

Appendix A: Priming Scripts

Social deception prime. “Canada has developed a comprehensive health care system. Research shows that many people misuse this health care. For example, many people visit a physician not because they are ill but because they want a prescription for medication they don’t need or because they want a sick note when they are not ill.

Furthermore, in Canada, we have to pay taxes that support certain types of disability insurance. This is money that we – through our taxes – give to the government so that adequate care to ill people is warranted (for example by ensuring that sick people receive sickness benefits). Some people make misuse of it, for example, by receiving the compensation when faking or exaggerating illness. This implies that we unfairly pay for the health care of people who are actually not ill or at least not to the extent they pretend to be. Moreover, this also implies that there is less money left for those people who are ill and who could use the money.

To conclude, we can say that it is highly important to detect such misuse on time, so that care for other people who are really ill is not at risk.”

Undertreatment of pain in old age prime. “Chronic pain in older persons is very frequent with estimates as high as 60% of older persons experiencing significant pain. Although this type of pain has major negative consequences (e.g., leading to depression, anxiety, loneliness, social isolation, and physical suffering), pain in older adults is undertreated and underrecognized. For example, older adults are less likely than younger people to be referred to pain clinics and more likely to be prescribed treatments are often inadequate. Insufficient health provider education also contributes to undertreatment. Many health professionals falsely believe that pain is a natural part of growing old and become less likely to treat it in an older patient as compared to when they are working with younger patients. Older patients sometimes are

reluctant to report their pain because they fear that they may be perceived as complainers or be pressured to move to assisted accommodations (and, thus, lose some of their independence). Although effective treatments are available, these are often not accessed by older persons, at least in part, because of the reasons described previously.”

Control prime. “Canada has developed a comprehensive health care system. Research shows that many people use this health care. For example, many people visit a physician because they are ill or because they need a prescription for medication to treat their complaints/symptoms. People can also visit the physician in order to get a sick note so that they can justify their absence from work due to illness.

Furthermore, in Canada, we pay taxes in order to keep the health care system working. This is money that we – through our taxes – give to the government so that adequate care to ill people is warranted (for example by ensuring that sick people receive sickness benefits). People make use of it, for example, by receiving the compensation when being ill. Hence, the system of social security implies that we work together to ensure that people who are ill can receive appropriate care.

To conclude, we can say that it is important to get a good insight into the use of the health care system so that we can further improve the health care system.”

Appendix B: Example Quotations of Narrative Data

Quotations of Observable Pain-Related Changes that Influenced Observers' Ratings

Theme	Frequency	Example
Pain Expressed		<p>"If the persons' expressions looked like they were in pain."</p> <p>"Displayed the severity of their pain."</p> <p>"How much pain intensity."</p> <p>"Intensity of pain."</p>
General facial movements		<p>"Face distortion."</p> <p>"Facial grimacing for pain."</p> <p>"The intensity of facial expressions."</p> <p>"More intense the facial expression."</p>
Mouth movements		<p>"Mouth movements for words like <i>ouch</i>."</p> <p>"Looked as if they were saying <i>ouch</i>."</p> <p>"How much their mouths reacted."</p> <p>"Opened mouth."</p>
Eye movements		<p>"Closed their eyes really tight."</p> <p>"Squinty eyes."</p> <p>"Eyes closing."</p> <p>"If people had to close their eyes."</p>
Tearful/upset		<p>"If the person looked upset or like they could."</p> <p>"Tearful eyes."</p> <p>"If they had glossy eyes and a frowned face."</p> <p>"The looks in peoples eyes – some looked so sad."</p>
Laughing or smiling		<p>"Smiling whiles expression of pain."</p> <p>"Less sympathetic of people who smiled."</p> <p>"If the person was smiling."</p> <p>"People who smiled often got lower scores of pain."</p>
Body movements		<p>"Tensing of neck muscles."</p> <p>"I judge the patients' mobility."</p> <p>"Body movement – Some people would jerk more their bodies very suddenly."</p> <p>"Was triggered by a moving part of the body."</p>
Relaxed		<p>"Didn't looked strained seemed less in pain."</p> <p>"Seemed relaxed."</p> <p>"If they looked relaxed."</p> <p>"How comfortable they were just laying down on the bed."</p>
Changes in breath		<p>"Seemed to be struggling or holding their breath (struggling with breathing normally)."</p> <p>"Exhaling after holding their breath."</p> <p>"Holding breath."</p> <p>"Heavy breathing."</p>
Bracing		<p>"Some of the participants bracing to endure the pain."</p> <p>"I gave higher raters when someone appeared to be bracing themselves until the pain was over."</p> <p>"If they had to grip on something to endure the pain."</p> <p>"Cringed."</p>

Quotations of Non-Pain-Related Characteristics that Influenced Observers' Ratings

Category	Theme	Example
Patient-Level Personal Characteristics		
	Demographics	<p>"I gave higher to people who are elderly because I respect elder people."</p> <p>"Age of participant."</p> <p>"Male elderly – higher rating – more sympathy."</p> <p>"When a man seemed to be in pain."</p>
	General personal characteristics	<p>"Positive feelings to those who looked nice and quite groomed."</p> <p>"Hair was nice and neat."</p> <p>"Physical appearance."</p> <p>"How they appeared, if they were wearing makeup or hair done nicely."</p>
Observers' General Impressions of Patients		
	Helplessness/ coping abilities	<p>"Those who looked to not be coping well with the pain."</p> <p>"How bad the pain can disturb their normal everyday body function."</p> <p>"Depending on how helpless they looked in the video whether or not they looked able to help themselves."</p> <p>"If they looked like they were having trouble coping."</p>
	Willingness to accept help	<p>"If they seemed interested in help."</p> <p>"Willing to receive help."</p> <p>"Some just kind of looked more helpless than others and in need of assistances (or accepting of help)."</p> <p>"If they seemed interested in help."</p>
	Sympathy	<p>"The sympathy I felt towards the person."</p> <p>"How sympathetic I felt for the patient."</p> <p>"If I felt more sympathetic towards them."</p> <p>"Higher ratings were based on how much sympathy I had for participants."</p>
	Valence	<p>"If the pt seemed like they would have been nice in person and nice to the physio I rated higher."</p> <p>"If people looked friendly."</p> <p>"Kinder looking."</p>
	Suppressing pain experience	<p>"Some seemed to be trying to hold in how much pain they were actually feeling."</p> <p>"Try to conceal pain expressions to appear strong."</p> <p>"Those who appeared to be suppressing their pain, trying not to show it."</p> <p>"Those people trying to be strong (those who showed expressions/ held back)."</p>
	Disingenuous pain expression	<p>"People who seemed to be exaggerating led me to give lower ratings."</p> <p>"Could have been exaggerating how bad the pain was."</p> <p>"If I felt he she was bluffing."</p> <p>"I got the feeling they were "faking" how much it hurt."</p>
Additional Contextual Characteristics		
	General experiences or beliefs	<p>"I think that I was very strict in my ratings because of my own background in sport injuries and physiotherapy."</p> <p>"I felt a level of willing to help no matter what."</p> <p>"Reminded me of my grandpa who has passed."</p> <p>"If I thought they were working and contributing to society."</p>
	Comparison to other videos	<p>"As the videos went on I felt I was more sympathetic and felt more positively to the people in the video may be because I was exposed to more people experiencing pain."</p> <p>"Comparing it with previous individual's from previous videos."</p> <p>"Some seemed to be trying to hold in how much pain they were actually feeling compared to others who tried to act like they were in more pain than they actually were."</p> <p>"Comparing individuals from videos."</p>
	Priming text	<p>"Preamble of information before study."</p> <p>"The reading I read before watching the videos."</p>