Moderator’s Guide for COVID-19 Vaccination Focus Groups
Vax Campaign Planners/Operators

1.0 INTRODUCTIONS (10 MIN)

My name is [INSERT NAME], and I’m a researcher with [INSERT INSTITUTION]. I will moderate the focus group this evening. Before we get started, I want to introduce the other study staff. After that I will go over the format and some ground rules for this evening.

With me this afternoon are my colleagues [INSERT NAMES] who are all part of the research team and will be observing and taking notes tonight.

In the focus group, we will consider 3 main questions:

• What factors (+/-) are influencing the willingness and abilities of members of the local [X POPULATION] community to be vaccinated against COVID-19?
• In what ways could/should the COVID-19 vaccination campaign enhance the ability of individuals, families, and/or whole communities to recover from the hardships experienced before and during the pandemic?
• What changes in public health, health care, and governmental institutions might local members of the local [X POPULATION] community see as necessary to improve their short-term confidence in COVID-19 vaccines and their long-term trust in authorities?

We will spend approximately 25 minutes on each question and then conclude with some of your final, brief reflections on what you heard today. We have a lot of ground to cover and limited time; as a result, in lieu of a break, individuals are asked to mute sound and video should they need to step away from the discussion.

GROUND RULES

1. TIME: Our schedule is very tight, so we will ask you all to stay as focused as possible, and please try to stay on the zoom throughout the session.

2. PARTICIPATION: The format of these sessions will be group discussion. As we ask questions, we would like you all to discuss these issues with one another. Please participate! Each of you has been asked to join us for a specific reason, so we really want your input. Also - I expect that each of you has a lot to say about many of our topics. My main job is to make sure that we can hear from everyone. Please don’t be offended if I ask you to hold a comment or question so that we can get input from someone else. If you are having a hard time getting a word in to the discussion, please use the “raise hand” function in Zoom. Does anyone need help finding that?
3. RESPECT: There aren’t right or wrong answers to anything we will discuss; none of us is more expert than others on these issues. We will be asking questions that might highlight real conflicts of values and judgment within this group – that is fine, that is exactly what they are supposed to do. We expect there to be disagreements, and we only ask that everybody remember to keep comments to one another as respectful as possible.

4. QUESTIONS?

PARTICIPANT INTRODUCTIONS
Before we start the discussion, I’d like to go around the room and ask you each to tell us your first name and give one concrete example of how COVID-19 has affected your work, home life, and/or leisure time, and if did not affect you, then please explain why you think so.
2.0 SEGMENT A – VAX ACCEPTANCE AND ACCESS (25 MIN)

A. SET UP

Across the country, COVID-19 infection and mortality rates are highest in non-white groups, particularly Black, Indigenous, and Latino populations. The current vaccines can help mitigate COVID-19 transmission and burden. At the same time, national pandemic polling data suggest that members of hard-hit racial and ethnic minority groups – especially Black communities – have less confidence in COVID-19 vaccines than many of their white counterparts.

B. QUESTIONS

- What trends have you seen in COVID-19 vaccine uptake within the local [BLACK/INDIGENOUS/LATINO] community? What do you believe are the reasons for these trends?

- What personal preferences for or against COVID-19 vaccines are present in the local [BLACK/INDIGENOUS/LATINO] community? What (if any) differences exist based on gender, age, socioeconomic status, or other demographic factors (i.e. what heterogeneity exists within this group)?

- What type of access issues exist in [local community] that might be keeping members of the local [BLACK/INDIGENOUS/LATINO] community from being vaccinated? How might these factors/conditions be addressed? What is needed to make this happen?

- Looking ahead to the next 6 months, what vaccination-related challenges do you expect (i.e. reaching out to remaining hesitant persons, vaccination of teens and children, booster doses, etc.)? What can be done to facilitate COVID-19 vaccination in these situations? Is there anything in particular that will need to be done to reach members of the local [BLACK/INDIGENOUS/LATINO] community?
3.0 SEGMENT B – COVID-19 VAX AND PANDEMIC RECOVERY (25 MIN)

A. SET UP

The pandemic has had disproportionate physical and financial impacts on U.S. racial and ethnic minorities, particularly those with limited means. The greater health burden involves many complex factors including exposure at jobs that have inadequate sick leave policies or that do not fit a “work from home” model, tight living conditions that enable viral transmission more readily, lower rates of insurance coverage that lead to postponed treatment, and mistrust of the health care sector due to historical trauma, ongoing bias, and for some, concern over immigration status. The greater economic burdens include job loss and interrupted income, the threat of eviction or foreclosure, growing food insecurity, loss of employer-provided insurance, and the choice between minding children who must learn remotely or continuing paid employment outside the home.

B. QUESTIONS

- In what ways does this broad brush stroke picture accurately reflect experiences of the local [BLACK/INDIGENOUS/LATINO] community; where do similarities begin/end?

- How have the pandemic’s compound stressors – physical, financial and psychological – potentially shaped responses of the local [BLACK/INDIGENOUS/LATINO] community to the COVID-19 vaccination campaign and other recovery efforts?

- What linkages, if any, do you see between the success of the local COVID-19 vaccination campaign and the ability of racial/ethnic minorities, their families, and/or whole communities to overcome the hardships experienced before and during the pandemic?

- Looking ahead, what challenges remain to recovery from the pandemic? Are there any challenges that are specific to the local [BLACK/INDIGENOUS/LATINO] population? What can be done to address these challenges? What resources are needed?
4.0 SEGMENT C – TRUSTWORTHY/TRANSFORMED INSTITUTIONS (25 MIN)

A. SET UP

The COVID-19 vaccination campaign is taking place against the backdrop of overlapping crises in the US. As a whole, non-whites are getting sick and dying of COVID-19 and facing a state of extreme economic precarity at a level that is out of proportion with their census numbers. If – before COVID-19 – racial and ethnic minorities felt as if their lives and livelihoods did not count as much as those of majority communities, then the addition of pandemic-related losses may have deepened further any sense of inequity. At the same time, health departments and health care facilities are facing resource shortfalls, overextended workforces, and (as of now) an unrelenting demand for their services due to a protracted and acute crisis.

B. QUESTIONS

• What can public health, health care, and government institutions do in the short-term to earn/hold on to the community trust? What is needed to earn/hold on to the trust of the local [BLACK/INDIGENOUS/LATINO] community in particular? How could COVID-19 vaccination play a role in building trust?

• What constraints do your public health, health care, and governmental institutions face in being able to implement the changes necessary to demonstrate trustworthiness among the local [BLACK/INDIGENOUS/ LATINO] community? How might these barriers be overcome?

• What longer term changes will be necessary for public health, health care, and governmental institutions to continue to build trust with the local [BLACK/ INDIGENOUS /LATINO] community? Who are allies that could be helpful in this endeavor? What short- and long-term changes in institutional processes could help?
5.0 WRAP UP (5 MIN)

A. CLOSING THOUGHTS

Are there any other brief comments that you feel are important to share that have not been covered tonight?

B. FOCUS GROUP EVALUATION

We’d love to hear back from you about how we can improve the research study.

If there was one thing you would definitely change about the focus group, then what would it be?

Thank you for your time tonight.