Replication & Supplementary Material

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Appendix A: Moderator guidelines

Focus Group – Briefing Document

Welcome to our focus group interview concerning the *InterCov project*, which sheds light on advocacy during the coronavirus crisis. Thank you again for participating!

Before we get started, I just want to say something about the **purpose of the interview**, the way we process data, and suggest a simple "ground rule" to adhere to during the interview.

- AIM: We use focus group interviews in the project to try to understand how the coronavirus crisis affected different types of interest organizations and their strategies, as well as how the crisis affects interaction and knowledge sharing between organizations. We record the conversation today and then transcribe it afterwards.

- OUTPUTS: In our later work with that data, we do not aim to say anything about individual organizations. We are not interested in that, rather than understanding the themes, topics and discussions that are relevant for organizations during these difficult times.

- CONFIDENTIALITY: We will write at least one scientific article about our observations from focus group interviews in three countries (DK, Ireland, the Netherlands). We will then use examples from the discussion and say, for example: *an NGO in the health care sector in Denmark experienced such and such*. As a rule, we will only report the type of organization (such as NGO, trade union, business organization) and the broad sector if you want anonymity (and otherwise possibly more details).

- CONSENT: If you have not yet sent the statement of consent with this preference, please send it after the interview.

    - And if there is anything you are in doubt about, just contact me, this also applies if you want to change your preferences regarding your anonymity. Of course, as university researchers, we are committed to general ethical and legal research standards, and all data is stored securely.

- CHATHAM: But since this is a group conversation rather than an individual interview, it is important to also agree on *how confidentiality* among the participants is considered. I suggest using the fairly well-known **Chatham House rule**, which states that participants are free to use information they receive during the meeting, **but neither the identity nor affiliation of the speaker or any other participant can be revealed** when the information is shared. Is it something everyone can agree with?

- FOCUS GROUP: The interview will probably be more of a conversation than a classic interview.

    - You are welcome to respond and follow up on each other's comments.

- I am going to ask two relatively broad questions:
    - one related to the contact with (potential) members or supporters
    - one related to the contacts with policymakers influence on public policy during the coronavirus crisis. In addition, I moderate the debate, possibly ask follow-up questions, etc.

INTRODUCTION

I am not sure if everyone knows each other. Should we just take a short round where you introduce yourself and your most immediate impression about the conduction of advocacy during the coronavirus crisis (e.g. it has been difficult / challenging etc.)?

MEMBERSHIP AND SUPPORTERS

As I said, we are interested in your relationship with your members during the Corona Pandemic. **Members are understood here quite broadly**: It could be member organizations or individuals, very active members (campaigners) or most financial supporters (supporters, donors) etc.

The pandemic has probably opened new challenges (negative) (or opportunities, positive) in terms of **keeping in touch with members or attracting new supporters.** Could you share with us what tactics or best practices you have employed to retain/maintain existing members and / or reach and attract new members and / or supporters during this time? (max. 20 minutes)

Optional additional questions if response to previous questions is limited

a) How about we start with what can be done to maintain contact with the existing members?
b) Has anyone had similar experiences? Or has it been very different in other organizations?
c) Does anyone want to comment on it or add another point of view?
d) And what about members' participation and input into the organization's decision making?
e) How does that work exactly? Can you give an example of that? How did you do that?

Thank you very much. Now we have heard a lot about how the corona crisis has affected relations with the members of the organizations…

ADVOCACY AND INFLUENCE

Next, I would like to talk about the strategies you use or have used to impact public policy during the pandemic.

The Coronavirus crisis has probably had a major impact on your organizations' ability to influence the decision-making process. Can you share your experiences with advocacy, lobbying, interest representation during this time? And what specific tactics and practices have you been able to use to influence the agenda of government or other public bodies and / or the policy-making process during this pandemic? (max. 20 minutes)

Optional additional questions if response to previous questions is limited

a) Can you give some examples of specific situations where your organization tried to gain access to decision makers during the crisis?
b) Has anyone had similar experiences? Or has it been very different for other organizations?
c) Does anyone want to comment on it or add another point of view? Suggest best practices?

INPUT TO THE QUESTIONNAIRE

Time flies / Now we are almost done. We would like to use the last few minutes of the focus group to brainstorm with you to get input on the design of the second wave of our questionnaire survey. Our purpose is to uncover topics that have been most important to the organizations' work during the pandemic.

a) Therefore, we would like to start by asking you to note down the 5 most important topics / keywords (which could be challenges, opportunities, strategic considerations, etc.) that we should include in the study. Afterwards, we share and discuss these key words here in the focus group.

Note here the 5 most important topics (e.g. the organizations' challenges, opportunities, strategic considerations, etc.) that our study should address.

DEBRIEFING

Thank you so much for your time today! As I said, you are very welcome to get in touch with me if you have questions and / or comments.

Our next step in the project is to conduct interviews in three countries, and post the second wave of our questionnaire survey in May. We have three working papers, which you will find on our website

I will stay here for a few minutes if there are follow up questions right away.

Appendix B: Focus Group Composition

B1: Sampling frame: Sample of interest groups

The interest groups for the focus groups were selected based on a sample of interest groups and firms in the InterCov project. The general sample frame in this project entailed selecting a sample stratified[1] by actor type to include ca. 150 business organizations, 150 public and ideational organizations, 150 professional organizations (limited by the number of actually existing unions in the country), and up to 150 trade unions. Moreover, we included 150 companies in each sample, but, due to our focus on member relations, these were excluded for the purpose of the focus group research design.

B2. Sampling frame for focus groups: Type of Membership, Policy Area and Definition of Membership

Based on the survey samples, we selected organizations to systematically vary the type of membership (i.e. varying *the type of interest group*) and main policy area of influence (i.e. varying the *main sector of activity*) according to survey responses.

We chose the group type and policy area for FG1 (i.e. most *homogenous* focus groups) based on the number of observations in the survey sample, meaning we assessed what group type/policy combinations had sufficient numbers of observations across countries to ensure we could include this type of group in *all* focus groups (i.e. to increase comparability across countries and focus groups). This ended up being NGOs in health and health-related policy areas. The other three group types included in focus groups with *diverse* membership (FG3 and FG4) were: business associations, professional associations and labor unions, in addition to NGOs.

When selecting the other sectors for the focus groups with '*diverse'* policy areas (FG3 and FG4), we again assessed which sector/group type combinations would allow us to sample the same types of organizations in the respective focus group in all countries. These were: Education, Sports and Culture; Environment, and Development/Human Rights, in addition to Health for FG2 (where only NGOs are included). For FG4 (with diverse group types) these were: Agriculture and Forestry; Education; Sports and Culture; Transportation, Storage and Hospitality, in addition to Health.

[1] The reason why we opted to stratify the sample by organization type is to make sure that we would be able to collect a high enough number of observations per organization type. For this reason, we 'oversampled', for instance, trade unions, given the total number of unions in all countries is low, compared to public interest groups or business groups

While selecting based on these sector/group type combinations, we only included groups that have a membership base, in a broad understanding. This means, in addition to formal membership groups (i.e. the Dutch 'verenigingen' / Danish 'foreninger'), our broad definition of membership implies the inclusion of other organizations if they rely on member/supporter funding or volunteering. 'Members' here does not have to refer to individuals, but can be member organizations (such as the patient and disability organizations in the Danish Disability Association/'Dansk Handicap Forbund'), or companies (such as the member companies in the association Veterinary Industry Nordic). Moreover, foundations (i.e. the Dutch 'stichtingen') are included, when meaningful charitable funding is provided or volunteering is organized. For instance, our sampling includes 'Stichting JIJ' a non-profit encouraging *volunteer-based* self-help among people with eating-disorders (although largely government funded). The focus-group questions on 'membership' in such case are focused on volunteers rather than due-paying members with, for instance, voting rights in internal meetings. Similarly, we approach 'Stichting voor Werkende Ouders' (Foundation for working parents) which has a base of around 600 parents who indicated willingness to 'think along' with the organization (i.e. no formal voice or payment).

B3. Overview of focus group composition

Tables B3a-B3c give an overview of selected organization types in each focus group and each country.

Table B3a: Focus group composition: Denmark

	Health- related policy	**Four diverse policy areas**
Only NGOs	Patient organization Patient organization Patient organization Patient organization	Health-related NGO Human Rights and Governance NGO Climate NGO Finance-related NGO
Four diverse membership groups	Patient organization Medical industry organization Association of Health professionals Union in Health Sector	Patient organization Industry organization in Agricultural Sector Union in Transport Sector Education-related profession organization

Table B3b: Focus group composition: Ireland

	Health-related policy	**Four diverse policy areas**
Only NGOs	Patient organization Patient organization Patient organization Health-related NGO	Health-related NGO Poverty-related NGO Sports and Culture NGO Environment-related NGO Sports and Culture NHO
Four diverse membership groups	Association of Health professionals Patient organization Health-related trade union	Encompassing association of professionals Patient organization Union in Transport sector Business association in Agricultural sector

Table B3c: Focus group composition: Netherlands

	Health-related policy	Four diverse policy areas
Only NGOs	Patient organization Patient organization Health-related NGO Health-related NGO	Poverty-related NGO Social NGO Human rights NGO Information privacy NGO
Four diverse membership groups	Patient organization Health-related trade union Health-related association of professionals Health-related NGO	Health-related NGO Professional association in Education Business Association in Food Industry Hospitality-related labor union

B4. List of participant organizations

We here also list the names of all organizations that participated in the focus groups and agreed to be mentioned in our work. We also want to use this opportunity to thank them again for their time and valuable insights.

Denmark	Ireland	the Netherlands
Yngre Læger	Rare Diseases Ireland	Vredesorganisatie Pax
Veterinary Industry Nordic	National Bus and Rail Union	Voedselbanken Nederland
Transparency International Danmark	Irish Rural Link	VGVZ, de Vereniging van Geestelijk VerZorgers
Skole og Forældre	Irish Martial Arts Commission	Vereniging Diervoederspecialiteiten en Diergezondheidsproducten Nederland (VDDN)
Rådet for Grøn Omstilling	Irish Kidney Association	Stichting voor werkende ouders
Nyreforeningen	Irish Cancer Society	Stichting Consortium Beroepsonderwijs
Metal Maritime	Irish Association of Social Workers	Sensiplan
Hjerneskadeforeningen	Heart Children Ireland	Register beroepsbeoefenaren complementaire zorg (RBCZ)
Diabetesforeningen	Fighting Blindness	Neurofibromatose Vereniging Nederland (NFVN)
Danske Patienter	Down Syndrome Ireland	Netwerk Rondom
Dansk Handicap Forbund	CPA Ireland	MPN Stichting
Dansk Aktionærforening	(anonymous)	KWF Kankerbestrijding
Alzheimerforeningen	(anonymous)	IPSO
(anonymous)	(anonymous)	Free Press Unlimited
(anonymous)	(anonymous)	FNV Horecabond
(anonymous)	(anonymous)	Ergotherapie Nederland