8) Validity testing of MRQ V2 using confirmatory factor analysis and reliability testing of MRQ

V2 using Cronbach's alpha (by recruiting another 46 participants to complete the MRQ V2)

Refinement of the MRQ to produce the third version (V3) (based on above steps)

Supplementary materials

Figure S1 A schematic illustrating the eight steps taken in the development of the MRQ

O	
Development of the Medicines Reuse	1) Definition of 'medicines reuse' behaviour according to <i>Target, Action, Context, Time</i> (with reference to a previous elicitation study)
Questionnaire (MRQ)	2) Mapping of the qualitative themes against TPB constructs (with reference to the elicitation study)
	3) Development of questionnaire items to measure TPB constructs (with reference to the elicitation study)
	4) Determination of draft questionnaire's content validity index (working with 11 service users)
	Development of the first version of MRQ (V1) (based on above steps)
	5) Validity testing of MRQ V1 using confirmatory factor analysis and reliability testing of MRQ V1 using Cronbach's alpha (by recruiting 46 participants to complete the MRQ V1)
	6) Test-retest reliability of MRQ V1 using Pearson's correlation (by asking 24 of the recruited participants to re-complete the MRQ V1 after two weeks)
	7) Rewording of the MRQ based on the findings (and working with 10 service users)
	Refinement of the MRQ to produce the second version (V2) (based on above steps)

Box S2: The behaviour of interest defined for the research participants

The aim of this survey is to learn about your beliefs in relation to the concept of reusing medication. We want to know if you would personally consider reusing medication in the future. We define reusing medication as the idea that you would accept for your own personal use a prescription medication that has been previously given out to another patient but then returned to a pharmacy, where the pharmacist has verified that the medication: has been kept by the other patient for less than three months, has more than six months of shelf-life remaining, has not been tampered with, has been kept under normal storage conditions, and has been kept in an original sealed blister pack (i.e. medication strip). When we refer to reusing medication, we are interested in prescribed medication that an individual/patient may use for a long-term illness. The individual/patient would be well enough to make their own healthcare decisions.

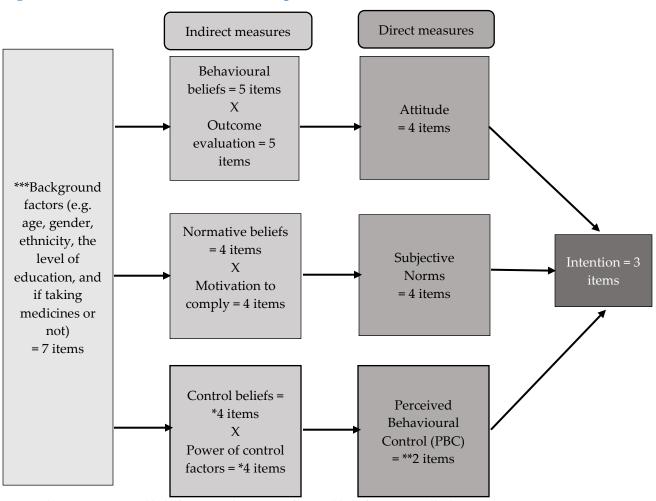


Figure S3 The number of the items developed for each construct of the TPB

^{*} There were 5 control belief items and 5 power of control belief items initially, but one question pair was deleted after validation so that 4 question pairs remained.

^{**} There were 4 PBC items initially but two questions were deleted after validation so that only 2 PBC items remained

^{***} Religion was removed from the final version of the questionnaire

Table S4 Calculating the composite score of *attitude* (via the indirect measures) by multiplying scores on a unipolar scale of behavioural beliefs items by scores on a bipolar scale of outcomes evaluation (MRQ V1)

Behavioural beliefs items	Outcomes evaluation items
a. Reusing sealed, returned blister-pack medication will help me	f. I think for me to contribute toward reducing the
contribute toward reducing the harmful effects of medication on the	harmful effects of medication on the environment is:
environment.	extremely bad -3 -2 -1 0 1 2 3 extremely good
definitely disagree 1 2 3 4 5 6 7 definitely agree	
b. Reusing sealed, returned blister-pack medication will help me	g. I think for me to contribute toward reducing the NHS
contribute toward reducing NHS drug expenditure.	drug expenditure is:
definitely disagree 1 2 3 4 5 6 7 definitely agree	extremely bad -3 -2 -1 0 1 2 3 extremely good
c. Reusing sealed, returned blister-pack medication will result in me	h. I think for me to receive low quality medication is:
receiving low quality medication.	extremely bad -3 -2 -1 0 1 2 3 extremely good
definitely disagree 1 2 3 4 5 6 7 definitely agree	
d. Reusing sealed, returned blister-pack medication will result in me	i. I think for me to receive unsafe medication is:
receiving unsafe medication.	extremely bad -3 -2 -1 0 1 2 3 extremely good
definitely disagree 1 2 3 4 5 6 7 definitely agree	
e. Reusing sealed, returned blister-pack medication will result in me	j. I think for me to receive incorrect medication is:
receiving incorrect medication.	extremely bad -3 -2 -1 0 1 2 3 extremely good
definitely disagree 1 2 3 4 5 6 7 definitely agree	

For each behavioural belief, the belief score on the *extremely bad - extremely good* scale is multiplied by the relevant outcome evaluation score on the *definitely disagree - definitely agree* scale.

Total attitude (indirect measurement) score = $(a \times f) + (b \times g) + (c \times h) + (d \times i) + (e \times j)$.

For example, if the participants responded by choosing the bold numbers as above then,

Total attitude (A) = $(7 \times 3) + (6 \times 2) + (2 \times -2) + (1 \times -3) + (1 \times -3)$

Total (A) = +23. Because there are 5 items, the possible range of total scores is $(7 \times \pm 3) \times 5 = -105 \text{ to } +105$

Total A score = +23 reflects a weak positive attitude toward reusing medication.

Table S5 Calculating the composite score of *subjective norm* (via the indirect measures) by multiplying scores on a bipolar scale of normative beliefs items by scores on a unipolar scale of motivation to comply items (MRQ V1)

Normative belief items	Motivation to comply items
a. Environmentalists would believe that I should reuse sealed,	e. Generally speaking, how much do you want to do what
returned blister-pack medication.	environmentalists believe you should do?
definitely disagree -3 -2 -1 0 1 2 3 definitely agree	not at all 1 2 3 4 5 6 7 very much
b. The pharmaceutical industry would believe that I should reuse	f. Generally speaking, how much do you want to do what the
sealed, returned blister-pack medication.	pharmaceutical industry believes you should do?
definitely disagree -3 -2 -1 0 1 2 3 definitely agree	not at all 1 2 3 4 5 6 7 very much
c. My close friends would believe that I should reuse sealed,	g. Generally speaking, how much do you want to do what close friends
returned blister-pack medication.	believe you should do?
definitely disagree -3 -2 -1 0 1 2 3 definitely agree	not at all 1 2 3 4 5 6 7 very much
d. My family would believe that I should reuse sealed, returned	h. Generally speaking, how much do you want to do what your family
blister-pack medication.	believes you should do?
definitely disagree -3 -2 -1 0 1 2 3 definitely agree	not at all 1 2 3 4 5 6 7 very much
•	

For each normative belief, the belief score on the *definitely disagree - definitely agree* scale is multiplied by the relevant motivation to comply score on the *not at all - very much* scale.

Total subjective norm (indirect measurement) score = $(a \times e) + (b \times f) + (c \times g) + (d \times h)$.

For example, if the participants responded by choosing the bold numbers as above then,

Total subjective norm (SN) = $(7 \times 3) + (-1 \times 1) + (2 \times 6) + (3 \times 7)$

Total (SN) = +53, Because there are 4 items, the possible range of total scores is $(7 \times \pm 3) \times 4 = -84 \text{ to } +84$

Total A score = +53 reflects moderate positive subjective norm toward reusing medicine.

Table S6 Calculating the composite score of *PBC* (via the indirect measures) by multiplying scores on a unipolar scale of control beliefs items by scores on a bipolar scale of power of control factors items (MRQ V1)

Control beliefs items	Power of control factors items
a. I expect that any medication offered to me for reuse will	f. It would make it easier for me to reuse medication if I could see that it was in the
be in the original, sealed, blister-packaging.	original, sealed, blister-packaging.
definitely no 1 2 3 4 5 6 7 definitely yes	strongly disagree -3 -2 -1 0 1 2 3 strongly agree
b. I expect to see evidence that any medication offered to	g. It would make it easier for me to reuse medication if I could see that it had been
me for reuse would have been quality-checked.	quality-checked.
definitely no 1 2 3 4 5 6 7 definitely yes	strongly disagree -3 -2 -1 0 1 2 3 strongly agree
c. I expect to see evidence that any medication offered to	h. It would make it easier for me to reuse medication if I could see that it had been
me for reuse would have been safety-checked.	safety-checked.
definitely no 1 2 3 4 5 6 7 definitely yes	strongly disagree -3 -2 -1 0 1 2 3 strongly agree
d. I expect that any medication offered to me for reuse will	i. It would make it easier for me to reuse medication if I could see that it had more
have more than six months of shelf-life remaining.	than six months of shelf-life remaining.
definitely no 1 2 3 4 5 6 7 definitely yes	strongly disagree -3 -2 -1 0 1 2 3 strongly agree
*e. I expect to be offered some form of reward for reusing	*j. It would make it easier for me to reuse medication if I were offered some form
medication.	of reward.
definitely no 1 2 3 4 5 6 7 definitely yes	strongly disagree -3 -2 -1 0 1 2 3 strongly agree
definitely no 1 2 3 4 3 6 7 definitely yes	Strongty disagree -3 -2 -1 0 1 2 3 strongty agree

For each control belief, the belief score on the *definitely no - definitely yes* scale is multiplied by the relevant power of control factor score on the *strongly disagree - strongly agree* scale.

Total Perceived behavioural Control (indirect measurement) score = $(a \times f) + (b \times g) + (c \times h) + (d \times i) + (e \times j)$.

For example, if the participants responded by choosing the bold numbers as above then,

Total Perceived behavioural Control (PBC) = $(6 \times 2) + (7 \times 3) + (7 \times 3) + (5 \times 1) + (4 \times 0)$

Total (PBC) = +59, Because there are 5 items, the possible range of total scores is $(7 \times \pm 3) \times 5 = -105 \text{ to } +105$

Total PBC score = +59 reflects moderate positive PBC toward reusing medicine.

*Note. This question pair was deleted following validation.

Table S7 Calculating the mean of the item scores to give an overall attitude score (MRQ V1)

Attitude

a. Reusing medication in the future is:

Harmful 1 2 3 4 5 6 7 beneficial

b. Reusing medication in the future is:

good 1 2 3 4 5 6 7 bad.....negative endpoint

c. Reusing medication in the future is:

satisfying (for me) 1 2 3 4 5 6 7 dissatisfying (for me)negative endpoint

d. Reusing medication in the future is:

worthless 1 2 3 4 5 6 7 worthwhile

Attitude items used a mix of positive (a and d) and negative endpoints (b and c).

Items with negative endpoints (b and c), were recoded so that the higher number reflects the positive attitude to the target behaviour. For example, an answer of 7 becomes a score of 1, five become a score of 3, and 4 remains 4.

The mean of the item scores is calculated to give an overall attitude score.

Mean = (4 + 6 (after recoding) + 7 (after recoding) + 7) / 4 = 6

Table S8 Calculating the mean of the item scores to give an overall subjective norm score (MRQ V1)

Subjective norm

a. I would feel under social pressure to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree

b. Most people who are important to me would want me to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree

c. It would be expected of me to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree

d. Most people who are important to me would think that ----- reuse medication in the future:

I should 1 2 3 4 5 6 7 I should not.....negative endpoint

Subjective norm items used a mix of positive (a, b, and c) and negative endpoint (d). Items with negative endpoints (d), were recoded so that the higher number reflect the positive subjective norm to reuse medicines in the future. For example, an answer of 7 becomes a score of 1, 5 becomes a score of 3, and 4 remains 4.

The mean of the item scores is calculated to give an overall subjective norm score.

Mean = (4 + 6 + 7 + 7 (after recoding)) / 4 = 6

Table S9 Calculating the mean of the item scores to give an overall PBC score (MRQ V1)

Perceived behavioural control			
Self-efficacy	Controllability		
a. I am confident that I could reuse medication	**c. The decision to reuse medication		
in the future if I wanted to: strongly disagree 1	in the future is beyond my control:		
2 3 4 5 6 7 strongly agree	strongly disagree 1 2 3 4 5 6 7		
	strongly agree		
b. For me to reuse medication in the future is:	**d. Whether I reuse medication or not		
possible 1 2 3 4 5 6 7 impossible	in the future is entirely up to me:		
negative endpoint	strongly disagree 1 2 3 4 5 6 7		
	strongly agree		

PBC items used a mix of positive (a, c, and d) and negative endpoint (b).

Items with negative endpoints (b), were recoded so that the higher number reflect the positive PBC to reuse medicines in the future. For example, an answer of 7 become a score of 1, 5 become a score of 3, and 4 remains 4.

The mean of the item scores is calculated to give an overall PBC score.

Mean = (4 + 6 (after recoding) + 7 + 7) / 4 = 6

**Note. The two PBC questions relating to 'controllability' question pair were deleted following validation.

Table S10 Calculating the mean of the item scores to give an overall intention score (MRQ V1)

Intention

a. I expect to reuse medication in the future:

strongly disagree 1 2 3 4 5 6 7 strongly agree

b. I want to reuse medication in the future:

strongly disagree 1 2 3 4 5 6 7 strongly agree

c. I intend to reuse medication in the future:

strongly disagree 1 2 3 4 5 6 7 strongly agree

Intention items used positive (strongly disagree - strongly agree) endpoints.

The mean of the item scores is calculated to give an overall intention score.

Mean = (4+6+7)/3 = 5.7

Table S11 Panel responses obtained for the content validity exercise completing before finalising MRQ V1

Content validity question	Item-CVI based on responses	Wording of items beforehand	Rewording following CV
Q1. I understand what this question says: strongly agree (4), agree (3), disagree (2), strongly disagree (1)	11 and 12 were 0.73 (i.e. 3 panel members disagreed they understood the question)	11. Environmentalists think that accept sealed, returned blister-pack medication. I should 1 2 3 4 5 6 7 I should not	11. Environmentalists would believe that reuse sealed, returned blister-pack medication. I should 1 2 3 4 5 6 7 I should not
	understood the question)	12. Pharmaceutical industry think that accept sealed, returned blister-pack medication. I should 1 2 3 4 5 6 7 I should not	12. Pharmaceutical industry would believe that reuse sealed, returned blisterpack medication. I should 1 2 3 4 5 6 7 I should not
		37. What is your gender? a. Male b. Female	37. What is your gender? a. Male b. Female c. Other d. I prefer not to say
Q2. I would be able to remember the information needed in order to answer this question: strongly agree (4), agree (3),	I-CVI for responses ≥0.81 for all 50 items (i.e. 9 or more panel members agreed/strongly agreed they would be able to remember the information needed to		
disagree (2), strongly disagree (1)	answer each question)		

	I-CVI for responses ≥0.81 for
which response to choose:	all 50 items (i.e. 9 or more panel members
strongly agree (4), agree (3),	agreed/strongly agreed they
disagree (2), strongly disagree	would be able to decide
(1)	which response to choose
	for each question)
Q4. This question is relevant to	I-CVI for responses ≥0.81 for
measuring people's beliefs about	•
the concept of medicines reuse:	panel members
	agreed/strongly agreed each
strongly agree (4), agree (3),	question was relevant to
disagree (2), strongly disagree	measuring people's beliefs
(1)	about medicines reuse)

Notes: Item-level Content Validity Index (I-CVI) was determined by calculating the proportion of panel members who gave a rating of 3 or 4 (agree/strongly agree) to each of the four CV questions per item. An I-CVI of \geq 0.81 (9 ratings of 3 or 4 from 11 ratings) was used as the minimum acceptable value for responses to each CV question based on the work of Polit and Beck (2006). Three items not receiving the minimum acceptable value were revised.

Table S12 The testing and modification of the MRQ (V1-3), showing the factor loadings using confirmatory factor analysis (CFA) and the test re-test reliability of the indirect measures of the MRQ items using Pearson's correlation (r)

TPB construct				
Indirect measures Direct measures				
Behavioural beliefs items	Outcomes evaluation items	Composite behavioural belief	Attitude	Intention
Q21. Reusing sealed, returned blister-pack medication will help me contribute toward reducing the harmful effects of medication on the environment.	Q16. I think for me to contribute toward reducing the harmful effects of medication on the environment is: extremely bad -3 -2 -1 0 1 2 3 extremely good	Q21 x Q16	Q1. Reusing medication in the future is: harmful 1 2 3 4 5 6 7 beneficial	Q9. I expect to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree
definitely disagree 1 2 3 4 5 6 7 definitely agree V1 Test-retest reliability (r): 0.523 Became Q19. in MRQ (V3)	V1 Test-retest reliability (r): 0.622 Became Q14. in MRQ (V3)	V1 Factor loading (CFA): 0.830 V2 Factor loading (CFA): 0.525	V1 Factor loading (CFA): 0.960 V2 Factor loading (CFA): 0.934	V1 Factor loading (CFA): 0.889 V2 Factor loading (CFA): 0.949
Q22. Reusing sealed, returned blister-pack medication will help me contribute toward reducing NHS drug expenditure. definitely disagree 1 2 3 4 5 6 7 definitely agree	Q17. I think for me to contribute toward reducing the NHS drug expenditure is: extremely bad -3 -2 -1 0 1 2 3 extremely good	Q22 x Q17 V1 Factor loading	Q2. Reusing medication in the future is: good 1 2 3 4 5 6 7 bad (negative endpoint)	Q10. I want to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree
<i>y y</i> 8		(CFA): 0.831	V1 Factor loading (CFA): 0.966	V1 Factor loading (CFA): 0.970

V1 Test-retest reliability (r): 0.642 Became Q20. in MRQ (V3)	V1 Test-retest reliability (r): 0.579 Became Q15. in MRQ (V3)	V2 Factor loading (CFA): 0.569	V2 Factor loading (CFA): 0.938	V2 Factor loading (CFA): 0.956
Q23. Reusing sealed, returned blister-pack medication will result in me receiving low quality medication. definitely disagree 1 2 3 4 5 6 7 definitely agree	Q18. I think for me to receive low quality medication is: extremely bad -3 -2 -1 0 1 2 3 extremely good	Q23 x Q18 V1 Factor loading	Q3. Reusing medication in the future is: satisfying (for me) 1 2 3 4 5 6 7 dissatisfying (for me) (negative endpoint)	Q11. I intend to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree
V1 Test-retest reliability (r): 0.540 Became Q21. in MRQ (V3)	V1 Test-retest reliability (r): 0.686 Became Q16. in MRQ (V3)	(CFA): 0.760 V2 Factor loading (CFA): 0.777	V1 Factor loading (CFA): 0.724 V2 Factor loading (CFA): 0.845	V1 Factor loading (CFA): 0.939 V2 Factor loading (CFA): 0.895
Q24. Reusing sealed, returned blister-pack medication will result in me receiving unsafe medication. definitely disagree 1 2 3 4	Q19. I think for me to receive unsafe medication is: extremely bad -3 -2 -1 0 1 2 3 extremely good	Q24 x Q19	Q4. Reusing medication in the future is: worthless 1 2 3 4 5 6 7 worthwhile	
5 6 7 definitely agree V1 Test-retest reliability (r): 0.685 Became Q22. in MRQ (V3)	V1 Test-retest reliability (r): 0.649 Became Q17. in MRQ (V3)	V1 Factor loading (CFA): 0.889 V2 Factor loading (CFA): 0.957	V1 Factor loading (CFA): 0.961 V2 Factor loading (CFA): 0.956	

Q25. Reusing sealed, returned blister-pack medication will result in me receiving incorrect medication. definitely disagree 1 2 3 4 5 6 7 definitely agree V1 Test-retest reliability (r): 0.506 Became Q23. in MRQ (V3)	Q20. I think for me to receive incorrect medication is: extremely bad -3 -2 -1 0 1 2 3 extremely good V1 Test-retest reliability (r): 0.750 Became Q18. in MRQ (V3)	Q25 x Q20 V1 Factor loading (CFA): 0.801 V2 Factor loading (CFA): 0.913		
Normative belief items	Motivation to comply items	Composite normative belief	Subjective norm	
Q26. Environmentalists	Q30. Generally speaking,	Q26 x Q30	Q5 . I would feel under	
would believe that I should	how much do you want to		social pressure to reuse	
reuse sealed, returned	do what		medication in the future:	
blister-pack medication.	environmentalists believe		strongly disagree 1 2 3 4	
definitely disagree -3 -2 -1	you should do?		5 6 7 strongly agree	
0 1 2 3 definitely agree	not at all 1 2 3 4 5 6	V1 Factor loading		
V1 Test-retest reliability	7 very much	(CFA): 0.358	V1 Factor loading (CFA):	
(r): 0.216		Q26 and Q30 reworded	0.262	
(2)	V1 Test-retest reliability	in V2	Replaced by the	
	(r): 0.388		following questions in	
Replaced by the following		Q26 x Q30	V2:	
questions in V2:			Q5. Most people whose	
Q26. My doctor would	Replaced by the following	V2 Factor loading	opinions I value, would	
believe that I should reuse	questions in V2:	(CFA): 0.796	approve of my decision	

sealed, returned blister- pack medication definitely disagree -3 -2 -1 0 1 2 3 definitely agree	Q30. Generally speaking, how much do you want to do what your doctor believes you should do?		to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree	
Became Q24. in MRQ (V3)	not at all 1 2 3 4 5 6 7 very much		V2 Factor loading (CFA): 0.759	
	Became Q28. in MRQ (V3)			
Q27. The pharmaceutical industry would believe that I should reuse sealed, returned blister-pack medication. definitely disagree -3 -2 -1	Q31. Generally speaking, how much do you want to do what the pharmaceutical industry believes you should do? not at all 1 2 3 4 5 6	Q27 x Q31	Q6.Most people who are important to me would want me to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree	
0 1 2 3 definitely agree	7 very much	V1 Factor loading (CFA): 0.356	V1 Factor loading (CFA):	
V1 Test-retest reliability (r): 0.438	V1 Test-retest reliability (r): 0.381	Q27 and Q31 reworded in V2 Q27 x Q31	0.924 V2 Factor loading (CFA): 0.914	
Replaced by the following questions in MRQ (V2): Q27. My pharmacist would	Replaced by the following question in MRQ (V2):	V2 Factor loading (CFA): 0.843		
believe that I should reuse sealed, returned blister-pack medication definitely disagree -3 -2 -1 0 1 2 3 definitely agree	Q31. Generally speaking, how much do you want to do what your pharmacist believes you should do?			

Became Q25. in MRQ (V3)	not at all 1 2 3 4 5 6 7 very much Became Q29. in MRQ (V3)			
Q28 . My close friends would believe that I should reuse sealed, returned blister-pack medication. <i>definitely disagree -3 -2 -1 0 1 2 3 definitely agree</i>	Q32. Generally speaking, how much do you want to do what close friends believe you should do? not at all 1 2 3 4 5 6 7 very much	Q28 x Q32	Q7. It would be expected of me to reuse medication in the future: strongly disagree 1 2 3 4 5 6 7 strongly agree	
V1 Test-retest reliability (r): 0.663 Became Q26. in MRQ (V3)	V1 Test-retest reliability (r): 0.571 Became Q30. in MRQ (V3)	V1 Factor loading (CFA): 1.024 V2 Factor loading (CFA): 0.618	V1 Factor loading (CFA): 0.467 V2 Factor loading (CFA): 0.769	
Q29 . My family would believe that I should reuse sealed, returned blisterpack medication. definitely disagree -3 -2 -1 0 1 2 3 definitely agree	Q33. Generally speaking, how much do you want to do what your family believes you should do? not at all 1 2 3 4 5 6 7 very much	Q29 x Q33	Q8. Most people who are important to me would think thatreuse medication in the future: I should 1 2 3 4 5 6	
V1 Test-retest reliability (r): 0.533 Became Q27. in MRQ (V3)	V1 Test-retest reliability (r): 0.517	V1 Factor loading (CFA): 0.871 V2 Factor loading (CFA): 0.623	7 I should not (negative endpoint) V1 Factor loading (CFA): 0.779	

	Became Q31. in MRQ (V3)		V2 Factor loading (CFA): 0.572	
Control beliefs items	Power of control factors	Composite control	Perceived behavioural	
	items	belief	control	
Q34. I expect that any	Q39. It would make it	Q34 x Q39	Q12. I am confident that I	
medication offered to me	easier for me to reuse		could reuse medication in	
for reuse will be in the	medication if I could see		the future if I wanted to:	
original, sealed, blister-	that it was in the original,		strongly disagree 1 2 3 4	
packaging.	sealed, blister-packaging.		5 6 7 strongly agree	
definitely no 1 2 3 4 5 6	strongly disagree -3 -2 -1			
7 definitely yes	0 1 2 3 strongly agree			
		V1 Factor loading		
	V1 Test-retest reliability	(CFA): 0.764	V1 Factor loading (CFA):	
V1 Test-retest reliability	(r): 0.579		0.779	
(r): 0.624		Q34 x Q38	V2 Factor loading (CFA):	
	Became Q38. in MRQ (V2)	V2 Factor loading	0.943	
		(CFA): 0.729		
	Became Q36. in MRQ (V3)			
Became Q32. in MRQ (V3)				
Q35. I expect to see	Q40. It would make it	Q35 x Q40	Q13. For me to reuse	
evidence that any	easier for me to reuse		medication in the future	
medication offered to me	medication if I could see		is: possible 1 2 3 4 5 6	
for reuse would have been	that it had been quality-		7 impossible (negative	
quality-checked.	checked.		endpoint)	
definitely no 1 2 3 4 5 6	strongly disagree -3 -2 -1			
7 definitely ye	0 1 2 3 strongly agree	V1 Factor loading		
		(CFA): 1.007		
V1 Test-retest reliability	V1 Test-retest reliability		V1 Factor loading (CFA):	
(r): 0.586	(r): 0.530	Q35 x Q39	0.878	

Became Q39. in MRQ (V2) Became Q37. in MRQ (V3) Q36. I expect to see evidence that any medication offered to me for reuse would have been safety-checked. definitely no 1 2 3 4 5 6 rationally yes V1 Test-retest reliability (r): 0.596 Became Q39. in MRQ (V2) CFA): 0.957 Q36 x Q41 Q14. The decision to reuse medication in the future is beyond my control: strongly disagree 1 2 3 4 5 6 rationally agree V1 Factor loading (CFA): 0.923 V1 Test-retest reliability (r): 0.596 Replaced by the following questions in the future of the future is beyond my control: strongly disagree 1 2 3 4 5 6 rationally agree V1 Factor loading (CFA): 0.923 V1 Factor loading (CFA): 0.923	
Q36. I expect to see evidence that any medication offered to me for reuse would have been safety-checked. definitely yes V1 Test-retest reliability (r): 0.596 Q41. It would make it easier for me to reuse medication if I could see that it would make it easier for me to reuse medication in the future is beyond my control: strongly disagree 1 2 3 4 5 6 7 strongly agree V1 Factor loading (CFA): 0.923 V1 Factor loading (CFA): 0.258 V2 Factor loading Became Q40. in MRQ (V2) Replaced by the	
evidence that any medication offered to me for reuse would have been safety-checked. definitely no 1 2 3 4 5 6 7 strongly disagree 1 2 3 4 5 6 7 definitely yes V1 Test-retest reliability (r): 0.596 V1 Test-retest reliability (r): 0.558 Decame Q40. in MRQ (V2) easier for me to reuse medication in the future is beyond my control: strongly disagree 1 2 3 4 5 6 7 strongly disagree 1 2 3 4 5 6 7 strongly agree V1 Factor loading (CFA): 0.923 V1 Factor loading (CFA): 0.258 Replaced by the	
medication offered to me for reuse would have been safety-checked. definitely no 1 2 3 4 5 6 7 strongly disagree 1 2 3 4 5 6 7 strongly agree V1 Test-retest reliability (r): 0.596 V1 Test-retest reliability (r): 0.558 Became Q40. in MRQ (V2) medication if I could see that it had been safety-control: strongly disagree 1 2 3 4 5 6 7 strongly agree V1 Factor loading (CFA): 0.258 V2 Factor loading Replaced by the	
for reuse would have been safety-checked. definitely no 1 2 3 4 5 6 7 definitely yes V1 Test-retest reliability (r): 0.596 that it had been safety-checked. strongly disagree -3 -2 -1 0 1 2 3 strongly agree V1 Factor loading (CFA): 0.923 V1 Test-retest reliability (r): 0.558 Q36 x Q40 V2 Factor loading Replaced by the	
safety-checked. definitely no 1 2 3 4 5 6 7 definitely yes V1 Test-retest reliability (r): 0.596 Checked. strongly disagree 1 2 3 4 5 6 7 strongly agree V1 Factor loading (CFA): 0.923 V1 Factor loading (CFA): Q36 x Q40 V2 Factor loading (CFA): 0.258 Replaced by the	
definitely no 1 2 3 4 5 6 $ $ strongly disagree -3 -2 -1 $ $ 7 definitely yes $ $ 0 1 2 3 strongly agree $ $ V1 Factor loading (CFA): 0.923 $ $ V1 Test-retest reliability (r): 0.596 $ $ V1 Test-retest reliability $ $ Q36 \times Q40 $ $ V2 Factor loading $ $ CFA): 0.258 $ $ V2 Factor loading $ $ Replaced by the	
7 definitely yes 0 1 2 3 strongly agree (CFA): 0.923 V1 Test-retest reliability (r): 0.596 V1 Factor loading (CFA): 0.923 V1 Factor loading (CFA): 0.258 V2 Factor loading (CFA): 0.258 Replaced by the	
V1 Test-retest reliability (r): 0.596	
V1 Test-retest reliability (r): 0.596	
(r): 0.596	
Became Q40. in MRQ (V2) V2 Factor loading (CFA): 0.976 Replaced by the	
Became Q40. in MRQ (V2) (CFA): 0.976 Replaced by the	
following questions in	
following questions in	
V2:	
Became Q34. in MRQ (V3) Became Q38. in MRQ (V3) Q14. The decision to	
reuse medication in the	
future is within my	
control:	
strongly disagree 1 2 3 4	
5 6 7 strongly agree	
V2 Factor loading (CFA):	
-0.068	
Therefore deleted from V3	
Therefore weleten from v5	

Q37. I expect that any medication offered to me for reuse will have more than six months of shelf-life remaining. definitely no 1 2 3 4 5 6 7 definitely yes	Q42. It would make it easier for me to reuse medication if I could see that it had more than six months of shelf-life remaining. strongly disagree -3 -2 -1 0 1 2 3 strongly agree	Q37 x Q42 V1 Factor loading (CFA): 0.434	Q15. Whether I reuse medication or not in the future is entirely up to me: strongly disagree 1 2 3 4 5 6 7 strongly agree	
V1 Test-retest reliability (r): 0.539	V1 Test-retest reliability (r): 0.516 Became Q41. in MRQ (V2)	Q37 x Q41 V2 Factor loading (CFA): 0.763	V1 Factor loading (CFA): 0.019 Replaced by the following questions in V2:	
Became Q35. in MRQ (V3)	Became Q39. in MRQ (V3)		Q15. Whether or not I reuse medication in the future is completely up to me: strongly disagree 1 2 3 4 5 6 7 strongly agree V2 Factor loading (CFA): -0.052 Therefore deleted from V3	
Q38. I expect to be offered some form of reward for reusing medication.	Q43. It would make it easier for me to reuse medication if I were	Q38 x Q43		

definitely no 1 2 3 4 5 6 7 definitely yes Test-retest reliability (r): 0.419	offered some form of reward. strongly disagree -3 -2 -1 0 1 2 3 strongly agree Test-retest reliability (r): 0.480	Factor loading (CFA): 0.026 Therefore deleted from V2	
Deleted from MRQ (V2)	Deleted from MRQ (V2)	VZ	
Demographic questions	Deteren from MINQ (12)		
Q44. Are you currently taking a) Yes b) No Became Q42. in MRQ (V2) Became Q40. in MRQ (V3)	g medication for a long ferm	condition?	
Q45. Choose one option that a) 25 or under b) 26-40 c) 41-55 d) 56 or older e) I prefer not to say 	best describes your age range	e?	
Became Q43. in MRQ (V2) Became Q41. in MRQ (V3)			
Q46. What is your gender? a) Male			

b) Female	
c) Other (please specify	
here)	
d) I prefer not to say	
Became Q44. in MRQ (V2)	
Became Q42. in MRQ (V3)	
Q47. What is your religion?	
a) No religion	
b) Christian (including Chur	ch of England, Catholic, Protestant and all other Christian denominations)
c) Muslim	
d) Jewish	
e) Buddhist	
f) Hindu	
g) Sikh	
h) Other	
Pagama O45 in MPO (V2)	
Became Q45. in MRQ (V2)	
Became Q43. in MRQ (V3)	
Q48. Choose one option that	hoot doserihoe vour ethnicitu
<u> </u>	Scottish / Northern Irish/British)
b) White (Irish)	
c) White (Gypsy or Irish trav	zollor)
d) Any other White backgrou	
	roups (White and Black Caribbean)
1 ,	roups (White and Black African)
g) Mixed / Multiple ethnic gr	
1 '	ele ethnic background, please describe here
i) Asian / Asian British (Indi	an)

- j) Asian / Asian British (Pakistani)
- k) Asian / Asian British (Bangladeshi)
- l) Asian / Asian British (Chinese)
- m) Any other Asian background, please describe here
- n) Black / Black British (African)
- o) Black / Black British (Caribbean)
- p) Any other Black / African / Caribbean background, please describe below
- q) Arab
- r) Any other ethnic group, please describe here
- s) I prefer not to say

Became Q46. in MRQ (V2) Became Q44. in MRQ (V3)

Q49. Choose one option that best describes your highest level of educational achievement:

- a) University Higher Degree (e.g. MSc, PhD)
- b) First degree level qualification including foundation degrees, graduate membership of a
- c) professional Institute, PGCE
- d) Diploma in higher education
- e) Teaching qualification (excluding PGCE)
- f) Nursing or other medical qualification not yet mentioned
- g) A Level
- h) Welsh Baccalaureate
- i) International Baccalaureate
- j) AS Level
- k) Higher Grade/Advanced Higher (Scotland)
- l) Certificate of sixth year studies
- m) GCSE/O Level
- n) CSE
- o) Standard/Ordinary (O) Grade / Lower (Scotland)
- p) Other school (including school leaving exam certificate or matriculation)

q) I prefer not to say r) Other
Became Q47. in MRQ (V2) Became Q45. in MRQ (V3)
Q50. If you have any comments or ideas regarding the concept of medication reuse, please share them here:
Became Q48. in MRQ (V2) Became Q46. in MRQ (V3)

Table S13 The internal consistency (Cronbach's alpha) of the direct measures in MRQ V1

TPB CONSTRUCT	CRONBACH'S ALPHA (A)	CRONBACH'S ALPHA BASED ON STANDARDIZED ITEMS	NO. OF ITEMS
Direct measures construct and intention	0.904	0.918	15
Attitude	0.935	0.944	4
Subjective norm	0.706	0.714	4
Perceived behavioural control (PBC) PBC if Q15 deleted from V1 PBC if Q14 and Q15 deleted from V1.	0.303 0.562 0.830	0.366	4
Intention	0.954	0.955	3

Table S14 The internal consistency (Cronbach's alpha) of the direct measures in MRQ V2

TPB CONSTRUCT	CRONBACH'S ALPHA (A)	CRONBACH'S ALPHA BASED ON STANDARDIZED ITEMS	N OF ITEMS
Direct measures construct and intention	0.931	0.930	15
Attitude	0.954	0.956	4
Subjective norm	0.818	0.820	4
Perceived behavioural control (PBC)	0.425	0.425	4
Intention	0.953	0.954	3

Table S15 The summary of the background factors

VARIABLE	FREQUENCY	PERCENTAGE
Gender		
Male	494	49.3%
Female	509	50.7%
Age		
20-24	10	1%
25-29	27	2.7%
30-34	47	4.7
35-39	45	4.5%
40-44	57	5.7%
45-49	73	7.3%
50-54	92	9.2%
55-59	133	13.3%
60-64	163	16.3%
65-69	147	14.7%
70-74	128	12.8%
75-79	60	6.0%
80 or over	20	2.0%
I prefer not to say	1	0.1%
Ethnicity		
White (English / Welsh / Scottish / Northern Irish/British)	927	92.4%
White (Irish)	14	1.4%
White (Gypsy or Irish Traveller)	2	0.2%

Mixed / Multiple ethnic groups (White and Black Caribbean)	3	0.3%
Mixed / Multiple ethnic groups (White and Black African)	1	0.1%
Mixed / Multiple ethnic groups (White and Asian)	5	0.5%
Any other Mixed / Multiple ethnic background	2	0.2%
Asian / Asian British (Indian)	10	1%
Asian / Asian British (Pakistani)	3	0.3%
Asian / Asian British (Bangladeshi)	3	0.3%
Asian / Asian British (Chinese)	1	0.1%
Any other Asian background	2	0.2%
Black / Black British (African)	3	0.3%
Black / Black British (Caribbean)	4	0.4%
Arab	2	0.2%
Other	1	0.1%
I prefer not to say	1	0.1%
Educational level		
University Higher Degree (e.g. MSc, PhD)	117	11.7%
First degree level qualification including foundation degrees, graduate membership of a professional Institute, PGCE	179	17.8%
Diploma in higher education	74	7.4%
Teaching qualification (excluding PGCE)	20	2.0%
Nursing or other medical qualification not yet mentioned	22	2.2%
A Level	129	12.9%
Welsh Baccalaureate	1	0.1%
International Baccalaureate	5	0.5%

AS Level	17	1.7%
Higher Grade/Advanced Higher (Scotland)	21	2.1%
Certificate of sixth year studies	7	0.7%
GCSE/O Level	235	23.4%
CSE	40	4%
Standard/Ordinary (O) Grade / Lower (Scotland)	37	3.7%
Other school (including school leaving exam certificate or matriculation)	32	3.2%
I prefer not to say	27	2.7%
Other	40	4%
Geographical areas		
East of England	83	8.3%
East Midlands	57	5.7%
London	105	10.5%
North East and Cumbria	68	6.8%
Northern Ireland	26	2.6%
North West	125	12.5%
Scotland	86	8.6%
South East	151	15.1%
South West	95	9.5 %
Cymru Wales	55	5.5%
West Midlands	68	6.8%
Yorkshire and the Humber	82	8.2%
Other	1	0.1%

Yes	867	86.4%
No, but I have done in the past	100	10%
No, and I have never taken any medication for my long term condition(s)	36	3.6%