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## **Supplementary file 1**

## S-A: Background, knowledge and behavioral information- WHO Survey Tool for Behavioral Insights on COVID-19 (WHO-STBIC)

Items	Original	Adapted
Socio-demography Socio-demography	I	
How old are you?	R	R*
What is your sex?	R	R
How many years of education have you completed?	R	R
Are you a health professional?	R	R
Do you have a chronic illness?	R	R
Where do you live?	R	R
In which district do you live?	R	R
Who lives in your household besides yourself?	R	R

Please assess your private financial situation over the past three months	R	R
COVID-19 personal experience		
To your knowledge, are you, or have you been, infected with COVID-19?(yes, no)	R	R
You have Infected with COVID-19 ( Mild ,Severe)	R	R
How your diseases have been detected (Confirmed by a test, Not confirmed by a test)?	R	R
Do you know people in your immediate social environment who are or have been infected with COVID-19 (yes, no)?	R	R
Do you know someone who died from COVID-19((yes, no)?	R	R
Health literacy (How easy or difficult would you say it is to)		
find the information you need related to COVID-19?	R	N*
understand information about what to do if you think you have COVID-19?	R	R
judge if the information about COVID-19 in the media is reliable?	R	N
understand restrictions and recommendations of authorities regarding COVID-19?	R	R
follow the recommendations on how to protect yourself from COVID-19?	R	R
understand recommendations about when to stay at home from work/school, and when not to?	R	R
follow recommendations about when to stay at home from work/school, and when not to?	R	N
understand recommendations about when to engage in social activities, and when not to?	R	N
follow recommendations about when to engage in social activities, and when not to?	R	R

What do you consider to be your own probability of getting infected with COVID-19? Extremely unlikely, Extremely likely	R	N
How susceptible do you consider yourself to an infection with COVID-19? Not at all susceptible , Very susceptible	R	R
How severe would contracting COVID-19 be for you (how seriously ill do you think you will be)?	R	N
Preparedness and perceived self-efficacy		<u> </u>
Next, we would like to know about you own practices related to COVID-19	R	R
I know how to protect myself from coronavirus (not at all, very much so)	R	R
For me avoiding an infection with COVID-19 in the current situation is (extremely difficult, extremely easy)	R	R
Prevention – own behaviors (During the last 7 days, which of the following measures have you taken to prevent infection from COV	TD-19?) (not at all	, very
much so / Not applicable )		
much so / Not applicable )  Frequently washed my hands with soap and water for at least 20 seconds	R	R
	R R	R R
Frequently washed my hands with soap and water for at least 20 seconds		
Frequently washed my hands with soap and water for at least 20 seconds  Avoided touching my eyes, nose and mouth with unwashed hands	R	R
Frequently washed my hands with soap and water for at least 20 seconds  Avoided touching my eyes, nose and mouth with unwashed hands  Used disinfectants to clean hands when soap and water were not available	R R	R R
Frequently washed my hands with soap and water for at least 20 seconds  Avoided touching my eyes, nose and mouth with unwashed hands  Used disinfectants to clean hands when soap and water were not available  Avoided a social event I wanted to attend	R R	R R R
Frequently washed my hands with soap and water for at least 20 seconds  Avoided touching my eyes, nose and mouth with unwashed hands  Used disinfectants to clean hands when soap and water were not available  Avoided a social event I wanted to attend  Stayed at home from work/school	R R R R	R R R
Frequently washed my hands with soap and water for at least 20 seconds  Avoided touching my eyes, nose and mouth with unwashed hands  Used disinfectants to clean hands when soap and water were not available  Avoided a social event I wanted to attend  Stayed at home from work/school  Used antibiotics to prevent or treat COVID-19	R R R R	R R R R N

Trust in institutions (perceptions) How much confidence do you have that the following can handle the COVID-19 challenge well? (very low	confiden	ice, very
high confidence / not applicable)		
Your family doctor	R	R
Your employer	R	R
Hospitals	R	R
Ministry of Health	R	R
Institute of Public Health /Center for disease Control	R	R
Schools	R	R
Public transportation companies	R	R
Police	R	R
Your church/place of worship	R	R
Testing and tracing: If you have been in contact with someone who tested positive for COVID-19 and have no symptoms yourself – will you	get tested	l if you
have the opportunity?		
I would get tested for sure	R	R
I may not get tested	R	R
I would get tested for sure because		
I want to receive the appropriate care in case of a positive test	R	R
this is my responsibility as a citizen	R	R

I would face penalties if I did not	R	R
I believe this helps stop the spread of COVID-19	R	R
this way I can protect other people	R	R
my friends and family would expect me to get tested	R	R
I may not get tested because		
getting tested would cost money (e.g. transportation, buying the test, taking time off work)	R	R
I do not know where to go to be tested	R	R
it is too time-consuming to get tested	R	R
this will result in loss of income for me due to quarantine while waiting to get the results	R	R
this would result in loss of income for me if I get a positive test	R	R
people might blame me for my actions if I get a positive test	R	R
I might face fines or other penalties if I had violated official COVID restrictions	R	R
I do not trust authorities with my personal data	R	R
I do not believe COVID-19 exists	R	R
there is nothing I can do, even if I get a positive test	R	R
I am not able to self-isolate in case I get a positive test	R	R
I do not think the tests are reliable	R	R
I am worried people will treat me badly if I get a positive test	R	R

I am worried I will get infected at the testing site	R	R
I think testing will be painful	R	R
If you test positive for COVID-19 and are asked to share with health authorities the names of people you have been in contact with the state of the	ith – will you share all ı	names?
I would share all names for sure	R	R
I may not share all names	R	R
I would share all names for sure because		
I believe this helps stop spread of COVID-19	R	R
this is my responsibility as a citizen	R	R
this way I can protect other people	R	R
my friends and family would expect me to do this	R	R
I would face penalties if I did not	R	R
I may not share all names because	I	
I could contact them myself	R	R
I believe this could result in loss of income for those people due to quarantine	R	R
I believe people would blame me for having shared their name	R	R
I do not trust authorities	R	R
my family and friends would expect me not to share names	R	R
I would cause inconvenience for the people whose names I share	R	R

I do not want others to know I tested positive	R	R
Fairness (perceptions), please consider the decisions that are made in your country to reduce spread of COVID-19: (strongly	disagree, strongly agree)	<u> </u>
I think the decisions are fair	R	R
I would convince others that the decisions are right	R	N
Unwanted behavior ,Within the last 2 weeks, have you done the following?(yes, no ,not applicable)	I	_
Avoided people that I thought might infect me, based on their ethnicity	R	R
Exercised less than I did before the pandemic	R	R
Smoked more than I did before the pandemic	R	R
Ate more unhealthy food than I did before the pandemic	R	R
Postponed vaccination for myself or my child and going to the doctor or dentist	R	R
Bought drugs that I heard are good for treating COVID-19	R	R
Bought foods, fruits and vegetables that I heard are good for treating COVID-19	R	R
COVID-19 vaccine, there are currently no vaccines available to prevent COVID-19, but many researchers are working to deve	elop and test vaccines. Ple	ase shar
your position on a potential future COVID-19 vaccine: (strongly disagree, strongly agree)		
I believe a vaccine can help control the spread of COVID-19	R	R
If I knew I had been infected with COVID-19 before, I would not get the vaccine even if it were available	R	R
When everyone else is vaccinated against COVID-19, then I don't have to get vaccinated	R	R
If a COVID-19 vaccine is made available in my country(Iran), my decision of whether or not to get vaccinated would depend	on:	<u> </u>

Country in which the vaccine is produced (not at all, very much so)	R	N
Question explanations ( is developed in Iran or foreign)		11
Recommendation from my family doctor	R	R
Recommendation of the Ministry of Health	R	R
Whether the vaccine has been in use for a long time with no serious side-effects	R	R
Whether the vaccine is used in other countries	R	R
Risk of getting infected with COVID-19 at the time when the vaccine is available	R	R
How easy it is to get the vaccine (e.g. available out-of-hours or in pharmacies)	R	R
Whether the vaccine is free of charge	R	N
Whether a high vaccination uptake would lift restrictions on movement and gathering in groups	R	R
Apart from COVID-19, I think everyone should be vaccinated according to the national vaccination schedule (yes, no, don't know)	R	R
Another suggested form of the question: My decision to get vaccinated depends on the fact that many Iranians have been vaccinated.		K
Remained: R, Not included in shorten through adaption Persian version: N, Modified Item: M		

## S-B: Insights and perceptions of WHO survey tool for behavioral insights on COVID-19 (WHO-STBIC)

Items		Shorten	
	Original	through	
	Original	adaptio	
		n	

Affect (Please choose one option per row below. COVID-19 to me feels)		
close to me, far away from me	R	R
Spreading slowly, Spreading fast	R	R
Something I think about all the time, Something I almost never think about	R	R
Fear-inducing ,Not fear-inducing	R	R
Media hyped, Not media hyped	R	R
Something that makes me feel helpless, Something I am able to combat with my own action	R	N
Stressful, Not stressful	R	R
Trust in sources of information (How much do you trust information about COVID-19 from the following sources?)(	Very little trust , A	great
deal of trust)		
Television /Radio	R	M
Newspapers /News agency	R	M
Health workers (physicians, nurses and other health personnel)	R	M
Social media	R	R
	R	N
Radio	10	11

Institute of Public Health/Center for Disease Control	R	R
Celebrities and social media influencers	R	R
World Health Organization (WHO)	R	R
COVID-19 Hotlines	R	N
National COVID-19 information website	R	N
Use of sources of information (Very little trust, A great deal of trust)		
Television	R	N
Newspapers	R	N
Health workers	R	N
Social media	R	N
Radio	R	N
Ministry of Health	R	N
Institute of Public Health/Center for Disease Control	R	N
Celebrities and social media influencers	R	N
World Health Organization (WHO)	R	N
COVID-19 Hotlines	R	N

National COVID-19 information website	R	N
Frequency of Information (Never Several times a day)		
How often do you seek information about COVID-19?	R	N
<b>Trust in institutions</b> (perceptions) How much confidence do you have that the following can handle the COVID-19 ch	nallenge well? (very	low
confidence, very high confidence / not applicable)		
Your family doctor	R	R
Your employer	R	R
Hospitals	R	R
Ministry of Health	R	R
Institute of Public Health /Center for disease Control	R	R
Schools	R	R
Public transportation companies	R	R
Police	R	R
Your church/place of worship Explanation: (Mosque / Other religious places (church, synagogue))	R	R
Conspiracies (perceptions) Please consider the decisions that are made in your country to reduce spread of COVID-19	9: I think that (no	t true
certainly true)		

many very important things happen in the world, which the public is never informed about certainly	R	N
politicians usually do not tell us the true motives for their decisions	R	R
government agencies closely monitor all citizens	R	N
Resilience (perception) Please consider your experience during COVID-19 pandemic: (strongly disagree, strongly agree)	ee)	
I have a hard time making it through stressful events	R	R
It does not take me long to recover from a stressful event	R	N
It is hard for me to snap back when something bad happens	R	R
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time	– Most of the time -	- More
	– Most of the time -	- More
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time	– Most of the time -	- More
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time than half the time – Less than half the time – Some of the time – At no time)  I have felt cheerful and in good spirits		
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time than half the time – Less than half the time – Some of the time – At no time)  I have felt cheerful and in good spirits  I have felt calm and relaxed	R	N
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time than half the time – Less than half the time – Some of the time – At no time)  I have felt cheerful and in good spirits  I have felt calm and relaxed	R R	N N
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time than half the time – Less than half the time – Some of the time – At no time)  I have felt cheerful and in good spirits  I have felt calm and relaxed  I have felt active and vigorous	R R R	N N N
Well-being, We would now like for you to indicate your general well-being: Over the past 2 weeks(All of the time than half the time – Less than half the time – Some of the time – At no time)  I have felt cheerful and in good spirits  I have felt calm and relaxed  I have felt active and vigorous  I woke up feeling fresh and rested	R R R	N N N

In the event of an outbreak it's appropriate to avoid certain people on the basis of their ethnicity.	R	N
I think that the restrictions currently being implemented are greatly exaggerated.	R	R
The government should be allowed to force people into self-isolation if they have been in contact with someone who was	R	R
infected		
More tests for coronavirus infection should be carried out in the population	R	R
I am worried that the pandemic will have economic consequences for me in the future	R	R
Restrictions (Some restrictions have now been changed related to COVID-19. Please indicate, to which degree you support the	following	
decisions (pandemic transition phase)		
Restrictions on overnight traffic in the city and Travel restrictions to red* and orange* locations for non-native persons	A	A
Seals or serious crimes of guilds that did not comply with the restrictions of activity	A	A
Serious punishment for people who held mass ceremonies during the restrictions	A	A
School closures	A	A
Suspending some jobs	A	A
Teleworking of employees during pandemic	A	A
*Remained: R, added as a new item: A, not included in shorten through adaption Persian version: N, Modified Item: M		<u> </u>

Regions, where is "substantial" (orange) or "high" (red) in COVID-19 transmission, have more than 50 cases per 100,000 population in a seven-day period or a COVID-19 test positivity rate is higher than 5%.