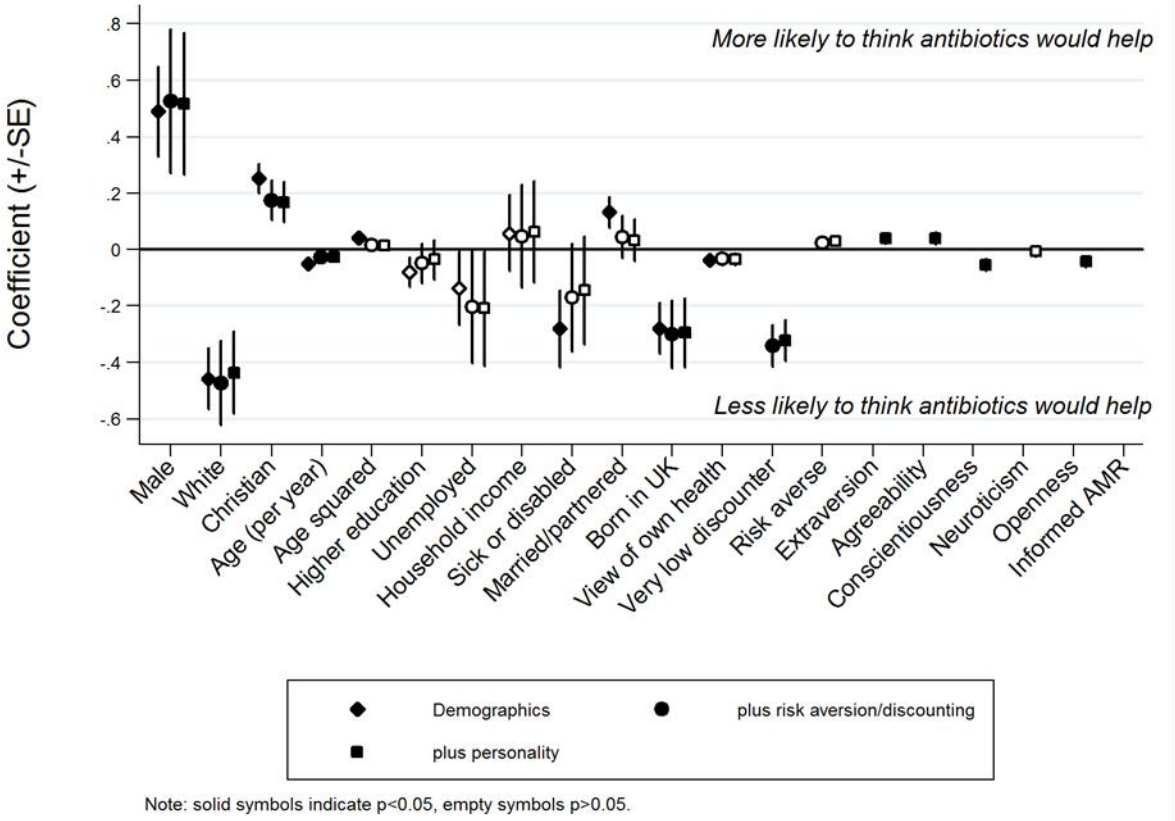
Supplement 2: Regression Models

Table 2.1. Independent predictors of 'Think antibiotics would help Health State A'

	'Think antibiotics would help Health State A' (ordered probit) (estimate (SE))			
	Model (1)	Model (2)	Model (3)	Model (4)
Male	0.489***	0.526**	0.517**	0.366***
	(0.160)	(0.255)	(0.251)	(0.066)
White	-0.458***	-0.473***	-0.435***	-0.392***
	(0.108)	(0.149)	(0.145)	(0.117)
Christian	0.251***	0.175**	0.169**	
	(0.052)	(0.071)	(0.072)	
Age (per year)	-0.051***	-0.029**	-0.027**	-0.021*
	(0.010)	(0.013)	(0.013)	(0.012)
Age-squared/100	0.041***	0.017	0.016	0.013
	(0.019)	(0.014)	(0.014)	(0.013)
Higher-education	-0.079	-0.049	-0.035	
	(0.052)	(0.070)	(0.070)	
Unemployed	-0.137	-0.203	-0.208	
	(0.129)	(0.200)	(0.202)	
Equivalised Household Income (per EUR 100,000)	0.042	0.035	0.046	
	(0.098)	(0.131)	(0.130)	
Sick/disabled	-0.280**	-0.171	-0.144	
	(0.136)	(0.192)	(0.192)	
Married/Partnered	0.133**	0.045	0.033	
	(0.055)	(0.075)	(0.075)	
UK-born	-0.279***	-0.300**	-0.294**	-0.308***
	(0.090)	(0.120)	(0.122)	(0.113)
Own self-rated health (0-10)	-0.037***	-0.034	-0.035	
	(0.014)	(0.022)	(0.022)	
Very low discounter		-0.341***	-0.322***	-0.323***
		(0.074)	(0.074)	(0.071)
Risk-averse		0.023	0.030*	0.021
		(0.015)	(0.016)	(0.014)
Extraversion			0.041**	
			(0.020)	
Agreeableness			0.041*	
			(0.021)	
Conscientiousness			-0.056**	
			(0.022)	
Neuroticism			-0.006	
			(0.018)	
Openness			-0.043**	
			(0.021)	
N	1816	1000	1000	1107
AIC	5190.634	2832.793	2824.531	3147.283
BIC	5284.209	2926.04	2942.317	3202.387

Notes: 1. Here and throughout the appendix, *, ** and *** denote statistical significance at the 10%, 5% and 1% levels, respectively; 2. Model (1) considers standard demographics and respondent characteristics. Model (2) additionally adjusts for discounting and risk aversion – variables we could only construct for a sub-sample, as explained in the manuscript. Model (3) also adjusts for personality traits – coefficients for demographic and respondent characteristics in models (2) and (3) therefore correspond to residual effects which are not mediated through their impact on discounting, risk aversion and personality; 3. Interaction term for 'white and male' included to improve model specification, but it is not statistically significant; 4. Model specification was tested using link tests (p>0.1 for all models)

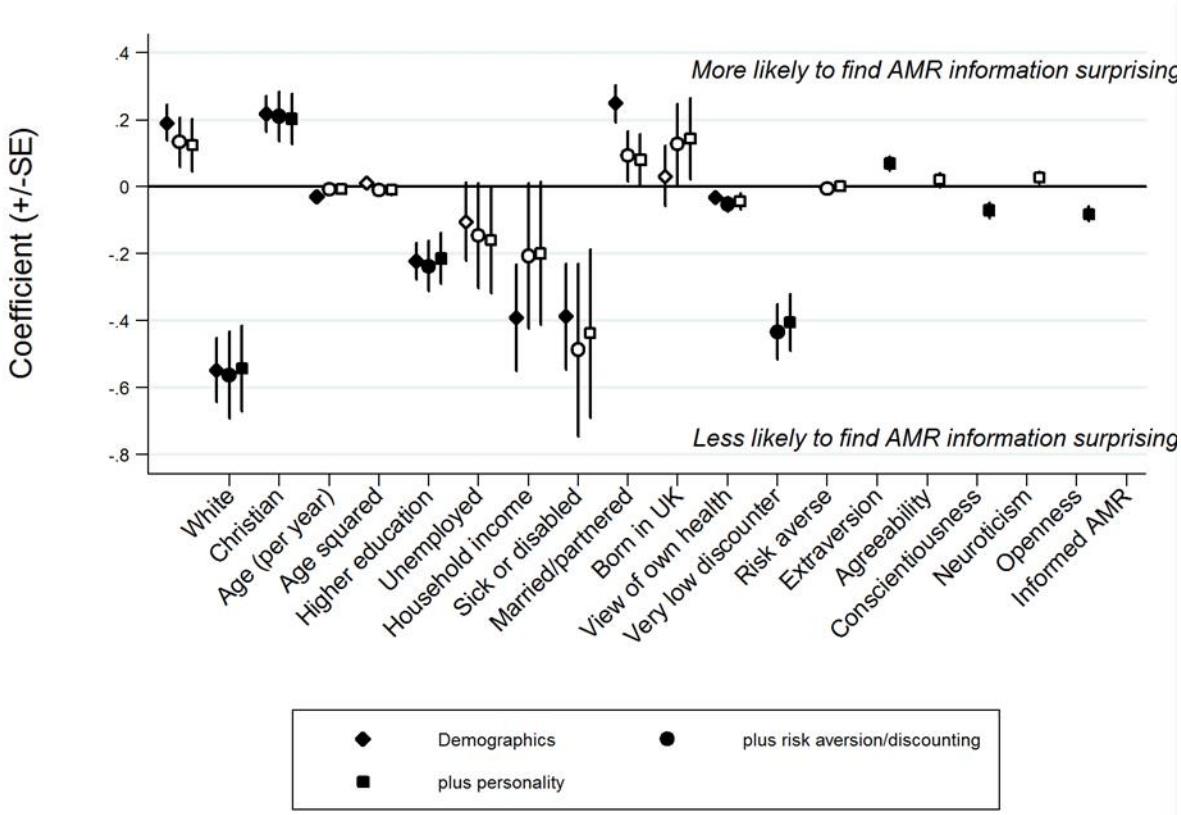


Note: solid symbols indicate p<0.05, empty symbols p>0.05.

Table 2.2. Independent predictors of 'Find AMR information surprising'

	'Find AMR information surprising' (ordered probit) (estimate (SE))			
	Model (1)	Model (2)	Model (3)	Model (4)
Male	0.192***	0.134*	0.125	0.071
	(0.053)	(0.075)	(0.079)	(0.068)
White	-0.547***	-0.562***	-0.543***	-0.463***
	(0.095)	(0.129)	(0.128)	(0.118)
Christian	0.218***	0.211***	0.203***	
	(0.054)	(0.074)	(0.075)	
Age (per year)	-0.030***	-0.008	-0.006	-0.006
	(0.010)	(0.014)	(0.014)	(0.012)
Age-squared/100	0.012	-0.011	-0.010	-0.010
	(0.010)	(0.015)	(0.015)	(0.013)
Higher-education	-0.222***	-0.237***	-0.214***	
	(0.055)	(0.075)	(0.076)	
Unemployed	-0.103	-0.146	-0.159	
	(0.118)	(0.157)	(0.159)	
Equivalised Household Income (per EUR 100,000)	-0.280**	-0.148	-0.142	
	(0.115)	(0.157)	(0.154)	
Sick/disabled	-0.387**	-0.487*	-0.438*	
	(0.158)	(0.259)	(0.251)	
Married/Partnered	0.249***	0.092	0.080	
	(0.056)	(0.076)	(0.077)	
UK-born	0.032	0.127	0.144	0.186
	(0.091)	(0.121)	(0.121)	(0.119)
Own self-rated health (0-10)	-0.032**	-0.051**	-0.043*	
	(0.014)	(0.022)	(0.023)	
Very low discounter		-0.433***	-0.404***	-0.492***
		(0.083)	(0.084)	(0.075)
Risk-averse		-0.006	0.003	0.011
		(0.015)	(0.015)	(0.014)
Extraversion			0.069***	
			(0.021)	
Agreeableness			0.021	
			(0.022)	
Conscientiousness			-0.070***	
			(0.023)	
Neuroticism			0.028	
			(0.019)	
Openness			-0.080***	
			(0.022)	
N	1816	1000	1000	1107
AIC	4525.496	2368.962	2346.767	2636.081
BIC	4608.062	2452.394	2454.738	2686.175

Notes: 1. Here and throughout the appendix, *, ** and *** denote statistical significance at the 10%, 5% and 1% levels, respectively; 2. Model (1) considers standard demographics and respondent characteristics. Model (2) additionally adjusts for discounting and risk aversion – variables we could only construct for a sub-sample, as explained earlier in manuscript. Model (3) also adjusts for personality traits – coefficients for demographic and respondent characteristics in models (2) and (3) therefore correspond to residual effects which are not mediated through their impact on discounting, risk aversion and personality; 3. Model specification was tested using link tests (p>0.1 for all models)

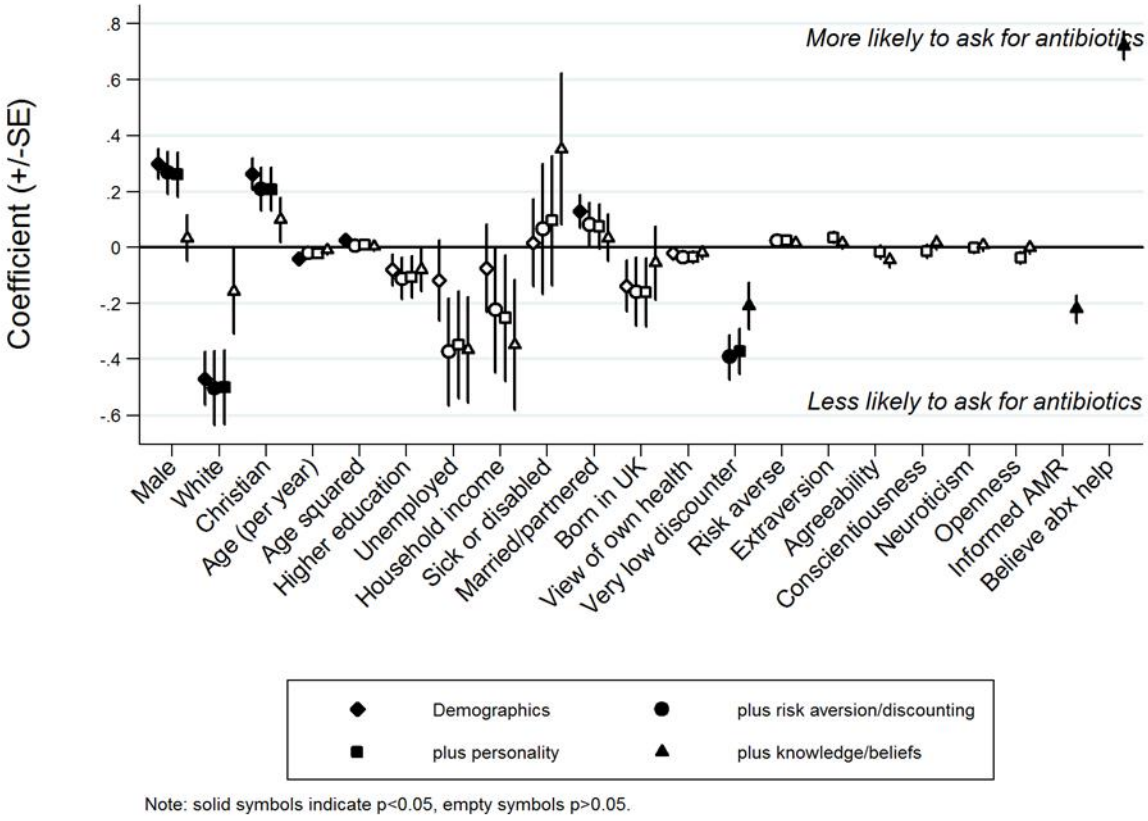


Note: solid symbols indicate p<0.05, empty symbols p>0.05.

Table 2.3. Independent predictors of 'Would ask doctor for antibiotics if I went'

	'Would ask doctor for antibiotics if I went' (ordered probit) (estimate (SE))				
	Model (1)	Model (2)	Model (3)	Model (4)	Model (5)
Male	0.298***	0.267***	0.261***	0.033	0.224***
	(0.055)	(0.075)	(0.079)	(0.083)	(0.070)
White	-0.469***	-0.503***	-0.500***	-0.157	-0.443***
	(0.095)	(0.133)	(0.132)	(0.152)	(0.123)
Christian	0.263***	0.209***	0.208***	0.099	
	(0.057)	(0.077)	(0.077)	(0.080)	
Age	-0.040***	-0.021	-0.022	-0.009	-0.020
	(0.011)	(0.014)	(0.014)	(0.016)	(0.012)
Age-squared/100	0.026**	0.007	0.009	0.004	0.010
	(0.011)	(0.015)	(0.015)	(0.017)	(0.013)
Higher-education	-0.081	-0.111	-0.106	-0.078	
	(0.055)	(0.075)	(0.075)	(0.079)	
Unemployed	-0.118	-0.374*	-0.348*	-0.366*	
	(0.144)	(0.192)	(0.192)	(0.190)	
Equivalised Household Income	-0.055	-0.161	-0.182	-0.251	
(per EUR 100,000)	(0.113)	(0.160)	(0.161)	(0.169)	
Sick/disabled	0.017	0.067	0.096	0.352	
	(0.156)	(0.233)	(0.232)	(0.270)	
Married/partnered	0.130**	0.081	0.076	0.034	
	(0.060)	(0.080)	(0.080)	(0.084)	
UK-born	-0.138	-0.158	-0.160	-0.056	-0.106
	(0.092)	(0.121)	(0.122)	(0.132)	(0.120)
Own self-rated health (0-10)	-0.020	-0.036*	-0.035	-0.019	
	(0.015)	(0.021)	(0.022)	(0.022)	
Very low discounter		-0.393***	-0.371***	-0.209**	-0.374***
		(0.079)	(0.080)	(0.083)	(0.077)
Risk-averse		0.023	0.026*	0.016	0.025*
		(0.016)	(0.016)	(0.016)	(0.015)
Extraversion			0.037*	0.017	
			(0.022)	(0.022)	
Agreeableness			-0.016	-0.046*	
			(0.025)	(0.026)	
Conscientiousness			-0.014	0.017	
			(0.024)	(0.025)	
Neuroticism			0.000	0.009	
			(0.020)	(0.021)	
Openness			-0.037	-0.001	
			(0.023)	(0.023)	
Surprised by AMR information				0.220***	
				(0.049)	
Believe ABs would help				0.722***	
State A				(0.050)	
N	1595	886	886	886	983
AIC	4530.793	2492.441	2496.608	2078.258	2786.916
BIC	4616.787	2578.602	2606.703	2197.926	2840.713

Notes: 1. Model (1) considers standard demographics and respondent characteristics. Model (2) additionally adjusts for discounting and risk aversion – variables we could only construct for a sub-sample, as explained in Appendix B. Model (3) also adjusts for personality traits. Model (4) also adjusts for knowledge of AMR and of the low probability of benefit from antibiotic treatment of ILI. Coefficients for demographic and respondent characteristics in models (2), (3) and (4) therefore correspond to residual effects which are not mediated through their impact on discounting, risk aversion, personality, and knowledge of AMR and of ineffectiveness of antibiotics for flu-like illnesses. The sample sizes are lower in models of 'Would ask doctor for antibiotics if I went' because respondents who said they would 'definitely not' visit a GP for Health State A were not asked this question; 2. Model specification was tested using link tests ($p>0.1$ for all models)

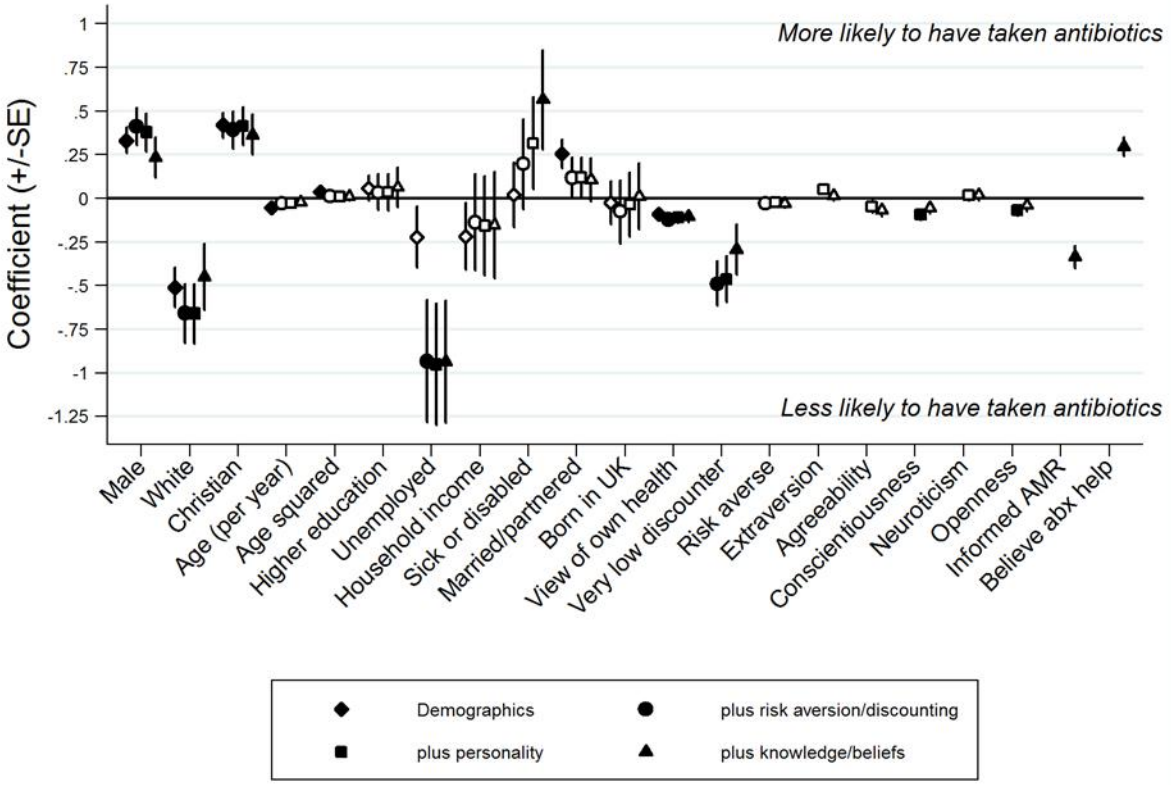


Note: solid symbols indicate p<0.05, empty symbols p>0.05.

Table 2.4. Independent predictors of 'Have taken antibiotics for State A in last 12 months'

	'Have taken antibiotics for State A in last 12 months' (probit) (estimate (SE))				
	Model (1)	Model (2)	Model (3)	Model (4)	Model (5)
Male	0.333***	0.411***	0.378***	0.234**	0.314***
	(0.073)	(0.107)	(0.110)	(0.118)	(0.097)
White	-0.511***	-0.659***	-0.661***	-0.449**	-0.513***
	(0.114)	(0.170)	(0.173)	(0.191)	(0.150)
Christian	0.419***	0.393***	0.414***	0.365***	
	(0.073)	(0.106)	(0.109)	(0.115)	
Age	-0.055***	-0.031	-0.027	-0.021	-0.022
	(0.014)	(0.020)	(0.021)	(0.021)	(0.018)
Age-squared/100	0.037**	0.011	0.010	0.011	0.008
	(0.015)	(0.022)	(0.023)	(0.024)	(0.020)
Higher-education	0.059	0.036	0.035	0.064	
	(0.071)	(0.104)	(0.104)	(0.113)	
Unemployed	-0.222	-0.933***	-0.951***	-0.936***	
	(0.177)	(0.350)	(0.349)	(0.348)	
Equivalised Household Income (per EUR 100,000)	-0.157	-0.098	-0.112	-0.109	
	(0.140)	(0.200)	(0.204)	(0.219)	
Sick/disabled	0.023	0.196	0.317	0.567**	
	(0.184)	(0.258)	(0.264)	(0.285)	
Married/partnered	0.256***	0.116	0.118	0.106	
	(0.083)	(0.117)	(0.117)	(0.124)	
UK-born	-0.025	-0.077	-0.037	0.013	0.069
	(0.126)	(0.183)	(0.182)	(0.190)	(0.166)
Own self-rated health (0-10)	-0.092***	-0.123***	-0.112***	-0.106***	
	(0.018)	(0.030)	(0.031)	(0.032)	
Very low discounter		-0.488***	-0.464***	-0.293**	-0.457***
		(0.129)	(0.132)	(0.144)	(0.115)
Risk-averse		-0.029	-0.023	-0.031	-0.030
		(0.023)	(0.024)	(0.024)	(0.020)
Extraversion			0.053*	0.017	
			(0.028)	(0.031)	
Agreeableness			-0.048	-0.068*	
			(0.034)	(0.036)	
Conscientiousness			-0.094***	-0.055*	
			(0.032)	(0.032)	
Neuroticism			0.018	0.020	
			(0.029)	(0.032)	
Openness			-0.068**	-0.041	
			(0.032)	(0.035)	
Surprised by AMR information				0.336***	
				(0.066)	
Believe ABs would help State A				0.296***	
				(0.054)	
N	1816	1000	1000	1000	1107
AIC	1719.92	806.6579	798.4035	715.7749	920.6715
BIC	1791.477	880.2742	896.5586	823.7455	960.7467

Notes: 1. Model (1) considers standard demographics and respondent characteristics. Model (2) additionally adjusts for discounting and risk aversion – variables we could only construct for a sub-sample, as explained in Appendix B. Model (3) also adjusts for personality traits. The fourth column also adjusts for knowledge of AMR and of the low probability of benefit from antibiotic treatment of ILI. Coefficients for demographic and respondent characteristics in models (2), (3) and (4) therefore correspond to residual effects which are not mediated through their impact on discounting, risk aversion, personality, and knowledge of AMR and of ineffectiveness of antibiotics for flu-like illnesses; 2. Model specification was tested using link tests ($p>0.1$ for all models)



Note: solid symbols indicate p<0.05, empty symbols p>0.05.

Table 2.5. Visiting doctor more and asking for more antibiotics as a result of AMR information

	"Definitely/Probably" Visit doctor more (Probit) (estimate (SE))				"Definitely/Probably" ask doctor for antibiotics more (Probit) (estimate (SE))			
	Model (1)	Model (2)	Model (3)	Model (4)	Model (1)	Model (2)	Model (3)	Model (4)
Male	0.452***	0.430***	0.460***	0.396***	0.454***	0.411***	0.424***	0.299**
	(0.080)	(0.116)	(0.120)	(0.140)	(0.082)	(0.117)	(0.123)	(0.147)
White	-0.500***	-0.274	-0.254	0.091	-0.548***	-0.480***	-0.433**	-0.105
	(0.117)	(0.179)	(0.182)	(0.194)	(0.116)	(0.180)	(0.177)	(0.202)
Christian	0.212***	0.116	0.091	0.029	0.183**	0.174	0.152	0.099
	(0.080)	(0.117)	(0.120)	(0.132)	(0.080)	(0.120)	(0.124)	(0.147)
Age	-0.007	-0.020	-0.019	-0.012	-0.010	-0.026	-0.024	-0.023
	(0.017)	(0.024)	(0.024)	(0.028)	(0.019)	(0.026)	(0.027)	(0.031)
Age-squared/100	-0.032	-0.017	-0.018	-0.019	-0.028	-0.009	-0.012	-0.006
	(0.020)	(0.027)	(0.027)	(0.031)	(0.022)	(0.030)	(0.031)	(0.035)
Higher-education	-0.034	-0.134	-0.119	-0.088	-0.009	-0.085	-0.061	-0.051
	(0.079)	(0.112)	(0.114)	(0.131)	(0.081)	(0.119)	(0.119)	(0.151)
Unemployed	-0.350*	-0.549	-0.567	-0.420	-0.179	-0.213	-0.211	0.125
	(0.213)	(0.397)	(0.413)	(0.436)	(0.218)	(0.319)	(0.334)	(0.378)
Equivalised Household Income (per EUR 100,000)	0.021	0.100	0.094	0.153	-0.111	-0.203	-0.238	-0.325
	(0.149)	(0.219)	(0.233)	(0.265)	(0.159)	(0.257)	(0.261)	(0.311)
Sick/disabled	-0.016	0.114	0.181	0.625*	-0.103	-0.051	0.030	0.536
	(0.204)	(0.321)	(0.318)	(0.361)	(0.210)	(0.352)	(0.343)	(0.336)
Married	0.354***	0.491***	0.487***	0.519***	0.370***	0.360**	0.334**	0.364**
	(0.095)	(0.143)	(0.140)	(0.155)	(0.099)	(0.145)	(0.145)	(0.169)
UK-born	-0.034	-0.199	-0.199	-0.347	0.034	-0.009	0.002	0.012
	(0.134)	(0.202)	(0.205)	(0.228)	(0.133)	(0.205)	(0.204)	(0.249)
Own Health	-0.061***	-0.081**	-0.080**	-0.055	-0.083***	-0.088***	-0.093***	-0.073*
	(0.020)	(0.032)	(0.033)	(0.038)	(0.020)	(0.033)	(0.035)	(0.042)
Very low discounter		-0.838***	-0.819***	-0.804***		-0.941***	-0.936***	-0.980***
		(0.167)	(0.170)	(0.211)		(0.178)	(0.173)	(0.235)
Risk-averse		-0.023	-0.016	-0.012		-0.039	-0.035	-0.046
		(0.025)	(0.025)	(0.026)		(0.026)	(0.026)	(0.029)
Extraversion			0.098***	0.066			0.092**	0.054
			(0.035)	(0.042)			(0.036)	(0.047)
Agreeability			0.035	0.038			0.031	0.011
			(0.035)	(0.041)			(0.039)	(0.050)
Conscientiousness			-0.036	0.016			-0.033	0.048
			(0.036)	(0.039)			(0.039)	(0.043)
Neuroticism			0.023	0.036			-0.008	0.009
			(0.032)	(0.041)			(0.033)	(0.045)
Openness			-0.120***	-0.099**			-0.138***	-0.142***
			(0.037)	(0.041)			(0.038)	(0.045)
Surprised by AMR information				0.698***				0.723***
				(0.083)				(0.086)
Believe ABs would help State A				0.219***				0.449***
				(0.060)				(0.070)
N	1,769	1,041	1,041	1,041	1,763	1,036	1,036	1,036
AIC	1407.465	663.7895	655.8844	531.3893	1340.472	628.327	618.2262	454.8353
BIC	1478.681	738.0085	754.8432	640.244	1411.644	702.4739	717.0887	563.584

Notes: 1. Model (1) considers standard demographics and respondent characteristics. Model (2) additionally adjusts for discounting and risk aversion – variables we could only construct for a sub-sample, as explained in the manuscript. Model (3) also adjusts for personality traits. Model (4) also adjusts for knowledge of AMR and of the low probability of benefit from antibiotic treatment of flu-like illnesses. Coefficients for demographic and respondent characteristics in models (2), (3) and (4) therefore correspond to residual effects which are not mediated through their impact on discounting, risk aversion, personality,

and knowledge of AMR and of ineffectiveness of antibiotics for flu-like illnesses; 2. The sample sizes are slightly lower in models of "Definitely or Probably" ask doctor for antibiotics more because there were a few more respondents who said they did not know how the AMR-information would affect their behaviour than in the corresponding question for "Definitely or Probably" Visit doctor more (see Table 2 in manuscript); 3. Model specification was tested using link tests ($p>0.1$ for all models)