

HHS COVID-19 PUBLIC EDUCATION CAMPAIGN

A campaign to increase vaccine confidence while reinforcing basic prevention measures



Foundational Focus Group Discussion Guide

Research Objective: Examine attitudes, perceptions, and behaviors related to preventive measures (e.g., mask wearing, social distancing, avoiding crowds) and vaccine confidence for those who have not yet received a COVID-19 vaccine.

NOTE TO REVIEWERS: The discussion guide is written in a purposefully colloquial style to better engage with participants. Question probes are below some main questions and may change. These are suggestions for the moderator to follow and will be used as deemed relevant and necessary in the natural flow of discussion. The discussion guide is developed for a 90-minute session. Moderator instructions are highlighted in **yellow** and bracketed.

Guidelines and Introductions	10MINUTES —5 minutes
	30 MINUTES 5 minutes
	15 minutes
	10 minutes
Preventive Measures	4MINUTES 5—5 minutes
<i>Personal Risk Perceptions</i>	
<i>Measures Taken to Slow the Spread</i>	
<i>Sources of Information</i>	
Vaccines	
<i>Intent</i>	10 minutes
<i>Convenience</i>	10 minutes
<i>Choice/Options</i>	5 minutes
<i>Safety and Effectiveness</i>	10 minutes
<i>Side Effects</i>	5 minutes
<i>Post-Vaccination</i>	5 minutes
Wrap-Up	MINUTES 5
TOTAL TIME	90 MINUTES

GUIDELINES AND INTRODUCTIONS (10 MIN)

Guidelines

Thank you for speaking with me today. My name is _____, and I work for a private research company. Today we want to get your thoughts and opinions about COVID-19 and how it is affecting life in the United States. We would also like to better understand what precautions you and your family take when it comes to avoiding infection from the virus.

Before we begin, I want to go over a couple of things:

- There are no wrong answers. Our whole purpose for being here is to hear what you think, so please speak up, especially if what you have to say is different than what someone else is saying. You may represent what a lot of other folks think.
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- There may be times I ask you to clarify or ask you to tell more about what you just said. This is simply to make sure I understood and accurately capture what you think, not because I'm challenging your point of view.
- Your participation is voluntary. If I ask any questions you do not wish to answer, you do not have to answer them.
- We want to hear from everyone, but I ask that you speak one at a time, although I understand it can be difficult, especially online. I simply want to make sure I hear everything that everyone says.
- Nothing you say will be tied back to you. Your name and any identifying information will not be used in any of our reports.
- There are some other people listening in who are helping me take notes so that I can fully focus on our conversation and be respectful of your time. At the end of the group, they might have a couple of clarifying questions for us.
- I'll be video recording our conversation; it will only be used to confirm our notes. Only the research staff will have access to this taping and no personally identifiable information will be used in connection with the recording. Does everyone agree to be recorded? **[ASK FOR AGREEMENT THROUGH A SHOW OF HANDS OR HEAD NOD]** I am going to start the recording now.
- Our discussion should take no more than 90 minutes. I appreciate the time that you carved out to be here, and I want to be respectful of that, so I may interrupt us so that we stay on track.

Do you have any questions before we begin?



Introductions/Ice Breaker

I'd like to start by getting to know each of you a bit better. So, I'm going to have everyone go around and share their first name, where you live, and your favorite type of food to make at home. **ABOUT TRIBAL AFFILIATION.]AMERICAN INDIAN/ALASKA NATIVE GROUPS, ALSO ASK [FOR**

I can go ahead and get us started.

[MODERATOR INTRODUCES SELF, ANSWERS THE QUESTIONS, AND THEN HAS EACH PARTICIPANT INTRODUCE THEMSELVES AND RESPOND TO THE ICEBREAKER QUESTIONS.]

[MODERATOR TO PROBE AS NEEDED TO GET PARTICIPANTS COMFORTABLE AND TO ESTABLISH RAPPORT.]

[MODERATOR: FOCUS ON THE BOLDED QUESTIONS. AS PROBES SHOULD BE ASKED AS TIME PERMITS SUBQUESTIONS NOT IDENTIFIEDPROBES SHOULD BE USED AS NEEDED TO OBTAIN/CLARIFY INFORMATION.QUESTIONS IDENTIFIED AS .]

PREVENTIVE MEASURES (3 MIN)

Thank you

. To start off, I want everyone to think about COVID-19.

- **What is the top thing on your mind today when**

- o **it comes to**

- o **When**

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- **Now** the COVID-19 pandemic?

Personal Risk Perceptions)utes (5 min

- **Have** you] ETC.FAMILY MEMBER? FRIEND?SELF? —FOR WHO THEY KNOW WHO HAS BEEN DIAGNOSED WITH COVID-19LIGHTLY been diagnosed with COVID-19? [IF YES, PROBE everpersonallyor anyone you know
- **How concerned are you personally about getting COVID-19?].[PROBE ON REASONS WHY CONCERNED OR NOT**
 - o How concerned are you about family getting COVID-19? Friends? Community members?
- **How have your concerns about getting COVID-19 changed since the beginning of the pandemic, if at all?**
 - o Have your concerns : **[PROBE]** about getting COVID-19 changed since learning about new variants of the virus?What have you heard about the variants?
- [If previously had COVID-19] **since getting the virus?Have your concerns about COVID-19 changed**
- **When** do you think it will be safe to return to normal? What would “normal” look like to you?
 - o [If ever return to normal]: When you would be able to resume /may not we won't that someone mentionssome of your ordinary activities?

Measures Taken to Slow the Spread minutes)15(

- **Let's talk a, can you describe a few weeks Thinking about the past mask wearing. bit more about different types of preventive measures, starting with situation where you wore a mask?**
 - o What are the reasons that people wear masks during the COVID-19 ? pandemic
 - o What are some reasons why someone wouldn't wear a mask when they were out in public?
 - o For those of you who wear masks regularly, how long do you plan to continue wearing a mask in public?

- **Can you give me an example of how you have socially distanced?, a few weeks about the past Think. social distancing ext,**
 - o How well does it work at preventing the spread of COVID-19?
 - o How difficult is it for you to socially distance?
 - o For those of you who practice social distancing, how long do you plan to continue doing so?

- **How often do you attend ? or social events large gatherings**
 - o **[PROBE]:** What kinds of gatherings or social events are you thinking of?
 - o What precautions do you take when attending these events?
 - o Is your behavior different based on whether the gathering is outdoors or indoors?

How important do you think it is to take precautions to

- **slow the spread of ? COVID-19**

- **What are your thoughts about relaxing mandates for preventive measures, such as mask wearing or social distancing? state governments or the federal government**
 - o **[PROBE]:** ? Safe? with mandates being relaxed Do you feel comfortable if you are in a state where mandates have been relaxed, what are your thoughts?
 - o How do you think mandates in your community or state impact how often people practice measures like mask wearing?

S minutes)0 (Information of ources

- **Where do you turn for information about COVID-19?**

- **What resources do you think provide the best information about COVID-19?**

- o How trustworthy do you find to be on these platforms? about COVID-19 information
 - **[PROBE]** How does this vary based on who is posting the information?:
- **What advertisements have you seen about COVID-19, if any? radio/podcasts, print, social media? Where have you seen or heard these ads? [PROBE IF NEEDED]: Television,**
 - o How trustworthy do you find information about COVID-19 to be in these media sources?

VACCINES (UTESMIN 54)

- o Now

I'd like about vaccines. more to talk

Intent (10 minutes)

-
- **FDA-authorized vaccine** **[MODERATOR: YOU MAY NEED TO ADJUST QUESTIONS SLIGHTLY FOR ANYONE WHO HAS ALREADY RECEIVED A VACCINE.]** You were all asked to participate in this group because you indicated you had not received a COVID-19 vaccine. Is that still true? . available at no cost are now to prevent COVID-19s
- **Now that you are eligible for, how soon would you get vaccinated? assuming you could schedule an appointment immediately and a vaccine**
 - o What are some of the things on your mind when you're deciding to get vaccinated? if and when
 - o For those of you who are :waiting to get a vaccine
 - What are some of the reasons why?
 - Is there certain information, or a certain milestone, that you're waiting for?
 - Is there anything that would motivate you to get a vaccine sooner? **[PROBE IF NEEDED]:** Coupons? Incentives? M or neighborhood? in your home mobile vaccine unit (van/truck)
 - o **[For those who had COVID previously] How did**
 - o **How-**

getting COVID-19 affect your thoughts

- **What-**

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- **Have-**

- **What-**

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- o **How-**

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- **How-**

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- o **How-**

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- o **How effective do you feel-**

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- o COVID-19 vaccine?

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- **What-**

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- **What questions or concerns do you have about getting a COVID-19 vaccine?**

- o What kinds of information would you look for to better understand if you should take a COVID-19 vaccine when it is available?

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- Where would you

- o look for information about COVID-19 vaccines?
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 -
- o Would recommendations from certain individuals or groups impact your decision; for example, your personal doctor or public health officials?

- How
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- o have your

cultural beliefs

PREVENTIVE MEASURES (

- or traditions informed your views of COVID-19 and COVID-19 vaccines, if at all?

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- o How has history informed your understanding?

Convenience (10 minutes)

- Where would you prefer to go to get a COVID-19 vaccine?

- ~~How important do you think it is to take precautions to-~~

- o What are some of the main reasons you

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- **Let's talk-**

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- o ~~What are some reasons why someone wouldn't wear a mask when they were out in public?~~

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- o would prefer **How well does it work at preventing the spread of COVID-19?**

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- What issues, if any, have you experienced when trying to schedule or go to a COVID-19 vaccination appointment?
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 - o **[PROBE IF NEEDED]:** Issues with technology/Internet, language, transportation to/from vaccine sites, availability or accessibility of vaccines, work commitments, childcare, etc.

C (5 minutes) Options/Choice/

- **What have you heard about the different COVID-19 vaccines that have been authorized for use in the United States?**
 - o What have you heard about how the different vaccines are administered?
 - o About the availability of different vaccines?
- **Based on what you know about the different COVID-19 vaccines that have been authorized for use in the United States, [PROBE ON REASONS WHY THEY HAVE PREFERRED VACCINES OR NOT.]? of the authorized vaccines one or more have a preference for/ do you**

Safety and (10 minutes) Effectiveness/E

- **What have you heard about the process for developing COVID-19 vaccines?**
 - o What is your level of confidence in this process? [PROBE ON ANY CONCERNS.]
- **What have you heard about the process for authorizing COVID-19 vaccines in the United States?**
 - o What is your level of confidence in this process? [PROBE ON ANY CONCERNS.]
- **How effective do you feel the currently authorized COVID-19 vaccines are at preventing infection from COVID-19?**
 - o Thinking about all the authorized vaccines available, how do you feel differently about the effectiveness of any of them?
- **How effective do you feel the vaccines are at preventing severe cases of COVID-19 (if a vaccinated person is infected)?**
 - o Thinking about all the authorized vaccines available, do you feel differently about the effectiveness of any of them preventing severe COVID-19?

- **How effective do you feel the vaccines are at preventing infection from the new variants of COVID-19?**
 - o Thinking about all the authorized vaccines available, do you feel differently about the effectiveness of any of them ?infection from new variantspreventing in
- **How safe? to get do you feel the currently authorized COVID-19 vaccines are**
 - o How safe are they to get f?or those with underlying health conditions
 - o How safe are they to get for ?people in your community

Vaccine (5 minutes)ffectsEide S

- **What have you heard about side effects , SPECIFIC VACCINE INGREDIENTS, ETC.]GET PERCEPTIONS ON SHORT OR LONG TERM SIDE EFFECTS TO NECESSARY [PROBE IF ?ing a COVID-19 vaccinereceivafter**
 - o How do these vary by vaccine type?
- **How concerned about experiencing side effects after you receive a COVID-19 vaccine?are you**
 - o What, if anything, would lessen your concerns about side effects?

Post-Vaccinatio (5 minutes)n

- **What does it mean to be “fully vaccinated” against COVID-19?**
 - o When [PROBE IF NEEDED ON NUMBER OF DAYS OR WEEKS, HOW MANY DOSES.] considered “fully vaccinated” from COVID-19? someone is
If you choose to receive a COVID-19 vaccine, when will you ?protected from COVID-19 feel
- **If you choose to receive a COVID-19 vaccine, ?receive a vaccine, after you social distancing and mask wearing preventive measures, such as ehow likely will you be to practic**
 - o What factors would play into your decision to wear a mask or social distance? [PROBE IF NEEDED AROUND LOCAL MANDATES, CDC/FEDERAL GUIDANCE, BEHAVIORS OF OTHERS], , TYPE OF EVENT/OUTING

- o For those who .]AFTER FIRST DOSE OR SECOND DOSE, IF APPLICABLE WHETHER THIS IS ,WEEKS/NUMBER OF DAYS OR A PARTICULAR CIRCUMSTANCE [PROBE FOR ?continuedo you plan to , how long after receiving a vaccinecontinue preventive measures plan to

WRAP-UP (5 MIN)

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- Those are all the questions I have for you. I just want to check to see if any of my colleagues have any final questions.
- Is there anything you would like to share that you have not had the chance to before we wrap up?
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- Thank you very much for participating in this discussion. I appreciate your time, and your feedback has been extremely helpful.
- Please remember not to share anything we've discussed here today.