Supplementary Information for "Cultural-aware Machine Learning based Analysis of COVID-19 Vaccine Hesitancy"

Raed Alharbi^{1,*}, My T. Thai ^{1,*}, Sylvia Chan-Olmsted^{2,+}, and Huan Chen^{3,+}

¹Computer and Information Science and Engineering Department, University of Florida, Gainesville, FL, 32611, USA.

²Department of Media Production, Management, and Technology, University of Florida, Gainesville, FL, 32611, USA.

³Department of Advertising, University of Florida, Gainesville, FL, 32611, USA.

^{*{}r.alharbi, mythai}@ufl.edu

^{+{}chanolmsted, huanchen}@jou.ufl.edu

Supplementary Table 1: List of final hyperparameters.

(A)

Hyperparameter	Value
Number of trees (n_estimators)	184
Maximum depth (max_depth)	12
Number of features considered when looking for best split (max_features)	Auto
The minimum number of samples required to split an internal node	4
The minimum number of samples required to be at a leaf node	4
Bootstrap sampling (bootstrap)	False

(B)

Hyperparameter	Value
Number of trees (n_estimators)	121
Maximum depth (max_depth)	5
Learning rate (learning_rate)	0.02
The minimum number of samples required to split an internal node	5
The minimum number of samples required to be at a leaf node	2
Bootstrap sampling (bootstrap)	True

(C)

Hyperparameter	Value
Number of neighbors (n_neighbors)	5
Algorithm used to compute the nearest neighbors	kd_tree
leaf size	20

(D)

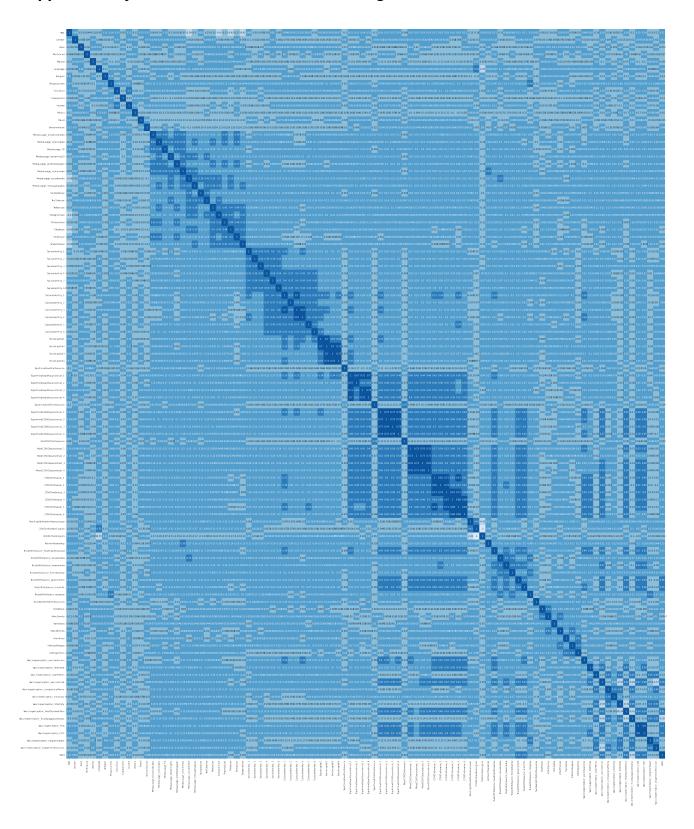
Hyperparameter	Value
kernel type	Linear
Kernel coefficient	Scale

(E)

Hyperparameter	Value
Width of the decision prediction layer (n_d)	9
Width of the attention embedding for each mask (n_a)	10
Coefficient for feature reusage in the masks (gamma)	1.2

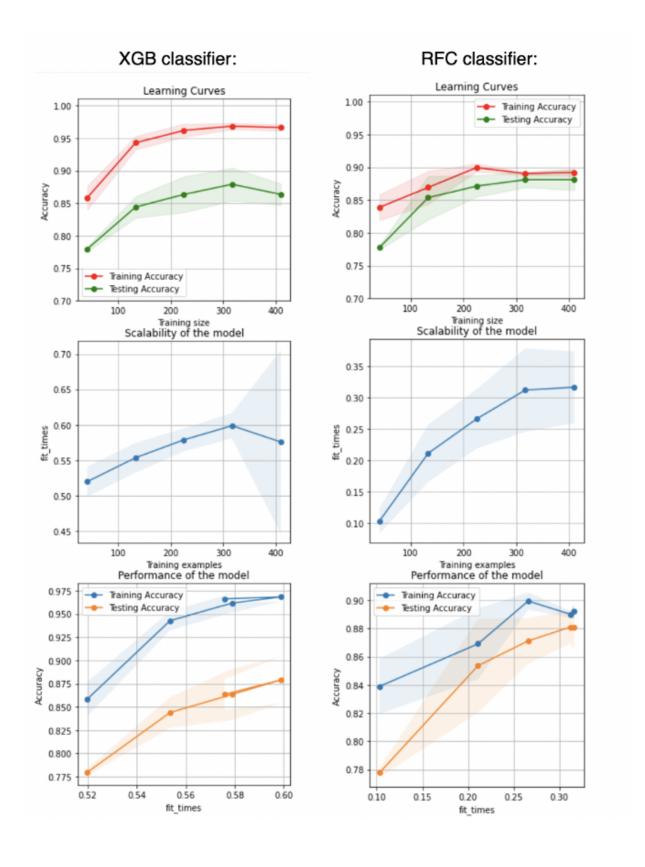
The hyperparameters for the top two models in terms of the accuracy performance. (A) The random forest classifier and (B) The extreme gradient Boosting model. (C) k-nearest neighbors. (D) Support vector machine. (E) Attentive Interpretable Tabular Learning.

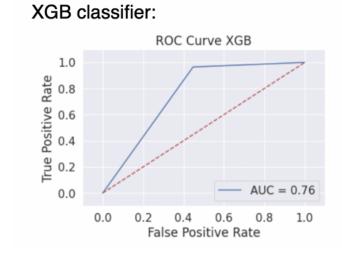
Supplementary Grid matrix 1: correlation among features.

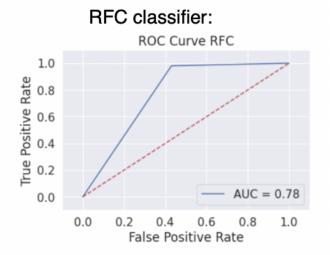


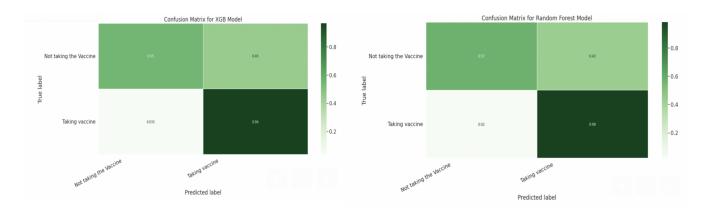
We construct a correlation matrix, a filtering strategy, to assess the relevance of the features to the target variable and then exclude the attributes that are poorly correlated with the target.

Supplementary Figure 1: Models Correctness.



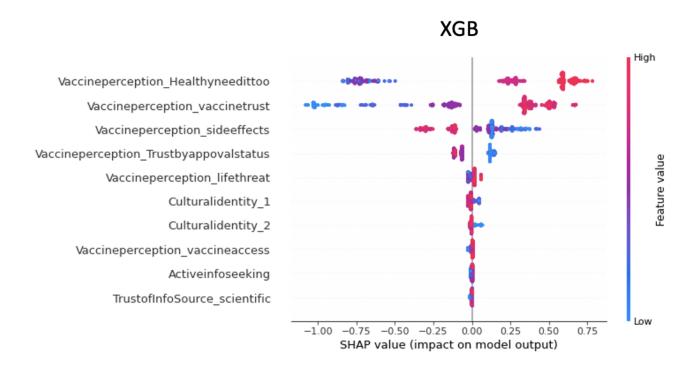


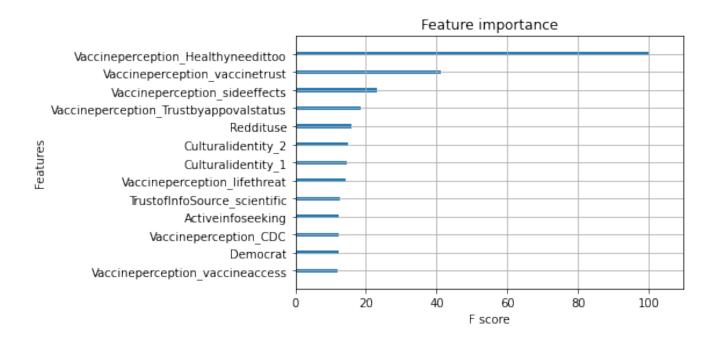




The first row indicates that both XGB and RFC are in developmental areas, indicating that the score is still relatively high and that the validation score might be enhanced with further training samples. The charts in the second row illustrate how long the models require to train with varying amounts of training data. Next, the third-row plots illustrate the amount of time needed to train the models for various training sizes. Finally, the fourth row shows the receiver operating characteristic curve for both the XGB and RF models, where the RF AUC score (0.78) outperforms the XGB AUC score (0.76).

Supplementary Figure 2: XGB explanations.





The interpretation of the XGB model using SHAP and the Scikit-learn technique for determining the feature significance. The first plot depicts the most important factors influencing a person's decision, with features listed according to their contribution to the final prediction. The second plot depicts the feature's average gain over all splits, with a high F score indicating the most significant values. We can observe overlap among the important features produced by the two methods.

Supplementary Table 2: Features Description in details.

Constructs/Variables Scale		Constructs/Variables			
	Cultural factors	Non-l	English language health/medical info source		
	A cultural group is a collection of individuals who share a core set of beliefs, patterns of behavior, and values (e.g., Hispanic and Latino Americans, African Americans, Asian Americans, etc.). (1-5 scale from strongly disagree to strongly	Use of non -English health/medical information source	Do you use any health/medical information sources in a language that you are familiar with other than English? (Dichotomous Yes/No variable with value 1 and 2) 1- No		
	agree on six scale items below to be averaged. To what degree do you agree with following statements about your cultural group?		2- Yes If selected "Yes" for information source (5-point scale. See below for value codes)		
Social identity ¹	1- When someone criticizes this group, it feels like a personal insult. 2- I'm very interested in what others think about this group. 3- The limitations associated with this group apply to me also. 4- When I talk about this group, I usually say "we" rather than "they." 5- I have a number of qualities typical of members of this group.	Importance of non-English health/medical Information Source	How important are these non-English health/medical sources in informing you? 1- Not at all important 2- Slightly important 3- Moderately important 4- Very important 5- Extremely important If selected "Yes" for information source (5-point scale. See below for value codes)		
	6- When someone praises this group, it feels like a personal compliment. To what degree do you agree with following statements about your ethnicity?	Accessibility of non-English health/medical	How easy is it for you to access these non-English health/medical information sources?		
	(1-5 scale from strongly disagree to strongly agree on six scale items below to be averaged) 1- I feel positively about my ethnicity 2- If I could choose, I would prefer to be of the same	information source	1- Extremely difficult 2- Somewhat difficult 3- Neither easy nor difficult 4- Somewhat easy 5- Extremely easy If selected "Yes" for information source		
Cultural identity ²	2- It count choose, I would prefet to be of the same ethnicity 3- I know what my ethnicity means to me 4- I have experienced things that reflect my ethnicity such as eating food, listening to music, and watching movies 5- I have learned about my ethnicity by doing things such as reading (books, magazines, newspapers), searching the internet, or keeping up with current events 6- I have participated in activities that have taught me	Quality of non-English health/medical information source	(5-point scale. See below for value codes) In your opinion, the quality of the information from these non-English health/medical info sources is: 1- Very low 2- Somewhat low 3- Neither low nor high 4- Somewhat high 5- Very high		
	about my ethnicity		Primary COVID information sources Imagine that you had a strong need to get information		
	Social capital ⁵ How much do you agree with following statements? (1-5 scale from strongly disagree to strongly agree on four scale times below to be averaged)		about COVID-19 related topics. Where would you go first? (Choose one. Corresponding value codes below) 1- News websites 2- TV 3- Search engines (e.g., Google)		
Social capital	1- I have people I trust to help me 2- There is someone I can turn to for advice 3- I have people to turn to for resources if I need them 4- There are people who would support me emotionally	Top COVID information source (Top of Mind) ⁴	Social media Health care provider Friends/family/acquaintances Scientific/medical websites or journals Print media like newspapers/magazines Radio		
Hea	Alth-COVID information sources and trust Primary health/medical info sources The most recent time you looked for information about health/medical related information, where did you go first?		10 - Podcasts 11 - Online forums 12 - Government/health agency websites/posts 13 - Religious leaders/organizations How much do you agree with the following statements		
Most recent top-of-mind health/ medical information source ^{4,5}	(Choose one, corresponding value codes below) 1- News websites 2- TV 3- Search engines (e.g., Google) 4- Social media 5- Health care provider 6- Friends/family/acquaintances 7- Scientific/medical websites or journals 8	Trust of the top COVID information source ⁶	about (selected choice) as a COVID information source? (1-5 scale from strongly disagree to strongly agree on four scale times below to be averaged) 1- I trust it 2- I rely on it 3- It is honest 4- It is safe Please check all the sources that you have used to		
	8- Print media like newspapers/magazines 9- Radio 10- Podcasts 11- Online forums 12- Government/health agency websites/posts 13- Religious leaders/organizations		Please check all the sources that you have used to gather COVID related information. (The total number of items checked would be the value for this variable) 1- News websites		
Trust of most recent top-of- mind primary health/medical Information source ⁶	How much do you agree with the following statements about (the selected choice) as a health/medical information source? (1-5 scale from strongly disagree to strongly agree on four scale items below to be averaged) 1-1 trust it 2-1 rely on it 3-1 t is honest 4- It is safe	Number of COVID information sources	2- TV 3- Search engines (e.g., Google) 4- Social media 5- Health care provider 6- Friends/family/acquaintances 7- Scientific/medical websites or journals 8- Print media like newspapers/magazines 9- Radio 10-Podcasts 11- Online forums 12- Government/health agency websites/posts 13- Religious leaders/organizations		

COVID info	Scale seeking behavior and trust/perceptions (continue)
	How much do you agree with the following statements
	about (selected choice) as a COVID-19 information source?
Trust of	Source.
primary COVID information source	(1-5 scale from strongly disagree to strongly agree on
(volume/experience) ⁷	four scale times below to be averaged)
	1- I trust it
	2- I rely on it3- It is honest4- It is safe
	Please write down the "specific" source/media outlet that you use the most to gather COVID related
Specific COVID	information (e.g., Facebook, CNN, CDC website,
information source	county health website, my physician, etc.).
	(Text entry to be recoded and analyzed)
	Think about the COVID-19 related information you have
	received thus far, what percentage of it is in English/non-English?
Non-English	in English for English.
COVID information	Control of the Contro
source usage (percentage)	(Estimated percentage of English & non-English information source, totaling 100%)
(percentage)	information source, totaling 100 %)
	1- English (actual %)
	2- Non-English (actual %) How much do you agree with the following statements
	regarding the COVID-19 vaccine information that you
	have received thus far?
	(1-5 scale from strongly disagree to strongly agree on
	the following six scale items to be averaged)
Value of received COVID Information ⁸	
COVID Information	1- It is useful
	2- It is valuable 3- It helped me to learn about the vaccine
	4- It influenced me to be more involved in self-health care
	5- It helped me to learn about vaccination
	risks/benefits 6- It helped in asking my healthcare givers
	intelligent questions
	Media Usage On average in any given week, how often do you use
	the following media/platforms?
	[5-point scale from None at all/very little (1) to
	A great deal (5)]
	1- Broadcast radio
Media usage9	2- Online radio (streaming)
	3- Broadcast/cable TV 4- Online TV (streaming)
	5- Print newspaper
	6- Online news sites 7. Social modic in general
	7- Social media in general 8- Messaging apps
	On average in any given week, how often do you use the following social media?
	[5-point scale from None at all/very little (1) to
	A great deal (5)]
	1- Facebook
Social media usage ⁹	2- YouTube 3- Twitter
	4- Instagram
	5- Pinterest
	6- TikTok 7- Reddit
	9- Snapchat
	COVID Vaccina status and hasitanas
•	COVID Vaccine status and hesitance
	Have you received the COVID-19 vaccine (either one or
	two doses)?
Vaccination etatus	two doses)?
Vaccination status	
Vaccination status	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No
Vaccination status	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes
Vaccination status	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No
Vaccination status	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes
Vaccination status	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes (If yes to vaccination status)
	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes (If yes to vaccination status)
Vaccination status Vaccine eagerness	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes (If yes to vaccination status) (Corresponding value codes below) When did you receive your COVID-19 vaccine?
	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes (If yes to vaccination status) (Corresponding value codes below) When did you receive your COVID-19 vaccine? 1- As soon as it was available to me
	two doses)? (Dichotomous variable with 1 indicating no and 2 yes) 1- No 2- Yes (If yes to vaccination status) (Corresponding value codes below) When did you receive your COVID-19 vaccine?

Constructs/Variables	Scale
	COVID Vaccine status and hesitance (continue)
	Which COVID-19 vaccine did you receive?
Vaccine type	(Corresponding value codes below)
, accine type	1- Johnsons & Johnson / Janssen
	2- Moderna 3. Privar BioNtoch
	3- Pfizer-BioNtech (If no to vaccination status)
	Are you currently willing to receive the COVID-19 vaccine?
Vaccine willingness	1- No
	2- Yes
	3- Not sure
	Have you ever been tested positive for COVID-19?
Positive COVID test	
test	1- No 2- Yes
	Has any member of your family been infected by COVID-19?
Infect family	
	1-No 2-Yes
	Did you experience death of any family member/relative due to COVID-19?
Family loss	1- No
	1- No 2- Yes
	Did you experience death of a friend due to COVID-19?
Friend loss	1- No
	2- Yes
	Do you have any colleagues who have been infected by COVID-19?
Infect colleague	1- No
	2- Yes
	Did you experience death of a colleague due to COVID-19?
Colleague loss	1- No
	2- Yes
	Please indicate the degree to which you agree with following statements.
	(1-5 scale from strongly disagree to strongly agree. See specific variable names at the end of each statement)
	see speeme variable names at the old of each statement)
	- I have easy access to COVID-19 vaccine (Vaccine Access) I think the COVID-10 view is a corious threat to my life (Life Threat)
	- I think the COVID-19 virus is a serious threat to my life (Life Threat)
	- The possible side effects of the COVID-19 vaccine prevent me
	from receiving the vaccine (Side Effect Concern)
	- I trust the COVID-19 vaccine (Vaccine Trust)
	- Many of the COVID-19 related conspiracy theories out there are worth considering (Conspiracy Theory Tendency)
	- I trust that those who have had the virus are immune to
(various aspects)	the COVID-19 virus (Immunity Perception)
(various aspects)	- I believe that the COVID-19 vaccine causes fertility
	issues (Fertility Hesitance)
	- I think that COVID-19 vaccine is necessary for healthy people as well (Healthy Vaccine Needs)
	- I do not trust the COVID-19 vaccine because of its current FDA approval status (Trust of Vaccine Approval)
	- I trust the FDA (FDA Trust)
	- I trust the CDC (CDC Trust)
	- My religious beliefs affect my decision to receive the COVID-19 vaccine (Religious Hesitance)
	- I believe there may be possible interaction between the
	vaccine and long-term health issues (Long-term Health Hesitance)
	Trust of COVID Info Sources How much do you trust the following sources in giving
	you accurate, reliable COVID related information?
	[1-5 point scale from Strongly distrust (1) to Strongly
	trust (5) of seven major sources below]
Trust of COVID	1- Doctors/nurses/medical professionals
information course (various sources)	2- Social media 3- News media
(.a.rous sources)	4- Friends and family members
	5- Government/health agencies and their publications/websites
	6- Scientific/medical research institutions
	and their publications/websites
	7- Religious leaders/organizations

Constructs/Variables	Scale	Constructs/Variables	Scale
	Demographics		Demographics (continue)
	What is your age? (Value codes: 18=1, etc.)		(If unemployed is not selected
Age			from Employment question)
	Single selection ranging from 18 – 60 over (1-43)		
	What is your marital status?		Where is your primary work location?
		Work location	
	1- Married	Work location	1- Home
Marital status	2- Widowed		2- Office
	3- Divorced		3- Other public location
	4- Separated		4- Hybrid
	5- Never married		5- Other (please specify)
	6- Prefer not to say		Have you traveled locally or internationally in the past 6 months?
	What is your gender?		1- Local only
	1- Male	Travel	2- International only
Gender	2- Female		3- Both locally and internationally
	3- Non-binary		4- I did not travel in the past 6 months
	4- Prefer not to say		Are there any members above the age of 60 residing in your household?
	What is your race?		The there any members above the age of oo residing in your nousehold.
	What is your race.	Household	1- No
	1- White/Caucasian		2- Yes
	2- Black or African American		Generally speaking, do you usually think of yourself as a
_	3- Hispanic/Latino		Republican, a Democrat, an Independent, or something else?
Race	4- Asian		
	5- American Indian or Alaska Native	Politics	1- Republican
	6- Native Hawaiian or Pacific Islander		2- Democrat
	7- Biracial		3- Independent
	8- Other (please specify)		4- Something else
Multiracial	No = 1		Assessed categorically by following measures
Iviuitii aciai	Yes =2		
	What is your primary spoken language?		1- Less than \$10,000
			2- \$10,000 to \$19,999
	1- English		3- \$20,000 to \$29,999
	2- Spanish		4- \$30,000 to \$39,999
	3- Portuguese	Income	5- \$40,000 to 49,999
	4- French and French Creole		6- \$50,000 to \$59,999
	5- Chinese (including Mandarin,		7-\$60,000 to 69,999
Language	Cantonese, and other varieties)		8- \$70,000 to \$79,999 9- \$80,000 to 89,999
	6- Tagalog/Ilocano 7- Vietnamese		9- \$80,000 to \$9,999 10- \$90,000 to \$99,999
	8- Korean		11- 100,000 <i>to</i> \$149,999
	9- Japanese		12- \$150,000 or more
	10- Bengali/Gujarti/Urdu/Hindi/Kannada/		What is the highest level of school you have completed
	Punjabi/Tamil		or the highest degree you have received?
	11- African languages		1- Less than high school degree
	12- Other (please specify)		2- High school graduate (high school diploma or equivalent
	What do you identify as your religious affiliation?		including GED)
		Education	3- Some college but no degree
	1- Protestant		4- Associate degree in college (2-year)
	2- Catholic		5- Bachelor's degree in college (4-year)
	3- Mormon		6- Master's degree
	4- Jewish		7- Doctoral degree
Religion	5- Orthodox Christian		8- Professional degree (JD, MD)
	6- Unitarian/Universalist		How would you best describe your current employment status?
	7- Muslim		(Corresponding value codes below)
	8- Hindu		
	9- Buddhist		1- Employed
	10- Atheist or Agnostic	Employment	2- Unemployed (including stay-home homemakers)
	11- Other religion or unaffiliated		3- Self-employed 4- Retired
	Please indicate the degree to which you		4- Retired 5- Student
	consider yourself to be religious		5- Student 6- Disabled
	(5-point scale with the value codes below)		7- Other (please specify)
	(3-point scale with the value codes below)	-	- Other (please specify) - Respondent ID
Religiousness	1- Not religious at all		- Survey completion time
	2- Slightly religious	Additional survey	- Time spent completing survey
	3- Moderately religious	based variables	- Respondent IP address
	4- Religious	l line in the second	- Respondent location (location latitude)
	5- Very religious		- Respondent location (location longitude)
	, , o		1

To fully comprehend the underlying analysis and the dataset, we present the above tables, which explain the features characteristics and their associated features value scales.

Supplementary Table 3: Statistical information in detail about the proposed dataset.

Demographic Type		Frequency	Perecent %
	Male	589	28.7
Gender	Female	1435	70.0
Genuei	Non-binary	20	1.0
	Prefer not to say	6	.3
	Black or African American	716	34.9
Race	Hispanic/Latino	991	48.3
	Asian	343	16.7
	18-24	559	27.3
	25-34	608	30.0
A	35-44	363	17.7
Age	45-54	228	11.1
	55-59	101	4.9
	60 and over	191	9.3
	Less than high school degree	80	3.9
	High school diploma or equivalent	599	29.2
	Some college but no degree	511	24.9
Edmontion	Associate degree in college (2-year)	241	11.8
Education	Bachelor's degree in college (4-year)	439	21.4
	Master's degree	133	6.5
	Doctoral degree	28	1.4
	Professional degree (JD,MD)	19	.9
	Less than \$10,000	371	18.1
	\$10,000 to \$19,999	213	10.4
	\$20,000 to \$29,999	319	15.6
	\$30,000 to \$39,999	243	11.9
	\$40,000 to \$49,999	195	9.5
Income	\$50,000 to \$59,999	221	10.8
Hicome	\$60,000 to \$69,999	105	5.1
	\$70,000 to \$79,999	124	6.0
	\$80,000 to \$89,999	49	2.4
	\$90,000 to \$99,999	65	3.2
	\$100,000 to \$149,999	91	4.4
	\$150,000 or more	54	2.6
	Republican	262	12.8
Political affiliation	Democrat	1117	54.5
i unucai aiiiiatiuli	Independent	504	24.6
	Something else	167	8.1

References

- 1. Greene, S. Social identity theory and party identification. Soc. science quarterly 85, 136–153 (2004).
- **2.** Umaña-Taylor, A. J., Yazedjian, A. & Bámaca-Gómez, M. Developing the ethnic identity scale using eriksonian and social identity perspectives. *Identity: An international journal theory research* **4**, 9–38 (2004).
- **3.** Williams, D. On and off the net: Scales for social capital in an online era. *J. computer-mediated communication* **11**, 593–628 (2006).
- **4.** Somera, L. P., Lee, H.-R., Badowski, G. & Cassel, K. Health information seeking, source trust, and culture: a comparative analysis of health information trends and needs between guam and the united states. *J. health communication* **21**, 469–478 (2016).
- **5.** Rodrigues, U. M. & Xu, J. <? covid19?> regulation of covid-19 fake news infodemic in china and india. *Media Int. Aust.* **177**, 125–131 (2020).
- **6.** Kim, T., Barasz, K. & John, L. K. Why am i seeing this ad? the effect of ad transparency on ad effectiveness. *J. Consumer Res.* **45**, 906–932 (2019).
- 7. Jung, M., Lin, L. & Viswanath, K. Associations between health communication behaviors, neighborhood social capital, vaccine knowledge, and parents' h1n1 vaccination of their children. *Vaccine* 31, 4860–4866 (2013).
- **8.** Huh, J., DeLorme, D. E. & Reid, L. N. The information utility of dtc prescription drug advertising. *Journalism & Mass Commun. Q.* **81**, 788–806 (2004).
- **9.** Chan-Olmsted, S., Rim, H. & Zerba, A. Mobile news adoption among young adults: Examining the roles of perceptions, news consumption, and media usage. *Journalism & Mass Commun. Q.* **90**, 126–147 (2013).