



COVID-19 Vaccine Qualitative Research Report

Prepared for the Washington State Department of Health

C+C | December 2020

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Executive Summary

The Washington State Department of Health (DOH) contracted C+C to develop a social marketing initiative designed to vaccinate most adults in Washington.

To do this effectively, the campaign needed to build receptivity, intention and action among people in Washington to get a COVID-19 vaccine. DOH is particularly interested in ensuring that the typically under-served populations are proactively considered part of the priority audience. Understanding the attitudes, beliefs, barriers and motivators regarding the COVID-19 vaccine is fundamental in creating an effective and equitable social marketing initiative and communications campaign.

This report summarizes the findings of a qualitative research project with 120 research participants. Participants spent 30–45 minutes per day for four days completing research activities designed to uncover attitudes, beliefs, barriers and potential motivators to getting the COVID-19 vaccine when it is available.

The research included ten audience segments:

1. African American/Black Adults
2. Adults 30-49
3. Rural Adults
4. College Students
5. LGBTQ+ Adults
6. Hispanic/Latinx English Preferred Adults
7. Hispanic/Latinx Spanish Preferred Adults
8. Asian American Adults
9. Pacific Islander/Native Hawaiian Adults
10. Pro-vaccine Adults

The research first talked to participants about their overall attitudes and beliefs about vaccines in general and then moved to talking specifically about COVID-19 vaccines.



Key Themes about Vaccines in General

Overall, all of the audiences think that vaccines are generally safe, reliable and helpful, even though they aren't perfect.

1. **People understand the benefits of vaccines for society:** People feel that vaccines are good for their communities because they prevent people from getting sick and control serious diseases.
2. **Concerns about vaccines are more individual:** While people understand the societal benefits of vaccines, their concerns were more centered around individual impacts such as side-effects, allergies to ingredients, possible long-term health impacts and worry that the vaccine might not be effective.
3. **Systemic racism and discrimination has caused mistrust for some audience segments:** Throughout the study, the following audience segments made reference to mistrust in the medical community and the government as it relates to the development and distribution of vaccines:
 - > African American/Black Adults
 - > Hispanic/Latinx – English Preferred Adults
 - > Hispanic/Latinx – Spanish Preferred Adults
 - > Asian American Adults
 - > Pacific Islander/Native Hawaiian Adults
 - > LGBTQ+ Adults

Within these audiences, there is a dichotomy among those who expressed a desire for, and those that were not comfortable with, members of their community being represented in early testing and distribution of vaccines.

4. **Misconception that vaccines can give you the disease:** There is a false belief that a vaccine can give you the disease it is trying to protect against.
5. **Not all vaccines should be treated equal:** Some participants perceive some vaccines are more important than others related to how deadly the disease is.



Key Themes about the Covid-19 Vaccine

The research uncovered a dozen key themes that will be helpful in planning for communications and outreach regarding COVID-19 vaccines.

1. **Mixed emotions driving a “wait and see” mentality:** People have very mixed feelings about the COVID-19 vaccine, and they are dominated by anxiety, worry and nervousness. They are hopeful that a safe, effective vaccine will be produced. However, they think the vaccine has been rushed and that has eroded their confidence. Most people plan to wait and see how it goes with others before they decide whether to get the vaccine.
2. **Safety is key:** The biggest barrier is concern over the safety of the vaccine. Warp Speed, comparisons to the flu vaccine, political involvement and mistrust of “big pharma” are contributing factors to this concern. Safety was much more of a concern to people than efficacy of the vaccine.
3. **Historical trauma:** There is an added level of mistrust around vaccines for typically under-served populations due to systemic racism.
4. **Difficult decision:** The decision on whether or not to get the COVID-19 vaccine is going to be difficult to make. People will be discussing whether or not to get the vaccine with their family, close friends and their doctor. A number of people have said they will discuss with their family members and make a family decision about what to do.
5. **Doctors are most trusted:** Doctors and other healthcare providers are the most trusted source for information and recommendations about COVID-19 vaccines.
6. **Unsure who else to trust:** There is concern that politics is driving the process making it harder and harder to know who to trust for reliable scientific information about the vaccine. Beyond doctors, independent, scientific reviews of results are preferred by most audience segments over the FDA and pharmaceutical manufacturers.



7. **People need proof:** At this point in time, most people are not willing to get the COVID-19 vaccine until it has been out and proven safe in their community. They want to see that people have received the vaccine and have not had adverse effects. Several audience segments are concerned there will not be adequate testing among their demographic group (African American/Black Adults, Hispanic/Latinx – Spanish Preferred Adults, Hispanic/Latinx – English Preferred Adults, LGBTQ+ Adults, Pacific Islander/Native Hawaiian Adults).
8. **Eager to end the pandemic:** People are interested in doing what they can to end the pandemic, and the sense of urgency of the situation may motivate some people to take a “calculated risk” for the greater good.
9. **Protect those we love:** The desire to help protect loved ones, community members, and the vulnerable is also a strong motivator for getting the COVID-19 vaccine. Many people would protect others over protecting themselves. No one wants to be the reason someone else got COVID-19.
10. **Idea of “WARP Speed” increases concern:** Parallel production and testing is not intuitive and is seen concerning rather than a good thing. The primary concern stems from the belief that speed does not give enough time to see full results.
11. **Urgency and moral obligation are motivators:** The urgency of the COVID-19 pandemic makes some people more willing to get vaccinated. They are conducting a “risk/benefit analysis” to drive their decision-making process. Some people are also motivated by a sense of moral obligation – it is the “right thing to do” or a “duty as a citizen.”
12. **Straightforward messaging is well received:** People value accessible, straightforward vaccine messaging. This approach is believable and evokes positive, hopeful emotions and an interest in learning more.



Background

C+C has been contracted by Washington State Department of Health (DOH) to develop a social marketing initiative designed to vaccinate most adults in Washington.

To do this effectively, the campaign needs to build receptivity, intention and action among people in Washington to get a COVID-19 vaccine. DOH is particularly interested in ensuring that the typically under-served populations are proactively considered part of the priority audience. Understanding the attitudes, beliefs, barriers and motivators regarding the COVID-19 vaccine is fundamental to creating an effective and equitable social marketing initiative and communications campaign.

C+C is also working to support the DOH flu vaccine campaign and the launch of a new COVID-19 Exposure Notification tool (WA Notify). As a way to optimize market research, it was agreed that the scope of this research would also include gathering some foundational insights for those two efforts.

Research Objectives

The primary research objective was to understand attitudes, beliefs, barriers and potential motivators to getting the COVID-19 vaccine when it is available.

In a way that:

- > Drives clarity about if/how barriers and motivations are different for audience sub-segments
- > Identifies important influencers for audience sub-segments
- > Provides direction for messaging context, tone and feel for audience sub-segments

This will enable the team to create an effective social marketing initiative that builds receptivity, intention, and ultimately action among Washingtonians to get a COVID-19 vaccine.

Additional research objectives include:

- > Providing additional insight into attitudes & behaviors relative to this year's flu vaccine
- > Providing insight into awareness, understanding and attitudes about WA Notify

This information will be used as input for strategic planning for each respective Flu Vaccine and WA Exposure Notifications team.

Note that the Research Approach section of this report covers all aspects of the scope of research for all three teams. However, this report only covers insights relative to vaccines in general and to the COVID-19 vaccine. There are separate reports that summarize the research findings for flu and WA Notify.



Research Approach

Audience Segments

The C+C and DOH team agreed that the primary research should explore ten audience segments.

- > African Americans/Black Adults
- > Adults 30-49
- > Rural Adults
- > College Students
- > LGBTQ+ Adults
- > Hispanic/Latinx English Preferred Adults
- > Hispanic/Latinx Spanish Preferred Adults
- > Asian American Adults
- > Pacific Islander/Native Hawaiian Adults
- > People who are considered “pro-vaccine” based on a series of Likert Scale questions about vaccines

Additional respondent specifications are described below:

- > Must live in Washington State
- > Must be undecided about getting the COVID-19 vaccine – we excluded anyone who indicated they definitely would or would not get the COVID-19 vaccine when it becomes available to the general public

We excluded:

- > Medical professionals (nurses, doctors, medical researchers, pharmacists, etc.)
- > Those who work in Public Health field
- > Vaccine hesitant stakeholders (based on answers to Likert Scales)
- > Those who don't believe COVID-19 is real

Each audience segment included a mix of age, gender, income, geography, education, ethnicity and vaccine attitude (Likert scale), unless one of these factors was a determinant in the specific audience group.

Appendix 2 contains the recruitment screener used to identify research participants.



Recruitment Approach

We partnered with Focus Vision™ to recruit all participants except the Hispanic/Latinx, Spanish Preferred Adult audience. For that audience we placed a Facebook ad in Spanish asking Hispanic/Latinx adults who prefer Spanish to participate in a paid research study. If interested, potential participants “clicked” on a link to an AYTM™ survey that determined whether or not they met the screening criteria. If they did, they received an email from the research team to ensure they were included in the research.

Appendix 3 contains a copy of the Facebook ad.

Appendix 4 contains the AYTM survey that was used to screen the Hispanic/Latinx – Spanish Preferred Adult audience.

Methodology

The team conducted a 4-day, online qualitative research study with 120 research participants using the Revelation™ platform. Each respondent was expected to spend 30 – 45 minutes per day completing research activities. This methodology was recommended because:

- > Qualitative research is designed to get at the underlying “truths” of the priority audience in ways that quantitative research cannot.
- > There are already many organizations conducting high-quality quantitative research on COVID-19, including the vaccine and the exposure notification.
- > Participants feel comfortable sharing their opinions in this platform because:
 - > The look & feel is similar to social media platforms
 - > Participants engage from the comfort of their homes and at times that are convenient for them
 - > 24/7 Technical Support available to all participants
 - > Designed to function on laptops, tablets and smartphones
- > We can “speak” to participants from a wide geographic area at the same time
- > We can reach multiple audience types simultaneously

The research firm compensated participants who completed all research activities \$150.

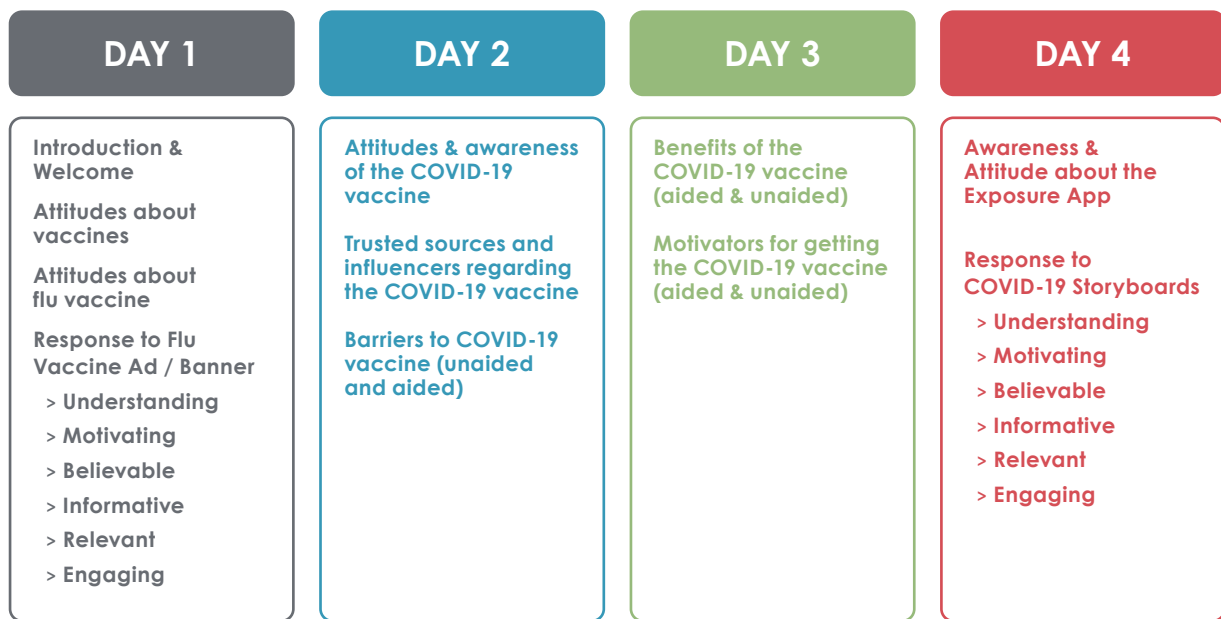


Scope of Work

To meet all the research objectives, the team crafted a discussion guide that had 4-days of research activities. These activities were designed to keep participants engaged while providing insights that met the research objectives.

The diagram below summarizes the research activities by day.

SCOPE DIAGRAM



Appendix 5 contains the discussion guide used for this research.



Key Themes

- 1. Mixed Emotions driving a “wait and see” mentality:** People have very mixed feelings about the COVID-19 vaccine, and they are dominated by anxiety, worry and nervousness. They are hopeful that a safe, effective vaccine will be produced. However, they think the vaccine has been rushed and that has eroded their confidence. Most people plan to wait and see how it goes with others before they decide whether to get the vaccine.
- 2. Safety is key:** The biggest barrier is concern over the safety of the vaccine. Warp Speed, comparisons to the flu vaccine, political involvement and mistrust of “big pharma” are contributing factors to this concern. Safety was more of a concern to people than efficacy of the vaccine.
- 3. Historical trauma:** There is an added level of mistrust around vaccines for minority groups due to systemic racism.
- 4. Difficult decision:** The decision on whether or not to get the COVID-19 vaccine is going to be difficult to make. People will be discussing whether or not to get the vaccine with their family, close friends and their doctor. A number of people have said they will discuss with their family members and make a family decision about what to do.
- 5. Doctors are most trusted:** Doctors and other healthcare providers are the most trusted source for information and recommendations about COVID-19 vaccines.
- 6. Unsure who else to trust:** There is concern that politics is driving the process making it harder and harder to know who to trust for reliable scientific information about the vaccine. Beyond doctors, independent, scientific reviews of results are preferred by most audience segments over the FDA and pharmaceutical manufacturers.
- 7. People need proof:** At this point in time, most people are not willing to get the COVID-19 vaccine until it has been out and proven safe in their community. They want to see that people have received the vaccine and have not had adverse effects. Several audience segments are concerned there will not be adequate testing among their demographic group (African American/Black Adults, Hispanic/Latinx – Spanish Preferred Adults, Hispanic/Latinx – English Preferred, Adults LGBTQ+ Adults, Pacific Islander/Native Hawaiian Adults.)
- 8. Eager to end the pandemic:** People are interested in doing what they can to end the pandemic, and the sense of urgency of the situation may motivate some people to take a “calculated risk” for the greater good.
- 9. Protect those we love:** The desire to help protect loved ones, community members, and the vulnerable is also a strong motivator for getting the COVID-19 vaccine. Many people would protect others over protecting themselves. No one wants to be the reason someone else got COVID-19.
- 10. Idea of “WARP Speed” increases concern:** Parallel production and testing is not intuitive and is seen concerning rather than a good thing. The primary concern stems from the belief that speed does not give enough time to see full results
- 11. Urgency and moral obligation are motivators:** The urgency of the COVID-19 pandemic makes some people more willing to get vaccinated. They are conducting a “risk/benefit analysis” to drive their decision-making process. Some people are also motivated by a sense of moral obligation – it is the “right thing to do” or a “duty as a citizen.”
- 12. Straightforward messaging is well received:** People value accessible, straightforward vaccine messaging. This approach is believable and evokes positive, hopeful emotions and an interest in learning more.



Setting the Context: Attitudes & Beliefs about Vaccines

As a way to set the context for understanding attitudes, beliefs, barriers and motivators for the Flu and COVID-19 vaccines, we had participants answer some behavioral and attitudinal questions about vaccines.

Key Findings

Overall, all of our audiences think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

VACCINE PROS AND CONS

PROS (+)

- > Prevents individuals from getting sick
- > Protects my loved ones, the community and vulnerable people (some use the term 'herd immunity')
- > Controls epidemics – examples include polio, measles and smallpox
- > Scientifically proven

CONS (-)

- > Potential side effects or bad reactions, like allergies or a fever
- > Painful to get, and sometimes lingering injection site pain
- > No guarantee that they are completely effective (in reference to the flu shot)
- > Unknown long term effects
- > Concern over ingredients

Overall, all of our audiences think that vaccines are generally safe, reliable and helpful, even though they aren't perfect.



However, systemic racism and discrimination has caused mistrust in both the medical community and the government. Throughout the study, the following audiences made reference to this mistrust as it relates to the development and distribution of vaccinations:

- > African American/Black Adults
- > Hispanic/Latinx English Preferred Adults
- > Hispanic/Latinx Spanish Preferred Adults
- > Asian American Adults
- > Pacific Islander/Native Hawaiian Adults
- > LGBTQ+ Adults

Within these audiences, there is a dichotomy among those who were concerned about systemic racism in the testing, access & distribution of vaccines.

- > Some people expressed a desire for members of their community to be represented in the testing and early distribution process, as long as the vaccine was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that they could trust that the process would not take advantage of their community.

The following general attitudes, beliefs and misconceptions about vaccines also emerged among all audience segments:

- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Some participants perceive some vaccines are more important than others and seem to have a misconception that some diseases are more deadly or serious than others and therefore those vaccines should be taken more seriously, even mandated.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV. Some say having a choice about these vaccines is an important freedom.
- > Some people have gotten more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > Some don't trust "big pharma" – people believe they are just in the business of vaccines development for the money.
- > Many are open to new vaccines but rely heavily on the recommendations of their doctors. Some also trust the Centers for Disease Control and Prevention (CDC) for information.
- > **The Pacific Islander/Native Hawaiian** audience segment seemed to have a stronger belief than other segments that it's important for everyone to get vaccinated.



Attitudes, Barriers, Beliefs and Motivators Regarding the Covid-19 Vaccine

In order to better understand attitudes, beliefs, barriers and motivators regarding the COVID-19 vaccine, we used a number of different exercises designed to help research participants express themselves. These activities are summarized below.

For more detailed information about these activities please see the Discussion Guides located in Appendix 5.

Understanding Attitudes & Beliefs

Participants were asked to use a “feelings wheel” to share how they would feel about a COVID-19 vaccine becoming available to the general public. The feelings wheel helps us understand the emotional undertone participants feel about the topic by combining the emotion with a description. This gives us more context to build our strategy in a way that is emotionally compelling. They also answered a series of attitudinal and behavioral questions about the COVID-19 vaccine. For example, they were asked how likely they would be to get the vaccine, where they would go to find out information about the vaccine, and so on.

Barriers, Benefits & Motivators

Based on a secondary research review, the team came up with a series of barrier statements, benefit statements and motivators relative to getting the COVID-19 vaccine.

- > Research participants rated each statement on how well the statement reflected their perspective. The scale was from 1 to 10, where 1 was “not at all” and 10 was “completely”.
- > Participants then selected the three statements that most and least reflected their perspective and explained why.

Time Travel Interview

The team used a “time travel interview” technique to help participants describe their motivations and reservations while removing their present self from the scenario. Participants were asked to imagine that we are able to travel forward in time. In this future, the moderator posed as a reporter who was interviewing the respondent. The respondent was asked to do the interview as though (s)he was one of the first people to get the COVID-19 vaccine when it became available to the general public. Interview questions were asked about the decision-making process – who they consulted, what motivated them, and what concerns they had. The interviewer also probed about the respondent's reaction to “warp speed.”



Letter Writing

Participants were asked to write a letter to someone they know who is hesitant about getting the COVID-19 vaccine when it is available for the general public. The purpose of the letter was to uncover benefit and motivations by asking the writer to convince the person they were writing, to get the COVID-19 vaccine. The letter included the following topics:

- > Empathy regarding why they aren't sure about getting a COVID-19 vaccine
- > Thoughts about how their concerns will be addressed
- > An explanation of why they should get the COVID-19 vaccine, including the outcome if lots of people, not just them, get the COVID-19 vaccine

Storyboard Assessments

The final research activity that participants completed was providing feedback about two storyboards for ads. The first provided an explanation of how the COVID-19 vaccine is being made. The second provided an explanation of how a vaccine works in the body. Research participants saw each storyboard and then commented on the following key success factors:

- > Understanding – Could they articulate the main idea of the storyboard?
- > Believability – Do you believe what this storyboard is saying?
- > Relevance – Does this storyboard seem to be directed to someone like you?
- > Engaging – How likely would an ad made from this storyboard be to catch your attention?
- > Informative – Did this storyboard provide you with new information or a new perspective?
- > Motivating – Do you feel motivated to get a COVID-19 vaccine based on the storyboard?

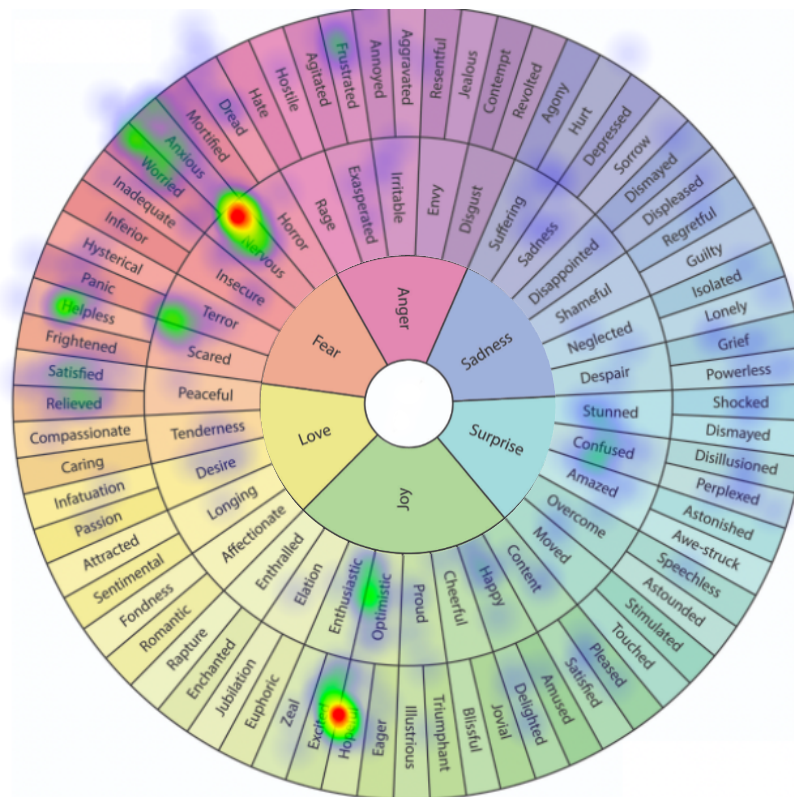


Detailed Findings

Attitudes & Perceptions

To get an understanding of the emotional context relative to the COVID-19 vaccine, research participants were asked to identify 3 – 4 feelings they had when they think about the COVID-19 vaccine. They also provided an explanation of why those feelings were elicited. The results are captured on the diagram below.

COVID-19 FEELINGS WHEEL



HOW DO YOU FEEL ABOUT... COVID-19 VACCINE?



KEY



These results, as well as many open-ended questions and projective activities were synthesized into the following key findings regarding how perceptions are impacting emotions.

Thinking about the COVID-19 vaccine is like an emotional rollercoaster. Per the diagram above, research participants indicated that **anxiety, nervousness** and **worry** are the strongest feelings. Their concerns have to do with the safety and efficacy of the vaccine because it is being developed so quickly.

However, thinking about the vaccine also elicited feelings of **optimism, happiness** and **hope**. This is driven by the desire to protect people from getting COVID-19 and seeing the pandemic come to an end.

Thinking about the COVID-19 vaccine is like an emotional rollercoaster.

Additional feelings that came up include:

- > **Frustration** at feeling uninformed about what is really happening
- > **Powerless** because those in charge are not to be trusted
- > **Stunned** (in a bad way) at how fast the vaccine is being developed

QUOTES

Worry/Scared

“I normally don’t worry but this is a big one. I can imagine the scientists in the labs scurrying around to come up with a vaccine. Are they confident and calm? Do they know what to mix together? Or will they formulate previous vaccines for other pandemics such as Ebola and Sars 2? Anyway, we all know drugs are being recalled by the FDA on a regular basis. This is proof someone goofed up.”

– African American/Black Adult

“I’m worried the vaccine is inferior and won’t be good due to it being so pushed and rushed by the government.”

– Rural Adult

“Scared because I think that the vaccine is being rushed.”

– Adult 30–49



Anxious/Nervous/Concerned

“I feel anxious about the vaccine itself as I don’t know if it has been tested on someone who’s conditions relate to me.” – Asian American Adult

“I don’t trust that they won’t rush the process and in the end I’m worried it will harm more people.” – LGBTQ+ Adult

“Just feel anxious about rushing this vaccine! It would take a lot of time research / known side effects for me to feel less anxious about it.” – Pro-Vaccine Adult

“Very nervous because of the complex situation around the coronavirus and the uncertainty around adverse effects.” – Pacific Islander/Native Hawaiian Adult

“I’m concerned that they will rush it into market and that it may still not be effective or they will have serious side effects. The politicizing of the vaccine scares me. I worry this will motivate approvals before it’s safe.” – College Student

Optimistic/Excited

“I’m optimistic that once a successful vaccine is created that they will test it and deem it safe so that those that want to get vaccinated will get it done and we can finally have some control over this pandemic.” – Hispanic/Latinx – English Preferred Adult

**“I’m excited for everything to return to normal.”
– Hispanic/Latinx – Spanish Preferred Adult**

Participants say that the decision whether or not to get the COVID-19 vaccine is very stressful. There were very few people who had already decided whether or not to get the vaccine when it first becomes available to the general public.*

- > Most people characterized this as a **very difficult decision** to make
- > A large number of participants said **they would consult with their family, close friends and their doctor**
- > Many indicated they would gather information online from: The CDC, “reliable” sources that reported clinical trial test results, and the website of the company that manufactured the vaccine
- > Less mentioned sources of information include: Dr. Fauci, WHO, trusted news sources, independent articles and blogs, and science experts
- > In the end, the main reasons people said they would get the vaccine were **to protect others and to get back to “normal life”**
- > **Rural participants seemed most reluctant** to get the vaccine, claiming they would only do it if they had to

*Note, this is not surprising since we recruited people who claimed to be undecided about the COVID-19 vaccine.



QUOTES

“[It would be a] very, very hard decision. My son and I would decide together, as well as my personal MD.”

– Pro-Vaccine Adult

“[It would not be] an easy decision to make. In fact it would be very difficult... I would go to the CDC website, look at the manufacturer website, ... and discuss with my primary care physician.”

– College Student

“[The decision would be] very hard and would take effort to track down valid information.”

– Rural Adult

“My husband and children would be great sounding boards as I make the decision.”

– Hispanic/Latinx – English Preferred Adult

“This would be a very hard decision because I know the vaccine won’t be out for a long time, and newly created vaccines make me nervous.”

– African American/Black Adult

“Making this decision is not an easy task by my means... This has been a political disaster, a medical nightmare and an emotional rollercoaster.”

– LGBTQ+ Adult

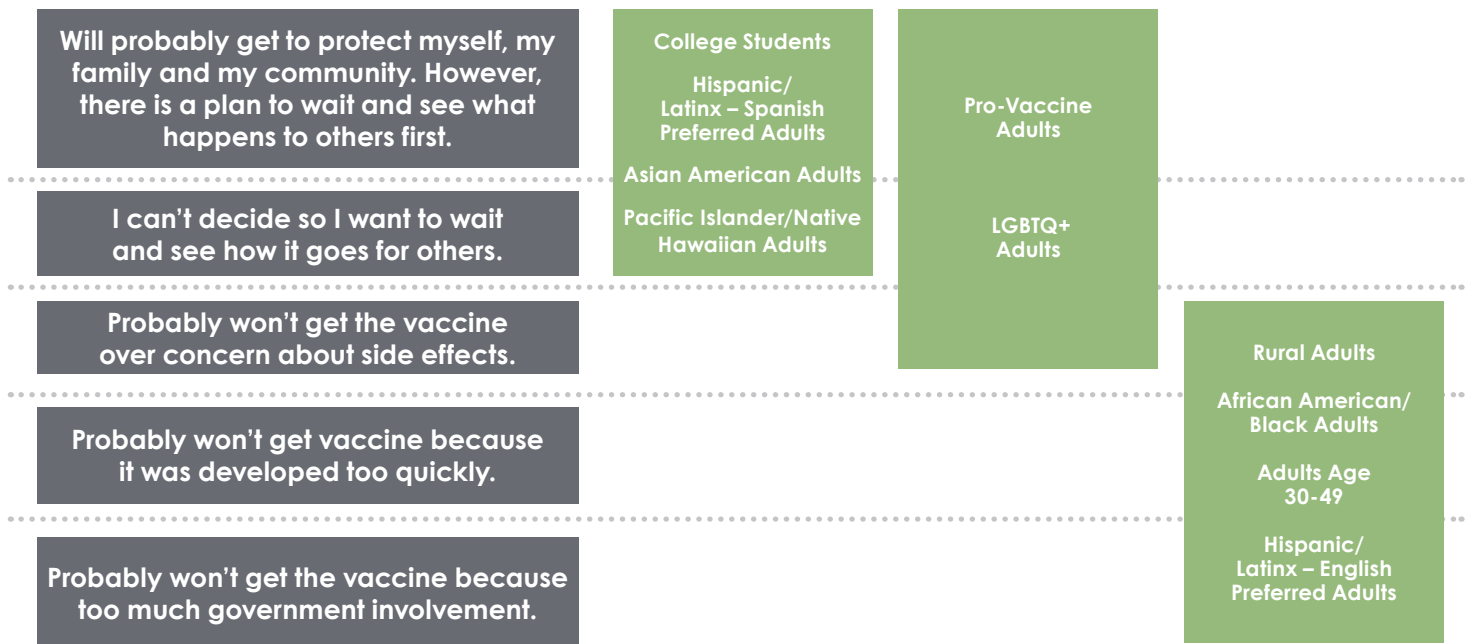
Overall, research participants are hesitant to get the COVID-19 vaccine. This is true even when they were asked to assume that the vaccine:

- Has been approved by the FDA (Food & Drug Administration)**
- Has passed clinical trials**
- Has passed an independent, scientific safety and efficacy review**



Nearly all participants want to wait so they can see how it seems to be affecting other people before they get it. The diagram below summarizes the “wait and see” attitudes by audience.

WILLINGNESS TO GET COVID-19 VACCINE DIAGRAM



College students, Hispanic/Latinx – Spanish Preferred Adults, Asian American Adults and Pacific Islander/Native Hawaiian Adult audience segments seem to be the most willing to commit to getting the vaccine once they feel it is safe.

Rural Adults, Adults 30 – 49, African American/Black Adults and Hispanic/Latinx – English Preferred Adult audiences seem to be the most resistant.

QUOTES

“I would eventually take one after all the trials were completed and data shows a positive impact towards virus prevention.” – Pacific Islander/Native Hawaiian Adult

“The quickest any vaccines has taken to be developed is about 4 years and I feel like it’s too early to understand long term effects of the vaccine. I would like to wait until thorough research is done about side effects.” – Asian Adult

“I will wait until many people have received it and I don’t see reports of serious events related to it.” – Pro-Vaccine Adult

“Although I believe in vaccines, I will not get a “new” vaccine until at least five years of wide spread use has been done.” – Hispanic/Latinx – English Preferred Adult



Barriers

Participants were asked to rate and rank barrier statements based on how well they fit with their own personal perceptions. The chart below summarizes those results by audience. A plus sign indicates the audience is likely to agree with the statement. A minus sign indicates that they were less likely to agree. Bold statements had cross-segment commonalities.

Barrier Statement	A30-49	AA/Black	Rural	Hisp-ENG	Hisp-SPN	LGBTQ+	College	Asian	PI/NH	ProVac
I'm worried the vaccine will have side affects	+	+	+	+	+		+	+	+	+
I'm worried the vaccine will give me COVID-19		-								
I don't trust the vaccine will really be safe	+	+	+	+	+	+	+	+	+	+
I don't believe the vaccine will really protect me from COVID-19		+			+	+				
Politicians/politics instead of science are making decisions about the vaccine	+	+	+	+	+	+	+	+		+
I don't react well to vaccines		-								
I don't have health insurance or can't afford it	-	-+						-		-
I've already had COVID-19 so I don't need it	-						-			
COVID-19 is not such a big deal so I don't need it	-					-	-	-	-	-
Other people will get it so I don't need to		-				-				
I'm concerned because the government uses vaccines to experiment on people	-					+				
I'm concerned that if I get the vaccine someone could collect and share my personal or health info	-					-	-			
I'm concerned there won't be sufficient testing done for my demo		+		+	+	+			+	

KEY

A30-49 (Adults 30-49) **AA/Black** (African American/Black Adults) **Rural** (Rural Adults) **Hisp-ENG** (Hispanic/Latinx - English Preferred Adults) **Hisp-SPN** (Hispanic/Latinx - Spanish Preferred Adults) **LGBTQ+** (LGBTQ+ Adults) **College** (College Students) **Asian** (Asian Adults) **PI/NH** (Pacific Islander/Native Hawaiian Adults) **ProVac** (Pro-vaccine Adults)

These results, as well as many open-ended questions and projective activities were synthesized into the following key findings regarding barriers to getting the COVID-19 vaccine.

The biggest barrier to getting the COVID-19 vaccine is concerns over safety.



QUOTES

“I don’t trust that the vaccine will really be safe: Really depends how this vaccine is researched, tested, and implemented. Who is the driving factor behind this vaccine? Who is pushing and financially benefiting?” – Asian American Adult

“They are all related to the fact that I am concerned it will be released before it’s ready. The world has never needed a vaccine like we need this one. There is a lot of motivation financially, politically and socially to release it soon. The stock market fluctuates based on the most minor statements of progress or lack thereof.” – College Student

“I just know that a year is too soon to force a vaccine through a truly safe trial. I know that there are political motivations... that’s just a fact. We’re in the middle of a fiercely contested election. There is no way to dispute this one. And as for side effects, there are ALWAYS side effects with vaccines. No vaccine is perfect. No vaccine is 100% safe. But I trust vaccines more when they’ve been around awhile and have a history of information about what the side effects are and what the true risks of taking it are. I don’t feel that way about the covid vaccine.” – Adult 30-49

The biggest barrier to getting the COVID-19 vaccine is concerns over safety. There are many inter-related factors that cause this concern.

“Warp Speed” is causing the most concern over safety because the concept of doing parallel testing and production is not intuitive. Research participants believe that production of vaccines comes only after it has been tested for safety and efficacy. In addition, the speed at which the testing is happening makes people question whether or not the tests for safety are robust enough – they are especially concerned about any long-term effects.

QUOTES

“Speed thrills but kills” is a sign one would often see on the highway. Likewise, when we do things in a hurry without due diligence, we are more likely to cause more pain and suffering than actually solve a problem.” – Asian American Adult

“The rush to find a cure may cause the skipping of important steps in scientific research.” – Hispanic/Latinx – English Preferred Adult

“I also worry about the rush for the COVID vaccine, again I trust the science but what I don’t like about the situation is that there hasn’t been enough time to determine long-term effects or side effects from a vaccine that they’re trying to distribute quickly.” – Rural Adult

“Without time, and lots of it, I would be concerned about the long-term side effects of the vaccine. We are still learning about the long-term effects of COVID and we still don’t know a lot. I would be hesitant to get the vaccine right away until we understood both long term effects.” – Pro-Vaccine Adult



Political involvement/influence is concerning to participants because they fear that those making decisions about the vaccine are not really qualified to assess the safety. In addition, many participants think that politicians do not have the interest of the people at heart, but rather hope that the distribution of the vaccine will further their political agenda.

QUOTES

“With the ongoing elections in the US, I believe their pressure on medicinal conglomerates is monumental in their campaigning.” – Asian American Adult

“Politicians will use the issue for their advantage but I think enough guidelines are in place to ensure that when a vaccine is used it will be safe and based on empirical medical research.” – Pro-Vaccine Adult (Rural)

“In addition, politicians are in front of all of Covid decisions when they don’t know what they are talking about. I want to only here from the doctors and scientists.” – African American/Black Adult

“I am very unlikely, because I am not confident in the FDA under the Trump administration.” – LGBTQ+ Adult

Experience and perceptions of the flu vaccine is being conflated with expectations of the COVID-19 vaccine. People know there is a new flu vaccine each year, and assume that the rapid development is similar to “warp speed.” They know that the flu vaccine is generally not highly effective, and many people have experienced side effects from the flu vaccine. Some people misperceive they have gotten the flu from the flu vaccine. As such, people are concerned about side effects, efficacy and potential to get COVID-19 could be a result of the COVID-19 vaccine.

QUOTES

“[I am hesitant to get the COVID-19 vaccine because] I have seen how the flu “vaccine” has been handled and studied it a bit. It sets the expectations for any COVID-19 vaccine.” – Rural Adult (Multi Racial)

“The current flu vaccine doesn’t really protect people from the flu, the effectiveness is really low every year and this vaccine will be very similar to it. This vaccine is being created really quickly because of the pandemic and it’s not being tested for a longer period.” – Hispanic/Latinx – English Preferred Adult

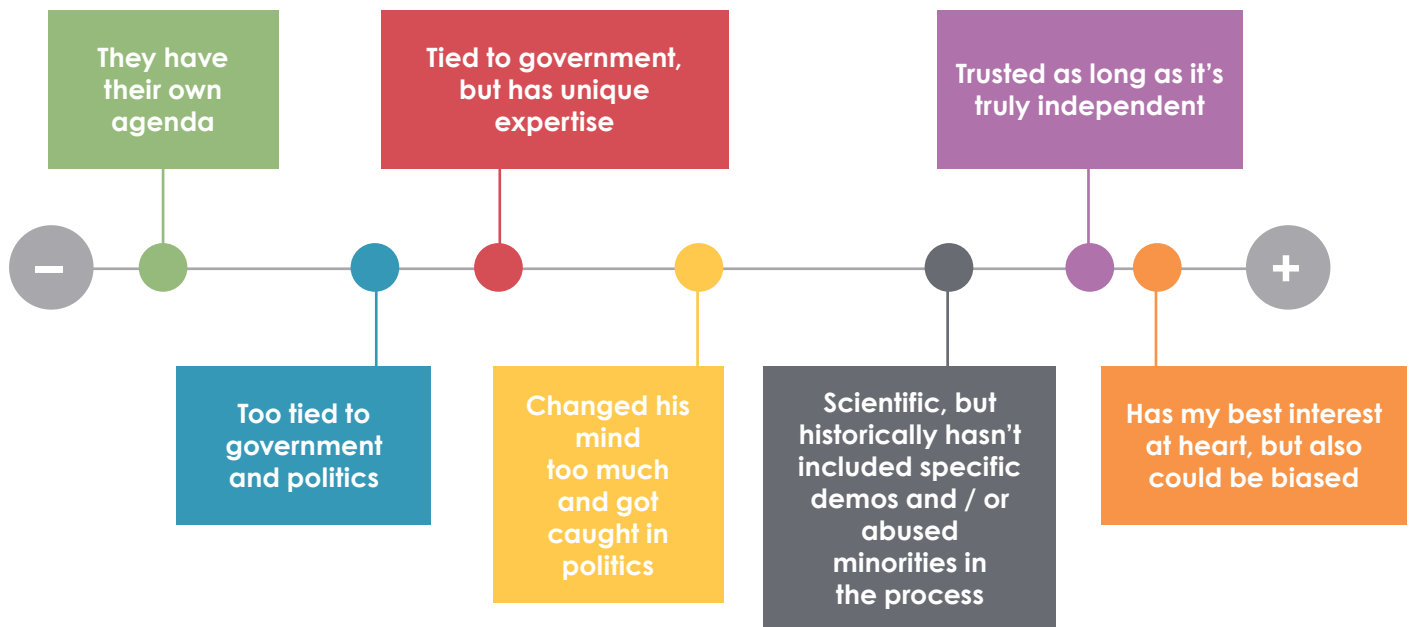
Mistrust in the “experts” is also an issue. This is fueled by:

- > Inconsistent information about COVID-19 as a whole
- > Perceptions that the FDA, Dr. Fauci, and pharmaceutical companies are all being influenced by political agendas



Below is a chart that illustrates the relative levels of trust that research participants tended to attribute to various authority figures and experts.

AUTHORITY FIGURES TRUST CONTINUUM



SOCIAL MEDIA: Includes information from all the sources above and traditional news sources. Information from friends and family generally trusted. Trust in news sources vary.

- Politicians
- FDA
- CDC
- Dr. Fauci
- Clinical Trials
- Independent Testing
- My Doctor

Systemic racism and systems of oppression have caused a general mistrust in both the medical community and the government, which extends to the COVID-19 vaccine.



As mentioned earlier in the section on vaccines, systemic racism and systems of oppression have caused a general mistrust in both the medical community and the government, which extends to the COVID-19 vaccine.

QUOTES

“Usually tested on people who are poorer and can’t legally or physically fight for themselves. Someone is always a volunteer and lives deserved to be cherished not be seen as test labs by people who have larger amounts of money.” – LGBTQ+ Adult

“You and I can both agree that we have a long-standing history in our community of mistrust of government institutions and questioning their motives and whether they have our best interest at heart. Especially under our current president.”

– African American/Black Adult

“I am scared that since not enough test are performed on people belonging to my demographics, the results may be impaired.” – Asian American Adult

“Systemic racism and lack of my awareness of the success of the vaccine [makes me hesitant about a new vaccine].” – Adult 30-49 (African American)

“There is a wave of misinformation in addition to horrible racism that makes me doubt if the government really cares about us or is only looking for monetary interests.”

– Hispanic/Latinx – Spanish Preferred Adult

The African American/Black audience was polarized regarding the cost of the COVID-19 vaccine as a barrier. About half of the African American/Black participants indicated that not having health insurance or not being able to afford the COVID-19 vaccine was one of the most important barriers, while the other half indicated it was one of the least important barriers.

Some of the barriers that were presented to research participants appeared to be inconsequential. These barriers were consistently rated among the least important:

- > Concern that the COVID-19 vaccine will give the person COVID-19
- > Concerns over the collecting and sharing of personal and health information
- > The belief that COVID-19 isn't a big deal
- > They had already had COVID-19, so they didn't need to get the vaccine



Benefits & Motivators

Participants were also asked to rate and rank benefit statements and motivators based on how well they fit with their own personal perceptions. The charts below summarize those results by audience.

Benefit Statement	A30-49	AA/Black	Rural	Hisp-ENG	Hisp-SPN	LGBTQ+	College	Asian	PI/NH	ProVac
I'm helping to protect myself from getting COVID-19	+	+	+	+		+	+	+	+	+
I'm doing my part to end the pandemic	+	+	+	-				+	+	+
I will feel more comfortable leaving home to run everyday errands							-			
I am helping to protect my family and loved ones from getting COVID-19	+		+	+	+	+	+	+	+	+
I'm helping to protect others in my community			+	+	+		+			
I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet			-	-		-		-		
I'd be able to recover from my financial hardships due to COVID-19 sooner			-	-	-	-	-	-	-	-
Children and college students will be able to get back to the classroom sooner			-							
I'm helping to protect the people in my community who are vulnerable			+			+		+	+	
I'm helping everyone who became unemployed get back to work sooner		-	-	-	-		-		-	-

KEY

A30-49 (Adults 30-49) **AA/Black** (African American/Black Adults) **Rural** (Rural Adults) **Hisp-ENG** (Hispanic/Latinx - English Preferred Adults) **Hisp-SPN** (Hispanic/Latinx - Spanish Preferred Adults) **LGBTQ+** (LGBTQ+ Adults) **College** (College Students) **Asian** (Asian Adults) **PI/NH** (Pacific Islander/Native Hawaiian Adults) **ProVac** (Pro-vaccine Adults)

QUOTES

“I am not concerned with my personal health being adversely affected but if people in my family or community are at risk and I was getting a vaccine it would be for them.” – Rural Adult

“Protecting the most health-compromised in our communities is the most important and noble reason to get a vaccine.” – Adult 30-49

“I don't be the stone that sends out ripples of sickness in my community. Yes, people are taking preventative measures, but I would still rather be safe than sorry.” – College Student



Motivation Statement	A30-49	AA/Black	Rural	Hisp-ENG	Hisp-SPN	LGBTQ+	College	Asian	PI/NH	ProVac
My doctor recommended it		+	+		+	+	+	+	+	+
I trust the process that was used to develop the vaccine										
I trust the FDA would not approve something that wasn't safe		-	-	+		-		-	-	
I knew a few people who got it and they are feeling fine	+				+		-			
It's being offered by my workplace or school										
I knew that many healthcare workers had gotten it	+							+	+	
It has been used successfully in other states						+				
It has been used successfully in other countries			+			+	+	-	-	
It's required by my workplace or school										
It's free whether or not I have insurance				-			-		-	-
Dr. Fauci assures us that it is safe & effective		+	-	+	-		+			
Everyone in a government position was required to get it										
The CDC assures us that it is safe & effective		+		+		-		+	+	
If I was convinced that no one would collect or share any of my personal or health information						-	-		-	-

KEY

A30-49 (Adults 30-49) **AA/Black** (African American/Black Adults) **Rural** (Rural Adults) **Hisp-ENG** (Hispanic/Latinx - English Preferred Adults) **Hisp-SPN** (Hispanic/Latinx - Spanish Preferred Adults) **LGBTQ+** (LGBTQ+ Adults) **College** (College Students) **Asian** (Asian Adults) **PI/NH** (Pacific Islander/Native Hawaiian Adults) **ProVac** (Pro-vaccine Adults)

These results, as well as many open-ended questions and projective activities were synthesized into the following key findings regarding motivators and benefits to getting the COVID-19 vaccine. **“Keeping others healthy” is one of the top motivators for getting the COVID-19 vaccine.** No one wants to be the reason someone else got COVID-19. Protecting others is, in many cases, more important than protecting self.



Participants described getting the COVID-19 vaccine as a moral obligation to “do the right thing.” Some specific phrases of encouragement people used include:

- > Be a leader
- > Find the courage
- > Normalcy starts with you!
- > It's important that we all do our part
- > Rotary's motto is “Service Above All”
- > Taking the vaccine will “help our nation”
- > Duty as a good citizen
- > We are all in this together
- > Sometimes we have to take a risk to help the greater good
- > It's our responsibility to look out for those around us

**Participants described getting the
COVID-19 vaccine as a moral obligation
to “do the right thing.”**

QUOTES

**“Rotary’s motto is ‘service above all’ This is one of those things.
We are all in this together.” – Rural Adult**

**“There are just times when you have to do your bit for society and humanity
as a whole.” – Pacific Islander/Native Hawaiian Adult**



A doctor's recommendation to get the COVID-19 is very motivating. Many people have a trusting relationship with their doctor, and they believe their doctor has the best interest of the patient at heart.

Although somewhat polarizing, Dr. Fauci's recommendation to get the vaccine is considered credible and therefore motivating. Those who do not trust Dr. Fauci either say he is too much a part of politics and/or he changes his mind too much.

QUOTE

“I trust Dr. Fauci and the CDC the most when it comes to current information about the COVID-19 vaccine. I would also be more likely to get it under the advice of my doctor.” – LGBTQ+ Adult

In addition to discussing the vaccine with their doctor, many participants say they want access to independent, scientific data to help them make a decision.

The uniqueness of this situation may make some more willing to “risk” getting the vaccine. People are weighing benefits of getting “back to normal” and protection from the virus against the possibility of vaccine side effects – particularly long-term side effects.

- > A number of people expressed that the potential benefits outweigh the potential risks
- > Some argue that there isn't the luxury of waiting around – this is an imminent, serious threat to America and the world
- > People recognize that vaccines paved the way to eradication of smallpox and polio, which were also extreme situations

QUOTES

“Desperate times call for desperate measures.” – Adult 30–49

“It comes down to evaluating a simple risk to reward ratio. The rewards are too great in comparison with the unsubstantiated risks.” – College Student

**“Maybe the lowered risk of catching the virus will outweigh the potential side effects.”
– Asian American Adult**



In addition to discussing the vaccine with their doctor, many participants say they want access to independent, scientific data to help them make a decision. They want:

- > Easy access (i.e., can easily find on the internet and share)
- > Reliable sources – CDC, my trusted news source, my doctor, vaccine manufacturer, no politicians, independent scientific studies, medical experts and medical institutions
- > Easy to understand and “fact check”
- > Actual usage results (over clinical trials)
- > Safety measures (more important than measures about efficacy)
 - > Safety = No side effects
 - > Safety = Does not have long term effects (like years out)

QUOTES

“I am going to trust the subject matter experts, doctors, and scientists who create and provide the vaccine.” – Pacific Islander/Native Hawaiian Adult

“I think the CDC is generally a reliable source of information when it comes to infectious diseases and their prevention/treatment.” – Asian American Adult

“The opinions and actions of medical officials carry more weight with me than those of politicians and pundits, so if the people who are most informed approve of the vaccine and are getting it themselves, I’d be more inclined to follow suit.” – College Student

“I trust Dr. Fauci and the CDC the most when it comes to current information about the COVID-19 vaccine. I would also be more likely to get it under the advice of my doctor.” – LGBTQ+ Adult

Motivators associated with financial recovery were ranked among the least important.

Financial considerations were rarely mentioned unaided or in the projective exercises, although financial hardships as a result of COVID-19 were discussed.

- > All benefits associated with financial recovery were scored among the 3 least important benefits by most segments
- > **Adults Aged 30–49** was the only audience that didn’t place financial concerns as least important – but they also didn’t rate them as most important
- > Even though the **Asian Adult** audience scored the financial barriers as among the least important, they did mention cost as a barrier unaided; AND cost was a motivator for them (if it were free whether or not they had insurance)



Storyboard 1: How the COVID-19 Vaccine is Being Made

1



OPEN ON TITLE: HOW ARE COVID VACCINES BEING MADE?

FEMALE ANNCR (VO): We know you probably have some questions about COVID vaccines. Here are some answers about how they're being made.

2



SHOW QUESTION.

MALE ANNCR (VO): How are COVID vaccines being produced faster?

ZOOM INTO THE QUESTION MARK, PURPLE FILLS THE SCREEN

FEMALE ANNCR (VO): Usually vaccine testing and production are done as separate steps...

3



TESTING & PRODUCTION ICONS SIDE BY SIDE. BOTH LEAVE FRAME TOGETHER

FEMALE ANNCR (VO): But because of the pandemic, vaccines are being developed on parallel tracks --meaning we're still doing both steps, just at the same time.

4



SHOW QUESTION.

MALE ANNCR (VO): How are the vaccines being tested?

ZOOM INTO THE QUESTION MARK, YELLOW FILLS THE SCREEN

FEMALE ANNCR (VO): As we speak, several different COVID vaccines are in testing.



5



ICONS GROW FROM SMALL GROUP TO BIGGER GROUP TO HUGE GROUP

FEMALE ANNCR (VO): Each of them go through more than one clinical trial. First with a small group of volunteers, then a couple hundred, then thousands.

6



SHOW QUESTION.

MALE ANNCR (VO): How will the vaccines get approved?

ZOOM INTO THE QUESTION MARK, BLUE FILLS THE SCREEN

FEMALE ANNCR (VO): Not all COVID vaccine versions will make it to the final stages of testing.

7



SHOW A CLIPBOARD. CHECKMARKS APPEAR ONE BY ONE.

FEMALE ANNCR (VO): But for those that do make it, a team of medical experts will examine test results and possible side effects. If the vaccine works and it's safe, it gets approved. Then it gets to you. Produced vaccines that are not approved will be destroyed.

8



SHOW A NUMBER OF QUESTION MARKS IN CIRCLES. CIRCLES TURN AROUND ONE BY ONE TO SHOW THUMBS UPS

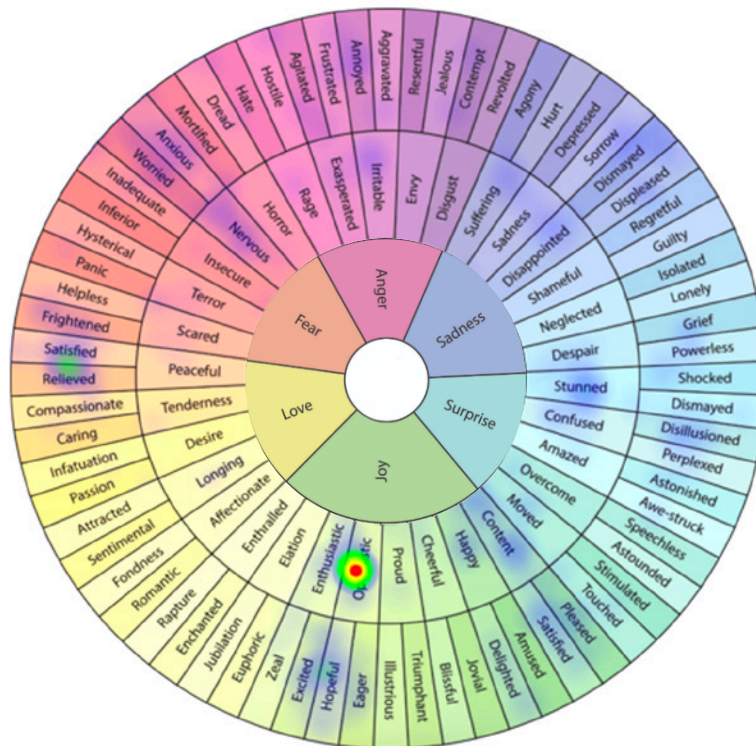
FEMALE ANNCR (VO): Thanks for listening. For more answers, go to CovidVaccineWA.org



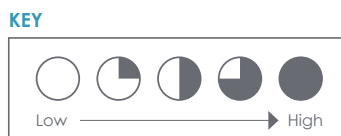
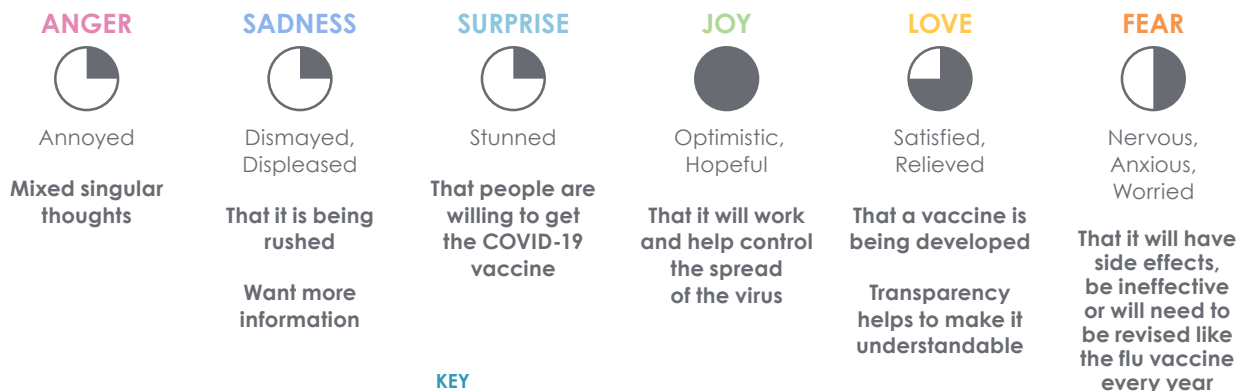
The concept of a storyboard was explained to research participants, and they were asked to review storyboard 1 and select 3 – 4 feelings that reflected how they felt about it. The results of this exercise are provided in the chart below.

Storyboard 1 evokes more positive feelings than negative feelings. Per the diagram below, most participants indicated that they were **optimistic** and **hopeful** that a vaccine would work, and **satisfied/relieved** that a vaccine is being made.

However, some participants also felt anxious and nervous that it will have side effects, or not be effective. A few participants felt dismayed that it is being rushed, and stunned that some people would be willing to get the COVID-19 vaccine.



HOW DO YOU FEEL ABOUT... STORYBOARD 1?



QUOTES

Hopeful

“Content its being made into a factual ad with information versus ‘get the vaccine’ content knowing maybe more people will consider it.” – Rural Adult

“I feel really hopeful after viewing this storyboard. It helps to ease the negative commentary I have been hearing over and over again on the news. All you ever hear about is how participants have had negative side effects and the FDA halting multiple trials. This kind of news really scares most people and turns them away from ever receiving the covid-19 vaccine. Maybe this storyboard can help ease their fears. I’m hopeful for that.” – College Student

The “How the COVID-19 Vaccine is Made” storyboard effectively communicates how a vaccine is made and approved.

Enthusiastic/Optimistic

**“Enthusiastic that something positive will come out of the research.”
– Pro-Vaccine Adult**

**“It feels good that people are finally trying to make an effective campaign.”
– Pacific Islander/Native Hawaiian Adult**

Confused/Worried

“While it does cover three common questions, it doesn’t do a very good job of answering the second and third questions.” – LGBTQ+ Adult

**“Where it says that testing and production is done at the same time makes me feel exasperated because it seems as if they’re in a rush to make it.”
– Hispanic/Latinx – English Preferred Adult**

“I’m worried because the information shared on the storyboard was not sufficient enough for me to be convinced to get the vaccine.” – Asian American Adult



The “How the COVID-19 Vaccine is Being Made” storyboard effectively communicates how a vaccine is made and approved. The chart below summarizes how well this storyboard performed against the success factors. The more filled in the circle, the more the ad delivered on the listed attribute.

HOW ARE COVID VACCINES BEING MADE?

ATTRIBUTE	OVERALL
Understanding	●
Believable	●
Relevant	●
Engaging	◐
Informative	◐
Motivating	◐

KEY



QUOTES

“They conveyed an important message to the entire community in an easy to understand way. I liked the way they explain how a vaccine works in general. In a simple, lively but practical way.” – Hispanic/Latinx – Spanish Preferred Adult

“The topics selected for the ad are very relevant and I really appreciate the fact that it goes through the entire process of vaccine development that how they are made, tested, and approved.” – Asian American Adult

“We’re living in a time of uncertainty and what better way to uplift people and inspire hope than to answer questions, clear the air, help people feel more in control.”
– LGBTQ+ Adult



- > Most understand that the ad is explaining the process for developing and approving a vaccine.
- > It is largely believable, but people question whether or not the vaccine can be safe. Two parts of this ad raise concerns:
 - > The vaccine is going through parallel testing and development
 - > It mentions testing, but does not provide specifics such as:
 - Is it enough people?
 - Is there enough time between cycles to really know impact?
 - Exactly what are they testing?
 - Are they testing on a broad enough group to represent the total population?
- > The ad is highly relevant because the topic is all over the media, and it addresses many questions people have.
- > Most said it was very engaging because the topic itself is so important right now. However, some thought it was too 'juvenile.' This is not surprising as one of the goals was to make it extremely easy to understand.
- > Most found the ad to be very informative. However, some claimed this was information they already knew.
- > Although the ad is not very motivating in and of itself, it provides important information that will help people make an informed decision. This is also not surprising as the objective was to build an understanding of vaccine development to help people make an informed decision when the time comes.

Opportunities to Improve:

- > Based on the participants' review of this storyboard, the following changes were made to the ads:
 - > The copy in latter half of the script was updated to make it more clear that there are two separate steps: 1) Clinical trials, and 2) Medical review after a vaccine passes clinical trial.
 - > The copy that mentions that produced vaccines will be destroyed was moved earlier into the section regarding trials and medical review. This change was made so that the video does not end with mention of "destroying" and can have more hopeful ending.



The chart below demonstrates that there was very little variance across the audience groups. Notable audience nuances include:

- > The African American/Black audience was more skeptical than other segments about the ad overall.
- > Hispanic/Latinx Spanish Preferred Adult audience did not understand the ad, and did not find it motivating. Based on comments, this may be more to do with the format of the storyboard than the content. Additional research is being conducted through one-on-one interviews with Spanish speakers to dig further into feedback on this ad.

SNAPSHOT OF RESPONSES TO STORYBOARD 1

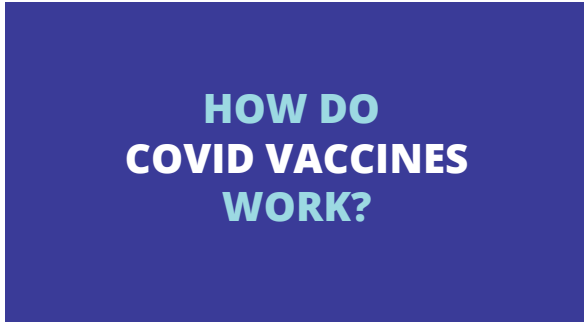
	Understanding	Believable	Relevant	Engaging	Informative	Motivating
African American/Black Adults						
Rural Adults						
Adults 30 – 49						
College Students						
LGBTQ+ Adults						
Hispanic/Latinx Spanish Preferred Adults						
Hispanic/Latinx English Preferred Adults						
Pro-Vaccine Adults						
Pacific Islander/ Native Hawaiian Adults						
Asian American Adults						

KEY



Storyboard 2: How the COVID-19 Vaccine Works

1



OPEN ON TITLE: HOW DO COVID VACCINES WORK?

ANNCR (VO): How do vaccines work in your body? Well I have :60 to tell you three things you should know. Ready...

2



SHOW BIG NUMBER 1 THEN MOVE TO CORNER. SHOW THE VACCINE SURROUNDED BY CELLS. THOUGHT BUBBLE APPEARS ABOVE VACCINE.

#1 Practice, Practice, Practice. A vaccine is basically a practice session for the immune system.

3



THEN THOUGHT BUBBLES APPEAR WITH SAME COVID SYMBOL ABOVE THE CELLS TO SHOW THEM LEARNING FROM THE VACCINE.

It trains it to look for the key features of a virus. So, when a virus does show up, your immune system is ready to fight it off.

4

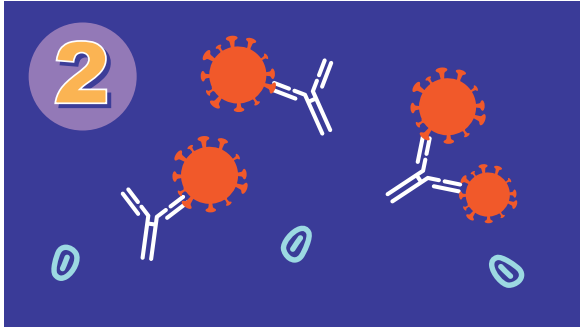


SHOW BIG NUMBER 2 THEN MOVE TO CORNER. ANTIBODIES FORM, READY TO PROTECT.

#2. Vaccine meet Virus. The vaccine gives your body a plan to recognize the virus. Then your immune system starts preparing by making antibodies, or fighter cells, that stay in your blood as protection in case the virus tries to invade.



5



THEN CORONAVIRUS APPEARS. SHOW ANTIBODIES FIGHTING AGAINST THE CORONAVIRUS UNTIL IT DISAPPEARS

What this means is you get immunity against the disease, without having to get sick first.

6



BIG NUMBER 3 THEN MOVE TO CORNER. SHOW A GROUP OF PEOPLE (INCLUDING PREGNANT WOMEN AND BABIES) WITH LITTLE BAND-AIDS ON ARMS.

#3 Community Immunity. When enough people's bodies know how to fight off a virus, it has nowhere to go and the spread is stopped.

7



A SHIELD FORMS ABOVE THEM. COVID DOTS TRY TO GET IN BUT CAN'T

When people get a vaccine, we're able to stop the spread quicker.....and get a little closer to ending this pandemic.

8



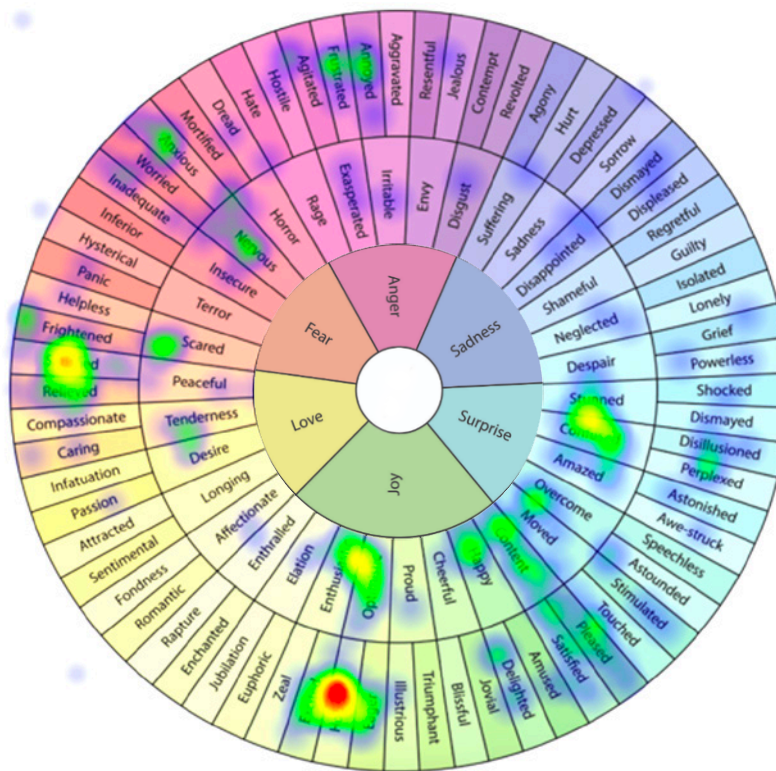
URL

That's basically how vaccines work. And that is sixty seconds.

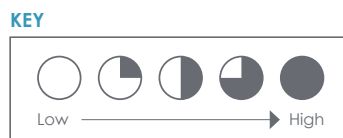
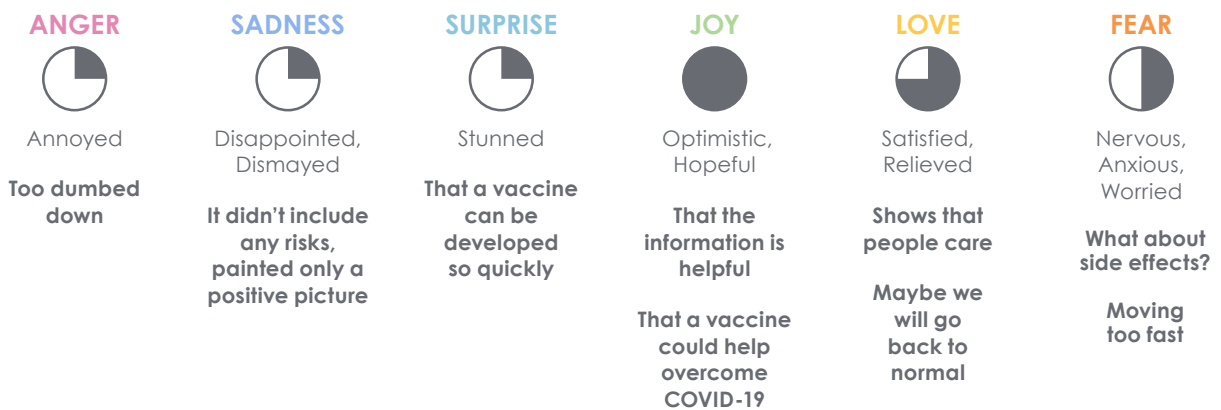


Storyboard 2 evokes more positive feelings than negative feelings. Per the diagram below, most participants indicated that they were **optimistic** and **hopeful** that a vaccine would help overcome COVID-19, and **satisfied/relieved** because it shows that someone cares and maybe we will be able to get back to normal.

However, some people feel **nervous**, **anxious** and **worried** about potential side effects and how quickly everything is happening. A few felt **disappointed** that it didn't show any risks or downsides, which made it seem unrealistic.



HOW DO YOU FEEL ABOUT... STORYBOARD 2?



QUOTES

Satisfied/Pleased

“I felt satisfied that this storyboard did a great job of communicating the importance of vaccines. It was simple, clear and very to the point.” – College Student

“It makes me satisfied because it shows that were getting help.”

– African American/Black Adult

“I’m satisfied that they explain how the vaccine works, it shows people that don’t know the process of it.” – Hispanic/Latinx – English Preferred Adult

“I am pleased to know that vaccine developers want to give as much information about the vaccine as possible. I feel like the more people know, the easier it’ll be for them to consider being vaccinated.” – Pro-Vaccine Adult

Hopeful/Optimistic

“Now that I know more about how vaccines work, I feel optimistic about ending the pandemic.” – LGBTQ+ Adult

“Hopeful that this horrible disease could be controlled. The vaccine may be the solution to stop this pandemic and that makes me feel optimistic.”

– Hispanic/Latinx – Spanish Preferred Adult

“Hopeful that this will influence people to get the vaccine as getting vaccinated will be a major step towards eventually stopping the spread – permanently.”

– Pacific Islander/Native Hawaiian Adult

Perplexed/Confused

“Perplexed that it sounds so safe. There were no precautions listed. Only rainbows and unicorns.” – Adult 30–49

“The information provided is insufficient as it does not mention effectiveness in terms of numbers.” – Asian American Adult

“Confused how it’s a live virus but you won’t get sick?” – Rural Adult



The “How the COVID-19 Vaccine Works” storyboard effectively communicates how a vaccine is made and approved. The chart below summarizes how well this storyboard performed against the success factors.

HOW THE COVID-19 VACCINE WORKS

ATTRIBUTE	OVERALL
Understanding	
Believable	
Relevant	
Engaging	
Informative	
Motivating	

KEY



QUOTES

“It’s very believable due to the graphics and I feel like with the graphics it shows people a visual which makes it easier to understand and digest.”

– Pacific Islander/Native Hawaiian Adult

“We live in a pandemic, and we’re searching for a vaccine to end the pandemic. So naturally folks have questions about the ways a vaccine works.” –LGBTQ+ Adult

“Maybe spend a few more seconds reassuring recipients about the vaccine’s safety, no side effects and won’t get sick with COVID in order for the body to build antibodies.” – Pacific Islander/Native American Adult

“What I least liked about the storyboard was that it does not provide information on studies or give any potential adverse reactions of the vaccine.” – College Student



- > Research participants **understand** that the ad is explaining the way a vaccine works in the body to protect against a virus.
- > The ad is **largely believable**, but some still had doubts:
 - > They didn't understand why people don't get the virus during the "practice" period.
 - > The idea of injecting a live virus is counter-intuitive to some.
 - > People can get COVID-19 more than once, so how does the vaccine protect you better than if you had developed antibodies via the virus itself.
 - > There's no talk of risks or side effects of vaccines, so it sounds too good to be true.
- > This ad is **highly relevant** because the topic is all over the media, and it addresses many questions people have.
- > Participants said it was **very engaging**. However, like the first ad, some thought it was too 'juvenile.' Like the first ad, this is not surprising as one of the goals was to make it extremely easy to understand.
- > People found the ad to be **very informative**. However, some claimed this was information they already knew.
- > Although the ad **not very motivating** in and of itself, it provides important information that will help people make an informed decision. This is also not surprising as the objective was to build an understanding of how vaccines work to help people make an informed decision when the time comes.

Opportunities to Improve:

- > Based on the participants' review of this storyboard, the following changes were made to the ads:
 - > People thought using the word practice sounds like vaccines "try" but don't always work. To address this, the ads were revised to remove the word "practice" from the script and replaced it with the words "teach" and "train" to communicate that the vaccine trains your body to look for the virus.
 - > Participants were confused by the opening frame of the ad which seemed to indicate that COVID-19 vaccines were available. To address this, the opening script of the ad was changed to say "How Would COVID Vaccines Work?", (instead of How Do COVID Vaccine Work?).
 - > Some research participants were confused that the Ys shown in the visuals were Y chromosomes. To address this we changed the "Ys" that were supposed to visually represent antibodies to "As" (A for Antibody).



The chart below demonstrates that there was little variance across the audience groups. However, like the first ad, the African American/Black audience was more skeptical than other segments about the ad overall.

SNAPSHOT OF RESPONSES TO STORYBOARD 2

	Understanding	Believable	Relevant	Engaging	Informative	Motivating
African American / Black						
Rural Adults						
Adults 30 – 49						
College Students						
LGBTQ+						
Latinx/Hispanic - Spanish						
Latinx/Hispanic - English						
Pro-Vaccine						
Pacific Islander / Native Hawaiian						
Asian						

KEY



Appendix 1: Audience Segment Summaries



PARTICIPANT SEGMENT: African American/Black Adult

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

African American/Black Adult participants think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Are scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Systemic racism and discrimination have caused some African American/Black participants to have mistrust in medical field and government's involvement in vaccination development. There is a dichotomy about how this impacts the attitudes among those concerned about systemic racism in the testing, access & distribution of vaccines:

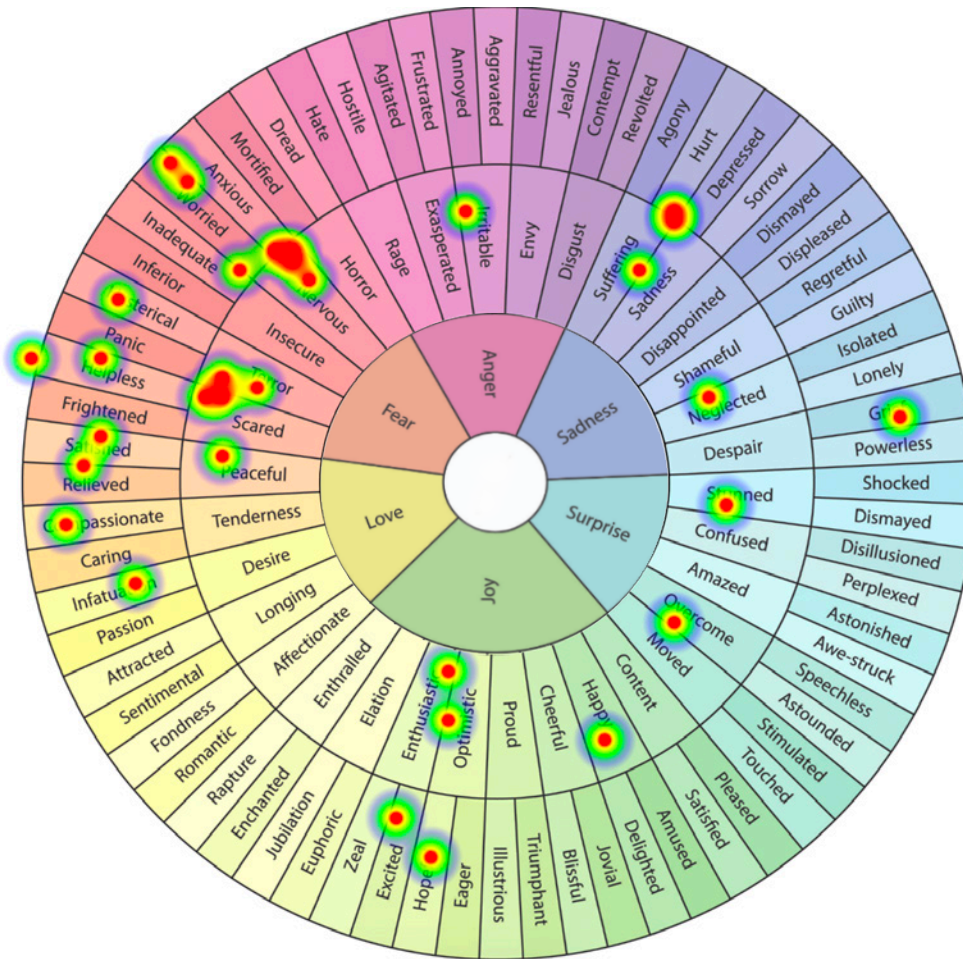
- > Some people expressed a desire to engage early in making sure minority groups were part of testing and distribution in a way that was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that these issues are resolved.

Some, but not all, African American/Black participants have the following attitudes, beliefs and some misconceptions about vaccines in general:

- > Some have a misconception that a vaccine can give you what you are trying to protect against.
- > Some vaccines are more important than others and because they address diseases that are more deadly, like measles, smallpox, and polio
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV
- > Some African American/Black participants have gotten become more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > Some don't trust "big pharma" because they are just in the business of vaccines development for the money.
- > African American/Black participants are open to new vaccines but rely heavily on the recommendations of their doctors. Some also trust Dr. Fauci and Centers for Disease Control and Prevention (CDC) for information.



II. Feelings about the COVID-19 Vaccine



ANGER



Irritable

That there is so much misinformation about COVID-19

SADNESS



Sadness

Around the losses caused by the pandemic, loss of life, loss of jobs

SURPRISE



Confused

About which sources to turn to for true information

JOY



Hopeful, Optimistic

That enough people will get the vaccine and that it will make a difference in slowing the spread

LOVE



Relieved

That there is hope around quarantine ending if the vaccine is effective

FEAR



Anxious, Nervous, Scared

That the development process is being rushed

That the vaccine will not be effective

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most African American/Black participants say they probably won't get the COVID-19 vaccine. The factors that drive this decision are:

- > A mistrust of the way it is being handled – too many politicians with their own agendas weighing in on a scientific topic.
- > The speed at which the vaccine is being developed – they don't think there is sufficient time to tell if the vaccine will really be safe, especially regarding long-term effects.

When it's time to make a decision about whether or not to get the vaccine, African American/Black participants will be likely to consult with their family, close friends, and their doctor.

In addition to discussing the vaccine with their doctor, many African American/Black participants say they want access to independent, scientific data to help them make a decision. They want:

- > Easy access (i.e., can easily find on the internet and share)
- > Reliable sources – CDC, **my** trusted news source, **my** doctor, vaccine manufacturer, **no** politicians, independent scientific studies, medical experts and medical institutions
- > Easy to understand and “fact check”
- > Actual usage results (over clinical trials)
- > Safety measures (more important than measures about efficacy)
 - > Safety = No side effects
 - > Safety = Does not have long term effects (like years out)

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it



- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo

African American/Black Participants consistently picked the following statements as their top three barriers:

- > I'm worried the vaccine will have side affects
- > I don't believe the vaccine will really protect me from COVID-19
- > I don't trust the vaccine will really be safe
- > Politicians/politics instead of science are making decisions about the vaccine

The safety and side effects are of concern because of how fast the vaccine is being developed. Safety is also a concern because politicians/politics instead of science are making decisions about the vaccine.

African American/Black participants consistently picked the following statements among their bottom three barriers:

- > I'm worried the vaccine will give me COVID-19
- > I don't react well to vaccines
- > Other people will get it so I don't need to

The barrier "I don't have health insurance or can't afford it" was polarizing. Some African American/Black participants rated this as a top barrier, and others rated it as a bottom barrier.

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every-day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet



- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

Benefits that helped to keep people safe were consistently among the top three for African American / Black participants:

- > I'm helping to protect myself from getting COVID-19
- > I am helping to protect my family and loved ones from getting COVID-19

The only benefits consistently ranked among the three least important for African American/Black participants was, "I'm helping everyone who became unemployed get back to work sooner."

Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

The three motivators that consistently ranked in the top three with African American/Black participants were:

- > My doctor recommends it
- > Dr. Fauci assures us it is safe and effective
- > The CDC assures us that it is safe & effective

The only motivator that consistently ranked in the bottom three for African American/Black participants was, "I trust that the FDA would not approve something that was not safe."



PARTICIPANT SEGMENT: Adults 30-49

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Adults 30-49 think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none">• Prevent individuals from getting sick• Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity')• Control epidemics – examples include polio, measles and smallpox• Are scientifically tested/proven	<ul style="list-style-type: none">• Potential side-effects or bad reactions, like allergies or a fever• Painful to get, and sometimes lingering injection site pain• No guarantee that they are completely effective (in reference to the flu shot)• Unknown long-term side effects• Concern that they include unnatural/unhealthy ingredients

Some, but not all, Adults 30-49 have the following attitudes, beliefs and some misconceptions about vaccines in general:

- > Some have a misconception that a vaccine can give you what you are trying to protect against.
- > Attitude that some vaccines are more important than others because they address diseases that are more deadly (like measles, smallpox, and polio).
- > Perception that some vaccines are less critical: Flu, chickenpox and HPV.
- > Some Adults 30-49 have gotten more skeptical of vaccines because of what is happening with the COVID-19 vaccine.
- > Some don't trust "big pharma" because they believe they are just in the vaccine-development business for the money.
- > Adults 30-49 are open to new vaccines but rely heavily on the recommendations of their doctors. Some also trust the Centers for Disease Control and Prevention (CDC) for information.



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most Adults 30-49 are reluctant to get the COVID-19 vaccine. Most said they would probably get it after it has been in use for an extended period of time. The factors that drive this decision are:

- > A mistrust of the way it is being handled – too many politicians with their own agendas weighing in on a scientific topic
- > The speed at which the vaccine is being developed – they don't think there is sufficient time to tell if the vaccine will really be safe, especially regarding long-term effects

When it's time to make a decision about whether or not to get the vaccine, Adults 30-49 will likely consult with family, close friends, and their doctor.

In addition to discussing the vaccine with their doctor, many Adults 30–49 say they want access to independent, scientific data to help them make a decision. They want:

- > Easy access (i.e., can easily find on the internet and share)
- > Reliable sources – CDC, **my** trusted news source, **my** doctor, vaccine manufacturer, **no** politicians, independent scientific studies, medical experts and medical institutions
- > Easy to understand and “fact check”
- > Actual usage results (over clinical trials)
- > Safety measures (more important than measures about efficacy)
 - > Safety = No immediate side effects
 - > Safety = Does not have long term effects (like years out)

Ultimately, the main reasons Adults 30-49 said they would get the vaccine were to protect others and to get back to “normal life.” Some also considered that getting the COVID-19 vaccine is “just the right thing to do.”

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it



- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo

Adults 30–49 consistently picked the following statements as their top three barriers:

- > I'm worried the vaccine will have side effects
- > I don't trust the vaccine will really be safe
- > Politicians/politics instead of science are making decisions about the vaccine

Safety and side effects are of concern because of how fast the vaccine is being developed. Safety is also a concern because people believe that politicians/politics are making decisions about the vaccine instead of science.

Adults 30–49 consistently picked the following statements among their bottom three barriers:

- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner



Benefits that helped to keep people safe were consistently among the top three for Adults 30-49:

- > I'm helping to protect myself, my family and loved ones from getting COVID-19
- > I am helping to protect my family and loved ones from getting COVID-19

None of the benefits consistently ranked as the three least important for Adults 30–49. However, Adults Age 30–49 was the only audience that didn't place financial concerns as least important.

Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

Only two of the motivators consistently ranked in the top three with Adults 30-49:

- > I knew a few people who got it and they are feeling fine
- > I knew that many healthcare workers had gotten it

None of the motivators consistently ranked in the bottom three for Adults 30-49



PARTICIPANT SEGMENT: Rural Adults

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Rural Adults think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Are scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Some, but not all, Rural Adults have the following attitudes, beliefs and some misconceptions about vaccines in general:

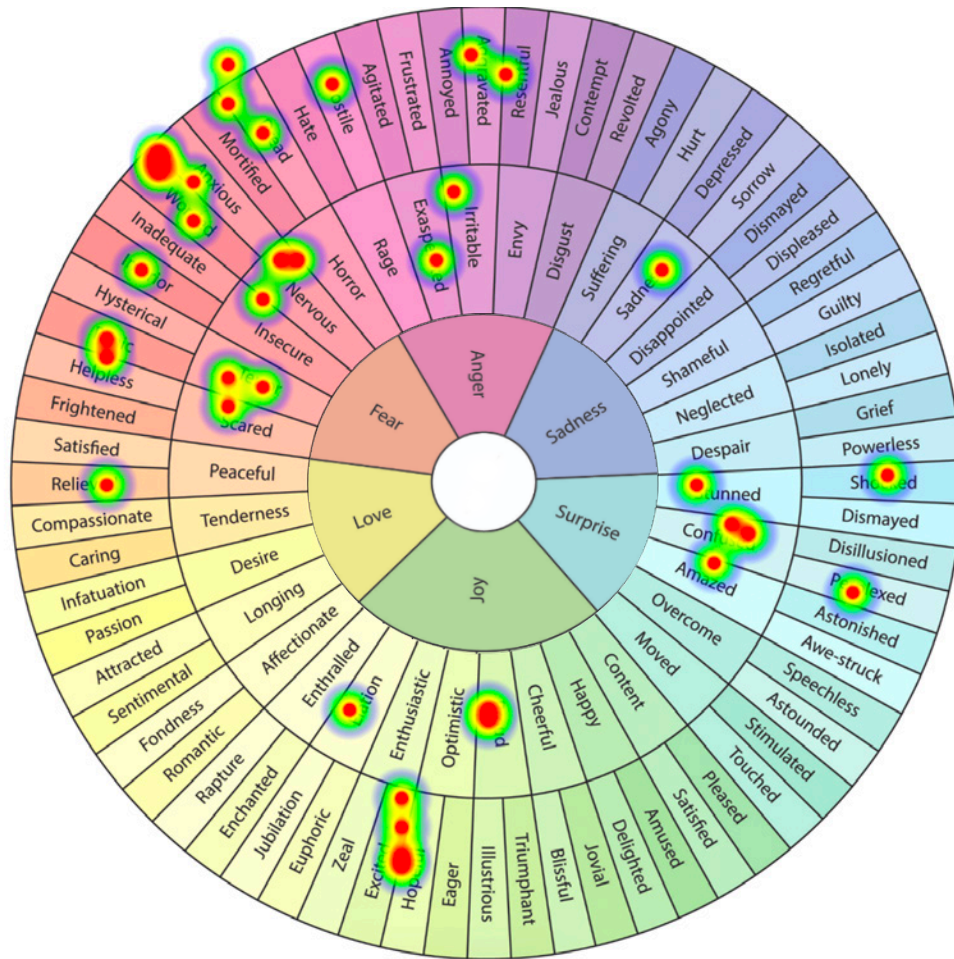
- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Attitude that some vaccines are more important than others because they address diseases that are more deadly (like measles, smallpox, and polio).
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV. Some say having a choice about these vaccines is an important freedom.
- > Some Rural Adults have gotten more skeptical of vaccines because of what is happening with the COVID-19 vaccine.
- > They don't trust "big pharma" because they believe they are just in the vaccine-development business for the money.
- > Rural Adults are somewhat open to new vaccines but rely heavily on the recommendations of their doctors. Some also trust the Centers for Disease Control and Prevention (CDC) for information.
- > Rural Adults tend to think that whether or not to get vaccinated should be a personal choice, and that no one should be mandated to get a vaccine. They sometimes feel that the government is infringing on personal rights when it comes to requiring vaccines. However, some do see the importance of mandating vaccines for the deadly diseases mentioned above.

Rural Adults do not trust politicians or other government officials as a reliable source of information when it comes to vaccines. The FDA, which is government run, is also less trusted than the CDC. The CDC brings credibility because they are more focused on disease.

Rural Adults do trust their doctors and reputable scientists that are independent of the government and the manufacturer of vaccines.



II. Feelings about the COVID-19 Vaccine



ANGER



Aggravated,
Resentful

That COVID-19 is being blown out of proportion and that other, more harmful, diseases need attention

That the development process is rushed

SADNESS



Sad

About the stances taken by the administration

SURPRISE



Confused,
Shocked

That the testing and development of the vaccine has been developed so quickly

JOY



Hopeful

That a vaccine is in production and things can return to normal

LOVE



Relieved

That there's an option with the promise of slowing the spread

FEAR



Worried,
Helpless,
Scared

That the process is being rushed, that there is not enough adequate testing

Potential harmful side effects

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most Rural Adults are very reluctant to get the COVID-19 vaccine, claiming they would only get it if it was mandatory. Others said they would only get it after it has been in use for an extended period of time. The factors that drive this decision are:

- > A mistrust of the way it is being handled – too many politicians with their own agendas weighing in on a scientific topic.
- > The speed at which the vaccine is being developed – they don't think there is sufficient time to tell if the vaccine will really be safe, especially regarding long-term effects.
- > A lack of trust in government overall, with some expressing that this is an example of the government over-reaching into personal freedoms.

When it's time to make a decision about whether or not to get the vaccine, Rural Adults will likely consult their family, close friends, and their doctor.

Ultimately, the main reasons Rural Adults said they would get the vaccine were to protect others and to get back to "normal life." Of those who would consider getting the vaccine, some also considered getting the COVID-19 vaccine as part of their civic duty.

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo



Rural Adults consistently picked the following statements as their top three barriers:

- > I'm worried the vaccine will have side effects
- > I don't trust the vaccine will really be safe
- > Politicians/politics instead of science are making decisions about the vaccine

Safety and side effects are of concern because of how fast the vaccine is being developed. Safety is also a concern because they believe politicians/politics instead of science are making decisions about the vaccine.

Rural Adults weren't aligned on the least fitting statements.

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

Four benefits, all relating to helping keep people safe, were consistently ranked among the top three for Rural Adults:

- > I'm helping to protect myself from getting COVID-19
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'm helping to protect the people in my community who are vulnerable

In addition, "I'm doing my part to end the pandemic," was also consistently ranked in the top three.



Benefits associated with fiscal issues consistently rated among the bottom three for Rural Adults:

- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner

In addition, "Children and college students will be able to get back to the classroom sooner" was also consistently ranked in the bottom three.

Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

Only two of the motivators consistently ranked in the top three with Rural Adults:

- > My doctor recommends it
- > It has been used successfully in other countries

Only one motivation consistently ranked in the bottom three for Rural Adults:

- > Dr. Fauci assures us it is safe and effective

These results reflect the lack of trust in politics and government – Dr. Fauci is seen as part of the political landscape by Rural Adults.

This is consistent with the fact that Rural Adults don't trust politicians and/or the government when it comes to vaccines.



PARTICIPANT SEGMENT: College Students

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Overall, College Students think that getting vaccinated is important, and for many, that it is necessary. They see getting vaccinated as a key element in ensuring overall public health. When asked about the pros and cons of vaccines, College Students consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Preventative/ helps to reduce the spread of diseases and impact of outbreaks • Protect self and community • Decreases mortality rates 	<ul style="list-style-type: none"> • Potential side effects • Confusion around the necessity of some vaccines • Risk of being released to the public prematurely

Some, but not all, College Students have the following attitudes, beliefs and some misconceptions about vaccines in general:

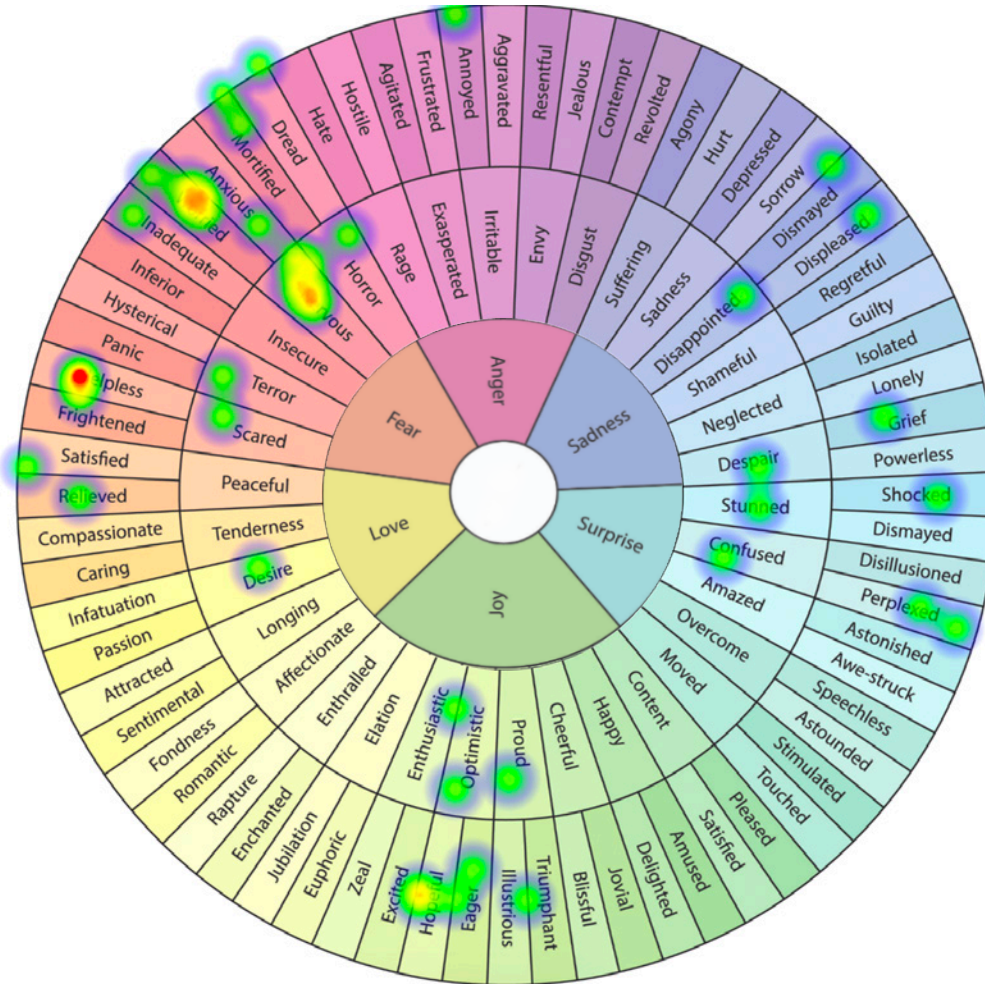
- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Some vaccines are more important than others and because they address diseases that are more deadly, like measles, smallpox, and polio.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV.
- > Some College Student respondents have gotten more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > They don't trust "big pharma" because they are just in the business of vaccines development for the money.
- > College Student respondents are somewhat open to new vaccines but rely heavily on the recommendations of their doctors.

When it comes to information sources, College Students are most likely to turn to their medical care provider for information and recommendations. They will also conduct research on their own by looking to the following resources:

- > Firsthand experiences of people who have gotten the vaccine
- > Medical journals and scientific publications
- > Medical and public health institutions, like their state's Department of Public Health and the National Institute of Health



II. Feelings about the COVID-19 Vaccine



ANGER



N/A

SADNESS



Dismayed, Displeased

That there have been political incentives to rush the development process

That doubt around the vaccine's effectiveness is even present; it should be something we all trust

SURPRISE



Shocked

That it is being pushed to be developed so quickly

JOY



Hopeful, Triumphant

That the vaccine will help to end the pandemic

That when the vaccine becomes available so many will benefit – personally, financially and socially

LOVE



Relieved

That the vaccine will signal the end of quarantine

FEAR



Worried, Nervous, Frightened

That it is being developed too quickly and that corners are being cut due to political motivations

That there are yet to be known long-term side effects

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

The majority of College Students said they would be likely to get the vaccine, though they may not be the first in line as they would want to see if any side effects show up in the first months. They feel strongly about the vaccine as a means to protect not only themselves, but also others from getting sick.

They are wary, however, of political institutions and any organizations that are affiliated with the current administration. With that in mind, it is very important to College Students that the vaccine has been:

- > Independently reviewed and certified
- > Passed through numerous clinical trials

The key factors that would motivate College Students to get the COVID-19 vaccine are:

- > To protect those around them; to keep their families safe
- > To protect themselves from getting COVID-19
- > To set an example to others, hoping their action would inspire others
- > The promise and hope of returning to normal

The reasons College Students might not get a COVID-19 vaccine are:

- > Unknowns around the long-term side effects
- > Inaccessibility – both in cost and in difficulty to access the location
- > Mistrust in the approval process and fear of political motivations

College Students would talk to their family, friends and medical providers in order to decide whether or not to get a vaccine. Ultimately, the majority of College Students would get the vaccine, in spite of their worries, because the promise of protecting their loved ones and community is more substantial than their fears.

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to



- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo

College Students consistently ranked these three statements in their top three barriers:

- > I'm worried the vaccine will have side affects
- > Politics/ politicians instead of science are making the decision
- > I don't trust the vaccine will really be safe

College Students are most worried about the potential harm of any long-term side effects. They acknowledged that this is a novel disease, and there are various unknowns, and expressed fear around the lack of answers to questions of safety.

Based off of everything they've read in the news, it is difficult for College Students to believe that science is the key driver to the development of the vaccine.

Overall, there is a sweeping lack of trust in the vaccine itself, some of the factors that lend to College Student's mistrust are:

- > The speed that the vaccine is being developed
- > Political motivations incentivizing its development
- > A presumed lack of testing

The barriers that College Students most consistently ranked in the bottom three were:

- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner



Two benefits were consistently ranked among the top three for College Students:

- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community

Overall, it's incredibly important for College Students to protect their community and their loved ones – they want to ensure the safety of those around them and they want to do their part in slowing the spread of the virus.

The benefits that most consistently ranked in the bottom three were:

- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > I'm helping everyone who became unemployed get back to work sooner

Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

Only two of the motivators consistently ranked in the top three with College Students:

- > My doctor recommends it
- > Dr. Fauci assures us it is safe and effective

The majority of College Students expressed that if their doctor or medical provider recommended that they get the vaccine, that they would be highly likely to get vaccinated. Some also noted trust in Dr. Fauci and if he assures its safety, they are more likely to get vaccinated.

The motivations that most consistently ranked in the bottom three were:

- > I was convinced that no one would collect and share my personal or health information
- > I knew a few people who got it and they are feeling fine



PARTICIPANT SEGMENT: LGBTQ+ Adults

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

LGBTQ+ Adult participants think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Systemic racism and discrimination have caused some LGBTQ+ participants to have mistrust in medical field and government's involvement in vaccination development. There is a dichotomy about how this impacts the attitudes among those concerned about systemic racism in the testing, access & distribution of vaccines:

- > Some people expressed a desire to engage early in making sure minority groups were part of testing and distribution in a way that was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that these issues are resolved.

Some, but not all, LGBTQ+ participants have the following attitudes, beliefs and some misconceptions about vaccines in general:

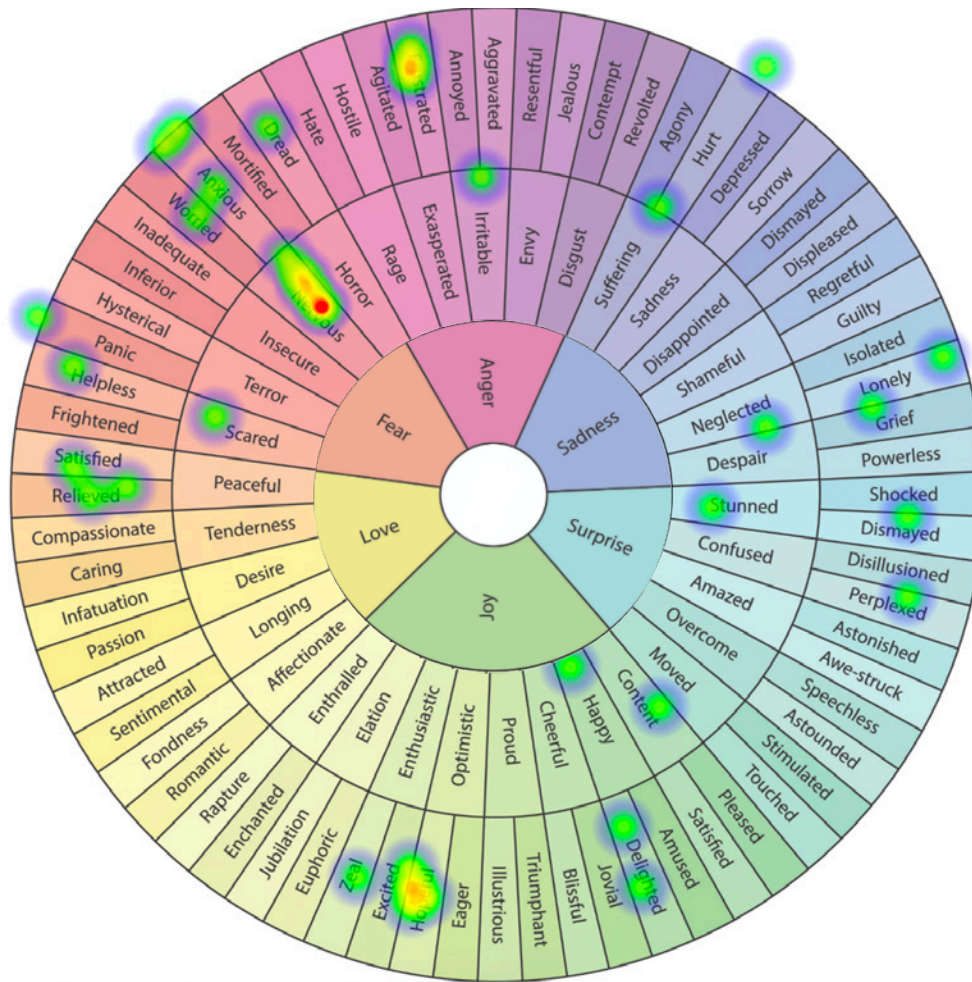
- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Some vaccines are more important than others and because they address diseases that are more deadly, like measles, smallpox, and polio.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV. Some say having a choice about these vaccines is an important freedom.
- > Some LGBTQ+ participants have gotten more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > They don't trust "big pharma" because they are just in the business of vaccines development for the money.
- > LGBTQ+ participants are somewhat open to new vaccines but rely heavily on the recommendations of their doctors.

LGBTQ+ participants trust and look to for information by conducting deep dives into available information. Some sources include:

- > CDC and WHO
- > Doctors/ healthcare and medical professionals
- > Family and friends, community



II. Feelings about the COVID-19 Vaccine



ANGER



Frustrated

That there is so much misinformation and conflicting information around the vaccine

SADNESS



Depressed

That so many have died as a result of COVID-19

That there is still so much that needs to be done

SURPRISE



Confused, Dismayed

About the testing process and its safety

That there continue to be so many unknowns

JOY



Hopeful, Excited

That the vaccine will help to end the pandemic, if not ending it entirely, at least drastically slowing the spread

LOVE



Relieved

That the vaccine would be the turning point to return to the way things were before the pandemic

FEAR



Anxious, Worried, Nervous

That the vaccine is being rushed

That there remain to be many unknowns around COVID-19

That the vaccine won't be effective and that there will be adverse side effects

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Overall, very few LGBTQ+ participants expressed a complete willingness to get the vaccine. Those that expressed they would get it emphasized the need to be absolutely sure and confident that it is safe. They would look to the following sources to instill confidence:

- > Scientific publications from public health/medical institutions
- > WHO
- > Dr. Fauci and other doctors/scientists
- > Media outlets like the New York Times and the Washington Post

The majority of LGBTQ+ participants indicated they would eventually get the vaccine, pending results from its initial rollout. Many said they would want to wait at least a few months in order to see if there are any side effects that show up.

When it comes to making the decision, they would first turn to doctors and medical professionals, as well as their family, friends and loved ones. They would need assurance that the vaccine has been scientifically proven to be safe. Ultimately, LGBTQ+ participants are most motivated to get the vaccine because they would be protecting others.

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo



LGBTQ+ participants consistently picked the following barriers among their top three:

- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I'm concerned there won't be sufficient testing done for my demo
- > I'm concerned because the government uses vaccines to experiment on people

LGBTQ+ participants were very concerned about the speed at which the vaccine is being developed. They are concerned that safety and efficacy will be sacrificed for speed. The involvement of politicians only heightens that fear.

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

LGBTQ+ participants consistently picked the following benefits among their top three:

- > I'm helping to protect myself from getting COVID-19
- > I'm helping to protect the people in my community who are vulnerable
- > I am helping to protect my family and loved ones from getting COVID-19

LGBTQ+ participants consistently picked the following two benefits among the bottom three:

- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner



Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

The motivators that consistently ranked in the top three with LGBTQ+ participants were:

- > My doctor recommends it
- > It has been used successfully in other states
- > It has been used successfully in other countries

The motivators that consistently ranked in the bottom three with LGBTQ+ participants were:

- > I trust that the FDA would not approve something that was not safe
- > The CDC assures us that it is safe & effective



PARTICIPANT SEGMENT: Hispanic/Latinx English Preferred Adults

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Hispanic/Latinx English Preferred participants think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Are scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Systemic racism and discrimination have caused some Hispanic/Latinx English Preferred Adults to have mistrust in medical field and government's involvement in vaccine development. There is a dichotomy about how this impacts the attitudes among those concerned about systemic racism in the testing, access & distribution of vaccines:

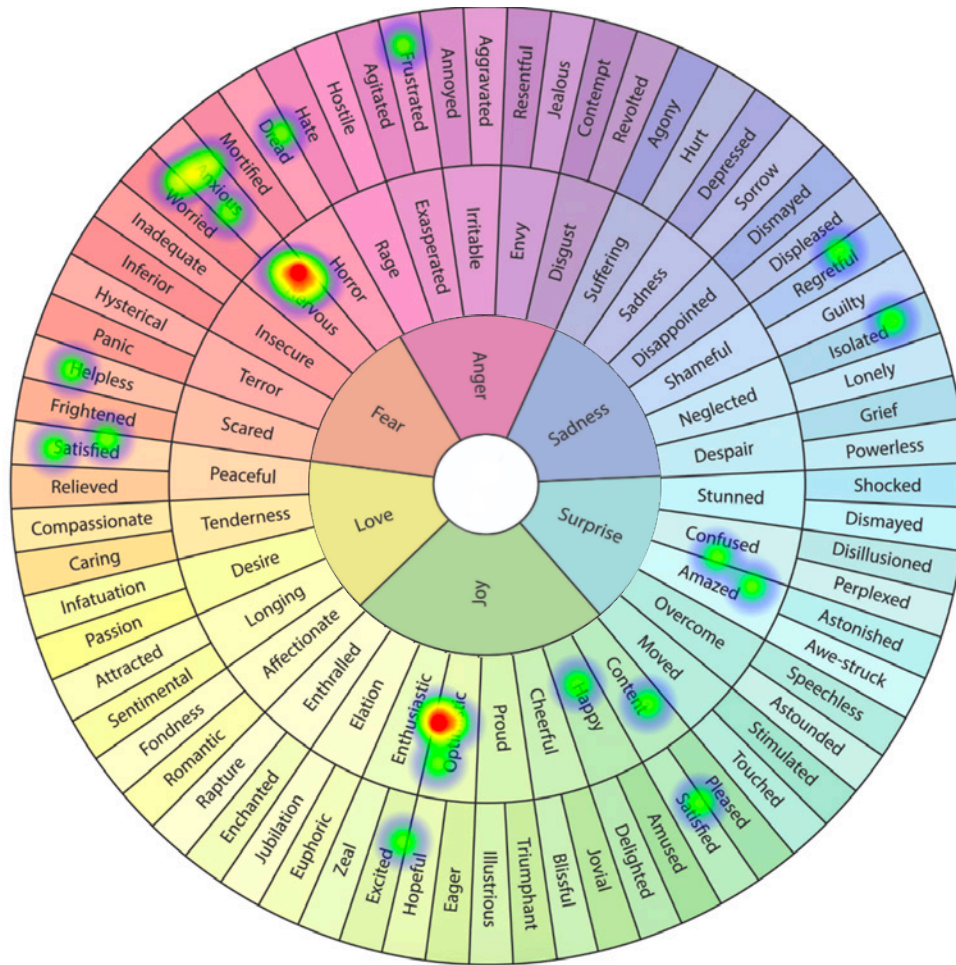
- > Some people expressed a desire to engage early in making sure minority groups were part of testing and distribution in a way that was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that these issues are resolved.

Some, but not all, Hispanic/Latinx English Preferred participants have the following attitudes, beliefs and some misconceptions about vaccines in general:

- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Some vaccines are more important than others and because they address diseases that are more deadly, like measles, smallpox, and polio.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV. Some say having a choice about these vaccines is an important freedom.
- > Some have gotten more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > They don't trust "big pharma" because they are just in the business of vaccines development for the money.
- > They are somewhat open to new vaccines but rely heavily on the recommendations of their doctors.



II. Feelings about the COVID-19 Vaccine



ANGER



Frustrated

That the pandemic response has been poorly managed

SADNESS



Regretful

That decisions not to get the vaccine will have a negative impact on society

SURPRISE



Amazed

That the vaccine has been developed so quickly

JOY



Optimistic, Excited

That the vaccine will be a viable solution to the virus and that will help to end the pandemic

LOVE



Satisfied

That there is work being done for a solution to the pandemic

FEAR



Worried, Nervous

That the process is being rushed in order to serve political motivations

About the health of those that receive the vaccine initially, about unknown long-term effects

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most Hispanic/Latinx English Preferred participants are hesitant to get the COVID-19 vaccine, claiming they want to wait and see how it impacts people before they get it. This hesitancy is based on:

- > A mistrust of the way it is being handled – too many politicians with their own agendas weighing in on a scientific topic.
- > The speed at which the vaccine is being developed – they don't think there is sufficient time to tell if the vaccine will really be safe, especially regarding long-term effects.

When it's time to make a decision about whether or not to get the vaccine, Most Hispanic/Latinx English Preferred participants will be likely to consult with their family, close friends, and their doctor.

Ultimately, the main reasons Most Hispanic/Latinx English Preferred participants said they would get the vaccine were to protect others and to get back to “normal life.”

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo



Most Hispanic/Latinx English Preferred adults consistently picked the following statements as their top three barriers:

- > I'm worried the vaccine will have side effects
- > I don't trust the vaccine will really be safe
- > Politicians/politics instead of science are making decisions about the vaccine
- > I'm concerned there won't be sufficient testing done for my demo

Most Hispanic/Latinx English Preferred participants didn't rank any of the barriers consistently among the bottom three.

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every-day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

Benefits that helped to keep people safe were consistently among the top three for Hispanic/Latinx English Preferred participants:

- > I'm helping to protect myself from getting COVID-19
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community

The benefits that Hispanic/Latinx English Preferred adults consistently ranked among the bottom three were:

- > I'm doing my part to end the pandemic
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > I'm helping everyone who became unemployed get back to work sooner



Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

The motivators that Hispanic/Latinx English Preferred participants consistently ranked among the top three were:

- > I trust that the FDA would not approve something that was not safe
- > Dr. Fauci assures us it is safe and effective
- > The CDC assures us that it is safe & effective

The only motivator that consistently ranked among the bottom three was, "It's free whether or not I have insurance."



PARTICIPANT SEGMENT: Hispanic/Latinx Spanish Preferred Adults

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Hispanic/Latinx Spanish Preferred Adults think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Are scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Systemic racism and discrimination have caused some Hispanic/Latinx Spanish Preferred participants to have mistrust in medical field and government's involvement in vaccine development. There is a dichotomy about how this impacts the attitudes among those concerned about systemic racism in the testing, access & distribution of vaccines:

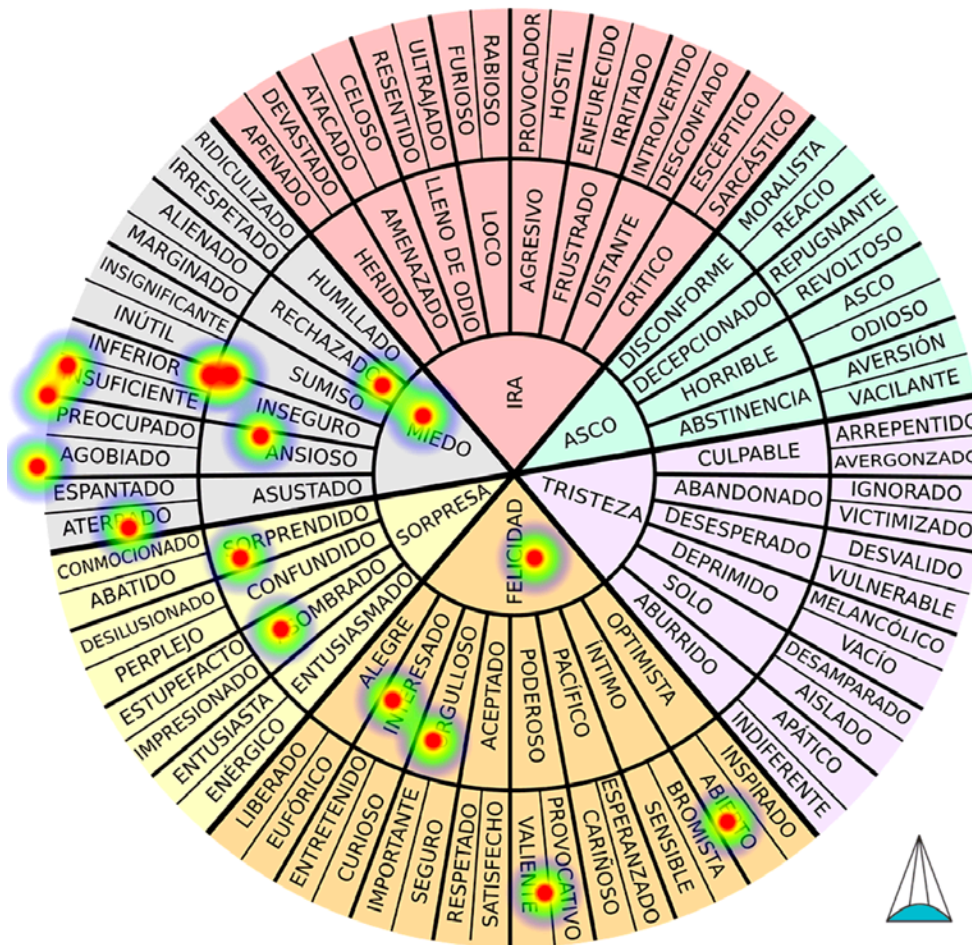
- > Some people expressed a desire to engage early in making sure minority groups were part of testing and distribution in a way that was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that these issues are resolved.

Some, but not all, Hispanic/Latinx Spanish Preferred participants have the following attitudes, beliefs and some misconceptions about vaccines in general:

- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Some vaccines are more important than others and because they address diseases that are more deadly, like measles, smallpox, and polio.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV. Some say having a choice about these vaccines is an important freedom.
- > Some Hispanic/Latinx Spanish Preferred participants have gotten more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > They don't trust "big pharma" because they are just in the business of vaccines development for the money.
- > Hispanic/Latinx Spanish Preferred Adults are somewhat open to new vaccines but rely heavily on the recommendations of their doctors.



II. Feelings about the COVID-19 Vaccine



ANGER



N/A

SADNESS



N/A

SURPRISE



Confused

About the potential side effects

JOY



Proud, Excited

That a vaccine is in development

FEAR



Worried, Unsure

About the effectiveness and safety of the vaccine

That there will be negative side effects

DISGUST



N/A

***Note about the Spanish Feelings Wheel:**
The feelings are displayed slightly differently, to translate, the core feelings are as follows:

- **IRA:** Anger
- **MIEDO:** Fear
- **SORPRESA:** Surprise
- **FELICIDAD:** Joy
- **TRISTEZA:** Sadness
- **ASCO:** Disgust

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most Hispanic/Latinx Spanish Preferred participants are likely to get the COVID-19 vaccine to protect their family and community members. However, they don't necessarily want to be the first ones to get it. Instead they'd like to see how it impacts others before stepping up. The factors that drive this decision are:

- > A mistrust of the way it is being handled – too many politicians with their own agendas weighing in on a scientific topic
- > The speed at which the vaccine is being developed – they don't think there is sufficient time to tell if the vaccine will really be safe, especially regarding long-term effects

When it's time to make a decision about whether or not to get the vaccine, Hispanic/Latinx Spanish Preferred participants will be likely to consult with their family, close friends, and their doctor.

Ultimately, the main reasons Hispanic/Latinx Spanish Preferred Adults said they would get the vaccine were to protect others and to get back to “normal life.”

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo



Hispanic/Latinx Spanish Preferred participants consistently ranked the following statements as their top three barriers:

- > I'm worried the vaccine will have side effects
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > I'm concerned there won't be sufficient testing done for my demo
- > I don't believe the vaccine will really protect me from COVID-19

Hispanic/Latinx Spanish Preferred participants did not consistently rank any of the barriers in the bottom three.

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

Benefits that helped to keep people safe were consistently among the top three for Hispanic/Latinx Spanish Preferred Adults:

- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community

Benefits associated with fiscal issues consistently ranked among the bottom three for these individuals:

- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > I'm helping everyone who became unemployed get back to work sooner



Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

Hispanic/Latinx Spanish Preferred Adults consistently ranked the following statements among the top three motivations:

- > My doctor recommends it
- > I knew a few people who got it and they are feeling fine

Hispanic/Latinx Spanish Preferred Adults consistently ranked the following statements among the bottom three motivations:

- > Dr. Fauci assures us it is safe and effective
- > I was convinced that no one would collect and share my personal or health information



PARTICIPANT SEGMENT: Asian Adults

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Asian Adult participants think that vaccines are generally safe, reliable and helpful, and trust expert recommendations. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Are scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Systemic racism and discrimination have caused some Asian Adult participants to have mistrust in medical field and government's involvement in vaccination development. There is a dichotomy about how this impacts the attitudes among those concerned about systemic racism in the testing, access & distribution of vaccines:

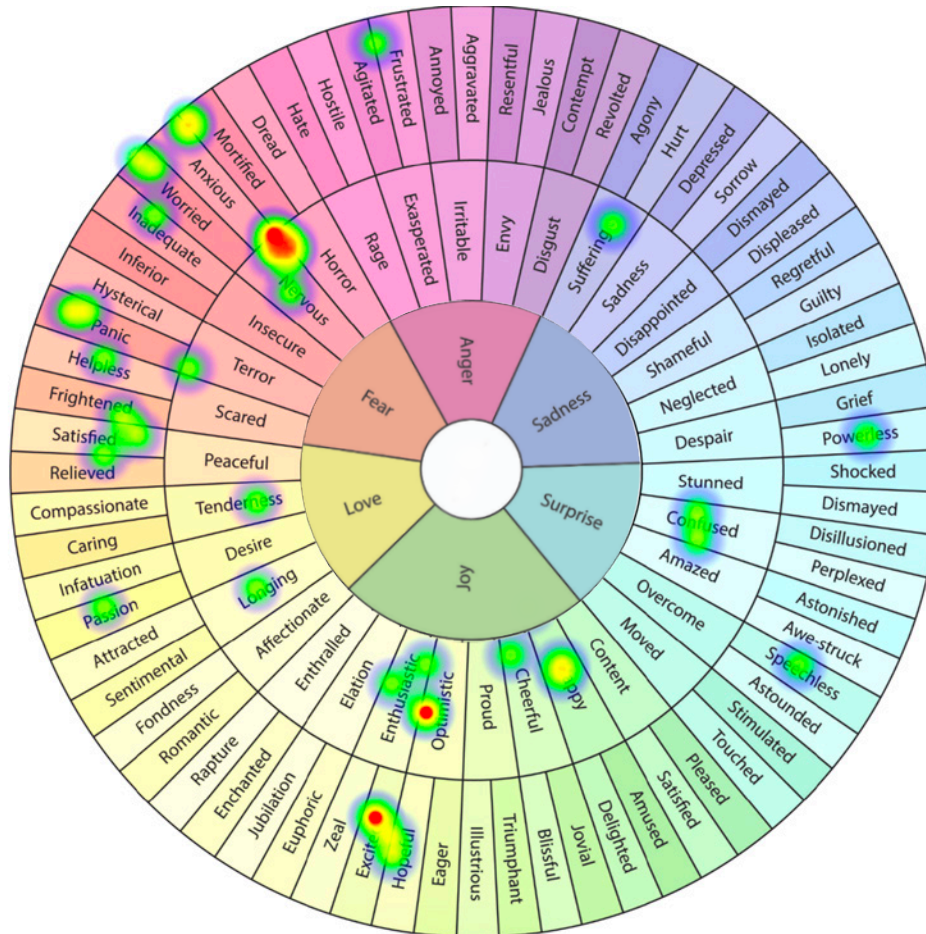
- > Some people expressed a desire to engage early in making sure minority groups were part of testing and distribution in a way that was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that these issues are resolved.

Some, but not all, Asian Adults have the following attitudes, beliefs and some misconceptions about vaccines in general:

- > There is a misconception that a vaccine can give you what you are trying to protect against.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV.
- > Some Asian Adults have gotten more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > They don't trust "big pharma" because they are just in the business of vaccines development for the money.
- > Many are open to new vaccines but rely heavily on the recommendations of their doctors.



II. Feelings about the COVID-19 Vaccine



ANGER



Frustrated

That there is an expectation of trust for an organization that is rushing vaccine development

SADNESS



Sadness

About the divided state of the country regarding COVID-19

SURPRISE



Confused

About the unknowns that continue to exist around the vaccine

JOY



Hopeful, Optimistic

That the vaccine will be effective in fighting COVID-19

About the scientific process and efficacy of the research

LOVE



Relief

That there will be a vaccine in the near future

FEAR



Anxious, Nervous, Helpless

That the vaccine has not been adequately tested

That there is insufficient research on side effects

About the state of politics and the Trump administration promoting misinformation

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most Asian Adult participants say that they are likely to get the vaccine because it will help protect family, friends and community members. However, they don't want to be among the first to get it because they want to wait and see how it impacts those that do take it early on. The factors that drive this position are:

- > A mistrust of the way it is being handled – too many politicians with their own agendas weighing in on a scientific topic.
- > The speed at which the vaccine is being developed – they don't think there is sufficient time to tell if the vaccine will really be safe, especially regarding long-term effects.

When it's time to make a decision about whether or not to get the vaccine, Asian Adult participants will be likely to consult with their family, close friends, and their doctor. Some will also look to the CDC and do their own research on the safety and efficacy of the vaccine.

Ultimately, the main reasons Asian Adult participants said they would get the vaccine were to protect others and to get back to “normal life.”

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side effects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo



Asian Adult participants consistently picked the following statements as their top three barriers:

- > I'm worried the vaccine will have side effects
- > I don't trust the vaccine will really be safe
- > Politicians/politics instead of science are making decisions about the vaccine

Asian Adult participants consistently picked the following statements as their least likely barriers:

- > I don't have health insurance or can't afford it
- > COVID-19 is not such a big deal so I don't need it

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every-day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

The following benefits were consistently selected among the top three by Asian Adult participants:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I am helping to protect my family and loved ones from getting COVID-19



Benefits associated with fiscal issues consistently rated in the bottom three for Asian Adult participants:

- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner

Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

The motivators consistently ranked in the top three with Asian Adult participants were:

- > My doctor recommends it
- > I knew that many healthcare workers had gotten it
- > It's free whether or not I have insurance
- > The CDC assures us that it is safe & effective

Asian Adult participants consistently ranked the following motivations in the bottom three:

- > I trust the FDA would not approve something that wasn't safe
- > It has been used successfully in other countries



PARTICIPANT SEGMENT: Pacific Islander/Native Hawaiian Adults

I. Overall Attitudes and Beliefs about the COVID-19 Vaccine

Pacific Islander/Native Hawaiian Adults think that vaccines are generally safe, reliable and helpful, even though they aren't perfect. When asked about the pros and cons of vaccines, audiences consistently provided the following answers:

PERCEIVED PROS	PERCEIVED CONS
<ul style="list-style-type: none"> • Prevent individuals from getting sick • Protect my loved ones, the community and vulnerable people (some use the term 'herd immunity') • Control epidemics – examples include polio, measles and smallpox • Are scientifically tested/proven 	<ul style="list-style-type: none"> • Potential side-effects or bad reactions, like allergies or a fever • Painful to get, and sometimes lingering injection site pain • No guarantee that they are completely effective (in reference to the flu shot) • Unknown long-term side effects • Concern that they include unnatural/unhealthy ingredients

Systemic racism and discrimination have caused some Pacific Islander/Native Hawaiian Adults to have mistrust in medical field and government's involvement in vaccine development. There is a dichotomy about how this impacts the attitudes among those concerned about systemic racism in the testing, access & distribution of vaccines:

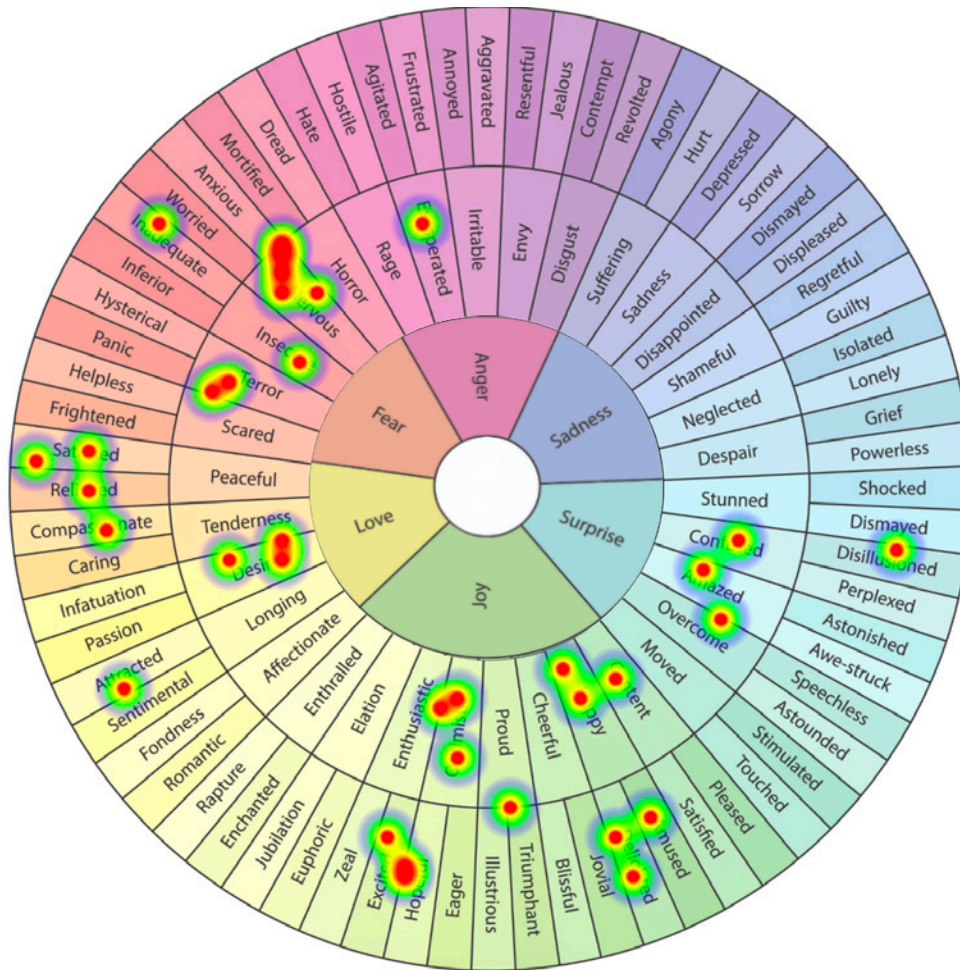
- > Some people expressed a desire to engage early in making sure minority groups were part of testing and distribution in a way that was safe and effective.
- > Others were not comfortable with being part of early testing and distribution because they were not convinced that these issues are resolved.

Some, but not all, Pacific Islander/Native Hawaiian participants have the following attitudes, beliefs and some misconceptions about vaccines in general:

- > Some have a misconception that a vaccine can give you what you are trying to protect against.
- > Some vaccines are more important than others and because they address diseases that are more deadly, like measles, smallpox, and polio.
- > Vaccines that are perceived as less critical are: Flu, chickenpox and HPV.
- > Some Pacific Islander/Native Hawaiian participants have become more skeptical of vaccines because of what they see is happening with the COVID-19 vaccine.
- > Some don't trust "big pharma" because they believe they are just in the business of vaccines development for the money.
- > Pacific Islander/Native Hawaiian Adults are open to new vaccines but rely heavily on the recommendations of their doctors.



II. Feelings about the COVID-19 Vaccine



ANGER



Exasperated

That others are reacting negatively to the vaccine

SADNESS



N/A

SURPRISE



Confused

That there is so much disinformation regarding the vaccine

JOY



Happy, Hopeful, Optimistic

That the vaccine is the solution to things opening back up

That the vaccine will be effective and accessible

LOVE



Longing, Relieved

That the vaccine will be the solution, that there is a light at the end of the tunnel

FEAR



Nervous, Scared

That the process is being rushed and that there is relatively minimal testing

That the vaccine won't be effective and that there will be adverse effects

KEY



III. Attitudes and Perceptions of the COVID-19 Vaccine

Most participants felt positively about the vaccine and expressed a high likelihood of getting the COVID-19 vaccine; however, they do not necessarily want to get vaccinated immediately. The factors that drive that decision to get vaccinated are:

- > Protecting self and others from getting sick
- > The promise of returning to normalcy

Pacific Islander/Native Hawaiian participants are not likely to get the vaccine immediately due to overall fears around the vaccine's safety and effectiveness. Participants would ideally prefer to wait a few months to see how the vaccine is working before getting vaccinated themselves.

When it comes to making the decision of whether or not to get vaccinated, participants would turn to the experts (medical experts, scientific publications) and their family/loved ones.

- > Many participants noted the ultimate deciding factor to getting the vaccine would be knowing that their choice is helping to protect others.
- > Also, participants want to be ensured that the vaccine is safe and effective. They will look to scientific and medical publications, as well as other accredited sources, for this assurance.

Participants view getting vaccinated as doing their part in benefiting society, also expressing hope that if they decide to get the vaccine, others will follow suit.

IV. Barriers, Benefits and Motivators around Getting the COVID-19 Vaccine

Research participants were given the following list of barriers to getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective:

- > I'm worried the vaccine will have side affects
- > I'm worried the vaccine will give me COVID-19
- > I don't trust the vaccine will really be safe
- > I don't believe the vaccine will really protect me from COVID-19
- > Politicians/politics instead of science are making decisions about the vaccine
- > I don't react well to vaccines
- > I don't have health insurance or can't afford it
- > I've already had COVID-19 so I don't need it
- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to
- > I'm concerned because the government uses vaccines to experiment on people
- > I'm concerned that if I get the vaccine someone could collect and share my personal or health info
- > I'm concerned there won't be sufficient testing done for my demo



Pacific Islander/Native Hawaiian participants consistently ranked the following barriers among the top three:

- > I am worried the vaccine will have side effects
- > I'm concerned there won't be sufficient testing done for my demo
- > I don't trust the vaccine will be safe

The safety and side effects are of concern because of how fast the vaccine is being developed. Safety is also a concern because politicians/politics instead of science are making decisions about the vaccine.

Pacific Islander/Native Hawaiian participants consistently ranked the following barriers among the bottom three:

- > COVID-19 is not such a big deal so I don't need it
- > Other people will get it so I don't need to

Research participants were also given a list of the potential benefits of getting the COVID-19 vaccine and asked to select the three that fit most and three that fit least with their perspective. The list of benefits is:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I will feel more comfortable leaving home to run every day errands
- > I am helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect others in my community
- > I'd be helping businesses reopen, which means I would be helping people who have been negatively impacted by the pandemic get back on their feet
- > I'd be able to recover from my financial hardships due to COVID-19 sooner
- > Children and college students will be able to get back to the classroom sooner
- > I'm helping to protect the people in my community who are vulnerable
- > I'm helping everyone who became unemployed get back to work sooner

The benefits that Pacific Islander/Native Hawaiian participants consistently ranked among the top three were focused on protecting self and others, and a desire to end the pandemic:

- > I'm helping to protect myself from getting COVID-19
- > I'm doing my part to end the pandemic
- > I'm helping to protect my family and loved ones from getting COVID-19
- > I'm helping to protect the people in my community who are vulnerable

The benefits that Pacific Islander/Native Hawaiian participants most consistently ranked among the bottom three were about financial recovery:

- > I'm helping everyone who became unemployed get back to work sooner
- > I'd be able to recover from my financial hardships due to COVID-19 sooner



Finally, participants were provided this list of potential motivations for getting the COVID-19 vaccine:

- > My doctor recommends it
- > I trust the process that was used to develop the vaccine
- > I trust that the FDA would not approve something that was not safe
- > I knew a few people who got it and they are feeling fine
- > It's being offered by my workplace or school
- > I knew that many healthcare workers had gotten it
- > It has been used successfully in other states
- > It has been used successfully in other countries
- > It's required by my workplace
- > It's free whether or not I have insurance
- > Dr. Fauci assures us it is safe and effective
- > Everyone in a government position was required to get it
- > The CDC assures us that it is safe & effective
- > I was convinced that no one would collect and share my personal or health information

Pacific Islander/Native Hawaiian participants consistently ranked the following motivators among the top three:

- > My doctor recommended it
- > I knew that many healthcare workers had gotten it
- > The CDC assures us it is safe and effective

Pacific Islander/Native Hawaiian participants consistently ranked the following motivators among the bottom three:

- > I trust that the FDA would not approve something that was not safe
- > It has been used successfully in other countries
- > I was convinced that no one would collect and share my personal or health information



Appendix 2: Recruitment Screenener



Target Audience:

For this study, we aim to conduct qualitative research through an online bulletin board with adults residing in **Washington State**.

Ultimately, we seek to conduct research with the following nine consumer segments:

- > African American/Black
- > Adults Ages 30 – 49
- > Rural Adults
- > People who believe vaccines are an essential part of public health
- > College Students
- > Hispanic/Latino in English
- > Hispanic/Latino in Spanish (Being recruited by C+C)
- > LGBTQ
- > Asian Pacific Islander/Native Hawaiian

For each segment we will recruit 14 to seat 12.

In addition to residing in Washington State, respondents will also:

- > Be unlikely or undecided about whether or not to get the COVID-19 vaccination when it is approved
- > 18+ y/o and not in high school
- > Believe that COVID-19 is real

In addition to the typical exclusions of marketing, market research, advertising and PR, respondents cannot work in the following fields:

- > Medical professionals, such as nurses, doctors, medical researchers
- > Pharmaceutical company employee of any kind (including sales reps)
- > Pharmacies – such as Walgreens, CVS, etc. and pharmacists
- > Department of Health of any governmental organization
- > Hospitals or healthcare workers of any kind



INTRODUCTION:

Hello, this is _____ from _____. Today we are looking for people to participate in an online market research study on behalf of the Washington State Department of Health. Here are a few things you might want to know:

- > You can participate from wherever you are comfortable and have a connection to WiFi.
- > You can participate from your phone, tablet or computer.
- > Participating in the research will take about 2.5 - 3 hours over a 4-day period.
- > There will be quite a bit of flexibility when you choose to participate, but the activities will need to be completed in a specific order.
- > The best part is that you will receive \$150 for your time, and all you have to do is tell us what you think!
- > Your responses will inform how Washington State communicates about COVID-19 vaccinations.

Would you like to see if you qualify?

If no: Thank you for your time!

If yes, proceed with questions.



QUESTION	CIRCLE THE ANSWER	INSTRUCTION
1. Do you live in Washington State?	1...Yes / 2...No	Terminate if 2
2. Are you, yourself, currently scheduled to participate in a market research study?	1...Yes / 2...No	Terminate if 1
3. Are you or a member of your household employed by any of the following....?	1. Ad agency, market research firm, marketing firm, PR firm 2. News media such as TV, radio or newspaper 3. The marketing or market research department of a company 4. Department of Health branch of any governmental organization 5. Hospital or healthcare organization 6. Pharmaceutical company or Pharmacy 7. Medical professions: Nurse, Doctor, or Medical Researcher	Terminate if 1-8
4. Do you have daily access to a computer, phone or tablet with reliable internet access?	1...Yes / 2...No	Terminate if 2
5. On average, how often do you use the internet?	1. I'm pretty much always online 2. More than once a day 3. Once a day 4. A few times a week 5. Once a week 6. Less than once a week	Terminate if 5 or 6 Keep if 1-4

BEGIN AUDIENCE RECRUITMENT >>>



QUESTION	CIRCLE THE ANSWER	INSTRUCTION
<p>6. May I have your age please... If hesitates, ask are you...?</p>	<ol style="list-style-type: none"> 1. Under 18 2. 18 – 24 3. 25 – 29 4. 30 – 49 5. 50 – 65 6. 66+ 7. Prefer not to say 	<p>Terminate if 1 If 4 TAG Segment Adult 30 - 49 Else TAG Actual Age If 3 – 7 SKIP TO 8</p>
<p>7. Are you in High School?</p>	<p>1. Yes 2. No</p>	<p>Terminate if 1</p>
<p>8. Are you currently enrolled in college?</p>	<p>1. Yes 2. No</p>	<p>If 1 TAG as Segment College Student and SKIP TO 10</p>
<p>9. How would you describe your level of education?</p>	<ol style="list-style-type: none"> 1. I have not completed high school 2. High School Graduate 3. Trade or Technical School Degree 4. Associate’s Degree 5. 4-year college degree or higher 	<p>If 1 Terminate TAG Education</p>
<p>10. On a scale of 1 to 10, where 1 completely disagree and 10 is completely agree, how much do you agree with the statement: I BELIEVE THAT VACCINATIONS PLAY AN ESSENTIAL ROLE IN PUBLIC HEALTH</p>	<ol style="list-style-type: none"> 1. I’m pretty much always online 2. More than once a day 3. Once a day 4. A few times a week 5. Once a week 6. Less than once a week 	<p>If 1-2 terminate If 3 – 7 TAG using answer (#) If 8 - 10 TAG as Pro-Vaccine</p> <p>Note: Might be able to change if this is causing difficulties</p>



QUESTION	CIRCLE THE ANSWER	INSTRUCTION
<p>11. On a scale of 1 to 10 where 1 is not at all and 10 is completely... How willing are you to get the TDAP vaccine – This vaccine is often called the Tetanus shot.</p>	<p>1. Not at all 2. 9 10. Completely</p>	<p>If 1 – 2 terminate</p>
<p>12. How likely are you to get vaccinated for COVID-19 when a vaccine that has been tested and proven effective and safe becomes available?</p>	<p>1. I definitely will not get a COVID-19 vaccine 2. I'm unlikely to get the COVID-19 vaccine 3. I'm undecided about whether or not to get the COVID-19 vaccine 4. I'm likely to get the COVID-19 vaccine when it's available 5. I will definitely get the COVID-19 vaccine when it's available</p>	<p>Terminate if 1 and 5 If 2 – 3 KEEP If 4 HOLD NOTE: Might open to 4 if necessary</p>
<p>13. How would you describe where you live? Rural, suburban, or urban?</p>	<p>1. Rural 2. Suburban 3. Urban</p>	<p>If 1 TAG Segment Rural Adult TAG Geography</p>
<p>14. What is your gender? (Let them answer, do not prompt)</p>	<p>Fill in the blank</p>	<p>TAG Gender</p>
<p>15. Do you identify as LGBTQ+?</p>	<p>1. Yes 2. No</p>	<p>If 1 TAG LGBTQ+</p>



QUESTION	CIRCLE THE ANSWER	INSTRUCTION
16. What is your ethnicity?	<ol style="list-style-type: none"> 1. I Native American or Indigenous 2. Asian Pacific Islander / Native Hawaiian 3. Black, African or African-American 4. Hispanic, Latino, Latina, Latinx 5. Middle Eastern or North African 6. White, non-Hispanic 7. Two or more ethnicities (ask to specify) 8. As something else (ask to specify) 9. Prefer not to answer 	<p>If 2 TAG Asian/Pacific Islander / Native Hawaiian</p> <p>If 3 TAG Black/African American</p> <p>If 4 TAG Hispanic</p> <p>Else TAG Ethnicity</p>
17. On a scale of 1 to 10, where 1 completely disagree and 10 is completely agree, how much do you agree with the statement:	<ol style="list-style-type: none"> 1. Completely Disagree 2. 9 10. Completely Agree 	If 1 – 2 terminate
18. Which of the following describes your total household income?	<ol style="list-style-type: none"> 1. Less than \$39,000 2. \$39,000 to \$50,999 3. \$51,000 to \$100,000 4. \$100,000 or greater 5. Prefer not to say 6. Don't know 	TAG income Hold if 5 or 6



SEGMENT DEFINITIONS

<p>If Q6 = 4, assign to segment ADULT AGE 30 – 49</p> <p>Assign Moderator MARIEL</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Education • Geography • Gender • Ethnicity • Income
<p>If Q8 = 1, assign to segment COLLEGE STUDENT</p> <p>Assign Moderator BRIDGET</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Geography • Gender • Ethnicity
<p>If Q10 = 8 – 10. assign to segment PRO-VACCINE</p> <p>Assign Moderator NANCY</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Age • Education • Geography • Gender • Ethnicity • Income
<p>If Q13 = 1, assign to segment RURAL</p> <p>Assign Moderator NANCY</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Age • Education • Gender • Ethnicity • Income



SEGMENT DEFINITIONS	
<p>If Q15 = 1, assign to segment LGBTQ+</p> <p>Assign Moderator BRIDGET</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Age • Education • Geography • Gender • Ethnicity • Income
<p>If Q 16 = 2, assign to segment API/NH</p> <p>Assign Moderator NANCY</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Age • Education • Geography • Gender • Income
<p>If Q16 = 3, assign to segment AFRICAN AMERICAN / BLACK</p> <p>Assign Moderator BRIDGET</p>	<p>Include a mix of:</p> <ul style="list-style-type: none"> • Age • Education • Geography • Gender • Income

If the respondent qualifies...

Looks like you do qualify for this study. So, I would like to stress how important it is to us that you spend a total of about 30-45 minutes a day over a 4-day period, starting October 26th and going through October 29th.

We also ask that you to take your time and answer the question as fully and honestly as you can. Remember you must answer all questions to earn the \$150.

Do you think you can do that? If no...terminate

If yes...

Great, thank you! We're glad to have you on board. May I please have your name, phone number and an email address that you check regularly?

On TBD you will get an email that explains how to log onto the research study and provide you with anything else you'll need to get going. Thanks again, and we look forward to hearing from you.



Appendix 3: Spanish Facebook Recruitment Ad



WA DOH COVID VACCINE

QUALITATIVE STUDY

SPANISH RECRUITMENT

FACEBOOK POST EXAMPLE

1. PAID: Posted by C+C

ENGLISH	SPANISH
<p>Copy: Your opinion matters! C+C, a communications agency that works in the public health sector is looking for people who live in Washington to participate in a research study about public health. Complete the short survey to see if you qualify!</p> <p>Headline: Join the research study</p> <p>Link description: Participants earn \$150!</p> <p>Link: TBD</p>	<p>Copy: ¡Tu opinión cuenta! C+C, una agencia de comunicaciones que trabaja en el sector de salud pública, está buscando a personas que viven en el estado de Washington para participar en un estudio sobre salud pública. ¡Completa una breve encuesta para ver si calificas!</p> <p>Headline: Participa en nuestro estudio</p> <p>Link description: ¡Los participantes ganarán \$150</p> <p>Link: TBD</p>



Appendix 4: Spanish AYTM Hispanic/Latinx Screenener



Client: WA DOH

Name: AYTM SCREENER

Language: SPANISH

Transcreation Matrix:

English Copy: Question	English Copy: Answers	Spanish Copy: Question	Spanish Copy: Answers
Do you live in Washington State?	<ul style="list-style-type: none"> • Yes • No 	¿Vives en el estado de Washington?	<ul style="list-style-type: none"> • Sí • No
Are you or a member of your household employed by any of the following....?	<ul style="list-style-type: none"> • Ad agency, market research firm, marketing firm, PR firm • News media such as TV, radio or newspaper • The marketing or market research department of a company • Department of Health branch of any governmental organization • Hospital or healthcare organization • Pharmaceutical company or pharmacy • Medical professions: Nurse, Doctor or Medical researcher • None of the above 	¿Tú o algún miembro de tu hogar está empleado por alguno de los siguientes...?	<ul style="list-style-type: none"> • Agencia de publicidad, empresa de investigación de mercado o de relaciones públicas • Medios de comunicación como televisión, radio o prensa • El departamento de relaciones públicas o de investigación de mercado de una empresa o compañía • Rama del Departamento de salud de alguna organización gubernamental • Hospital u organización de salud • Empresa farmacéutica o farmacia • Profesiones médicas: enfermera(o), médico o investigador médico • None of the above
Do you have daily access to a computer, phone or tablet with reliable internet access?	<ul style="list-style-type: none"> • Yes • No 	¿Tienes acceso diario a una computadora, teléfono o tableta con internet de alta velocidad?	<ul style="list-style-type: none"> • Sí • No



English Copy: Question	English Copy: Answers	Spanish Copy: Question	Spanish Copy: Answers
On average, how often do you use the internet?	<ul style="list-style-type: none"> • I'm pretty much always online • More than once a day <ul style="list-style-type: none"> • Once a day • A few times a week <ul style="list-style-type: none"> • Once a week • Less than once a week 	¿Vives en el estado de Washington?	<ul style="list-style-type: none"> • Sí • No
How old are you?	<ul style="list-style-type: none"> • Under 18 • 18-24 • 25-29 • 30-49 • 50-65 • 66+ • Prefer not to say 	¿Qué edad tienes?	<ul style="list-style-type: none"> • Menos de 18 • 18 – 24 • 25 – 29 • 30 – 49 • 50 – 65 • 66 o más • Prefiero no decirlo
Are you in high school?	<ul style="list-style-type: none"> • Yes • No 	¿Estás en la secundaria?	<ul style="list-style-type: none"> • Sí • No
On a scale of 1 to 10, where 1 is completely disagree and 10 is completely agree, how much do you agree with the statement: “I believe that vaccinations play an essential role in public health”	<ul style="list-style-type: none"> • Completely disagree • Completely agree 	En una escala del 1 al 10, donde 1 es completamente en desacuerdo y 10 es completamente de acuerdo, ¿cuánto estás de acuerdo con la siguiente afirmación? “Creo que las vacunas juegan un papel fundamental para la salud pública”	<ul style="list-style-type: none"> • Completamente en desacuerdo • Completamente de acuerdo



English Copy: Question	English Copy: Answers	Spanish Copy: Question	Spanish Copy: Answers
<p>On a scale of 1 to 10 where 1 is not at all and 10 is completely...</p> <p>How willing are you to get the TDAP vaccine – this vaccine is often called the Tetanus shot</p>	<ul style="list-style-type: none"> • Not at all • Completely 	<p>En una escala del 1 al 10 donde 1 significa que no estás dispuesto y 10 significa que estás completamente dispuesto ...</p> <p>¿Qué tan dispuesto estás a recibir la vacuna TDAP? Esta vacuna a menudo se llama vacuna contra el tétanos.</p>	<ul style="list-style-type: none"> • No estoy dispuesto • Sí estoy dispuesto
<p>How likely are you to get vaccinated for COVID-19 when a vaccine that has been tested and proven effective becomes available?</p>	<ul style="list-style-type: none"> • I definitely will not get a COVID-19 vaccine • I'm unlikely to get the COVID-19 vaccine • I'm undecided about whether or not to get the COVID-19 vaccine <ul style="list-style-type: none"> • I'm likely to get the COVID-19 vaccine when it's available • I will definitely get the COVID-19 vaccine when it's available 	<p>¿Qué probabilidades hay de que te vacunes contra el COVID-19 una vez la vacuna esté disponible y haya sido probada y demostrada?</p>	<ul style="list-style-type: none"> • Definitivamente no me vacunaría contra el COVID-19 • Es poco probable que me vacune contra el COVID-19 <ul style="list-style-type: none"> • No estoy seguro de si vacunarme o no contra el COVID-19 • Es probable que me vacune contra el COVID-19 cuando la vacuna esté disponible • Definitivamente me vacunaría contra el COVID-19 cuando la vacuna esté disponible
<p>How would you describe where you live?</p>	<ul style="list-style-type: none"> • Rural • Suburban • Rural 	<p>¿Cómo describirías dónde vives?</p>	<ul style="list-style-type: none"> • En un área rural • En un suburbio <ul style="list-style-type: none"> • Rural
<p>What is your gender?</p>	<ul style="list-style-type: none"> • [this will be an open-ended question – leave blank] 	<p>¿Cuál es tu género?</p>	



English Copy: Question	English Copy: Answers	Spanish Copy: Question	Spanish Copy: Answers
Do you identify as Hispanic or Latino/a/x?	<ul style="list-style-type: none"> • Yes • No 	¿Te identificas como hispano, latino/a/x?	<ul style="list-style-type: none"> • Sí • No
Do you speak Spanish at home?	<ul style="list-style-type: none"> • Yes, all the time • Yes, most of the time • Yes, some of the time • No, but I'm fluent • No 	¿Hablas español en tu hogar?	<ul style="list-style-type: none"> • Sí, todo el tiempo • Sí, la mayoría del tiempo • Sí, a veces • No, pero lo hablo fluidamente • No
On a scale of 1 to 10, where 1 is completely disagree and 10 is completely agree, how much do you agree with the statement: “I believe COVID-19 is real”	<ul style="list-style-type: none"> • Completely disagree • Completely agree 	En una escala del 1 al 10, donde 1 es completamente en desacuerdo y 10 es completamente de acuerdo, ¿cuánto estás de acuerdo con la siguiente afirmación? “Creo que el COVID-19 es real”	<ul style="list-style-type: none"> • Completamente en desacuerdo • Completamente de acuerdo
Which of the following describes your total household income?	<ul style="list-style-type: none"> • Less than \$39,000 • \$39,000 to \$50, 999 • \$51,000 to \$99,999 • \$100,000 or greater • Prefer not to say • Don't know 	¿Cuál de las siguientes cantidades describe el ingreso total en tu hogar?	<ul style="list-style-type: none"> • Menos de \$39,000 • \$39,000 a \$50,999 • \$51,000 a \$99,999 • \$100,000 o más • Prefiero no decirlo • No sé



Appendix 5: Discussion Guide



Covid-19 Barriers and Motivations

COVID-19 Vaccination 4-Day On-Line Research

Research Objectives

- > Understand attitudes & behaviors regarding vaccines in general, and the upcoming COVID-19 vaccine
- > Drive clarity about which barriers, benefits & motivations are most relevant
- > Provide direction for messaging context, tone and feel

Day 1 Research Activities

ACTIVITY 1: WELCOME & INTRODUCTIONS

In this section we will remind people of the research approach and expectations and get them comfortable with the platform. We will also reassure them that their responses are private and confidential.

INFORMATION

MODERATOR IMAGE UPLOADED

HELLO & WELCOME

Hi! My name is MODERATOR and I am your “moderator” for this research study, which means I'll be interacting with you over the course of the next 4 days.

Before we get started, I want to make sure you know what to expect. During this study there will be research activities for you to complete each day. These activities will help me learn more about you, your experiences, opinions, thoughts & feelings. I have found that most people enjoy participating in this kind of research because all you have to do is be yourself! There is no right or wrong way to do these activities, and there are no right or wrong answers.



You may log in and participate at any time that is convenient for you using your laptop, tablet or smartphone. However, I invite and encourage you to check in regularly because:

- > There may be additional questions posted by me, the moderator, based on how you answer the questions.
- > We'll also provide you with a "to do" list every day so you can see what activities you need to complete, and what's coming up for you to do.
- > Virtually all activities will require you to write at least a few sentences.
- > Remember, you must complete all the activities to earn your honorarium of \$150!

A few questions will require you to be on your laptop. I will let you know when those questions are coming so you can plan accordingly.

Finally, I encourage you to exchange thoughts, ask questions, make suggestions, and share opinions, etc... with others who are in the study. Once you answer a question, you will be able to see how others answered. It can be fun to learn about your fellow research participants. I only ask that you treat one another with respect, even if you disagree.

Need some help or have a question?

- > If you have questions about the study or any of the activities, I'm here to help. You can send me any questions about an activity by clicking the **messages inbox icon** in your main menu on the left side of your screen.
- > For technical issues, please contact us directly from your device. **You can click "help" in the mobile application menu or "get technical support" in web-browser application** to send us a short message regarding the issue you are experiencing. Our technical team will respond as soon as they can to resolve the issue.

One last piece of information I would like to make sure you are aware of...

By participating in this study, you will be consenting to the following:

- > You have the ability to skip any question you don't want to answer – please just indicate that in the space provided for your answer
- > You have the ability to drop out of the study at any time – just let your moderator know and we will remove you from the study.
- > You understand that your identity will remain anonymous.
- > You will allow C+C and the Washington State Department of Health to use this information to inform messages and strategies during the COVID-19 pandemic response and flu vaccine promotion.

OK. Let's get started!

PARAGRAPH QUESTION



MODERATOR UPLOAD PICTURE

Let's introduce ourselves. **MODERATOR INTRODUCTION**

Tell me a bit about yourself... Who lives in your household with you? How do you spend your week days? What are some of your hobbies and interests?

IMAGE UPLOAD QUESTION

As you can see, I uploaded an image of my dogs (aren't they cute?). In this space you can upload a picture of something that tells me a bit more about you – maybe about a favorite place to go, or a hobby/interest. That's completely up to you. You can feel free to skip this question too!

INFORMATION

Now I'd like to tell you a little more about this research. These next few days we'll be talking with a variety of people about vaccines. We'll be talking about vaccines in general and about some specific vaccines.

As was mentioned when you were invited to participate in this research, the results will be used by Washington State's Department of Health. However, I want you to know that **I do not work for Washington State's Department of health**. They hired me to do this work because they want to make sure you feel comfortable saying exactly what is on your mind. The most important thing to me is to really get to know and understand you and your point of view. I simply want to know what you think and feel, and how those thoughts and feelings impact what you do.

Your privacy is very important to me, so I also want you to know that nothing you say will be directly attributed to you – all findings from this research will be summarized into themes so your anonymity is protected.

I also want to thank you in advance for participating in this research and your willingness to openly share your point of view.



ACTIVITY 2: YOUR POINT OF VIEW ON VACCINES

This section is to help us understand the overall perspective each primary audience has about vaccines as a whole

As I mentioned, we are going to be talking about vaccines. To get started, I'd love for you to share the first 3 – 5 words or phrases that come to mind when you hear the word "vaccine."

If you had to give yourself a grade on how well you keep up with your vaccinations, what grade would you give yourself?

What caused you to give yourself that grade? If you didn't get an A, why not? What could you do to improve your grade?

Make a list of pros and cons about vaccines in general.

Tell me which 2 – 3 pros make you want to get vaccinated? What causes these pros to be so important to you?

Tell me which 2 – 3 cons make you hesitant to get vaccinated? What causes these cons to be so important to you?

Are there any vaccines that you think you are due to have, but have not gotten or scheduled yet? Tell me about those. Why haven't you gotten them yet?

If you think you are up to date on your vaccines please just answer N/A

How do you (or would you) decide whether or not to get a vaccine that you haven't had before? Where do you go for information? What kinds of questions do you have?

On a scale of 1 to 10 where 1 is not at all and 10 is completely, how important is it to you that other adults get vaccinated? What causes you to answer that way?



ACTIVITY 3: THE FLU VACCINE – FEELINGS WHEEL

This section is to help us understand how people feel about the flu vaccine

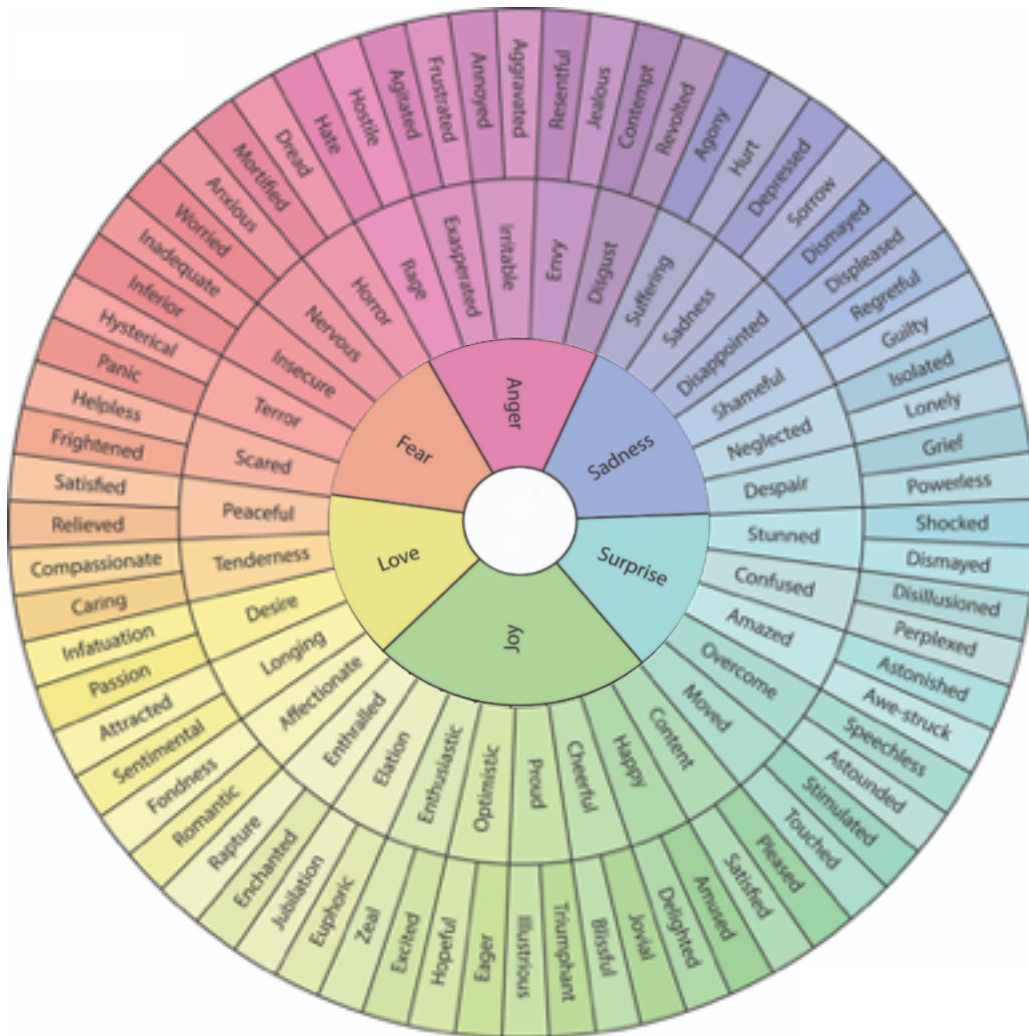
Now we are going to spend some time talking about this year's flu vaccine.

Note: The next activity will require you to be on a laptop or desktop computer.

ACTIVITY 4: CONCEPT CANVAS

Concept Canvas

To the right is a circle that has a lot of different feelings words. Think specifically about the flu vaccine this year (2020) and tell me what 3 – 5 feelings come up for you. When you click on a feeling, a comment box will open up – please explain what caused you to pick the feeling you did.



ACTIVITY 5: THE FLU VACCINE

This section is to help us understand more about the perspective on the flu vaccine

Thinking back over the last 5 – 10 years, how often did you get vaccinated? What are the main reasons you choose to get the flu vaccine? What are the main reasons you didn't get the flu vaccine?

How important do you think it is for others to get the flu vaccine? What causes you to say that?

In what ways do you think that getting the flu vaccine this year is similar to previous years? How does that impact your willingness to get the flu vaccine?

In what ways do you think that getting the flu vaccine is different from previous years? How do those differences impact your willingness to get the flu vaccine this year?

Did you (or do you plan to) get the new 2020-21 flu vaccine this year? Please tell me what influenced this decision.

ACTIVITY 6: FLU VACCINE AD ASSESSMENT

In this section we want to get feedback on flu vaccine ads that have been created already

Now I'd like you to take a moment to watch an ad and answer some question. Click the link below to watch the ad.

What was the main idea of the ad?

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **believable** is this ad? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **relevant** is this ad? – In other words, does this ad seem to be directed to someone like you? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **engaging** is this ad? – In other words, how likely would this ad be to catch your attention? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **informative** is this ad? – In other words, did this ad provide you with new information or a new perspective? **Please be sure to explain your answer.**



On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **motivating** is this ad? – In other words, do you feel motivated to get the flu vaccine after watching this ad? – If you already got the flu vaccine just type N/A. **Please be sure to explain your answer.**

Overall, what did you like most about this ad? Why was that appealing to you?

Overall, what did you like least about this ad? Why didn't that appeal to you?

What would you do to this ad to make it more motivating to you?

ACTIVITY 7: FLU VACCINE AD ASSESSMENT

In this section we want to get feedback on flu vaccine ads that have been created already.

Now I'd like you to take a moment to watch another ad and answer some question. Click the link below to watch the ad.

What was the main idea of the ad?

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **believable** is this ad? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **relevant** is this ad? – In other words, does this ad seem to be directed to someone like you? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **engaging** is this ad? – In other words, how likely would this ad be to catch your attention? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **informative** is this ad? – In other words, did this ad provide you with new information or a new perspective? **Please be sure to explain your answer.**

On a scale of 1 to 10, where 1 is not at all, and 10 is completely... How **motivating** is this ad? – In other words, do you feel motivated to get the flu vaccine after watching this ad? – If you already got the flu vaccine just type N/A. **Please be sure to explain your answer.**

Overall, what did you like most about this ad? Why was that appealing to you?

Overall, what did you like least about this ad? Why didn't that appeal to you?

What would you do to this ad to make it more motivating to you?

That's it for Day 1. Thank you for taking the time to provide your opinions! I hope you took some time to read what other participants have said on this topic! I encourage you to comment on what other people say. Maybe ask for clarification, or give them a like if you agree with what they said! Maybe you want to build on what they said, or you see an idea that sparks some interest. Let them know!



Day 2 Research Activities

ACTIVITY 1: FEELINGS WHEEL COVID-19 VACCINE

This section is to help us understand reaction to the COVID-19 vaccine

INFORMATION

MODERATOR IMAGE UPLOADED

HELLO & WELCOME

Hi! My name is MODERATOR and I am your “moderator” for this research study, which means I’ll be interacting with you over the course of the next 4 days.

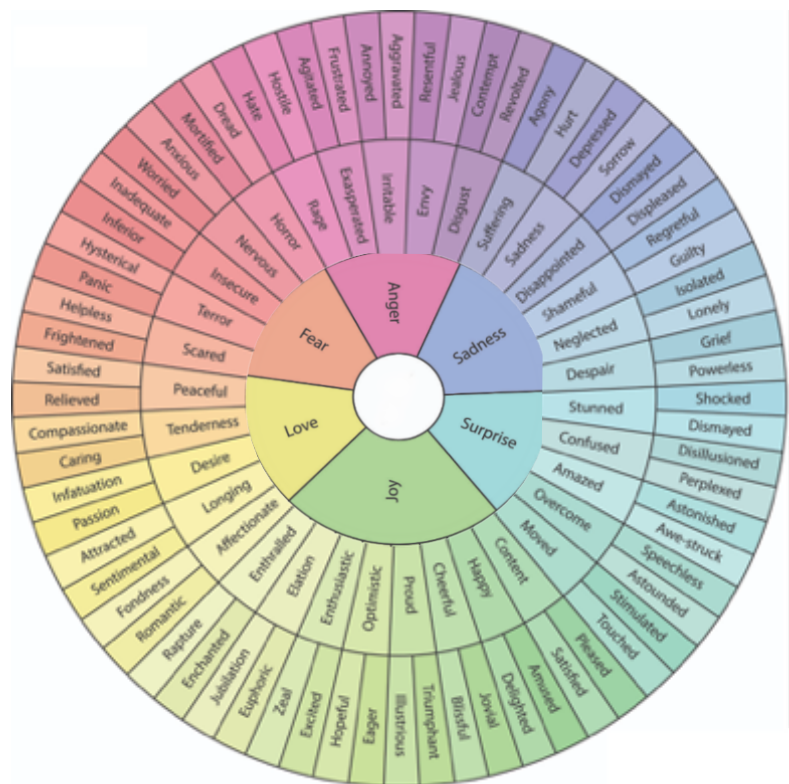
Before Now we are going to talk about the future, when there is a COVID-19 vaccine available to the general public that:

- > Has been approved by the FDA (Food & Drug Administration)
- > Has passed clinical trials
- > Has passed an independent, scientific safety and efficacy review

Note: The next activity will require you to be on a laptop or desktop computer.

ACTIVITY 2: CONCEPT CANVAS

To the right is a circle that has a lot of different feelings words. Think specifically about the future COVID-19 vaccine described above and tell me what 3 – 5 feelings come up for you. When you click on a feeling, a comment box will open up – please explain what caused you to pick the feeling you did.



ACTIVITY 3: COVID-19 VACCINE

This section is to help us understand more about the perspective on the COVID-19 vaccine

From now on, whenever I refer to the COVID-19 vaccine, I want you to assume that it:

- > Has been approved by the FDA (Food & Drug Administration)
- > Has passed clinical trials
- > Has passed an independent, scientific safety and efficacy review

Below are the three assumptions mentioned above. I'd like you to rank order them from most important to least important to your willingness to get a COVID-19 vaccination. Be sure to explain what caused you to rank order them the way you did.

- A) Has been approved by the FDA (Food & Drug Administration)
- B) Has passed clinical trials
- C) Has passed an independent, scientific safety and efficacy review

Who and/or what types of organization do you trust to tell you that a COVID-19 vaccine is safe? List as many as wish.

What sources of information do you trust most about the COVID-19 vaccination? These sources could be individual people, publications, media, social media sources and so on.

What makes you trust a particular information source about the COVID-19 vaccination? How likely are you to get the COVID-19 vaccine when it is available to the general public, assuming it:

- > Has been approved by the FDA (Food & Drug Administration)
- > Has passed clinical trials
- > Has passed an independent, scientific safety and efficacy review

What causes you to feel that way?

What are the main reasons you WOULD get the COVID-19 vaccine when it becomes available to the general public? Please list as many reasons that you can think of.

What are the reasons you WOULD NOT get the COVID-19 vaccine when it becomes available? Please list as many reasons that you can think of.

Think about the reasons you WOULD get the COVID-19 vaccine. Which ones are the most important to you, personally? What causes you to feel that way?

Think about the reasons you WOULD NOT get the COVID-19 vaccine. Which ones cause you to be most hesitant about getting the vaccine? What causes you to feel that way?



ACTIVITY 4: COVID-19 VACCINE BARRIERS RATING/RANKING

The purpose of this section is to better understand barriers to getting the COVID-19 vaccine INFORMATION

Below are some statements that summarize what I have heard other people say are the reasons they are hesitant to get the COVID-19 vaccine when it is available to the general public. I want you to indicate how much each statement reflects how you feel. Use a scale of 1 to 10, where 1 means “not at all”, and 10 means “completely”.

Be sure to explain why you gave it the rating you did.

Recall that when I refer to the COVID-19 vaccination, I want you to assume:

- > Has been approved by the FDA (Food & Drug Administration)
- > Has passed clinical trials
- > Has passed an independent, scientific safety and efficacy review

SE: I'm worried the vaccine will have side effects

GC: I'm worried the vaccine will give me COVID-19

DS: I don't trust that the vaccine will really be safe

DE: I don't trust that the vaccine will really protect me from COVID-19

PP: Politics/politicians instead of science are making decisions about the vaccine

BR: I don't react well to vaccines in general

IC: I don't have health insurance or can't afford it

AC: I've already had COVID-19 so I don't need it

NB: COVID-19 is not such big deal, so I don't think I need it

OP: Other people will get it so I won't need it

GE: I'm concerned because the government uses vaccines to experiment on people

SH: I'm concerned that if I get the vaccine, someone could collect and share my personal or health information.

DM: I'm concerned there won't be sufficient testing done for my specific demographic group

Of all the statements above, which three best represent your point of view?

For each of the statements that best represent your point of view, help me understand what causes these statements to resonate so much for you.

Of all the statements above, which three least represent your point of view?

For each of the statements that least represent your point of view, help me understand what causes these statements to seem less relevant to you.

That's it for Day 2! I'd love it if you would look at some other discussion participants' answers – do you agree with what they wrote? Did someone say something interesting? Are you surprised by anyone's answers? It can be fun to get a conversation going with someone else in the study!



Day 3 Research Activities

ACTIVITY 1: COVID-19 VACCINE BENEFIT STATEMENT RANKING / RATING

This exercise is designed to help us understand which benefits are most important to the audience

Welcome to Day 3!

INFORMATION

Below are some statements that summarize what I have heard other people say are the potential benefits of getting the COVID-19 vaccine when it becomes available to the general public. For each statement I want you to indicate how much it reflects your perspective. Use a scale of 1 to 10, where 1 means “not at all”, and 10 means “completely.”

Be sure to explain why you gave it the rating you did.

Recall that when I refer to the COVID-19 vaccination, I want you to assume:

- > Has been approved by the FDA (Food & Drug Administration)
- > Has passed clinical trials
- > Has passed an independent, scientific safety and efficacy review

PM: If I get the vaccine, I am helping to protect myself from getting COVID-19

EP: If I get the vaccine, I am doing my part to end the pandemic

RE: If I get the vaccine, I will feel more comfortable leaving my home to do every day errands, like shopping, going to the dentist/doctor, getting regular car maintenance, and so on.

PF: If I get the vaccine, I am helping to protect my family & loved ones from getting COVID-19

PC: If I get the vaccine, I am helping to protect others in my community from getting COVID-19

HB: If I get the vaccine, I am helping businesses reopen, which means I am helping people who have been negatively impacted by the pandemic get back on their feet as soon as possible

FC: If I get the vaccine, I will be able to recover from my financial hardships due to COVID-19 as soon as possible

SC: If I get the vaccine, children and college students will be able to get back to the classroom as soon as possible

PV: If I get the vaccine, I am helping to protect people in my community that are vulnerable

UE: If I get the vaccine, I am helping everyone who became unemployed to get back to work as soon as possible



Of all the statements above, which three best represent your point of view?

For each of the statements that best represent your point of view, help me understand what causes these statements to resonate so much for you.

Of all the statements above, which three least represent your point of view?

For each of the statements that least represent your point of view, help me understand what causes these statements to seem less relevant.

ACTIVITY 2: PROJECTIVE EXERCISE ABOUT THE DECISION TO GET THE COVID-19 VACCINE

To gain a more in-depth understanding of the benefits of getting a COVID-19 vaccine

Welcome to Day 3 of our research! I hope you are having fun while you are participating in the study! As usual, please check to see if there are follow-up questions that you need to answer.

Let's have a little fun... I want you to imagine that we are able to travel forward in time. In this future, I am a reporter and I am interviewing you. Why am I interviewing you? Well, you were one of the first people to get the COVID-19 vaccination when it became available to the general public.

Hello, and thank you so much for taking the time to do this interview with me. I'm thinking back to the years 2020 and 2021... Those years were pretty hard for most Americans because of the impact of the COVID-19 pandemic. What was the most difficult thing for you during that time?

There was a lot of discussion in the news about how quickly a COVID-19 vaccine was being developed. In fact, some people called the effort "warp speed." When you heard this discussed on the news, how did you feel, and what were you thinking?

As we look back, we know a lot of people weren't sure they wanted to get the COVID-19 vaccine when it was available to the general public. What were your biggest reservations?

Recall that we are doing this interview today because, in the end, you did decide to be one of the first people to get the COVID-19 vaccine.

- > How hard was it for you to make that decision?
- > Who helped you make the decision?
- > Where did you go for information?
- > Ultimately, what was the deciding factor for you?

Well, here we are in the future... when you look around today, what kind of impact did your decision to get the COVID-19 vaccine have on the pandemic in America?

We know that back then, there were some people who didn't get the COVID-19 vaccine. If there was another pandemic, what would you say to those people to convince them that this time around they should get the vaccine?

What is the headline for the story that was written based on this interview?



ACTIVITY 3: MOTIVATIONS RATING / RANKING

INFORMATION

Below are some statements that summarize what other people say are the reasons they would go ahead and get the COVID-19 vaccine when it is available to the general public. For each statement please indicate how much it reflects your perspective. Use a scale of 1 to 10, where 1 means “not at all”, and 10 means “completely.”

Be sure to explain why you gave it the rating you did.

Recall that when I refer to the COVID-19 vaccination, I want you to assume:

- > Has been approved by the FDA (Food & Drug Administration)
- > Has passed clinical trials
- > Has passed an independent, scientific safety and efficacy review

MD: My doctor recommends it

TP: I trust the process that was used to develop the vaccine

TF: I trust the FDA would not approve something that was not safe

OP: I know a few people who got it and are feeling fine

OW: It's being offered through my workplace or school

HC: I know that many healthcare workers have gotten it already

SU: It's been used successfully in other states

SC: It's been used successfully in other countries

RQ: It's required by my workplace or school

FR: It's free, whether or not I had health insurance

FA: Dr. Fauci assures us that it is safe & effective

PT: Everyone in government positions is required to get it

CD: The CDC (Center for Disease Control) assures us that it is safe & effective

AN: I would get it if I was convinced that no one would collect or share any of my personal or health information.

Of all the statements above, which three best represent your point of view?

For each of the statements that best represent your point of view, help me understand what causes these statements to resonate so much for you.

Of all the statements above, which three least represent your point of view?

For each of the statements that least represent your point of view, help me understand what causes these statements to seem less relevant.



ACTIVITY 4: PROJECTIVE TECHNIQUE ABOUT MOTIVATIONS

To gain an in-depth understanding of motivations for getting the COVID-19 Vaccine

Here's another exercise that I hope you have some fun doing. Think of someone you know who has expressed that they are hesitant about getting the COVID-19 vaccination when it is available for the general public. I'd like you to write a letter to that person that would encourage him/her to get it. In your letter be sure to:

- > Let them know you understand why they aren't sure about getting a COVID-19 vaccination.
- > Help them understand how you think their concerns will be addressed
- > Explain why you think they should go ahead and get it when it is available to the general public
- > Explain what you think would happen if a lot of people got the COVID-19 vaccine

ACTIVITY 5: EXPOSURE APP

To get reaction to the Exposure Notification App

Below I have a description about a feature for a phone. I'd like you to read the description and answer the questions that follow.

Exposure Notification is something you can voluntarily download as an app or enable as a setting on your phone. Things you should know about this feature:

- > Doing this allows your phone to use Bluetooth to create a log of the phones of other users you are near for more than 15 minutes.
- > **It is completely anonymous – it does not know who you are or where you go.**
- > When a person tests positive for COVID, a public health official contacts them. As part of this process, the person that tests positive will be asked if they have the feature enabled on their phone. If they do, **they will be given a verification code that they can choose to put into their device.**
- > Any phones also using the feature which have been within 6ft of that phone in the past two weeks would **receive a notification to alert the user that they may have been exposed to COVID-19.** The notification includes a link to a website with info about what to do next.



Exposure Notification is something you can voluntarily download as an app or enable as a setting on your phone. Things you should know about this feature:

- Doing this allows your phone to use Bluetooth to create a log of the phones of other users you are near for more than 15 minutes.
- It is **completely anonymous** – it does not know who you are or where you go.
- When a person tests positive for COVID, a public health official contacts them. As part of this process, the person that tests positive will be asked if they have the feature enabled on their phone. If they do, they will be **given a verification code that they can choose to put into their device**.
- Any phones also using the feature which have been within 6ft of that phone in the past two weeks would **receive a notification to alert the user that they may have been exposed to COVID-19**. The notification includes a link to a website with info about what to do next.

Click on the feelings you have when you read this description. Please explain your answer in the comment box



In your own words, what is the main idea of this feature?

How willing would you be to enable this feature? What causes you to answer that way? What questions would you have about the feature that would impact your decision to enable it?

For each question, what would be an answer that would make you more willing to enable the feature.

If this feature was the result of Google and Apple working with the Department of Health, how would that impact your willingness? What causes you to answer the way you do?

If this feature was proven to provides 100% privacy, no data is shared about the individual or their location, how would that impact your willingness? What causes you to answer that way?

That's it for Day 3! I'd love to have you go read a few other letters or interviews and comment on them. Did you enjoy reading them? Did they make good points? Are they confusing? What else do you want to know?



Day 4 Research Activities

ACTIVITY 1: INTRODUCTION TO STORYBOARD 1

Introduce the concept of a storyboard

Welcome to our final day – Day 4! I hope you are still enjoying participating. As always, please check for follow-up questions.

In this activity you will see something called a “storyboard.” A storyboard is way of explaining what an ad might be like once it is complete. Storyboards are made before an actual ad is produced, so the format is images and written words instead of a video – it’s sort of like a graphic novel or comic book with pictures instead of illustrations.

The reason we are showing you a storyboard is that we want your input on the ad idea before we make it into an actual ad. By showing you the storyboard, we can take your feedback and modify the idea before it is actually produced.

Take a moment to get familiar with the storyboard below.

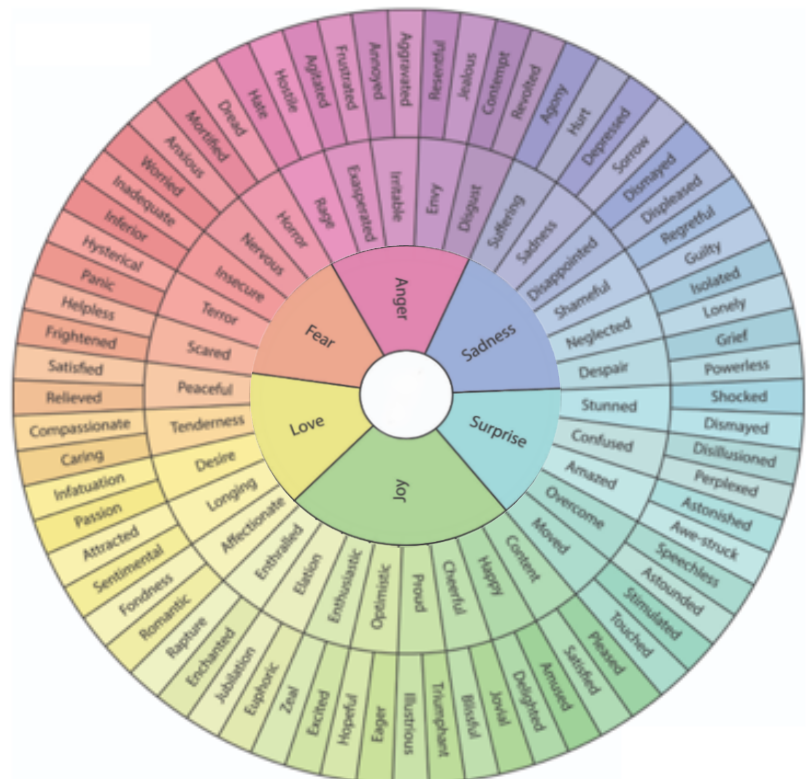


For the next activity you will need to be on a laptop or desktop computer.

ACTIVITY 2: FEELINGS ABOUT STORYBOARD 1

To get an initial understanding of the emotional reaction to the storyboard

I want you to think about how you felt when you reviewed the storyboard. On the “feelings wheel” to the right I’d like you to click on the feelings (up to 5) that best represent how you felt when you reviewed the storyboard. When you click on a feeling, a comment box will open, please tell us why you selected



ACTIVITY 3: SUCCESS FACTORS STORYBOARD 1

This section is designed to gather feedback on how respondents assess the ad based on the success factors

Here's the storyboard again for your reference on these next questions



In your own words, describe the main idea of the ad.

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **relevant** is the ad? In other words, does the ad seem to be written for people like you? Explain your answer – what was it about the ad that made you score it that way?

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **believable** is the ad? In other words, does the ad seem realistic? Explain your answer – what was it about the ad that made you score it that way?

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **important** is the topic of the ad to you? Explain your answer – what was it about the ad that made you score it that way?

ON a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **engaging** is the ad to you? In other words, do you think the ad would break through the clutter of all the other ads you see throughout the day? Explain your answer – what was it about the ad that made you score it that way?

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **informative** is the ad to you? In other words, did you learn something new or gain a new perspective? Explain your answer – what was it about the ad that made you score it that way?

Overall, what did you like most about this storyboard? Why was that **appealing** to you?

Overall, what did you like least about this least about this storyboard? Why didn't that appeal to you?



ACTIVITY 4: COVID-19 VACCINE STORYBOARD 1 IMAGES/WORDS

In this section we want to get feedback on storyboards for the COVID-19 vaccine 60 second ads.

INFORMATION

In the next activity you will see the storyboard again. I want you to think about which images and/or words you like, dislike or that you find confusing. When you click on an image and/or word, you will be able to select whether you like, dislike or find it confusing. Then a comment box will appear so you can explain your answer.

For the next activity you will need to be on a laptop or desktop computer.



ACTIVITY 8: SUCCESS FACTORS STORYBOARD 2

This section is designed to gather feedback on how respondents assess the ad based on the success factors

Here's the storyboard again for your reference on these next questions.



In your own words, describe the main idea of the ad.

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **relevant** is the ad? In other words, does the ad seem to be written for people like you? Explain your answer – what was it about the ad that made you score it that way?

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **believable** is the ad? In other words, does the ad seem realistic? Explain your answer – what was it about the ad that made you score it that way?

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **important** is the topic of the ad to you? Explain your answer – what was it about the ad that made you score it that way?

ON a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **engaging** is the ad to you? In other words, do you think the ad would break through the clutter of all the other ads you see throughout the day? Explain your answer – what was it about the ad that made you score it that way?

On a scale of 1 to 10, where 1 is “not at all,” and 10 is “completely,” how **informative** is the ad to you? In other words, did you learn something new or gain a new perspective? Explain your answer – what was it about the ad that made you score it that way?

Overall, what did you like most about this storyboard? Why was that appealing to you?

Overall, what did you like least about this least about this storyboard? Why didn't that appeal to you?



ACTIVITY 9: COVID-19 VACCINE STORYBOARD 2 IMAGES/WORDS

In this section we want to get feedback on storyboards for the COVID-19 Vaccine 60 second ads.

INFORMATION

In the next activity you will see the storyboard again. I want you to think about which images and/or words you like, dislike or that you find confusing. When you click on an image and/or word, you will be able to select whether you like, dislike or find it confusing. Then a comment box will appear so you can explain your answer

For the next activity you will need to be on a laptop or desktop computer.

ACTIVITY 10: CONCEPT CANVAS

INSERT IMAGE

Click on the words or images that you like, dislike or find confusing. When you click on a word or image, pick a label. Then a comment box will open and I'd like you to explain why you picked that word or image.

ACTIVITY 11: WRAP UP

In this section we thank the respondents and ask for any last advice

Before you go, we'd love to hear any parting thoughts you have on what might motivate you to get the COVID-19 vaccine when it becomes available to the general public.

Otherwise, that's it! I just want to thank you for your time and candor in this research. I hope you enjoyed participating.

