



# Focus Group Screener: *We Can Do This* Campaign Brand

## Notes to Recruiters

- Recruit eight to seat four to six
- Ten focus groups total
  - o Four focus groups with General Population adults.
    - One unvaccinated adult
    - Two vaccinated adults (at least one group of adults ages 50 and older)
    - One vaccinated adult who is a parent of a child ages 6 months through 17 years
  - o Three focus groups with Latino/Hispanic adults (in English).
    - Two vaccinated adults (at least one group of adults ages 50 and older)
    - One vaccinated adult who is a parent of a child ages 6 months through 17 years
      - Due to time constraints, we cannot host the focus groups in Spanish. We will ensure that we recruit bilingual participants.
  - o Three focus groups with Black/African American adults.
    - Two vaccinated adults (at least one group of adults ages 50 and older)
    - One vaccinated adult who is a parent of a child ages 6 months through 17 years
- Mix of age, gender, political ideology, socioeconomic status (SES), geographic area, etc.
- Please terminate as soon as someone fails to meet an inclusion criterion.

## Screener

Hello, my name is **[INSERT NAME]** from **[INSERT FACILITY NAME]**, a market research firm. We are recruiting for an upcoming study that will collect feedback about a public education campaign brand. This is not a sales call of any kind. I am only calling to see if you or an eligible member of your household has an interest in participating in a 90-minute focus group that will be conducted virtually for which you would receive a \$100 incentive. I have a few questions I need to ask to see if you are qualified for this study. You don't have to answer any question that you don't want to answer.

1. Are you interested in seeing if you or anyone in your household qualifies to participate in this focus group? **[ACCEPT ONLY ONE PER HOUSEHOLD]**

Yes	<input type="checkbox"/>		> <b>CONTINUE</b>
No	<input type="checkbox"/>		> <b>TERMINATE</b>

2. In the past 5 years, have you or a member of your immediate family worked in any of the following fields, companies, or organizations?

Market or public opinion research	<input type="checkbox"/>		> <b>TERMINATE</b>
An advertising, public relations, or marketing agency	<input type="checkbox"/>		> <b>TERMINATE</b>
News, radio, TV, print, media	<input type="checkbox"/>		> <b>TERMINATE</b>
For the U.S. federal government	<input type="checkbox"/>		> <b>TERMINATE</b>
As a health care provider or medical professional (e.g., physician, nurse)	<input type="checkbox"/>		> <b>TERMINATE</b>



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3. In order to participate, you need to have a desktop or laptop computer or a smartphone with an internet connection. You will also need to consent to be recorded during the focus group. Will you be able to meet both of these requirements?

Yes:  > CONTINUE  
 No:  > TERMINATE

4. Would you be willing and able to participate in this study via a webcam or smartphone camera?

Yes:  > CONTINUE  
 No:  > TERMINATE

5. What is your gender?

Male:  > CONTINUE  
 Female:  > CONTINUE  
 Transgender, non-binary, or another gender:  > CONTINUE  
 Prefer to self-describe (specify):  > CONTINUE

6. What is your age? **[RECORD VERBATIM]**

**Note to recruitment: Participants must be 18 years or older.**

7. Have you received your primary COVID vaccine series? **If you received your primary vaccine series on or before April 18, 2023**, the vaccine series could have required two doses of the Pfizer, Moderna, or Novavax vaccines, or one dose of the Johnson & Johnson vaccine. **If you received your primary vaccine series after April 18, 2023**, the vaccine series could have required one dose of the Pfizer, Moderna, or Johnson & Johnson vaccines, or two doses of the Novavax vaccine.

Yes:  > CONTINUE  
 No:  > CONTINUE

8. **[If yes to 7]**: When did you receive the last dose of your primary COVID vaccine?  
 \_\_\_\_\_ **[RECORD MONTH AND YEAR VERBATIM]**

9. Have you received any additional COVID vaccine doses after your primary COVID vaccine? Specifically, did you receive a booster before September 2022 or an updated COVID vaccine after September 2022?

Yes:  > CONTINUE  
 No:  > CONTINUE

10. **[If yes to 9]**: When did you receive the last dose of your COVID booster or updated vaccine?  
 \_\_\_\_\_ **[RECORD MONTH AND YEAR VERBATIM]**

11. Are you of Hispanic, Latino, or Spanish origin?

Yes:  > CONTINUE  
 No:  > CONTINUE

12. **[If yes to 11]**: Do you spend at least three hours a week using Spanish-language media, such as television, radio, or online services? **[RECRUIT A MIX]**

Yes:  > CONTINUE  
 No:  > CONTINUE

13. What is your race? Please select all that apply.

American Indian or Alaska Native:  > CONTINUE  
 Asian:  > CONTINUE  
 Black or African American:  > CONTINUE  
 Native Hawaiian and Other Pacific Islander:  > CONTINUE  
 White/Caucasian:  > CONTINUE  
 Prefer not to say/Refuse to answer:  > CONTINUE

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14. In what city and state do you live?

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

**Note to recruitment: Recruit a mix of locations.**

15. What is the highest level of school you have completed? **[RECRUIT A MIX. ENSURE A ROBUST REPRESENTATION OF PARTICIPANTS BELOW A BACHELOR'S DEGREE]**

Some high school or less (no diploma)	<input type="checkbox"/>	> CONTINUE
High school diploma or equivalent (GED)	<input type="checkbox"/>	> CONTINUE
Some college, no degree	<input type="checkbox"/>	> CONTINUE
Vocational school	<input type="checkbox"/>	> CONTINUE
Associate degree	<input type="checkbox"/>	> CONTINUE
Bachelor's degree	<input type="checkbox"/>	> CONTINUE
Master's degree	<input type="checkbox"/>	> CONTINUE
Professional or doctorate degree	<input type="checkbox"/>	> CONTINUE

16. Which of the following best describes you? Please select all that apply. **[RECRUIT A MIX]**

Employed full time	<input type="checkbox"/>	> CONTINUE
Employed part time	<input type="checkbox"/>	> CONTINUE
Self-employed	<input type="checkbox"/>	> CONTINUE
Not employed	<input type="checkbox"/>	> CONTINUE
Stay-at-home parent/guardian	<input type="checkbox"/>	> CONTINUE
Student	<input type="checkbox"/>	> CONTINUE
Retired	<input type="checkbox"/>	> CONTINUE

17. In 2022, what was your total household income from all sources before taxes? **[RECRUIT A MIX. ENSURE ROBUST REPRESENTATION OF <\$50K]**

Less than \$15,000	<input type="checkbox"/>	> CONTINUE
\$15,000 to \$24,999	<input type="checkbox"/>	> CONTINUE
\$25,000 to \$34,999	<input type="checkbox"/>	> CONTINUE
\$35,000 to \$49,999	<input type="checkbox"/>	> CONTINUE
\$50,000 to \$74,999	<input type="checkbox"/>	> CONTINUE
\$75,000 to \$99,999	<input type="checkbox"/>	> CONTINUE
\$100,000 to \$149,999	<input type="checkbox"/>	> CONTINUE
\$150,000 to \$199,999	<input type="checkbox"/>	> CONTINUE
\$200,000 and over	<input type="checkbox"/>	> CONTINUE
Don't know/Refused	<input type="checkbox"/>	> CONTINUE

18. In general, do you think of yourself as...? **[RECRUIT A MIX.]**

Extremely liberal	<input type="checkbox"/>	> CONTINUE
Liberal	<input type="checkbox"/>	> CONTINUE
Slightly liberal	<input type="checkbox"/>	> CONTINUE
Moderate, middle of the road	<input type="checkbox"/>	> CONTINUE
Slightly conservative	<input type="checkbox"/>	> CONTINUE
Conservative	<input type="checkbox"/>	> CONTINUE
Extremely conservative	<input type="checkbox"/>	> CONTINUE

19. Do you have any children?

No	<input type="checkbox"/>	> CONTINUE
Yes	<input type="checkbox"/>	> CONTINUE

20. **[If yes to 19]:** Do you have a child in any of the following age groups who you are a primary health-related decision maker for? **[IF YES TO ANY AGE GROUP, PARTICIPANT QUALIFIES FOR PARENT GROUP].**

6 months–5 years old	<input type="checkbox"/>	> CONTINUE
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6–11 years old	<input type="checkbox"/>	> CONTINUE
12–17 years old	<input type="checkbox"/>	> CONTINUE
I am not the primary health decision maker for any of my children.	<input type="checkbox"/>	> CONTINUE

21. **[If yes to any age group in 20]**: Have any of your children received at least one dose of a COVID vaccine? **[RECRUIT A MIX.]**

Yes, all of my children have received a COVID vaccine.	<input type="checkbox"/>	> CONTINUE
Some of my children have received a COVID vaccine.	<input type="checkbox"/>	> CONTINUE
None of my children have received a COVID vaccine.	<input type="checkbox"/>	> CONTINUE

Thank you for taking the time to answer these questions. We will be in touch with additional information regarding this study.

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