

Online Appendix. The “Determinants of COVID-19 vaccine acceptance in a high infection-rate country: a cross-sectional study in Russia” questionnaire

Acceptability of COVID-19 vaccine

If a vaccine against COVID-19 infection is available in the market, would you take it? Yes
 No
 Not sure

Perceived benefits of COVID-19 vaccination

	Agree	Disagree
Vaccination helps reduce the risk of virus infection	<input type="checkbox"/>	<input type="checkbox"/>
Vaccination will ease complications of the disease	<input type="checkbox"/>	<input type="checkbox"/>
The vaccine will help to provide long-term immunity	<input type="checkbox"/>	<input type="checkbox"/>

Perceived barriers of COVID-19 vaccination

	Agree	Disagree
I am worried that the possible side-effects of COVID-19 vaccination would interfere with my usual activities	<input type="checkbox"/>	<input type="checkbox"/>
I am concerned about the efficacy, safety of the COVID-19 vaccination because it has not been confirmed and approved by the government	<input type="checkbox"/>	<input type="checkbox"/>
I am concerned of the affordability (high cost of the vaccine) of getting the COVID-19 vaccination	<input type="checkbox"/>	<input type="checkbox"/>
I am concerned about religious reasons (e.g., if the new COVID-19 vaccine is halal)	<input type="checkbox"/>	<input type="checkbox"/>
I believe that the threat of the coronavirus epidemic is exaggerated	<input type="checkbox"/>	<input type="checkbox"/>
I'm afraid of injections	<input type="checkbox"/>	<input type="checkbox"/>
I believe in natural or traditional remedies more than synthetic vaccines	<input type="checkbox"/>	<input type="checkbox"/>
I don't need vaccination because I'm young and healthy	<input type="checkbox"/>	<input type="checkbox"/>
I don't need the vaccine because I do all the right things. I wash my hands and wear a mask and gloves	<input type="checkbox"/>	<input type="checkbox"/>
The best way is to let nature take its course	<input type="checkbox"/>	<input type="checkbox"/>

Cues to action

	Agree	Disagree
I would accept the COVID-19 vaccine if adequate information about its safety and effectiveness are confirmed and approved by the government	<input type="checkbox"/>	<input type="checkbox"/>
I would only take the COVID-19 vaccine if the vaccine is taken by many of the population	<input type="checkbox"/>	<input type="checkbox"/>
I would agree to be vaccinated against COVID-19 only if it was recommended by a trusted doctor	<input type="checkbox"/>	<input type="checkbox"/>
I would only take the COVID-19 vaccine if mandatory vaccination is required at the workplace	<input type="checkbox"/>	<input type="checkbox"/>

Demographics	
Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Age (years)	_____ (years old)
Marital status	<input type="checkbox"/> Single <input type="checkbox"/> Married
Highest education level	<input type="checkbox"/> Secondary and lower <input type="checkbox"/> Vocationalization <input type="checkbox"/> University Others: _____
Urbanicity	<input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Suburban
Smoking status	<input type="checkbox"/> Never smoke <input type="checkbox"/> Former smoker <input type="checkbox"/> Current smoker
Diagnosed with chronic diseases	<input type="checkbox"/> No <input type="checkbox"/> Yes
Occupation category	<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> General worker <input type="checkbox"/> Managerial Others: _____
Healthcare related job	<input type="checkbox"/> No <input type="checkbox"/> Yes
Job requiring interaction with lots of people	<input type="checkbox"/> No <input type="checkbox"/> Yes
Had you been previously (or currently) infected with COVID-19? (laboratory-confirmed positive COVID-19 test)	<input type="checkbox"/> No <input type="checkbox"/> Yes
Monthly average household income	_____ (thousand RUB)
I trust the healthcare system in fighting effectively against the pandemic	<input type="checkbox"/> No <input type="checkbox"/> Yes
How much possibility do you assess yourself COVID-19 infection?	<input type="checkbox"/> 0% <input type="checkbox"/> 10% <input type="checkbox"/> 20% <input type="checkbox"/> 30% <input type="checkbox"/> 40% <input type="checkbox"/> 50% <input type="checkbox"/> 60% <input type="checkbox"/> 70% <input type="checkbox"/> 80% <input type="checkbox"/> 90% <input type="checkbox"/> 100%