

## SURVEY ON ATTITUDE TO VACCINATION

*INTERVIEWER, READ OUT:* " Hello, my name is \_\_\_\_\_. I conduct a survey on attitude towards vaccination.

### SECTION 1. RESPONDENT SELECTION

**Do you agree to participate in the survey?**

1	Yes	2	No => <i>Stop the interview</i>
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### SECTION 2. TECHNICAL INFORMATION

2.1 Interviewer ID: |\_\_\_\_|\_\_\_\_|\_\_\_\_|\_\_\_\_|

2.2 Date of interview, Day: |\_\_\_\_|\_\_\_\_| Month: |\_\_\_\_|\_\_\_\_|

2.3 Interview start time, Hours: |\_\_\_\_|\_\_\_\_| Minutes: |\_\_\_\_|\_\_\_\_|

2.4 Institution name: \_\_\_\_\_

2.5 Place: \_\_\_\_\_

### SECTION 3. RESPONDENT INFORMATION

*INTERVIEWER, READ OUT:* First, I will ask you a few questions about you.

#### 3.1 *INTERVIEWER, INDICATE THE GENDER OF THE RESPONDENT*

1	Male	2	Female
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3.2 How old are you? \_\_\_\_\_

#### 3.3. What education do you have? *INTERVIEWER, SPECIFY STUDENT OR TEACHER*

1	Student	2	Teacher
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## SECTION 4. KNOWLEDGE OF VACCINATION

**4.1 Please name the ways to prevent dangerous infections such as tuberculosis, hepatitis, diphtheria, measles, etc.?** (*respondents were not prompted with a list of possible answers*)

1	Compliance with the rules of hygiene
2	Physical activity and tempering
3	Healthy food, quality of drinking water
4	Vaccination
5	Immunomodulators
6	Vitamins/dietary supplements
7	There are no such ways
8	Other (INDICATE)

**4.2. Do you know what vaccination is?**

1	Yes	2	No
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*INTERVIEWER, IF RESPONDENT ANSWERED NO, EXPLAIN THAT* Vaccination is the use of prophylactic immunizations in order to induce immunity to the disease, which will prevent infection or reduce its negative effects.

**4.3 What infections do you think can be prevented by vaccination?** (*respondents were not prompted with a list of possible answers*)


**4.4 INTERVIEWER, ASK A QUESTION ABOUT ALL INFECTIONS NOT MENTIONED BY RESPONDENT. Have you heard that /INFECTION NAME/ can be prevented by vaccination?**

	<b>Variant 4.4 (a)</b> Spontaneous mention	<b>Variant 4.4 (b)</b> Mention with hint
Diphtheria		
Measles		
Tetanus		
Hepatitis A		
Hepatitis B		
Mumps		
Poliomyelitis		
Influenza		
Rubella		
Rabies		
Chickenpox		
Human papillomavirus		
Tick-borne encephalitis		
Yellow fever		
Meningococcal infection		

## SECTION 5. ATTITUDE TOWARDS THE VACCINATION

### 5.1 Heard about the National Vaccination Schedule

1	Yes	2	No
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### 5.2. Vaccination fears *(multiple answer choices, a list of possible answers was read out)*

1	Have no fears about vaccination
2	Children receive too many vaccines in the first two years of life
3	Vaccines can cause side effects or complications
4	Vaccines can weaken the immune system of children and adults
5	Vaccines can cause disease
6	The ingredients in vaccines are unsafe
7	The long-term effects of vaccines on humans have not been studied
8	Vaccination is against my religious beliefs
9	The quality of vaccines is low
10	Other

### 5.3. Have you or your relatives/acquaintances encountered illness/medical complications in children caused by vaccination?

1	Yes	2	No
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### 5.4 Have you or your relatives/acquaintances encountered serious illness that could have been prevented by vaccination?

1	Yes	2	No
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### 5.5 There are people/groups of people who refuse to vaccinate themselves and their children. How do you feel about their decision? *(Choose one answer from the list)*

1	I disagree. They risk the health of their children and contribute to the spread of disease
2	I do not care. They are entitled to their opinion
3	I agree with them
4	I haven't heard anything about this
5	Other

### 5.6 Do you trust healthcare providers who vaccinate? *(Choose one answer from the list)*

1	I completely trust them
2	I mostly trust them
3	No opinion
4	I mostly do not trust them
5	I do not trust them at all

**5.7 Do you trust the quality of vaccines?** (*Choose one answer from the list*)

1	I completely trust the quality of vaccines
2	I mostly trust the quality of vaccines
3	No opinion
4	I mostly do not trust the quality of vaccines
5	I do not trust the quality of vaccines at all

**5.8 What information about vaccinations would you like to receive?** (*Choose any answers from the list*)

1	Information about the usefulness and benefits of vaccination
2	Information about additional vaccines
3	Information about vaccine composition
4	Information about contraindications to vaccination
5	Information about complications after vaccination
6	Information about the manufacturers of vaccines
7	Other
8	I have enough information

*INTERVIEWER, PLEASE THANK THE RESPONDENT*