

Pacific COVID-19 Vaccination Perceptions Rapid Assessment Tool



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BACKGROUND

Globally countries are rapidly preparing for the introduction of COVID-19 vaccines, many of them initially prioritising their most vulnerable populations, including frontline workers, the elderly and persons with pre-existing medical conditions.

As with any new health intervention, understanding public perceptions and attitudes on the issue and intervention is key to defining the strategy and approach for building trust in the intervention and overcoming barriers.

With the global rise in vaccine hesitancy, and in the context of the COVID-19 pandemic, understanding public knowledge, perception and attitudes to COVID-19 vaccination is critical to shape national risk communication and community engagement strategies for vaccine roll-out.

This tool has been developed to support Pacific countries and territories in conducting rapid qualitative and quantitative assessment to better understand their population's perceptions of COVID-19 vaccines.

This tool has been developed by the Pacific development partners supporting risk communication and community engagement, guided by global assessment tools developed by the World Health Organization (WHO), United Nations International Children's Emergency Fund (UNICEF) and International Federation of the Red Cross and Red Crescent (IFRC).

Approaches to conducting rapid assessments

1. Adapting the tool

The tool has been developed as a template that can be adapted to your country context. The questions have been defined based upon global and regional guidance provided by the World Health Organization, UNICEF, IFRC and other partners.

The questions detailed in this tool can be adapted based on whether you are seeking to achieve more qualitative or quantitative results. Below is a quick summary of the two approaches to conducting a rapid assessment.

Before applying this tool and/or conducting other studies involving human subjects, we recommend that you discuss the study with your institutional ethics committee to ensure that you go through the correct approvals, if considered necessary.

2. Approaches to conducting the survey

Quantitative approach

This is often achieved via more indirect, one-way communication channels, such as SMS text or online surveys. Surveys conducted using this approach will principally produce results that provide datasets and insights based on yes/no, ranking or selection questions.

Qualitative approach

A qualitative approach is generally via two-way communication methods, such as in-person survey collection or via facilitated focus group discussion. Survey results will be more detailed, and issues are able to be explored with respondents. This approach can be either implemented in groups or one-on-one.

	Quantitative	Qualitative
Pros	<ul style="list-style-type: none">• A larger sample size can be accessed through channels that reach large audiences quickly, such as email, social media, on-street surveys etc.• Can be a quicker way to collate large volumes of data.• Can be anonymous.• Can be randomized.• Can offer reliable information through same data points.• Research can be performed remotely (assuming internet or phone access to audiences).	<ul style="list-style-type: none">• Able to better understand participant attitudes and perceptions through exploring participant feedback.• Generally smaller sample sizing due to more information collected from participants.• Better ability to generate emotion-led data through allowing for the expression of human experience.• Can allow for creative thinking and inject consumer feedback into interventions/topics being researched.
Cons	<ul style="list-style-type: none">• Are typically more time and resource intensive.• Hard to follow up on answers or explore why people responded the	<ul style="list-style-type: none">• Not statistically representative of a population.• Data collected can be influenced by the approach and capacity of the researcher/data collector.

	<p>way they did (without conducting follow up qualitative surveys).</p> <ul style="list-style-type: none"> • Population characteristics are generalised. 	<ul style="list-style-type: none"> • Can be difficult to replicate results or find trends due to the inclusion of human experience. • Can create misleading conclusions; given that data is often generated from smaller data sets then not reflective of entire demographic trends. • Can be difficult to present as difficult to aggregate the data.
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3. Target audiences

For quantitative approaches, as you are seeking a high number of responses from a variety of different target groups, it is recommended that the survey is shared via various channels e.g. social media, SMS text, email or other.

For qualitative approaches, you can delve into more detail around why people think a certain way through open questioning. This is particularly useful if you want to understand behaviours and drivers for a target audience, for instance:

- health workers, front line workers
- youth
- the elderly
- persons with medical conditions

Consider how you can engage with these audiences in organised forums, for instance, health workers during training events, youth groups, medical clinics for persons with existing health conditions. You will need to consider where the discussion takes place, how the respondents are made to feel comfortable and their responses kept confidential, how the intervention is recorded and key information captured.

4. Sample sizing

When it is important to achieve a representative sample of your community of interest that you consider demographic representation, such as age, gender, education level etc. Sample size calculations that consider whether the study population will be stratified by demographic and other characteristics of interest help to ensure that the study has sufficient power to achieve statistical significance.

It is recommended that you consult with an epidemiologist and/or biostatistician early in the design phase of the study to assist with these calculations and to avoid design biases that affected the quality of the study results. The Pacific partners, including WHO, assist with these calculations on request.

5. Confidentiality

It is critical that participants feel that information shared is kept confidential and safely stored, especially if they are from specific target groups that may be marginalized or potentially penalized if they hold opinions different to the general public.

In this instance, it is important that the person conducting the consultations is a neutral party, for example someone who is not from their community.

For online surveys or other survey methods, it is important that the participants are advised that all information shared will be stored securely as anonymized data i.e. names and other identifying details will not be stored.

In all instances, participants should know that their participation is voluntary and that they can withdraw from the survey at any time without repercussions, and that any reporting of analyzed data will be of aggregated results to ensure privacy and confidentiality.

EXAMPLE ONLY:

INTRODUCTION AND CONFIDENTIALITY DISCLAIMER (for assessment facilitators)

READ OUT: Hello, my name is _____ and I work for _____. I am conducting a survey on behalf of <add organisation name> _____ to gain a better understand of the public's knowledge and opinions about COVID-19 vaccines.

Taking part in this survey is voluntary and you will have the right to end the interview at any point, as well as refuse to answer any questions you feel uncomfortable with.

Your responses will help us improve our understanding of the public opinion of vaccines, and specifically the COVID-19 vaccination programme.

We will learn what people know about vaccination, think about vaccines and what barriers may exist to their uptake.

The survey should take between 15-20 minutes to complete.

Note that certain parts of the interview will be recorded for quality control purposes. It will be completely anonymous, and your name will not be attached to any of the information.

It is recommended that, even if someone chooses to opt out of doing the survey, you aim to still capture key demographic information on their location, age, sex etc. This is specifically relevant to quantitative data collection approaches, as the data form an important part of a broader data set.

The following survey is indicative only, and for adaption to county-specific surveying needs.

No	Question	Answer
A. DEMOGRAPHY/INFORMATION ABOUT RESPONDENT		
1.	Home location (<i>town, village, city</i>)	
2.	Sex	a) Male b) Female c) Other d) Prefer not say
3.	Age (<i>not inclusive of children under the age of 18 years</i>)	a) 18-29 b) 30-39 c) 40-49 d) 50 - 59 e) Above 60 years
4.	What is your highest level of education?	a) No formal education b) Elementary/Primary c) Secondary d) University/Tertiary e) Postgraduate degree (Masters/PhD) f) Other, specify
5.	What is your religious affiliation?	a) Catholic b) Methodist c) Protestant d) Other Christian e) Hindu f) Muslim g) Atheist/agnostic h) Other (Specify) i) Prefer not to say
6.	Do you identify as someone living with a disability?	a) Yes b) No c) Prefer not to say
7.	Do you have an existing medical condition which could make you more vulnerable to COVID-19? <i>For example, an underlying health conditions such as lung conditions, heart disease, a weakened immune system etc.</i>	a) Yes b) No c) Prefer not to say

	4. Overall, I think vaccines are effective	1	2	3	4	98	99
	5. Vaccines are compatible with my religious beliefs	1	2	3	4	98	99
14.	How strongly do you agree or disagree with the following statements about COVID-19 vaccines?						
		READ				DO NOT READ OUT	
	ROTATE	Strongly Agree	Tend to Agree	Tend to Disagree	Strongly Disagree	Don't know	Refused
	1. I think a new coronavirus (COVID 19) vaccine would be safe	1	2	3	4	98	99
	2. I think a new coronavirus (COVID 19) vaccine would be important	1	2	3	4	98	99
	3. I think a new coronavirus (COVID 19) vaccine would be effective	1	2	3	4	98	99
	4. Where the vaccine comes from/is made will affect whether I accept it or not	1	2	3	4	98	99
	5. The type of vaccine that will be developed will have no impact on my acceptance	1	2	3	4	98	99
15.	How much would you trust the Covid-19 vaccine if it were available for you now?			a) Not at all b) A little c) Very much			

16.	<p><Even though COVID-19 isn't in country, if it was to enter our country>, to what extent do you feel the nature of your work exposes you to the risk of getting COVID-19?</p>	<p>To a great extent</p>	<p>To some extent</p>	<p>To a little extent</p>
17.	<p>Would you accept being vaccinated with a COVID-19 vaccine, if it was made available to you?</p>	<p>a) Yes b) No c) Not sure d) Have already been vaccinated</p>		
18.	<p>(If respondent answers NO)</p> <p>Which of these statements best describes the reason you will NOT take a COVID-19 vaccine?</p>	<p>a) I am worried about the side effect of COVID-19 vaccines b) I am not certain about the side effects of the COVID-19 vaccines c) I would like to wait to see how the COVID-19 Vaccine goes with others before taking it d) I have not received enough information to make an informed decision e) I do not believe COVID-19 is dangerous f) I am against vaccines in general g) It is against my religion h) Pregnancy/breastfeeding i) I've got another health reason for not wanting to take the vaccine (e.g. immunocompromised) j) I've heard a rumour against the COVID-19 vaccine</p> <p><i>Add: what rumour and where did you hear it from</i></p> <p>k) Other reasons, please specify</p>		
19.	<p>What would make you want to take a COVID-19 vaccine?</p>	<p>a) More information about the vaccine and its safety b) More information about the side-effects of the vaccine c) Assurances from the Government d) Seeing people I know and trust taking the vaccine e) Other, specify</p>		

20.	To what extent do you agree or disagree with each of the following Statements?				
	Statement	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
	1. I will take the COVID-19 vaccine if others are taking it				
	2. I will take the COVID-19 vaccine if it is made compulsory by my employer				
21.	Where would you like to get a COVID-19 vaccine? <Only add options that are viable in-country>	a) At the Hospital/Health Facility b) At my workplace c) At my local health clinic			
22.	Do you think most people would want to get the vaccine when it becomes available?	a) Yes b) No c) Not sure			
23.	Which of the following groups, if any, do you think should be prioritised for the vaccine?				
	What groups do you believe to be eligible for a COVID-19 vaccine? Add group names:				
	Healthcare workers (e.g. hospital staff, care workers etc.)				
	Other key workers (e.g. teachers, shopkeepers, delivery people etc.)				
	The elderly in general				
	Vulnerable populations (e.g. those with underlying health conditions such as lung conditions, heart disease, a weakened immune system etc.)				
	Those unable to follow social distancing rules due to living conditions (e.g. living in a crowded setting, need to go out to make a living, persons with disabilities)				
	All adults				
	Other (Specify) [FIXED]				
24.	Would you recommend a COVID-19 vaccine to other people when it becomes available?	a) Yes b) No c) Not sure			

25.	<p>After you have been vaccinated, what other measures do you think should continue?</p>	<p>a) Wear a mask b) Cover your mouth and nose when sneezing or coughing c) Distance from other people d) Limit large gatherings e) All of the above f) Nothing</p>
26.	<p>Are you taking any medicines or treatments (traditional or other) that you have read/heard can help protect you against COVID-19?</p> <p>By non-prescribed, we mean over the counter medicine, herbal medicine, alternative treatments or supplements purchased specifically to protect you from catching COVID-19.</p>	<p>a) Yes</p> <p>b) If yes, what? <i>Specify.</i></p> <p>_____</p> <p>c) No</p>
C. HOW PEOPLE RECEIVE INFORMATION		
27.	<p>What information have you heard/ received about the COVID-19 vaccination so far?</p>	<p>a) How the vaccine works b) When the vaccine will be available c) Concerns of vaccine side effects d) Other, <i>specify</i></p> <p>_____</p>
28.	<p>To date, how have you received information about COVID-19 vaccines and vaccination plans?</p> <p>Please rate strongest preferences as number 1, and so on...</p>	<p>a) Radio b) TV c) Social Media (Facebook, WhatsApp etc.) d) Health Workers e) Friends and Family members f) Community health workers g) Religious leaders h) Traditional healers i) Other</p>
29.	<p>What additional information do you need regarding the COVID-19 vaccination?</p>	<p><i>(open question)</i></p>
30.	<p>In the future how would you wish to receive further information and updates about the COVID-19 vaccine and vaccination plans?</p> <p>Please rate strongest preferences as number 1, and so on...</p>	<p>j) Radio k) TV l) Social Media (Facebook, WhatsApp etc.) m) Health Workers n) Friends and Family members o) Community health workers</p>

		p) Religious leaders q) Traditional healers r) Other
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