
- Married
- Living together (Cohabiting)
- Divorced/Separated
- Widowed

* 4. What is your education level?

- Primary school
- Secondary school
- Higher education
- No formal education

Level of higher degree

* 5. What level of higher education have you obtained?

- Certificate
- Diploma
- Undergraduate degree
- Postgraduate degree
- Postdoc

Background Information Continued

* 6. What is your religion?

- Catholic
- Atheist
- Protestant but NOT Pentecostal
- Pentecostal
- Muslim
- Other (please specify)

7. Where do you live?

- In an urban
- In a rural area
- I don't know

* 8. What province do you currently reside in?

- Central
- Muchinga
- Copperbelt
- Northern
- Eastern
- North-Western
- Luapula
- Southern
- Lusaka
- Western

* 9. Please select the category that best describes your profession

- Health care
- Defense forces
- Academia/Teaching
- Religious
- Police service
- Other (please specify)

Cadre of health care professional

* 10. What cadre of health care professional are you:

- Doctor
- Pharmacist
- Nurse
- Environmental health professional
- Physiotherapist
- Public health specialist
- Other (please specify)

Information on COVID-19

* 11. What is your MAIN source of COVID-19 news and updates?

- ◯ Television
- ◯ Radio
- ◯ Newspapers
- ◯ Social media (e.g. Facebook, Whatsapp, Instagram, Tik Tok etc)
- ◯ Friends and family
- ◯ Health care workers
- ◯ My workplace
- ◯ Ministry of Health flyers and brochures
- ◯ Ministry of Health website and social media pages
- ◯ Ministry of Health COVID-19 updates on television or radio
- ◯ Workmates
- ◯ Other (please specify)

* 12. How much do you trust the information you are receiving about COVID-19 vaccination from your MAIN source of information?

- ◯ A great deal
- ◯ A lot
- ◯ A moderate amount
- ◯ A little
- ◯ None at all

* 13. What is your SECOND MAIN source of COVID-19 news and updates?

- Television
- Radio
- Newspapers
- Social media (e.g. Facebook, Whatsapp, Instagram, Tik Tok etc)
- Friends and family
- Health care workers
- My workplace
- Ministry of Health flyers and brochures
- Ministry of Health COVID-19 updates on television or radio
- Ministry of Health website and social pages
- Workmates
- Other (please specify)

* 14. How much do you trust the information you are receiving about COVID-19 vaccination from your SECOND MAIN source of information?

- A great deal
- A lot
- A moderate amount
- A little
- None at all

* 15. How much trust do you have in the statistics being issued to the public of COVID-19 INFECTION RATES?

- A great deal
- A lot
- A moderate amount
- A little
- None at all

* 16. How much trust do you have in the statistics being issued to the public of COVID-19 DEATHS?

- A great deal
- A lot
- A moderate amount
- A little
- None at all

* 17. How much trust do you have in the information being issued to the public regarding COVID-19 VACCINES?

- A great deal
- A little
- A lot
- None at all
- A moderate amount

Medical History

* 18. How would you rate your overall health?

- Very good
- good
- fair
- Poor

* 19. Do you have an underlying chronic medical condition (e.g. hypertension or high blood pressure, diabetes, HIV, cancer or tumour, lung disease etc)

- Yes
- No

* 20. Have you ever tested for COVID-19 Infection?

- Yes
- No

* 21. Have you ever been diagnosed with COVID-19?

- Yes
- No

* 22. Do you have a family member or friend who has ever been diagnosed with COVID-19?

- Yes
- No

* 23. Do you personally know someone who has died from COVID-19 infection?

- Yes
- No

COVID-19 Vaccination Status

* 24. Have you received a first dose of COVID-19 Vaccine?

- Yes
- No

Second dose of vaccine

* 25. Have you received a second dose of COVID-19 vaccination

- Yes
- No

COVID-19 risk and vaccination decision

* 26. My chance of getting COVID-19 in the next few months is great

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 27. I am worried about the likelihood of getting COVID-19

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

28. Complications from Covid-19 are serious

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 29. I will be very sick if I get COVID-19

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 30. Vaccination is a good idea because it makes me less worried about getting COVID-19

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 31. Vaccination decreases my chance of getting COVID-19 and its complications

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 32. I worry that the possible side effects of getting COVID-19 vaccine would interfere with my usual activities

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

33. I am concerned about whether the COVID-19 vaccine actually works (its efficacy)

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 34. I will only take the COVID-19 vaccine if I am given adequate information about it

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

35. I want to wait and see how others react to the vaccine before I take it

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

36. I do not think the vaccine is safe enough

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 37. Natural immunity, without the vaccine, is better in dealing with COVID-19

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 38. I am not sure I am eligible to receive the COVID-19 vaccine

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

39. I am not sure where to get the COVID-19 vaccine

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 40. COVID-19 is a mild disease and does not need a vaccine for prevention

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

41. Getting the COVID-19 vaccine will make me sterile (unable to have children)

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 42. There is NO health facility near me providing the COVID-19 vaccine

- Agree
- Disagree

* 43. Are you pregnant or breastfeeding?

- Yes
- No

Pregnancy and breastfeeding

44. I am pregnant and thus unsure about getting the vaccine

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

45. I am breastfeeding and thus unsure about getting the vaccine

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

* 46. Have you been given enough information about COVID-19 vaccine and whether it is safe when pregnant or breastfeeding? '

- Yes
- No

Other reasons for not taking vaccine and future plans

47. If you have any other reason for not taking the vaccine please indicate it below.

* 48. Do you plan to take the vaccine in future?

- Yes
- No
- Maybe

* 49. Would you be more willing to take the COVID-19 vaccine if your employer gave you time off work to rest once you got it?

- Yes
- No
- I am not currently in employment

* 50. The current vaccine being provided in Zambia is the Astrazeneca vaccine. How much confidence do you have in this particular vaccine brand?

- ◯ Extremely confident
- ◯ Very confident
- ◯ Somewhat confident
- ◯ Not so confident
- ◯ Not at all confident

* 51. Do you have a preferred vaccine brand that you would be more willing to take?

- ◯ Yes
- ◯ No

Vaccine preference

* 52. Of the vaccines listed below, which one would you be willing to receive?

- ☐ Astrazeneca - 2 shots
- ☐ Pfizer-BioNTech - 2 shots
- ☐ Moderna - 2 shots
- ☐ Johnson & Johnson/Janssen - 1 shot
- ☐ Sputnik V - 2 doses
- ☐ Sinopharm - 2 doses

* 53. What would be your main reason for preferring the vaccine you have selected above?

- ◯ I heard it has fewer side effects
- ◯ I heard it is safer
- ◯ I trust the manufacturer more
- ◯ The number of shots required
- ◯ It heard it has no serious adverse effects
- ◯ There has not been any bad reports about it

Reasons for not getting second dose

* 54. What is the main reason you have not yet received a second dose of COVID-19 vaccine?

- ◯ It is not yet available
- ◯ Not planning on getting it due to my experience with the first dose
- ◯ I do not think I need it because one dose is enough
- ◯ Other (please specify)

* 55. Would you recommend the vaccine you received to others?

- ◯ Yes
- ◯ No

Mandatory COVID-19 Vaccine?

* 56. Do you think the COVID-19 vaccine should be mandatory for everyone?

- ◯ Yes
- ◯ No
- ◯ Not sure

Conclusion

57. If you have any other comments please write them below