The 7C of Vaccination Readiness Scale

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This measure has been developed to assess predictors of people's intention to (not) get vaccinated. The measure builds on and extends the 5C antecedents of vaccination scale (Betsch et al., 2018, 2019) and integrates insights on the available behavioral/social science of vaccination decisions (e.g., Betsch et al., 2015; Brewer et al., 2017).

In its current form, the measure targets vaccination in general, however, it can also be adapted to address specific vaccinations (e.g., COVID-19). This could be done by adding further information to the instruction on what vaccination participants should think about when answering the questions, or by adapting the text of the questions itself (in the latter case, further validation is advised).

Note:

- (R) indicates questions where the responses need to be recoded before they can be further processed (e.g., averaging the responses for a specific subscale or the overall scale)
- Bold questions indicate that these items should be used in the short (7 item) form
- We recommend excluding the (R)s and unbolding the short form items when presented to participants.
- Items are currently ordered by components, we recommend presenting them in a fully (pre-)randomized order to the participants
- We recommend users to apply a 7-point response scale ranging from "strongly disagree" to "strongly agree".

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Vaccination Readiness

Please also provide the following information about yourself.

Demographic questions

Code	Item	Response		
gender	Gender:	☐ Female	☐ Male	☐ Other
age	Age:	years		
Country	In which country do you currently live?			

The following statements refer to all infectious diseases for which a vaccination is available and recommended by health authorities. Please state how much you agree with each of the statements. Rate the statements from 1 = "strongly disagree" to 7 = "strongly agree".

Items

Code	Item	Response							
		1	2	3	4	5	6	7	
conf_01	Vaccination side effects occur rarely and are not severe for me.								
conf_02	Political decisions about vaccinations are scientifically grounded.								
conf_03	I am convinced the appropriate authorities do only allow effective and safe								
cmpcy_01	vaccines. I do not need vaccinations because infectious diseases do not hit me hard. (R)								
cmpcy_02	Vaccinations are unnecessary for me because I rarely get ill anyway. (R)								

cmpcy_03	I get vaccinated because it is too risky to get infected.				
const_01	I make sure to receive the most important vaccinations in good time.				
const_02	Vaccinations are so important to me that I prioritize getting vaccinated over other				
const_03	things. I sometimes miss out on vaccinations because vaccination is bothersome. (R)				
calc_01	I get vaccinated when I do not see disadvantages for me. (R)				
calc_02	I only get vaccinated when the benefits clearly outweigh the risks. (R)				
calc_03	For each vaccine, I carefully consider whether I need it. (R)				
colr_01	I also get vaccinated because protecting vulnerable risk groups is important to me.				
colr_02	I see vaccination as a collective task against the spread of diseases.				
colr_03	I also get vaccinated because I am thereby protecting other people.				
cmpli_01	It should be possible to exclude people from public activities (e.g., concerts) when they				
cmpli_02	are not vaccinated against a specific disease. The health authorities should use all possible means to achieve high vaccination rates.				

cmpli_03	It should be possible to sanction people who do not follow the vaccination				
consp_01	recommendations by health authorities. Vaccinations cause diseases and allergies that are more serious than the diseases				
consp_02	they ought to protect from. (R) Health authorities knuckle under to the power and influence of pharmaceutical companies. (R)				
consp_03	Vaccinations contain chemicals in toxic doses. (R)				