

Thanks for putting this together Dr. Hemchandran, and I see the amount of effort and technical expertise that has gone into this, but I do second Panel head, I think there is a lot more to this data that we can uncover. And I do think that we can add this to the qualitative to build very meaningful insights, but we need to do more with this data first. Here are a couple of thoughts and suggestions.

1. In **DEFINITELY_NOT_get_vaccinated_if_offered** > the main predictor is **"Believe_that_Covid_is_misused_by_Govt"**, this does correspond to the skeptical segment of people we have seen. Also looking at the 4 variables that are important > covid in last 4 hours- therefore people got COVID and therefore feel the vaccine is not necessary, **Trust_News_and_Info_from_Friends_and_Families_about_Covid** > could be maybe negative social proof, that is fueling misinformation spreading. The **Trust_News_and_Info_from_Doctors_about_Covid** is confusing to me.
2. Can we see the interaction between factors as well? that could serve as predictors? I think I'm also trying to get at the 'pool of predictors' that panel members mentioned.
3. Are there more variables we can look at or are these 46 all the variables in the data set - like is there a variable for compliance behavior? or vaccination belief overall in this data set? I think more variables might be able to get more nuance?
4. While you have looked at the population **DEFINITELY_NOT_get_vaccinated_if_offered** can you also do the analysis for the **PROBABLY_NOT_get_vaccinated_if_offered** as well - as vaccine hesitancy by definition is the 'delay or refusal of vaccination, when available' therefore the probably not is also an essential action tendency to understand more about.
5. Similarly, can you also try can predict the variables for uptake as well - looking at this **DEFINITELY_get_vaccinated_if_offered** group? and maybe see what is different with **PROBABLY_get_vaccinated_if_offered**.
6. This data is from the world - can we look at the countries of interest and see how they stack up with the qualitative understanding - where we have looked at both positive and negative paths/enablers and barriers. For each country - can you take the enablers and barriers we have mapped - from the sheet we create from the LC sheet and test those hypotheses as well?
7. Also, there is a big problem with willingness data - we know that it does not correlate with uptake. Can we look at the actual data of people who have added their vaccination certificates? and compare with the groups that said that they would but have not?

