## **Supplementary Data**

## Supplementary Data 1. Questions Utilized from PEW Research Center Survey

New developments in genetics and gene-editing techniques are making it possible to treat some disease and conditions by modifying a person's genes. In the future, gene-editing techniques could be used for any newborn, by changing the DNA of the embryo before it is born, and giving that baby a much reduced risk of serious diseases and conditions over his or her lifetime. Any changes to a baby's genetic make-up could be passed on to future generations if they later have children, and over the long term this could change the genetic characteristics of the population.

- 1. How much have you heard about this idea before today?
  - a. A lot
  - b. A little
  - c. Not at all
- 2. If you had a baby, do you think this gene editing—giving a much reduced risk of serious diseases and conditions over his or her lifetime—is something that you, personally, would want for your baby or not something you would want for your baby?
  - a. Yes, I would definitely want this for my baby
  - b. Yes, I would probably want this for my baby
  - c. No, I would probably *not* want this for my baby
  - d. No, I would definitely *not* want this for my baby

Thinking about the possibility of this gene editing—giving *healthy* babies a much reduced risk of serious diseases and conditions...

- 3. How *enthusiastic* are you, if at all, about this possibility for society as a whole?
  - a. Very enthusiastic
  - b. Somewhat enthusiastic
  - c. Not too enthusiastic
  - d. Not at all enthusiastic
- 4. How *worried* are you, if at all, about this possibility for society as a whole?
  - a. Very worried
  - b. Somewhat worried
  - c. Not too worried
  - d. Not at all worried'

Thinking about the possibility of this gene editing—giving *healthy* babies a much reduced risk of serious diseases and conditions...

- 5. Which of these statements comes closer to your view, even if neither is exactly right?
  - a. As humans, we are always trying to better ourselves and this idea is no different
  - b. This idea is meddling with nature and crosses a line we should not cross
- 6. Do you think using this gene editing—giving *healthy* babies a much-reduced risk of serious diseases and conditions is...
  - a. Morally acceptable
  - b. Morally unacceptable
  - c. Not sure

Would this gene editing—giving *healthy* babies a much reduced risk of serious diseases and conditions—be more acceptable, less acceptable, or would it make no difference in each of these circumstances?

- 7. If it changed the genetic make-up of the whole population for the foreseeable future
  - a. More acceptable
  - b. Less acceptable
  - c. No difference
- 8. If this gene editing becomes available—giving *healthy* babies a much reduced risk of serious diseases and conditions—do you think there would be...
  - a. More benefits for society than downsides
  - b. More downsides for society than benefits
  - c. About equal benefits and downsides for society

## Supplementary Data 2. Questions Adapted from Armsby et al.<sup>51</sup>

The following text was presented to participants as part of the post-video survey.

We are now going to ask you a number of questions about your views that may apply to both **somatic** and **germline** gene editing

Somatic gene editing involves changing non-reproductive cells (e.g., skin cells, liver cells). These changes would affect only the individual who receives the treatment, and are not inherited by offspring.

Germline gene editing involves changing germ cells (eggs or sperm) or embryos that are only a few days old. In germline editing, the edited gene would be passed on to offspring.

Please indicate to what extent you agree with the following statements, on a scale of 1 strongly disagree) to 5 (strongly agree)

1. Parents and guardians have a right to edit genes of their children before they are born.

1 2 3 4 5

2.	. <i>Germline</i> human gene editing is acceptable if alternative treatments are more expensive.					6. Germline human gene editing is morally acceptable.				
						1	2	3	4	5
	1	2	3	4	5	7. Somatic	human g	ene editin	ig is acce	ptable if there
3.	Germlin	e human	gene editi	ng is acce	ptable if there	are no alternative treatments available.				
	are no alternative treatments available.					1	2	3	4	5
	1	2	3	4	5	8. Somatic human gene editing is morally acceptable.				
4.	Germline human gene editing goes against my cul-					1	2	3	4	5
	tural bel	iefs.								
	1	2	3	4	5	_				
5.	Germline human gene editing goes against my reli-				Supplementary Reference					
	gious be				•	S1. Armsby AJ, Bombard Y, Garrison NA, et al. International attitudes of genetics professionals toward human gene editing. <i>CRISPR J</i>				
	1	2	3 4 5 2019;2:331–339. DOI: 10.1089/crispr.2019.0020.							. Chisen J

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