Horizon Research

COVID-19 Vaccine

28-30 May, 2021

In association with the School of Population Health
University of Auckland

Contents

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EXECUTIVE SUMMARY

These results are from an online survey of 1,234 New Zealand respondents aged 16 years of age or over. The survey was conducted between 28 and 30 May 2021.

The sample is weighted on age, gender, employment status, ethnicity, personal income and region to match the 16+ population and at the most recent census.

At a 95% confidence level, the survey has a maximum margin of error of ±2.8% overall.

KEY FINDINGS

- Overall, New Zealanders appear to be more certain about getting a vaccine, but 62% still require more information.
- There has been minimal change in how those who have not yet been vaccinated think about the prospect of getting a vaccine and what will most influence them in their decision.

Already vaccinated

- The sample contained 12.5% of respondents 16+ who had already been vaccinated.

Uptake

Of those who have not yet been vaccinated:

- **77%** said they were likely to get a vaccine (75% in April, 67% in March 2021). This is around 2,754,000 New Zealanders 16+.
- 15% said they were unlikely to get a COVID-19 vaccine[1]. This is around 529,500 New Zealanders 16+.
- 8% (an estimated 289,200 New Zealanders 16+) are unsure whether they will get a vaccine or not.

- Including those who had already been vaccinated, overall potential uptake is estimated to have increased to **80%** (77% in April and 69% in March 2021).
- Overall, 3,263,300 out of the estimated 4,082,500 New Zealanders aged 16+ say they are likely to get vaccinated or have already been vaccinated.
- The "core" of those who are unlikely to get vaccinated and will be difficult to persuade to get a COVID-19 vaccine has contracted further to 7.0% of those who have not yet been vaccinated, equivalent to 6.1% of the total 16+ population.

- 98% of those who had one dose were likely to get a second (91% "Definitely"). Only 2% said they were unlikely to get a second.

[1] Note that it is likely that, as the number vaccinated increases, those who are unlikely to get a vaccine will form a higher proportion of those who have not yet been vaccinated.

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- 82% overall of those who have either not been vaccinated or have only had one dose are likely to get a second dose.

Māori

- Of those who have yet to be vaccinated:
    - 68% are likely to get a vaccine.
    - 19.5% say they are unlikely to get a vaccine.
    - 12.5% are unsure.
- Including those who have already been vaccinated, overall potential uptake is estimated to have increased to **75%** (71% in April and 64% in March 2021).

Pasifika

- Of those who have yet to be vaccinated:
    - 75.5% are likely to get a vaccine.
    - 15.5% say they are unlikely to get a vaccine.
    - 9% are unsure.
- Including those who have already been vaccinated, the estimated overall potential uptake is steady at **78%** (79% in April - the apparent decline is not statistically significant and the result should be regarded as "no change" - and 59% in March 2021).

Vaccination status

- The vaccine had been offered to 23% of the sample (an estimated 942,900 New Zealanders):
    - 6% had received two doses and 7% had received one dose. Unrounded total is 12.5% who had had at least one dose.
    - 5% were booked to be vaccinated.
    - 4% had been offered the vaccine, had not turned it down but had not yet booked. These people were more in vaccine group 2 and 3.
    - 2% said they had declined the vaccination; these people were evenly spread across all vaccine groups.

In making a decision to get vaccinated, New Zealanders will think about:

- Whether there will be unknown side effects (37%, "no change" from 38% in April)
- How the side effects may affect them (31%, down from 35% in April)
- Whether the vaccine may affect their health in other ways (28%, "no change" from April).
- What might happen if they have an adverse reaction to the vaccine (27%, "no change" from 26% in April).
- 37% think it is too soon to see whether there are any long-term effects from the vaccine ("no change" from April.

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Statements with greatest overall influence:

- Helping to protect all New Zealanders (56%, up from 51% in April).
- Helping reduce the risk of COVID-19 infection and the prospect of further lockdowns and economic harm (51%, "no change" from April).
- Helping to end the COVID-19 pandemic more quickly (51%, "no change" from 50% in April).
- Being vaccinated will protect me from the effects of COVID-19 (50%, "no change" from 48% in April).
- The benefits of taking the vaccine would outweigh any risks(50%, up from 45% in April).
- Helping protect the health of my family/whānau and those closest to me (50%, "no change" from 49% in April).
- Doing the best thing for my own health (49%, slightly up from 46% in April).
- Vaccination is free - for both doses (44%, "no change" from 45% in April).

However, those who say they will "Definitely not" get a COVID-19 vaccine or say it is "Unlikely" or "Most unlikely" - or who are unsure - will be more influenced by information about side-effects, knowing that the vaccine has been through extensive, properly conducted, clinical trials and, to some extent, helping them to travel internationally once again and "Approved by Medsafe in New Zealand". **Note that these are things that will also influence/reinforce the decision of 30%-40% of those who are likely to get a vaccine.**

Do those who are yet to have two doses have all the information they need to make a decision on getting a COVID-19 vaccine?

- 35% say "Definitely" - up from 27% in April. These people are primarily those who will "Definitely" get a COVID-19 vaccine or those who will "Definitely not".
- 32% say "Mostly" (31% in April).
- 17% say "Not Quite" ("no change" from 18% in April).
- 14% Say "I need to know more", down from 21% in April. Those who need to know more are primarily those who say they are "Likely", "Unlikely" or "Most Unlikely" to get a COVID-19 vaccine; i.e., not definite either way.
- 3% say they don't need to know more ("no change" from April). These are primarily those who are "most unlikely" to get a vaccine or will "Definitely not".

Those who don't want to get a vaccine or who are unsure say that:

- It is too soon to see whether there are any long-term effects from the vaccine (63%, up slightly from 60% in April).
- I would need to be assured about its safety (49%, "no change" from 51% in April).
- I'd rather wait and see if others who have taken it suffer any side effects (43%, "no change" from 42% in April).

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Those who say they will "Definitely not" get the vaccine have three other reasons:

- I don't see the need to take a COVID-19 vaccine (55%, up from 25% in April).
- I don't trust any vaccine (24%, down from 33% in April).
- I don't take any vaccine (23%, "no change" from 25% in April).

People who have already been vaccinated

- 92% said they had been provided with enough information prior to their vaccination.
- 99% are prepared to recommend getting vaccinated to people they know and 75% will "recommend it to everyone".
- 29% would like information from the Ministry of Health to help them inform others, mostly in email form that they can share with others.

What New Zealanders believe about COVID-19 vaccination

- 88% believe that the COVID -19 vaccine is free for both doses (up from 81% in April).
- After getting a COVID-19 vaccine:
    - 75% believe that they will still have to continue with protective behaviours (up from 68% in April).
    - 54% believe they can still pass on the virus (up from 44% in April).
- 77% believe that people in New Zealand can choose whether or not to get vaccinated (66% in April).
- 72% believe that people who have been vaccinated can still catch COVID-19 (57% in April).
- 69% now believe (61% in April) that COVID-19 vaccines will play a critical role in protecting New Zealanders' health and wellbeing – but, as in April, those who are unlikely to accept a vaccine are much less likely to believe that.
- 66% believe that "Over time, COVID-19 vaccines will allow a big step back to normality", but, as in April, this belief diminishes as likelihood to get a COVID-19 vaccine declines.
- 64% believe it is too soon to see if there are any long-term side-effects from the COVID-19 vaccine, and this is regardless of their intention to get a COVID-19 vaccine.

What New Zealanders believe they need to do after getting a COIVD-19 vaccination

- Regularly sanitise/ wash my hands (81%).
- Stay home from work if I feel unwell (77%).
- Use the COVID-19 QR code tracker app (67%).
- Continue to wear a mask on public transport (61%).
- Have a COVID-19 test if I feel unwell (61%).
- Turn on blue-tooth in the COVID-19 tracker app (55%).
- Socially distance from others when out (36% overall, 38% among those who have already been vaccinated).

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Effect of knowing someone who has had a COVID-19 vaccine

- 57% say they know someone who has had a COVID-19 vaccine.
- 34% of those who know someone who has been vaccinated say that knowing someone who has had a COVID-19 vaccine makes them more inclined to do so themselves. This effect is amplified where the vaccinated person they know is a household member or family member.
- Knowing someone who has been vaccinated has minimal effect on those who are unlikely to get a COVID-19 vaccine; its effect is primarily on those who are already likely to do so.

Vaccine rollout

- Overall, there is 67% approval of the risk-based approach to the vaccine roll-out. 7% disapprove.
- 30% think they will be able to get vaccinated as soon as the rollout for their vaccine group begins. This is more in vaccine groups 3 and 4 and more among those who intend to "Definitely" get a COIVD-19 vaccine.
- 53% acknowledge that the rollout timing will depend on the supply of the vaccine to New Zealand, and 52% - primarily those in vaccine groups 3 and 4 – understand that they may have to wait to get their vaccine.
- 25% think the Ministry of Health is deciding how the rollout will happen in their area, while 33% think it is their local DHB who will be deciding that.
- 44% believe the rollout may be different in different DHB areas and 30% believe the DHBs will undertake the rollout to best meet the needs of their communities.

Vaccine group 3: Awareness of how and when they will be offered a COVID-19 vaccine

Awareness of how and when they will be offered a COVID-19 vaccine is currently low among those in vaccine group 3 who have not been vaccinated:

- 27% said they knew how they would be offered a COVID-19 vaccine. 44% said they did not know and 29% were not sure.
- 24% said they knew when they would be offered a COVID-19 vaccine. 50% said they did not know and 26% were not sure.

People would prefer to access a COVID-19 vaccine from:

- Their doctor (general practitioner) (68%).
- Practice nurse (39%).
- A 'pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (35%).
- A hospital (25%).
- A pharmacy (24%).
- A District Health Nurse (21%).
- At their workplace (16%).

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People who have already been vaccinated

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- 99% are prepared to recommend getting vaccinated to people they know and 75% will "recommend it to everyone".
- 29% would like information from the Ministry of Health to help them inform others, mostly in email form that they can share with others.

Respondents say that the best ways to get COVID-19 vaccine information to them are:

- Email (51%).
- Website (48%).
- News media online (30%).
- TV News (30%).
- Printed information delivered in their letterbox (27%).
- Printed information available at GPs, pharmacies and other community locations (26%).
- Social Media (23%).

Where information on the COVID-19 vaccine has been seen or heard in the past 30 days:

- Television New Zealand (44%).
- Ministry of Health website (29%).
- Stuff (29%).
- Facebook (25%).
- Commercial television, including 3/Newshub (24%).
- Unite Against COVID-19 website (22%).
- Radio New Zealand (19%).
- Daily (print) newspapers (17%).
- NZ Herald online (17%).

People think that the COVID-19 vaccine information they are seeing from the government:

- Is easy for to read 53%; hard to read 3%: nett 50%.
- Is easily understood 41%; not easy to understand 5%: nett 36%

However, "easy to read" and "understanding" do not mean that the official information they are seeing is what they require. They also say that the information they are seeing from the government:

- Tells them what they need to know about the vaccine 30%; doesn't tell them what they need to know about the vaccine 14%: nett 16%. This changes as likelihood to get a COVID-19 vaccine declines and by the time it gets to "Likely" to get a vaccine, the balance has shifted: more respondents say that the information does not tell them what they need to know about the vaccine than say it does.

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- Tells them what they need to know to make a decision to take the vaccine 24%; doesn't tell them what they need to make a decision to take the vaccine 16%: nett 8%. **The balance becomes rapidly negative as likelihood to get a vaccine declines.**

  Among those who are "Most likely" to get a vaccine, 15% say the information is what they need to make a decision; 12% say it is not. Among those who are "likely" to take get a vaccine, 7% say the information is what they need to make a decision; 22% says it is not. The nett balance is illustrated below, and is most negative where respondents were unsure whether to get a COVID-19 vaccine or not:

Will you get the COVID-19 vaccine?	INFORMATION FROM THE GOVERNMENT		
	It tells me what I need to know to make a decision to take the vaccine	It doesn't tell me what I need to make a decision to take the vaccine	Nett balance (tells me what I need to know – doesn't tell me what I need to know)
Definitely	38%	7%	31%
Most likely	15%	12%	3%
Likely	7%	22%	-15%
Unlikely	6%	37%	-31%
Most unlikely	8%	33%	-25%
Definitely not	3%	43%	-40%
Not sure	1%	46%	-45%

The results imply that the current government information respondents are seeing is really only meeting the needs of the 48% of those who have not yet been vaccinated, but will "Definitely" get a COVID-19 vaccine, not those who are less likely to get a vaccine or who are unsure whether to do so.

In particular, the current government information respondents are seeing does not meet the needs of the 20% who "Most likely" will get a vaccine nor the needs of the 9% who are "Likely" to do so (taken together, the "Most likely" and "Likely" groups form 40% of those who are, overall, likely to get a COVID-19 vaccine).

What information do they want to see?

The key things respondents want to see information on are:

- Side effects and risks.
- Long-term effects of the vaccine.
- Assurance that the vaccine is safe and will work for them and any existing conditions.
- Facts on effectiveness/success rates.
- Whether people will need an annual booster.

Note that these information needs are common to ALL likelihood to get a vaccine groups, not just to those who say they are unlikely to get a vaccine.

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Official COVID-19 information and advertisement:

- 59% of respondents had seen an official COVID-19 information and vaccine advertisement on television in the past 30 days. Other media were:
  - Social media (20%).
  - Radio (19%).
  - News websites (15%).
  - Newspapers – daily (15%).
- 17% said they had not seen any official advertisement.

Where an official advertisement had been seen the greatest impact was to reinforce the decision made, or being made, to get a COVID-19 vaccine:

- Made me feel I made the right decision to get the vaccine: 31%. This was the primary reaction from those who had already been vaccinated.
- I have already decided to get a vaccine and the advertisements made me feel better about that:18%.

A nett 31% said it made no difference to their decision:

- Made no difference to the way I feel about getting had the vaccine: 30%.
- Made no difference to the decision I will make to get or not get a vaccine: 23%.

12% said the advertisement had made them increase their likelihood to get a vaccine.; there was an additional 8% who said that the advertisement they had seen had made them "slightly" more likely to get vaccinated. These were primarily those who had said they were likely to get vaccinated, but had made13% of those who said were currently "unlikely" to get a COVID-19 vaccine "slightly" more likely to get a vaccine:

Vaccination of 12–15-year-olds

- 55% of caregivers of children aged 12-15 years are likely to allow the children to be vaccinated (an estimated 873,500 adults).
- As in April, the key concerns for those who won't allow vaccination for their 12–15-year-old are child safety and long-term effects for their children from the vaccine.

Ratings of the management of the pandemic and the vaccine response

- Average trust in the Ministry of Health and the Government to manage the pandemic has held at a similar level to April 2021: average score is 3.7 out of 5 (3.8 in April).
- Average rating of the vaccination response has dropped significantly from 7.1 to 6.6 out of 10.

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ADDITIONAL SUMMARY INFORMATION

Uptake

The following are overall estimates of the COVID-19 vaccine intentions of those New Zealanders 16+ who have not yet been vaccinated:

- Total likely to get vaccinated: 2,754,000:

COVID-19 vaccine intention	%	Estimated number of people 16+
Definitely	48%	1,698,800
Most likely	20%	721,100
Likely	9%	334,100

- Total unlikely to get vaccinated: 529,500:

COVID-19 vaccine intention	%	Estimated number of people 16+
Definitely not	7%	252,600
Most unlikely	4%	126,200
Unlikely	4%	150,700

- Unsure: 8%; estimated number of people: 289,200.

Preferred information sources

The top 3 nominated sources of information were all online (email, website and online news media). However, traditional sources were also mentioned frequently, with the most mentions for TV news, printed mailers and printed information at GPs, pharmacies and other community locations.

Suggested improvements to the information from official sources

Respondents gave the following key areas for improvement for official communications:

- Provide logistical details for the rollout.
- Be honest with the information – good or bad.
- Offer more information/more advertising.
- Detailed content, particularly on rollout and the immediate effects of getting the vaccine.
- Information on side effects.
- Use broadcast media, online sites, social media and direct mail.

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REPORT

Respondents were asked if they had been offered an opportunity to get their COVID 19 vaccine. The responses were:

Have you already been offered an opportunity to get your COVID-19 vaccination?	
No	77%
Yes - I have already had two doses	6%
Yes - I have already had one dose	7%
Yes - I have not had the first dose, but my appointment is booked	5%
Yes - but I have not had the first dose and have not booked an appointment yet	4%
Yes, but I declined/will decline to have the vaccine	2%

N.B. Percentages do not sum to 100% owing to rounding

Respondents were asked if they lived with impairments or long-term health conditions and if they identified as disabled.

Results were similar to the April 2021 findings:

In confidence, do you live with impairments or long-term health conditions?	%	Estimated number
Yes	37%	1,579,700
No	63%	2,502,300

9% (an estimated 322,500 adults) identified as disabled.

In confidence, do you identify as disabled?	%	Estimated number
Yes	9%	322,500
No	91%	3,759,500

20% of those who said they were living with impairment also said they identified as disabled

1. Vaccine Uptake

Of those who have not yet been vaccinated:

- 77% said they were likely to get a vaccine (75% in April, 67% in March 2021). This is around 2,754,000 New Zealanders 16+.
- 15% said they were unlikely to get a COVID-19 vaccine. This is around 529,500 New Zealanders 16+.
- 8% (an estimated 289,200 New Zealanders 16+) are unsure whether they will get a vaccine or not.

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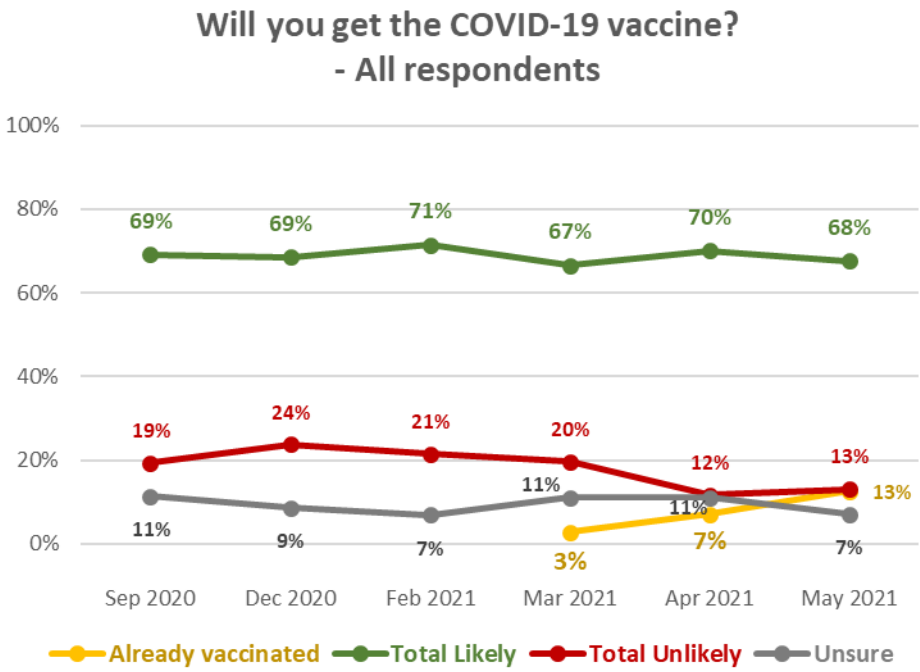
Including those who had already been vaccinated, overall potential uptake is estimated to have increased to **80%** (77% in April and 69% in March 2021).

Overall, it is projected that 3,263,300 out of the 4,082,500 New Zealanders aged 16+ are likely to get vaccinated or have already been vaccinated.

The percentage who are unlikely to get vaccinated is steady in comparison with the April 2021 result at13% of all respondents (an estimated 529,600). Those who are unsure has dropped to 7% overall (estimated 289,200).

Total population 16+ trends are presented below:



N.B. Percentages shown in this chart do not sum to 100% owing to rounding

The following are overall estimates of the COVID-19 vaccine intentions of those New Zealanders 16+ who have not yet been vaccinated:

COVID-19 vaccine intention	%	Estimated number of people 16+
Definitely	48%	1,698,800
Most likely	20%	721,100
Likely	9%	334,100
Unlikely	4%	150,700
Most unlikely	4%	126,200
Definitely not	7%	252,600
Unsure	8%	289,200

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Profiles: "Total Likely", "Total Unlikely", and "Unsure"

The table below shows demographic characteristics of those who were "likely" and "unlikely" to get a COVID-19 vaccine or were not sure, to aid communications targeting. These demographic characteristics are dynamic: **they are likely to change as more people become vaccinated**.

DEMOGRAPHY	Total Likely to get a vaccine	Total Unlikely to get a vaccine	Not sure whether to get a vaccine
Gender	Slightly more male (52%) than average	More female (57%) than average	Significantly more female (65%) than average
Age	Average age	Average age	9% younger than average age.
Household Income	3% higher than average	19% lower than average	10% lower than average
Personal Income	Average personal income	15% lower than average	17% lower than average
Employment status	Average	Average	Average
Highest qualification	More likely to be degree qualified.	Significantly more likely than average to have school-level qualifications only.	Less likely than average to have tertiary-level qualifications. Less likely to be in senior occupations.
Household Type	No particular household characteristics.	More likely than average to be in a single person household and less likely to be in a couple-only household. Slightly more likely than average to have children in their household.	No particular household characteristics.
Ethnic group	No particular ethnic group characteristics	Less likely than average to be Asian or Indian[2]. Slightly more likely than average to be "Other European".	More likely than average to be Asian or Māori. Slightly less likely than average to be NZ European/ Pākehā.
DHB	No particular differences from the overall sample.	Those in the 3 Auckland DHB areas who are unlikely to get a vaccine are significantly more likely to be in the Waitematā DHB area, particularly on the North Shore.	More likely than average to be in the Northland, and Waikato DHB areas. Significantly less likely to be in any of the 3 Auckland-based DHB areas. Less likely than average to be in the Bay of Plenty, Whanganui or Nelson/ Marlborough DHB areas.
Vaccine Group	No particular differences from the overall sample.	More likely to be in Vaccine Group 4	More likely to be in Vaccine Group 4

[2] "Indian" includes Indian, Pakistani, Bangladeshi, Sri Lankan

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The highest percentage unlikely to get vaccinated continues to be in Vaccine Group 4.

Will you get the COVID-19 vaccine? (including those who have had it)	ALL	VACCINE GROUP			
		Group 1 - Border and MIQ workers and the people they live with	Group 2 - High-risk frontline workers and people living in high-risk places	Group 3 - People who are at risk of getting very sick from COVID-19	Group 4 - Everyone in New Zealand aged 16 and over
Definitely	42%	15%	18%	54%	41%
Most likely	18%	0%	12%	14%	22%
Likely	8%	12%	4%	5%	10%
Unlikely	4%	0%	4%	5%	3%
Most unlikely	3%	1%	0%	2%	4%
Definitely not	6%	0%	4%	4%	8%
I'm not sure	7%	2%	6%	5%	9%
Already vaccinated	13%	71%	52%	11%	3%
TOTAL LIKELY plus ALREADY VACCINATED	80%	98%	86%	84%	76%
TOTAL UNLIKELY	13%	1%	8%	11%	16%
N (unweighted)	1,234	42	140	361	691

Note that:

- Living with impairments or long-term health conditions or identifying as disabled do not make a major difference to potential vaccine uptake.
- In comparison with April 2021, those who identify as disabled are now no longer more unsure than average.

1.1 Unlikely to get a COVID-19 vaccine and difficult to persuade

In the March and April reports, we referred to a "core" of people who were "unlikely to be persuaded to get a vaccine". For the second consecutive survey, this "core" has contracted, leading to a change in the way we describe this group: rather than "unlikely to be persuaded to get a vaccine", we think it has more validity to refer to them as "difficult to persuade to get a vaccine".

An estimated 168,900 (32%) of the 529,500 who are unlikely to get a COVID-19 vaccine say they either "Definitely" have all the information they need or feel they don't need to know more. The comparable estimates in the past two surveys were 267,000 in April and 301,400 in March 2021.

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Add in those who "mostly" have all the information they feel they need and the estimate rises to 249,300 or 47% of those who are unlikely to get a vaccine (estimated at 320,000 in April and 368,900 in March 2021).

This "core" of those who will be difficult to persuade to get a COVID-19 vaccine has contracted further from 8.4% in April and 9.4% in March 2021 to an estimated 7.0% of the 16+ population who are yet to get a vaccine, equivalent to 6.1% of the total 16+ population.

The demographic characteristics of this "difficult to persuade" group are shown below, compared with the demographic characteristics of all who are unlikely to get a COVID-19 vaccine. They key differences are:

- They are more likely to be living alone.
- They are more likely to have lower household income.

DEMOGRAPHY	"Difficult to persuade" group	Total Unlikely to get a vaccine
Gender	Average gender mix	More female (57%) than average
Age	7% older than average age.	Average age
Household Income	31% lower than average	19% lower than average
Personal Income	13% lower than average	15% lower than average
Employment status	Slightly more likely than average to be employed, particularly self-employed.	Average
Highest qualification	Significantly more likely than average to have school-level qualifications only.	Significantly more likely than average to have school-level qualifications only.
Household Type	Significantly more likely than average to be in a single person household. Overall, less likely than average to have children in their household.	More likely than average to be in a single person household and less likely to be in a couple-only household. Slightly more likely than average to have children in their household.
Ethnic group	Less likely than average to be Asian or Indian. More likely than average to be "Other European".	Less likely than average to be Asian or Indian. Slightly more likely than average to be "Other European".
DHB	Marginally less likely to live in Auckland and marginally more likely to live in the North Island DHB areas south of Waikato, Lakes and Bay of Plenty. Those in this group who live in the 3 Auckland DHB areas are significantly more likely to be in the Waitematā DHB area, particularly living on the North Shore.	Although there are no particular differences from the overall average, those in the 3 Auckland DHB areas who are unlikely to get a vaccine are significantly more likely to be in the Waitematā DHB area, particularly on the North Shore.
Vaccine Group	More likely to be in Vaccine Group 4	More likely to be in Vaccine Group 4

To reiterate the comment in the April 2021 report: as the percentage of those who are unlikely to get a COVID-19 vaccine contracts, so the profiles for those who are unlikely to get a vaccine will become more reflective of the core who are difficult to persuade to get a vaccine.

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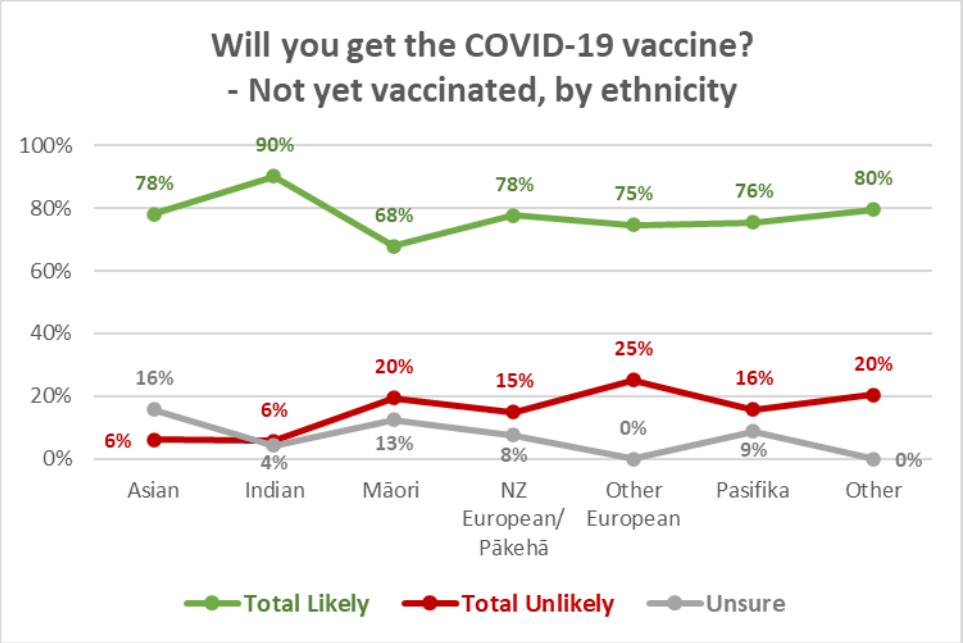
1.2 Uptake by ethnicity

For those who not yet been vaccinated, all ethnic groups have similar levels of vaccination intention except for Māori, who are above average for both "unlikely" and "unsure", and respondents of Indian[3] ethnicity, who are the most likely to get vaccinated.



N.B. Percentages do not sum to 100% owing to rounding

1.1.1 Trend: Māori

35% of Māori respondents said they had been offered a COVID-19 vaccine:

- 21% had had at least one dose
- 12% had been offered a COVID-19 vaccine and have either booked, or not rejected it
- 2% had been offered a vaccine, but had declined or would decline to get vaccinated.

Overall vaccine intention by Māori respondents who not yet been vaccinated, **and the percentage that represents among all Māori**, is shown in the following table:

VACCINE INTENTION	Māori Not yet vaccinated	All Māori
Already vaccinated		21%
Likely to get a COVID-19 vaccine	68%	54%
Unlikely to get a COVID-19 vaccine	20%	16%
Unsure	13%	10%
TOTAL POTENTIAL UPTAKE		**75%**

N.B. Percentages do not sum to 100% owing to rounding

[3] "Indian" includes Indian, Pakistani, Bangladeshi, Sri Lankan

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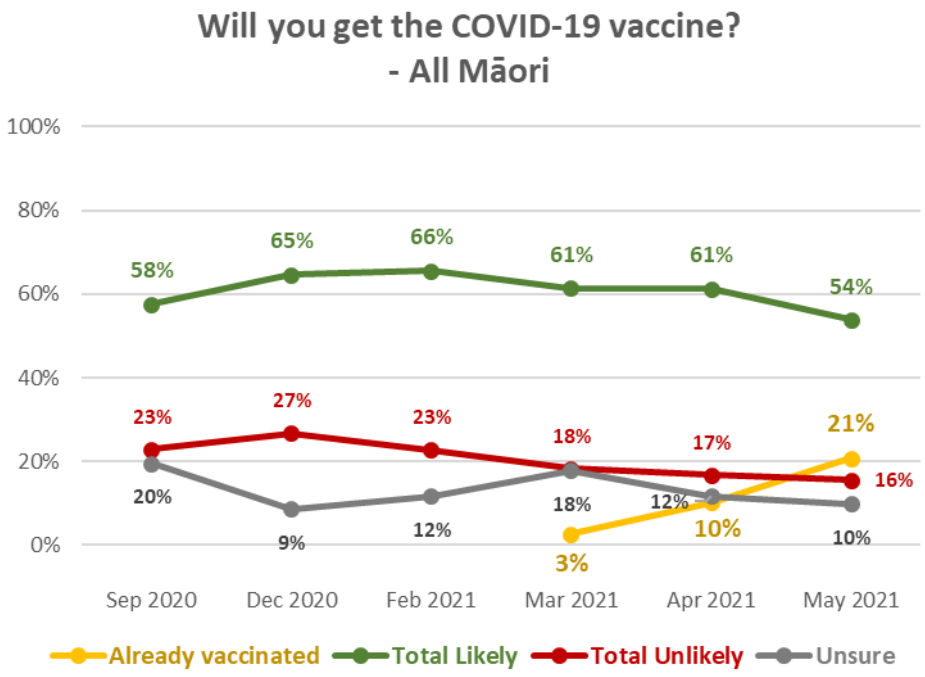
The following chart shows the trend for all Māori since September 2020.



N.B. Percentages may not sum to 100% owing to rounding

1.1.2 Trend: Pasifika

15% of Pasifika respondents said they had been offered a COVID-19 vaccine:

- 8% had had at least one dose
- 6% had been offered a COVID-19 vaccine and have either booked, or not rejected it
- 1% had been offered a vaccine, but had declined or would decline to get vaccinated.

Overall vaccine intention by Pasifika respondents who not yet been vaccinated, **and the percentage that represents among all Pasifika people**, is shown in the following table:

VACCINE INTENTION	Pasifika Not yet vaccinated	All Pasifika
Already vaccinated		8%
Likely to get a COVID-19 vaccine	76%	70%
Unlikely to get a COVID-19 vaccine	16%	15%
Unsure	9%	8%
TOTAL POTENTIAL UPTAKE		**78%**

N.B. Percentages do not sum to 100% owing to rounding

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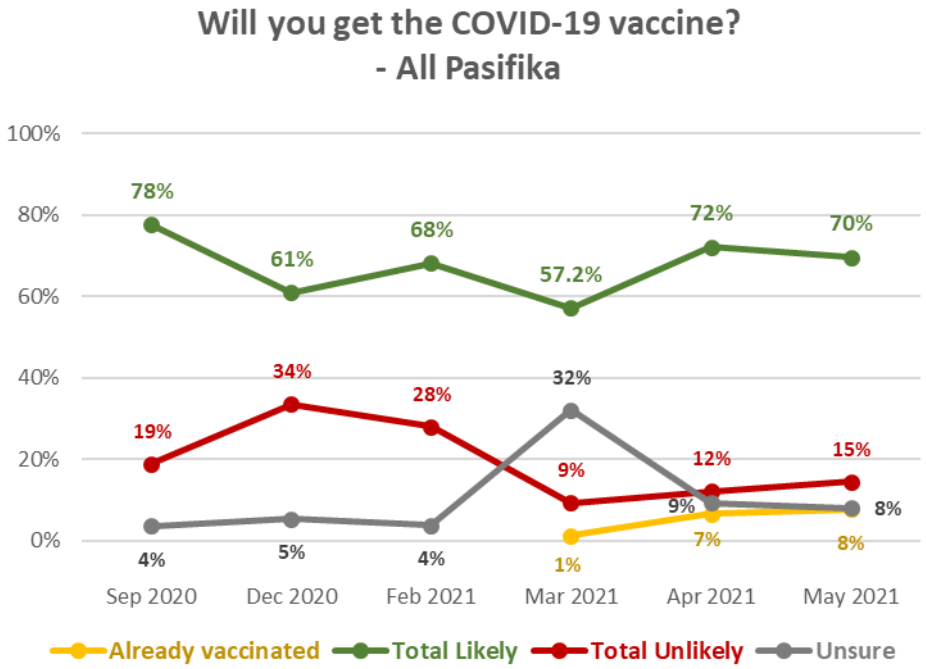
The following chart shows the trend for all Pasifika respondents since September 2020. The apparent decline in potential uptake from 79% in April 2021 to 78% in May is not statistically significant and should be regarded as "no change".



1.2 Uptake by people with impairment or who identify as disabled

In comparison with April, those who identified as disabled are now more likely to reject getting vaccinated, but fewer are unsure. The reasons for this are shown in Section 6.

Will you get a COVID-19 vaccine? (including those who have already been vaccinated)	All respondents	Living with impairments or long-term health conditions	Identify as disabled
Definitely	42%	46%	42%
Most likely	18%	16%	19%
Likely	8%	7%	7%
Unlikely	4%	3%	2%
Most unlikely	3%	3%	1%
Definitely not	6%	7%	11%
I'm not sure	7%	8%	8%
Already vaccinated	13%	10%	12%

TOTAL LIKELY plus ALREADY VACCINATED	80%	79%	79%
TOTAL UNLIKELY	13%	13%	13%

N.B. Individual percentages may not sum to Total Likely or Total Unlikely owing to rounding

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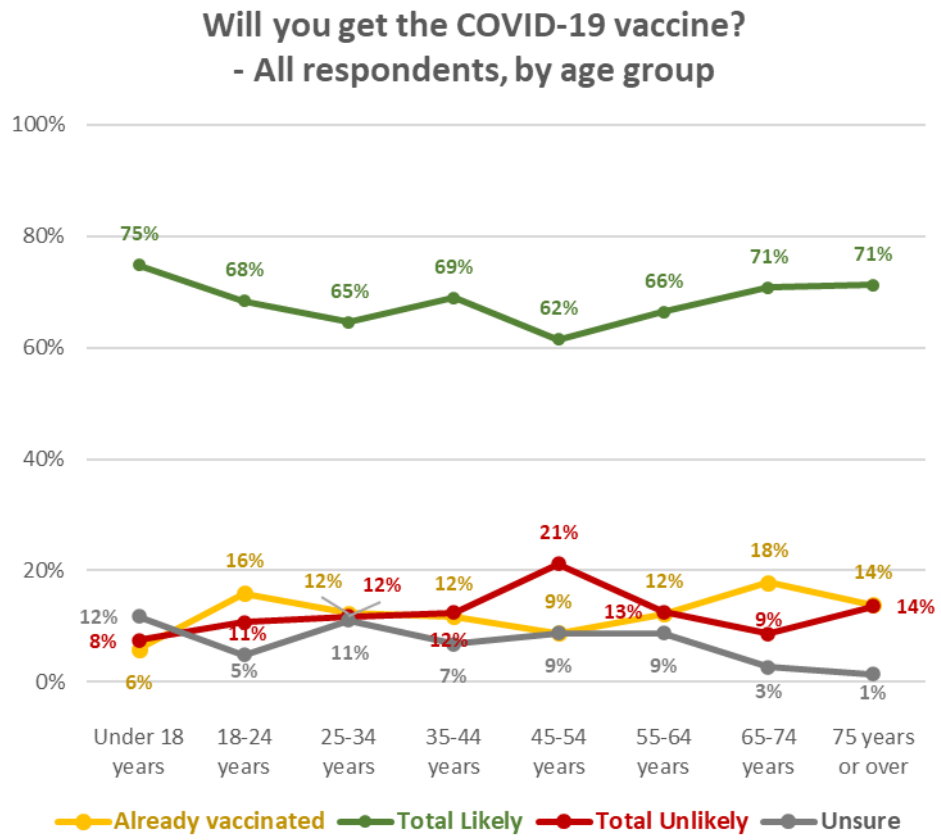
1.3 Uptake by age group

Those aged 45-54 years are the least likely to get a COVID-19 vaccine, but all other age groups are relatively even in vaccination intention.



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1.4 Uptake by DHB

With a nationally representative sample, the respondent numbers within DHB areas vary in accordance with the relative population of the area. Results for some DHB areas therefore need to be treated as indications.

Analysis by DHB is shown in the following pages, in 3 groups:

- The seven largest DHBs.
- 3 medium-sized DHB areas where subsample sizes are between 48 and 60, and are therefore relatively statistically reliable.
- The remaining 10 DHB areas where subsample sizes are less than 50, in line with their population proportion of the total sample. The smaller the subsample size, the less statistically reliable the results become and these should be treated as providing an indication only.

Seven largest DHBs:

- Waikato DHB continues to have a potential uptake below the national average.
- A below-average 5% of respondents in the Capital and Coast DHB area indicated that they had already been vaccinated. This was identified in the April report.
- As identified in April 2021, Waitematā, Waikato and Capital and Coast DHBs all have populations with above average "Unlikely to get a vaccine" results. They have been joined by Southern DHB, whose April above average level of people who were unsure seems to have changed to an average level.

Will you get a COVID-19 vaccine? (including those who have already had it)	ALL	DHBs						
		Waite-matā	Auckland	Counties Manukau	Waikato	Capital and Coast	Canter-bury	Southern
Definitely	42%	38%	52%	33%	46%	57%	36%	40%
Most likely	18%	18%	21%	21%	11%	19%	24%	23%
Likely	8%	12%	9%	10%	9%	4%	15%	3%
Unlikely	4%	6%	2%	2%	1%	1%	2%	3%
Most unlikely	3%	4%	1%	2%	2%	3%	2%	4%
Definitely not	6%	9%	3%	3%	6%	8%	4%	7%
I'm not sure	7%	1%	2%	11%	15%	5%	6%	8%
Already vaccinated	13%	12%	12%	18%	9%	5%	11%	14%
TOTAL LIKELY plus ALREADY VACCINATED	80%	79%	93%	82%	75%	84%	86%	79%
TOTAL UNLIKELY	13%	19%	5%	7%	9%	12%	8%	14%
N (unweighted)	1,234	154	121	106	104	137	129	75

N.B. Individual percentages may not sum to Total Likely or Total Unlikely owing to rounding

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3 DHBs with relatively statistically reliable results:

- Northland and Bay of Plenty's potential vaccine uptake figures have fallen below the national average.
- Northland has a higher-than-average level of their population "unsure".

Will you get a COVID-19 vaccine? (including those who have already had it)	ALL	DHBs		
		Northland	Bay of Plenty	MidCentral
Definitely	42%	31%	35%	50%
Most likely	18%	8%	17%	18%
Likely	8%	1%	1%	7%
Unlikely	4%	6%	15%	4%
Most unlikely	3%	0%	0%	14%
Definitely not	6%	7%	9%	0%
I'm not sure	7%	20%	2%	3%
Already vaccinated	13%	28%	22%	4%
TOTAL LIKELY plus ALREADY VACCINATED	80%	68%	74%	80%
TOTAL UNLIKELY	13%	12%	24%	18%
N (unweighted)	1,234	48	57	50

N.B. Individual percentages may not sum to Total Likely or Total Unlikely owing to rounding

DHBs with indicative results – these are presented in two groups of 5:

Indications are that:

- Lakes, Tairawhiti and, particularly Wairarapa, have lower likely uptake than average.
- Lakes, Tairawhiti, Whanganui, Hutt, South Canterbury and particularly Wairarapa, have much higher than average uncertainty about getting a COVID-19 vaccine.

Will you get a COVID-19 vaccine? (including those who have already had it)	ALL	DHBs				
		Lakes	Tairawhiti	Taranaki	Hawke's Bay	Whanganui
Definitely	42%	55%	44%	42%	33%	62%
Most likely	18%	5%	15%	14%	12%	6%
Likely	8%	2%	0%	3%	18%	0%
Unlikely	4%	0%	15%	9%	8%	0%
Most unlikely	3%	0%	9%	5%	0%	5%
Definitely not	6%	0%	0%	14%	8%	4%
I'm not sure	7%	22%	9%	12%	12%	0%
Already vaccinated	13%	16%	9%	2%	10%	23%
TOTAL LIKELY plus ALREADY VACCINATED	80%	79%	68%	61%	72%	91%
TOTAL UNLIKELY	13%	0%	24%	27%	16%	9%
N (unweighted)	1,234	15	15	37	34	17

N.B. Individual percentages may not sum to Total Likely or Total Unlikely owing to rounding

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Will you get a COVID-19 vaccine? (including those who have already had it)	ALL	DHBs				
		Hutt	Wairarapa	Nelson/ Marl-borough	West Coast	South Canterbury
Definitely	42%	57%	65%	29%	20%	27%
Most likely	18%	13%	8%	15%	29%	32%
Likely	8%	8%	9%	8%	0%	0%
Unlikely	4%	3%	0%	5%	1%	0%
Most unlikely	3%	6%	5%	4%	0%	0%
Definitely not	6%	0%	0%	14%	17%	12%
I'm not sure	7%	7%	8%	0%	5%	25%
Already vaccinated	13%	6%	6%	24%	28%	5%
TOTAL LIKELY plus ALREADY VACCINATED	80%	84%	88%	77%	77%	63%
TOTAL UNLIKELY	13%	9%	5%	23%	18%	12%
N (unweighted)	1,234	48	18	40	16	13

N.B. Individual percentages may not sum to Total Likely or Total Unlikely owing to rounding

2. Second dose uptake

Excluding those who had said they would "Definitely not" get a COVID-19 vaccine, respondents who had indicated that they had not had any doses of the vaccine, or had only had one dose, were asked how likely they were to have a second dose. As commented in April and, in general, if people are likely to get a vaccine, they will be likely to get a second dose and vice versa. This is illustrated by the following table.

Results were similar to April. 98% of those who had one dose were likely to get a second (91% "Definitely").

Likelihood to get second dose	LIKELIHOOD TO GET FIRST DOSE						
	Definitely	Most Likely	Likely	Unlikely	Most Unlikely	Unsure	Already had one dose
Total Likely	100%	96%	77%	1%	2%	9%	98%
Total Unlikely	0%	0%	4%	84%	79%	0%	2%
It depends if I have a reaction to the first dose	0%	3%	12%	3%	6%	28%	0%
Not sure	0%	1%	8%	12%	13%	63%	0%

The two respondents who had already had one dose of the vaccine but said they were unlikely to get another both indicated that getting the appointment had been too difficult.

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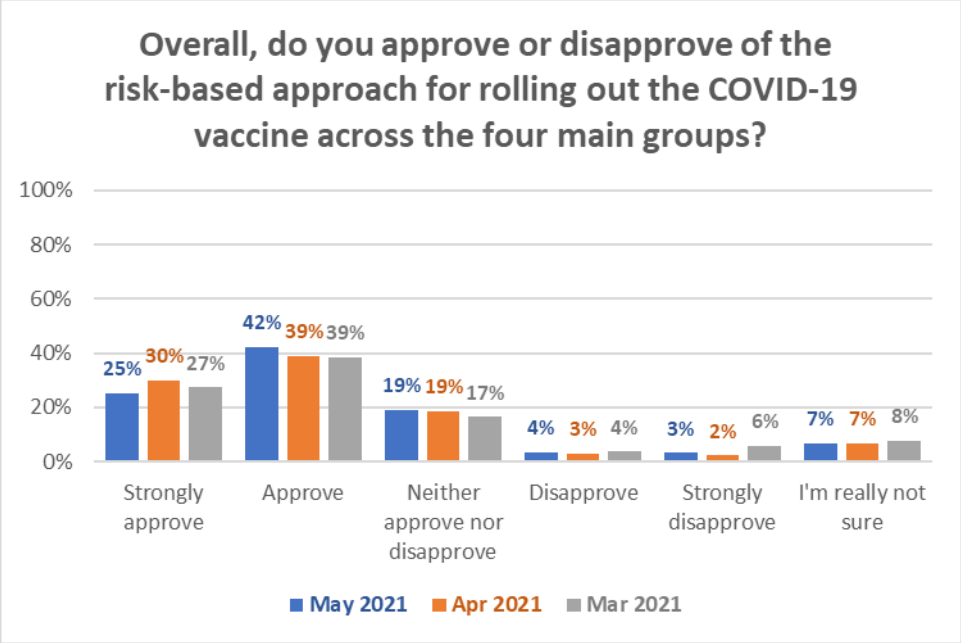
3. Vaccine rollout

3.1 Approval of risk-based approach

Overall, 67% of all respondents approved of the risk-based approach to vaccine roll-out (April 69%, March 66%).



Vaccine Group 4 has lower than average approval, but a majority of that group still approves of the risk-based approach.

Approve/disapprove of risk-based approach to rollout	VACCINE GROUP			
	Group 1	Group 2	Group3	Group 4
Total Approve	88%	78%	70%	63%
Neither approve nor disapprove	8%	16%	19%	21%
Total Disapprove	4%	5%	6%	8%
Not sure	0%	1%	6%	9%

N.B. Percentages may not sum to 100% owing to rounding

As in April, approval declines as likelihood to get a vaccine decreases.

Approve/disapprove of risk-based approach to rollout	LIKELIHOOD TO GET A COVID-19 VACCINE							
	Definitely	Most Likely	Likely	Unlikely	Most Unlikely	Definitely not	Unsure	Already vaccin-ated
Total Approve	84%	73%	58%	42%	31%	6%	26%	82%
Neither approve nor disapprove	9%	20%	33%	36%	27%	30%	48%	13%
Total Disapprove	3%	1%	7%	11%	14%	43%	5%	5%
Not sure	4%	5%	1%	11%	29%	22%	21%	0%

N.B. Percentages may not sum to 100% owing to rounding

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Note how Māori are less likely to approve, but their disapproval is at an average level.

"Other European" respondents have an above average level of disapproval and there is an indication that respondents of "Other" ethnicities may also have an above average level of disapproval.

Approve/disapprove of risk-based approach to rollout	ETHNIC GROUP						
	Asian	Indian	Māori	NZ European/ Pākehā	Other European	Pasifika	Other
Total Approve	68%	72%	61%	69%	68%	58%	42%
Neither approve nor disapprove	21%	17%	25%	18%	14%	20%	42%
Total Disapprove	3%	5%	8%	6%	13%	9%	16%
Not sure	8%	6%	6%	7%	5%	13%	0%

By DHB, approval is below average in Northland, Waitematā, Counties-Manukau and Bay of Plenty, and there are indications that approval is also below average in Tairawhiti, Taranaki, Hawke's Bay, Wairarapa and South Canterbury.

3.2 Beliefs about the vaccine rollout

Respondents were shown a list of statements about the vaccine rollout and asked which of them they believed, if any.

The results are shown in the following chart. Note that 30% expect that they will be able to get a vaccine as soon as the rollout for their vaccine group starts.

Statement	% Believe	Comments
Vaccination timing and booking		
I will be able to get vaccinated as soon as the rollout for my vaccine group begins	30%	Primarily those who are likely to get a vaccine, particularly those who will "Definitely" get one. Highest level of belief among vaccine groups 1,2 and 3, Asian, Indian and "Other European" respondent; lowest among NZ European/Pākehā respondents.
The vaccine rollout timing will depend on the supply of the vaccine to New Zealand	53%	Primarily those who are likely to get a vaccine, particularly those who will "Definitely" get one, and people in vaccine group3. Lowest among Māori and Indian respondents.
I may have to wait to get my vaccine	52%	Primarily those who are likely to get a vaccine, particularly those who will "Definitely" get one. Highest in vaccine group 4; lowest among Māori and Pasifika respondents.
I won't have to book to get a vaccine	8%	Highest among Māori and Asian respondents, vaccine group 3.

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Statement	% Believe	Comments
Decisions about the rollout		
The Ministry of Health is deciding how the rollout will happen in my area	25%	Most prevalent among Asian, Indian and "Other European" respondents, respondents living in the Waitematā and Canterbury DHB areas.
My local DHB will be deciding how the rollout will happen in my area	33%	Indications are that this is most prevalent among people living in the Northland, Tairawhiti, Hutt, Capital and Coast, and Wairarapa DHB areas. It is least prevalent in the Counties-Manukau and Waitematā DHB area. Those who will "Definitively' get a vaccine are the most likely to believe this.
The rollout programme may be different in different DHB areas	44%	Most believed by respondents in vaccine group 2 and 3. It is least believed by Asian, Indian, Māori and Pasifika respondents
The vaccine rollout is being undertaken by individual DHBs to best meet the needs of their communities	30%	Most believed by respondents in vaccine group 2 and 3. It is least believed by Asian, and Indian respondents

8% overall said they believed none of these statements. These were primarily those who said they would "Definitely not" get a vaccine or those who were "Most unlikely" to do so.

4. Making the decision to get a COVID-19 vaccine

As in previous surveys, all respondents who had not yet been vaccinated were asked to think about how they would decide whether or not to take an approved COVID-19 vaccine. They were shown a list of potential thoughts and asked which occurred to them, if any.

Key thoughts that occurred to more than 20% of respondents were:

- Whether there will be unknown side effects (37%; 38% in the April 2021 survey).
- How the side effects may affect them (31%, down from 35% in April).
- Whether the vaccine may affect their health in other ways (28%; 26% in April).
- What might happen if they have an adverse reaction to the vaccine (27%, 28% in April).

37% think it is too soon to see whether there are any long-term effects from the vaccine (also 37% in April).

18% were concerned that the vaccine may not be effective (20% in April).

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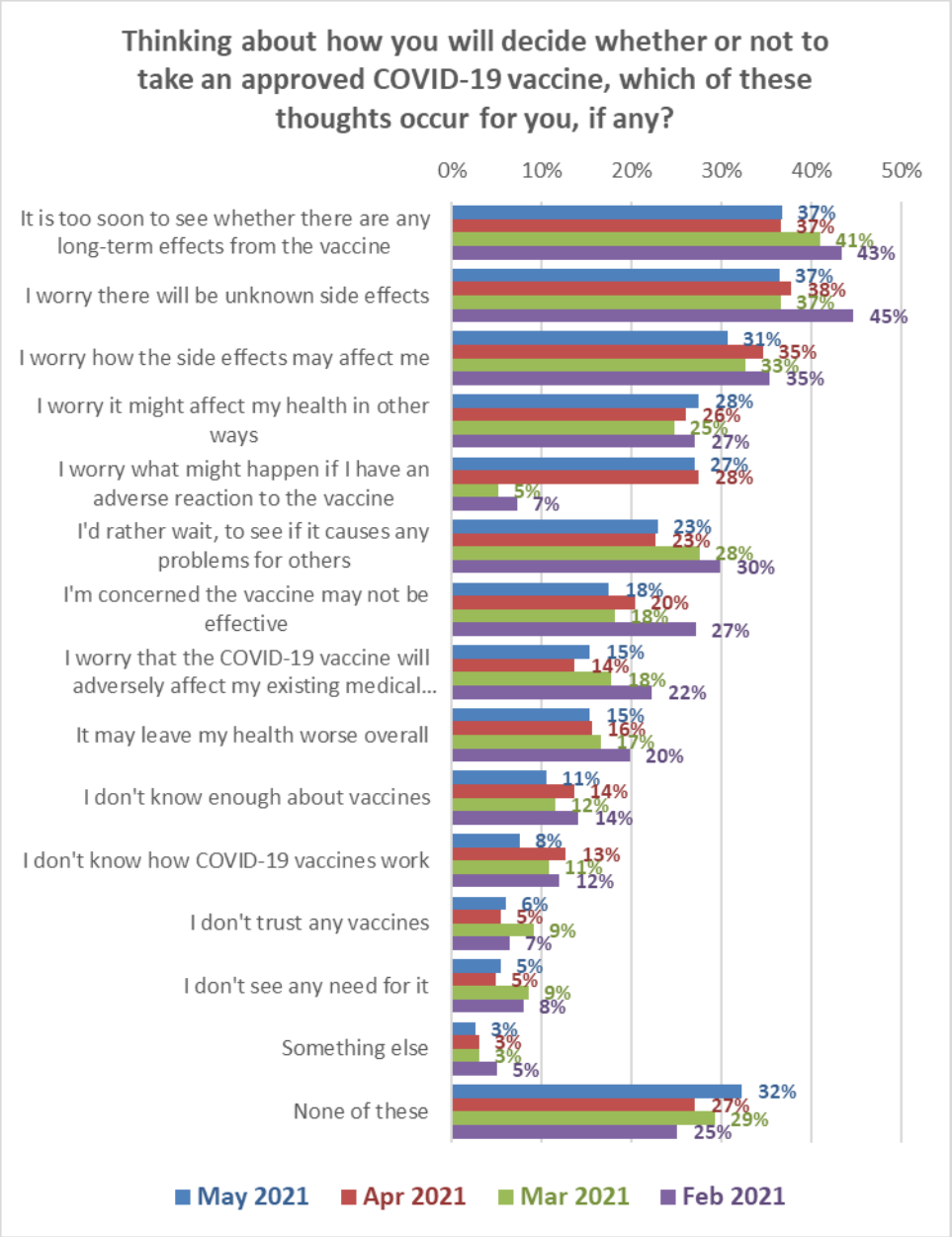

People who live with impairments or long-term health conditions, or who identify as disabled, were more concerned than average about whether the vaccine will adversely affect their existing medical conditions and symptoms and whether it will leave their health worse overall. This was also the finding in the April survey. Those who identify as disabled continued to be more worried than average that there will be unknown side effects and, particularly, how the side-effects may affect them.

As in the February, March and April 2021 surveys, concern rose as likelihood to get a vaccine decreased. 60% of those who would definitely not get vaccinated worried that a COVID-19 vaccine may leave their health worse overall (up from 46% in April).

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Thought	LIKELIHOOD TO GET VACCINE						
	Definitely	Most Likely	Likely	Unlikely	Most Unlikely	Definitely not	Unsure
Will there be unknown side effects?	17%	43%	50%	63%	56%	65%	69%
How the side effects may affect me	16%	31%	44%	54%	27%	65%	59%
What might happen if I have an adverse reaction	13%	30%	42%	40%	24%	61%	52%
Will the vaccine affect my health in other ways	13%	26%	43%	48%	30%	68%	53%
It is too soon to see whether there are any long-term effects from the vaccine	17%	49%	52%	47%	56%	69%	61%

- The 5 key overall concerns applied for all age groups except 65-74 and 75 or more, where:
    - 16% of 65-74s are concerned the vaccine may not be effective
    - 14% of those 75 years or over worry that the COVID-19 vaccine will adversely affect their existing medical conditions and symptoms.
- As identified in April, 16–17-year-olds continue to have a higher level of concern about the COVID-19 vaccine than 18–24-year-olds.
- Levels of concern generally increase from 18 years up to 54 years (64 years in April) and then decline.

Thought	AGE GROUP							
	Under 18 years	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75 years or over
Will there be unknown side effects?	49%	40%	37%	42%	43%	27%	30%	21%
How the side effects may affect me	35%	34%	25%	36%	40%	26%	23%	17%
Will the vaccine affect my health in other ways	47%	25%	25%	31%	32%	22%	24%	16%
What might happen if I have an adverse reaction	34%	28%	27%	23%	36%	24%	26%	14%
It is too soon to see whether there are any long-term effects from the vaccine	45%	35%	33%	38%	48%	33%	28%	29%

These 5 key concerns are generally also the key concerns for each ethnic group; however, for respondents of Asian and Māori ethnic group, “I'd rather wait, to see if it causes any problems for others” is top-5 ranked, coming ahead of “What might happen if I have an adverse reaction”. As noted in April, this is probably a means of coping with their other concerns.

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5. Main influences on vaccine decision

Respondents were asked what would most influence their decision to take a COV ID-19 vaccine.

Key influences are:

- Helping to protect all New Zealanders (56% overall, up from 51% in April). While this is the dominant result among those who will "Definitely" and "Most likely" get the vaccine (68% of those who are currently not vaccinated), its importance drops significantly (to 37%) among those who are "Likely" to get a vaccine and to even lower among those who are unlikely to get a COVID-19 vaccine: "Unlikely", 16%; "Most unlikely", 1%, "Definitely not", 0%. It is not in the top 5 for those who are unsure whether they will get a vaccine or not.
- Helping reduce the risk of COVID-19 infection and the prospect of further lockdowns and economic harm (51%; 51% in April).
- Helping to end the COVID-19 pandemic more quickly (50%; 50 in April).
- Helping protect the health of my family/whānau and those closest to me (50%: 49% in April).
- The benefits of taking the vaccine would outweigh any risks (50%; 45% in April and up two positions in the ranking order).
- Being vaccinated will protect me from the effects of COVID-19 (50%; 48% in April)
- Doing the best thing for my own health (46%).
- Vaccination is free - for both doses (45%).

All of these 5 key influencing factors decline in importance as likelihood to take a vaccine declines.

Note that **information about the side effects, vaccination being free and the vaccine having been through extensive trials, are the top influences for those who are unsure of whether to get the vaccine or not**.

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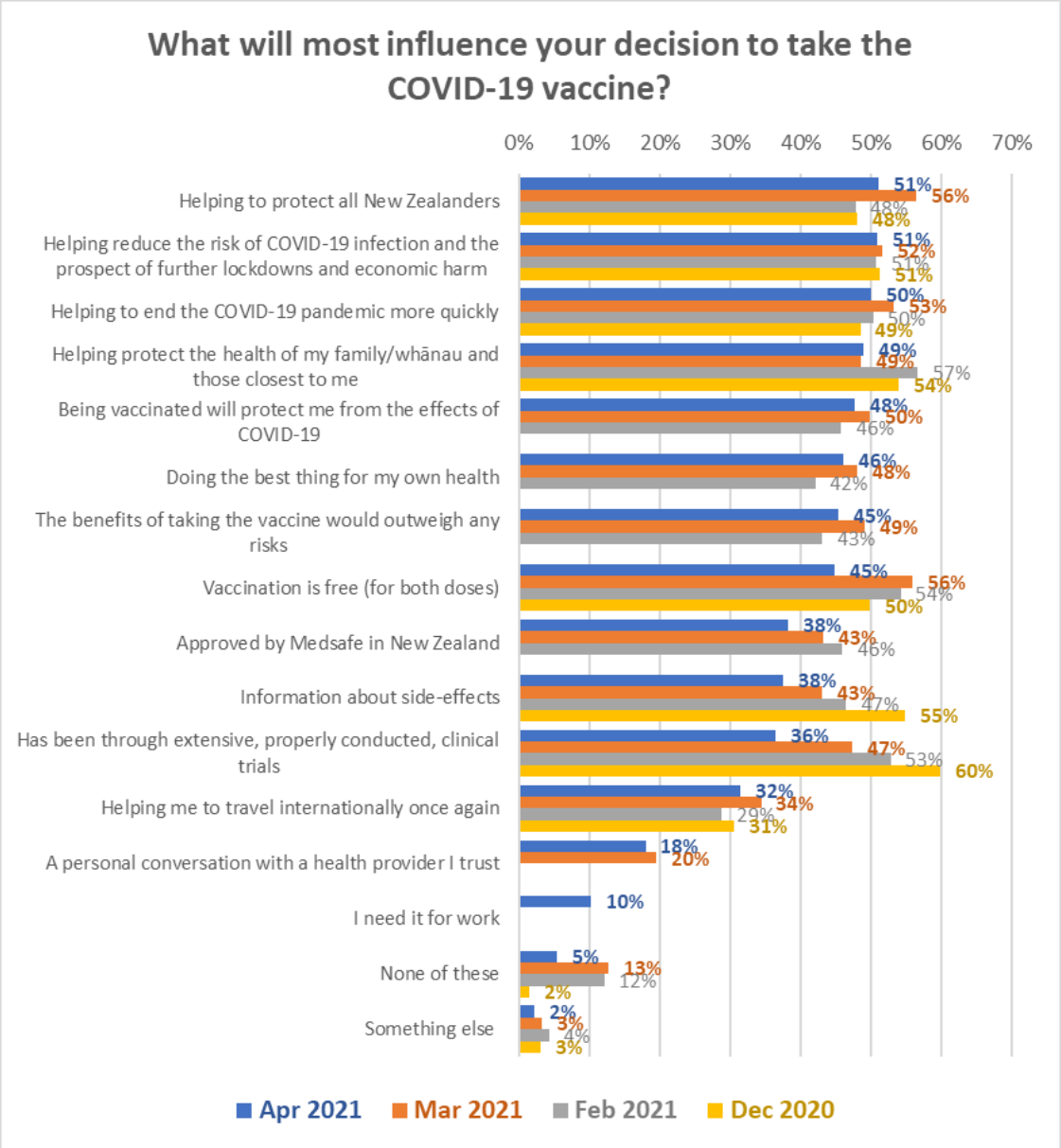

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The following table shows the influences by likelihood to get a COVID-19 vaccine, and demonstrates how the overall primary 5 influences are not the top influences for those who are "likely" or less likely to get a CXOVID-19 vaccine.

Motivation	LIKELIHOOD TO GET VACCINE						
	Definitely	Most Likely	Likely	Unlikely	Most Unlikely	Definitely not	Unsure
Helping to protect all New Zealanders	80%	59%	37%	16%	1%	0%	26%
Helping reduce the risk of COVID-19 infection and the prospect of further lockdowns and economic harm	73%	58%	29%	8%	0%	0%	21%
Helping to end the COVID-19 pandemic more quickly	71%	56%	31%	8%	3%	0%	27%
The benefits of taking the vaccine would outweigh any risks	71%	40%	39%	25%	8%	7%	29%
Being vaccinated will protect me from the effects of COVID-19	73%	51%	31%	8%	10%	1%	17%
Helping protect the health of my family/whānau and those closest to me	69%	55%	34%	6%	1%	1%	26%
Doing the best thing for my own health	68%	48%	27%	26%	9%	3%	31%
Vaccination is free (for both doses)	55%	54%	36%	14%	0%	1%	42%
Approved by Medsafe in New Zealand	48%	32%	30%	11%	10%	0%	26%
Has been through extensive, properly conducted, clinical trials	41%	24%	40%	42%	28%	6%	48%
Helping me to travel internationally once again	40%	30%	30%	25%	9%	3%	22%
Information about side-effects	21%	34%	42%	35%	12%	11%	50%
A personal conversation with a health provider I trust	10%	12%	16%	9%	2%	0%	25%
I need it for work	10%	6%	10%	1%	2%	0%	9%
None of these	0%	1%	4%	21%	47%	75%	5%

As commented in April, those who live with impairments or long-term health conditions and those who identify as disabled are more likely than average to respond to a personal conversation with a health provider they trust and to the knowledge that vaccination is free for both doses. They are less likely to be motivated by vaccination helping them to "travel internationally once again". In other respects, they are similar to the overall pattern.

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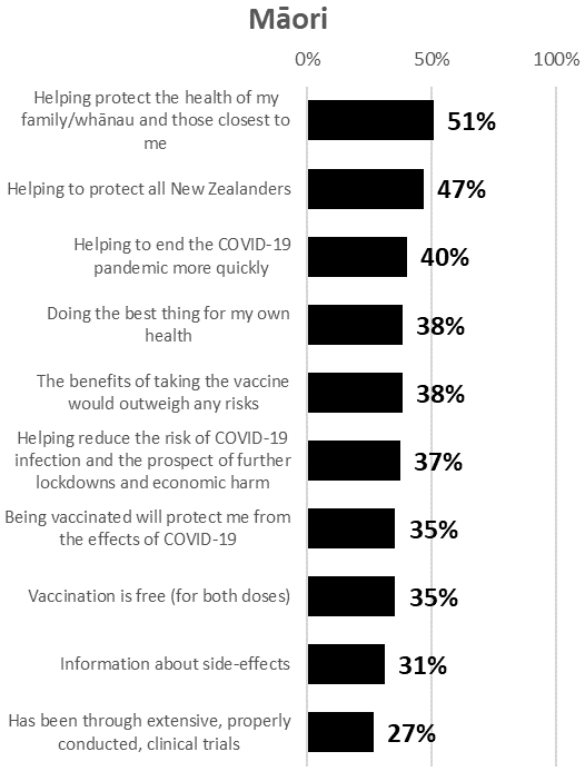
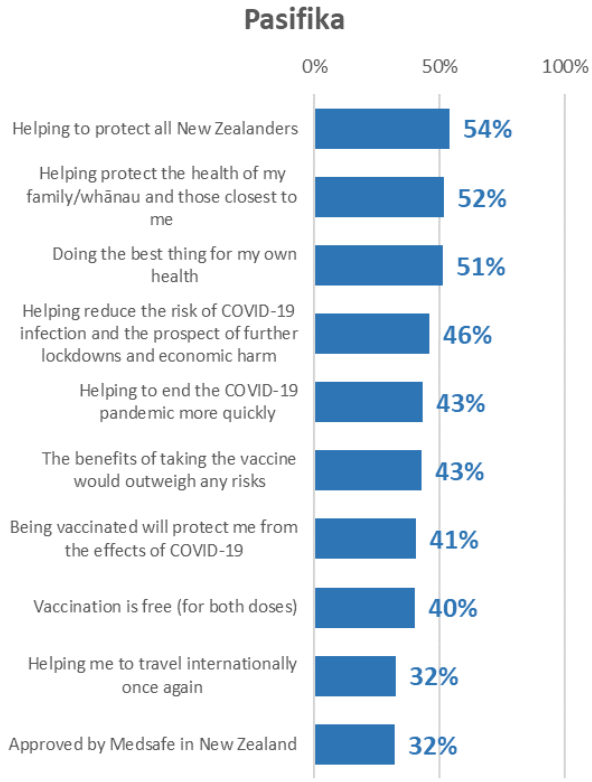
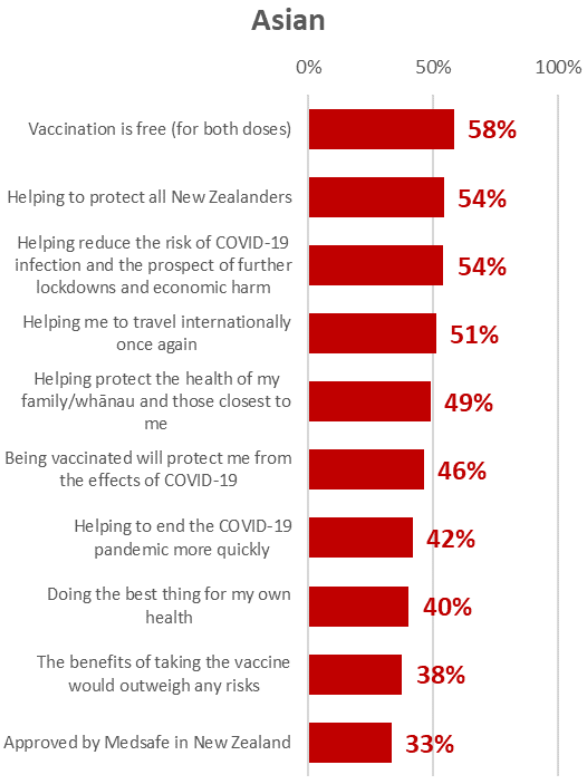
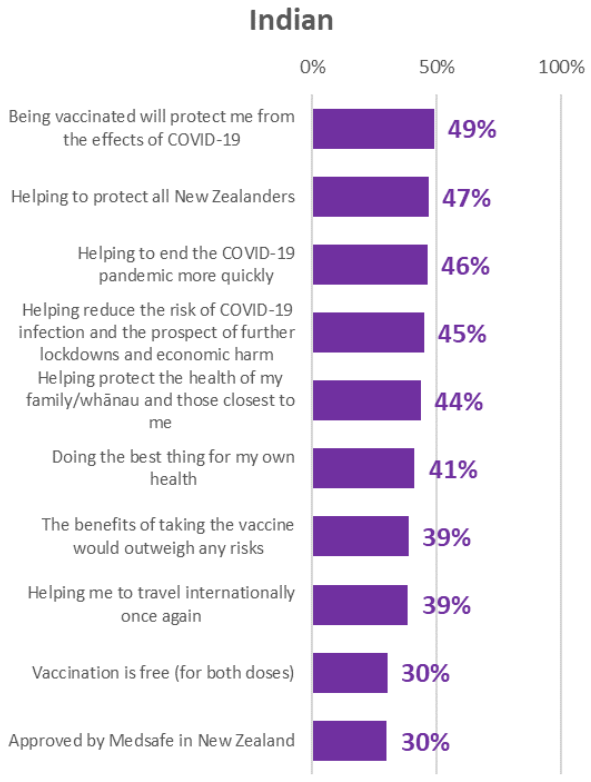
Different ethnic groups have the motivations in a different order, as shown in the following charts.









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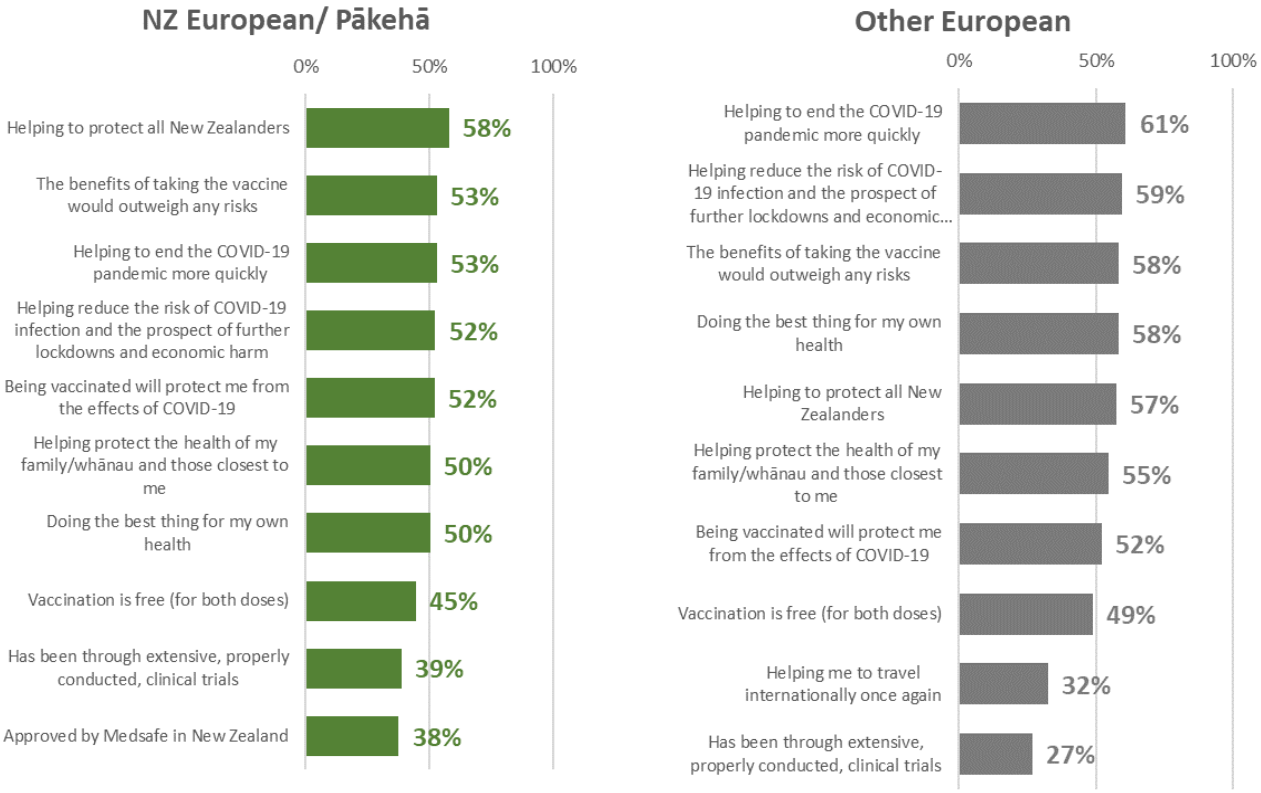

There were insufficient respondents in the "Other" ethnic group for statistical reliability.

6. Reasons for not taking a COVID-19 vaccine

Respondents who said they were unlikely to get a COVID-19 vaccine, or were unsure whether to do so, were asked why that was.

As in all past COVID-19 vaccine surveys, a need to be assured about safety is a primary reason together with concern about side effects and long-term effects.

Note that "I don't see the need to take a COVID-19 vaccine" has gone back to 4th position after moving to 7th in April.

As in April, those who are unsure whether to be vaccinated or not were the most likely to select "I'd like to be able to talk with my medical provider about it".

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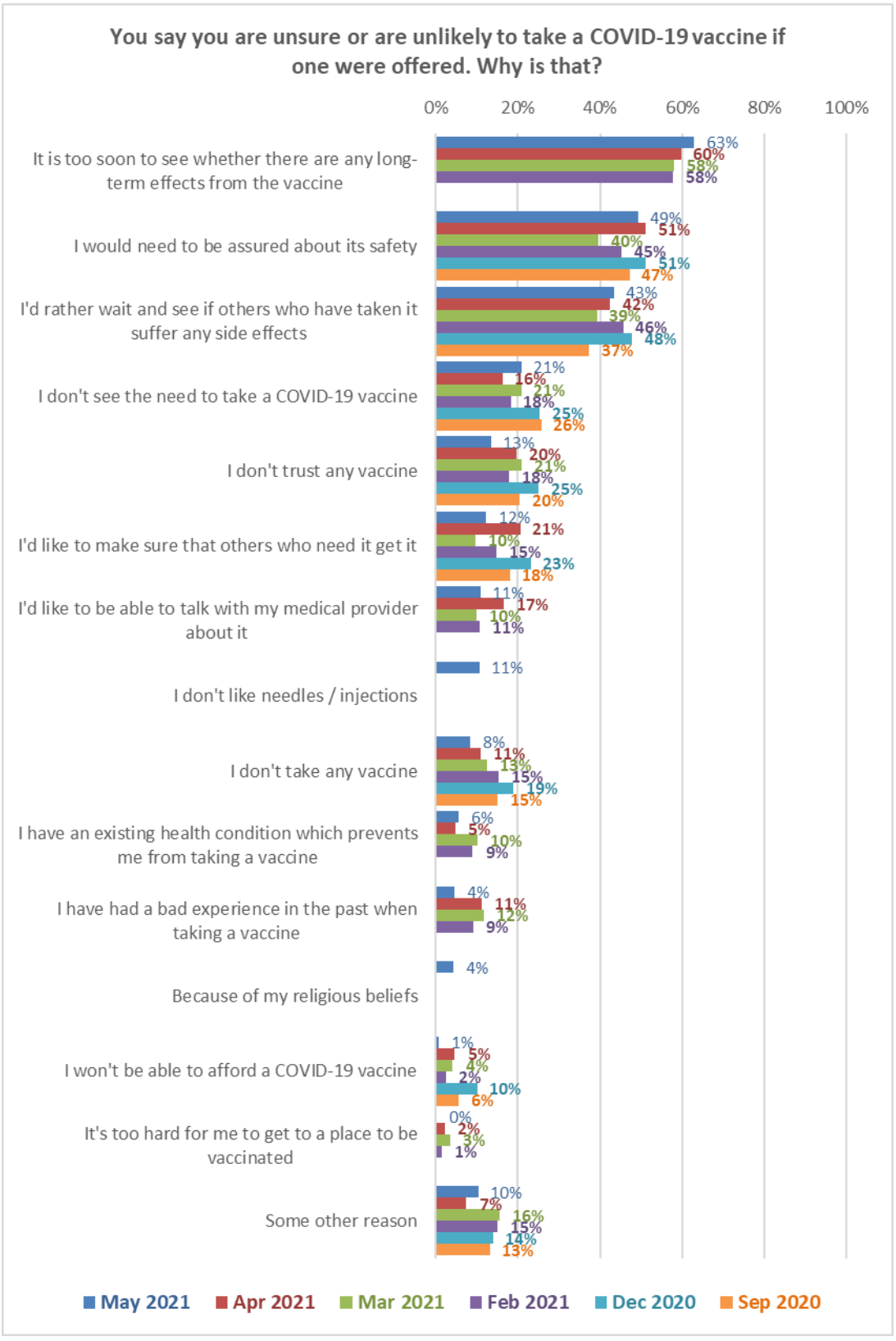

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The following table indicates reasons where those who live with impairments or long-term medical conditions, or who identify as disabled, differ markedly from the overall result.

Reasons for being unsure or unlikely to get a COVID-19 vaccine	Overall result	Living with impairment or long-term health conditions	Identify as disabled
I would need to be assured about its safety	49%	43%	44%
I don't see the need to take a COVID-19 vaccine	21%	19%	54%
I don't trust any vaccine	18%	22%	31%
I don't take any vaccine	8%	14%	27%
I have an existing health condition which prevents me from taking a vaccine	6%	12%	32%
Because of my religious beliefs	4%	5%	23%

Communication points

As noted in the April report:

- The reasons selected by those who are unsure whether they will get a COVID-19 vaccine or not, suggest that they are particularly cautious, need to be assured of the safety of the vaccine, or would like to be able to talk with their health provider about it first (results outlined in **red**).
- Those who are "unlikely" or "most unlikely" to get a COVID-19 vaccine also show caution (results outlined in **yellow**).
- Those who say they will definitely not get a COVID-19 vaccine are the most likely to have selected "I don't see the need to take a COVID-19 vaccine", "I don't trust any vaccine" and I don't take any vaccine". They also selected "It is too soon to see whether there are any long-term effects from the vaccine" at an above-average level (results outlined in **blue**).

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You say you are unsure or are unlikely to take a COVID-19 vaccine if one were offered. Why is that?	ALL	Will you get the COVID-19 vaccine?			
		Unlikely	Most unlikely	Definitely not	I'm not sure
It is too soon to see whether there are any long-term effects from the vaccine	63%	51%	61%	67%	67%
I would need to be assured about its safety	49%	47%	60%	23%	69%
I'd rather wait and see if others who have taken it suffer any side effects	43%	34%	41%	42%	51%
I don't see the need to take a COVID-19 vaccine	21%	3%	10%	55%	5%
I don't trust any vaccine	13%	18%	12%	24%	2%
I'd like to make sure that others who need it can get it before me	12%	12%	8%	6%	20%
I'd like to be able to talk with my health provider about it	11%	5%	0%	1%	27%
I don't like needles / injections	11%	11%	13%	8%	12%
I don't take any vaccine	8%	6%	1%	23%	1%
I have an existing health condition which prevents me from taking a vaccine	6%	4%	3%	10%	4%
I have had a bad experience in the past when taking a vaccine	4%	4%	3%	7%	3%
Because of my religious beliefs	4%	5%	8%	6%	1%
I won't be able to afford a COVID-19 vaccine	1%	0%	0%	0%	2%
It's too hard for me to get to a place to be vaccinated	0%	0%	0%	0%	0%
None of these	6%	5%	3%	5%	8%
Some other reason	10%	17%	5%	13%	7%
N (unweighted) - Unsure or unlikely to get a vaccine	216	42	34	62	78

"Some other reason" included:

"Because it's still in an experimental phase and the long-term impacts of a new MRNA vaccine on humans is known, how does it affect fertility cannot be studied in the current time frame is one example. There is also research showing that getting one of Covid vaccines can make you more likely to get a variant, and potentially get ADE, immune enhancement as a result."

"It's become too political."
"Don't trust this government."
"ZERO trust in government."

"I don't trust the information that is being provided about the safety of the vaccines and how the vaccines are chosen for distribution."

"I don't have faith the Auckland DHB will be able to deliver it."

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"I'd have it if it was offered and safe."

"I'd rather keep healthy and have robust natural immunity."
"I'd rather take Ivermectin."
"Ivermectin, govt lies, censorship."

"Too much contrary / conflicting information. LIES, propaganda."
"I have known others who have bad reactions to other vaccines."
"If Fauci and Gates want me to take it then I am certain it is not a good idea."

"I'm immune-suppressed and there is information that my body may not create the antibodies even after having 2 doses of vaccine."

"I'm pregnant, so I don't know enough info."
"Pregnant and scared for my baby."

"It is ineffective against new strains. Will I need endless vaccines to protect me against all the new strains?"

"My working and social life has already been affected dramatically since the outbreak, I think I am not the only one, a lot of people as well, also affecting mentally, physically and emotionally, being quite anxious about."

"Practicing to resist The Mark of the beast'

"Prions are known to have caused Creutzfeldt-Jakob disease; also, my wife's existing chronic health issues already have enough side effects to deal with without the covid vaccine side effects as well."

"So many people have already died or have developed serious side effects from these experimental jabs and they're still giving them to people - so that says to me that they DON'T care about our health. Why would I be a fool to take a depopulation kill jab because that is what it is!"

"I feel damned if I do and damned if I don't. I am afraid for my health and too afraid not to have it."

"The jab does not prevent infection so why bother with the con job?"

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7. Information about the COVID-19 vaccine

7.1 Already vaccinated

Respondents who were already vaccinated were asked if they had received enough information about their vaccination. As shown in the following table, 92% said they had.

Note how the percentage drops with the different vaccine groups (small base: indication only).

Did you receive enough information about your vaccination?	ALL	VACCINE GROUP			
		Group 1 - Border and MIQ workers and the people they live with	Group 2 - High-risk frontline workers and people living in high-risk places	Group 3 - People who are at risk of getting very sick from COVID-19	Group 4 - Everyone in New Zealand aged 16 and over
I received enough information	92%	100%	95%	91%	70%
I would have liked to have received more information	8%	0%	5%	9%	30%
N (unweighted) - already had vaccine	186	31	82	47	26

Those who said they would have liked to have received more information about their vaccination (8 respondents) were asked what they would have liked to have received:

Vaccine group 2:

"How long the side effect would last."
"Long-term outcomes."
"Difference between vaccines, why we are using this one in particular."

Vaccine group 3:

"What side effects there may have been."
"Better information regarding appointments."

Vaccine group 4:

"More info on when I will get the second one."
"A real plan, not the "run with it" one the government is doing."
"When I went for my first shot, I wasn't given the full information pamphlet until after I had received the vaccination. There were things on that sheet I would have preferred to know prior to getting my vaccine."

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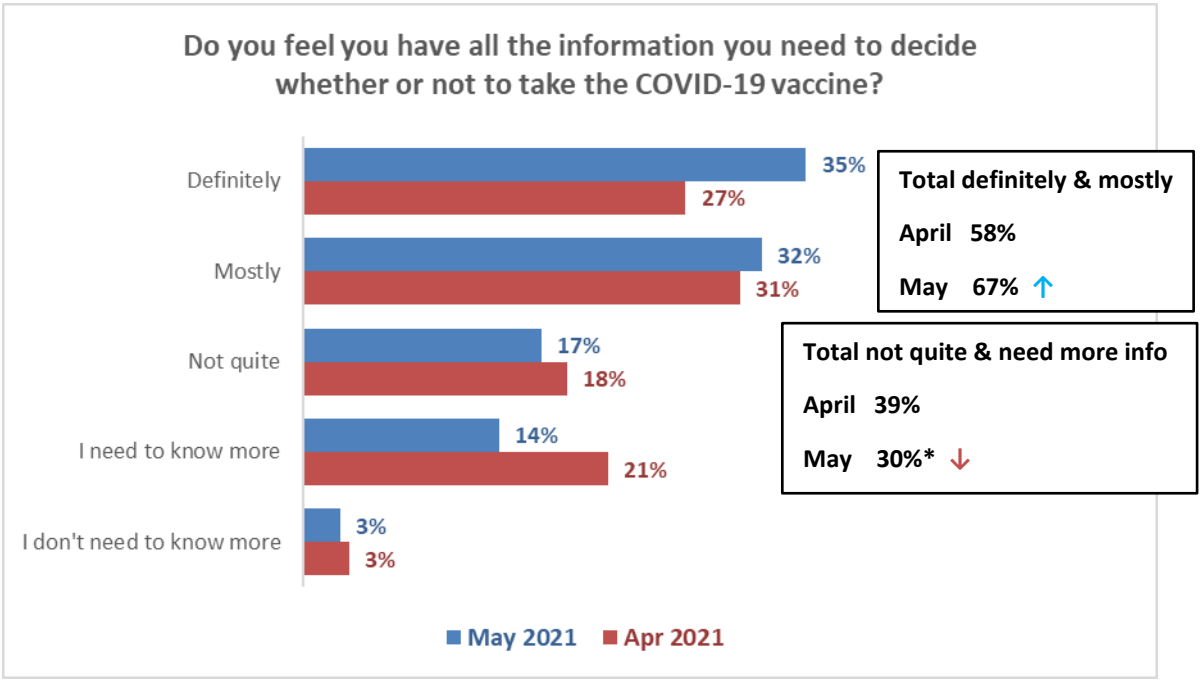
7.2 Do people have enough information to decide whether or not to take the COVID-19 vaccine?

Those who had not received a second dose of the COVID-19 vaccination were asked if they had all the information they needed to decide whether or not to take the COVID-19 vaccine. This question was asked in 4 survey waves – February, March, April and May 2021 - and results for the April and May waves are compared in the chart below.

The proportion who feel they definitely or mostly have enough information has increased significantly from April (58%) to May (67%) and there is a corresponding drop in those saying they don't quite have all the information they need or need to know more (from 39% to 30%)



Reduced base: n=1,137 (have not received the second dose of the vaccination).
**Rounding accounts for the asterisked result being less than sum of the two bars in the chart.*

The trend over the past 4 surveys in which this question was asked is shown in the following chart. Note the change in May 2021 after 3 consecutive surveys showing little change.

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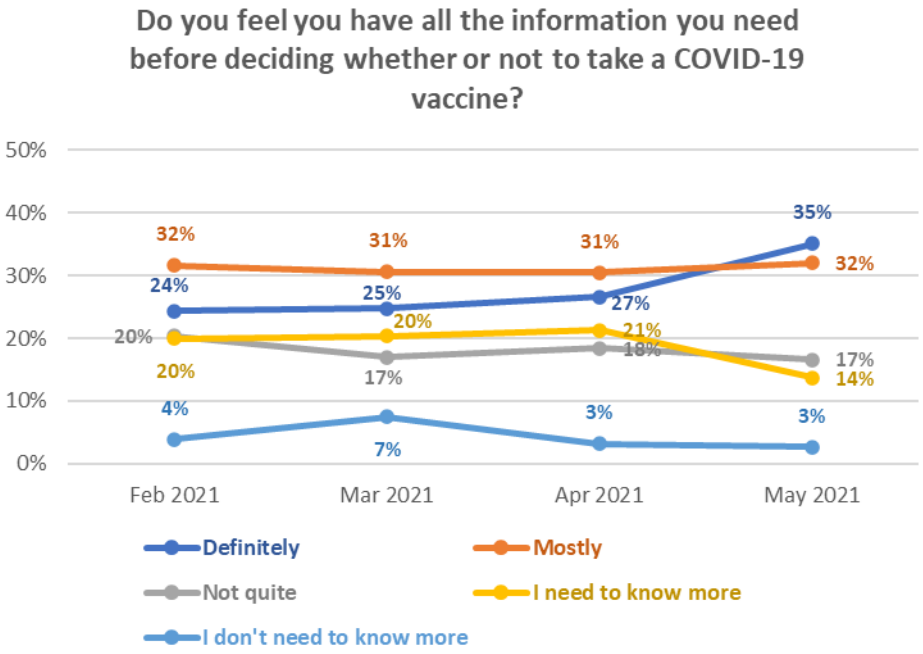

Those who need more information are more likely to be from the following groups:

Do not have quite enough & need more information	May 2021 Results
Overall result	**30%**
Labourer/agricultural or domestic worker	55% ↑
Age 25-34	50% ↑
From a two-parent family, with 3 or more children at home	48% ↑
No formal school qualification	47% ↑
Household incomes $70,001 to $100,000 per year	41% ↑
From a one parent family, with one or two children at home	40% ↑
Of Māori descent	40% ↑
Of Pasifika descent	39% ↑
Have NCEA Level 1 or School Certificate	39% ↑
Aged 45-54	38% ↑
Of Asian descent	38% ↑
Identify as disabled	37% ↑

Results are only shown for groups of at least n=50 respondents

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7.3 What else do people need to know to help them decide whether to get the COVID-19 vaccine?

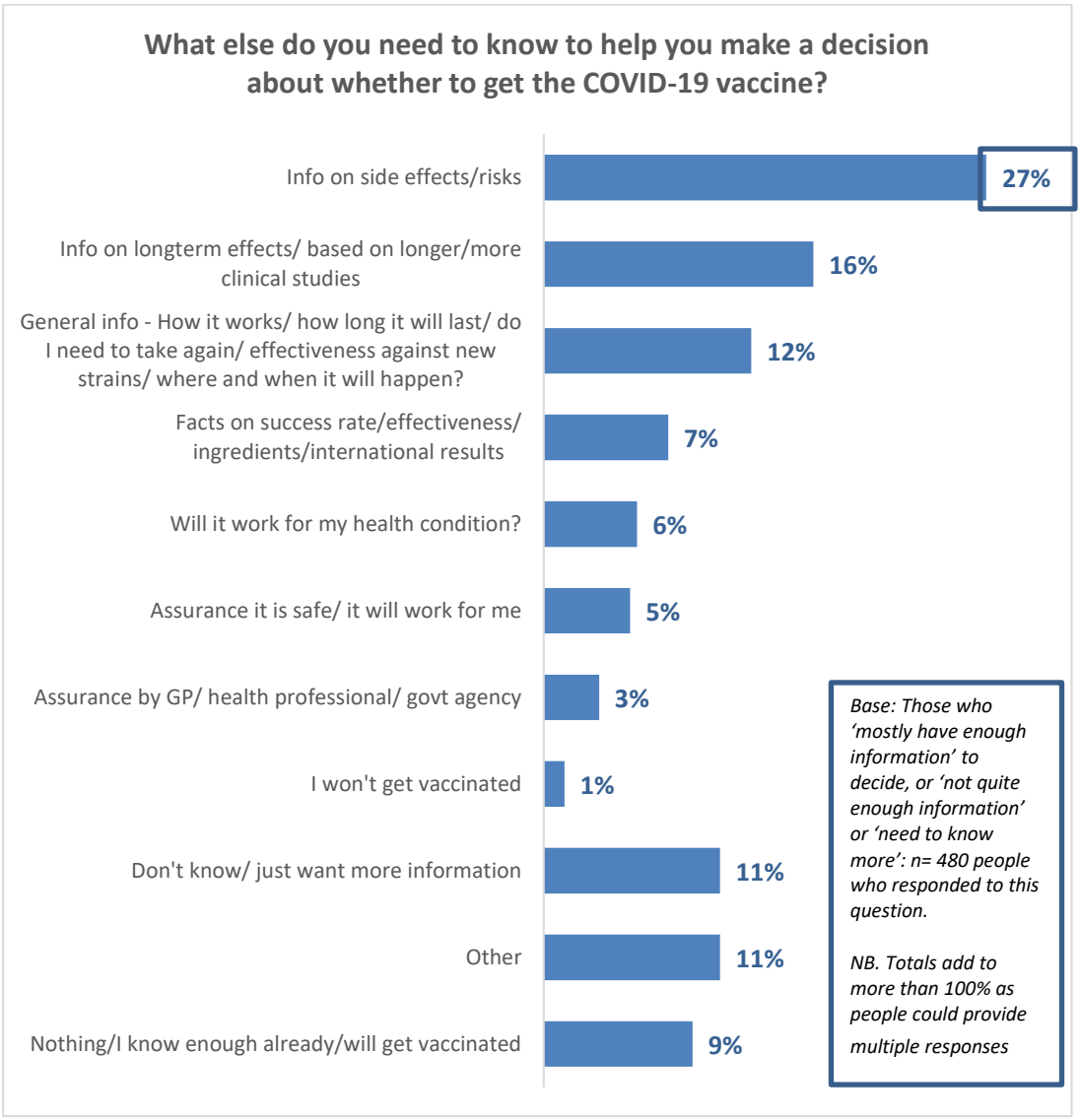
An open-ended question was included in the May 2021 survey, asking people what else they need to know to decide to get vaccinated. This question was asked of n=708 people who gave the following responses to the previous question:

- I mostly have enough information to decide
- Not quite enough information
- I need to know more.

480 people answered this question. Main themes from their comments are illustrated in the following chart.

The two main things people said they need to know are:

- Information on side effects and risks (27%).
- Information on the long term effects of the vaccine, based on longer and/or more clinical studies (16%).



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Verbatim comments illustrating each type of information need are included below…

Information on side effects/risks

"I am genuinely worried about side effects." (Female, Aged 65-74 years, Vaccine Group 3)

"I'm going to get it but not much information about what's happening for people that get a bad reaction to the vaccine. Feels like a cover up." (Gender diverse, Aged 45-54 years, Vaccine Group 3)

"More info about side effects, mortality rates." (Male, Aged 55-64 years, Vaccine Group 3)

"Side effects, efficacy, potential implications on taking." (Male, Aged 45-54 years, Vaccine Group 4)

"How it causes blood clots." (Female, Aged 45-54 years, Vaccine Group 3)

Information on long-term effects/ based on longer/more clinical studies

"More studies done on long term side-effects of the vaccine." (Male, Aged 25-34 years, Vaccine Group 4)

"Time - to see what effects and effectiveness the vaccine actually has in NZ (Female, Aged 45-54 years, Vaccine Group 3)

The result of 4 years of clinical trials, as per every other vaccine released." (Male, Aged 35-44 years, Vaccine Group 4)

"The long-term effects, if we will need to keep taking a top-up dose yearly." (Female, Aged 25-34 years, Vaccine Group 4)

"Waiting to see long term effects." (Female, Aged 45-54 years, Vaccine Group 4)

General information - how it works/ how long it will last/ do I need to take again/ effectiveness against new strains/ where and when it will happen?

"When and how it will happen?" (Male, Aged 45-54 years, Vaccine Group 4)

"Just more information, side effects, statistics to prove it's effective." (Male, Aged 35-44 years, Vaccine Group 4)

"Some people who have had both vaccine shots still got it. What is the prevalence of this?" (Female, Aged 55-64 years, Vaccine Group 3)

"What is in it?" (Female, Aged 18-24 years, Vaccine Group 4)

"What to watch for afterwards and do you need to be without a cold when you get the vaccine?" (Female, Aged 65-74 years, Vaccine Group 3)

"What vaccine I will be getting?" (Female, Aged 35-44 years, Vaccine Group 4)

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Facts on success rate/effectiveness/ingredients/international results

"Results of outcome from countries who went ahead on vaccination." (Female, Aged 55-64 years, Vaccine Group 3)

"More international stats and information about how it is going overseas. Honest info about any problems that have occurred and the types of adverse reactions, even if they might be off-putting." (Female, Aged 35-44 years, Vaccine Group 4)

"More statistics." (Male, Aged 25-34 years, Vaccine Group 4)

"Stats, real data of people that have taken the vaccine, got the virus and the effects." (Male, Aged 25-34 years, Vaccine Group 4)

Will it work for my health condition?

"About to start chemotherapy so will have to see how I tolerate that first." (Female, Aged 55-64 years, Vaccine Group 4)

"How it will affect my long-term cancer remission." (Male, Aged 65-74 years, Vaccine Group 3)

"If a person who had an auto immune attack in the past like GBS should be taking it." (Male, Aged 45-54 years, Vaccine Group 3)

"Impact on breast-feeding." (Female, Aged 35-44 years, Vaccine Group 4)

Assurance it is safe/ it will work for me

"Proof that it will not kill me. I know there have been people that have died from the side effects of the vaccine." (Female, Aged 45-54 years, Vaccine Group 4)

"Reassurance of its effectiveness as well as other peoples' experiences with the vaccine i.e., family and friends." (Female, Aged 25-34 years, Vaccine Group 4)

"That its ok for me." (Female, Aged 65-74 years, Vaccine Group 3)

"Does it work and is it really safe?" (Male, Aged 18-24 years, Vaccine Group 4)

Assurance by GP/ health professional/ government agency

"Just need to read the government information to check it out. I'm not stupid enough to read the conspiracy, I only read government websites. I haven't read that yet." (Male, Aged 25-34 years, Vaccine Group 3)

"More details on Medsafe approvals." (Male, Aged 45-54 years, Vaccine Group 4)

"Probably a confirmation from my GP." (Male, Aged 18-24 years, Vaccine Group 4)

"What my doctor thinks." (Male, Aged 65-74 years, Vaccine Group 3)

I would like to have a robust discussion with a health professional, not just handed a leaflet (Male, Aged 55-64 years, Vaccine Group 4)

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I won't get vaccinated

"I'm 27, I have no ailments or health conditions, I'm fit, healthy, eat well and supplement accordingly. If I was to ever catch COVID, there is a statistically high chance that I will survive COVID if I was to catch it. Statistically, I'm more likely to die of the flu than COVID, and I don't get a flu jab." (Male, Aged 25-34 years, Vaccine Group 4)

"I would not want one. However, if it's the only way I'm permitted to travel then I'd take it for that reason only. I believe in herd immunity not vaccines." (Male, Aged 45-54 years, Vaccine Group 4)

"Refuse." (Female, Aged 35-44 years, Vaccine Group 4)

"If I have multiple health issues and get COVID and die, my death will be recorded as COVID. If I get the injection and die, we have been told that in my age groups people die anyway and nothing to do with the vaccine. Think I will take my chances, wash hands regularly and stay out of crowded places and in close contact with others, I think that we have been safe because we don't live in 'compact housing' with shared air conditioning or travel on crowded public transport. I don't do any of the above so will take my chances." (Female, Aged 75 years or over, Vaccine Group 3)

Don't know/ just want more information

"Just a little more info." (Male, Aged 18-24 years, Vaccine Group 4)

"Not sure." (Female, Aged 16-17, Vaccine Group 4)

"Not sure - Dad said I have to have it." (Male, Aged 16-17, Vaccine Group 4)

"I know nothing about it." (Female, Aged 25-34 years, Vaccine Group 4)

Other

"I'm getting the second jab but don't think I've paid enough attention to all the information available." (Female, Aged 45-54 years, Vaccine Group 4, already had one dose)

"It is hard to see which or what to believe as to what is happening." (Male, Aged 75 years or over, Vaccine Group 3)

"It will depend on what type of vaccine is offered. Some are more effective or have less side effects than others." (Male, Aged 35-44 years, Vaccine Group 4)

"I've read and listened to everything I could about the vaccine, I would have appreciated knowing that there was a possibility I wouldn't be able to drive after I had received it." (Female, Aged 55-64 years, Vaccine Group 4)

"More information on the likes of TV." (Female, Aged 65-74 years, Vaccine Group 3)

"My husband is 70 but I am in Group 4. Am I able to get vaccinated when he does to help protect us both?" (Female, Aged 55-64 years, Vaccine Group 4)

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Nothing/I know enough already/will get vaccinated

"I am ready." (Male, Aged Under 18 years, Vaccine Group 4)

"I feel that we have all been well informed about the vaccine and I have made the decision to have the vaccine as I believe it is the best way to safeguard all New Zealanders and to reduce the numbers of those affected in future by COVID-19." (Female, Aged 75 years or over, Vaccine Group 3)

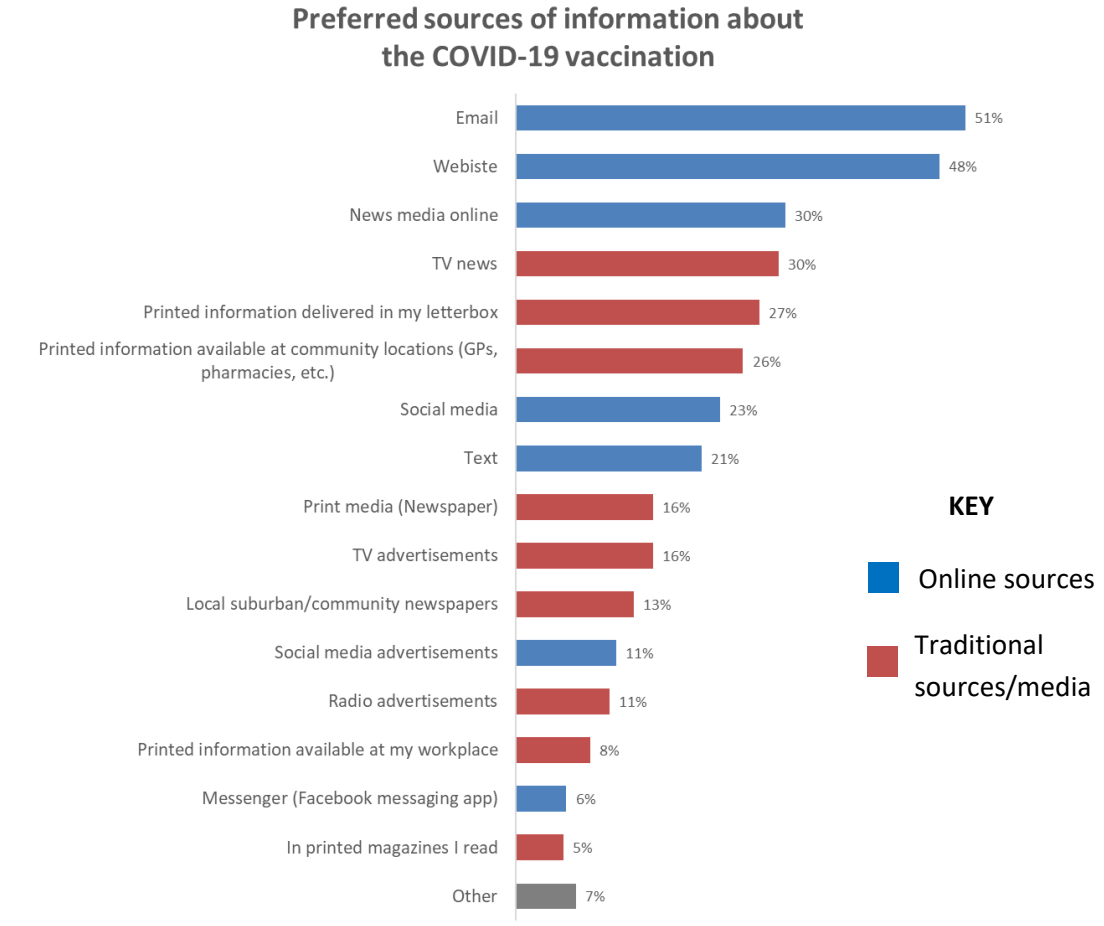
"I follow any updates about the vaccines. Totally fine by me." (Male, Aged 75 years or over, Vaccine Group 3)

"I want to be vaccinated to protect myself and my family and workmates as well, to combat the deadly COVID." (Female, Aged 35-44 years, Vaccine Group 4)

7.4 Preferred information sources

People who had not received two vaccine doses were asked "What's the best way for you to get information on the COVID-19 vaccine?"

As the chart below shows, the top 3 nominated sources of information are all online sources (email, website and online news media). However, traditional sources are also mentioned frequently, with the most mentions for TV news, printed mailers and printed information at GPs, pharmacies and other community locations.



Base n=1,137 (not had two doses). Multiple responses were allowed

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People who want more information to make their decision to get vaccinated (who said 'I do not have quite enough' or 'I need more information') are more inclined than the total to favour two traditional sources (**local community newspapers** and **printed mailers)** and less inclined to favour two online sources (**email** and **online news media).** Preferences of this group for other media sources are much the same as the total.

Preferred sources	Total (not had two doses)	Those who want more information	Difference % points
Printed information delivered in my letterbox	27%	33%	+ 6 ↑
Local suburban/community newspapers	13%	17%	+ 4 ↑
News media online	30%	25%	- 5 ↓
Email	51%	44%	- 7 ↓
Base n=	1,137	321	

Differences of less than 4 percentage points are excluded from the above table

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8. COVID-19 vaccine information from the government

8.1 Assessment of COVID-19 vaccine information from the government

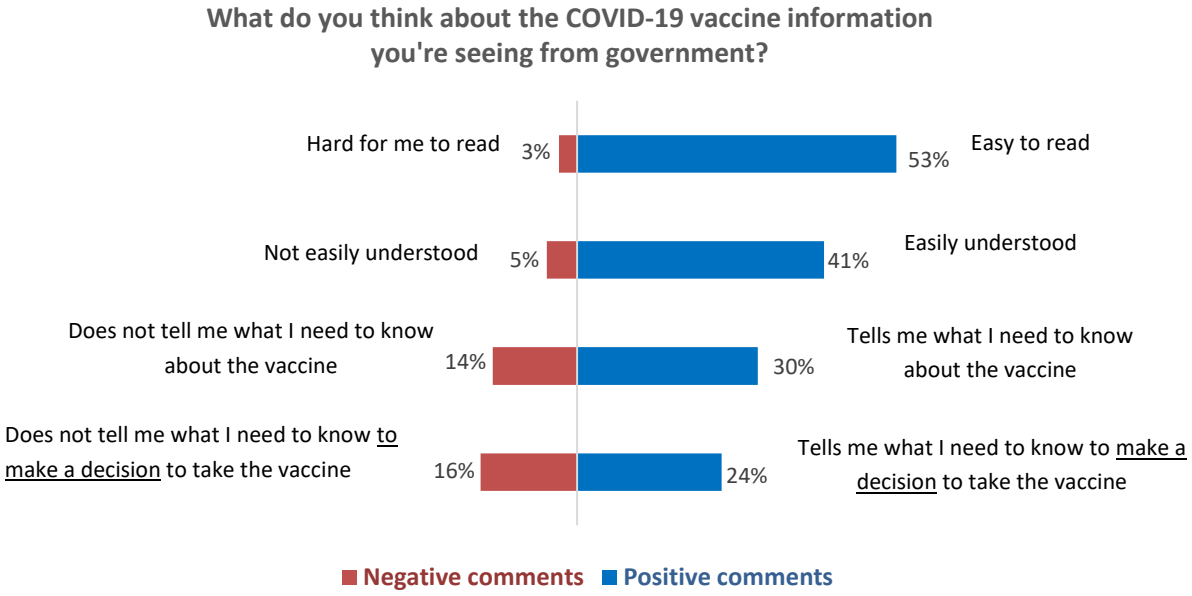
All respondents were asked to rate the COVID-19 vaccine information they had seen from the government from a checklist of positive and negative statements, with the results shown in the next chart. Presumably, if people were not aware of vaccine information from the government, they would not select a statement about this information. Therefore, the totals in the chart for each positive/negative statement set do not add up to 100%.

The most positive feedback is that government information is:

- Easy to read (selected by 53% of the total).
- Easily understood (41%).

By contrast, feedback is less positive in two areas:

- Tells me what I need to know about the vaccine (30% agree/ 14% disagree).
- Tells me what I need to know to make a decision to take the vaccine (24% agree/ 16% disagree).



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Groups who rate COVID-19 vaccine information from the government more positively than the average

The following table indicates the groups of people in the survey who rated the government information relatively more positively than the average. Bear in mind that these ratings may reflect greater familiarity with this information among the groups concerned.

Statement	Total agree	Groups who gave more positive ratings for this statement
Easy to read	53%	• Already vaccinated (70%) • Aged 18 to 24 (69%) • Group 1 - Border and MIQ workers and the people they live with (68%) • Definitely will get vaccinated (64%) • Flatting or boarding (64%) • Of Indian descent (61%) • Have a university degree or vocational qualification (59%) • Professional /senior government official (58%) • Retired/ superannuitant (58%)
Easily understood	41%	• Retired/ superannuitant (56%) • Aged 65 or more (56%) • Have a postgraduate degree (51%) • Already vaccinated or definitely will get vaccinated (50%) • Teacher/ nurse/ police or other trained service worker (50%) • Living in an extended family (50%) • Couple with no children at home (48%) • Group 2 - High-risk frontline workers and people living in high-risk places (46%)
Tells me what I need to know about the vaccine	30%	• Aged 65 or more (46%) • Retired/ superannuitant (44%) • Already vaccinated (44%) • Living in an extended family (43%) • Definitely will get vaccinated (42%) • Professional /senior government official (38%) • Group 1 and Group 2 individuals (39%) • Have a postgraduate degree (38%) • One parent family, with one or two children at home (36%)
Tells me what I need to know to make a decision to take the vaccine	24%	• Aged 65 or more (41%) • Definitely will get vaccinated (38%) • Retired/ superannuitant (37%) • Already vaccinated (34%) • Group 3 - People who are at risk of getting very sick from COVID-19 (34%) • Living in an extended family (32%) • Have a postgraduate degree (30%) • No formal school qualification (30%) • In a single person household (30%)

Results are only shown for groups of at least n=50 respondents

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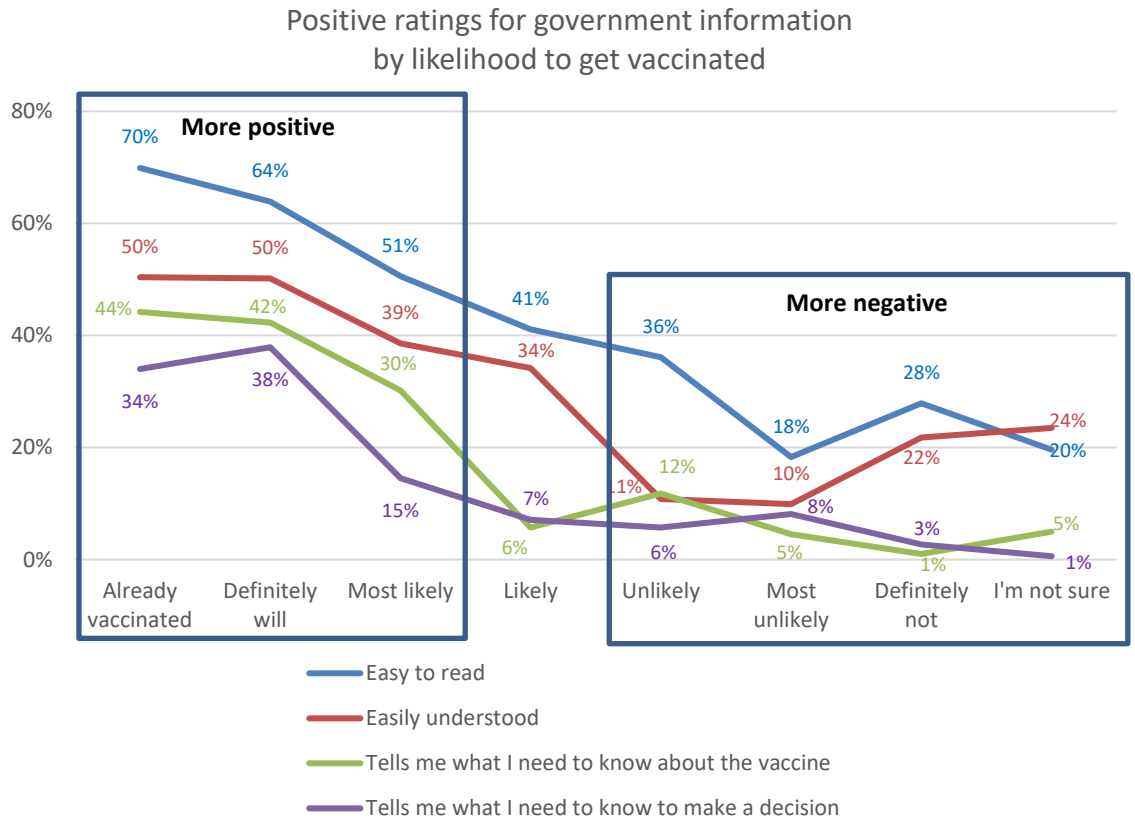
As the above table shows, groups who have already been vaccinated or definitely will do so give more positive ratings than the average. Results for the full spectrum of likelihood to get vaccinated are shown in more detail in the next chart.

The following chart demonstrates a strong relationship between positive ratings for government information about the vaccination programme and peoples' likelihood to be vaccinated.



NB. Both the 'unlikely' and 'most unlikely' groups have small samples (n=42 and n=34 respectively) so the results for these groups should be treated as very indicative

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Groups who rate COVID-19 vaccine information from the government more negatively than the average

The next table indicates the groups of people in the survey who rated the government information relatively more negatively than the average.

Statement	Total agree	Groups who gave more negative ratings for this statement
Hard for me to read	3%	• Student (14%) • From a one parent family, with one or two children at home (10%) • Have NCEA Level 1 or School Certificate (9%) • Of Asian descent (8%) • From the Auckland DHB area (7%)
Not easily understood	5%	• Not sure about getting vaccinated (23%) • Have NCEA Level 1 or School Certificate (14%) • Student (13%) • No formal school qualification (10%)
It doesn't tell me what I need to know about the vaccine	14%	• Definitely not getting vaccinated (40%) • Not sure about getting vaccinated (28%) • Identify as disabled (24%) • Student (24%) • Business Proprietor/ Self-employed (23%) • From the Auckland DHB area (23%) • From a two-parent family, 3 or more children at home (21%) • From a one parent family, with one or two children at home (20%) • Unemployed (18%)
It doesn't tell me what I need to make a decision to take the vaccine	16%	• Not sure about getting vaccinated (46%) • Definitely not getting vaccinated (43%) • Have NCEA Level 1 or School Certificate (29%) • Business Proprietor/ Self-employed (28%) • From the Waikato DHB area (26%) • From a one parent family, with one or two children at home (26%) • From a two-parent family, 3 or more children at home (24%) • Of Other European descent (22%) • Labourer/ Agricultural or Domestic Worker (21%) • Unemployed (21%)

Results are only shown for groups of at least n=50 respondents

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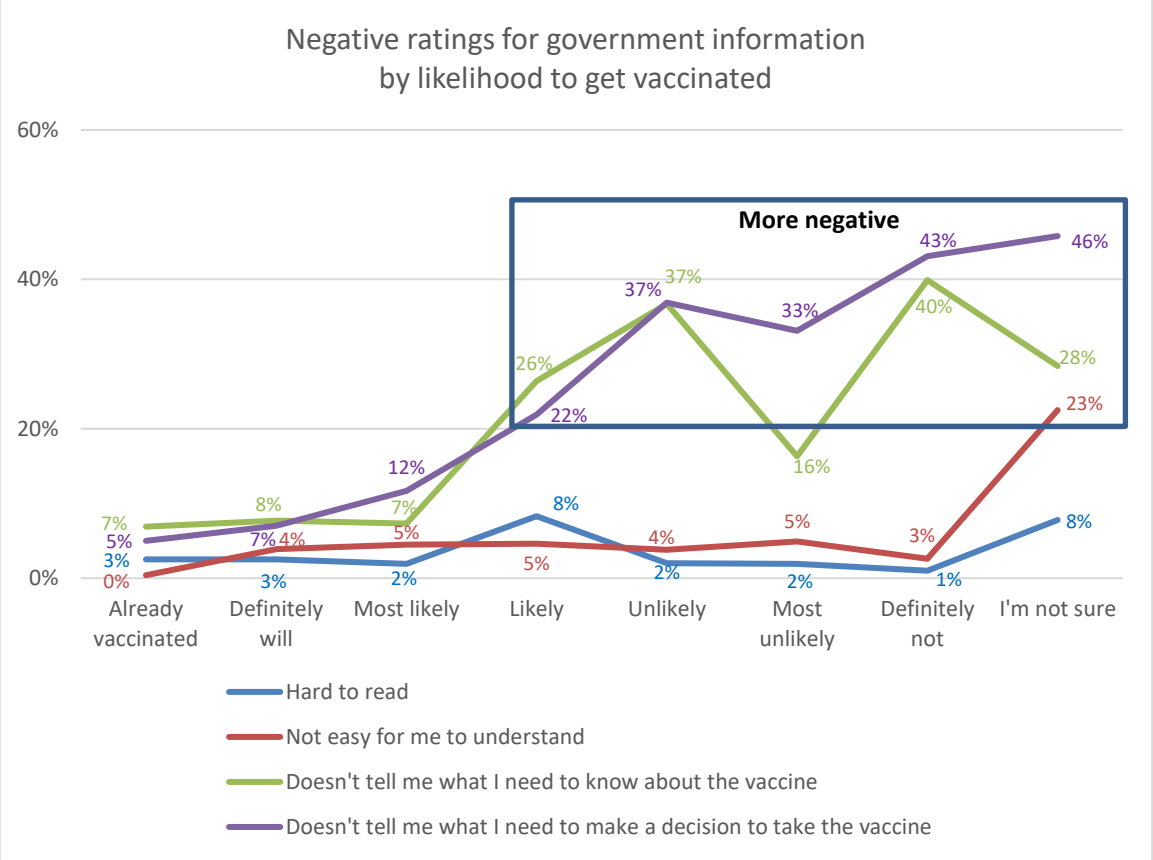
The relationship between negative ratings for the government information and likelihood to get vaccinated is shown in the next chart.

The relationships revealed in the chart are not quite as clear-cut as the previous chart which shows positive ratings. However, the chart does show a different trajectory for two types of statements on the chart: i.e., **relatively more negative ratings were recorded for government information not telling people what they need to know and not helping them make their decision** compared with the information being hard to read or not easy to understand.



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Comment:

Information from the government is rated as "easy to read" and "easy to understand". But that does not mean that the official information they are seeing is what all respondents require.

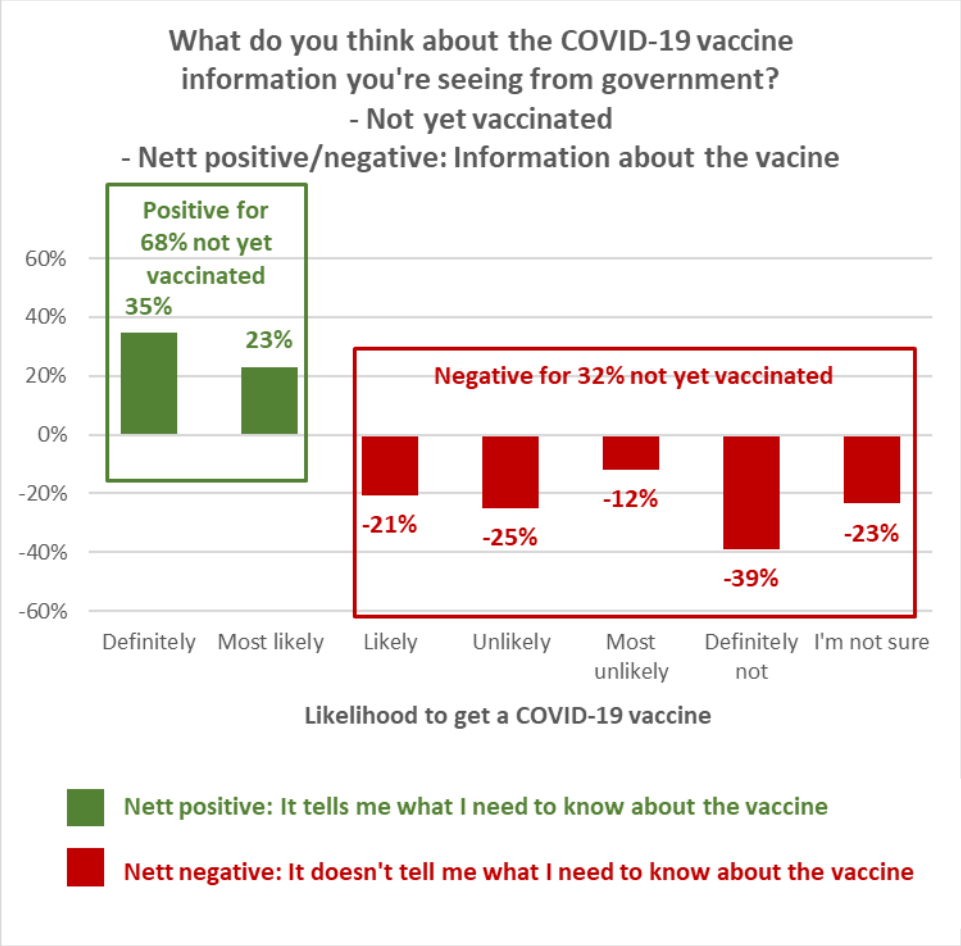
Respondents say that the information they are seeing from the government:

- Tells them what they need to know about the vaccine, 30%
- Doesn't tell them what they need to know about the vaccine, 14%
- **Overall, a nett 16%.**

However, this changes as likelihood to get a COVID-19 vaccine declines.

The following chart illustrates that by the time likelihood to get a COVID-19 vaccine gets to "Likely", the balance has shifted: more respondents say that the information does not tell them what they need to know about the vaccine than say it does.

Effectively, the information respondents are seeing is addressing 68% of those who have not yet been vaccinated.



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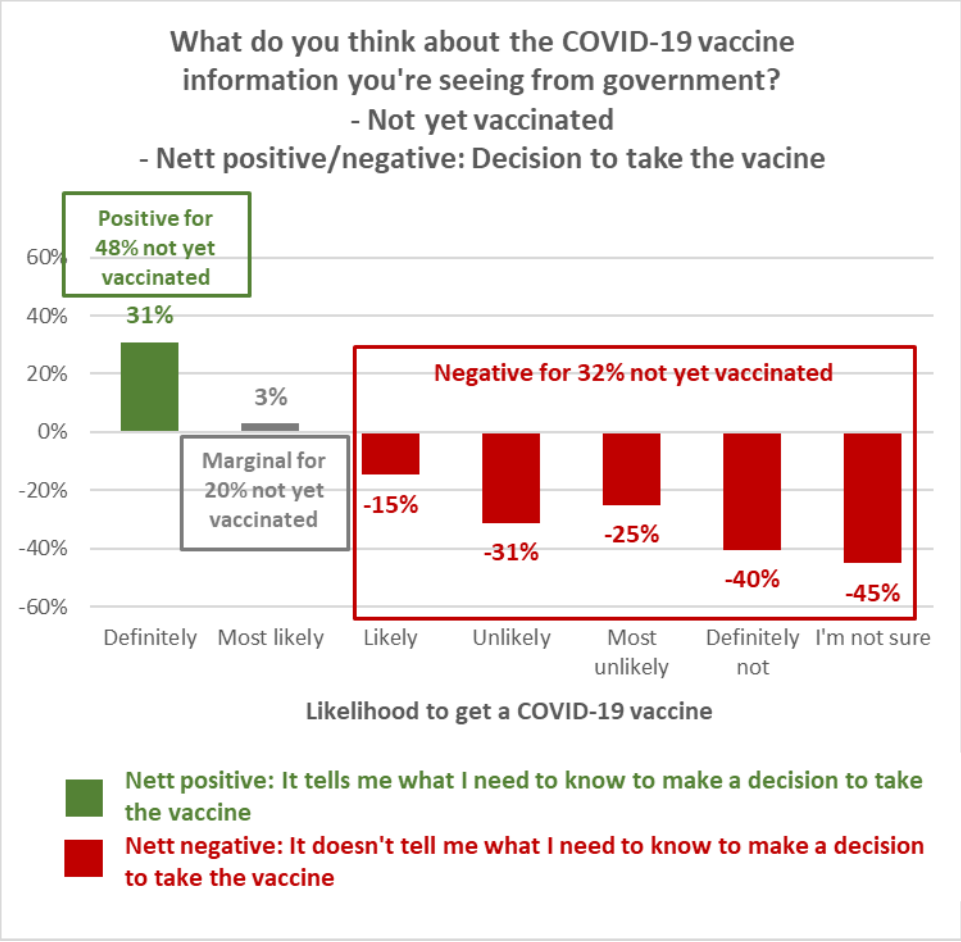
Further, respondents also say that the information they are seeing from the government

- Tells them what they need to know to make a decision to take the vaccine 24%
- Doesn't tell them what they need to make a decision to take the vaccine 16%
- **Overall, a nett 8%.**

The balance becomes rapidly negative as likelihood to get a vaccine declines.

As shown in the following chart**, the results imply that in terms of telling the public what they need to know to make a decision to take a vaccine, the current government information that respondents are seeing is really only meeting the needs of the 48% of those who have not yet been vaccinated, but will "Definitely" get a COVID-19 vaccine, not those who are less likely to get a vaccine.**

In particular, it does not meet the needs of the 20% who "Most likely" will get a vaccine nor the needs of the 9% who are "Likely" to do so (taken together, the "Most likely" and "Likely" groups form 40% of those who are not yet vaccinated and, overall, likely to get a COVID-19 vaccine).



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8.2 Suggested improvements to information from official sources

All those surveyed were asked "What do you think could be done, if anything, to help improve the COVID-19 vaccine information you're seeing from official sources?" and 790 people responded to this question. In this case, we randomly selected 400 comments for analysis.

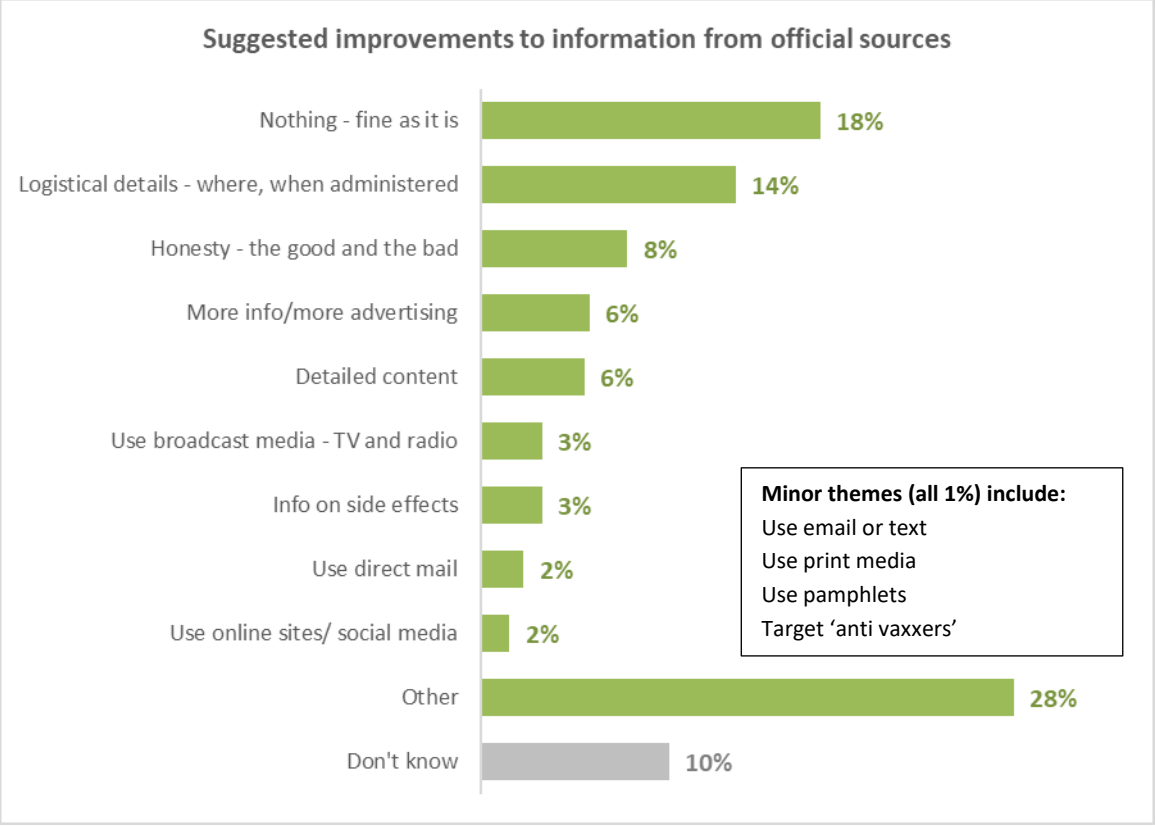
Main suggested improvements were:

- Nothing – its fine as it is (18%).
- Logistical details – where and when the vaccine will be administered (14%).

Those who want "More honesty", "More information", "Detailed content" or "info on side effects" are primarily interested in:

- Reactions and risks, especially for those who have existing health issues.
- Long term effects of the vaccine.
- Reported side effects, especially developing side effects.
- Effectiveness against new, emerging strains.
- Whether people will need an annual booster.

Note that these information needs are common to ALL likelihood groups, not just to those who say they are unlikely to get a vaccine.



Base n=400 randomly selected comments.

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Examples of verbatim comments illustrating the main themes above (2% or more) are as follows:

Nothing - fine as it is

"All the authorities are giving as much information as possible. Keep up the good work!!!" (Male, Aged 45-54 years, Vaccine Group 3)

"Appears to be handled pretty well by all parties in Northland." (Female, Aged 65-74 years, Vaccine Group 3)

"Great information already available on all platforms. Need to visually promote COVID-19 vaccine... advertisements, commercials with all ethnic groups in these as Kiwis are visual people." (Female, Aged 55-64 years, Vaccine Group 2)

"I think everything is being done at the moment to inform the public." (Male, Aged 35-44 years, Vaccine Group 3)

"I think it is fine." (Male, Aged 75 years or over, Vaccine Group 4)

Logistical details - where, when administered

"How to book for the second vaccine." (Female, Aged 65-74 years, Vaccine Group 4)

"Hutt DHB who are controlling delivery of Group 3 in my area. [They] *need to inform all participants when we will hear from them. It is 28 May and we have heard nothing!!"* (Female, Aged 65-74 years, Vaccine Group 3)

"Info about when I will be called or contacted is so vague. It doesn't inspire confidence." (Female, Aged 45-54 years, Vaccine Group 3)

"It needs to be more specific and informative. At present there seems to be a lot of vagueness and not much info on exactly what will happen when. This is made worse by using the DHB's to handle the programme when it should have been a co-ordinated national campaign run by Dept of Health." (Female, Aged 55-64 years, Vaccine Group 3)

"More information around how we can expect to be contacted, by whom, and when. What do we need to do, if anything?" (Male, Aged 55-64 years, Vaccine Group 3)

"More clarity on how I will get the vaccine (i.e., from my GP or at my workplace, etc).". (Male, Aged 18-24 years, Vaccine Group 4)

Honesty - the good and the bad

"How truthful is it? Numbers can be fudged. People fronting to claim it is safe etc may not be told the truth from those in authority. How true is the research?" (Female, Aged 25-34 years, Vaccine Group 3)

"Honesty. Information coming from outside the US/mainstream media. Medical staff being aware of the ingredients and side-effects, long-time effects, a believable database of reactions to the vaccine. Why should healthy people in isolated areas even need it?" (Male, Aged 25-34 years, Vaccine Group 4)

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"One version sent directly to me in hard copy. And of course, no lies or half-truths to be included in the information - government is after all a political beast, and we all know that it tends to speak with the proverbial forked-tongue..." (Female, Aged 35-44 years, Vaccine Group 4)

"Real research data from real clinical trials. No fudging the data." (Male, Aged 55-64 years, Vaccine Group 4)

"Seeing both sides, rather than one side" (Female, Aged 45-54 years, Vaccine Group 4)

"It needs to compare the adverse information rate and ratio to other medications and vaccines. Once again, I'm no conspiracy theorist; I just want to read some clinical information benchmarked against other vaccines." (Male, Aged 45-54 years, Vaccine Group 3)

"It needs to have all information - Medsafe has made it a medicine with s23 (1) provisional approval, and questions need to be answered. Clinical trials will not be completed until 2023 - How safe or effective is the novel mRNA technology in the medium to long term use. People need to know what is happening to people who have adverse reactions, like looking at Vaccine Adverse Events Reporting System (VAERS)." (Female, Aged 25-34 years, Vaccine Group 2)

"The correct information from studies not propaganda." (Female, Aged 35-44 years, Vaccine Group 3)

"The real truth about the side effects." (Male, Aged 35-44 years, Vaccine Group 4)

"They have to be honest about the negatives and not only pushing their positive agendas." (Male, Aged 55-64 years, Vaccine Group 3)

"They need to start telling the truth, simple as that. They aren't and the fear mongering and threats continue to eat away at society. It's global, all govts are doing the same, it's an agenda. Nothing to do with our health." (Male, Aged 75 years or over, selected Vaccine Group 4)

"They need to be honest about side-effects and risks. If they aren't being honest about the negatives, how can we trust anything they say?" (Male, Aged 65-74 years, Vaccine Group 4)

More info/more advertising

"More advertising." (Male, Aged 35-44 years, Vaccine Group 4)

"More communication like the COVID ads." (Female, Aged 18-24 years, Vaccine Group 4)

"More public advertising." (Female, Aged 25-34 years, Vaccine Group 3)

"More publicity about how it will work and how it is proven to be effective." (Female, Aged 35-44 years, Vaccine Group 4)

"More reach to people." (Female, Aged 55-64 years, Vaccine Group 3)

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Detailed content

"Being more specific." (Male, Aged 55-64 years, Vaccine Group 4)

"Explain the criteria for each group - for instance, I think I'm in group 3 because I'm asthmatic but I don't know if it's bad enough that I'd get too affected." (Male, Aged 45-54 years, Vaccine Group 3)

"Help correct misinformation out there, show statistics about how many people have been vaccinated to show that it is safe, empathize with people and show them how important it is that they get vaccinated." (Male, Aged Under 18 years, Vaccine Group 4)

"[Publish] *how many people are vaccinated because this will help show the progress." (Female, Aged 18-24 years, Vaccine Group 3)*

"I would like information about how people are feeling a couple of days after being vaccinated. I know it will be different for everyone, so comments from different people and age groups will help." (Male, Aged 55-64 years, Vaccine Group 4)

"Identify all ingredients and how and for how long it has been tested!" (Male, Aged 25-34 years, Vaccine Group 4)

"More in-depth information on what is actually in the vaccine to show how different it is to the flu vaccine." (Gender diverse, Aged 45-54 years, Vaccine Group 2)

"Is it safe." (Female, Aged 65-74 years, Vaccine Group 4)

"The efficacy rates." (Male, Aged 55-64 years, Vaccine Group 3)

"Updates on vaccinated users on how their health is." (Female, Aged 55-64 years, Vaccine Group 4)

Use broadcast media - TV and radio

"That they play it on the news." (Female, Aged 35-44 years, Vaccine Group 4)

"Not to assume that people have computers or social media, but to access all options available, including TV ads." (Female, Aged 55-64 years, Vaccine Group 3)

"Local radio stations giving more information." (Female, Aged 25-34 years, Vaccine Group 2)

"It can be done by talking to people on the news channel." (Female, Aged 75 years or over, Vaccine Group 1)

Info on side effects

"Any info on side effects provided and relating to existing medical conditions." (Male, Aged 75 years or over, Vaccine Group 4)

"Every side effect shown in NZ & overseas on that type. Also % of people getting affected." (Female, Aged 45-54 years, Vaccine Group 4)

"Side effects on different ethnicities." (Male, Aged 35-44 years, Vaccine Group 4)

"A whole list of every single side effect. No matter how small." (Male, Aged 55-64 years, Vaccine Group 4)

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"The explanation of 'adverse effect' and what will be the response." (Female, Aged 65-74 years, Vaccine Group 4)

"Be open about the side effects and effectiveness of the Vaccine." (Male, Aged 55-64 years, Vaccine Group 4)

Use direct mail

"For it to be sent personally to you." (Female, Aged 45-54 years, Vaccine Group 4)

"May circulate it in mail box frequently." (Male, Aged 55-64 years, Vaccine Group 4)

"Pamphlets sent house to house could also help in spreading the information, especially for those elderly who are unable to go out of their own home." (Male, Aged 18-24 years, Vaccine Group 4)

Use online sites/ social media

"More information on relevant websites." (Male, Aged 55-64 years, Vaccine Group 3)

"Social platform advertising is good for getting young people to know the information." (Male, Aged 75 years or over, Vaccine Group 4)

"More good quality info on social media." (Female, Aged 65-74 years, Vaccine Group 3)

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Other

"Ensure that if there's an update to the information. Make reference to it replacing previous information. Each public notification should have a version number, so it is clear this version is the latest." (Male, Aged 45-54 years, Vaccine Group 2)

"Have it available in different languages." (Female, Aged 18-24 years, Vaccine Group 2)

"I am exceedingly disappointed that I have not received any communication given my underlying health issues - I thought I would have had a vaccine by now - especially when I now see pop-up vaccine centres in local malls." (Male, Aged 55-64 years, Vaccine Group 3)

"I think maybe making it a little less "wall of text" like, more salient points, with the ability to click on things to get expanded information." (Male, Aged 55-64 years, Vaccine Group 4)

"I think the information has been good, however, in Northland, the vaccine management and rollout were initially confused, confusing and extremely poorly managed by the DHB. It took them weeks to get their collective act together. Things are better now thankfully". (Female, Aged 65-74 years, Vaccine Group 3)

"Increase the font size!" (Female, Aged 45-54 years, Vaccine Group 3)

"Less pointy headed doctors, and more influencers saying very simple things - the vaccine has been hard out tested and it's super safe; you're a dick if you don't get the vaccine. "(Female, Aged 45-54 years, Vaccine Group 4)

"Let GPs provide vaccinations." (Male, Aged 75 years or over, Vaccine Group 4)

"Make it available at work places." (Female, Aged 55-64 years, Vaccine Group 4)

"Make it more obvious where to find it. Maybe a text to anyone with the COVID app telling them there's something new to know." (Male, Aged 55-64 years, Vaccine Group 4).

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9. Sources of information about the vaccine

All those surveyed were asked where they had seen, heard or found information on the COVID-19 vaccine in the past 30 days. Results from the May 2021 survey are compared with those recorded in April 2021 in the table below.

Of the 22 sources below, 13 recorded a lower response than in April and there was an increase in those who said they hadn't seen or heard any information about the COVID-19 vaccine (from 6% to 9%). Most of the declines were modest but 3 sources declined by at least 5 points:

- Television New Zealand (TVNZ) (44% in May cf. 49% in April)
- Commercial television, including 3/Newshub (24% cf. 32%)
- NZ Herald online (17% cf. 23%).

Where have you seen, heard or found information on the COVID-19 vaccine in the past 30 days?	April 2021	May 2021	Difference % points
Television New Zealand (TVNZ)	49%	44%	- 5 ↓
Ministry of Health website	33%	29%	- 4
Stuff	28%	29%	+ 1
Social media: Facebook	25%	25%	-
Commercial television, including 3/Newshub	32%	24%	- 8 ↓
Unite Against COVID-19 website	26%	22%	- 4
Radio New Zealand	18%	19%	+ 1
Daily (print) newspapers	17%	17%	-
NZ Herald online	23%	17%	- 6 ↓
Other New Zealand online news sites (The Spinoff, Newsroom, etc)	13%	13%	-
Commercial radio stations	14%	13%	- 1
Online search engines	15%	13%	- 2
International websites	14%	13%	- 1
Community newspapers	14%	13%	- 1
YouTube	13%	12%	- 1
Other social media	10%	11%	+ 1
Other New Zealand websites	11%	9%	- 2
Social media: Instagram	10%	8%	- 2
Social media: Twitter	5%	8%	- 1
Maori Television	4%	5%	+ 1
Iwi radio stations	2%	2%	-
Somewhere else	5%	5%	-
I haven't seen or heard any information about the COVID-19 vaccine	6%	9%	+ 3
Base n=	1,387	1,234	

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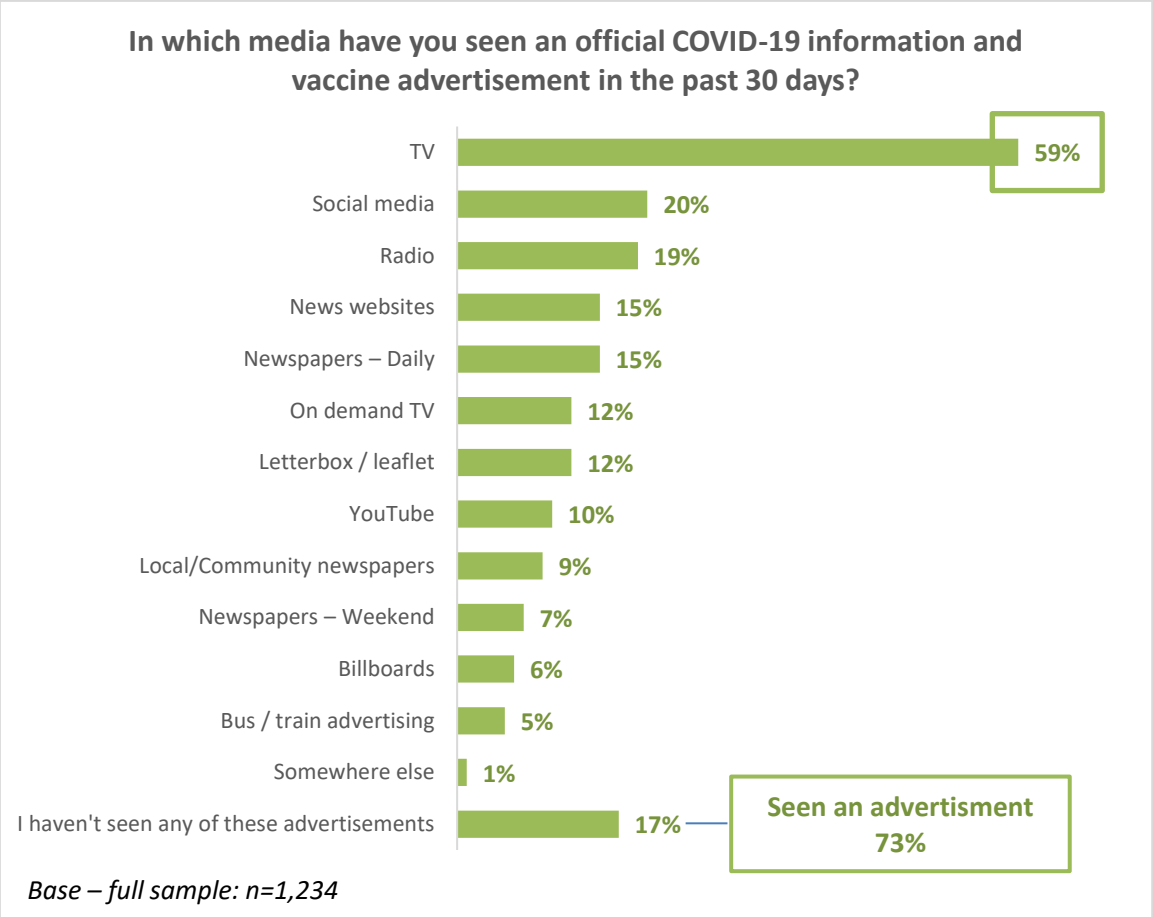
9.1 Sources of official information and advertising

The full survey sample was also asked to identify the types of media where they had seen official COVID-19 information and vaccine advertisement in the past 30 days.

Almost three quarters (73%) had seen an official COVID-19 information and vaccine advertisement in this period.

Television is the dominant medium with almost six out of ten (59%) seeing official material on TV. Social media (20%) and radio (19%) are in second and third place respectively.



These results are analysed by age and gender on the next page.

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As the table below shows:

- Official vaccination information has a similar overall reach across all gender and age groups – at its lowest 79% for those aged 35 to 44; at its highest 87% for those aged 75 or more.
- There are no strong differences by gender.
- The oldest age group (75 or more) is strongly more likely than the total to source this material from radio as well as daily, weekend and community newspapers
- Those aged 65 to 74 favour TV, daily and community newspapers.
- The 25 to 34 age group are relatively more likely to favour social media, on demand TV and YouTube.
- Those aged 18 to 24 have the same media skews as the 25 to 34 group and also favour bus/train advertising.

KEY:

Eight points or more **higher than the average** is highlighted in **bold blue font**
Eight points or more **lower than the average** is highlighted in **bold red font**

In which media have you seen an official COVID-19 information and vaccine advertisement in the past 30 days?	ALL	GENDER*		AGE							
		Male	Female	Under 18 years	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75 years or over
TV	59%	58%	59%	61%	60%	52%	**49%**	56%	59%	**72%**	65%
Social media	20%	18%	23%	25%	**34%**	**32%**	18%	16%	**11%**	19%	**11%**
Radio	19%	22%	17%	**5%**	22%	20%	19%	18%	20%	19%	**28%**
News websites	15%	16%	15%	9%	18%	11%	13%	14%	18%	19%	20%
Newspapers - Daily	15%	16%	14%	**4%**	**5%**	10%	**7%**	11%	20%	**31%**	**38%**
On demand TV	12%	13%	12%	15%	**23%**	**20%**	11%	9%	8%	**4%**	11%
Letterbox / leaflet	12%	9%	16%	10%	11%	10%	7%	16%	11%	17%	15%
YouTube	10%	15%	6%	15%	**27%**	**20%**	10%	6%	**2%**	**2%**	4%
Local/Community newspapers	9%	8%	10%	6%	7%	4%	5%	4%	9%	**23%**	**21%**
Newspapers - Weekend	7%	7%	6%	5%	2%	5%	4%	4%	6%	14%	**20%**
Billboards	6%	6%	6%	2%	11%	5%	6%	3%	6%	5%	9%
Bus / train advertising	5%	6%	5%	2%	**13%**	4%	3%	5%	5%	5%	6%
Somewhere else	1%	1%	1%	0%	0%	0%	2%	2%	1%	0%	3%
I haven't seen any of these advertisements	17%	18%	15%	19%	16%	19%	21%	16%	16%	14%	13%
Have seen an advertisement	**83%**	**82%**	**85%**	**81%**	**84%**	**81%**	**79%**	**84%**	**84%**	**86%**	**87%**
Base n=	1,221	608	608	39**	123	161	212	194	245	165	82

** The gender diverse group is excluded due to a small sample n=5* ***Note small sample*

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9.2 Impact of seeing an official COVID-19 vaccine advertisement

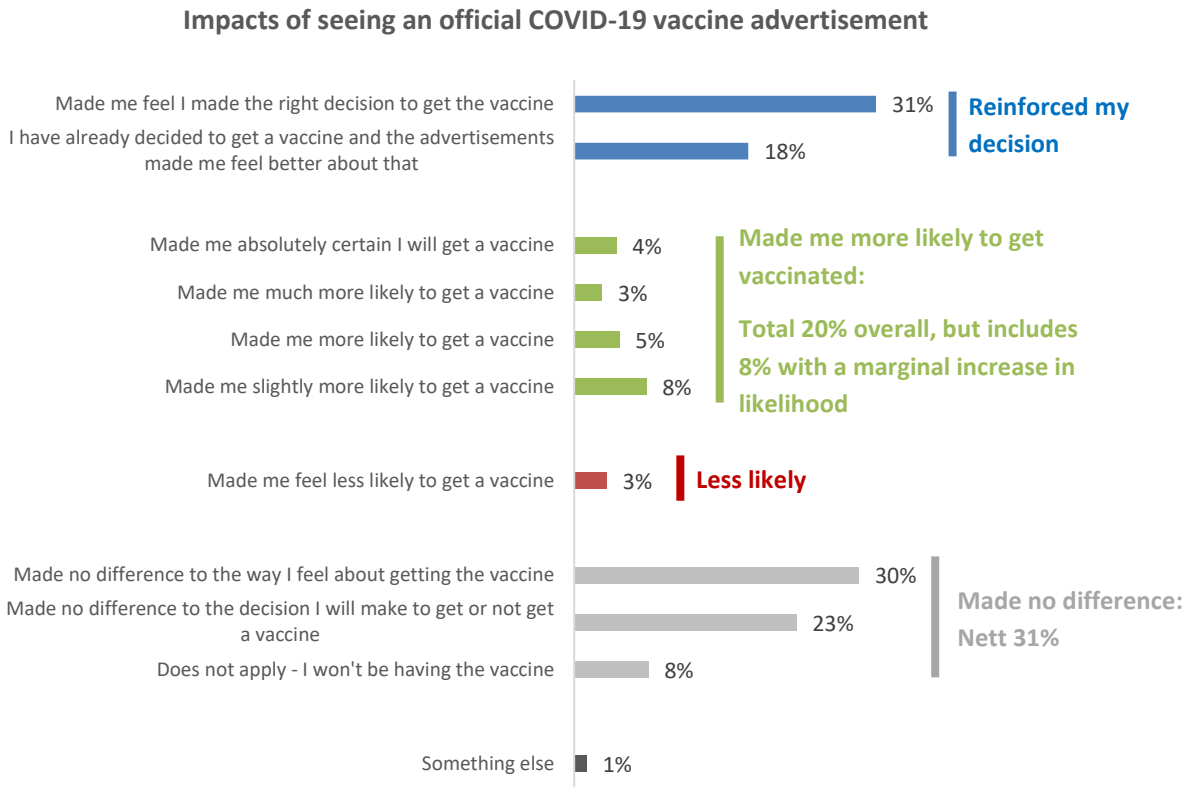
Those who had seen an official COVID-19 vaccine advertisement in the previous 30 days were asked what impact this had, from a list of possible options.

A nett 31% said the advertising made no difference to their decision:

- Made no difference to the way I feel about getting had the vaccine: 30%
- Made no difference to the decision I will make to get or not get a vaccine: 23%.

31% said it made them feel they made the right decision to get vaccinated (this was the primary reaction from those who had already been vaccinated).and 18% said the advertising made them feel better about this decision.

More specifically, 12% said the advertising made them more likely to get vaccinated (4% absolutely certain, 3% much more likely, 5% more likely) and 8% said they were slightly more likely to get a vaccine after seeing the advertising (this includes made 13% of those who said were currently "unlikely" to get a COVID-19 vaccine). By contrast, 3% said the advertising made them feel less likely to get vaccinated.



The next table examines 'more likely' and 'less likely' responses by gender and age.

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In terms of likelihood to take the vaccine, the key differences from the total by gender and age are:

- The 75 plus age group are more likely to say the advertising made them 'absolutely certain' and 'more likely' to get vaccinated.
- The under 18 group are more likely to say the advertising made them 'more likely' and 'slightly more likely' to get vaccinated.
- Those aged 18 to 24 are more inclined to say the advertising made them 'slightly more likely' to get vaccinated.

KEY:

4 points or more **higher than the average** is highlighted in **bold blue font**

Impact of seeing official advertising in the last 30 days	ALL	GENDER*		AGE							
		Male	Female	Under 18 years	18-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75 years or over
Made me absolutely certain I will get a vaccine	4%	4%	5%	0%	3%	6%	4%	2%	5%	3%	**17%**
Made me much more likely to get a vaccine	3%	3%	2%	4%	4%	3%	2%	2%	2%	5%	6%
Made me more likely to get a vaccine	5%	5%	5%	**9%**	6%	2%	3%	4%	3%	4%	**11%**
Made me slightly more likely to get a vaccine	8%	8%	7%	**14%**	**18%**	8%	6%	8%	3%	4%	3%
Total positive impacts	**20%**	**20%**	**19%**	**27%**	**31%**	**19%**	**15%**	**16%**	**13%**	**16%**	**37%**
Made me feel less likely to get a vaccine	**3%**	**4%**	**2%**	**3%**	**4%**	**4%**	**2%**	**5%**	**3%**	**0%**	**0%**
Base (have seen an advertisement) n=	1,025	504	517	32**	101	130	176	163	209	144	70

** The gender diverse group is excluded due to a small sample n=5* ***Note small sample*

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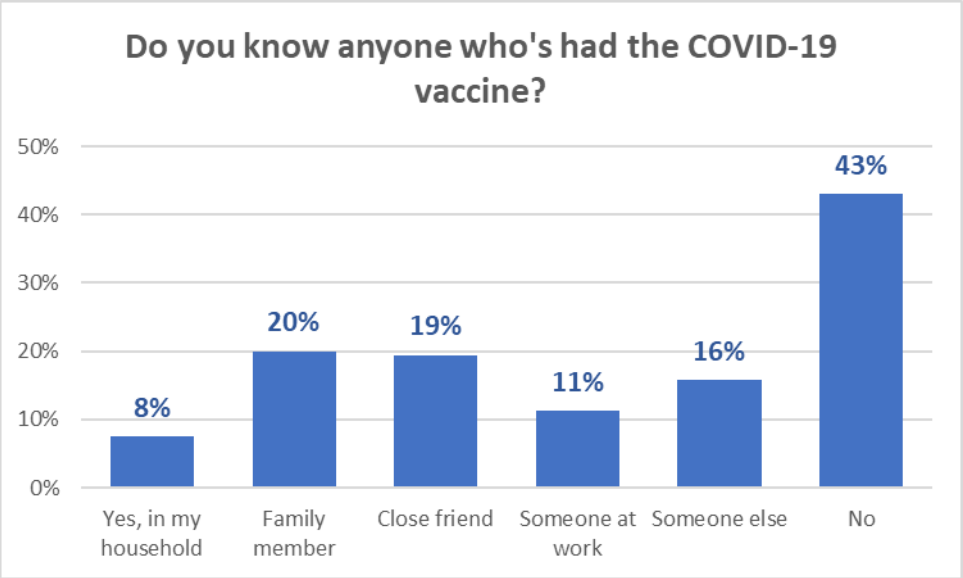
10. Impact of knowing someone who has been vaccinated

Respondents who had not yet been vacinte4d were asked if they knew someone who had been vaccinated. 57% of them said they know someone who has had a COVID-19 vaccine.



50% of respondents who knew a person who had been vaccinated in one of the groups measured also knew someone in another group. The exception was where someone in their household had been vaccinated; nearly all respondents selecting that option were likely to know someone in another group who had been vaccinated as well.

Respondents were then asked whether knowing someone who had been vaccinated made it more likely that they would get a COVID-19 vaccine themselves. 34% of those who knew someone who has been vaccinated said that knowing someone who has had a COVID-19 vaccine made them more inclined to do so themselves. This effect is amplified where the vaccinated person they know is a household member (47% are more likely to get vaccinated themselves) or family member (37% more likely to get vaccinated).

Does knowing someone who's had the COVID-19 vaccine make you more or less likely to get it?	ALL	Do you know anyone who's had the COVID-19 vaccine?				
		Yes, in my household	Family member	Close friend	Someone at work	Someone else
Much more likely	17%	26%	24%	18%	21%	11%
More likely	17%	21%	13%	19%	18%	9%
Neither more nor less likely	56%	48%	57%	56%	54%	64%
Less likely	3%	2%	3%	2%	6%	4%
Much less likely	2%	1%	2%	2%	1%	2%
I'm really not sure	4%	2%	2%	3%	1%	9%
N (unweighted) - Know someone who has been vaccinated	629	88	242	197	125	164

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Knowing someone who had been vaccinated had minimal effect on those who are unlikely to get a COVID-19 vaccine; its **effect is primarily on those who are already likely to do so**.

Does knowing someone who's had the COVID-19 vaccine make you more or less likely to get it?	ALL	Will you get the COVID-19 vaccine?						
		Defin-itely	Most likely	Likely	Unlikely	Most unlikely	Definite ly not	I'm not sure
Much more likely	17%	28%	13%	3%	0%	0%	0%	0%
More likely	17%	12%	36%	33%	6%	0%	4%	7%
Neither more nor less likely	56%	54%	44%	58%	69%	100%	68%	70%
Less likely	3%	1%	6%	4%	13%	0%	7%	5%
Much less likely	2%	1%	0%	0%	5%	0%	16%	0%
I'm really not sure	4%	4%	1%	3%	6%	0%	4%	18%
More likely to get a vaccine	**34%**	**40%**	**49%**	**36%**	**6%**	**0%**	**4%**	**7%**
N (unweighted) - Know someone who has been vaccinated	629	354	112	47	24	13	41	38

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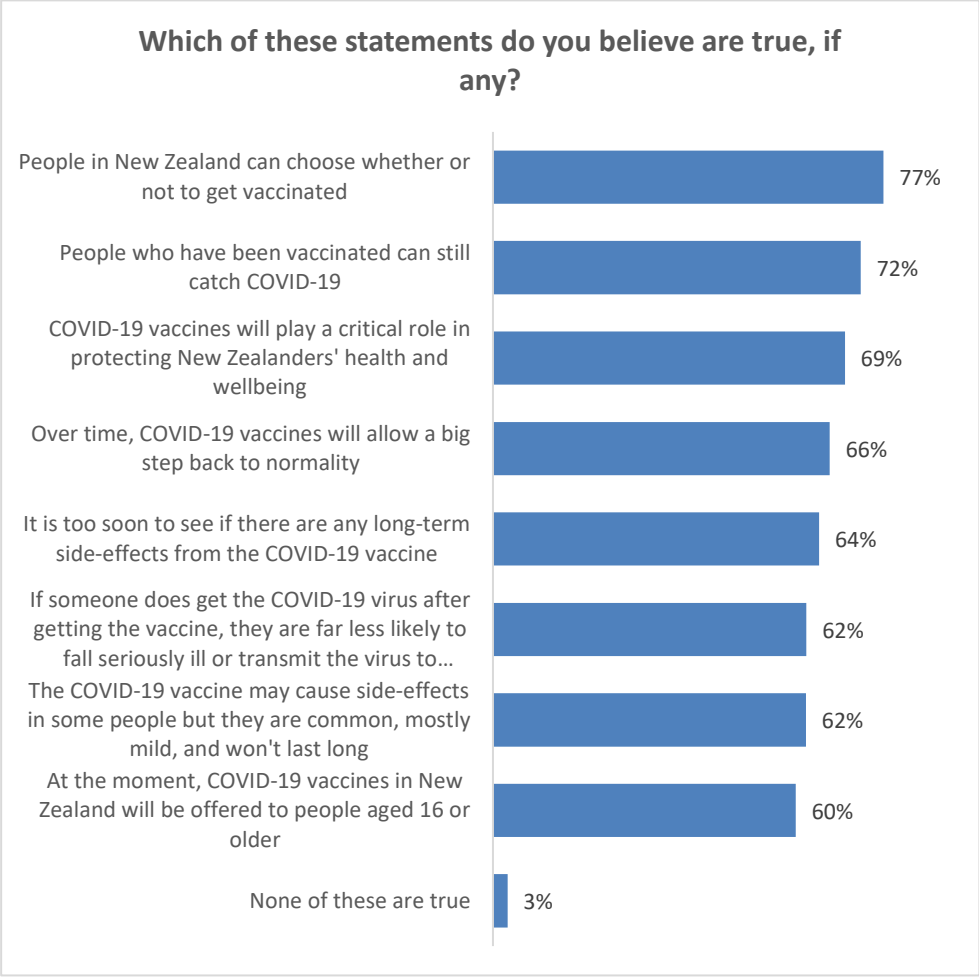
11. Understanding of COVID-19 and the vaccination programme

11.1 Perceptions of the vaccination programme

All those interviewed were asked whether a range of statements about the COVID-19 vaccine are true. Their answers are portrayed in the graph below.

At least six out of ten people believe the eight statements are true, while more than seven out of ten people believe the following two statements are true:

- People in New Zealand can choose whether or not to get vaccinated (77% said this is true).
- People who have been vaccinated can still catch COVID-19 (72% true).



Base – total sample: n=1,234

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In the following table, these statements are analysed by peoples' likelihood to get vaccinated.

As the table shows, 'true' responses are more strongly represented among three groups of people (to the left side of the table): 'Already vaccinated', 'Definitely will', and 'Most Likely'.

By contrast, there is a much lower level of 'true' responses, to the right side of the table: among those who are 'Unlikely', 'Most Unlikely', 'Definitely Not' and 'Unsure' about getting the vaccine.

This indicates that **considerable work is still required** to convince the unsure and unlikely groups that these statements are true (and to change the minds of those who say they definitely won't get vaccinated).

KEY:
'True' responses of **70% or more** are highlighted in **bold blue font**
'True' responses of **less than 50%** are highlighted in **bold red font**

This does not apply to 'none of these are true' responses

Which of these statements do you believe are true, if any?	ALL	Will you get the COVID-19 vaccine?							
		Already vaccin-ated	Defin-itely	Most likely	Likely	Unlikely	Most unlikely	Definitely not	I'm not sure
People in New Zealand can choose whether or not to get vaccinated	77%	79%	**83%**	**72%**	**78%**	58%	69%	65%	**74%**
People who have been vaccinated can still catch COVID-19	72%	**75%**	**75%**	**70%**	**73%**	**47%**	**78%**	75%	65%
COVID-19 vaccines will play a critical role in protecting New Zealanders' health and wellbeing	69%	**84%**	**89%**	**72%**	56%	**15%**	**21%**	**5%**	**41%**
Over time, COVID-19 vaccines will allow a big step back to normality	66%	**80%**	**85%**	**71%**	56%	**18%**	**20%**	**4%**	**32%**
It is too soon to see if there are any long-term side-effects from the COVID-19 vaccine	64%	56%	57%	**71%**	**75%**	66%	**70%**	**81%**	**75%**
If someone does get the COVID-19 virus after getting the vaccine, they are far less likely to fall seriously ill or transmit the virus to someone else	62%	**76%**	**77%**	58%	63%	**24%**	**24%**	**11%**	**34%**
The COVID-19 vaccine may cause side-effects in some people but they are common, mostly mild, and won't last long	62%	**81%**	**75%**	57%	51%	**34%**	**24%**	**22%**	**39%**
At the moment, COVID-19 vaccines in New Zealand will be offered to people aged 16 or older	60%	**74%**	68%	**51%**	55%	**27%**	**47%**	**45%**	**45%**
None of these are true	3%	0%	2%	1%	6%	14%	6%	12%	1%
N (unweighted) - All respondents	1,234	186	539	193	100	42*	34*	62	78

** Note very small samples – results are indicative*

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11.2 Are protective behaviours necessary after being vaccinated?

All survey respondents were asked whether they should continue with protective behaviours (like physical distancing, QR code scanning, sanitising and mask wearing on public transport) after being vaccinated.

Three-quarters (75%) believe they will need to continue with these protective behaviours.

Continuing with protective behaviours (like physical distancing, QR code scanning, sanitising and mask wearing on public transport) after being vaccinated	March 2021	April 2021	May 2021
I won't need to continue	10%	12%	10%
I will need to continue	70%	68%	75%
Not sure	21%	20%	15%

- As in April, males (13%) were more likely than females (7%) to believe they would not have to continue with protective behaviour. They were also slightly more unsure (17%) than females (13%).
- Younger people (under 25 years of age) were slightly more likely than average (14% compared with an overall average of 10%) to believe they would not have to continue with protective behaviour.

With the exception of "Other Europeans", all ethnic groups showed an increase in understanding that they would need to continue with protective behaviours:

Continuing with protective behaviours (like physical distancing, QR code scanning, sanitising and mask wearing on public transport) after being vaccinated	ETHNIC GROUP						
	Asian	Indian	Māori	NZ Euro-pean/ Pakeha	Other Euro-pean	Pasifika	Other
I won't need to continue	8%	8%↓	8%↓	10%	16%↑	9%↓	12%
I will need to continue	80%↑	88%↑	80%↑	74%↑	70%↓	74%↑	70%↑
Not sure	13%↓	4%↓	13%↓	17%↓	14%	17%↓	19%↓

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Those who are more and less likely to say they will need to continue these protective behaviours are shown below:

Need to continue protective behaviours	May 2021 Results
Total	**75%**
Of Indian descent	88% ↑
Already vaccinated	85% ↑
Group 2 - High-risk frontline workers and people living in high-risk places	85% ↑
Teacher/ Nurse/ Police or other trained service worker	85% ↑
Aged 25-34 years	82% ↑
Professionals /senior government officials	82% ↑
Have a postgraduate degree	81% ↑
Have a vocational qualification	81% ↑
Females	80% ↑
Unemployed/ beneficiaries	71% ↓
Retired/ superannuitant	71% ↓
Labourer/ agricultural or domestic worker	71% ↓
Have NCEA Level 1 or School Certificate	71% ↓
Group 4 - Everyone aged 16 and over	71% ↓
Males	70% ↓
Students	70% ↓
Of Other European descent	70% ↓
No formal school qualification	67% ↓
Definitely will not get vaccinated	52% ↓

11.3 Will I be able to pass on COVID-19 after being vaccinated?

Understanding that they could still pass on COVID-19 after being vaccinated has lifted significantly, with Just over half of respondents (54%) believed that they could.

A third (32%, down from 36% in April) are unsure.

Passing on the virus after being vaccinated	March 2021	April 2021	May 2021
I won't be able to	20%	20%	14%↓
I will still be able to	40%	44%	54%↑
Not sure	40%	36%	32%

72% of those who have already been vaccinated said they would still be able to pass the COVID-19 virus on to others. 13%, however, believed they would not be able to.

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All ethnic groups except Māori (who, in April, were already more likely than average to believe that they will still be able to pass the virus on after vaccination) recorded an increase in understanding that they could still pass the virus on:

Passing on the virus after being vaccinated	ETHNIC GROUP						
	Asian	Indian	Māori	NZ Euro-pean/ Pakeha	Other Euro-pean	Pasifika	Other
I won't be able to	17%↓	14%↓	12%	14%↓	16%	25%	16%
I will still be able to	57%↑	58%↑	53%	54%↑	65%↑	43%	50%↑
Not sure	26%↓	28%	35%	32%↓	20%↓	32%	33%↓

Groups who are relatively **more and less likely** to say they will be able to pass the virus are as follows:

Can pass on the virus after being vaccinated	May 2021 Results
Total	**54%**
Already vaccinated	72% ↑
Aged 18 to 24 years	66% ↑
Technical/ mechanical/ skilled workers	65% ↑
Of Other European descent	65% ↑
Have a postgraduate degree	64% ↑
In Group Two for the vaccine rollout	64% ↑
Professionals /senior government officials	62% ↑
Business proprietor/ self-employed	62% ↑
Retired/ superannuitant	46% ↓
Of Pasifika descent	43% ↓
No formal school qualification	43% ↓
Unemployed/ beneficiary	37% ↓

11.4 Do people have to pay for the vaccination?

Growth continues in the percentage of all New Zealanders 16+ who understand that the COVID-19 vaccine is free - Almost nine out of ten (88%) said 'it's free for everyone'.

COVID-19 vaccines offered in New Zealand are	March 2021	April 2021	May 2021
Free for everyone	74%	81%	88%↑
I will have to pay for it		4%	2%
Not sure		15%	10%↓

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10% overall are unsure, and this is higher among those who are unlikely to get a COVID-19 vaccine.

COVID-19 vaccines offered in New Zealand are	LIKELIHOOD TO GET VACCINE						
	Definitely	Most Likely	Likely	Unlikely	Most Unlikely	Definitely not	Unsure
Free for everyone	95%	89%	81%	78%	77%	69%	71%
I will have to pay for it	0%	1%	7%	1%	0%	8%	3%
Not sure	5%	10%	12%	21%	23%	23%	26%

By ethnicity, the results are as follows. Māori, who in April had an above average understanding that the vaccine is free, have not increased their belief and are now below average.

COVID-19 vaccines offered in New Zealand are	ETHNIC GROUP						
	Asian	Indian	Māori	NZ Euro-pean/ Pakeha	Other Euro-pean	Pasifika	Other
Free for everyone	91%↑	94%↑	83%	89%↑	83%	87%↑	88%↑
I will have to pay for it	1%	2%	4%	1%	5%	0%	12%
Not sure	8%	5%	13%	9%	12%	13%	0%

Those who are relatively **more and less likely** to say its free for everyone include:

Vaccination is free for everyone	May 2021 Results
Total	**88%**
Already vaccinated	96% ↑
Aged 65 to 74 years	96% ↑
Teacher/ nurse/ police or other trained service worker	95% ↑
Definitely will get vaccinated	95% ↑
Professionals /senior government officials	94% ↑
Of Other European descent	83% ↓
No formal school qualification	81% ↓
From the Waikato DHB area	77% ↓
Unemployed/ beneficiary	77% ↓
Labourer/ agricultural or domestic worker	76% ↓

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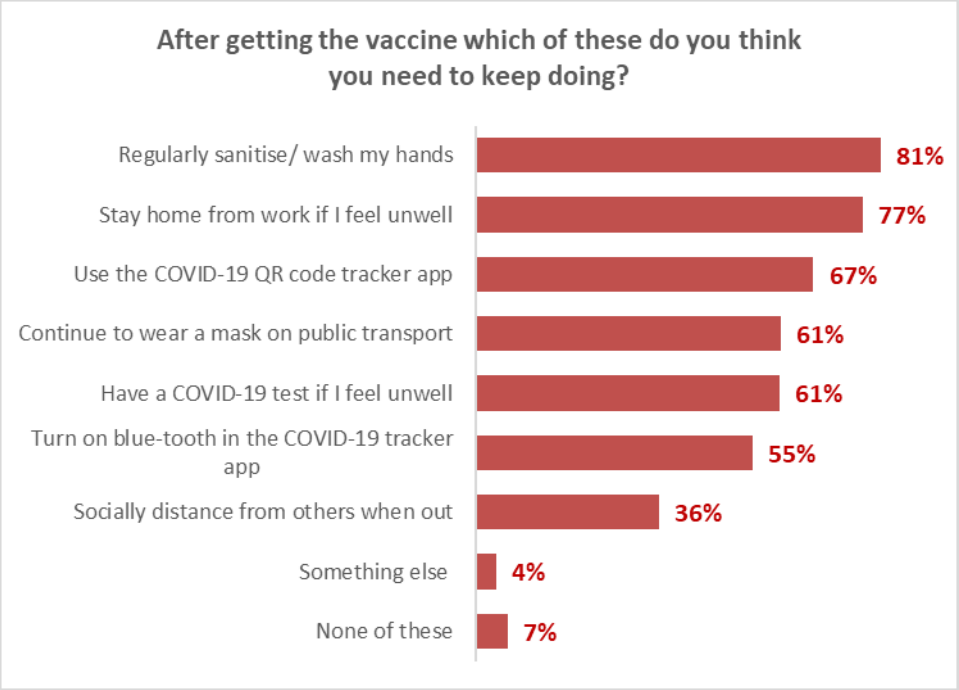
11.5 What do people need to keep doing after getting vaccinated?

All those surveyed were asked what they need to keep doing after they are vaccinated.

Around eight out of ten said they need to keep:

- Regularly sanitising/ washing their hands (81%)
- Staying home from work if they feel unwell (77%)



By contrast, only around four out of ten (36%) said they need to keep socially distancing when out. These people were more likely to be in vaccine groups 2 (46%) and 3 (40%) than in vaccine groups 1 and 4.

Note that only two-thirds of respondents felt they needed to continue to use the COVID-19 tracker app after they had been vaccinated.

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Māori, Pasifika, "Other Europeans" and "Other" ethnic group respondents are less likely than average to be conscious of regularly sanitising/washing their hands. Māori were also less likely than average to feel that they needed to continue to wear a mask on public transport, as were "Other Europeans".

Asian respondents were less likely than average to feel that they needed to turn on blue tooth in the COVID-19 tracker app.

After getting the vaccine which of these do you think you need to keep doing?	ETHNIC GROUP						
	Asian	Indian	Māori	NZ Euro-pean/ Pakeha	Other Euro-pean	Pasifika	Other
Regularly sanitise/ wash my hands	80%	84%	74%	83%	71%	75%	64%
Stay home from work if I feel unwell	80%	84%	71%	79%	67%	79%	45%
Use the COVID-19 QR code tracker app	67%	76%	64%	68%	60%	67%	64%
Continue to wear a mask on public transport	71%	69%	55%	61%	54%	67%	46%
Have a COVID-19 test if I feel unwell	57%	81%	52%	61%	56%	60%	52%
Turn on blue-tooth in the COVID-19 tracker app	48%	61%	52%	56%	53%	57%	52%
Socially distance from others when out	46%	57%	41%	34%	32%	44%	33%
None of these	4%	3%	11%	6%	17%	7%	16%
Something else you'll keep doing	2%	3%	4%	5%	8%	2%	5%

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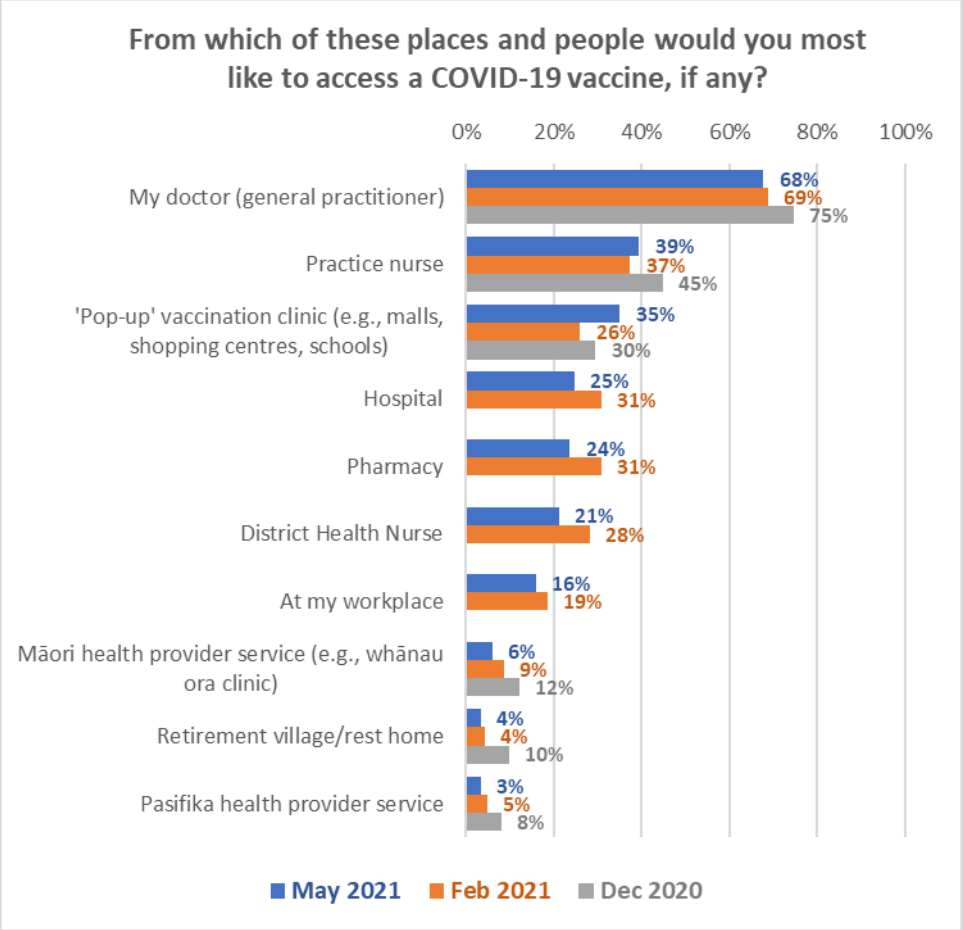
12. Access points for COVID-19 vaccine

As in February 2021 and December 2020, respondents were asked where and from whom they would you most like to access a COVID-19 vaccine, if any.

The top 3 access points from both February and December remain the top 3, with “my doctor” clearly the most important to respondents. This may be significant given that some DHBs currently are not involving all GPs.



The percentage of respondents who selected "none of these" increased as likelihood to get a COVID-19 vaccine decreased.

From which of these places and people would you most like to access a COVID-19 vaccine, if any?	LIKELIHOOD TO GET VACCINE						
	Definitely	Most Likely	Likely	Unlikely	Most Unlikely	Definitely not	Unsure
None of these - I won’t take a COVID-19 vaccine	0%	0%	3%	16%	49%	76%	1%

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"My doctor (general practitioner)" is ranked highest for all ethnic groups, except "Other". Note that each ethnic group has different acceptable access point priority order, as shown in the following table.

ETHNIC GROUPS						
Asian	Indian	Māori	NZ European/ Pakeha	Other European	Pasifika	Other
My doctor (general practitioner) (73%)	My doctor (general practitioner) (81%)	My doctor (general practitioner) (67%)	My doctor (general practitioner) (66%)	My doctor (general practitioner) (72%)	My doctor (general practitioner) (67%)	Hospital (47%)
Hospital (30%)	Hospital (39%)	Practice nurse (30%)	Practice nurse (43%)	Practice nurse (43%)	'Pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (42%)	My doctor (general practitioner) (39%)
Practice nurse (28%)	'Pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (27%)	Māori health provider service (e.g., whānau ora clinic) (27%)	'Pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (38%)	'Pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (33%)	Hospital (30%)	At my workplace (27%)
District Health Nurse (28%)	Practice nurse (23%)	'Pop-up' vaccination service (e.g., malls, shopping centres, schools) (26%)	Pharmacy (26%)	District Health Nurse (24%)	Practice nurse (30%)	Practice nurse (26%)
'Pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (25%)	At my workplace (22%)	Hospital (20%)	Hospital (23%)	Hospital (23%)	At my workplace (25%)	District Health Nurse (24%)
Pharmacy (20%)	District Health Nurse (19%)	District Health Nurse (19%)	District Health Nurse (20%)	Pharmacy (23%)	District Health Nurse (21%)	Pharmacy (22%)
At my workplace (8%)	Pharmacy (17%)	Pharmacy (14%)	At my workplace (17%)	At my workplace (22%)	Pasifika health provider service (16%)	'Pop-up' vaccination clinic (e.g., malls, shopping centres, schools) (22%)
Retirement village/rest home (4%)	Māori health provider service (e.g., whānau ora clinic) (2%)	At my workplace (9%)	Māori health provider service (e.g., whānau ora clinic) (4%)	Māori health provider service (e.g., whānau ora clinic) (5%)	Māori health provider service (e.g., whānau ora clinic) (16%)	

As identified in the February 2021 report, more vaccination options are likely to be needed for Pasifika people than other ethnicities. In particular, they have an above-average preference for vaccination at their workplace.

Results indicate that hospitals in the Northland, Lakes, Bay of Plenty, Hawkes Bay, Whanganui, MidCentral, Wairarapa, West Coast and South Canterbury DHB areas could have above-average pressure on their vaccination services.

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There are also higher than average expectations of District Health Nurses providing vaccinations among respondents living in the Northland, Auckland, Lakes, Tairawhiti, Wairarapa and West Coast DHB areas.

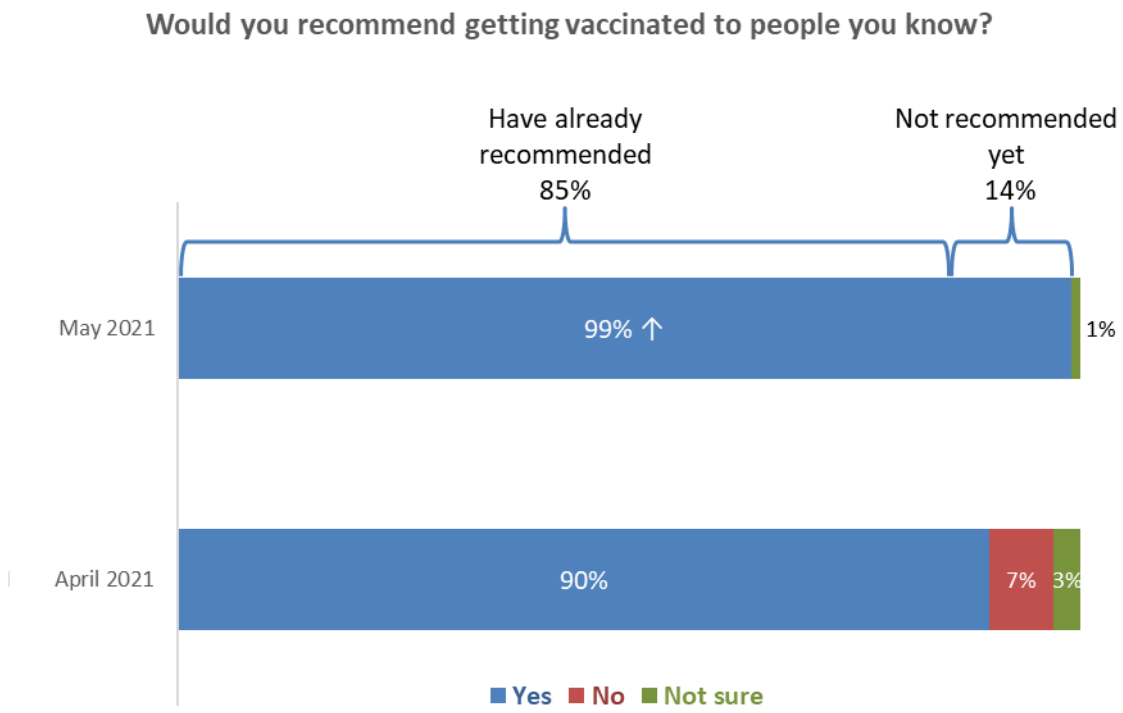
13. Attitudes of those who have already been vaccinated

186 people in the survey had received at least one vaccine dose – this represents 12.5% of the total. Results for this group are presented below with comparison to the April 2021 survey results.

13.1 Would you recommend getting vaccinated to people you know?

99% of those who had been vaccinated said they would recommend getting vaccinated to the people they know. This is up from 90% in the previous month.

85% of those surveyed said they had already recommended getting vaccinated to someone they know (this was not asked in the April survey)



Base: April n=117, May n=186

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13.2 To whom would you recommend getting vaccinated?

In both the April and May surveys, three quarters said they would recommend getting vaccinated to everyone (76% in late April and 75% in late May).

The only substantial change from April to May is a reduction in those who said they would recommend to some people but not to everyone (17% in late April cf. 12% in late May).

	April 2021	May 2021
I would recommend it to everyone	76%	75%
I would recommend it to some people but not to everyone	17%	12% ↓
I would only recommend it to my friends and family	11%	13%
I would only recommend it to people I work with	5%	4%
I would not recommend it to anyone	2%	3%
Base (already vaccinated and would recommend) n=	110	185

Multiple choices allowed

13.3 Would you like information from the Ministry of Health to help you advise others to get the COVID-19 vaccine?

A reduction was recorded in the percentage of those would like information from the Ministry of Health to help them advise others (37% in April cf. 29% in May).

	April 2021	May 2021
Yes	37%	29% ↓
No	48%	55% ↑
Not sure	14%	16%
Base (already vaccinated and would recommend) n=	108	182

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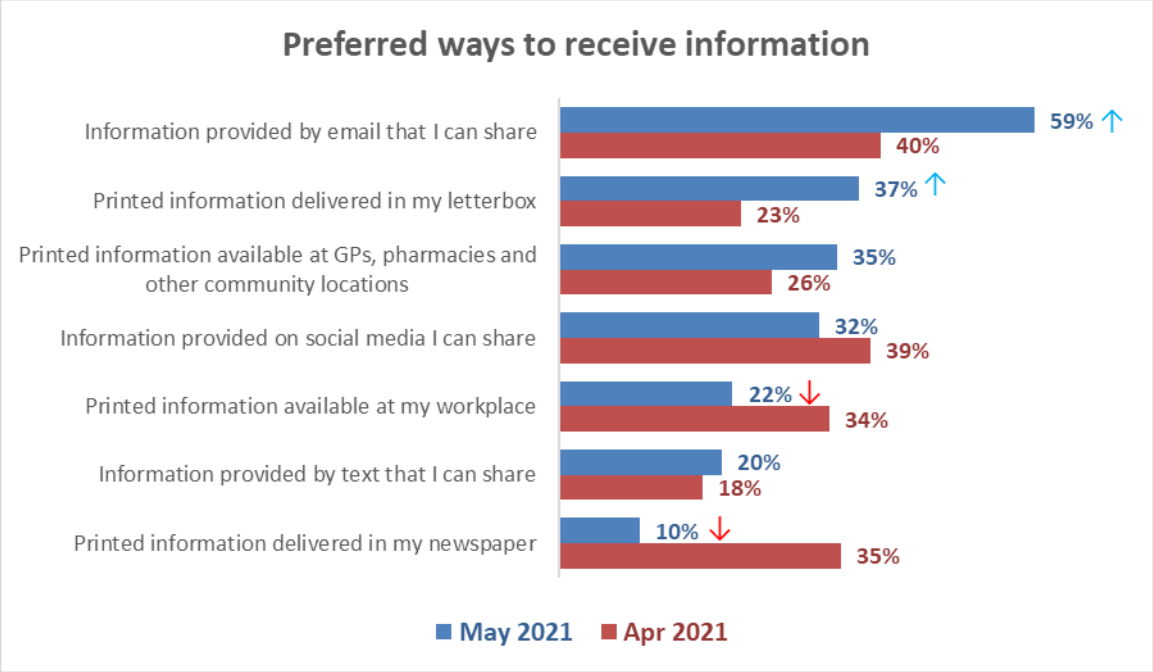
13.4 How would you like to get any information you could pass on?

Those who said they would like information to help advise others get the COVID-19 vaccine selected the ways they would prefer to receive this information from a list of options.

Main preferred options from the current survey are:

- Email (59%).
- Printed information in my letterbox (37%).
- Printed information available at GPs, pharmacies and other community locations (35%).

These results including the changes from the last wave should be treated with caution because of the small sample sizes involved. However, in both surveys, email is the most preferred method.



Base (already vaccinated and would like MOH information): Late April n=40, Late May n=60.
The totals add to more than 100% as multiple responses were allowed.

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14. Vaccine Group 3

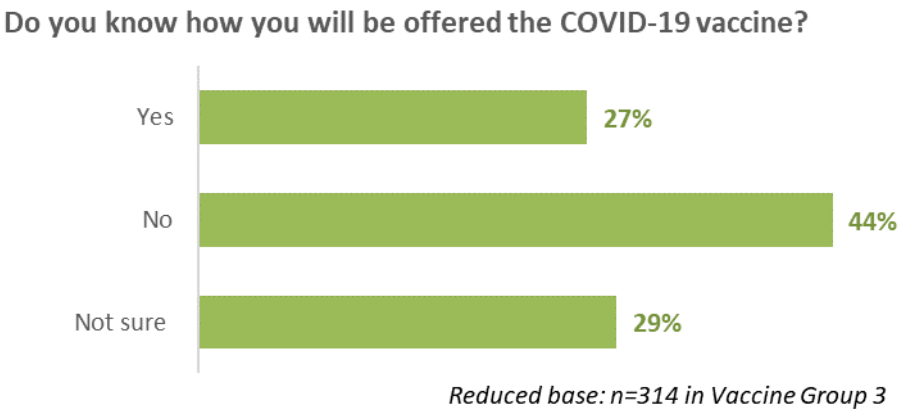
Respondents in Vaccine Group 3 (those who are at risk of getting very sick from COVID-19) who had not yet been vaccinated were asked if they knew how they would be offered the vaccine and when that would happen.

In general, awareness of how and when the vaccine would be offered was relatively low.

14.1 Knowledge of how the COVID-19 vaccine will be offered

This question was asked of n=314 people in Vaccine Group 3.

A little over a quarter (27%) said they know how they will be offered the vaccine.



Those who are relatively **more and less likely** to say 'Yes' include:

I know how I will be offered the COVID-19 vaccine	May 2021 Results
Total	**27%**
Aged 65 to 74 years	39% ↑
Retired/ superannuitant	36% ↑
Definitely will get vaccinated	34% ↑
Aged 55 to 64 years	20% ↓

Results are only shown for sub-groups with sample sizes of n=50 or more people

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Details of how people say they will be offered the vaccine

The 86 people who said they know how they will be offered the vaccine were asked to say how this will be offered in their own words. Analysis of the comments from 81 people who reponded to this question is provided below.

How the vaccine will be offered	%
Will be contacted by my doctor/medical centre	25%
Will be contacted by the DHB or health department	15%
Already booked or notified	13%
Will be contacted by email/letter	12%
Will be contacted by txt message	12%
Will be contacted (unspecified)	7%
Contacted by phone call	5%
Other	15%

Multiple responses were allowed

Examples of 'other' comments include:

"At the Retirement Village." (Female, Aged 45-54 years)

"Via FENZ as I have been a member since 1970." (Male, Aged 55-54 years)

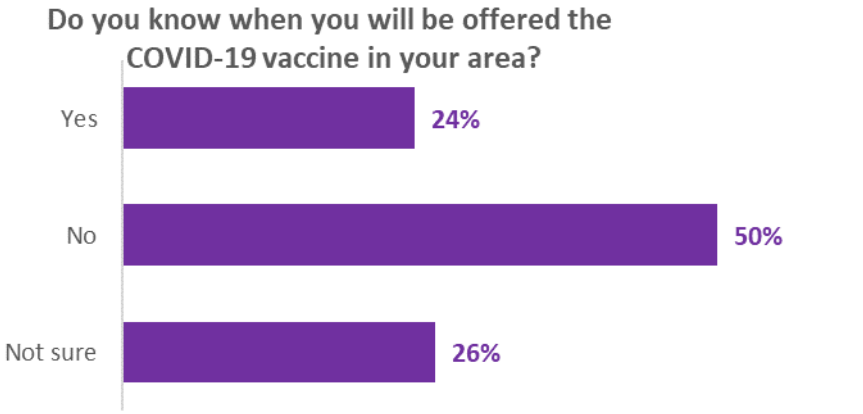
"You are given an NHI number." (Male, Aged 35-44 years)

"Message via patient portal." (Male, Aged 25-34 years).

14.2 Knowledge of when the COVID-19 vaccine will be offered

This question was again asked of n=314 people in Vaccine Group 3 - those who are at risk of getting very sick from COVID-19.

Slightly less than a quarter (24%) of those in this Vaccine Group know when they will be vaccinated in their area.



Reduced base: n=314 in Vaccine Group Three

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Those who are relatively **more and less likely** to say 'Yes' include:

I know when I will be offered the COVID-19 vaccine	May 2021 Results
Total	**24%**
Have an undergraduate degree	35% ↑
Aged 65 to 74 years	32% ↑
Will definitely get vaccinated	30% ↑
Females	28% ↑
Males	19% ↓
Identify as disabled	16% ↓

Results are only shown for sub-groups with sample sizes of n=50 or more people

Details of when people say they will be offered the vaccine

The 77 people who said they know when they will be offered the vaccine in their area were asked to be more specific about when this will happen. The comments from 67 people who gave a time period are broken down below. NB. 7 people made comments that were off-topic, such as "*from my GP*", so these comments are excluded from the analysis.

	%
Specific months:	
May 2021	15%
June 2021	43%
June or later	4%
July 2021	18%
More general comments:	
Already booked	16%
Other comments	4%

The 3 'other' comments were as follows:

"When it becomes available, I will be contacted." (Male, 65-74 years).

"I am waiting for my confirmed date." (Female, 55-64 years).

"Can get it currently [May 2021] *but haven't been personally contacted."* (Female, 65-74 years).

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15. Attitudes to children aged 12 to 15 being vaccinated

15.1 Would you allow the children for whom you are the primary caregiver to take the vaccine?

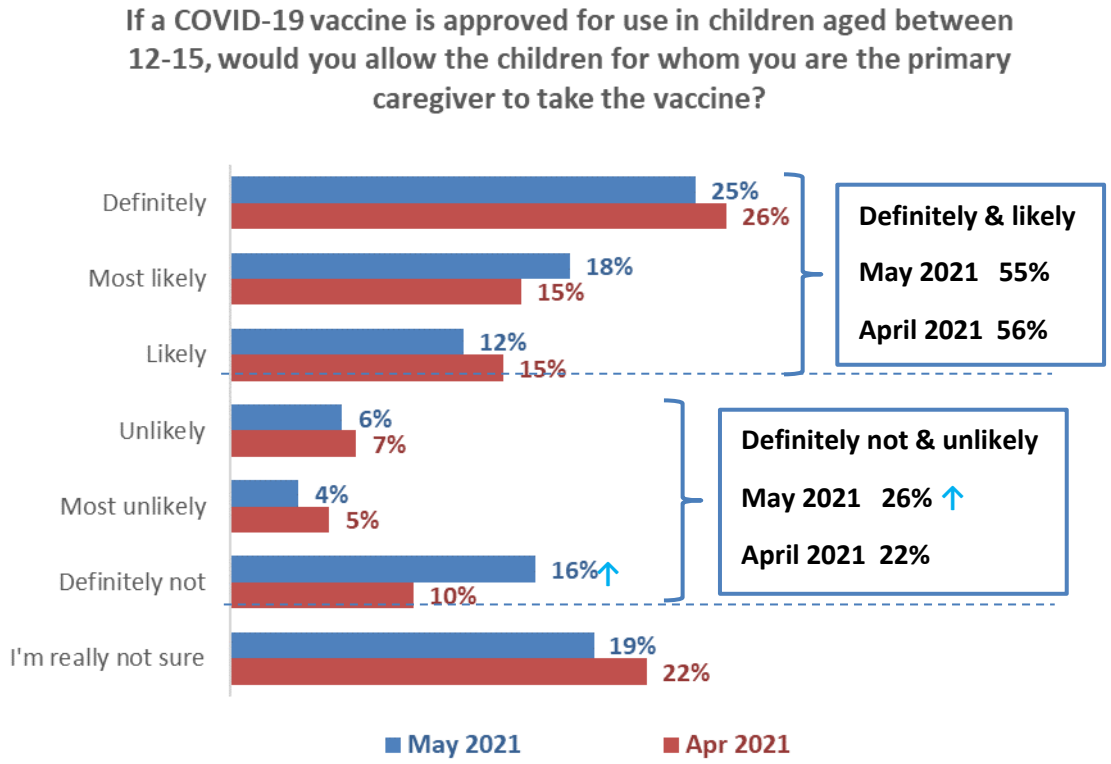
All those interviewed were asked '*If a COVID-19 vaccine is approved for use in children aged between 12-15, would you allow the children for whom you are the primary caregiver to take the vaccine?*'

The following chart shows responses to this question recorded in the April and May surveys. N.B. To provide an 'apples with apples' comparison between these two surveys, those who said the question does not apply because they are not a caregiver for a child in that age group, are excluded from the sample bases.

Positive responses: 55% said 'definitely' or 'likely' to allow children of this age to be vaccinated, very similar to the April result (56%)

Negative responses: 'Definitely not' and 'unlikely' responses are up from 22% in April to 26% in May. This is driven by a sharp increase in 'definitely not' answers (up from 10% to 16%).

Not sure responses: These responses dropped slightly from 22% in April to 19% in the latest survey.



Base (caregivers of children aged 12 to 15): April survey n=584, May survey n=479

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15.2 Reasons for being unsure or unlikely to encourage COVID-19 vaccination for children aged 12 to 15

Primary caregivers of children aged 12 to 15 who said they were unsure or unlikely to encourage these children to be vaccinated were asked to select their reasons for this from a list presented to them. The table below compares the May results with those recorded in the April survey.

As shown in the table, the main response – 'I would need to be assured about its safety in children' – remains at much the same level as in April (mentioned by 59%).

However, 3 reasons increased appreciably:

- It is too soon to see whether there are any long-term effects for children from the vaccine (now 50% cf. 43% in April).
- I'd rather wait and see if others who have taken it suffer any side effects (28% cf. 21%)
- I don't see the need for children to take a COVID-19 vaccine (23% cf. 13%).

Reasons for being unsure or unlikely	April 2021	May 2021	Difference % points
I would need to be assured about its safety in children	60%	59%	- 1
It is too soon to see whether there are any long-term effects for children from the vaccine	43%	50%	+ 7 ↑
I'd rather wait and see if others who have taken it suffer any side effects	21%	28%	+ 7 ↑
I don't see the need for children to take a COVID-19 vaccine	13%	23%	+ 10 ↑
I'd like to be able to talk with my health provider about it	22%	17%	- 4
I personally don't take any vaccine	7%	10%	+3
I don't trust any vaccine	12%	10%	- 2
I don't allow the children I care for to take any vaccine	10%	9%	- 1
I'd like to make sure that others who need it can get it before my child/children	9%	6%	- 3
Children I care for have an existing health condition which prevents them from taking a vaccine	8%	5%	- 3
Because of my religious beliefs		4%	- 1
Children I care for have had a bad experience in the past when taking a vaccine	5%	3%	- 2
I won't be able to afford a COVID-19 vaccine for the children I care for	3%	2%	- 1
Some other reason	10%	11%	+ 1
Base n=	222	194	

Multiple answers were allowed

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A selection of the 'other reasons' mentioned are as follows:

"International experts are discussing the proposal to administer vaccines to 5–12-year-olds to take it without parental consent, and the impact this will have on fertility rates when the children develop sexually." (Male, 65-74 years)

"In most cases the vaccines are more dangerous than COVID-19." (Male, Aged 75 or more)

"Unlike other childhood vaccinations, the COVID "vaccine" is far more dangerous to young children than the disease it is supposed to prevent." (Male, Aged 65-74)

"It is not a vaccine but a gene jab - so no benefit for anyone." (Male, Aged 75 or more)

"It is reckless to give them the vaccination when it doesn't prevent transmission. There are more effective and less harmful ways to treat the illness should they get it." (Female, Aged 45-54)

"We don't know about any possible side effects." (Male, Aged 65-74)

"Shocking to use an experimental vaccine on kids." (Female, Aged 55-64)

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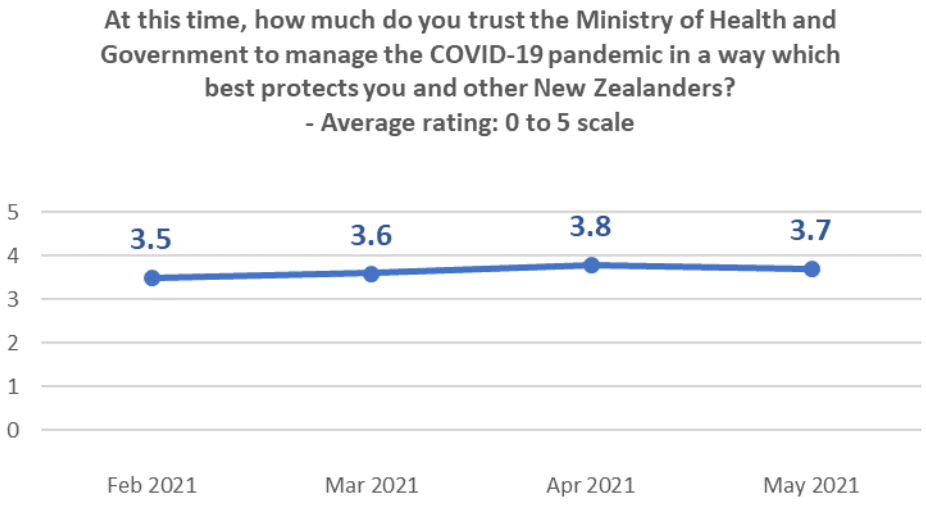
16. Trust in the management of the pandemic and rating of the vaccination response

Continuing the series of measures from February, March and April 2021, all respondents were asked:

- how much they trusted the Ministry and Government to manage the COVID-19 pandemic in a way which best protected them and other New Zealanders; and
- how they thought the vaccination response to the COVID-19 pandemic was being managed in New Zealand.

The average results are shown below:

The average trust in the Ministry of Health and Government to manage the pandemic has steadied:



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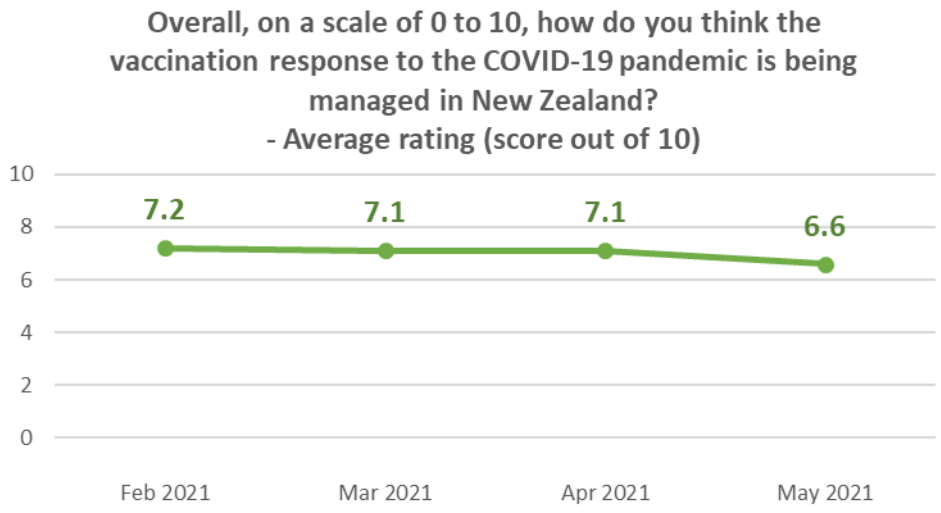
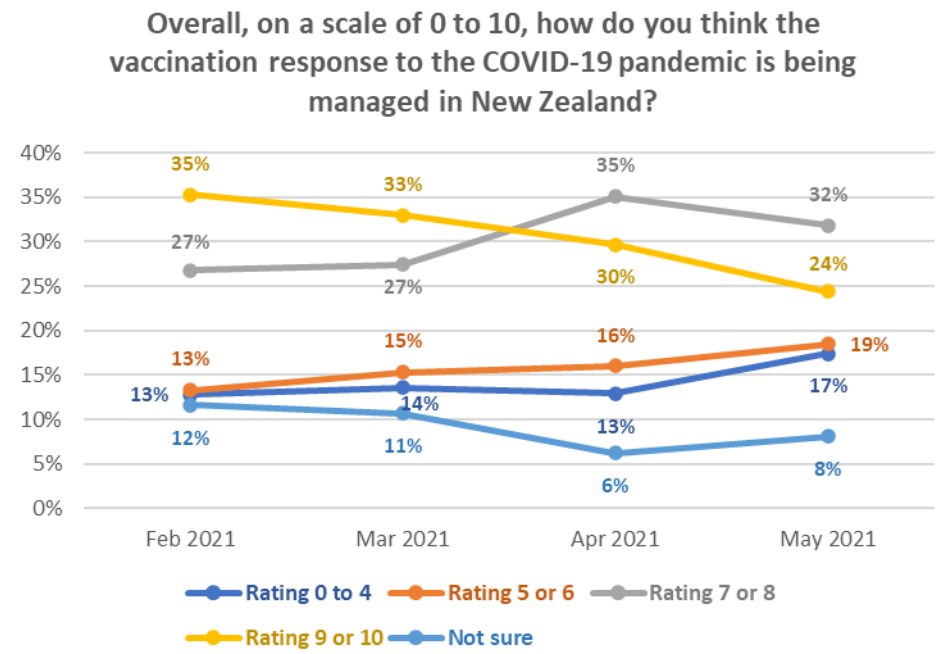
- The average rating of the vaccination response has declined, with the decline being statistically significant:



Note the ongoing decline, illustrated in the following chart, in the percentage rating the vaccine response at 9 or 10.

Up until April there was limited change in the percentage rating the vaccine response at 0 to 4 or 5 to 6. This has now changed.



Lowest average ratings come from vaccine group 1 and those in any vaccine group who believe that they may have to wait to get their vaccine.

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APPENDIX 1 - SAMPLE

1,234 people aged 18+ who are members of the nationwide HorizonPoll and Horizon Research Māori panels and two third-party respondent panels (used for source diversity), responded to this online survey between 28 and 30 May 2021.

The total sample is weighted on age, gender, employment status, ethnicity, personal income and region to match the adult population at the most recent census.

At a 95% confidence level, the survey has a maximum margin of error of ±2.8% overall.

Contact

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APPENDIX 2 -PROFILE BY LIKELIHOOD TO GET A COVID-19 VACCINE

DEMOGRAPHIC PROFILE: Likelihood to get a COVID-19 vaccine	All	Will you get a COVID-19 vaccine?							
		Definitely	Most likely	Likely	Unlikely	Most unlikely	Definitely not	I'm not sure	Already vaccinated
	100%	42%	18%	8%	4%	3%	6%	7%	13%
GENDER									
Male	49%	53%	48%	58%	43%	25%	52%	35%	42%
Female	51%	46%	52%	41%	57%	75%	48%	65%	58%
Gender diverse	1%	1%	0%	1%	0%	0%	0%	0%	0%
AGE GROUP									
16-17 years	6%	4%	7%	22%	6%	0%	5%	11%	3%
18-24 years	14%	12%	18%	16%	6%	6%	18%	10%	18%
25-34 years	10%	8%	11%	15%	18%	7%	6%	16%	10%
35-44 years	17%	15%	20%	21%	10%	23%	16%	16%	16%
45-54 years	17%	14%	21%	12%	44%	25%	21%	21%	12%
55-64 years	16%	20%	10%	4%	10%	22%	16%	20%	16%
65-74 years	13%	15%	12%	8%	8%	9%	8%	5%	18%
75 years or over	7%	11%	2%	1%	0%	8%	12%	2%	8%
AVERAGE AGE (years)	**46.3**	**50.4**	**42.0**	**35.0**	**44.6**	**51.2**	**47.2**	**42.2**	**47.8**
% difference from overall average		+8.7%	--9.4%	--24.6%	--3.7%	+10.4%	+1.8%	--8.9%	+3.2%

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DEMOGRAPHIC PROFILE: Likelihood to get a COVID-19 vaccine	All	Will you get a COVID-19 vaccine?							
		Definitely	Most likely	Likely	Unlikely	Most unlikely	Definitely not	I'm not sure	Already vaccinated
	100%	42%	18%	8%	4%	3%	6%	7%	13%
HOUSEHOLD INCOME									
Less than $20,000 per year	11%	8%	16%	10%	20%	13%	10%	17%	7%
Between $20,001 and $30,000 per year	11%	11%	7%	11%	21%	11%	21%	13%	11%
Between $30,001 and $50,000 per year	16%	18%	17%	12%	7%	22%	8%	8%	17%
Between $50,001 and $70,000 per year	12%	10%	13%	13%	6%	16%	20%	8%	11%
Between $70,001 and $100,000 per year	15%	13%	14%	19%	20%	14%	13%	20%	15%
Between $100,001 and $150,000 per year	14%	15%	15%	16%	12%	2%	9%	13%	13%
Between $150,001 and $200,000 per year	5%	7%	3%	1%	2%	1%	3%	0%	9%
More than $200,000 per year	4%	5%	1%	6%	3%	6%	0%	4%	4%
Don't know/ prefer not to say	14%	13%	15%	12%	9%	16%	16%	17%	13%
AVERAGE HOUSEHOLD INCOME ($)	**$73,620**	**$80,160**	**$65,230**	**$76,110**	**$61,430**	**$61,720**	**$57,550**	**$66,520**	**$81,420**
% difference from overall average		+8.9%	--11.4%	+3.4%	--16.6%	--16.2%	--21.8%	--9.6%	+10.6%
PERSONAL INCOME									
Less than $20,000 per year	39%	39%	44%	39%	38%	42%	44%	40%	28%
Between $20,001 and $30,000 per year	14%	14%	10%	17%	18%	27%	15%	13%	14%
Between $30,001 and $50,000 per year	21%	20%	22%	17%	21%	10%	20%	24%	28%
Between $50,001 and $70,000 per year	6%	6%	5%	9%	3%	2%	6%	5%	8%
Between $70,001 and $100,000 per year	6%	8%	4%	4%	4%	5%	4%	4%	9%
Between $100,001 and $150,000 per year	3%	4%	3%	2%	4%	0%	2%	1%	2%
Between $150,001 and $200,000 per year	1%	1%	1%	0%	1%	0%	0%	0%	1%
More than $200,000 per year	0%	0%	0%	1%	1%	0%	0%	0%	1%
Don't know/ prefer not to say	10%	9%	11%	10%	9%	14%	10%	13%	9%
AVERAGE PERSONAL INCOME ($)	**$33,820**	**$36,070**	**$30,120**	**$33,320**	**$34,810**	**$23,370**	**$28,140**	**$28,050**	**$39,100**
% difference from overall average		+6.7%	--10.9%	--1.5%	+2.9%	--30.9%	--16.8%	--17.1%	+15.6%

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DEMOGRAPHIC PROFILE: Likelihood to get a COVID-19 vaccine	All	Will you get a COVID-19 vaccine?							
		Definitely	Most likely	Likely	Unlikely	Most unlikely	Definitely not	I'm not sure	Already vaccinated
	100%	42%	18%	8%	4%	3%	6%	7%	13%
EMPLOYED									
Yes	65%	61%	65%	75%	63%	49%	72%	70%	69%
No	35%	39%	35%	25%	37%	51%	28%	30%	31%
OCCUPATION									
Professional/Senior Government Official	7%	9%	5%	7%	3%	2%	2%	3%	8%
Business Manager/Executive	5%	5%	3%	8%	9%	3%	3%	0%	6%
Business Proprietor/Self-employed	6%	6%	5%	9%	0%	4%	15%	1%	3%
Teacher/Nurse/Police or other trained service worker	10%	11%	6%	3%	6%	9%	5%	7%	21%
Clerical/Sales Employee	13%	13%	15%	12%	18%	10%	12%	14%	7%
Farm Owner/manager	1%	1%	0%	1%	1%	0%	1%	5%	0%
Technical/mechanical/Skilled Worker	9%	9%	16%	4%	10%	1%	7%	10%	8%
Labourer/Agricultural or Domestic Worker	6%	3%	8%	12%	5%	9%	18%	8%	4%
Home-maker (not otherwise employed)	7%	6%	5%	3%	22%	27%	9%	3%	4%
Student	13%	10%	15%	30%	3%	7%	6%	10%	18%
Retired/Superannuitant	13%	18%	7%	4%	4%	12%	14%	13%	16%
Unemployed/Beneficiary	7%	6%	13%	4%	8%	14%	0%	12%	1%
Don't know/prefer not to say	4%	3%	3%	3%	12%	4%	8%	14%	4%

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		Definitely	Most likely	Likely	Unlikely	Most unlikely	Definitely not	I'm not sure	Already vaccinated
	100%	42%	18%	8%	4%	3%	6%	7%	13%
	17%	21%	12%	25%	12%	8%	19%	5%	17%
HIGHEST QUALIFICATION									
Postgraduate degree (Masters' degree or PhD)	13%	18%	10%	11%	2%	13%	7%	5%	12%
Undergraduate (Bachelor) degree	25%	29%	28%	22%	11%	9%	11%	20%	28%
Vocational qualification (includes trade certificates, diplomas etc)	24%	21%	27%	16%	30%	18%	38%	26%	25%
University Bursary or 7th form	8%	10%	7%	11%	3%	6%	3%	5%	10%
Sixth form/UE/NCEA Level 2	11%	7%	7%	19%	32%	19%	14%	10%	15%
NCEA Level 1 or School Certificate	10%	7%	14%	9%	12%	28%	13%	16%	3%
No formal school qualification	7%	7%	7%	3%	11%	4%	10%	11%	7%
Prefer not to say	3%	2%	1%	9%	0%	4%	4%	9%	0%
	29%	24%	28%	39%	47%	53%	30%	30%	28%
HOUSEHOLD TYPE									
Single person household	14%	14%	14%	11%	10%	19%	23%	13%	15%
Couple only (no children/none at home)	27%	34%	21%	19%	20%	18%	23%	20%	31%
Two parent family, one or two children at home	29%	29%	35%	39%	25%	29%	16%	24%	25%
Two parent family, three or more children at home	8%	5%	4%	19%	17%	7%	18%	14%	8%
One parent family, one or two children at home	7%	4%	13%	3%	15%	14%	10%	7%	4%
One parent family, three or more children at home	1%	0%	1%	1%	7%	1%	0%	2%	0%
Flatting or boarding - not a family home	8%	9%	8%	4%	3%	1%	3%	8%	11%
Extended family	4%	5%	3%	2%	2%	7%	1%	3%	6%
Prefer not to say	2%	1%	2%	2%	1%	4%	6%	10%	0%
Children in Household	**45%**	**38%**	**53%**	**62%**	**63%**	**51%**	**44%**	**46%**	**37%**

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		Definitely	Most likely	Likely	Unlikely	Most unlikely	Definitely not	I'm not sure	Already vaccinated
	100%	42%	18%	8%	4%	3%	6%	7%	13%
ETHNIC GROUP									
Asian	7%	4%	8%	17%	5%	5%	0%	13%	6%
Indian	4%	6%	5%	5%	4%	0%	1%	2%	4%
Maori	12%	10%	10%	9%	21%	10%	13%	18%	20%
NZ European/Pakeha	65%	69%	64%	61%	61%	70%	66%	62%	59%
Other European (includes Australian, South African, British etc)	6%	7%	6%	3%	5%	13%	13%	0%	6%
Pasifika	4%	4%	6%	3%	5%	2%	5%	5%	3%
Other	1%	1%	0%	2%	0%	0%	2%	0%	1%

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	100%	42%	18%	8%	4%	3%	6%	7%	13%
DHB									
Northland	4%	3%	2%	1%	6%	0%	5%	12%	10%
Waitemata	16%	14%	16%	23%	25%	23%	23%	3%	16%
Auckland	10%	12%	12%	11%	4%	2%	4%	3%	9%
Counties-Manukau	8%	6%	9%	9%	4%	6%	3%	12%	11%
Waikato	11%	12%	7%	11%	2%	8%	11%	23%	8%
Lakes	1%	1%	0%	0%	0%	0%	0%	3%	1%
Bay of Plenty	5%	4%	4%	0%	18%	0%	7%	1%	8%
Tairawhiti	1%	1%	1%	0%	3%	2%	0%	1%	0%
Taranaki	3%	3%	2%	1%	6%	4%	6%	4%	1%
Hawke's Bay	3%	2%	2%	6%	6%	0%	4%	5%	2%
Whanganui	1%	1%	0%	0%	0%	1%	1%	0%	2%
Midcentral	4%	5%	4%	4%	4%	18%	0%	2%	1%
Hutt	3%	4%	2%	3%	2%	6%	0%	3%	1%
Capital and Coast	7%	10%	7%	3%	2%	6%	9%	5%	3%
Wairarapa	2%	3%	1%	2%	0%	3%	0%	2%	1%
Nelson-Marlborough	3%	2%	3%	3%	5%	5%	7%	0%	6%
West Coast	1%	1%	2%	0%	0%	0%	4%	1%	3%
Canterbury	11%	9%	14%	20%	7%	7%	7%	9%	9%
South Canterbury	2%	1%	3%	0%	0%	0%	3%	5%	1%
Southern	7%	7%	9%	3%	5%	11%	8%	8%	8%
North Island	**76%**	**80%**	**69%**	**74%**	**83%**	**78%**	**72%**	**77%**	**73%**
Auckland	**33%**	**33%**	**36%**	**43%**	**34%**	**30%**	**30%**	**18%**	**36%**
Upper North Island excluding Auckland	**20%**	**20%**	**13%**	**12%**	**26%**	**8%**	**23%**	**38%**	**27%**
Lower North Island	**23%**	**28%**	**19%**	**19%**	**23%**	**40%**	**19%**	**21%**	**11%**
South Island	**24%**	**20%**	**31%**	**26%**	**17%**	**22%**	**29%**	**23%**	**27%**

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	100%	42%	18%	8%	4%	3%	6%	7%	13%
VACCINE GROUP									
Group 1 - Border and MIQ workers and the people they live with	4%	1%	0%	6%	0%	1%	0%	1%	21%
Group 2 - High-risk frontline workers and people living in high-risk places	10%	4%	7%	5%	11%	1%	6%	8%	41%
Group 3 - People who are at risk of getting very sick from COVID-19	29%	37%	22%	16%	39%	15%	19%	21%	26%
Group 4 - Everyone in New Zealand aged 16 and over	58%	57%	71%	73%	50%	82%	76%	70%	12%

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