

Fully and Meaningfully: Engaging with Métis Citizens to Increase COVID-19 Vaccine Understanding and Uptake



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Manitoba Métis Federation –

Health & Wellness Department

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A Message from the Minister of Health & Wellness

FOREWORD FROM MINISTER FRANCES CHARTRAND

It is with gratitude and a deep sense of purpose that I address the resilient and vibrant Red River Métis Citizens, our esteemed staff, and our invaluable funders through these words.

The idea of distinctions-based healthcare is crucial to the Manitoba Métis Federation. It recognizes the history and culture of Indigenous peoples, including Red River Métis Citizens, and acknowledges systemic inequalities. The MMF is dedicated to providing culturally sensitive and respectful distinctions-based healthcare to Red River Métis Citizens. We aim to nurture a healthier and prosperous future for our Community and create relevant programs and support for our Citizens.



Our Red River Métis Citizens have shown time and again their commitment to the betterment of our Community's health and well-being. Your voices, stories, experiences, and active participation in our research are the foundation upon which we build a future of improved health outcomes and holistic well-being.

To the remarkable staff from the Health and Wellness Department who facilitate research and program development for our Citizens I extend my deepest thanks. It is through your efforts that we have been able to gather meaningful data, provide a safe space for dialogue, and offer a platform for the voices of our Red River Métis Citizens to be heard.

No endeavor of this magnitude can be achieved without the support of those who believe in our vision. To our esteemed funders, your belief in our mission has enabled us to take strides toward implementing distinctions-based healthcare that not only acknowledges the unique needs of our Community but also paves the way for equitable and accessible services.

In closing, I want to reiterate my deepest gratitude to each and every one of you. Your participation, dedication, and support have transformed research from a mere endeavor into a beacon of hope and progress.

With heartfelt appreciation,

Minister Frances Chartrand

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Disclosure

The results and conclusions in this report are those of the authors and no official endorsement by the University of Manitoba or other parties is intended or should be inferred. For the purposes of this study, approvals were obtained from the Manitoba Métis Federation to work with Métis in various regions and the Faculty of Medicine's Research Ethics Board at the University of Manitoba for approval of the research design and activities.

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Abbreviations

CBPR: Community Based Participatory Research

HWD: Health & Wellness Department

KT: Knowledge Translation

MMF: Manitoba Métis Federation

UNDRIP: United Nations Declaration on the Rights of Indigenous Peoples

MMFSGRIA: Manitoba Métis Federation Self-Government Recognition and Implementation Agreement

Executive Summary

Vaccine hesitancy has become a widespread topic of concern in the wake of the COVID-19 pandemic. The Health and Wellness Department of the Manitoba Métis Federation developed the *Fully and Meaningfully: Engaging with Red River Métis Citizens to Increase COVID-19 Vaccine Understanding and Uptake* project to identify causes of vaccine hesitancy and provide efforts to reduce it in the Red River Métis population. The project aimed to explore our Citizens's attitudes towards COVID-19 immunization and construct a strategy to communicate public health messaging while improving vaccination rates among the Red River Métis.

This Community-based participatory research (CBPR) initiative involved travelling to the seven MMF Regions to directly engage with Red River Métis Citizens and provide Community-based COVID-19 education, promotion, and outreach to address vaccine hesitancy. A self-administered, cross-sectional survey was used to measure vaccine hesitancy and assess socio-demographic characteristics, vaccination status, COVID-19 knowledge, and the perceived effectiveness and safety of the COVID-19 vaccines. Additionally, multiple region-specific focus group discussions were held to understand Red River Métis Citizens' concerns regarding vaccination. Data collected from the survey were coded and analyzed using descriptive statistics. Additionally, the audio recordings from the focus groups were transcribed for content analysis to categorize repeating comments and identify overarching themes. Seven themes were identified as contributing factors to vaccine hesitancy:

1. Red River Métis Citizens did not have enough information to make an informed COVID-19 vaccination decision.
2. Information fatigue.
3. Scarcity of vaccination resources in northern and remote areas.
4. Overuse of complicated technical terms and medical jargon to describe vaccines.
5. Fear-based dialogue surrounding the COVID-19 pandemic.
6. Some Citizens did not feel they had a choice in receiving the COVID-19 vaccines.
7. Broken trust in the healthcare system.

A mixed-methods CBPR approach grounded in the Red River Métis Life Promotion Framework was used to minimize bias and to fully capture participants' voices and perspectives. Using a CBPR approach captures the voices, context, and worldviews of Red River Métis Citizens and supports the MMF-HWDs overarching objective of building self-determination in research. The present projects outcomes will help direct culturally informed policy and program development for Red River Métis Citizens and may also inform such work for other Indigenous and under-served populations. Indeed, using the information collected through this project, a future strategy outline was created to impact future vaccine campaigns. This strategy includes utilizing the MMF website to streamline accurate and updated public health information, using in-person information-sharing methods to meet the needs of northern and rural communities, and equipping the MMF Mobile Health Units with tools to effectively distribute accurate public health information.

Section 1: Introduction

1.1 Project Context

Given that there is little distinction-based Indigenous research, as most Indigenous research uses a pan-Indigenous approach, this project aims to gather information that is specific to Red River Métis. We focus on enhancing vaccine confidence by understanding and addressing the root causes of vaccine hesitancy, thus improving the health of Red River Métis Citizens. The findings of this study will be used to inform policy decisions and guide future research to benefit the mental health and wellness of Red River Métis Citizens.

1.2 The Red River Métis

The Red River Métis have a distinct identity and share a common history, entirely our own, in the great western plains centered in the Red River Valley of West Central North America. It is the Indigenous collective - made up of Citizens and individuals entitled to be Citizens - located within Manitoba and elsewhere inside and outside of Canada. In this regard, it transcends the common meaning of on-site specific “brick and mortar” community such as a village or a settlement. The Red River Métis are comprised of a common identity, culture, and history and, among other things, interconnected political, social, entrepreneurial, economic, and kinship networks.

In 1869, the National Committee of the Red River Métis, led by President John Bruce and Secretary Louis Riel, rightly asserted Métis People’s jurisdiction and authority over the whole of the Métis Homeland in what was then commonly referred to as the North-West Territory. Through negotiations with Canadian representatives, the Territory entered Canada. In 1870, the Red River Métis became the Founder of the province of Manitoba and Canada’s negotiating partner in Confederation.

After governing the province peacefully, the Red River Métis faced a Reign of Terror resulting in many being widely dispersed across the Homeland and beyond, mainly westward and northward in search of peace and security. To this day, the Red River Métis bear the consequences of the broken promise of the Manitoba Act, 1870, the

Reign of Terror, and the dispersal as well as the Residential and Day Schools, and the Sixties Scoop. To this day, Red River Métis remain overrepresented in the foster care system and among the unemployed, the incarcerated, and the chronically ill.

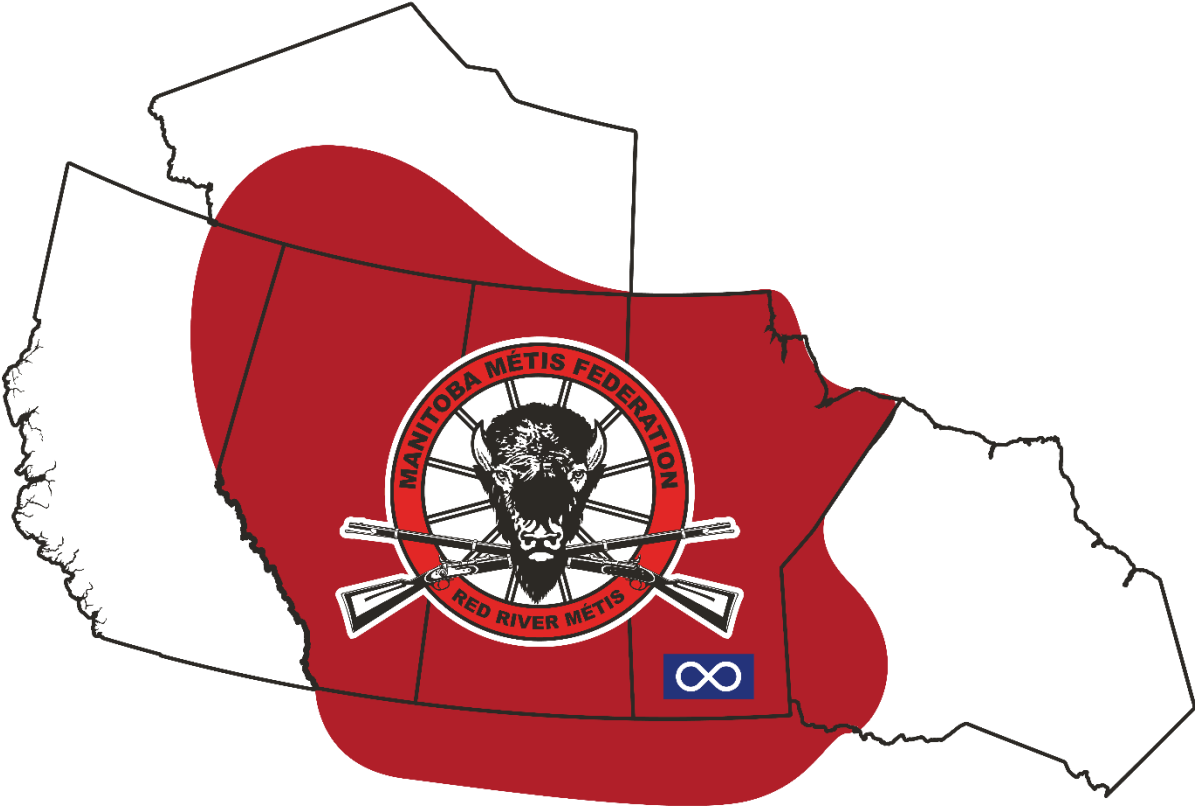


Figure 1.2.1. National Homeland of the Red River Métis.

1.3 The Manitoba Métis Federation (MMF)

Decades after the Reign of Terror and the dispersal, The Red River Métis People began to regroup and reorganize with the aim to improve the lives of Red River Métis Citizens historically treated unfairly. Nearly 100 years after the National Committee of the Red River convened to assert jurisdiction, the Red River Métis used the only available avenue for representation and incorporated the MMF as a non-profit in 1967. The current Governance structure is pictured in figure 1.3.1.

In 1981, MMF launched a court case on behalf of the Red River Métis claiming that the federal government had failed to implement the land grant provision set out in section 31 of the Manitoba Act, 1870, as per the honour of the Crown. Thirty-two years later, in 2013, the Supreme Court of Canada determined that the federal government was constitutionally obligated by section 31 to fulfill its promise to the Red River Métis. Responding to this decision, in 2016, Canada and MMF signed a memorandum of understanding as well as the November 15, 2016, *Framework Agreement for Advancing Reconciliation to advance exploratory talks on reconciliation*.

In 2021, Canada and the MMF signed the *Manitoba Métis Self-Government Recognition and Implementation Agreement (SGRIA)* to “recognize, support, and advance the exercise of the Manitoba Métis’[also known as the Red River Métis] right to self-determination, and its inherent right to self-government recognized and affirmed by section 35 and protected by section 25 of the Constitution Act, 1982, in a manner that is consistent with the United Nations Declaration on the Rights of Indigenous Peoples, through a constructive, forward-looking, and reconciliation-based arrangement that is premised on rights recognition and implementation.” This same year, Canada’s *United Nations Declaration on the Rights of Indigenous Peoples Act* (UNDRIP; the Act, 2016) received royal assent and came into force. Both the Act and the SGRIA commit Canada to working with the MMF to implement the UN Declaration, to advance reconciliation with the Red River Métis, and to advance the Red River Métis right to self-government and self-determination.

Today, to be a Citizen of the Manitoba Métis Federation one must:

- 1) Self-identify as Red River Métis.
- 2) Show an ancestral connection to the Historic Red River Métis Community; and
- 3) Be accepted by the contemporary Red River Métis Community.

Further, the Canadian endorsement of the *UN Declaration on the Rights of Indigenous Peoples* serves as a significant step that highlights Indigenous people’s entitlement to self-determination, culture, and health. This declaration stresses the importance of their

participation in health decisions. Despite these advancements, Canada's fragmented health care system has historically yielded inconsistent services for Red River Métis, a situation further exacerbated by a lack of distinction-based health legislation. To bridge this gap and honor Indigenous rights, a dedicated focus on creating distinctions-based health legislation to support Red River Métis health is crucial. These historical reasons result in the creation and persistence of the MMF-HWD.

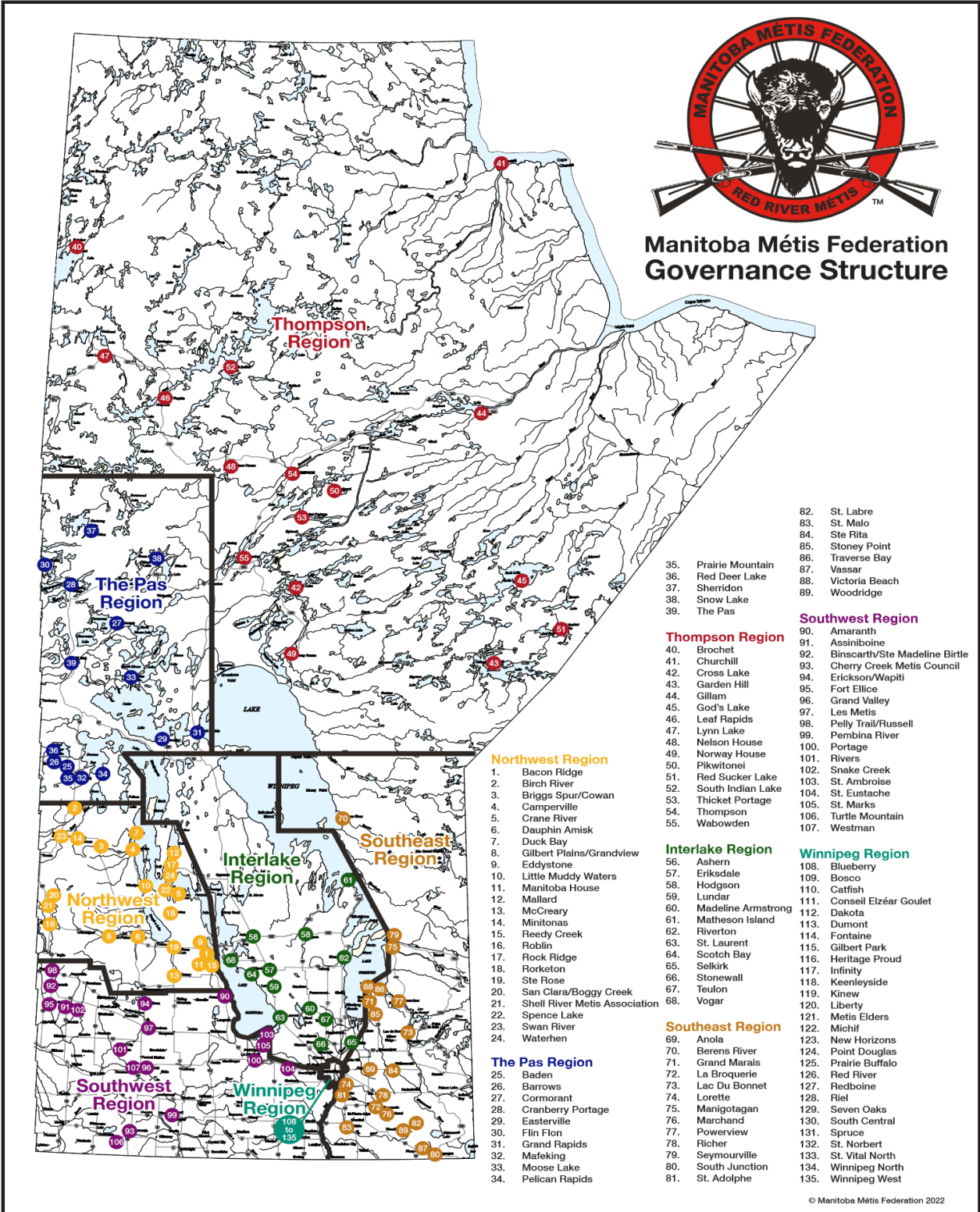


Figure 1.3.1. MMF governance structure within Manitoba, 2022

1.4 Manitoba Métis Federation–Health & Wellness Department

In 2005 after deliberation on the historical poor health of Red River Métis, the MMF established the Health and Wellness Department (HWD). Today, the HWD continues the fight to improve the overall health and wellness of Red River Métis Citizens. The HWD is committed to developing and using culturally grounded, distinctions-based, holistic knowledge. This commitment aims to enhance the quality of life and wellbeing of Red River Métis through prevention, health service delivery, research, and innovation.

The HWD consists of a dedicated team, structured into four functional areas of work:

Health Research: Established in 2005, this team conducts qualitative research to grasp the viewpoints and encounters of Red River Métis Citizens regarding their health and access to health care. The aim is to generate culturally appropriate and safe Red River Métis-specific health insights by gathering lived experiences through consultations, group discussions, and individual interviews.

Clinical Services: Includes Nurses, Registered foot care Nurses, Registered dietitians and Support staff that serve Red River Métis Citizens by implementing strategies developed by the health research and policy and health information team to improve their health.

Policy & Health Information: This was created in January 2022 to develop Red River Métis-specific information to support policies, programs, and services for our Citizens.

Community Programming: Formed in 2022, the team empower the MMF-HWD to tackle citizens' health requirements via diverse programs. Through Community engagement and attentive listening, they customize health initiatives to ensure relevance, accessibility, and a positive impact on the overall well-being of all Citizens.

All these areas are overseen by our leadership & management team, consisting of our Director, Olena Kloss, and Minister Frances Chartrand. Over the past few years, MMF's HWD has significantly expanded its capacity to address the health-related needs of Red River Métis Citizens. Throughout the challenging times of the Covid-19 pandemic, the HWD actively supported Citizens by establishing vaccine clinics, bolstering mental

health services, and adapting to virtual engagements to stay connected with the Red River Métis Community. Our commitment to collaboration with Red River Métis Communities has led us to grow, acquire knowledge, and discover innovative ways to support the health of Red River Métis people.

At MMF's HWD, we also offer Health Consultations that provide an opportunity for Citizens to actively participate in shaping the Department's policies and initiatives. We highly value their knowledge, expertise, and input on various health-related topics, including developing federal health legislation, access to medical transportation services, vaccine hesitancy, mental health, and addictions. By participating in our focus group discussions, our Citizens provide vital insights on how MMF can improve healthcare for Red River Métis Citizens. These healthcare gaps result from long-standing government assertions, denying the existence of Red River Métis rights, considering any potential rights extinguished through scrip, categorizing assistance as charity, and disavowing fiduciary responsibility to our citizens.

Section 2: Preliminaries

2.1 Background and Previous Knowledge

Vaccine hesitancy can be defined as the delay in acceptance or refusal of vaccination despite the availability of services (MacDonald, 2015). In many cases, vaccine hesitancy is context-specific and can vary depending on the vaccine offered. This type of hesitancy exists on a continuum with total acceptance on one end of the spectrum and complete refusal on the other. Vaccine hesitancy also includes individuals who choose to be immunized but remain uncertain of their decision to do so. Overall, any resistance to receiving a vaccine can be categorized as vaccine hesitancy.

The complex perception of vaccine administration is a product of a multifaceted interplay of factors that contribute to the emergence of knowledge gaps and misunderstandings. The spread of misinformation regarding vaccine components, safety, and effectiveness further undermines public confidence. A lack of understanding surrounding immunization principles, including concepts like herd immunity and booster shots, adds further complexity. Cultural and religious convictions wield substantial influence over vaccine perceptions, while longstanding skepticism toward healthcare establishments nurtures reluctance.

Compounded by language barriers, limited access to healthcare facilities and vaccines creates significant disparities in vaccination rates. The spread of misinformation through social media exacerbates these challenges. Concerns regarding potential side effects, vaccine hesitancy influenced by peers, and unclear public health communication collectively contribute to the complexity of this issue. Addressing these knowledge gaps requires a holistic strategy that includes accurate information dissemination, cultural sensitivity, educational campaigns and initiatives dedicated to rebuild trust within communities and healthcare frameworks.

While vaccine hesitancy has been a public health challenge for decades, the COVID-19 pandemic has brought this issue to the forefront of concern. As new SARS-CoV-2 variants emerged (WHO, 2023) and new vaccines came to the market, it was

paramount for the MMF-HWD to keep a healthy balance in communicating what is known and acknowledging the uncertainties that remain. In recognition of the many gaps in COVID-19 research and knowledge and in an effort to cater to the health needs of Red River Métis Citizens, funding was secured from the Public Health Agency of Canada (PHAC) through the Immunization Partnership Fund (IPF) to explore attitudes toward COVID-19 immunization among Red River Métis living in Manitoba and construct a distinction-based Red River Métis-specific strategy to communicate public health messaging and improve vaccine uptake.

From ongoing research, Red River Métis COVID-19 infection rates were lower during 2020-2021 when compared with all other Manitobans (Nickel et al., 2022). However, in the second year of the pandemic, this reversed with Red River Métis Citizens experiencing higher infection rates. In terms of vaccine uptake, initially, there was no difference between Red River Métis and all other Manitobans. This changed when the Manitoba Métis Federation (MMF) was able to offer immunizations to its Citizens, and the province broadened its vaccination parameters. After this occurred, Red River Métis received their COVID-19 vaccine about 1.3 (95% CI 1.9-0.6) days sooner than all other Manitobans. Female Red River Métis received their vaccines 1.7 (2.6-0.8) days sooner than all other female Manitobans; differences were non-significant among males. Nickel et al.'s work also found that Métis with 2+ comorbidities (e.g., Heart disease, Diabetes etc.) receive their vaccine 2.9 (5.3-0.5) days sooner than all other Manitobans with 2+ comorbidities.

The need to study vaccine hesitancy and health within the Red River Métis Community is highlighted by persistent inequalities affecting vulnerable populations during health crises. Therefore, the present study aims to understand the specific factors influencing Red River Métis vaccination perspectives, allowing for distinctions-based interventions and equitable healthcare policies to be developed. By amplifying the voices of Red River Métis Citizens, we can help address the intersections of racial identity and socio-economic challenges, advancing a more inclusive and effective approach to public health.

2.2 Objectives

The overarching goal of this project is to boost vaccine confidence by understanding and addressing the root causes of vaccine hesitancy in the Red River Métis population. This project aims to synthesize distinctions-based and culturally relevant evidence for developing strategies to increase vaccine confidence and effectiveness in the Red River Métis Community.

The specific objectives of this study were to:

1. Develop strategies both to understand and address vaccine hesitancy among Red River Métis Citizens and increase their willingness to receive COVID-19 vaccinations.
2. Support Community, and distinctions-based COVID-19 education, promotion, and outreach to Red River Métis Citizens in Manitoba, and possibly to Citizens living elsewhere throughout the National Homeland and beyond.
3. Build capacity for evidence-based vaccination communication through open discussions with Red River Métis Citizens regarding their vaccine concerns.
4. Tailor vaccine information and messaging to align with the unique education levels, experiences, and circumstances of the Red River Métis Community, ensuring relevance and resonating with diverse audiences.
5. Incorporate the project's findings into strategies to guide future pandemic planning by creating Community-specific strategies for future public health campaigns.

Section 3: Methods and Methodology

3.1 Methods

Environmental Scan

A brief environmental scan was performed prior to implementing the research plan to identify COVID-19 vaccination prevalence, context, services and supports currently available for Red River Métis Citizens.

A mixed-methods approach was used to collect insight on vaccine hesitancy from Red River Métis Citizens.

Cross-sectional survey

A cross-sectional survey was used to assess participants' socio-economic status, current vaccination status, willingness to receive vaccination, and opinions on COVID-19 vaccines. The survey contained 34 questions, of which 22 used a Likert scale to measure the opinions of the participants on COVID-19 vaccines. Descriptive statistics were then performed to analyze this data. Demographic information such as age, marital status, MMF Region, vaccination status, household income, and gender were categorized, and percentages were calculated for each category. The Likert scale responses were categorized into ranges, spanning from vaccine confidence (e.g., "I believe the COVID-19 vaccines are safe") to vaccine hesitancy (e.g., "I distrust the COVID-19 vaccines because they were developed too quickly"), and the responses were calculated into percentages.

Focus Group Discussions

Focus groups with participants were conducted to collect insight into any concerns regarding information related to the COVID-19 vaccines, the effects of the COVID-19 virus, and any other questions regarding inoculation. These focus groups entailed group-style discussion, where participants were free to raise questions and concerns, and were encouraged to share their thoughts. A facilitator guided the discussions by asking predetermined vaccine hesitancy-related questions, while a notetaker

documented the participants' responses. The focus groups were audio-recorded and transcribed, and these transcriptions were used for thematic analysis.

3.2 Limitations

Limited Sample Size: Participation in this study was voluntary and factors such as geographical barriers, time commitment, mobility challenges, and financial capacity may have influenced the recruitment of a larger study cohort. Ideally, recruiting a larger study population with greater representation of underrepresented demographics would be preferable. This includes increasing participants from The Pas, Interlake, and Thompson Regions, including more individuals who identify as male, and involving more participants in the age range of 18 to 34. These limitations should be considered when interpreting the research findings. Specifically, the limited sample size of this study hinders the generalizability of the findings to the broader Red River Métis population.

Red River Métis Beyond Borders: It is important to note that the Red River Métis population extends outside the borders of Manitoba. However, there is no information to date on the comparative health status and associated risk factors for Red River Métis Citizens living outside the provincial borders. This research project only recruited participants from the seven MMF Regions in Manitoba. As such, further research is required with Red River Métis Citizens residing outside of Manitoba. Acknowledging this shortcoming is especially important as the MMF's Beyond Borders Taskforce identified a need for diverse healthcare support for Red River Métis living outside of Manitoba. It was also noted that Red River Métis specific healthcare should be based on rights recognition and government-to-government relationships (Beyond Borders Taskforce, 2022). As per UNDRIP, future research and engagement initiatives should aim to extend its scope to recruit participants from across the Homeland irrespective of today's colonial borders.

Section 4: Findings

4.1 Survey Data

The data retrieved included one hundred and forty-four participants (n=144) who completed the survey; 79% (n=114) identified as female and 20% (n=29) identified as male. The age of participants ranged from 18 to 85, with a median age of 60.5 years old. Of the seven MMF Regions, 11% (n=16) were from the Interlake Region, 16% (n=23) were from the Northwest Region, 20% (n=29) were from the Southeast Region, 22% (n=22) were from the Southwest Region, 10% (n=14) were from The Pas Region, 1% (n=2) were from the Thompson Region, and 26% (n=37) were from the Winnipeg Region (**Table 4.1.1**).

4.1.1. Demographic and Socio-economic Characteristics of Red Metis Participants

Demographics	Percent (%)	n
Gender/Sex:		
Female	79.17	114
Male	20.14	29
Age Range:		
00-34	9.71	13
35-44	13.43	18
45-54	13.43	18
55-64	22.39	30
65+	41.04	55
Region:		
Interlake	11.11	16
Northwest	15.97	23
Southeast	20.14	29
Southwest	15.28	22
The Pas	9.72	14
Thompson	1.39	2
Winnipeg	25.69	37
Prefer not to say	0.69	1

Demographics	Percent (%)	n
Total Annual Household Income*:		
\$1-\$4,999	0.69	1
\$5,000-\$9,999	2.08	3
\$10,000-\$14,999	3.47	5
\$15,000-\$19,999	4.17	6
\$20,000-\$24,999	4.17	6
\$25,000-\$29,999	6.94	10
\$30,000-\$39,999	9.03	13
\$40,000-\$49,999	11.81	17
\$50,00-\$59,999	6.94	10
\$60,000-\$69,999	11.11	16
\$70,000-\$79,999	4.17	6
\$80,000 and over	25	36
Don't know	2.08	3
Prefer not to say	7.64	11

Regarding vaccination status, 77% (n=111) of the participants already received a COVID-19 vaccine, 12% (n=17) were likely to receive a booster vaccine, and 6% (n=9) were unlikely to receive a booster vaccine (**Table 4.1.2**).

4.1.2. Participants' Intent to Receive a COVID-19 Booster Vaccine

Do you intend to receive a booster vaccine?	Percent (%)	n
Already received booster	77.08	111
Likely to receive booster	11.81	17
Unlikely to receive booster	6.25	9
Prefer not to say	4.86	7

Likert scale questions were used to poll Citizens' opinions on their confidence, trust, and safety in COVID-19 vaccines. When asked about their confidence in the COVID-19 boosters' safety, 20% (n=29) of participants did not show agreement. As well, 24% (n=35) reported they distrusted COVID-19 vaccines "because they were developed too quickly".

While most participants indicated they were already vaccinated or were likely to be vaccinated, that should not be interpreted as an absence of hesitancy regarding receiving a COVID-19 vaccine. Indeed, vaccine hesitancy exists on a spectrum, so it is possible for many to still get vaccinated and not be completely confident in their decision to do so. Many participants, 78% (n=112), showed agreement with the statement "By getting a booster against COVID-19, I am helping to protect the health of my Community" (Figure 4.1.1). Thus, it is possible that some participants were swayed to get vaccinated to protect those around them rather than stemming from an innate desire to receive the vaccine.

In addition, 50% (n=72) of participants were hesitant to trust the pharmaceutical companies that produce the COVID-19 vaccines, and 63% (n=91) were hesitant to trust media outlets, including social media and cable news outlets. All these factors indicate some hesitancy about receiving the COVID-19 booster vaccines (Figure 4.1.2).

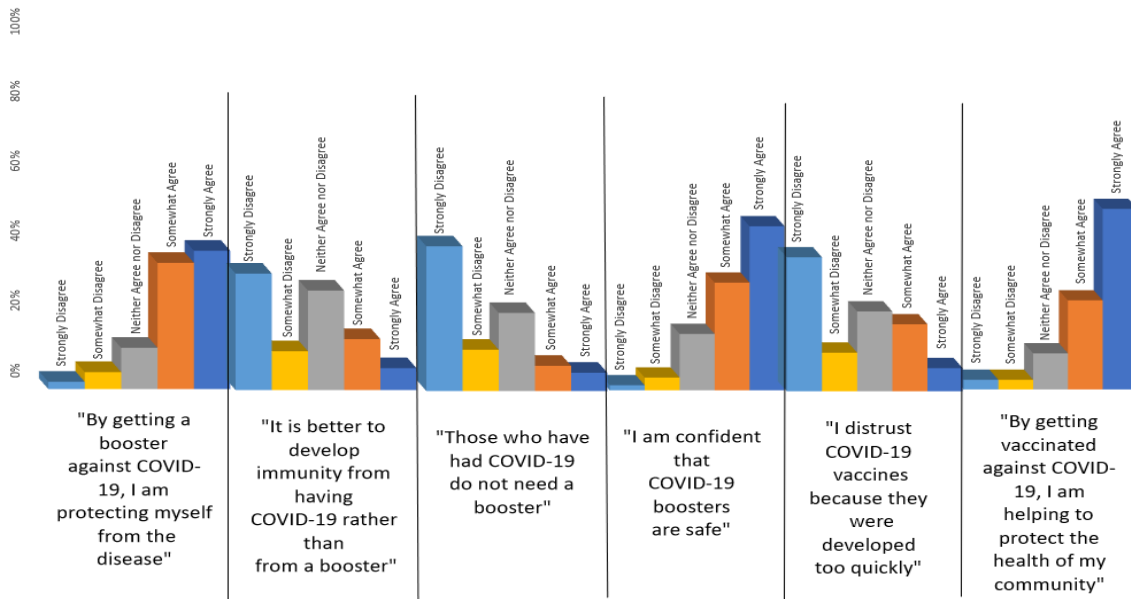


Figure 4.1.1 Agreement/Disagreement Statement Responses of the Red River Métis Participants

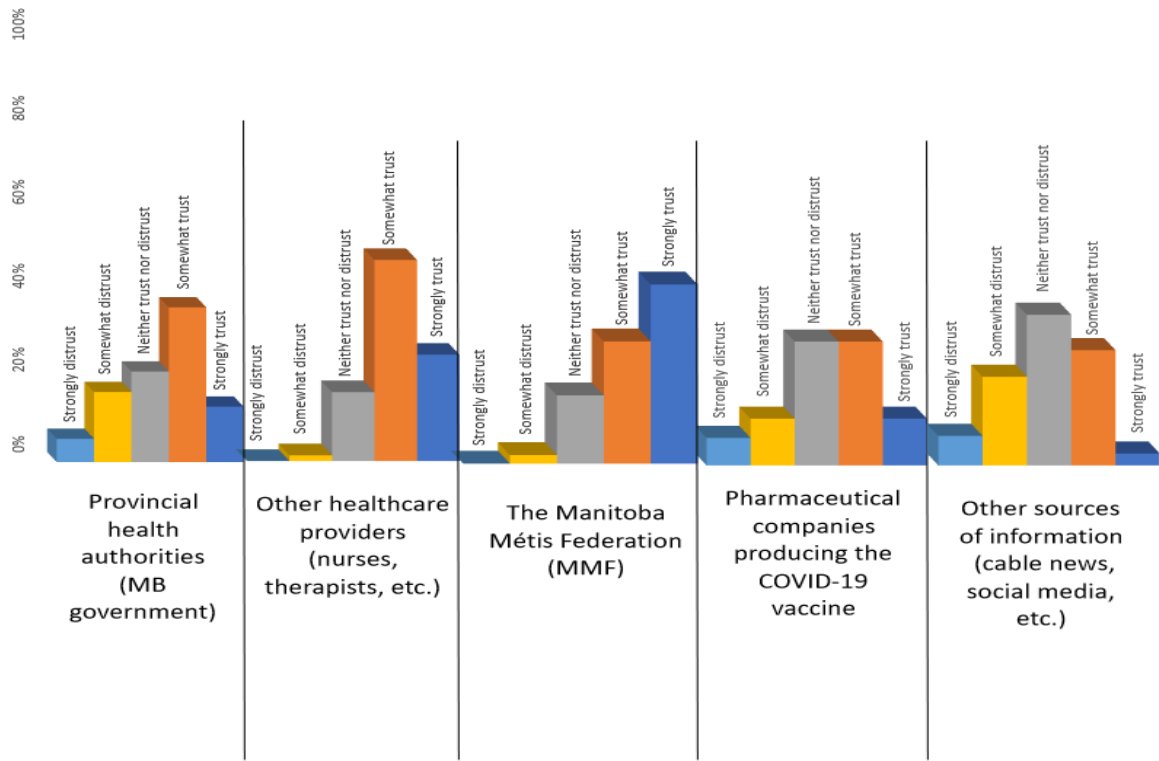


Figure 4.1.2 Trust/Distrust statement responses of Red River Métis Participants

4.2 Thematic Analysis of Focus Group Discussions

Participants were asked predetermined questions regarding their opinions about COVID-19 vaccinations and responses were recorded and transcribed. Content analysis was used to categorize repeating comments and identify overarching themes. The following seven themes were identified:

4.2.1 Red River Métis Citizens did not have enough credible information to make an informed COVID-19 vaccination decision

“We need more information on the side effects of vaccines, especially for people who are immune compromised, pregnant, or have chronic health issues and how it affects them in comparison to people who are healthy”

*Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group – MMF’s
Winnipeg Region*

Many Citizens voiced concerns that they did not have enough information to make an informed decision to become vaccinated. The COVID-19 pandemic started at the end of 2019, and since then, there have been consistent changes and updates made to the information about the virus as research was being published which made the pandemic difficult to navigate. The Red River Métis participants expressed that not having enough reliable information about the COVID-19 vaccines made them hesitant to become vaccinated. Participants felt there was not enough information about the vaccines, such as how many boosters will be needed to be protected, if the vaccine/boosters prevent COVID-19 infections, and what side effects may come with getting the vaccine. Indeed, there was a general agreement that participants wanted to know more about the potential risks of getting the vaccines including, the long-term side effects of the different vaccines, how the vaccines can affect individuals with other medical conditions, such as diabetes, multiple sclerosis, heart disease etc., and who are most at risk for having negative side-effects after getting vaccinated. Additionally, Red River Métis Citizens identified gaps in of COVID-19 regional and municipal statistics and the available educational resources.

4.2.2 Information fatigue

“Some of the available information is contradictory and confusing.... trying to filter through the misinformation in the news and social media is difficult.”

*Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group – MMF’s
Northwest Region*

Participants reported inconsistencies in information coming from different media outlets such as cable news stations, social media platforms, and different medical professionals. It became difficult for many to sift through all the available information and figure out what is true and what is false. Specifically, social media became a breeding ground for misinformation, inconsistencies, and personal opinions.

4.2.3 Scarcity of Vaccination Resources in Northern and Remote Areas

“I wish there were Métis nurses and doctors working up North....there is a need to establish a support system for healthcare workers in the north so that they can stay in the north.”

Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group –The Pas Region

Citizens located in rural and northern communities had considerable difficulty navigating through the COVID-19 pandemic. The lack of healthcare staff and access in northern communities was mentioned in the focus groups, some indicating they have a very difficult time arranging a visit to their family doctor. This makes it difficult to ask healthcare professionals questions about COVID-19 vaccines, leaving Citizens without informed answers. Access to information was also limited for many northern communities due to internet challenges. Citizens relied on radio shows and word of mouth to share knowledge with each other. These sources of information, specifically regarding COVID-19 information, tend to have inaccuracies as personal interpretations and opinions often get added into the conversation rather than the facts. Thus, Citizens voiced the need for better access to accurate COVID-19 information in person as it is the most useful approach for them. Another problem faced by Red River Métis Citizens is limited access to COVID-19 vaccines. Some vaccine clinics did not have enough

doses of the vaccines for the demand they have, so Citizens had to wait for extended periods to get vaccinated. People with mobility issues also experienced difficulties getting the COVID-19 vaccines due to limited or absent accessibility options.

4.2.4 Overuse of complicated technical terms and medical jargon to describe vaccines

“We believe in the science and trust our doctors, but using complicated medical terms regarding the vaccine is not helpful.”

Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group – MMF’s Southeast Region

Red River Métis Citizens have a variety of backgrounds and experiences. This makes each individual Citizen unique. Participants indicated some information about COVID-19 and the vaccines were too complicated for them to understand, making them hesitant to get vaccinated. Specifically, the use of complicated medical terminologies was very confusing to some. Some participants reported ‘*tuning out*’ as soon as large, technical terms were included in presentations or talks on COVID-19. Some citizens encountered challenges in grasping the scientific aspects of how the COVID-19 virus affects our bodies and the mechanics behind booster vaccines. This lack of simplified and structured knowledge mobilization efforts caused some Citizens to believe misinformation and disinformation about COVID-19 vaccines.

4.2.5 Fear-based dialogue surrounding the COVID-19 pandemic

“I think any vaccine awareness campaign should promote trust and minimize fear... I would not be able to sleep at night if my loved ones got the vaccine and had adverse complications.”

Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group – MMF’s Interlake Region

The COVID-19 pandemic caused the deaths of millions of individuals around the world and has left many with permanent complications. Due to the severity of the pandemic,

governments and healthcare professionals used a strong narrative to ensure the COVID-19 virus was taken very seriously. This included emphasizing the risks involved with contracting the virus. Unfortunately, this created a lot of misplaced fear surrounding the pandemic, and that fear continued even after COVID-19 vaccines became available. Citizens voiced their concerns regarding this narrative and how it made them hesitant to receive a COVID-19 vaccine. Many participants did not want to get vaccinated as the vaccines could not completely prevent infection while at the same time could involve adverse effects. There have been cases of individuals having negative side effects after having their vaccines which made some participants hesitant to receive their vaccinations in fear that they too would have the same negative reactions. Since the COVID-19 vaccines were developed fairly quickly, many feared there may be potential long-term effects from the vaccines. Finally, numerous concerns arose regarding the safety of vaccines for children, with worries about potential long-term repercussions on their well-being. Due to this, many Citizens hesitated to vaccinate their children.

4.2.6 Some Citizens did not feel they had a choice in receiving the COVID-19 vaccines

“In the beginning, they offered them [vaccines] then they enforced them...my choice to get vaccinated was not based on information or conviction but on whether you want to participate in daily activities, such as if you want to go to a mall you have to be vaccinated, amusement park you must be vaccinated...among other places. I did not have a choice.”

Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group – MMF’s Winnipeg Region

To limit the spread of COVID-19, vaccine mandates were enforced in many public and private centers. There were some Red River Métis Citizens who expressed that these restrictions and mandates caused them to become vaccine-hesitant. They felt they lacked having a choice in receiving the vaccine and were instead forced to get inoculated. They explained the pressures they faced from their workplaces to receive the vaccines., Many jobs required an updated vaccination status to work. Since the

vaccines were being forced on them, they became more hesitant to receive any more boosters than the ones required for work. Some Citizens also felt an element of discrimination because of their inability to get the COVID-19 vaccine due to medical reasons and were very upset with all the restrictions put in place. Citizens shared they were not allowed to see a doctor, attend public events, or even receive a kidney transplant without being vaccinated against COVID-19. These restrictions forced many Citizens to get vaccinated but also made them wary of getting their booster vaccines and fueled resentment toward those implementing the restrictions.

4.2.7 Broken trust in the healthcare system

“Statistics are not being shown as much anymore which makes things feel suspicious.....how come there is no cure for cancer despite decades of research but when it came to COVID-19 we have multiple vaccine options, its just questionable”

*Red River Métis Citizen, COVID-19 Vaccine Hesitancy Focus Group – MMF’s
Southwest Region*

Many Red River Métis Citizens have a history of past trauma with the existing healthcare system which has led to their hesitancy about receiving COVID-19 vaccinations. Some Citizens mentioned the pandemic was too politicized, so they became distrusting of the information they were told regarding the COVID-19 pandemic and vaccines. There was also distrust formed from the inconsistent information found online and in the news. Also, some participants did not trust the effectiveness of the vaccines because they had received their previous dose of the COVID-19 vaccine and still got infected and had a strong reaction to the virus.

Section 5: Conclusion and Recommendations

The MMF Health and Wellness Department has the unique opportunity to directly answer the health needs of Red River Métis Citizens and help address the root causes of vaccine hesitancy and increase vaccine uptake. The information gathered from the survey and concerns voiced in focus groups by Citizens were used to develop distinctions-based strategies to impact future vaccine campaigns. These strategies are listed below and aim to enhance the MMF's comprehension of Citizens' needs, while also effectively disseminating health information about vaccination and COVID-19 in a manner that aligns with the preferences of Red River Métis Citizens.

- 1. Using the MMF website to streamline accurate COVID-19 virus and vaccine information:** Citizens expressed difficulties in accessing and filtering through factual COVID-19 information online. Therefore, we recommend updating the Manitoba Métis Federation's COVID-19 webpage with links to credible information from trustworthy sources. This can include information regarding new COVID-19 strains, how the virus works, vaccine clinics and their respective wait times, updates on COVID-19 vaccines when to receive updated booster vaccines, and COVID-19 statistics. On this webpage, we can also provide information about the resources available from the MMF for COVID-19 support, allowing Citizens to easily navigate all COVID-19-related information in one place.
- 2. Using the MMF's Mobile Health Units to share public health information:** The mobile health units can access remote communities and serve the Citizens' health needs efficiently. By supplying the mobile health units with resources such as pamphlets and posters with accurate and updated public health information, the MMF Health and Wellness Department can reach many communities that may have geographical barriers preventing the flow of information. This method also allows Citizens the opportunity to have their public health questions answered, as the mobile health units are staffed with registered nurses and informed Health and Wellness employees.

3. **Adopting a Citizen-centred approach in vaccination messaging:** Information is easily ignored when not relevant or responsive to diverse audiences' needs. A successful vaccination campaign should emphasize population segmentation and use appropriate approaches to reach vaccine-hesitant audiences. A Citizen's decision to get vaccinated can shift as individual experiences, media coverage and changes in the trajectory of the pandemic and the government's response to it are constantly evolving. Using responsive Community-based research methodologies (i.e., Community consultation) can help identify relevant priorities, specific message formats, and appropriate message frequency.
4. **Utilizing in-person information sharing methods:** Many Citizens indicated the need for in-person information in many communities due to lack of internet access as well as preference for a more Community-based approach. It is suggested to have bulletin boards posted in central Community spaces of smaller rural and Northern communities to allow for current public health information to be shared in an accessible way. This creates a space for Citizens to locate fact-based updates on the status of the COVID-19 pandemic in a way that best fits the needs of these target communities. As well, there was a large amount of positive feedback concerning in-person meetings, so consultations with communities can be another mode of information sharing.
5. **Acknowledging side effects following COVID-19 vaccination:** Serious or persistent side effects associated with the approved or authorized vaccines are extremely rare; however, they still exist. Ensuring that Citizens' concerns are heard is a key pillar for effective vaccine communications. To that end, it is important to communicate information about vaccines' side effects in a transparent manner and by using simplified terms to explain the current state of medical knowledge.
6. **Boosting vaccine confidence:** Increasing vaccine awareness is attainable through developing culturally sensitive educational materials in all spoken languages and literacy levels in the Red River Métis population. Such educational materials should

explain both the purpose and value of vaccination while alleviating concerns about effectiveness and safety. Efforts should also be made to improve the overall social media presence of the Health & Wellness Department to accelerate the promotion of evidence-based public health messaging. We highly recommend that social media be used to identify trends, respond to misinformation, and understand the concerns of different Métis population strata.

This research contributes to the growing body of Red River Métis-specific knowledge, in the context of vaccine hesitancy. By delving into the distinct perspectives within the Red River Métis community, the HWD not only addresses the unique experiences and cultural contexts but also identifies the specific factors driving vaccine hesitancy. This focused approach creates a foundation for targeted interventions and strategies that can improve healthcare outcomes not only for the Red River Métis population but also for other diverse cultural groups. Strengthening public health messaging through this research empowers the MMF to effectively address vaccine hesitancy, ultimately enhancing the overall health and well-being of Red River Métis Citizens and beyond.

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