

1 **Public Perceptions of COVID-19 Digital Contact Tracing Technologies During**  
2 **the Pandemic in Germany**

3 Anastasia Kozyreva<sup>1</sup>, Philipp Lorenz-Spreen<sup>1</sup>, Stephan Lewandowsky<sup>2,3</sup>, Paul M. Garrett<sup>4</sup>,  
4 Stefan M. Herzog<sup>1</sup>, Thorsten Pachur<sup>1</sup>, and Ralph Hertwig<sup>1</sup>

5 <sup>1</sup>Center for Adaptive Rationality, Max Planck Institute for Human Development, Germany

6 <sup>2</sup>School of Psychological Science, University of Bristol, United Kingdom

7 <sup>3</sup>School of Psychological Sciences, University of Western Australia

8 <sup>4</sup>Melbourne School of Psychological Sciences, University of Melbourne, Australia

**Abstract**

9

10 Digital contact-tracing technologies are being used for epidemiological purposes at scale for  
11 the first time in response to the COVID-19 pandemic. This poses challenges for  
12 governments aiming at high and efficient uptake and for people weighing the advantages  
13 (e.g., public health) against the potential risks (e.g., loss of data privacy) of these  
14 unprecedented measures. Our cross-sectional survey with repeated measures across four  
15 samples in Germany ( $N = 4,357$ ) focused on public perceptions of digital contact-tracing  
16 technologies and related attitudes toward privacy. We found that public acceptance of  
17 potential privacy-encroaching measures decreased over time. Levels of acceptability were  
18 high for all three hypothetical tracking apps representing a range of privacy encroachments.  
19 Intentions to download the actual tracking app (the Corona-Warn-App) that became  
20 available during our study were also high. However, this did not directly translate into  
21 actual uptake. Our results point to the crucial roles of trust in government and in the  
22 app's security, as well as of concerns about the app's effectiveness. A conflict between  
23 prosocial intentions and personal benefit on the one hand, and lack of trust in data security  
24 and the app's effectiveness on the other, are at the heart of people's decisions about  
25 whether to use digital contact-tracing technologies.

26 *Keywords:* COVID-19 | digital contact tracing | privacy | public attitudes |  
27 Corona-Warn-App

28 **Public Perceptions of COVID-19 Digital Contact Tracing Technologies During**  
29 **the Pandemic in Germany**

30 Public health interventions and vaccinations, economic aid, and behavioral regulations  
31 have all been enlisted to curb the damage of the COVID-19 pandemic (Habersaat et al.,  
32 2020; World Health Organization, 2020). Before vaccines were introduced, behavioral  
33 measures—restricting public gatherings and other lockdown policies, tracing contacts of  
34 infected persons, and implementing a combination of physical distancing rules and hygiene  
35 measures (e.g., Germany’s “AHA+L”—distance, hygiene, mask + ventilation—rules;  
36 Robert Koch Institute, 2020)—were the most promising way to contain the pandemic.  
37 Technological solutions have also helped stem the spread of COVID-19 (Grantz et al., 2020;  
38 Oliver et al., 2020). Indeed, with the exception of the Ebola outbreak in West Africa in  
39 2014–2016 (Danquah et al., 2019), the COVID-19 pandemic is the first large-scale use of  
40 digital contact tracing for epidemiological purposes (Kahn & Johns Hopkins Project on  
41 Ethics and Governance of Digital Contact Tracing Technologies, 2020). The current study  
42 focuses on the behavioral factors that contribute to the adoption of tracking apps during  
43 the course of the COVID-19 pandemic.

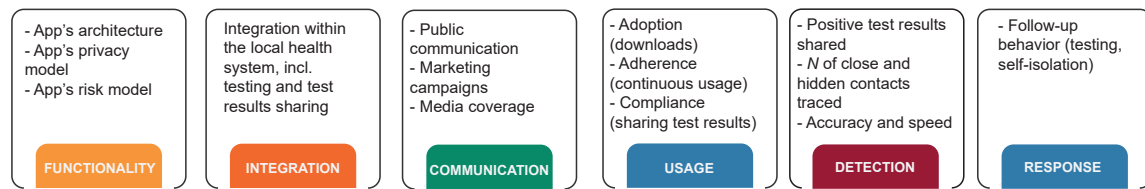
44 Smartphone tracking apps use GPS, telecommunication, and Bluetooth data to create a  
45 list of contacts with whom a user may have been colocated (Oliver et al., 2020). This  
46 contact information is stored locally on the phone or on a centralised server. If a person  
47 later tests positive for COVID-19 and shares their infection status with an app, all users in  
48 their contact list can be notified instantly, allowing them to self-isolate and get tested, thus  
49 ideally helping to slow the virus’ spread (Ferretti et al., 2020).

50 So far, about 50 countries have introduced COVID-19 contact-tracing apps; most use  
51 Bluetooth tracking technologies (O’Neill et al., 2020). The Corona-Warn-App, introduced  
52 in Germany in June 2020, is an open-source Bluetooth-based decentralized smartphone app  
53 (<https://www.coronawarn.app/en>) that aims to ease the burden of the pandemic on local  
54 public health authorities by complementing their offline contact tracing efforts. The app

55 employs a privacy-preserving model, collecting anonymized contact data that are stored  
56 locally on the user’s smartphone. Like Spain’s Radar COVID app or the United Kingdom’s  
57 NHS COVID-19 app, the Corona-Warn-App’s Bluetooth-mediated contact-tracing  
58 functionality and architecture is based on Google and Apple’s Exposure Notification  
59 system.

60 Given that COVID-19 is likely to become endemic in many parts of the world, it is  
61 crucial to evaluate and understand the factors that can make digital contact tracing an  
62 effective long-term epidemiological measure (Colizza et al., 2021). The potential of tracking  
63 technologies to battle the pandemic depends on a combination of related but distinct  
64 factors (see Figure 1 for a graphical representation), including (see also Colizza et al., 2021;  
65 Rodríguez et al., 2021): (1) *functionality*: the app’s architecture (e.g., which protocol or  
66 exposure notification system it uses), and the privacy and risk models it relies upon; (2)  
67 *integration*: how the app is integrated into a larger environment, including public health  
68 system capacity and how test results are shared with an app (e.g., via QR codes); (3)  
69 *communication*: includes media coverage and how the app and its risks and benefits are  
70 communicated to the public; (4) *usage*: consists of a number of behavioral factors,  
71 including the technology’s adoption (number of downloads), people’s continuous and  
72 correct use of the app (e.g., keeping it installed and keeping Bluetooth on), and compliance  
73 (e.g., people’s willingness and ability to share their test results in the app); (5) *detection*:  
74 includes key effectiveness metrics such as the number of positive test results shared with an  
75 app as a proportion of all clinically diagnosed infections in the population, the app’s overall  
76 detection rate (i.e., the proportion of an infected person’s contacts who are notified by the  
77 app about their risk exposure—including contacts unknown to the infected individual), and  
78 detection accuracy (i.e., the proportion of detected infections in the app that are free from  
79 both false positives and false negatives; see Redmiles, 2020); and (6) *response*: complying  
80 with risk warnings in the app following risk exposure notification and taking appropriate

### Digital Contact Tracing Effectiveness



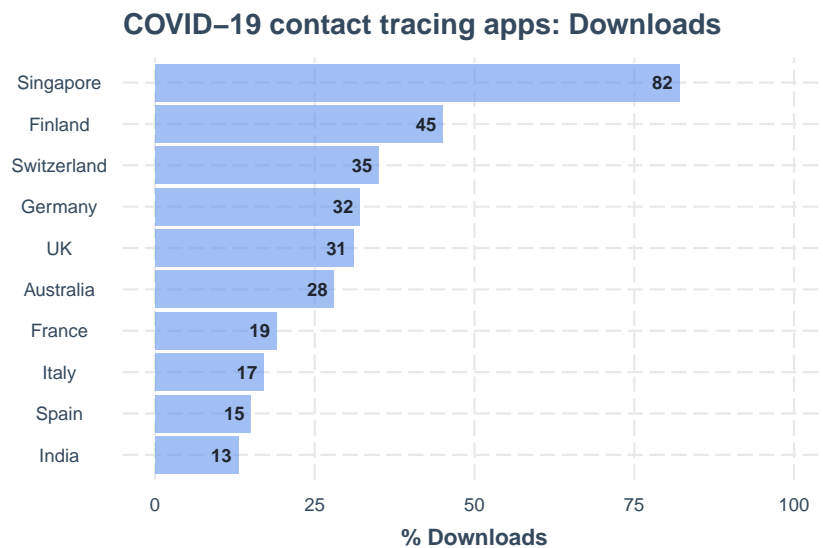
**Figure 1:** Factors contributing to the effectiveness of digital contact tracing technologies. Expanded based on the analysis by Rodríguez et al. (2021).

81 measures (e.g., taking a test, self-isolating or self-quarantining).

82 So far, the uptake of digital contact-tracing apps among the populations of most  
 83 countries has not reached the target of 60% (Figure 2), which is derived from early  
 84 simulation models suggesting that an uptake by 60% of the population would effectively  
 85 mitigate the spread of the virus (Hinch et al., 2020; Whitelaw et al., 2020). More recent  
 86 simulation studies suggest that even levels of adoption above 20% can have a mitigating  
 87 impact (Aleta et al., 2020; Bianconi et al., 2021). Indeed, recent evidence suggests that this  
 88 is the case in the United Kingdom (Wymant et al., 2021).

89 Many factors may play a role in people's decision to download and use digital tracing  
 90 apps. A recent study in Germany revealed higher adoption rates of the Corona-Warn-App  
 91 among respondents with a higher risk of severe illness, respondents who follow behavioral  
 92 guidelines (e.g., wearing a mask), and respondents who trust the national government, the  
 93 healthcare system, and science in general (Munzert et al., 2021). A study from France also  
 94 found that higher trust in government is associated with higher acceptability and increased  
 95 use of contact-tracing apps (Guillon & Kergall, 2020); similar findings have been observed  
 96 in the United Kingdom as well (Lewandowsky et al., 2021).

97 A U.S. study on the willingness to adopt warning apps has shown, using hypothetical  
 98 scenarios, that people consider both the risks and the benefits of such technologies  
 99 (Redmiles, 2020). Benefits include knowing about one's risk exposure, feeling altruistic,

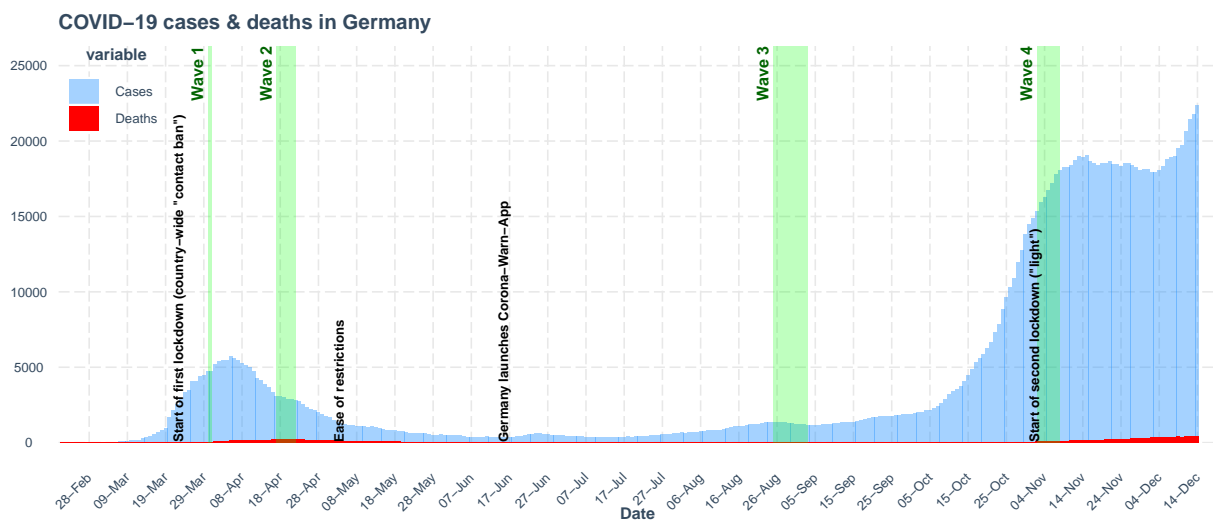


**Figure 2:** Adoption of selected COVID-19 contact-tracing apps as the percentage of the population that downloaded the app. See Table A1 for detailed information. Latest update: April 7, 2021.

100 and protecting others, while potential downsides include privacy costs and costs for mobile  
 101 data. Another study in the United States found that people value both accuracy and  
 102 privacy in a tracking app (Kaptchuk et al., 2020). In a similar vein, an international study  
 103 highlighted the importance of privacy concerns, at the same time showing that 37% of  
 104 participants would not download an app even if it protected people’s privacy perfectly  
 105 (Simko et al., 2020). Further studies in Australia (Garrett, White, et al., 2021), the United  
 106 Kingdom (Lewandowsky et al., 2021), and among young adults in Taiwan (Garrett, Wang,  
 107 et al., 2021) showed high acceptance of potential tracking technologies, especially in the  
 108 presence of privacy-preserving conditions. Other studies and opinion pieces also highlight  
 109 the crucial role that privacy plays in public adoption of tracking technologies during the  
 110 pandemic (Cho et al., 2020; Hart et al., 2020).

111 The present survey focuses on Germany as part of an international consortium of  
 112 representative surveys that includes Australia (Garrett, White, et al., 2021), the United  
 113 Kingdom (Lewandowsky et al., 2021), Taiwan (Garrett, Wang, et al., 2021), and others.  
 114 Our study investigated two main research questions (preregistered at  
 115 <https://osf.io/6mkag>): (1) What factors influence the public acceptance of governmental

116 use of location tracking data in an emergency? This includes the question of how people  
 117 perceive location tracking technologies, including their data privacy and effectiveness. (2)  
 118 How did people’s attitudes change during the pandemic? This longitudinal aspect allowed  
 119 us to compare hypothetical scenarios in the early waves (before the app was introduced)  
 120 and later examine attitudes toward Germany’s Corona-Warn-App (introduced before we  
 121 ran the later waves; Figure 3). Our third preregistered research question concerned a  
 122 crosscultural perspective and is not included in the present article but will be addressed in  
 123 a forthcoming international project report.



**Figure 3:** Rolling 7-day averages of daily reported COVID-19 cases (blue) and deaths (red) in Germany between February and November 2020. Collection dates of the current study are highlighted in green; introductions of key policy decisions and the Corona-Warn-App are displayed in black text.

124 Our study was conducted throughout the first 8 months of the pandemic in Germany  
 125 (March to November 2020). It included four waves, which all examined how acceptable  
 126 respondents found a range of privacy-encroaching measures. The study focused particularly  
 127 on how opinions changed throughout the pandemic. The first two waves of the survey  
 128 presented respondents with one of three hypothetical scenarios representing different  
 129 degrees of privacy invasion. Each scenario described a tracking app and accompanying  
 130 policies (e.g., the government is required to delete all data collected by the app after 6  
 131 months). The last two waves probed people’s attitudes toward the actual

132 Corona-Warn-App. We also collected a variety of attitude measures, such as people's  
133 worldviews, trust in government, and their risk perception related to COVID-19, in order  
134 to identify potential predictors of policy acceptance (for details see the Methods section).  
135 Advantages of our approach include the ability to compare attitudes toward three  
136 hypothetical scenarios (in the earlier waves) with actual adoption rates of an existing app  
137 (in the later waves). Our cross-sectional study with large representative online samples and  
138 various behavioral measures allowed us to disentangle the factors that influence digital  
139 contact-tracing adoption, and to examine how these factors change over time.

140 The insights from our surveys focus on the following questions, which we describe in  
141 detail in the Results section: (1) How do people's risk perceptions of COVID-19 change  
142 over the course of the pandemic? (2) How do people's attitudes towards various  
143 privacy-encroaching measures change over the course of the pandemic? (3) How acceptable  
144 do people find various types of tracking technologies? Do people respond to the extent of  
145 encroachment involved? And how does it compare to the download rates of the  
146 Corona-Warn-App? (4) How do people rate various measures of effectiveness and risk of  
147 these technologies? (5) What are the most important reasons for people to download or  
148 not download the app once it is available? (6) What factors are most predictive of app  
149 adoption and intention to download?

150 We conclude by incorporating these insights into a behavioral framework for digital  
151 contact tracing and offering policy recommendations aiming to encourage the public to  
152 adopt contact-tracing apps.

153

## Results

### 154 COVID-19 Risk Perception

155 We begin our results with an overview of changes in people's risk perceptions of the  
156 COVID-19 pandemic (Figure 4).





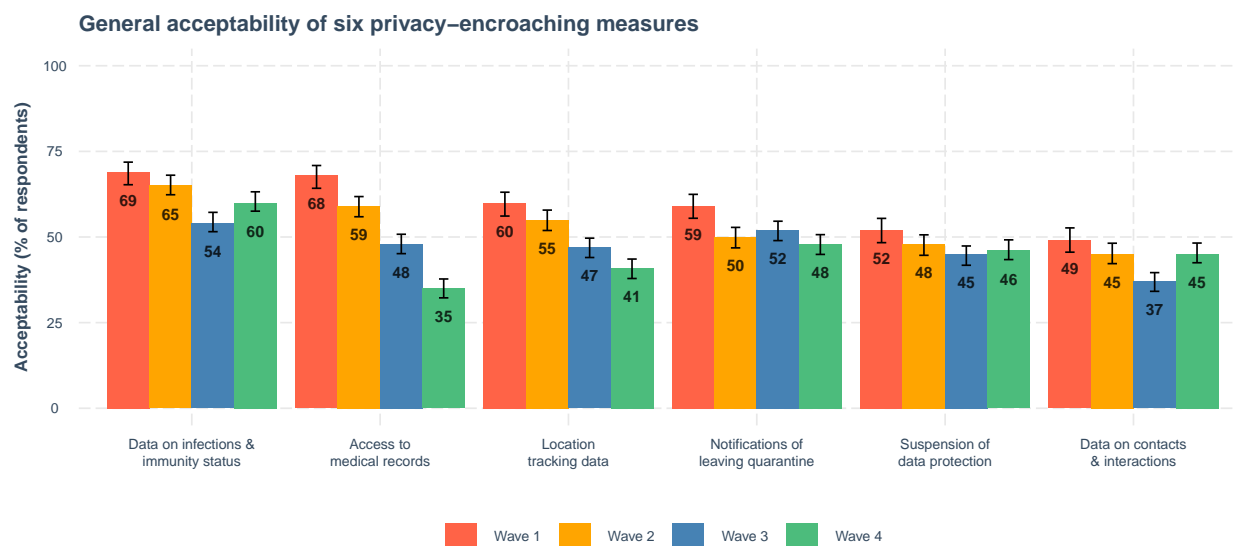
**Figure 4:** Perceived risk of COVID-19 across four samples.

157 The majority of participants indicated that they thought the virus posed a moderate to  
 158 severe threat to the German population as a whole: The number of participants stating  
 159 that the virus' severity for the population was somewhat, very, or extremely high ranged  
 160 from 84% to 97% across the four waves. Changes in the categories of high and extremely  
 161 high severity closely follow the pandemic's development in Germany, with severity ratings  
 162 increasing along with increasing infections rates. The proportion of people who believed  
 163 that the virus poses only some threat to their health remained stable (between 27% and  
 164 31%), while the proportion of people who thought the threat was very or extremely high  
 165 tended to fluctuate towards higher numbers with time (March: 35%, April: 30%,  
 166 September: 46%, November: 41%). Overall, on the aggregate level, people were more  
 167 concerned about the health of others than about their own health (Figure 4). Across all  
 168 four waves, on the individual level (within respondents) the majority of participants were  
 169 equally concerned about the risk of infection to themselves and to others (Appendix Figure  
 170 A2). However, over time, more people showed increased concern for themselves, which is

171 reflected in the rising proportions of people concerned equally for themselves and others  
 172 (March and April: 49%, September and November: 59%) and decreasing proportion of  
 173 people reporting more concern for others (March and April: 43–44%, September and  
 174 November: 33%). The proportions of respondents who indicated more concern for  
 175 themselves than for others remained stable (7–8%) across all four waves.

176 **Acceptability of Privacy-Encroaching Measures**

177 The question stem we used to examine people’s attitudes towards privacy-encroaching  
 178 measures such as temporarily suspending data protection or granting the government  
 179 access to people’s medical records (for all six items, see Appendix Table B6) was: “How  
 180 acceptable is it for the government to take the following measures to limit the spread of the  
 181 virus during the COVID-19 pandemic?”



**Figure 5:** Acceptability of privacy-encroaching measures in Germany across the four waves of the study. Acceptability scores represent the total percentage of participants who chose the response options “very acceptable” or “somewhat acceptable” to the question “How acceptable is it to take the following measures to limit the spread of the virus during the COVID-19 pandemic?” Black numbers display percentages. Error bars are 95% confidence intervals computed with the R function *prop.test*. Wave 1:  $N = 788$ , Wave 2:  $N = 1,102$ , Wave 3:  $N = 1,230$ , Wave 4:  $N = 1,182$ . See Appendix Table B6 for the wording of the measures.

182 Figure 5 shows that acceptability of privacy-encroaching measures was fairly high, but

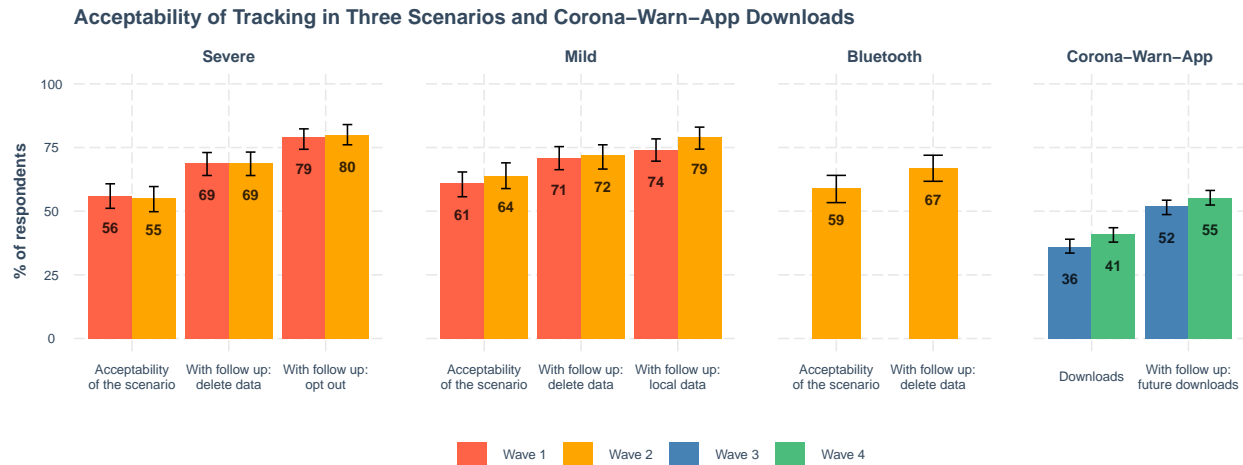
183 tended to decrease over the course of the pandemic. Even though respondents' risk  
184 perception tracked the pandemic's development in Germany—that is, perceived risk was  
185 higher in April and November, when infections were rising (Figure 4)—respondents'  
186 attitudes toward privacy-encroaching measures followed a different pattern. After the  
187 initial shock of the pandemic, all measures tended to decrease in overall acceptability from  
188 thereon in.

189 Within the overall trend of decreasing acceptability over time, there were two distinct  
190 patterns of attitudinal change: a steep gradual decrease in acceptability and a pattern that  
191 more closely mirrored the development of the pandemic. Measures such as allowing access  
192 to medical records or location-tracking data fall into the first pattern. Granting the  
193 government access to citizens' medical records was deemed very or somewhat acceptable by  
194 68% of participants in Wave 1; this number dropped in each wave, reaching just 35% in  
195 Wave 4 despite the rise of infection numbers and new lockdown measures at that time  
196 (Figure 5). Acceptability of collecting people's location-tracking data followed the same  
197 pattern (Figure 5). Measures such as collecting data on people's infections and immunity  
198 status or their contacts and interactions seemed to be more responsive to the pandemic's  
199 development and associated risk perceptions (see also Appendix Figure A1). For example,  
200 49% of respondents found collecting data on people's contacts and interactions to be  
201 somewhat or very acceptable at the end of March, during the first phase of the pandemic in  
202 Germany. This decreased over the next two waves, then rose to 45% in November,  
203 mirroring the increase in infections in Germany at that time.

#### 204 **Acceptability of Tracking Technologies**

205 We found relatively high levels of acceptance for the three hypothetical tracking  
206 technologies presented in the scenarios in Waves 1 and 2 (mild, severe, and Bluetooth;  
207 Waves 3 and 4 examined attitudes toward the actual Corona-Warn-App and did not  
208 introduce hypothetical technologies). Acceptability of all three was above 50% in both

209 waves. There were no large differences between acceptability in the three hypothetical  
 210 scenarios (Figure 6).



**Figure 6:** Acceptability of hypothetical tracking technologies and Corona-Warn-App downloads. Within the hypothetical scenarios, the first column displays baseline acceptability ratings after participants responded to items querying tracking effectiveness. Remaining columns display acceptability under varying conditions: the introduction of an option to delete all data and stop tracking after 6 months, tracking with an “opt out” option, and tracking where data is stored locally on the user’s phone. Corona-Warn-App usage is displayed in terms of current downloads and intentions to download. Black numbers display percentages. Error bars are 95% confidence intervals computed by R function *prop.test*. Total responses: Wave 1 (severe):  $N = 425$ ; Wave 2 (severe):  $N = 407$ ; Wave 1 (mild):  $N = 404$ ; Wave 2 (mild):  $N = 362$ ; Wave 2 (Bluetooth):  $N = 340$ ; Wave 3 (Corona-Warn-App):  $N = 1,231$ ; Wave 4 (Corona-Warn-App):  $N = 1,188$ . For questions see Appendix Table B3; for descriptions of scenarios see Appendix Table B1.

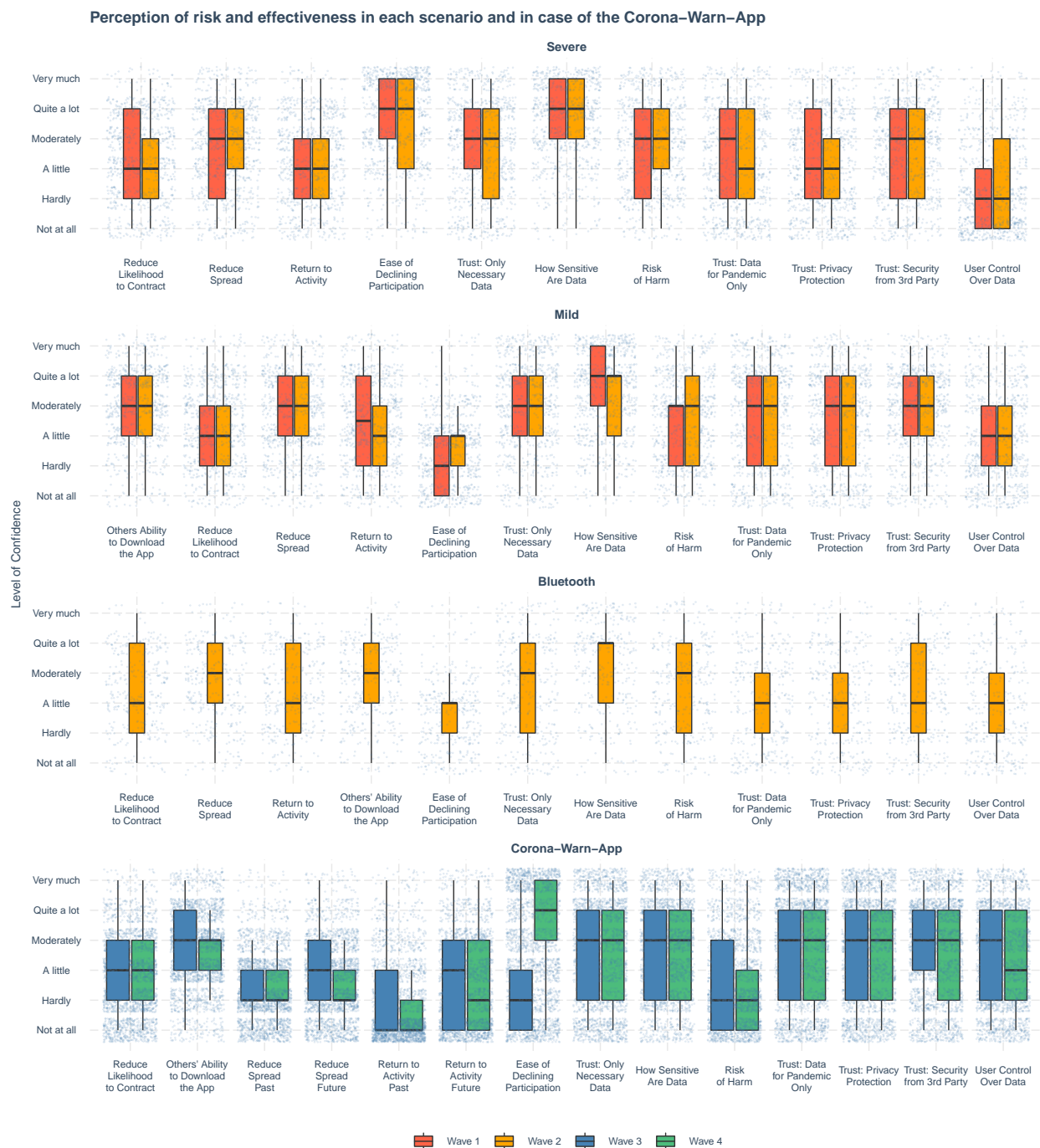
211 Surprisingly, although the “severe” scenario was deemed least acceptable (55% and 56%  
 212 compared to 61% and 64% for mild and 59% for Bluetooth), its acceptance level was not  
 213 particularly low. The differences between scenarios virtually disappeared when respondents  
 214 considered follow-up options (e.g., deleting all data after 6 months or opting out of data  
 215 collection). The reported downloads of the Corona-Warn-App in our samples was smaller  
 216 (36% and 41% for Waves 3 and 4, respectively) than the acceptability of hypothetical  
 217 scenarios. This low number of reported downloads is consistent with the actual download  
 218 rates for the Corona-Warn-App in Germany (currently estimated at about 30% of the  
 219 population; see Figure 2). The somewhat higher rates of downloads reported in our sample  
 220 compared to the actual national download rate might be explained by our demographics,  
 221 which skewed towards online users who were aged 18 years or older. Moreover, when

222 respondents in Waves 3 and 4 of the study were asked whether the Corona-Warn-App  
223 should be mandatory, only 30% said yes (Appendix Table A3). This could indicate that  
224 people were less likely to find tracking technologies acceptable over time (consistent with  
225 the trend in Figure 5); it could also indicate that participants approached hypothetical  
226 scenarios and the actual app differently (e.g., in terms of weighing privacy against other  
227 considerations).

### 228 **Perceptions of Risk and Effectiveness of Tracking Technologies**

229 Figure 7 displays participants' perceived risk and effectiveness of the tracking  
230 technologies and policies in the presented scenarios. It shows that participants were aware  
231 that the severe scenario posed a greater risk to data privacy and data sensitivity, control  
232 over user data, and ability to decline participation. They also judged the potential  
233 effectiveness of the severe scenario, in general, to be on the same level as in the other two  
234 scenarios (mild and Bluetooth). It is therefore puzzling that the acceptability of the severe  
235 scenario was almost on par with the other two, even though participants thought the risk  
236 to privacy protection and the level of intrusion in citizens' lives was much higher. Figure 7  
237 also shows that even though participants thought the Corona-Warn-App presented only a  
238 low risk of harm, they were pessimistic about that app's effectiveness, including its ability  
239 to reduce the spread of the virus and to help people return to their normal activities. This  
240 pessimism toward the Corona-Warn-App was stronger than the pessimism directed toward  
241 the hypothetical scenarios presented in earlier waves of the study. Moreover, participants  
242 showed only moderate levels of trust in the Corona-Warn-App's security. Trust in the  
243 Corona-Warn-App's security was closest to that found in the mild scenario, but higher  
244 than that in the severe and Bluetooth scenarios. Given that the technology in the  
245 Bluetooth scenario was attributed to Apple and Google, while the Corona-Warn-App was  
246 attributed to the German government, the lower level of trust in the Bluetooth scenario  
247 may be due to a lack of trust in international corporations and their standards of data

248 protection. In our follow-up questions and analyses, we explored potential drivers behind  
 249 people’s decisions to download or not download the Corona-Warn-App.

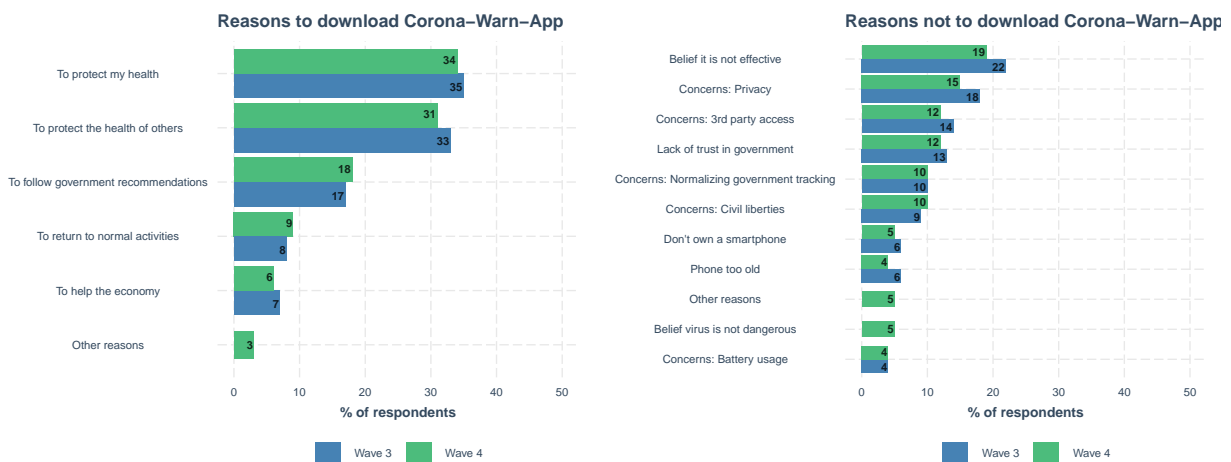


**Figure 7:** Perception of risk and effectiveness of the tracking policy in each scenario. Boxes show the interquartile range (IQR; responses between the 25th and 75th percentiles); the black horizontal line inside the boxes indicates the median value. Lower and upper whiskers extend from the respective end of the box to the largest value no further than 1.5\*IQR. Individual responses are jittered horizontally and vertically. For items see Appendix Tables B7 and B8; for descriptions of scenarios see Appendix Table B1.

250 **Corona-Warn-App: Reasons for Download**

251 The relatively low uptake of the Corona-Warn-App could be due to a variety of factors.  
 252 To explore the factors that might lead people to decide against downloading the app, we  
 253 asked people to choose among several possible reasons to download or not download the  
 254 Corona-Warn-App (multiple selections allowed; Figure 8).

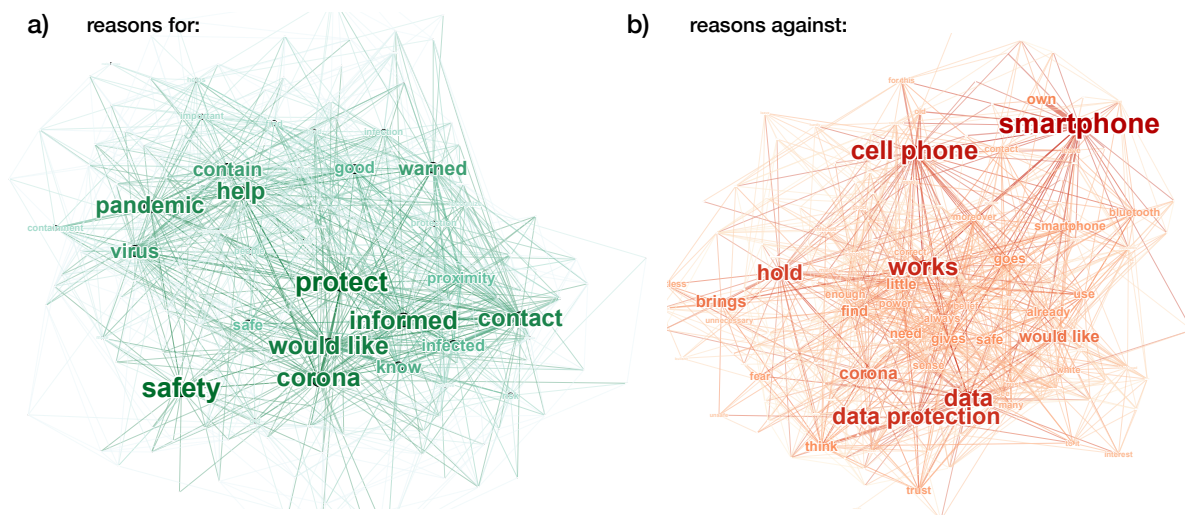
255 The results indicate that people’s main reason for downloading the app was their desire  
 256 to protect their health and the health of others. The two leading reasons for people not  
 257 downloading the app were privacy concerns and the belief that the app is not effective.  
 258 Concerns about third-party access and lack of trust in the government also played a role.  
 259 The distribution of reasons not to download the app is more uniform than that for reasons  
 260 to download it.



**Figure 8:** Self-reported reasons to download or not download the Corona-Warn-App. Panels show results from preselected multiple-choice items in Waves 3 and 4. By design, “Reasons” and “Reasons not” have more response options in Wave 4 than in Wave 3.

261 To analyze people’s open responses about their reasons to download or not the app, we  
 262 extracted unigrams (i.e., individual words) from the responses and counted their overall  
 263 frequencies as well as their co-occurrences within responses. Figure 9 shows the resulting  
 264 co-occurrence networks for reasons to download the app from 477 individual responses  
 265 (panel a) and reasons to not download the app from 530 individual responses (panel b).

266 Clusters of frequent words indicate the main arguments.



**Figure 9:** Self-reported reasons to download or not download the Corona-Warn-App in an open-response question (Wave 4 only; reasons for:  $N = 477$ ; reasons against:  $N = 530$ ). Co-occurrence networks of unigrams from positive (panel a) and negative (panel b) reasons for downloading the app. Connections appear whenever two words were used by the same participant. Node and font sizes and color code are proportional to the absolute frequency of the corresponding word; their position follows a spring layout. Color indicates community affiliation. Only unigrams that appeared at least three times in the responses are shown. Translation on a unigram basis via DeepL.com; visualization via Gephi (Bastian et al., 2009).

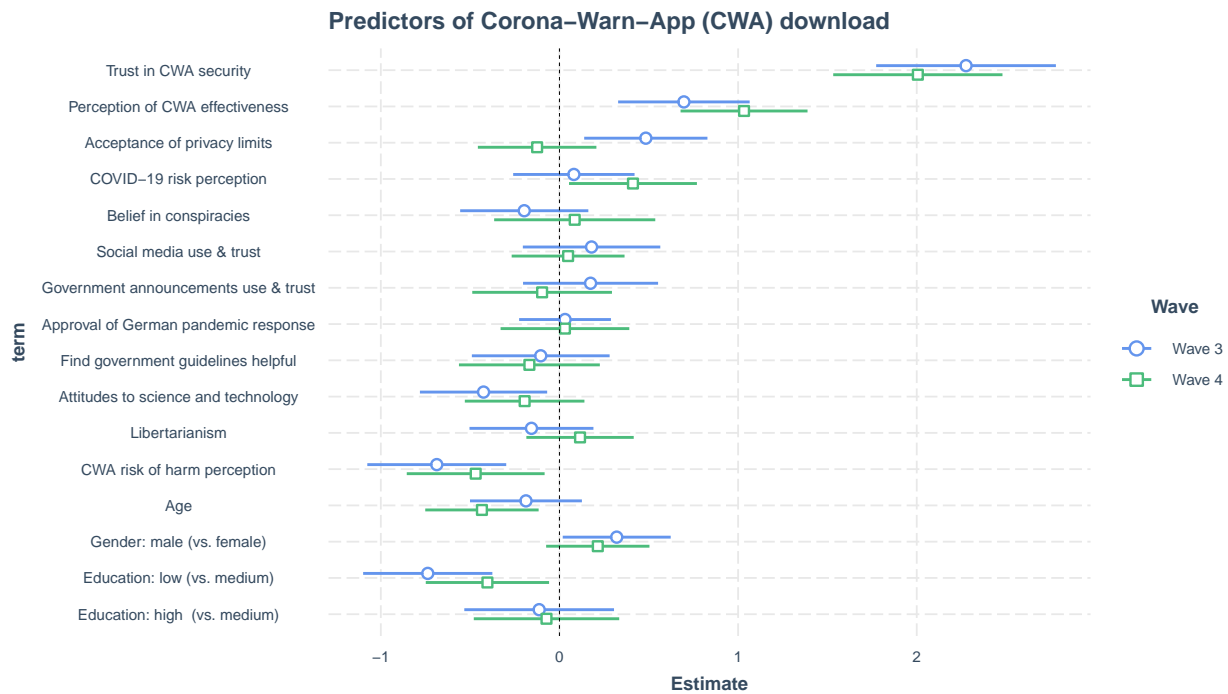
267 Reasons to download the app include protecting others and oneself (around the term  
 268 “protect”), being informed about infections in the social surrounding (around the terms  
 269 “informed” and “contact”), and helping to mitigate the pandemic (“pandemic,” “virus,”  
 270 and “help”). Reasons against downloading the app include technical issues with their  
 271 smartphone (“smartphone”), data privacy (“data protection” and “trust”), problems with  
 272 the functionality (“functionality”), and doubts around how useful and necessary the app is  
 273 (“hold”, “brings” and “pointless”). Another reason was rarely leaving the house (“leave”  
 274 and “home”). Overall, the reasons for not downloading the app are slightly more diverse  
 275 than the reasons to download it; this was also the case for the multiple-choice question  
 276 (Figure 8). The main difference between the multiple-choice and the open-ended responses  
 277 is the more prominent role of problems with smartphones (reasons against) and of being  
 278 informed (reasons for) in the open responses.



## 279 **Corona-Warn-App: Predictors of Download**

280 To further examine why people chose to download the Corona-Warn-App, we used  
281 various independent variables measured in the survey as predictors for the dependent  
282 variable of downloading the Corona-Warn-App, then fit a logistic regression model (Figure  
283 10). Once again, trust in the app’s security and perceived effectiveness emerged as leading  
284 positive predictors of whether the app was downloaded. These two variables represent  
285 combined measures from variables presented in Figure 7. The variable “trust in the app’s  
286 security” included items asking respondents how much they trust the government to ensure  
287 individuals’ privacy and to only use the Corona-Warn-App data to deal with the pandemic,  
288 as well as how secure they think the data collected by the app actually is. It thus  
289 simultaneously represents trust in government and trust in the app’s data security. The  
290 variable “perceived effectiveness” included items asking for people’s assessment of whether  
291 the app will help reduce the virus’ spread, reduce their likelihood of coming into contact  
292 with the virus, and help return them to their normal activities. This variable therefore  
293 represents people’s assessment of the app’s potential to impact the course of the pandemic  
294 and help them personally.

295 As trust in the app’s security and perceived effectiveness emerged as strong predictors  
296 for downloading the Corona-Warn-App, we used the same modeling approach to assess  
297 predictors for both of them separately. Appendix Figures A7 and A8 show the results of  
298 the linear regression models where trust in the app’s security and perceptions of its  
299 effectiveness were the dependent variables. Acceptance of privacy limits during the  
300 pandemic (a combined measure for items discussed in the Results section “Acceptability of  
301 Privacy-Encroaching Measures” and Figure 5) and trust in science and government  
302 guidelines emerged as moderate positive predictors of both variables. Furthermore,  
303 believing in conspiracy narratives and perceiving the Corona-Warn-App as harmful was  
304 associated with lower trust in the app’s security, but not with the perception of its  
305 effectiveness.

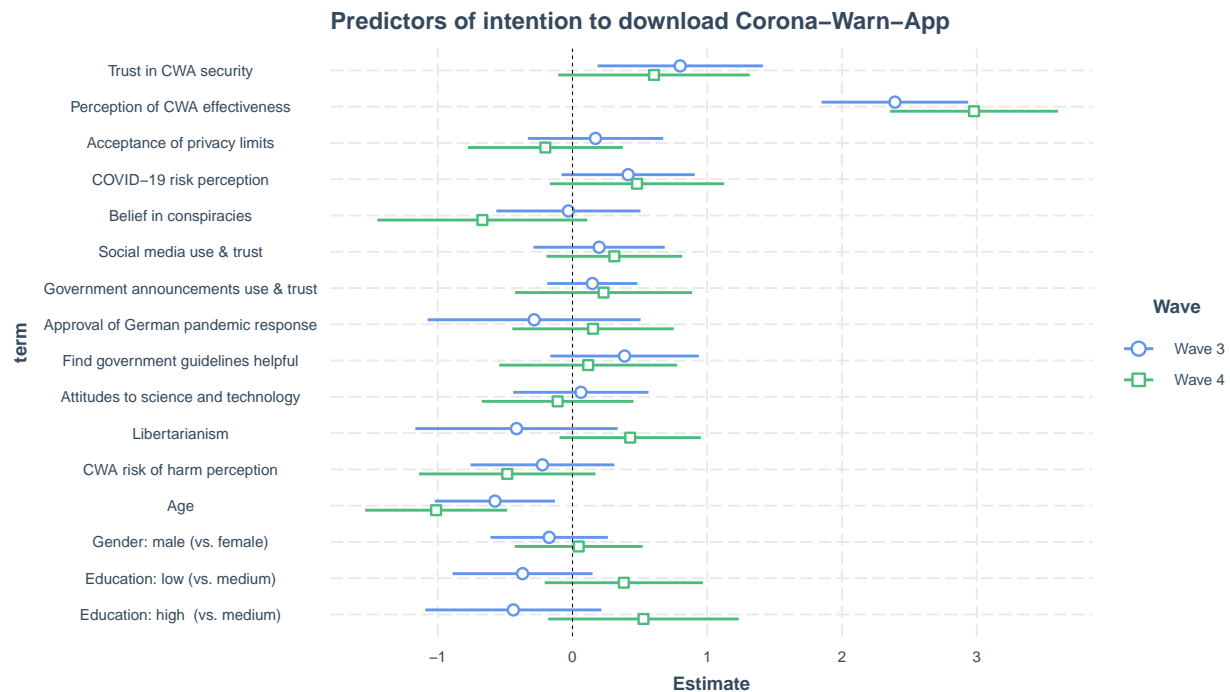


**Figure 10:** Logistic regression models for Corona-Warn-App download for Waves 3 and 4. Horizontal bars span 95% confidence intervals. Dependent variable: app downloads (yes/no). Coefficients: measures from the survey (e.g., a combined measure for trust in app security or a combined score for conspiracy beliefs; Appendix Table B9). Education was dummy coded with the reference level medium education, yielding two coefficients: low (vs. medium) and high (vs. medium) education. Following Gelman (2008), we standardized all continuous variables by two standard deviations (SD) and mean centered the binary gender variable. This way a 2-SD change in a continuous predictor variable is approximately equivalent to changing the category in a roughly balanced binary predictor variable (e.g., gender). In a logistic regression model a slope reflects the relative change in log odds (while keeping all other predictors at their average values). Appendix Table A4 shows a summary of the regression results for these two models. Appendix Figures A5 and A6 display Pearson correlations for all the variables in the regression model.

306 Demographic factors such as higher education and identifying as male—but not  
 307 age—also emerged as positive predictors of having downloaded the Corona-Warn-App. As  
 308 Appendix Figure A3 shows, proportions of respondents who reported having downloaded  
 309 the app were higher at high and medium education levels: For instance, 45% of  
 310 participants with a university degree downloaded the app, while only 29% (Wave 3) and  
 311 35% (Wave 4) of participants with a lower level of education category had done so. Slightly  
 312 more male respondents (Wave 3: 40%, Wave 4: 44%) than female respondents (Wave 3:  
 313 32%, Wave 4: 37%) reported having downloaded the Corona-Warn-App.

314 We used a logistic regression model to analyze intention to download the

315 Corona-Warn-App among respondents who reported that they had not already done so.  
 316 Perceived effectiveness of the app emerged as the most important predictor of downloading  
 317 it (Figure 11).



**Figure 11:** Logistic regression models for intention to download the Corona-Warn-App (Waves 3 and 4). Horizontal bars span 95% confidence intervals. Dependent variable: intention to download the app in the future (yes/no). Coefficients: measures from the survey (e.g., a combined measure for trust in the app security or a combined score for conspiracy beliefs; Appendix Table B9). Education was dummy coded with the reference level medium education, yielding two coefficients: low (vs. medium) and high (vs. medium) education. Following Gelman (2008), we standardized all continuous variables by two standard deviations (SD) and mean centered the binary gender variable. This way a 2-SD change in a continuous predictor variable is approximately equivalent to changing the category in a roughly balanced binary predictor variable (e.g., gender). In a logistic regression model a slope reflects the relative change in log odds (while keeping all other predictors at their average values). Appendix Table A5 shows a summary of the regression results for both models.

318

## Discussion and Conclusion

319 As a response to the COVID-19 pandemic, digital contact-tracing technologies are  
 320 being used for epidemiological purposes at scale for the first time. This development poses  
 321 a number of challenges for both the governments aiming at high and efficient uptake and  
 322 for people weighing the advantages (e.g., public and individual health) against the  
 323 potential risks (e.g., loss of data privacy) these unprecedented measures may entail. Digital

324 contact tracing is poised to become a long-term epidemiological tool; it is therefore crucial  
325 to understand which factors contribute to its effectiveness and public uptake. In our survey  
326 in Germany, we focused on the behavioral aspect of digital contact tracing.

327 We found that public acceptance of potential privacy-encroaching measures decreased  
328 over time. Acceptability ratings for all three hypothetical scenarios in waves 1 and 2 were  
329 high, as were intentions to download the real-world app, the Corona-Warn-App in waves 3  
330 and 4. Surprisingly, the details of the scenarios mattered little to public acceptance: The  
331 severe scenario relied on harsh, nearly oppressive measures while the mild and Bluetooth  
332 scenarios were compatible with privacy protection standards. This phenomenon is not  
333 specific to Germany. High and similar acceptance rates for all three scenarios were also  
334 observed in similar surveys in Australia (Garrett, White, et al., 2021), the United Kingdom  
335 (Lewandowsky et al., 2021), and Taiwan (Garrett, Wang, et al., 2021).

336 While the details of the tracking technologies in the presented scenarios mattered little,  
337 privacy measures such as the option to delete all data after 6 months or the ability to opt  
338 out of data collection further increased acceptance. People seem to weigh the benefits  
339 against the risks of disclosing sensitive data when making their decisions (see also Dienlin  
340 and Metzger, 2016).

341 Taken together, these findings indicate that even though people might accept certain  
342 limitations to their privacy in a crisis, they are also mindful of privacy-respecting measures  
343 and weigh the benefits of such measures against the potential risks. Long-term tracking  
344 solutions thus cannot rely on privacy-encroaching measures. Instead they must provide  
345 sustainable privacy-preserving opportunities that are more likely to be accepted in the long  
346 term.

347 We also observed that high acceptability of digital contact tracing does not directly  
348 translate into public uptake. Trust in an app's security—in this case, the  
349 Corona-Warn-App—plays a crucial role in its actual uptake. This finding is in line with  
350 other studies exploring uptake of and attitudes toward digital contact-tracing technologies:

351 Studies in the United Kingdom (Lewandowsky et al., 2021), Germany (Munzert et al.,  
352 2021), and France (Guillon & Kergall, 2020) all show that trust in government is correlated  
353 with the acceptability and use of digital contact-tracing apps. Our study also indicates the  
354 crucial role of an app’s perceived effectiveness (i.e., its ability to help stop the spread of the  
355 virus and facilitate a return to normal life), in particular for nonusers’ intentions to  
356 download the app. At the same time, pro-free market attitudes, as a proxy for conservative  
357 political views, play only very limited role (see Libertarianism in Figure 10 and Figure 11),  
358 suggesting that these policies have not become entirely polarized in Germany. If so, a  
359 similar lack of political polarization was observed in another survey of people’s attitudes to  
360 online personalization (Kozyreva et al., in press).

### 361 **A Behavioral Framework for Digital Contact Tracing**

362 Our analyses highlight several factors that might influence people’s attitudes towards  
363 digital contact-tracing technologies, including privacy concerns, trust in the app’s security  
364 and belief about its effectiveness. We therefore suggest mapping out these factors into a  
365 behavior change framework (Michie et al., 2011) such as the one shown in Figure 12.

366 This framework consists of three components whose interaction determines behavior:  
367 capability (an individual’s psychological and physical capacity to engage in a behavior),  
368 opportunity (environmental affordances and external factors that enable or prompt a  
369 behavior), and motivation (mental processes that direct a behavior, e.g., habits, emotions,  
370 decisions; Michie et al., 2011).

371 *Capability* encompasses technical capacity (i.e., having a smartphone) and the skills  
372 required to download and use the app, as well as the digital skills and risk literacy  
373 necessary to understand risk warnings in the app and to communicate test results to the  
374 app. In our samples, the majority of participants had a smartphone (Table 1), and only  
375 about 5% of responses in Figure 8 indicated not having a smartphone as a reason for not  
376 downloading the app. Nevertheless, technical problems related to smartphones (e.g., not

377 having one or the app not working properly) played a prominent role in the open-response  
 378 questions in Figure 9. Almost all respondents who reported having downloaded the app  
 379 also reported that the app was still installed on their phone (Wave 3: 92%, Wave 4: 93%)  
 380 and that they kept Bluetooth switched on either always or when leaving the house (Wave  
 381 3: 95%, Wave 4: 93%; Appendix Table A3).



**Figure 12:** Behavioral framework for digital contact tracing. Adapted from the behavior change wheel (Michie et al., 2011)

382 *Opportunity* encompasses all the social and physical factors external to the individual  
 383 themselves. Social factors include successful communication of the app's advantages and  
 384 how to use it, as well as risk communication that explains the risk warnings and associated  
 385 individual actions. Physical factors include the app's architecture (e.g., where data are  
 386 stored, the system's security) and the broader system in which the app is embedded, such  
 387 as the health care system and how it facilitates successful app usage. Connecting  
 388 opportunity in this behavioral framework to the factors that contribute to effectiveness

389 presented in Figure 1, it is clear that a digital contact-tracing app must be integrated into  
390 the national health care system in order to ensure ease of use (e.g., communicating a  
391 positive test result anonymously and without friction).

392 Decentralized privacy-respecting applications like the Corona-Warn-App represent a  
393 laudable attempt to create an opportunity to contain the virus spread that rests on the  
394 data minimization and protection principles outlined in Article 5 of the European Union’s  
395 General Data Protection Regulation (European Parliament, 2016). Yet clear  
396 communication of the app’s privacy model and its risk model is also necessary. Many of  
397 our respondents in Waves 3 and 4 did not understand how the Corona-Warn-App works.  
398 For instance, only 35% (Wave 3) and 25% (Wave 4) of respondents who had not  
399 downloaded the Corona-Warn-App knew that it uses Bluetooth technology—compared to  
400 76% (Wave 3) and 65% (Wave 4) of respondents who had downloaded the app (Appendix  
401 Figure A4). The same difference in knowledge was observed for Australia’s COVIDSafe  
402 app (Garrett, White, et al., 2021). Poorly informed decision making or a knowledge gap  
403 appears to be affecting uptake.

404 *Motivation* here encompasses two key factors that are supported by our analyses of  
405 predictors of and reasons for downloading the Corona-Warn-App. One factor is people’s  
406 direct motives, such as their intentions to protect themselves and others, to stay informed,  
407 and to curb the spread of the virus (Figures 8 and 9). The other is people’s underlying  
408 dispositions, such as privacy attitudes, trust in government and technology, and beliefs in  
409 the app’s effectiveness (Figures 7 and 10). Balance between these two factors is important.  
410 For instance, even people driven by prosocial motivations may decide against using a  
411 technology they do not trust with their data. When people’s direct motives conflict with  
412 underlying dispositions, the resulting trade-offs they make may be crucial to their decision  
413 to not adopt digital contact tracing.

414 Taking into account the interdependency of all these factors in a behavior system is  
415 essential not only to understanding people’s behavior regarding digital contact tracing, but

416 also to designing successful behavioral interventions and communication strategies.

417 Our study suggests several insights that should be used to shape behaviorally informed  
418 policy. First, do not compromise on privacy. As our analyses show, even though  
419 privacy-encroaching measures might initially be accepted in times of crisis, they are  
420 unlikely to be accepted long-term. Moreover, trust in the app's security was the leading  
421 predictor in Corona-Warn-App uptake in our study and data privacy concerns were among  
422 the most-cited reasons to not download the app in both multiple-choice and open-response  
423 questions. Second, educate people who have not yet downloaded the app about its  
424 technology, privacy model, and risk model. Third, make the app and uploading test results  
425 as simple as possible. Finally, address the issue of trust, for example by effectively  
426 communicating how the app preserves privacy, underlining that neither the government nor  
427 any other institutions have access to people's data.

428 Our findings suggest that arguments for digital contact-tracing technologies may be  
429 particularly effective when the messaging focuses on prosocial motives, such as contributing  
430 to stopping the spread of the virus and protecting other people's health, and personal  
431 benefits, such as protecting one's own health and being informed about one's own potential  
432 exposure. Messaging should also address people's concerns about the app's effectiveness  
433 and about security of their data. We base these conjectures on the reasons respondents  
434 gave for downloading or not downloading the app (Waves 3 and 4). The effectiveness of  
435 framing messages along these lines should be empirically tested.

436 If digital contact-tracing technologies are to become a long-term solution for managing  
437 viral infectious diseases such as COVID-19, they must be effective, understandable, and  
438 acceptable to most people.



Methods

439

440 **Participants and Procedure**

441 Four representative online samples of German participants (total retained participants  
 442  $N = 4,357$ ) were recruited through the online platform Lucid using quota sampling to  
 443 account for current population distributions with regard to age ( $> 18$  years), gender, and  
 444 residence (see Table 1 for information about the study, smartphone use, and basic  
 445 demographics, and Figure 3 for data collection times in relation to the pandemic’s  
 446 development in Germany). Appendix Table A2 provides additional information on  
 447 education and residence distribution for the four waves. The Institutional Review Board of  
 448 the Max Planck Institute for Human Development approved the surveys (approval  
 449 L2020-4).

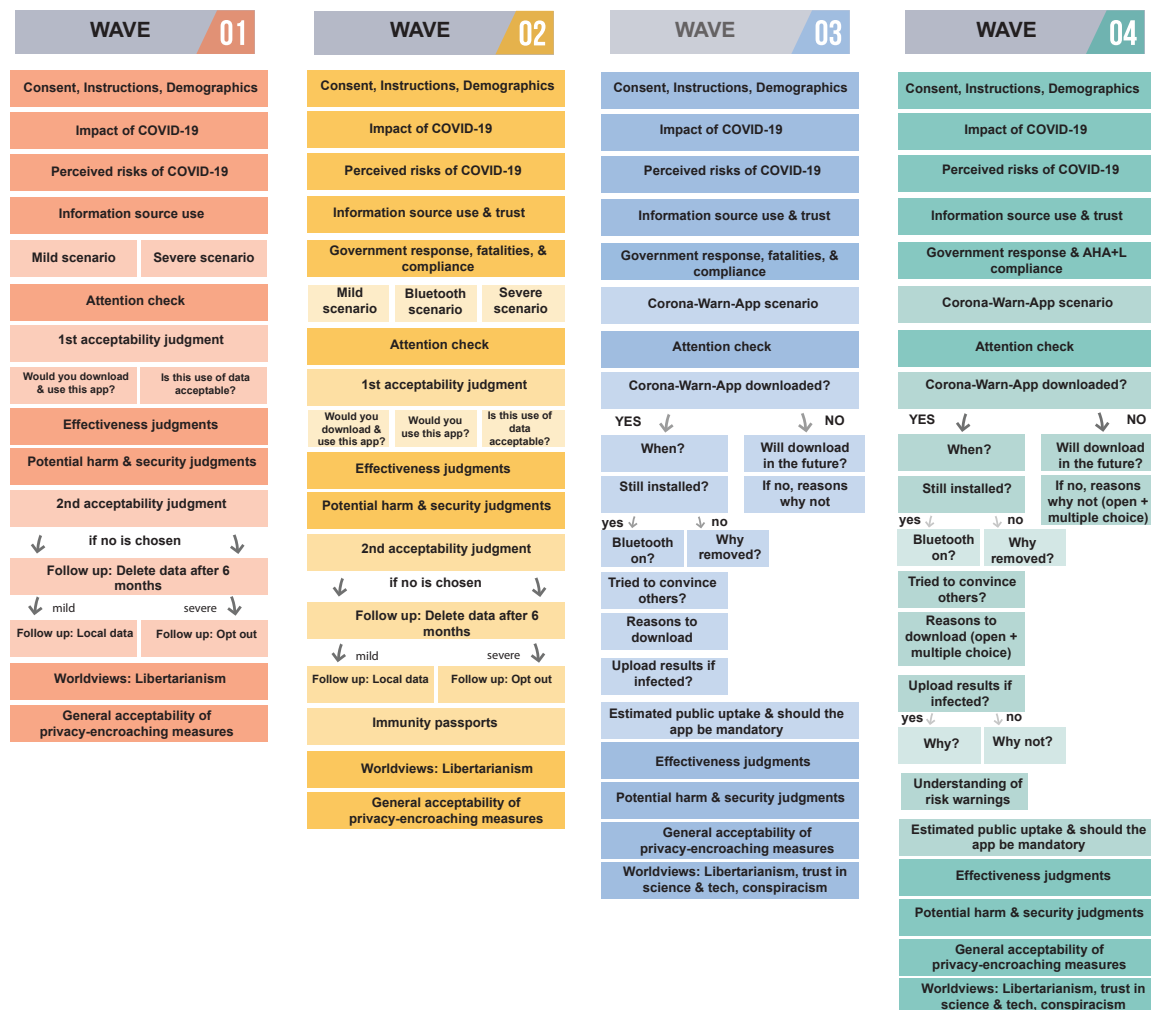
**Table 1**  
*Study and Demographic Information*

	Wave 1	Wave 2	Wave 3	Wave 4
<b>Recruitment</b>				
Date of data collection	30–31.03.20	17–22.04.20	25.08–03.09.20	02–08.11.20
Sample size (recruited)	1,224	1,665	1,633	1,518
Sample size (retained)	829	1,109	1,231	1,188
<b>Scenarios</b>				
	Severe, Mild	Severe, Mild, Bluetooth	Corona-Warn- App	Corona-Warn- App
<b>Smartphone use (%)</b>				
No	—	3.6	7.4	6.7
Yes	—	96.4	92.6	93.3
<b>Gender (%)</b>				
Female	50.4	50.2	49.6	50.6
Male	49.2	49.3	50.1	49.3
Other	0.4	0.5	0.2	0.1
<b>Age</b>				
Median	48.0	48.0	51.0	50.0
SD	17.0	16.0	17.0	18.0

450 **Study Design**

451 The project started during the peak of the first phase of the pandemic in March 2020,  
 452 when mobile tracking applications were still at the development stage and public

453 authorities around the world were considering which technology to use (e.g., centralized vs.  
 454 decentralized). After Germany introduced the Corona-Warn-App in June 2020, we  
 455 switched from hypothetical scenarios to the actual app. In total, we completed four waves  
 456 (for dates of the study waves and sample information see Table 1 and Figure 3). There  
 457 were notable differences between the content of these four waves of our study, as we  
 458 adapted them to the developments in digital contact-tracing technology (see Figure 13 for  
 459 a schematic representation of the study design across the four waves).



**Figure 13:** Design for Waves 1–4 of the survey. Each box represents a block with one or more questions pertaining to that topic or construct. Blocks in deeper shades denote common elements between all four waves. For scenario descriptions see Appendix Table B1. Full questionnaires (in German) are available at <https://osf.io/xvzph>.

460 All surveys shared a basic structure. Participants first completed an inventory of  
461 perceived risks from COVID-19, then saw one tracking policy scenario. This was followed  
462 by an inventory of people's attitudes towards the tracking technologies involved in the  
463 scenario they had seen. This inventory was the same across all scenarios, with one  
464 exception: Participants in Waves 3 and 4 were asked about the Corona-Warn-App's past  
465 and future expected impact, whereas participants in Waves 1 and 2 were only asked about  
466 an app's potential impact. Participants also answered a comprehension question; those who  
467 failed to correctly identify the scenario they had seen from three alternatives were excluded  
468 from the analysis. The surveys concluded with a query of people's political worldviews.

469 The details of these basic building blocks—perceived risk, scenario, attitudes toward  
470 scenario, comprehension question, and political worldview—differed between waves.  
471 Starting in Wave 2, we included questions about participants' assessment of the  
472 government's response, estimation of fatalities, and personal compliance with social  
473 distancing rules. Starting in Wave 3, we added worldview items such as attitudes towards  
474 science and technology and belief in conspiracy narratives. The scenarios also differed  
475 between waves. In Waves 1 and 2, participants were randomly assigned to one of two  
476 (Wave 1) or three (Wave 2) hypothetical scenarios, whereas in Waves 3 and 4 they saw a  
477 description of the Corona-Warn-App.

478 *Scenarios:* The first two waves presented hypothetical scenarios about potential  
479 tracking technologies. In the mild scenario, the public could voluntarily download an app.  
480 In the severe scenario, all mobile users would automatically be included in data collection  
481 via telecommunication tracking with no possibility to opt out, and the government could  
482 issue quarantine orders and use the tracking data to locate and fine people who violated  
483 them. Wave 2 also included a third hypothetical scenario, the Bluetooth scenario, in which  
484 people's phones would exchange messages anonymously whenever they were in proximity.  
485 Use of the app, which was modeled after the then-announced decentralized exposure  
486 notification systems by Apple and Google, was voluntary. The last two waves surveyed

487 attitudes towards the actual Corona-Warn-App, which was launched in Germany on 16  
488 June 2020. See Appendix Table B1 for descriptions of all scenarios.

489 *Acceptability and uptake:* In Waves 1 and 2, participants answered a series of questions  
490 probing their acceptance of the scenario they had viewed, as well as their willingness to  
491 adopt the app described in the scenario. Binary acceptability judgements (“Would you  
492 download and use the app?” for the mild and Bluetooth scenarios, and “Is this use of the  
493 tracking data acceptable?” for the severe scenario) were introduced twice: immediately  
494 after participants read the scenario and again after they had answered questions  
495 (standardized across waves) about the effectiveness and risks of the app presented in the  
496 scenario. Participants who answered “No” after the second set of acceptability questions  
497 were then asked follow-up questions highlighting additional privacy measures by asking  
498 whether their decision would change if the government (or Google and Apple in the  
499 Bluetooth scenario) were obliged to delete all data and to stop tracking after 6 months. In  
500 the mild and severe scenarios, an additional clause was introduced allowing for people to  
501 opt out of data collection (see Appendix Table B3 for all questions). In Waves 3 and 4,  
502 after participants read the Corona-Warn-App scenario, they were asked whether they had  
503 downloaded the app or planned to download it in the future; they also answered questions  
504 about their app usage as well as reasons to download/not download the app and to  
505 upload/not upload their test results in the app (multiple selections allowed). In Wave 4 we  
506 asked participants to describe their reasons in their own words using an open-response  
507 question before presenting them with the same question in a multiple-choice format with  
508 set options.

509 *Perceptions of risk and effectiveness of tracking technologies:* After answering questions  
510 about downloads and acceptability, participants answered two further blocks of questions:  
511 one probing their perception of the app’s effectiveness and another probing their perception  
512 of potential risks associated with using the app (see Appendix Tables B7 and B8 for the  
513 full list of questions).

514 *Privacy attitudes:* We asked respondents to indicate how acceptable they found the  
515 government taking measures that could limit the spread of the virus during the COVID-19  
516 pandemic but also compromise people’s privacy. Such hypothetical measures included  
517 giving the government access to people’s medical records, tracking people’s location using  
518 mobile phone data, or temporarily relaxing data protection regulations (for a full list, see  
519 Appendix Table B6).

520 *Worldviews:* At the end of the survey, we collected information about participants’  
521 worldviews, including attitudes toward the free market (based on Heath and Gifford, 2006;  
522 Lewandowsky et al., 2013), which were scored such that higher averaged responses reflected  
523 more conservative/libertarian worldviews. In Waves 3 and 4, we also surveyed respondents’  
524 trust in science and endorsement of conspiracy beliefs. To measure conspiracy beliefs in  
525 Wave 3, we adapted a general conspiracy scale from Imhoff and Bruder (2014), selecting  
526 the five items with the highest item-total correlations and adding one additional item  
527 specifically tailored to the COVID-19 pandemic (“Selfish interests have conspired to  
528 convince the public that COVID-19 is a major threat,” designed based on the conspiracy  
529 beliefs inventory from van der Linden et al., 2021). In Wave 4, we created our own items  
530 based on COVID-19-related conspiracy narratives that were growing in popularity at the  
531 time. To counteract this exposure to conspiracy narratives, we included a debriefing flyer  
532 based on the European Commission (2020) at the end of the survey. For all worldview  
533 items, see Appendix Table B5.

## 534 **Data Analysis and Reporting**

535 To examine predictors of Corona-Warn-App downloads, we used logistic regression that  
536 predicted downloads for Waves 3 and 4 of the survey. To analyze the open-response  
537 question on why people did or did not download the app, we counted the frequencies with  
538 which terms occurred across different respondent’s responses and the frequency with which  
539 the terms co-occurred within the same respondent’s response. Based on these frequencies

540 we built co-occurrence networks of unigrams (individual words) using a simple feature  
541 extraction method from the Python package scikit-learn (version 0.24.1) for collecting  
542 unigram frequencies (Pedregosa et al., 2011); we used the graph-tool library (version 2.37)  
543 to build the networks of unigrams according to their co-occurrences within a response  
544 (Peixoto, 2014). In this article, we report selected results relevant for understanding public  
545 attitudes towards privacy and tracking technologies during the pandemic. Descriptive  
546 results for all four waves of the survey with all collected information are available online  
547 here: [https://ai\\_society.mpib.dev/tracking-app](https://ai_society.mpib.dev/tracking-app).

### 548 **Data availability**

549 Anonymized data and code are available at Open Science Framework (OSF)  
550 (<https://osf.io/xvzph>).

### 551 **Supporting information**

552 Appendix A at the end of this manuscript includes additional figures and tables to  
553 support our reporting. Appendix B includes tables with items used in our figures and  
554 covariates for our models. The study questionnaires in German are available on  
555 <https://osf.io/xvzph> .

### 556 **Funding and acknowledgements**

557 The study was funded by the planning grant of the Volkswagen Foundation to RH, SL,  
558 and SH (Initiative “Artificial Intelligence and the Society of the Future”). SL was  
559 supported by a Research Award from the Humboldt Foundation in Germany while this  
560 research was conducted. The study is part of an international initiative and we are very  
561 grateful to our partners at the University of Melbourne Complex Human Data Hub, led by  
562 Simon Dennis and supported by Andrew Perfors, Yoshihisa Kashima, Joshua White, and  
563 Daniel Little. The authors thank the Volkswagen Foundation for providing financial  
564 support and Lucid for their help with data collection. We are also very thankful to Deb

565 Ain for editing the manuscript, to Marlene Wulf and Larissa Samaan for research  
566 assistance, and to our colleagues at the Center for Adaptive Rationality for their feedback  
567 and productive discussions.

568 **Authors' contributions**

569 SL, PG, SH, PLS, AK, TP, and RH adapted and designed the study; AK and PLS  
570 managed and conducted research; AK and PLS analyzed data with support from SH, SL,  
571 and PG; AK, PLS, SL, PG, SH, TP and RH wrote the manuscript. Correspondence  
572 concerning this article should be addressed to Anastasia Kozyreva, Center for Adaptive  
573 Rationality, Max Planck Institute for Human Development, Berlin. Email:  
574 kozyreva@mpib-berlin.mpg.de

## References

575

- 576 Aleta, A., Martín-Corral, D., Pastore y Piontti, A., Ajelli, M., Litvinova, M., Chinazzi, M.,  
577 Dean, N. E., Halloran, M. E., Longini Jr., I. M., Merler, S., Pentland, A.,  
578 Vespignani, A., Moro, E., & Moreno, Y. (2020). Modelling the impact of testing,  
579 contact tracing and household quarantine on second waves of COVID-19. *Nature*  
580 *Human Behaviour*, 4(9), 964–971. <https://doi.org/10.1038/s41562-020-0931-9>
- 581 Bastian, M., Heymann, S., & Jacomy, M. (2009). *Gephi: An open source software for*  
582 *exploring and manipulating networks*.  
583 <http://www.aaai.org/ocs/index.php/ICWSM/09/paper/view/154>
- 584 Bianconi, G., Sun, H., Rapisardi, G., & Arenas, A. (2021). Message-passing approach to  
585 epidemic tracing and mitigation with apps. *Physical Review Research*, 3(1), Article  
586 L012014. <https://doi.org/10.1103/PhysRevResearch.3.L012014>
- 587 Cho, H., Ippolito, D., & Yu, Y. W. (2020). Contact tracing mobile apps for COVID-19:  
588 Privacy considerations and related trade-offs.
- 589 Colizza, V., Grill, E., Mikolajczyk, R., Cattuto, C., Kucharski, A., Riley, S., Kendall, M.,  
590 Lythgoe, K., Bonsall, D., Wymant, C., Abeler-Dörner, L., Ferretti, L., & Fraser, C.  
591 (2021). Time to evaluate COVID-19 contact-tracing apps. *Nature Medicine*, 27(3),  
592 361–362. <https://doi.org/10.1038/s41591-021-01236-6>
- 593 Danquah, L. O., Hasham, N., MacFarlane, M., Conteh, F. E., Momoh, F., Tedesco, A. A.,  
594 Jambai, A., Ross, D. A., & Weiss, H. A. (2019). Use of a mobile application for  
595 Ebola contact tracing and monitoring in northern Sierra Leone: A proof-of-concept  
596 study. *BMC Infectious Diseases*, 19(1), Article 810.  
597 <https://doi.org/10.1186/s12879-019-4354-z>
- 598 Dienlin, T., & Metzger, M. J. (2016). An extended privacy calculus model for SNSs:  
599 Analyzing self-disclosure and self-withdrawal in a representative U.S. sample.  
600 *Journal of Computer-Mediated Communication*, 21(5), 368–383.  
601 <https://doi.org/10.1111/jcc4.12163>



- 602 European Commission. (2020). So erkennt man Verschwörungstheorien.
- 603 European Parliament. (2016). Regulation (EU) 2016/679 of the European Parliament and  
604 of the Council of 27 April 2016 on the protection of natural persons with regard to  
605 the processing of personal data and on the free movement of such data, and  
606 repealing directive 95/46/EC (General Data Protection Regulation).  
607 <http://data.europa.eu/eli/reg/2016/679/oj>
- 608 Ferretti, L., Wymant, C., Kendall, M., Zhao, L., Nurtay, A., Abeler-Dörner, L., Parker, M.,  
609 Bonsall, D., & Fraser, C. (2020). Quantifying SARS-CoV-2 transmission suggests  
610 epidemic control with digital contact tracing. *Science*, *368*(6491), Article eabb6936.  
611 <https://doi.org/10.1126/science.abb6936>
- 612 Garrett, P. M., Wang, Y., White, J. P., Hsieh, S., Strong, C., Lee, Y.-C., Lewandowsky, S.,  
613 Dennis, S., & Yang, C.-T. (2021). Young adults view smartphone tracking  
614 technologies for COVID-19 as acceptable: The case of Taiwan. *International Journal*  
615 *of Environmental Research and Public Health*, *18*(3), Article 1332.  
616 <https://doi.org/10.3390/ijerph18031332>
- 617 Garrett, P. M., White, J. P., Lewandowsky, S., Kashima, Y., Perfors, A., Little, D. R.,  
618 Geard, N., Mitchell, L., Tomko, M., & Dennis, S. (2021). The acceptability and  
619 uptake of smartphone tracking for COVID-19 in Australia. *PLOS ONE*, *16*(1),  
620 Article e0244827. <https://doi.org/10.1371/journal.pone.0244827>
- 621 Gelman, A. (2008). Scaling regression inputs by dividing by two standard deviations.  
622 *Statistics in Medicine*, *27*(15), 2865–2873. <https://doi.org/10.1002/sim.3107>
- 623 Grantz, K. H., Meredith, H. R., Cummings, D. A. T., Metcalf, C. J. E., Grenfell, B. T.,  
624 Giles, J. R., Mehta, S., Solomon, S., Labrique, A., Kishore, N., Buckee, C. O., &  
625 Wesolowski, A. (2020). The use of mobile phone data to inform analysis of  
626 COVID-19 pandemic epidemiology. *Nature Communications*, *11*(1), Article 4961.  
627 <https://doi.org/10.1038/s41467-020-18190-5>

- 628 Guillon, M., & Kergall, P. (2020). Attitudes and opinions on quarantine and support for a  
629 contact-tracing application in France during the COVID-19 outbreak. *Public Health*,  
630 *188*, 21–31. <https://doi.org/10.1016/j.puhe.2020.08.026>
- 631 Habersaat, K. B., Betsch, C., Danchin, M., Sunstein, C. R., Böhm, R., Falk, A.,  
632 Brewer, N. T., Omer, S. B., Scherzer, M., Sah, S., Fischer, E. F., Scheel, A. E.,  
633 Fancourt, D., Kitayama, S., Dubé, E., Leask, J., Dutta, M., MacDonald, N. E.,  
634 Temkina, A., . . . Butler, R. (2020). Ten considerations for effectively managing the  
635 COVID-19 transition. *Nature Human Behaviour*, *4*(7), 677–687.  
636 <https://doi.org/10.1038/s41562-020-0906-x>
- 637 Hart, V., Siddarth, D., Cantrell, B., Tretikov, L., Eckersley, P., Langford, J., Leibrand, S.,  
638 Kakade, S., Latta, S., Lewis, D., Tessaro, S., & Weyl, G. (2020). Outpacing the  
639 virus: Digital response to containing the spread of covid-19 while mitigating privacy  
640 risks. <https://ethics.harvard.edu/outpacing-virus>
- 641 Heath, Y., & Gifford, R. (2006). Free-market ideology and environmental degradation: The  
642 case of belief in global climate change. *Environment and Behavior*, *38*(1), 48–71.  
643 <https://doi.org/10.1177/0013916505277998>
- 644 Hinch, R., Probert, W., Nurtay, A., Kendall, M., Wymant, C., Hall, M., Lythgoe, K.,  
645 Bulas Cruz, A., Zhao, L., Stewart, A., Ferretti, L., Parker, M., Montero, D.,  
646 Warren, J., Mather, N. K., Finkelstein, A., Abeler-Dörner, L., Bonsall, D., &  
647 Fraser, C. (2020). Effective configurations of a digital contact tracing app: A report  
648 to NHSX [Accessed: 2021-02-09]. [https://github.com/BDI-pathogens/covid-  
649 19\\_instant\\_tracing/blob/master/Report%20-%20Effective%20Configurations%  
650 20of%20a%20Digital%20Contact%20Tracing%20App.pdf](https://github.com/BDI-pathogens/covid-19_instant_tracing/blob/master/Report%20-%20Effective%20Configurations%20of%20a%20Digital%20Contact%20Tracing%20App.pdf)
- 651 Imhoff, R., & Bruder, M. (2014). Speaking (un-)truth to power: Conspiracy mentality as a  
652 generalised political attitude. *European Journal of Personality*, *28*(1), 25–43.  
653 <https://doi.org/10.1002/per.1930>

- 654 Kahn, J. P., & Johns Hopkins Project on Ethics and Governance of Digital Contact  
655 Tracing Technologies (Eds.). (2020). *Digital contact tracing for pandemic response:  
656 Ethics and governance guidance*. Johns Hopkins University Press.  
657 <https://doi.org/doi:10.1353/book.75831>
- 658 Kaptchuk, G., Goldstein, D. G., Hargittai, E., Hofman, J., & Redmiles, E. M. (2020). How  
659 good is good enough for COVID19 apps? The influence of benefits, accuracy, and  
660 privacy on willingness to adopt. *arXiv preprint arXiv:2005.04343*.
- 661 Kozyreva, A., Lorenz-Spreen, P., Hertwig, R., Lewandowsky, S., & Herzog, S. (in press).  
662 Public attitudes towards algorithmic personalization and use of personal data  
663 online: Evidence from Germany, Great Britain, and the US.  
664 <https://doi.org/10.31234/osf.io/3q4mg>
- 665 Lewandowsky, S., Dennis, S., Perfors, A., Kashima, Y., White, J. P., Garrett, P.,  
666 Little, D. R., & Yesilada, M. (2021). Public acceptance of privacy-encroaching  
667 policies to address the COVID-19 pandemic in the United Kingdom. *PLOS ONE*,  
668 *16*(1), Article e0245740. <https://doi.org/10.1371/journal.pone.0245740>
- 669 Lewandowsky, S., Gignac, G. E., & Oberauer, K. (2013). The role of conspiracist ideation  
670 and worldviews in predicting rejection of science. *PLOS ONE*, *8*(10), Article  
671 e75637. <https://doi.org/10.1371/journal.pone.0075637>
- 672 Michie, S., van Stralen, M. M., & West, R. (2011). The behaviour change wheel: A new  
673 method for characterising and designing behaviour change interventions.  
674 *Implementation Science*, *6*(1), Article 42.  
675 <https://doi.org/https://doi.org/10.1186/1748-5908-6-42>
- 676 Munzert, S., Selb, P., Gohdes, A., Stoetzer, L. F., & Lowe, W. (2021). Tracking and  
677 promoting the usage of a COVID-19 contact tracing app. *Nature Human Behaviour*,  
678 *5*(2), 247–255. <https://doi.org/10.1038/s41562-020-01044-x>
- 679 Oliver, N., Lepri, B., Sterly, H., Lambiotte, R., Deletaille, S., De Nadai, M., Letouzé, E.,  
680 Salah, A. A., Benjamins, R., Cattuto, C., Colizza, V., de Cordes, N.,

- 681 Fraiberger, S. P., Koebe, T., Lehmann, S., Murillo, J., Pentland, A., Pham, P. N.,  
682 Pivetta, F., . . . Vinck, P. (2020). Mobile phone data for informing public health  
683 actions across the COVID-19 pandemic life cycle. *Science Advances*, 6(23), Article  
684 eabc0764. <https://doi.org/10.1126/sciadv.abc0764>
- 685 O’Neill, P. H., Ryan-Mosley, T., & Johnson, B. (2020). A flood of coronavirus apps are  
686 tracking us. now it’s time to keep track of them.  
687 [https://www.technologyreview.com/2020/05/07/1000961/launching-mittr-covid-](https://www.technologyreview.com/2020/05/07/1000961/launching-mittr-covid-tracing-tracker)  
688 [tracing-tracker](https://www.technologyreview.com/2020/05/07/1000961/launching-mittr-covid-tracing-tracker)
- 689 Pedregosa, F., Varoquaux, G., Gramfort, A., Michel, V., Thirion, B., Grisel, O.,  
690 Blondel, M., Prettenhofer, P., Weiss, R., Dubourg, V., Vanderplas, J., Passos, A.,  
691 Cournapeau, D., Brucher, M., Perrot, M., & Duchesnay, E. (2011). Scikit-learn:  
692 Machine learning in Python. *Journal of Machine Learning Research*, 12, 2825–2830.
- 693 Peixoto, T. P. (2014). The graph-tool python library. *figshare*.  
694 <https://doi.org/10.6084/m9.figshare.1164194>
- 695 Redmiles, E. M. (2020). User concerns & tradeoffs in technology-facilitated contact tracing.  
696 *arXiv preprint arXiv:2004.13219*. <https://doi.org/10.1145/3428093>
- 697 Robert Koch Institute. (2020). *Die Pandemie in Deutschland in den nächsten Monaten -*  
698 *Ziele, Schwerpunktthemen und Instrumente für den Infektionsschutz.*  
699 *Strategie-Ergänzung, Stand 23.10.2020 [The pandemic in Germany in the coming*  
700 *months: Goals, key issues, and tools for infection control. Strategy supplement, as of*  
701 *23.10.2020]* (tech. rep.). [https://www.rki.de/DE/Content/InfAZ/N/Neuartiges\\_](https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Strategie_Ergaenzung_Covid.html)  
702 [Coronavirus/Strategie\\_Ergaenzung\\_Covid.html](https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Strategie_Ergaenzung_Covid.html)
- 703 Rodríguez, P., Graña, S., Alvarez-León, E. E., Battaglini, M., Darias, F. J., Hernán, M. A.,  
704 López, R., Llana, P., Martín, M. C., RadarCovidPilot Group, Ramirez-Rubio, O.,  
705 Romani, A., Suárez-Rodríguez, B., Sánchez-Monedero, Arenas, A., & Lacasa, L.  
706 (2021). A population-based controlled experiment assessing the epidemiological

- 707 impact of digital contact tracing. *Nature Communications*, 12(1), Article 587.  
708 <https://doi.org/10.1038/s41467-020-20817-6>
- 709 Simko, L., Chang, J. L., Jiang, M., Calo, R., Roesner, F., & Kohno, T. (2020). COVID-19  
710 contact tracing and privacy: A longitudinal study of public opinion. *arXiv preprint*  
711 *arXiv:2012.01553*.
- 712 van der Linden, S., Panagopoulos, C., Azevedo, F., & Jost, J. T. (2021). The paranoid  
713 style in American politics revisited: An ideological asymmetry in conspiratorial  
714 thinking. *Political Psychology*, 42(1), 23–51. <https://doi.org/10.1111/pops.12681>
- 715 Whitelaw, S., Mamas, M. A., Topol, E., & Van Spall, H. G. C. (2020). Applications of  
716 digital technology in COVID-19 pandemic planning and response. *The Lancet*  
717 *Digital Health*, 2(8), e435–e440. [https://doi.org/10.1016/S2589-7500\(20\)30142-4](https://doi.org/10.1016/S2589-7500(20)30142-4)
- 718 World Health Organization. (2020). *COVID-19 operationalization of the global response*  
719 *strategy in the WHO European Region: September 2020* (tech. rep.). WHO Regional  
720 Office for Europe. [https://apps.who.int/iris/bitstream/handle/10665/334167/WHO-](https://apps.who.int/iris/bitstream/handle/10665/334167/WHO-EURO-2020-1073-408190-55167-eng.pdf)  
721 [EURO-2020-1073-408190-55167-eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/334167/WHO-EURO-2020-1073-408190-55167-eng.pdf)
- 722 Wymant, C., Ferretti, L., Tsallis, D., Charalambides, M., Abeler-Dörner, L., Bonsall, D.,  
723 Hinch, R., Kendall, M., Milsom, L., Ayres, M., Holmes, C., Briers, M., & Fraser, C.  
724 (2021). The epidemiological impact of the NHS COVID-19 app [Accessed:  
725 2021-02-09]. [https://github.com/BDI-pathogens/covid-](https://github.com/BDI-pathogens/covid-19_instant_tracing/blob/master/Epidemiological_Impact_of_the_NHS_COVID_19_App_Public_Release_V1.pdf)  
726 [19\\_instant\\_tracing/blob/master/Epidemiological\\_Impact\\_of\\_the\\_NHS\\_](https://github.com/BDI-pathogens/covid-19_instant_tracing/blob/master/Epidemiological_Impact_of_the_NHS_COVID_19_App_Public_Release_V1.pdf)  
727 [COVID\\_19\\_App\\_Public\\_Release\\_V1.pdf](https://github.com/BDI-pathogens/covid-19_instant_tracing/blob/master/Epidemiological_Impact_of_the_NHS_COVID_19_App_Public_Release_V1.pdf)

Appendix A

Supplementary Information: Figures and Tables for the study data analysis

Table A1

COVID-19 Contact-Tracing Apps and Downloads by Selected Countries

Country	Name	Developer/Deployer	Technology	Release date	Downloads (N)	Downloads (%)	Numbers updated on
Germany	Corona-Warn-App	Deutsche Telekom, SAP / Robert Koch Institute	Bluetooth, Google/Apple	16.06.2020	26,700,000	32%	01.04.2021
United Kingdom	NHS COVID-19 App	NHS	Bluetooth, Google/Apple	24.09.2020	20,900,000	31%	23.12.2020**
Switzerland	SwissCovid	Swiss National Covid-19 Science Task Force	Bluetooth, Google/Apple	23.07.2020	3,059,000	35%	06.04.2021
Finland	Koronavilkku	Finnish Institute of Health and Welfare	Bluetooth, Google/Apple	31.08.2020	2,500,000	45%	05.11.2020**
France	TousAntiCovid	Inria	Bluetooth	22.10.2020	13,000,000	19%	01.03.2021**
Italy	Immuni	Bending Spoons	Bluetooth, Google/Apple	01.06.2020	10.400.709	17%	01.04.2021
Spain	RadarCOVID	Ministry of Economic Affairs and Digital Transformation	Bluetooth, Google/Apple	August 2020	7,200,000	15%	28.03.2021
Singapore	TraceTogether	GovTech Agency	Bluetooth, BlueTrace	20.03.2020	4,700,000	82%	07.04.2021*
Australia	COVIDSafe	Australian government	Bluetooth	26.04.2020	7,000,000	28%	07.04.2020*
India	Aarogya Setu	Indian national government	Bluetooth, Location	02.04.2020	173,700,000	13%	07.04.2020

\*the app's website provides only approximate numbers of downloads and no information about when the numbers were updated. \*\* the app's website provides no information about downloads, the reported numbers are taken from the press coverage or statista.com.

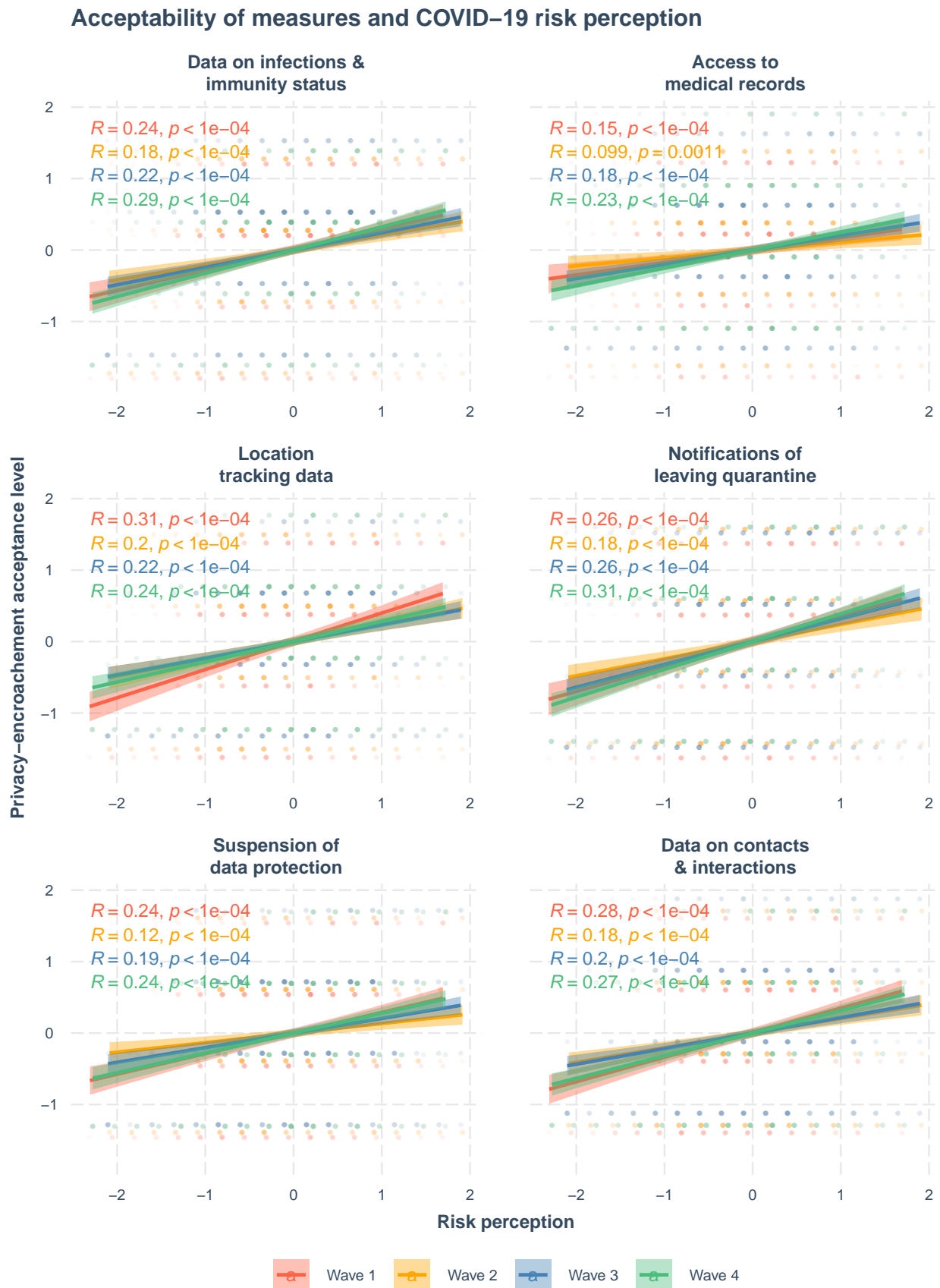
**Table A2**  
*Demographic Information*

	Wave 1	Wave 2	Wave 3	Wave 4
<b>Sample size</b>				
N	829	1,109	1,231	1,188
<b>Smartphone use (%)</b>				
No	—	3.6	7.4	6.7
Yes	—	96.4	92.6	93.3
<b>Gender (%)</b>				
Female	50.4	50.2	49.6	50.6
Male	49.2	49.3	50.1	49.3
Other	0.4	0.5	0.2	0.1
<b>Age</b>				
Median	48.0	48.0	51.0	50.0
SD	17.0	16.0	17.0	18.0
<b>Education (%)</b>				
University	25.8	23.2	21.5	21.7
<i>Abitur</i> (high school)	26.8	27.8	23.5	26.1
<i>Realschule</i> (secondary school)	33.3	35.3	36.6	36.1
<i>Hauptschule</i> (secondary school)	13.5	13.1	17.6	15.5
None	0.6	0.7	0.7	0.6
<b>Residence (%)</b>				
Bremen, Hamburg, Niedersachsen, Schleswig-Holstein	16.2	16.3	16.5	16.6
Nordrhein-Westfalen	22.7	22.2	21.3	23.1
Hessen, Rheinland-Pfalz, Saarland	13.9	15.6	14.5	13.3
Baden-Württemberg	11.2	9.8	12.0	10.4
Bayern	14.8	14.6	14.6	14.8
Berlin, Brandenburg, Mecklenburg-Vorpommern, Sachsen-Anhalt	13.8	14.2	13.4	13.8
Sachsen, Thüringen	7.5	7.3	7.7	8.0

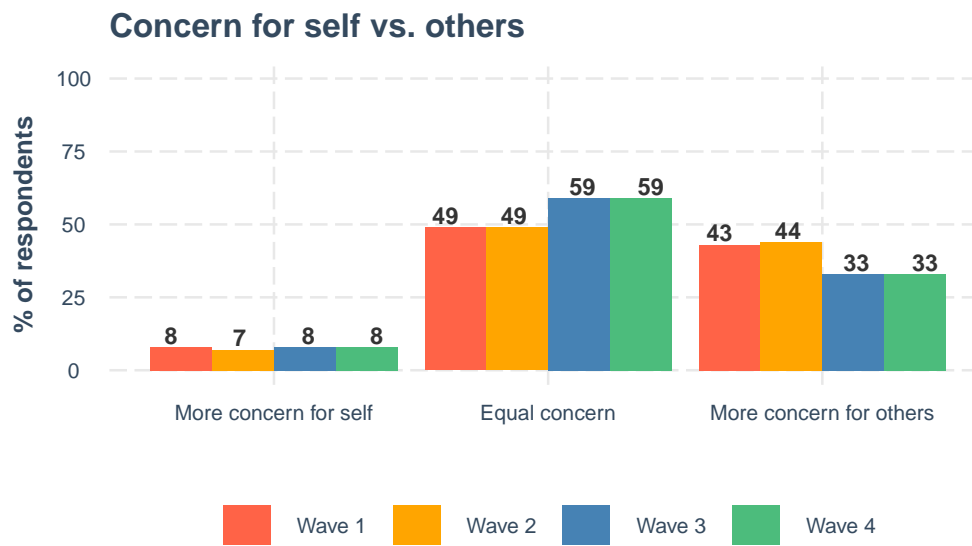
**Table A3**  
*Corona-Warn-App Usage*

	Wave 3	Wave 4
<b>Have you downloaded the Corona-Warn-App?</b>		
Yes	36.2	40.7
No	63.8	59.3
<b>Is the Corona-Warn-App still installed on your phone?</b>		
Yes	91.6	93.2
No	8.4	6.8
<b>Do you generally have Bluetooth switched on so the Corona-Warn-App can operate effectively?</b>		
Yes	76.9	74.4
No	3.3	4.9
Only when I leave the house	18.0	18.4
I don't know	1.8	2.2
<b>Have you made any attempts to convince your friends and/or family to download the Corona-Warn-App?</b>		
Yes	73.1	67.3
No	26.9	32.7
<b>Will you download the Corona-Warn-App in the future?</b>		
Yes	23.9	24.7
No	76.1	75.3
<b>Do you think that the government should make the Corona-Warn-App mandatory?</b>		
Yes	28.8	30.1
No	71.2	69.9

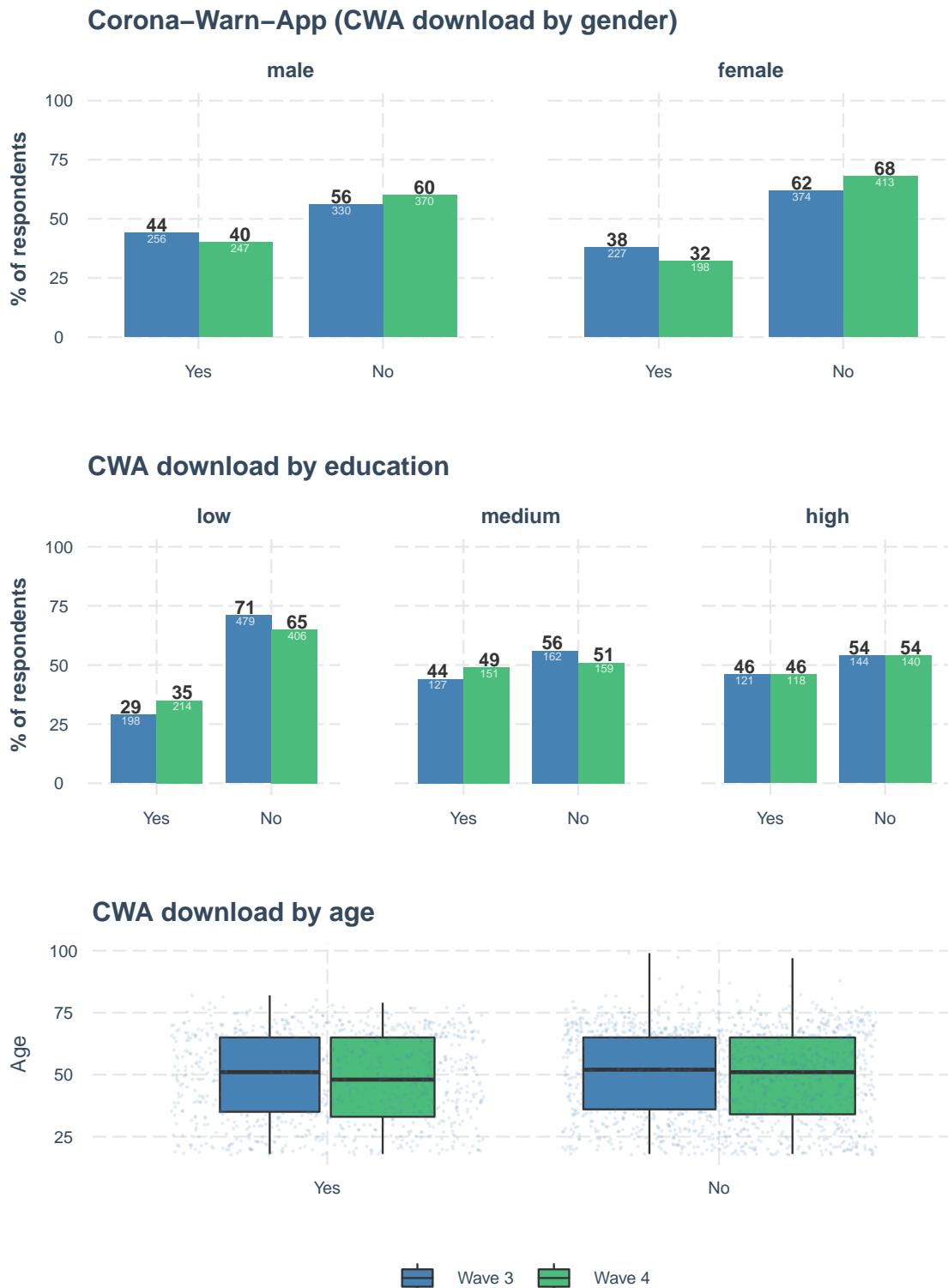




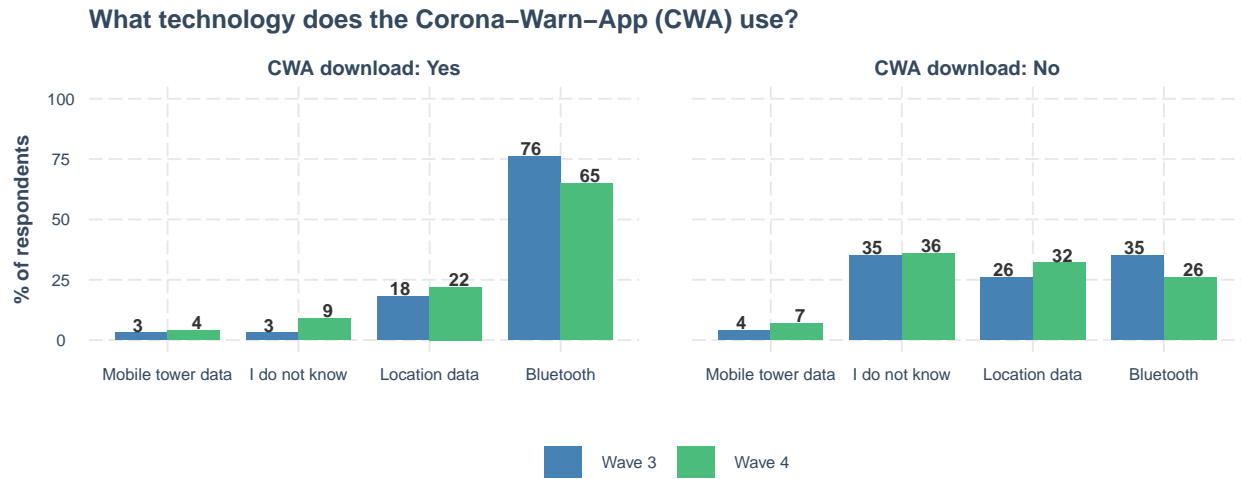
**Figure A1:** Correlations between acceptability of various privacy-encroaching measures and COVID-19 risk perceptions within respondents across all four waves of the survey. Variable for risk perception is a combined score for four measures from Figure 4. All variables are center-scaled. Individual responses are jittered. Lines represent simple linear regression slopes and their 95% confidence band.



**Figure A2:** Concern for self and others: COVID-19 risk perceptions within respondents. Responses are grouped into three categories: (1) respondents who rated concern for themselves higher than concern for others, (2) respondents who gave the same rating to both, and (3) respondents who rated concern for others higher than concern for themselves. Questions: (1) Concern self: How concerned are you that you might become infected with COVID-19? (2) Concern others: How concerned are you that somebody you know might become infected with COVID-19?"

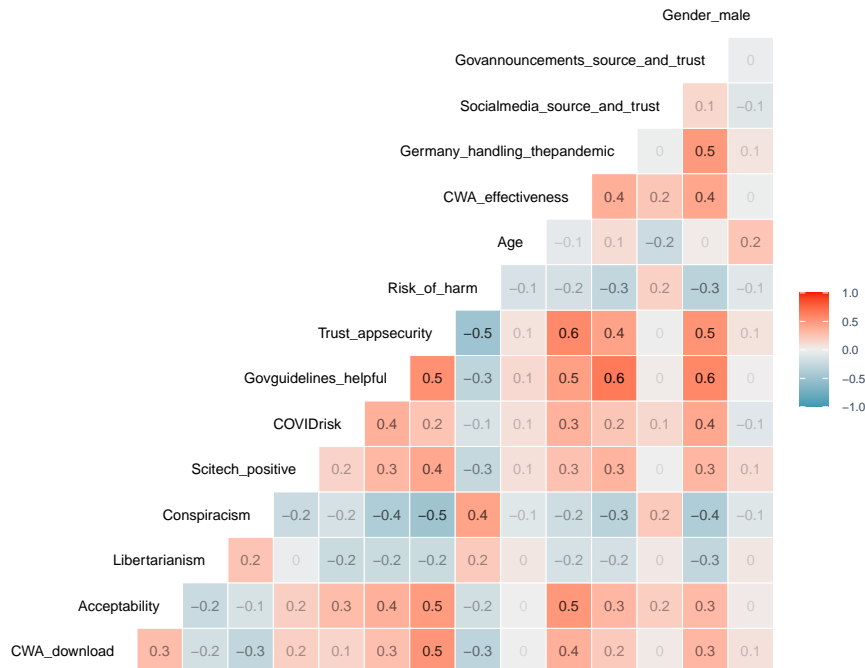


**Figure A3:** Reported Corona-Warn-App downloads by demographics. In education, “low” comprises “*Realschule*,” “*Hauptschule*,” and “None;” “medium” refers to “*Abitur*;” and “high” refers to “University”. Barplots: Black numbers correspond to percentages; white numbers correspond to number of respondents. Boxplots: Boxes show the interquartile range (IQR) of the age distribution (values between the 25th and 75th percentiles); black lines inside boxes correspond to the median value. Lower and upper whiskers extend to the largest value no further than 1.5\*IQR. Individual responses are jittered both horizontally and vertically.



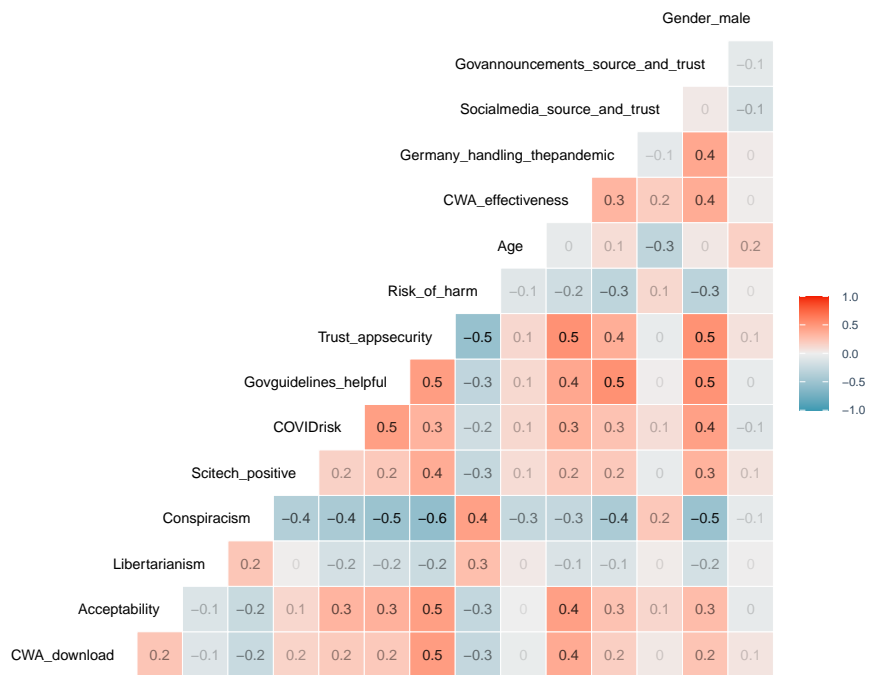
**Figure A4:** Understanding of Corona-Warn-App technology. Public perceptions of the tracking technology used by the Corona-Warn-App, grouped by whether participants reported having downloaded it. Participants who had downloaded the app were much more likely to give the correct answer, Bluetooth.

**Correlation matrix: Wave 3**



**Figure A5:** Pearson correlation matrix for variables in Figure 10, Wave 3. Positive correlations are displayed in red, negative correlations in blue, and small correlations in gray. Color intensity is proportional to the correlation coefficients.

Correlation matrix: Wave 4



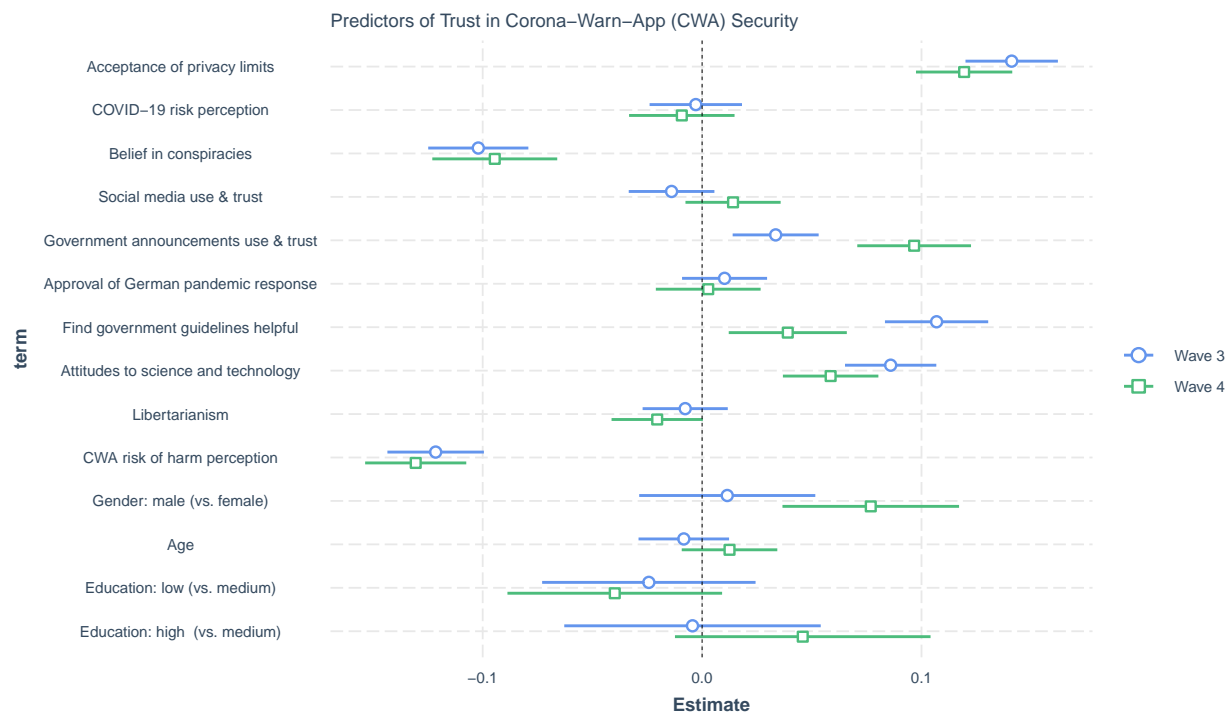
**Figure A6:** Pearson correlation matrix for variables in Figure 10, Wave 4. Positive correlations are displayed in red, negative correlations in blue, and small correlations in gray. Color intensity is proportional to the correlation coefficients.

**Table A4**  
*Regression Results for Figure 10: Predictors of Corona-Warn-App (CWA) Downloads*

	<i>Dependent variable:</i>	
	CWA downloads	
	Wave 3	Wave 4
	(1)	(2)
Trust in CWA security	2.240 (1.730,2.751)	2.006 (1.532,2.480)
Perception of CWA effectiveness	0.682 (0.303,1.061)	1.033 (0.678,1.389)
Acceptance of privacy limits	0.434 (0.079,0.789)	-0.125 (-0.457,0.207)
Approval of German pandemic response	-0.302 (-0.725,0.122)	0.031 (-0.330,0.391)
Find government guidelines helpful	-0.048 (-0.498,0.402)	-0.168 (-0.563,0.226)
Social media use and trust	0.170 (-0.165,0.504)	0.048 (-0.268,0.364)
Government announcements use and trust	0.327 (-0.090,0.743)	-0.097 (-0.488,0.294)
Belief in conspiracies	-0.188 (-0.562,0.186)	0.085 (-0.366,0.536)
Libertarianism	-0.249 (-0.577,0.080)	0.115 (-0.185,0.416)
COVID-19 risk perception	-0.005 (-0.357,0.348)	0.412 (0.054,0.770)
Attitudes to science and technology	-0.366 (-0.731,-0.001)	-0.195 (-0.530,0.140)
Gender: male (vs. female)	0.337 (0.031,0.642)	0.215 (-0.075,0.504)
Age	-0.168 (-0.489,0.154)	-0.434 (-0.751,-0.117)
CWA risk of harm perception	-0.696 (-1.097,-0.295)	-0.469 (-0.855,-0.083)
Education: low (vs. medium)	-0.704 (-1.068,-0.341)	-0.403 (-0.748,-0.058)
Education: high (vs. medium)	-0.130 (-0.554,0.294)	-0.073 (-0.480,0.335)
Constant	-0.573 (-0.871,-0.274)	-0.399 (-0.683,-0.116)
Observations	1,183	1,140

**Table A5**  
*Regression Results for Figure 11: Predictors of the Corona-Warn-App (CWA) intention to download*

	<i>Dependent variable:</i>	
	CWA intention to download Wave 3	CWA intention to download Wave 4
	(1)	(2)
Trust in CWA security	0.725 (0.560,0.891)	0.640 (0.489,0.791)
Perception of CWA effectiveness	0.295 (0.131,0.460)	0.462 (0.303,0.621)
Acceptance of privacy limits	0.257 (0.047,0.467)	-0.070 (-0.256,0.116)
Approval of German pandemic response	-0.163 (-0.391,0.066)	0.017 (-0.181,0.215)
Find government guidelines helpful	-0.021 (-0.217,0.175)	-0.073 (-0.244,0.098)
Social media use and trust	0.083 (-0.081,0.247)	0.023 (-0.124,0.169)
Government announcements use and trust	0.137 (-0.038,0.312)	-0.042 (-0.210,0.126)
Beliefs in conspiracies	-0.063 (-0.188,0.062)	0.044 (-0.190,0.279)
Libertarianism	-0.133 (-0.309,0.043)	0.062 (-0.100,0.225)
COVID-19 risk perception	-0.003 (-0.200,0.195)	0.229 (0.030,0.427)
Attitudes to science and tech	-0.149 (-0.297,-0.0004)	-0.079 (-0.216,0.057)
Gender: male (vs. female)	0.337 (0.031,0.642)	0.215 (-0.075,0.504)
Age	-0.005 (-0.014,0.005)	-0.012 (-0.022,-0.003)
CWA risk of harm perception	-0.242 (-0.382,-0.103)	-0.162 (-0.296,-0.029)
Education: low (vs. medium)	-0.704 (-1.068,-0.341)	-0.403 (-0.748,-0.058)
Education: high (vs. medium)	-0.130 (-0.554,0.294)	-0.073 (-0.480,0.335)
Constant	-2.457 (-3.916,-0.997)	-3.302 (-4.883,-1.721)
Observations	1,183	1,140



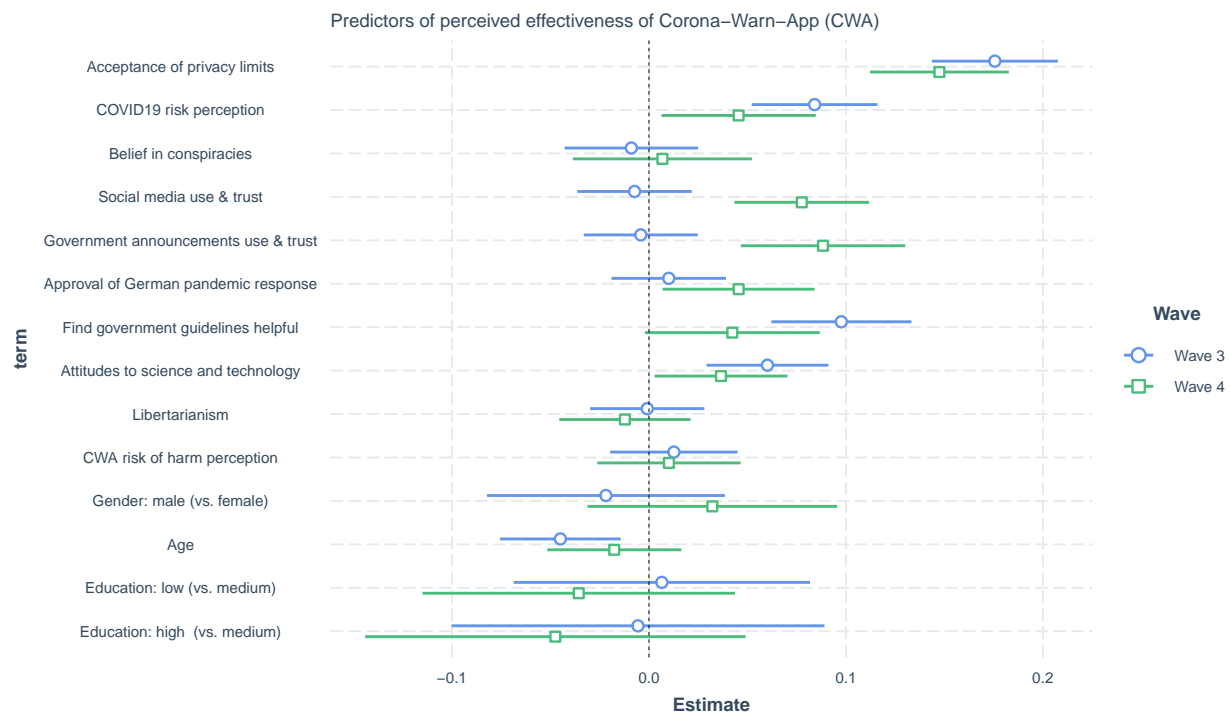
**Figure A7:** Linear regression model for trust in the Corona-Warn-App security for Waves 3 and 4. Horizontal bars span 95% confidence intervals. Dependent variable: Trust in the CWA security. Coefficients: various measures from the survey (e.g., a combined measure for trust in app security or a combined score for conspiracy beliefs; Appendix Table B9). Education was dummy coded with the reference level medium education, yielding two coefficients: low (vs. medium) and high (vs. medium) education. Following Gelman (2008), we standardized all continuous variables and the dependent variable by two standard deviations (SD) and mean centered binary variables. This way a 2-SD change in a continuous predictor variable is approximately equivalent to changing the category in a roughly balanced binary predictor variable (e.g., gender). Furthermore, because we also standardized the dependent variable by 2 SD, a slope of, say, +0.1 can be interpreted as follows: If the predictor is increased by, for instance, 1 SD of its distribution, the dependent variable increases by 0.1 SD of its distribution (while keeping all other predictors at their average values). Appendix Table A6 shows a summary of the regression results for these two models.



**Table A6**

*Regression Results for Appendix Figure A7: Trust in Corona-Warn-App Security for Waves 3 and 4*

	<i>Dependent variable:</i>	
	Trust in Corona-Warn-App security Wave 3	Wave 4
	(1)	(2)
Acceptance of privacy limits	0.276 (0.233,0.319)	0.239 (0.195,0.283)
Approval of German pandemic response	-0.005 (-0.057,0.047)	0.006 (-0.042,0.053)
Find government guidelines helpful	0.168 (0.111,0.225)	0.078 (0.024,0.132)
Social media use and trust	0.012 (-0.030,0.054)	0.028 (-0.015,0.072)
Government announcements use and trust	0.150 (0.098,0.202)	0.193 (0.142,0.245)
Belief in conspiracies	-0.197 (-0.244,-0.150)	-0.189 (-0.246,-0.132)
Libertarianism	0.012 (-0.030,0.054)	-0.041 (-0.083,0.001)
COVID-19 risk perception	-0.029 (-0.073,0.014)	-0.019 (-0.067,0.030)
Attitudes to science and technology	0.152 (0.110,0.195)	0.117 (0.074,0.161)
Corona-Warn-App risk of harm perception	-0.236 (-0.281,-0.192)	-0.261 (-0.307,-0.215)
Gender: male (vs. female)	0.013 (-0.027,0.053)	0.077 (0.037,0.117)
Age	-0.010 (-0.052,0.032)	0.025 (-0.019,0.068)
Education: low (vs. medium)	-0.014 (-0.063,0.034)	-0.040 (-0.089,0.009)
Education: high (vs. medium)	0.001 (-0.057,0.059)	0.046 (-0.012,0.104)
Constant	0.008 (-0.032,0.048)	0.011 (-0.029,0.051)
Observations	1,183	1,140
Explained variance: Adjusted R <sup>2</sup>	0.556	0.551



**Figure A8:** Linear regression model for perceived effectiveness of the Corona-Warn-App for Waves 3 and 4. Horizontal bars span 95% confidence intervals. Dependent variable: Perceived effectiveness of the Corona-Warn-App. Coefficients: various measures from the survey (e.g., a combined measure for trust in the app security or a combined score for conspiracy beliefs; Appendix Table B9). Education was dummy coded with the reference level medium education, yielding two coefficients: low (vs. medium) and high (vs. medium) education. Following Gelman (2008), we standardized all continuous variables and the dependent variable by two standard deviations (SD) and mean centered binary variables. This way a 2-SD change in a continuous predictor variable is approximately equivalent to changing the category in a roughly balanced binary predictor variable (e.g., gender). Furthermore, because we also standardized the dependent variable by 2 SD, a slope of, say, +0.1 can be interpreted as follows: If the predictor is increased by, for instance, 1 SD of its distribution, the dependent variable increases by 0.1 SD of its distribution (while keeping all other predictors at their average values). Appendix Table A6 shows summary of the regression results for these models.

**Table A7**  
*Regression Results for Appendix Figure A8*

	<i>Dependent variable:</i>	
	Perceived effectiveness of the Corona-Warn-App	
	Wave 3	Wave 4
	(1)	(2)
Acceptance of privacy limits	0.351 (0.287,0.415)	0.295 (0.225,0.365)
Approval of German pandemic response	0.020 (-0.038,0.078)	0.091 (0.014,0.168)
Find government guidelines helpful	0.195 (0.124,0.266)	0.085 (-0.004,0.173)
Social media use and trust	-0.015 (-0.073,0.043)	0.155 (0.087,0.223)
Government announcements use and trust	-0.008 (-0.066,0.049)	0.177 (0.093,0.260)
Belief in conspiracies	-0.018 (-0.086,0.050)	0.014 (-0.077,0.104)
Libertarianism	-0.002 (-0.060,0.056)	-0.024 (-0.091,0.042)
Covid-19 risk perception	0.168 (0.104,0.232)	0.091 (0.013,0.169)
Attitudes to science and tech	0.120 (0.059,0.182)	0.073 (0.006,0.140)
CWA risk of harm perception	0.025 (-0.039,0.090)	0.020 (-0.052,0.093)
Gender: male (vs. female)	-0.022 (-0.082,0.038)	0.032 (-0.031,0.095)
Age	-0.090 (-0.151,-0.029)	-0.035 (-0.103,0.033)
Education: low (vs. medium)	0.007 (-0.069,0.082)	-0.036 (-0.115,0.044)
Education: high (vs. medium)	-0.006 (-0.100,0.089)	-0.048 (-0.144,0.049)
Constant	-0.003 (-0.068,0.062)	0.030 (-0.037,0.097)
Observations	1,183	1,140
Explained variance: Adjusted R <sup>2</sup>	0.386	0.335

**Appendix B**

**Supplementary Information: Items and Covariates**

**Table B1**  
*Scenarios Used in the Study*

Scenario	Description	Wave
Severe	The COVID-19 pandemic has rapidly become a worldwide threat. Many experts agree that slowing the spread of the virus is essential to minimise the impact on the health care system and the economy, and to save many lives. The government might consider using mobile phone data to identify and contact those who may have come into contact with people with COVID-19. All people using a mobile phone would be included in the project, with no possibility of opting out. Data would be stored in an encrypted format on a secure server accessible only to the government, which may use the data to locate people who violate lockdown orders and fine or arrest them where necessary. Data would also be used to help shape the public health response and to contact people who might have been exposed to COVID-19. Individual quarantine orders could be made on the basis of this data.	1, 2
Mild	The COVID-19 pandemic has rapidly become a worldwide threat. Many experts agree that slowing the spread of the virus is essential to minimise the impact on the health care system and the economy, and to save many lives. The government could consider using mobile phone data to identify and contact those who may have come into contact with people with COVID-19. Only people who download a government app and agree to be tracked and contacted would be included in the project. The more people who download and use this app, the more effectively the government would be able to contain the spread of COVID-19. Data would be stored in an encrypted format on a secure server accessible only to the government. Data would only be used to contact those who might have been exposed to COVID-19.	1,2
Bluetooth	The COVID-19 pandemic has rapidly become a worldwide threat. Many experts agree that slowing the spread of the virus is essential to minimise the impact on the health care system and the economy, and to save many lives. Apple and Google have proposed adding a contact-tracing capability to existing smartphones to inform people who have been exposed to others with COVID-19. This would help reduce community spread of COVID-19 by enabling people to voluntarily self-isolate. When two people are near each other, their phones would connect via Bluetooth. If a person is later identified as being infected, the people to whom they have been in close proximity are then notified without the government knowing who they are. The use of this contact tracing capability would be completely voluntary. People who are notified would not know the identity of the person who had tested positive.	2
Corona-Warn-App	The Corona-Warn-App app is designed to help detect and break infection chains at an early stage. Currently, local health authorities are trying to trace infection chains. With the app, this process can be automated and thus unfold much faster and more accurately. Users can be warned immediately if they have been in the vicinity of an infected person. The app was developed by Deutsche Telekom and SAP and published by the Robert Koch Institute. It records which smartphones have come in proximity to each other. To do this, smartphones with the app exchange randomly generated encryption keys via Bluetooth. The distance is estimated on the basis of the signal strength. If a user tests positive for COVID-19, they can share their test result in the app in order to inform users who have been in their vicinity. Infected users are explicitly asked whether they want to share their result for contact tracing. As an alternative to digital transmission, validation is available via a call center. Every 24 hours, the app checks whether the user has had contact with a person who has registered an infection on the app. The app does not evaluate any geodata and does not transmit any location information. The developers also assure that no personal data is sent or stored. The anonymized contact data is not stored centrally, but locally on the user's smartphone. The comparison of whether an infected person has been encountered is carried out locally on the smartphone. No data leaves the phone for matching, according to the developers. Only the anonymized list is stored centrally and regularly retrieved by the smartphones to identify possible infectious encounters.	3,4

**Table B2***Items Querying Risks From COVID-19 on a 5-Point Likert Scale (1 = Not at All, 5 = Extremely)*

Question	Label
How severe do you think the novel coronavirus (COVID-19) will be for the general population?	General harm
How harmful would it be for your health if you were to become infected COVID-19?	Personal harm
How concerned are you that you might become infected with COVID-19?	Concern self
How concerned are you that somebody you know might become infected with COVID-19?	Concern others

**Table B3**

*Items Querying Acceptability of Tracking in Three Scenarios and Corona-Warn-App Downloads*

Scenario	Question	Label
Severe	Is the use of cell phone data for location tracking acceptable in this scenario?	Acceptability of the scenario
Severe	Would your decision change if the government was required to delete the data and stop tracking after 6 months?	With follow up: delete data
Severe	Would your final decision change if there was an option to opt out of data collection?	With follow up: opt out
Mild	If, as depicted in this scenario, the government developed a tracking app to help reduce the spread of COVID-19, would you download and use it?	Acceptability of the scenario
Mild	Would your decision change if the government was required to delete the data and cease tracking after 6 months?	With follow up: delete data
Mild	Would your final decision change if data was only stored on your smartphone (not on government servers) and you had the ability to provide this data if you tested positive for COVID-19?	With follow up: local data
Bluetooth	If, as depicted in this scenario, Apple and Google added a COVID-19 contact tracing capability into smartphones, would you use it?	Acceptability of the scenario
Bluetooth	Would your decision change if Apple and Google promised to delete all data and remove the contact tracing system after 6 months?	With follow up: delete data
Corona-Warn-App	Have you downloaded the Corona-Warn-App?	CWA downloads
Corona-Warn-App	Will you download the Corona-Warn-App in the future?	With follow up: future downloads

**Table B4**

*Items Querying Reasons Not to Download the Corona-Warn-App (Participants Could Choose Any Number of Available Options).*

Question	Label
I am concerned about privacy.	Privacy concerns
I don't trust the government.	Lack of gov trust
I am worried about battery usage on my phone.	Concerns: Battery usage
I don't think it will be effective.	Believe it is not effective
I am worried about normalizing government tracking.	Concerns: Normalising gov tracking
I am concerned about civil liberties.	Concerns: Civil liberties
I don't own a smartphone.	Don't own a smartphone
My phone is too old to run the app.	Phone too old
I am concerned about others gaining access to my data.	Concerns: 3rd party access



**Table B5**  
*Items Querying Worldviews*

Scale	Question
<b>Free market attitudes (Libertarianism)</b>	1. An economic system based on free markets unrestrained by government interference automatically works best to meet human needs. 2(reverse). The free market system may be efficient for resource allocation but it is limited in its capacity to promote social justice. 3. The government should interfere with the lives of citizens as little as possible.
<b>Attitudes to science and technology</b>	1. Science and technology are making our lives healthier, easier, and more comfortable. 2. Because of science and technology, there will be more opportunities for the next generation.
<b>Belief in conspiracies (Wave 3)</b>	1. There are secret organizations that have great influence on political decisions. 2. Most people do not see how much of our lives are determined by plots hatched in secret. 3. There are certain political circles with secret agendas that are very influential. 4 (control). I think that the various conspiracy theories circulating in the media are absolute nonsense. 5. Secret organizations can manipulate people psychologically so that they do not notice how their life is being controlled by others. 6. Selfish interests have conspired to convince the public that COVID-19 is a major threat.
<b>Beliefs in conspiracies (wave 4)</b>	1. COVID-19 does not really exist. It is a myth created by some influential people or institutions. 2. COVID-19 was created in a laboratory and deliberately released to achieve geopolitical or economic goals. 3. There is a link between 5G and the spread of COVID-19.; 4. The severity of COVID-19 is overstated. The actual risk is not higher than that of a seasonal influenza. 5. The government exaggerates the seriousness of the pandemic in order to divert attention from other problems within Germany. 6 (control). Wearing masks (mouth and nose protection) protects oneself and others from contracting a COVID-19 infection. 7. COVID-19 was created by pharmaceutical companies to benefit from the need for a vaccine.

**Table B6**

*Items Querying General Acceptability of Privacy-Encroaching Measures During the Pandemic on a 4-Point Likert Scale (1 = Very Acceptable; 4 = Not Acceptable at All). Question: How Acceptable Is it For the Government to Take the Following Measures to Limit the Spread of the Virus During the COVID-19 Pandemic?*

Question	Label
Provide access to the medical records of individuals.	Access to medical records
Track people’s locations using their smartphone data.	Location tracking data
Enable temporary relaxation of data protection regulations.	Suspension of data protection
Collect data about personal contacts and interactions.	Data on contacts & interactions
Enforce people to use an app that notifies when those in quarantine leave the house.	Notifications of leaving quarantine
Collect data on the infection and immunity status of citizens.	Data on infections & immunity status

**Table B7**

*Items Querying Effectiveness of Hypothetical Tracking Apps in Different Scenarios (Waves 1 and 2) and of the Corona-Warn-App (Waves 3 and 4)*

Question	Label
<b>Waves 1 and 2</b>	
How confident are you that the government app would reduce your likelihood of contracting COVID-19?	Reduce Likelihood to Contract
How confident are you that the government app would help you resume your normal activities more rapidly?	Return Activity
How confident are you that the government app would reduce the spread of COVID-19?	Reduce Spread
How confident are you that other citizens like yourself would be able to download and effectively use the app?	Others' Ability to Download the App
<b>Waves 3 and 4</b>	
Has the Corona-Warn-App already helped you to resume your normal activities?	Reduce Likelihood to Contract
How confident are you that the Corona-Warn-App will help you to maintain your normal activities in the future course of the pandemic?	Return to Activity Past
To what extent do you think the Corona-Warn-App has already reduced the spread of COVID-19?	Return to Activity Future
How confident are you that the Corona-Warn-App will reduce the spread of COVID-19?	Reduce Spread Past
How likely do you think it is that the Corona-Warn-App will reduce your risk of coming in contact with COVID-19?	Reduce Spread Future
How sure are you that other citizens like yourself are able to download and effectively use the Corona-Warn-App?	Others Ability to Download the App

**Table B8**

*Items Querying Security of Tracking Apps in Different Scenarios (Waves 1 and 2) and of the Corona-Warn-App (Waves 3 and 4)*

Question	Label
<b>Waves 1 and 2</b>	
How easy is it for people to decline participation in the proposed project?	Ease to Decline Participation
To what extent is the government collecting only necessary data?	Trust: Only Necessary Data
How sensitive is the data being collected in the proposed project?	How Sensitive Are Data
How serious is the risk of harm that could arise from the proposed project?	Risk of Harm
How much do you trust the government to use the tracking data only to deal with the COVID-19 pandemic?	Trust: Data for Pandemic Only
How much do you trust the government to be able to ensure the privacy of each individual?	Trust: Privacy Protection
How secure is the data that would be collected for the proposed project?	Trust: Security From 3rd P.
To what extent do people have ongoing control of their data?	User Control Over Data
<b>Waves 3 and 4</b>	
How easy is it for people to decline participation in Corona-Warn-App contact tracing?	Ease to Decline Participation
To what extent is the Corona-Warn-App collecting only the data necessary to achieve its purposes?	Trust: Only Necessary Data
How sensitive is the data being collected by the Corona-Warn-App?	How Sensitive Are Data
How serious is the risk of harm that could arise from the Corona-Warn-App?	Risk of Harm
How much do you trust the government to use the Corona-Warn-App data only to deal with the COVID-19 pandemic?	Trust: Data for Pandemic Only
How much do you trust that the Corona-Warn-App can ensure the privacy of each individual that uses it?	Trust: Privacy Protection
How secure is the data collected by the Corona-Warn-App?	Trust: Security from 3rd P.
To what extent do people have ongoing control of their data when using the Corona-Warn-App?	User Control Over Data

**Table B9**  
*Variables and Items for Regression models*

Variable	Items	Scale
<b>CWA download</b>	Have you downloaded the Corona-Warn-App?	Yes (1), No (0)
<b>Trust in CWA security</b>	1. How much do you trust the government to use the Corona-Warn-App data only to deal with the COVID-19 pandemic? 2. How much do you trust that the Corona-Warn-App can ensure the privacy of each individual who uses it? 3. How secure is the data collected by the Corona-Warn-App?	6-point Likert scale: 1 = not at all, 6 = very
<b>Perception of CWA effectiveness</b>	1. How confident are you that the Corona-Warn-App will help you to maintain your normal activities in the future course of the pandemic? 2. How confident are you that the Corona-Warn-App will reduce the spread of COVID-19? 3. How likely do you think it is that the Corona-Warn-App will reduce your risk of coming into contact with COVID-19?	6-point Likert scale: 1 = not at all, 6 = very
<b>CWA risk of harm perception</b>	How serious is the risk of harm that could arise from the Corona-Warn-App?	6-point Likert scale: 1 = not at all, 6 = very
<b>Acceptance of privacy limits</b>	How acceptable is it for the government to take the following measures to limit the spread of the virus during the COVID-19 pandemic? Combined measure for 6 items: See Appendix Table B6	4-point Likert scale: 1 = not acceptable at all, 4 = very acceptable
<b>Social media use &amp; trust</b>	1. How often do you rely on the following media (social media) to keep you informed about the developments surrounding the COVID-19 pandemic? 2. How do you rate the following sources (social media)? 3. Do you think that the information on the COVID-19 pandemic is correct and trustworthy?	5-point Likert scale: 1 = never/not at all, 5 = always/completely
<b>Government announcements use &amp; trust</b>	1. How often do you rely on the following media (government announcements) to keep you informed about developments surrounding the COVID-19 pandemic? 2. How do you rate the following sources (government announcements)? Do you think that the information on the COVID-19 pandemic is correct and trustworthy?	5-point Likert scale: 1 = never/not at all, 5 = always/completely
<b>COVID-19 risk perception</b>	Combined measure for 4 items: See Appendix Table B2	5-point Likert scale: 1 = not at all, 5 = extremely
<b>Approval of German pandemic response</b>	How well overall do you think the governments in the following countries have handled the COVID-19 pandemic? - Germany	5-point Likert scale: 1 = not at all, 5 = extremely
<b>Find government guidelines helpful</b>	How helpful are the government guidelines in deciding how to act in relation to the COVID-19 pandemic?	5-point Likert scale: 1 = not at all, 5 = extremely
<b>Attitudes to science and technology</b>	Combined measure for 2 items: See Appendix Table B5	7-point Likert scale: 1 = strongly disagree, 7 = strongly agree
<b>Free market attitudes (libertarianism)</b>	Combined measure for 3 items: See Appendix Table B5	7-point Likert scale: 1 = strongly disagree, 7 = strongly agree
<b>Belief in conspiracies (Wave 3)</b>	Combined measure for 6 items: See Appendix Table B5.	7-point Likert scale: 1 = strongly disagree, 5 = strongly agree
<b>Belief in conspiracies (Wave 4)</b>	Combined measure for 7 items: See Appendix Table B5	5-point Likert scale: 1 = undoubtedly false, 7 = undoubtedly true
<b>Gender (male)</b>	What gender do you identify with?	Male (1), Female (0)
<b>Education</b>	Please indicate your highest level of education.	“Low” = None, <i>Hauptschule</i> , <i>Realschule</i> ; “Medium” = <i>Abitur</i> ; “High” = University
<b>Age</b>	How old are you?	Free numeric text entry