

KNOWLEDGE, ATTITUDE AND PERCEPTION OF SARS COV2 VACCINATION IN PREGNANT WOMEN

Good morning, we are conducting a monocentric study on the opinions of pregnant women about vaccination against SARS-CoV-2.

We would be pleased to assess your perception of SARS-CoV-2 risk, what is your opinion of our preventive measures and what information you would like to receive at this time.

We would be very grateful if you could fill in the short, anonymous and voluntary questionnaire, which takes about 10 minutes.

The data collected will be processed and disseminated in an anonymous and aggregate form, will be recorded solely for the purposes above and processed in accordance with the regulations on the processing of sensitive data for scientific investigation purposes.

Participation in the survey is voluntary.

The data controller is Prof. Raffaele Squeri, Professor of Hygiene at the University of Messina at the following e-mail address: raffaele.squeri@unime.it

1. Are you of legal age?

- No
- Yes

DECLARE

2. Declare

- To want to participate
- Not to participate

3. Declare

to voluntarily take part in the study in question; to have received full explanations regarding the request to participate in the research, in particular on the findings and procedures; to have had sufficient time to carefully read and understand.

PERSONAL DATA

4. Age :

5. Province of residence:

6. Educational qualification (mark only one oval)

- Primary school
- Lower secondary school
- Secondary school
- Degree

- Other

7. What kind of work do you do or did you do? (Mark only one oval)

- Public employee
- Private employee
- Freelancers
- Housewife
- Student
- Other

GENERAL INFORMATION

8. You would describe the area where you live as... (Mark only one oval)

- City Centre
- City suburbs
- Country in province
- Other

9. During pregnancy, did you have a diphtheria-tetanus-pertussis vaccination booster?

- No
- Yes

10. If NO, would you like to be vaccinated?

- No
- Yes

11. During pregnancy, did you have a flu vaccination?

- Yes
- No

12. If NO, would you like to be vaccinated?

- Yes
- No

13. Have you ever contracted COVID?

- Yes - if yes, for more or less than 120 days?
- No

14. Your COVID 19 vaccination status (Mark only one oval)

- First dose
- Secondo dose
- Third dose
- No dose

15. What is your pregnancy status??

- First trimester
- Second trimester
- Third trimester

16. Do you suffer from any pathology?

- No
- Yes

17. If yes, is it one of the following?

- Diabetes
- Hypothyroidism
- Hyperthyroidism
- Hashimoto's thyroiditis
- Gout
- Hypertension
- heart disease
- hypercholesterolaemia
- bronchial asthma
- cystic fibrosis
- renal insufficiency
- kidney stones
- gallstones
- rheumatoid arthritis
- systemic lupus erythematosus
- fibromyalgia
- psoriasis
- ulcerative rectocolitis
- chron's disease
- irritable bowel syndrome
- celiac disease
- multiple sclerosis

18. Do you usually take drugs?

- No
- Yes

ELEMENTS RELATED TO VACCINE KNOWLEDGE

19. Is it essential to take the COVID 19 vaccine?

- Yes
- No

- I don't know

20. How many doses are provided in the vaccination schedule ?

- Two
- Three
- I don't know

21. Is vaccination for pregnant women?

- Yes
- No
- I don't know

22. Is vaccination for breast-feeding women?

- Yes
- No
- I don't know

INFORMATION SOURCES

23. What sources of information did you draw on?

(0= not at all; 4= very frequently)

- Radio and television
- Ministry website
- Social media
- Discussion with family and friends
- Healthcare professionals
- Doctors on duty at vaccination centers
- General practitioners
- Gynecologist
- Midwife
- Neonatologist

GENERAL PROPENSION: WHAT IS YOUR GENERAL PROPENSION AS REGARDING COVID-19 VACCINATION?

24. I would like to be vaccinated for COVID 19:

- Strongly agree

- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

25. I prefer to get natural immunity given by the disease rather than the one obtained with the vaccine:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

26. I would recommend the vaccination to my family and friends:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

27. Before getting vaccination I would wait to see the effect of the vaccine in pregnant and breastfeeding women:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

FACILITATING ELEMENTS: IF YOU HAVE VACCINATED YOURSELF OR
IF YOU ARE THINKING OF DOING IT, WHAT MOTIVATES YOU?

28. Protect me from COVID-19 infection:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

29. If I were vaccinated I could transmit immunity to the child:

- Strongly agree

- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

30. Possibility to access the vaccination for free:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

31. Accessibility of vaccination centers:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

32. Gynecologist's recommendation:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

33. Midwife's recommendation:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

34. Vaccination for COVID carries more benefits than risks:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

35. Vaccinating for COVID 19 is a social responsibility:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement

- Strongly disagree

36. The government has released sufficient data on the safety and efficacy of the vaccine:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

OBSTACLES TO VACCINATION: IF YOU HAVEN'T BEEN VACCINATED
OR ARE POSTPONING YOUR VACCINATION, WHAT MOTIVATES YOU?

37. I'm in the first trimester of pregnancy:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

38. Difficulty in accessing vaccination centers:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

39. The vaccine may be defective or ineffective:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

40. The vaccine was developed and approved quickly, without including pregnant and breastfeeding women in the trials:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

41. The vaccine could have unexpected future effects on my baby:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

42. I fear that it may affect my baby through breastfeeding:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

43. The vaccine was promoted for commercial reasons by pharmaceutical companies:

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagreement
- Strongly disagree

PLACE.....

DATE.....

WOULD YOU LIKE MORE INFORMATION?

CONTACT THE NUMBER.....