**Influence of Personality and Concern for Health Information Privacy on PHR Adoption During COVID-19 Pandemic: An Empirical Investigation**

**Appendix A**

Table A1Measurement Items.

|  |  |  |  |
| --- | --- | --- | --- |
| Construct | Item No. | Item | References |
| Agreeable-ness | AGR1 | I feel little concern for others  | Dutta and Hwang 2017; Goldberg 1990 |
| AGR2 | I am interested in people |
| AGR3 | I take time out for others |
| Intellect | INT1 | I have a creative imagination | Dutta and Hwang 2017; Goldberg 1990 |
| INT2 | I am quick to understand things |
| INT3 | I have excellent ideas |
| INT4 | I delight in thinking about things |
| INT5 | I delight in looking for a profound implication in things |
| Neuroticism | NEUR1 | I get stressed out easily | Dutta and Hwang 2017; Goldberg 1990 |
| NEUR2 | I am worried about the things |
| NEUR3 | I am easily disturbed |
| Conscientious-ness | CNS1 | I pay attention to details | Dutta and Hwang 2017; Goldberg 1990 |
| CNS2 | I am always prepare |
| CNS3 | I follow a schedule |
| CNS4 | I make policies and stick to them |
| Extraversion | EXT1 | I am the life of party | Dutta and Hwang 2017; Goldberg 1990 |
| EXT2 | I feel comfortable around people |
| EXT3 | Generally, I start the conversation |
| EXT4 | I don't mind being the heart of consideration |
| Threat of COVID-19 | PTD1 | I have no competence to use healthcare technology during COVID-19 pandemic. | Xin et al. 2020; Villani et al. 2021 |
| PTD2 | Experienced loved ones dying from COVID-19 pandemic. |
| PTD3 | I do not feel comfortable using healthcare technology during COVID-19 pandemic. |
| PTD4 | I have no access to medical care during COVID-19 pandemic.  |
| Behavioral Intention | BINT1 | I intend to use EMR exchange in the near future to manage my health. | Dutta and Hwang 2017; Hwang et al., 2012 |
| BINT2 | I plan to use EMR exchange in the near future to manage my health. |
| BINT3 | My willingness to use EMR exchange is high. |
| BINT4 | Whatsoever the environments, I do not intend to use EMR exchange |
| Collection | COL1 | It usually bothers me when healthcare providers ask me for personal health Information. | Hwang et al. 2012; Dutta and Hwang 2017 |
| COL2 | I sometimes think for a while when healthcare providers ask me toprovide personal health information |
| COL3 | It bothers me to give personal health information to so many healthcare providers. |
| COL4 | It bothers me that healthcare providers collect too much personal health information |
| Error | ERR1 | Healthcare providers should repeatedly check the accuracy of individuals’ personal health information without considering cost. | Hwang et al. 2012; Dutta and Hwang 2017 |
| ERR2 | Healthcare providers should use more measures to ensure the accuracy of individuals’ personal health information.  |
| ERR3 | Healthcare providers should have a more comprehensive method to correct for errors in individuals’ personal health information. |
| ERR4 | Healthcare providers should devote more time and manpower to verify the accuracy of individuals’ personal health information.  |
| Secondary Use | SU1 | Healthcare providers should never use individuals’ personal health information for any other purposes unless it has been authorized by the individual.  | Hwang et al. 2012; Dutta and Hwang 2017 |
| SU2 | When people give personal health information to a healthcare provider for some reason, the healthcare providers should never use the information for any other purpose.  |
| SU3 | Healthcare providers should never sell individuals’ personal health information to other providers. |
| SU4 | Healthcare providers should not share individuals’ personal health information with other providers unless it has been authorized by the individuals. |
| Unauthorized Access | UA1 | Healthcare providers should devote more time and efforts to preventing the unauthorized access of individuals’ personal health information. | Hwang et al. 2012; Dutta and Hwang 2017 |
| UA2 | Healthcare providers should prevent unauthorized people from accessing individuals’ personal health information without considering the cost. |
| UA3 | Healthcare providers should take more measures to ensure that unauthorized people cannot use their computer to access individuals’ personal health information. |

**Appendix B**

Table B1 Results of confirmatory factor analysis and reliability analysis.

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| --- | --- | --- | --- |
| Constructs | Item | Loadings | Standardized Cronbach’s α |
| Agreeableness | AGR1 | 0.772 | 0.851 |
| AGR2 | 0.814 |
| AGR3 | 0.827 |
| Intellect | INT1 | 0.861 | 0.921 |
| INT2 | 0.830 |
| INT3 | 0.841 |
| INT4 | 0.891 |
| INT5 | 0.710 |
| Neuroticism | NEUR1 | 0.852 | 0.942 |
| NEUR2 | 0.823 |
| NEUR3 | 0.798 |
| Conscientiousness | CNS1 | 0.812 | 0.874 |
| CNS2 | 0.826 |
| CNS3 | 0.847 |
| CNS4 | 0.875 |
| Extraversion | EXT1 | 0.823 | 0.915 |
| EXT2 | 0.806 |
| EXT3 | 0.811 |
| EXT4 | 0.728 |
| Threat of COVID-19 | PTD1 | 0.857 | 0.931 |
| PTD2 | 0.845 |
| PTD3 | 0.851 |
| PTD4 | 0.790 |
| Behavioral Intention | BINT1 | 0.875 | 0.834 |
| BINT2 | 0.878 |
| BINT3 | 0.782 |
| BINT4 | 0.847 |
| Collection | COL1 | 0.764 | 0.824 |
| COL2 | 0.826 |
| COL3 | 0.853 |
| COL4 | 0.867 |
| Errors | ERR1 | 0.846 | 0.817 |
| ERR2 | 0.817 |
| ERR3 | 0.823 |
| ERR4 | 0.879 |
| Secondary Use | SU1 | 0.846 | 0.837 |
| SU2 | 0.867 |
| SU3 | 0.849 |
| SU4 | 0.852 |
| Unauthorized Access | UA1 | 0.865 | 0.828 |
| UA2 | 0.828 |
| UA3 | 0.879 |