

Deschutes County Health Services

# Deschutes County COVID-19 Phone Survey Follow-up

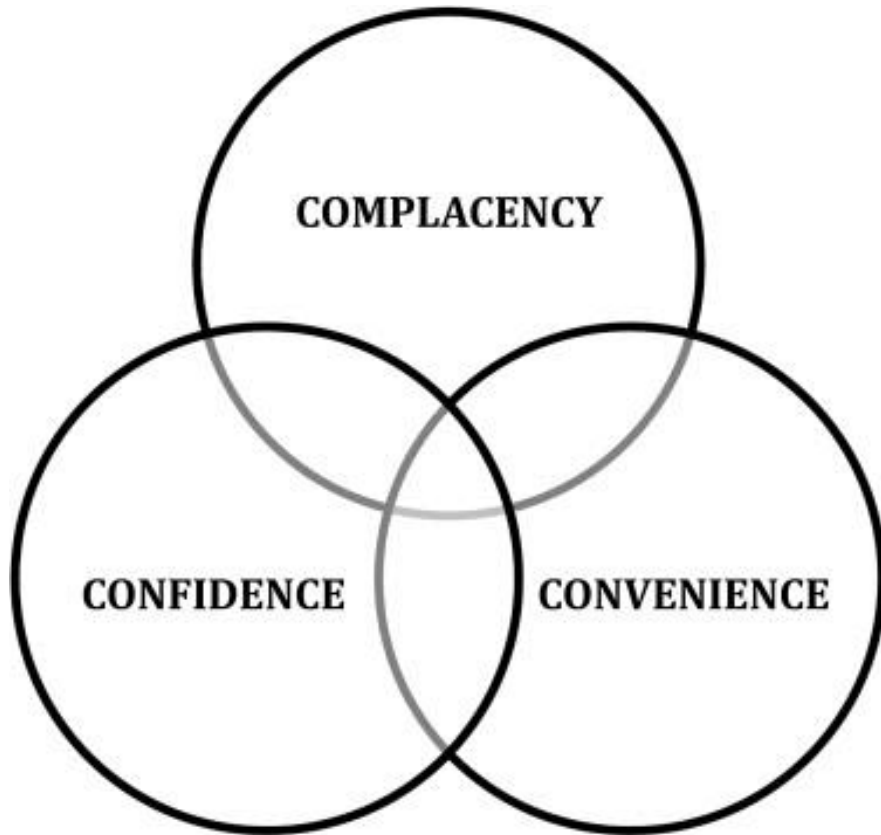
## Results Overview



March 18, 2021

# Evidence-Based Survey Design

## Determinants of Vaccine Hesitancy



Phone survey development was informed by the World Health Organization's 3Cs Model of Vaccine Hesitancy.

### **Confidence**

Refers to a lack of trust in the effectiveness and safety of vaccines, the system that delivers them and/or the motivations of policy-makers who make determinations about vaccines.

### **Complacency**

Refers to a low perceived risk of vaccine-preventable diseases and therefore it is assumed vaccines are not needed. Other issues are considered more important.

### **Convenience**

Refers to the degree to which the comfort, convenience, time, place, and quality of a vaccine affects uptake of the vaccine.



# Objectives & Methodology

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## **Goal: To understand local attitudes, concerns, and barriers regarding the COVID-19 vaccines**

While findings generally track with national trends, it's important to understand what's happening locally to tailor strategies and communications.



## **Representative sample of Deschutes County residents**

A total sample size of 390 respondents were interviewed between March 3 and March 10, 2021 by The Nelson Report. The sample has an error rate of +/-4.96% at the 95% confidence level.



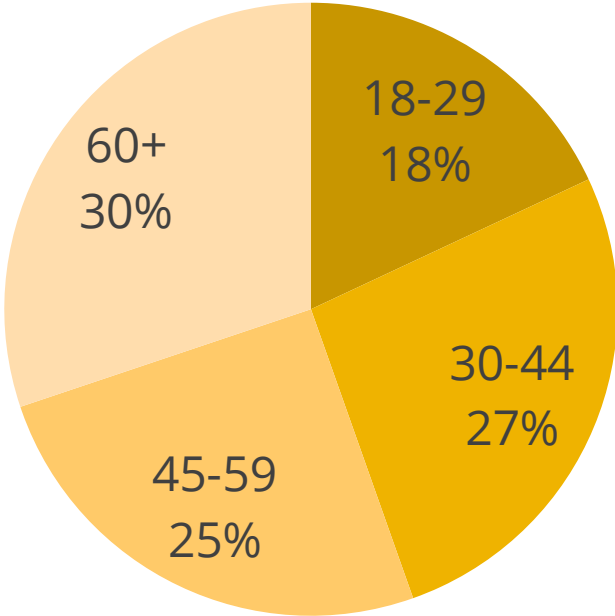
## **Sought input from those who haven't been vaccinated**

A screener was in place so that those who said they have already been vaccinated were excluded from taking the survey. Respondents also needed to be 18 or older and live in Deschutes County.

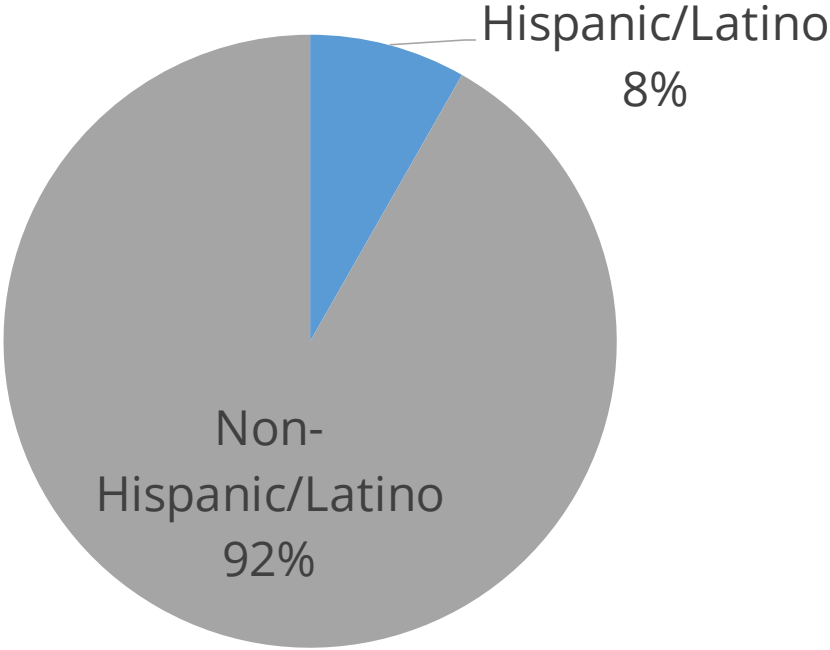


# Sample Overview

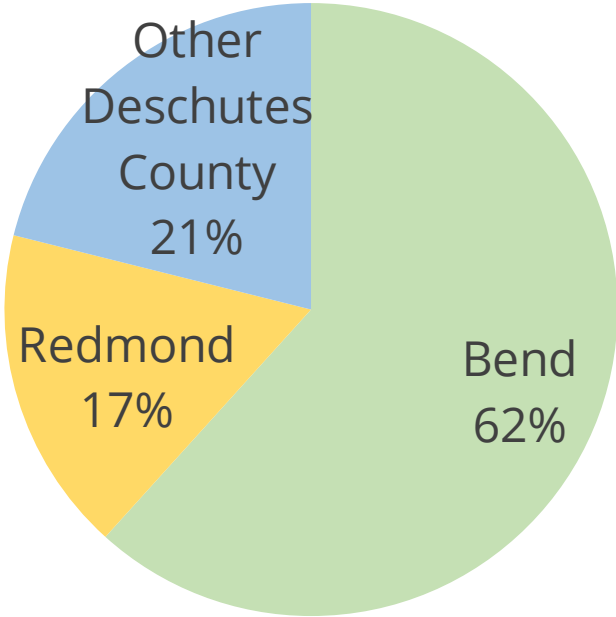
Age



Ethnicity

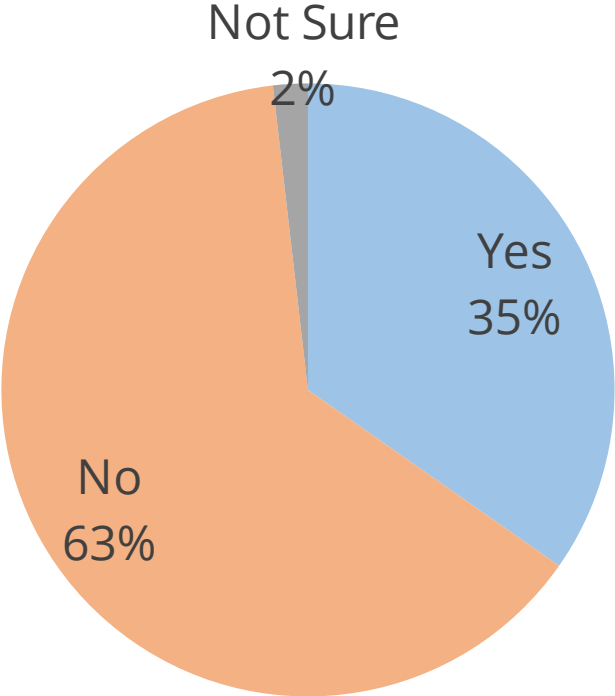


Location

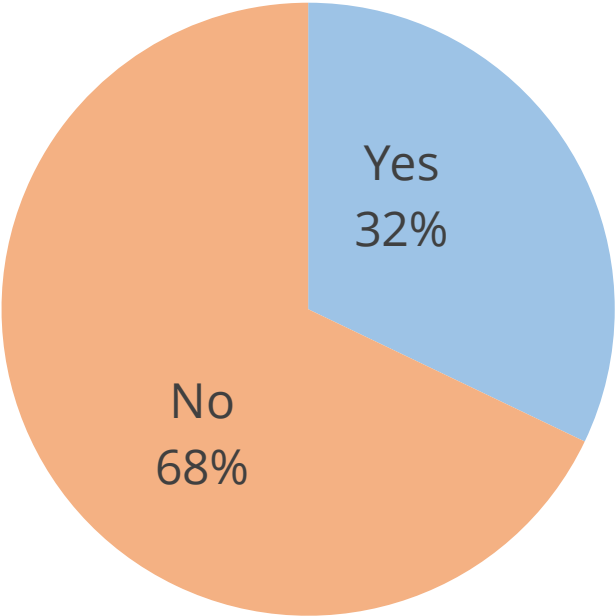


# Sample Overview

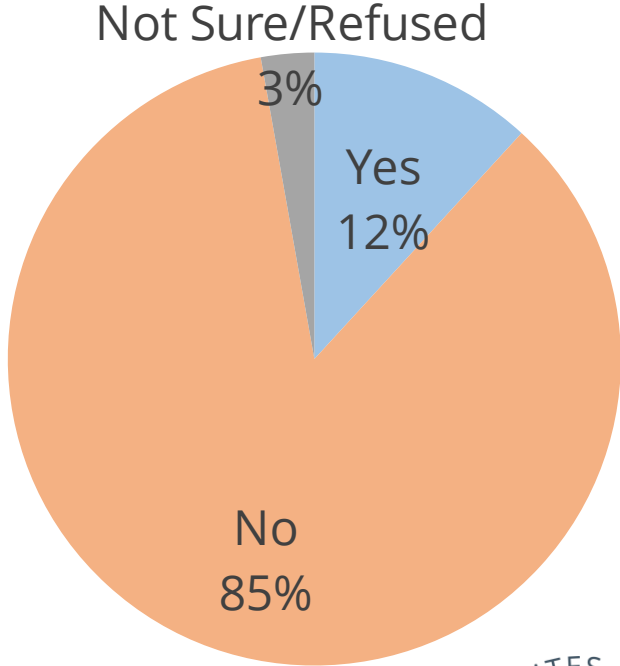
Frontline Essential Worker?



Children in school?

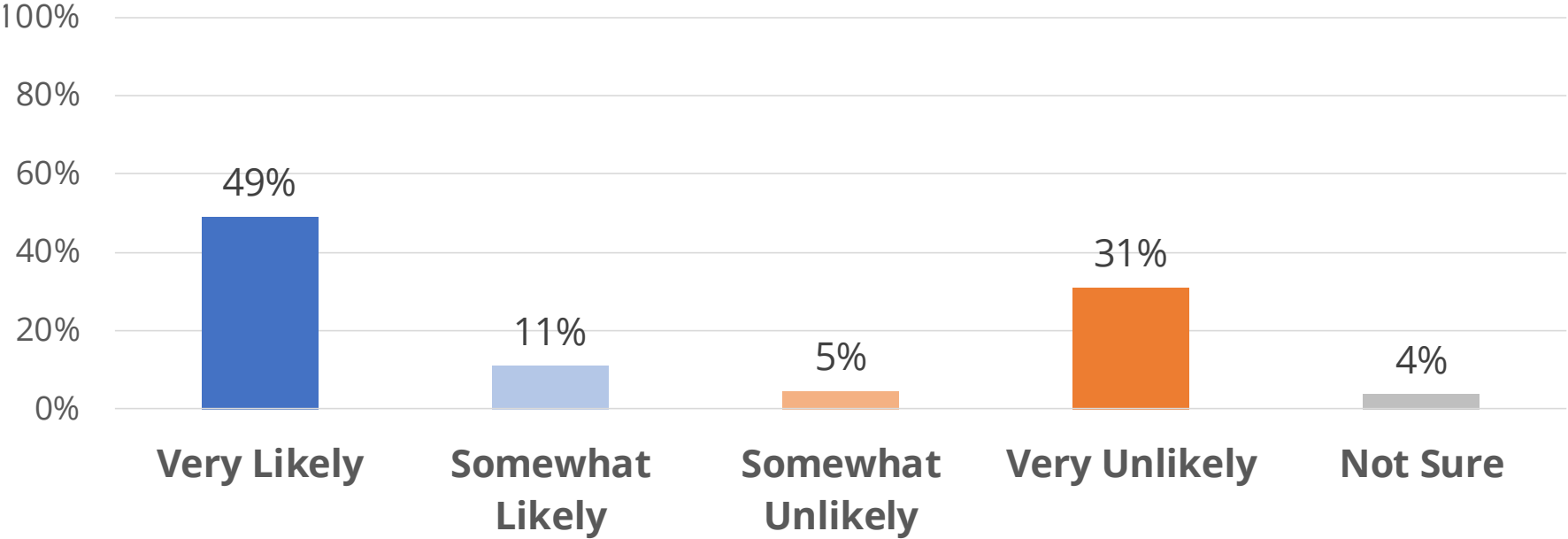


Ever tested positive for COVID-19?



# Results Show A Continuum of Vaccine Attitudes

How likely are you to get a COVID-19 vaccine when it becomes available?



Takeaways:

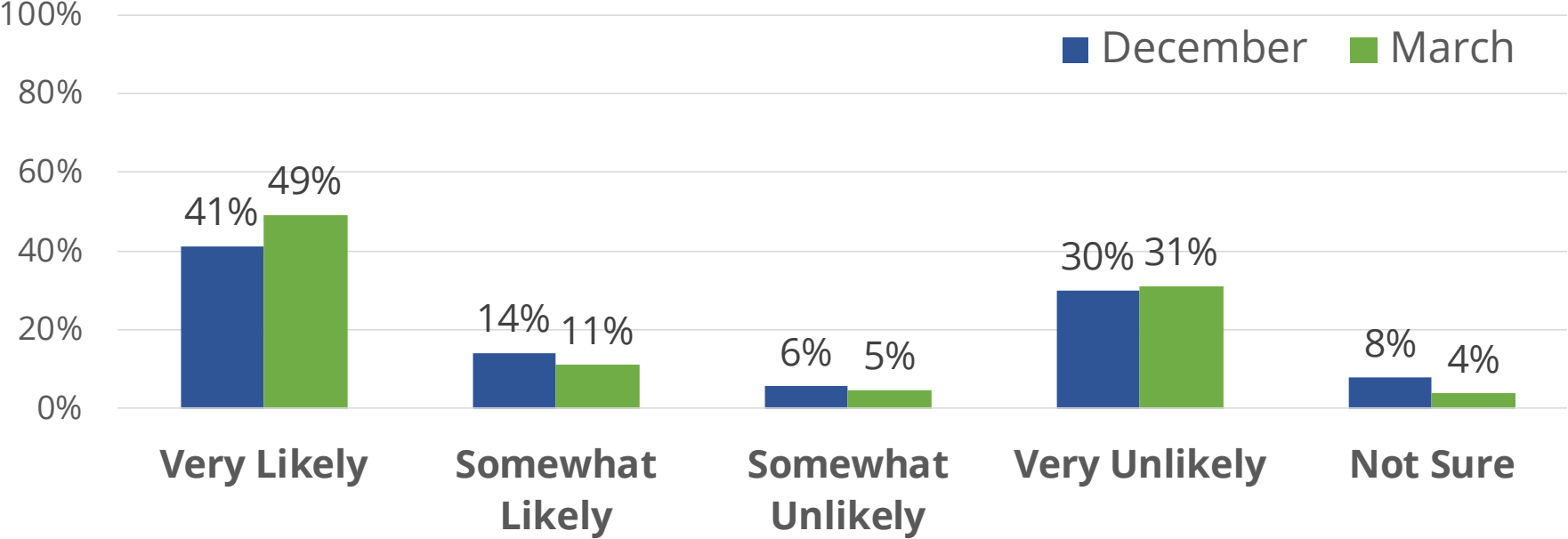
- Attitudes are split, with most respondents either very likely or very unlikely.
- Focusing communications on why vaccines can be trusted and importance of getting vaccinated could prove beneficial.

**Primary reason why unlikely?**  
1) Vaccine is too new / not enough research or testing (26% of those unlikely)  
2) I don't take / want / trust vaccines (18%)  
3) I'm healthy / not at risk (12%)



# Some Movement Toward Vaccine Acceptance Since December

How likely are you to get a COVID-19 vaccine when it becomes available?



- Takeaways:
- Since December, more respondents are “very likely” to get vaccinated and fewer respondents are “not sure”.
  - The share of those “very unlikely” has remain unchanged.

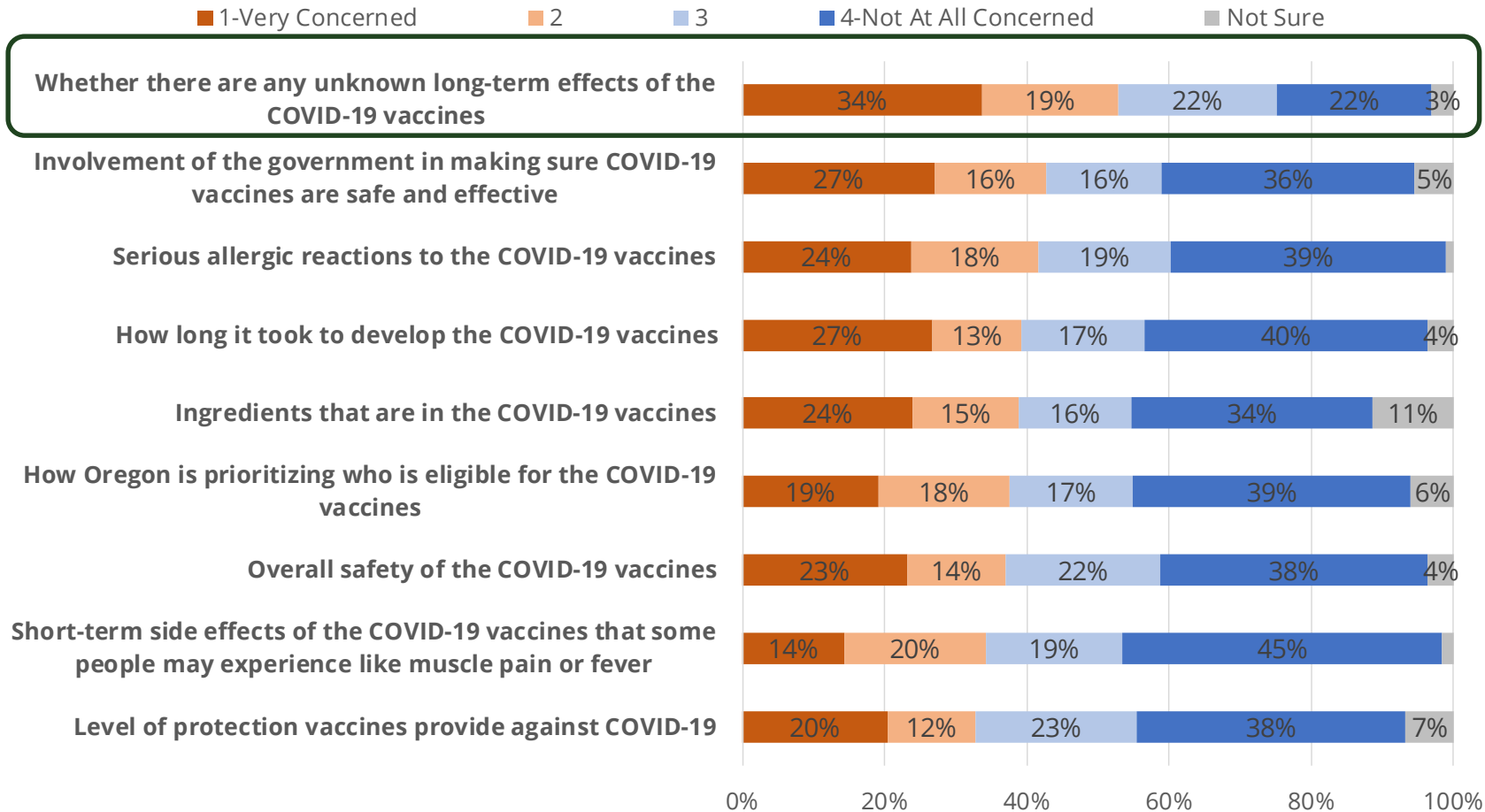
March data do not reflect the ~28% of Deschutes County adults that have already been vaccinated as of March 10, 2021.



# Unknown Long-Term Effects from COVID-19 Vaccines a Top Concern Overall

## COVID-19 Vaccine Concerns

Sorted in descending order by level of concern



### Takeaways:

- Communications should address top concerns about the vaccinations, providing evidence around long-term effects in particular.
- Some concerns, like government distrust, may be harder to address in the short-term but signal the ongoing importance of establishing trust for the success of future public health initiatives.

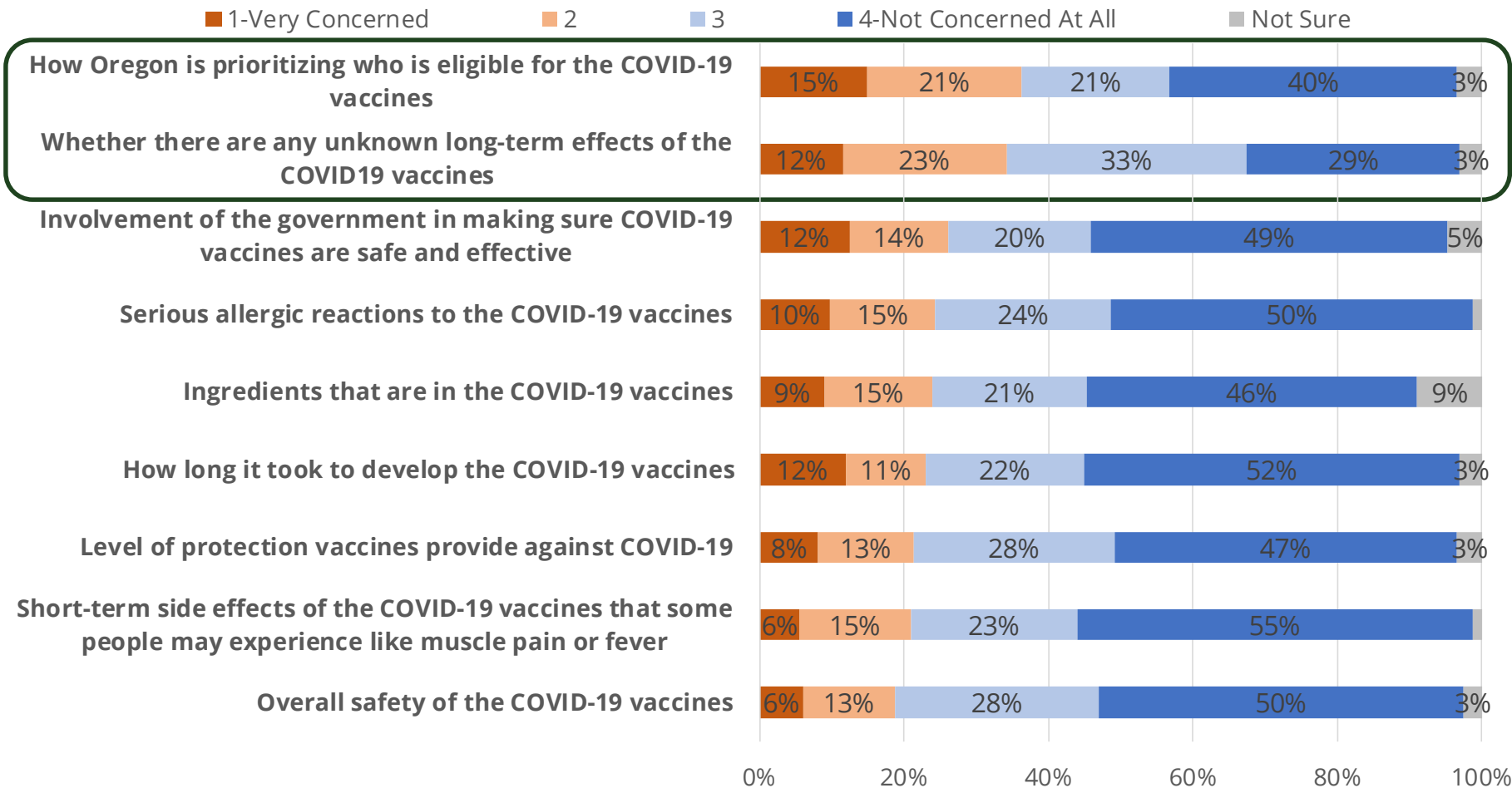




# Prioritization and Long-Term Effects Top Concerns for Those Likely to Get Vaccinated

## COVID-19 Vaccine Concerns Among Those Likely to Get Vaccinated

Sorted in descending order by level of concern



### Takeaways:

- Most items generally not a concern for those likely to get vaccinated.
- However, even within this group, long-term effects more likely to be a concern.
- A notable concern for this group is how Oregon is prioritizing eligibility.



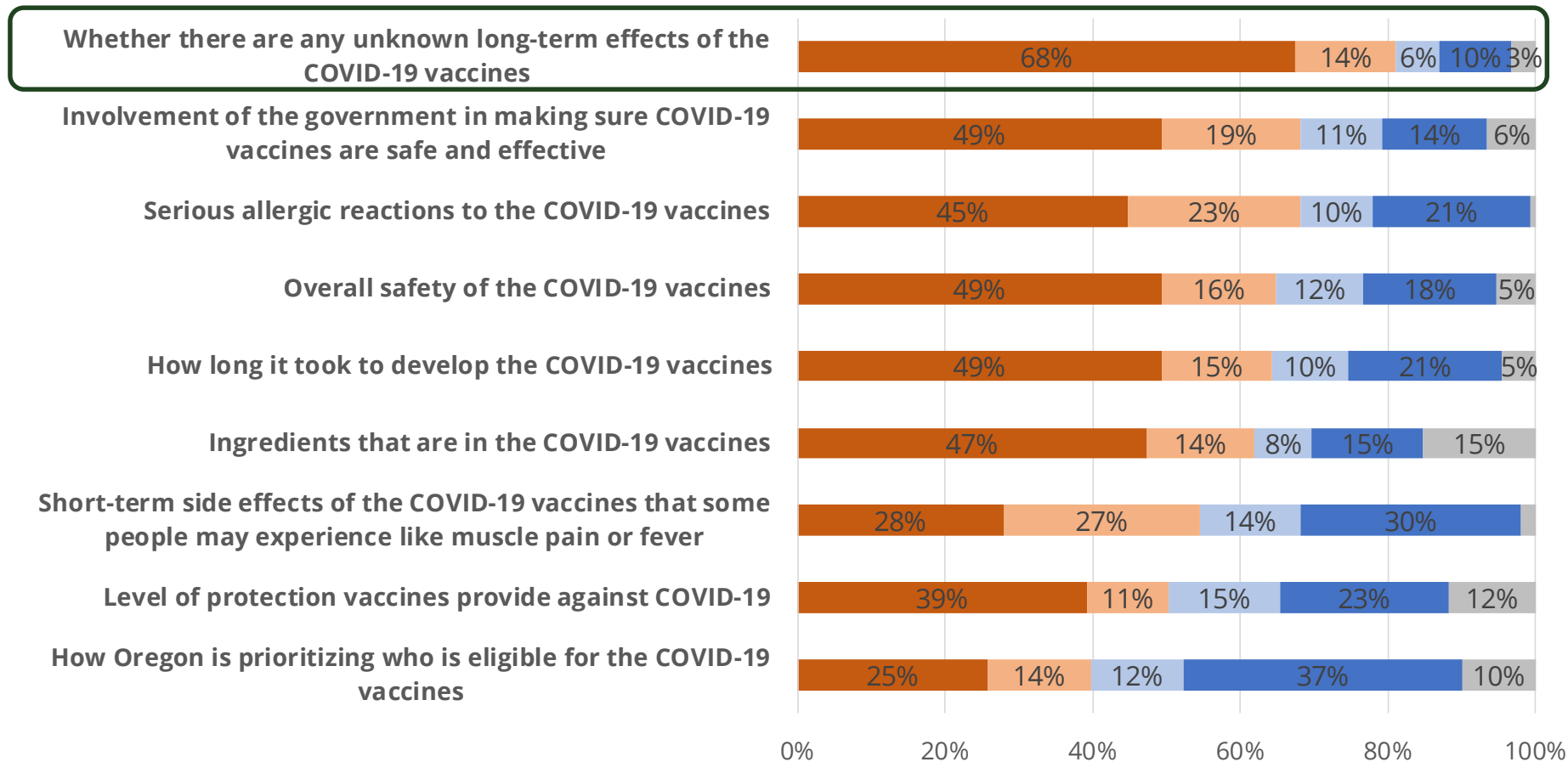
# Many Concerns Among Those Unlikely, with Long-Term Effects Top of List

## COVID-19 Vaccine Concerns

### Among Those Unsure or Unlikely to Get Vaccinated

Sorted in descending order by level of concern

1-Very Concerned    2    3    4-Not Concerned At All    Not Sure



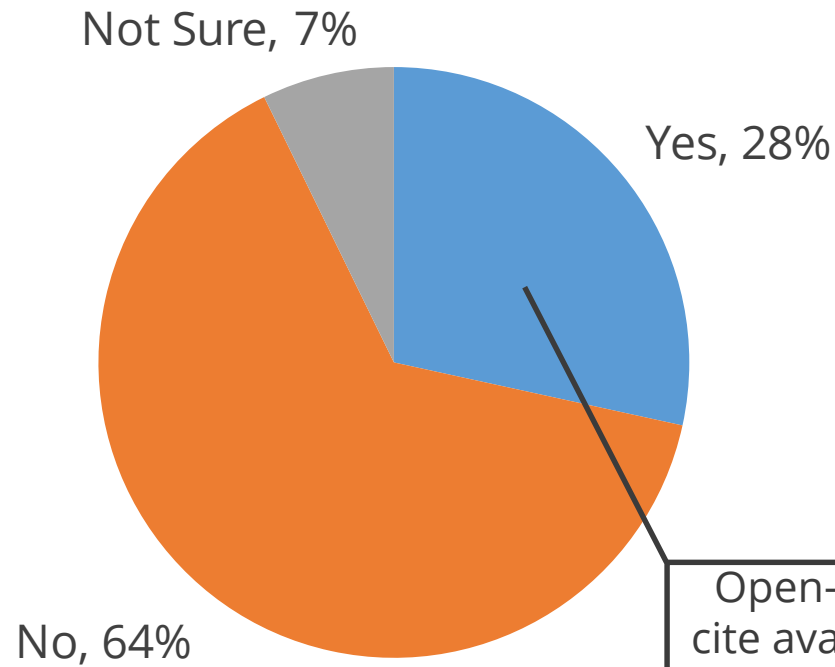
### Takeaways:

- Most items were a concern for those unlikely or unsure about vaccination.
- Unknown long-term effects is the number one concern.
- Government's role and serious allergic reactions are also notable concerns.



# Many Have Shifted Their Views Over Time

Are you more likely to get a COVID-19 vaccine now than you were 3 months ago?



Open-ended responses most likely to cite availability of the vaccine / easier to get vaccinated and enough people have been vaccinated / seems safe

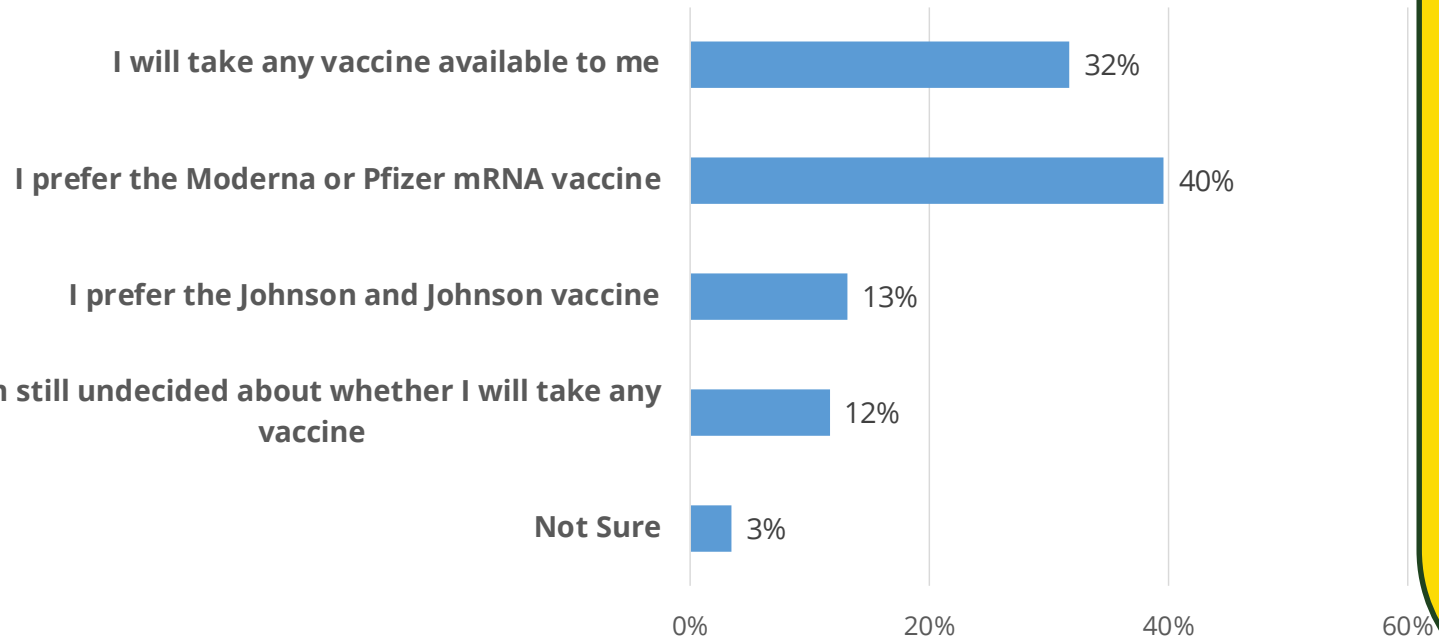
## Takeaways:

- Ease/availability of vaccination and knowing/seeing others being vaccinated have influenced greater vaccine acceptance.
- Respondents now more likely to get vaccinated across-the-board:
  - 40% of those "very likely" to get vaccinated
  - 58% of those "somewhat likely"
  - 17% of those "somewhat unlikely"
  - 27% of those "unsure"
- Nearly all of those "very unlikely" to get vaccinated indicated they are **not** more likely than they were 3 months ago.



# Preference for mRNA Vaccines

Which statement best describes your preference regarding the vaccine you receive?



## Takeaways:

- Communications should focus on why any vaccine available to you is a good option.
- mRNA vaccines are preferred over the J&J vaccine regardless of level of vaccination intent. However, those “very likely” to get vaccinated are much more likely to indicate taking any vaccine available. Those “somewhat likely” to get vaccinated prefer the mRNA vaccines in particular.
- Giving people the option to choose the vaccine they receive may be influential in moving more people toward vaccine acceptance.

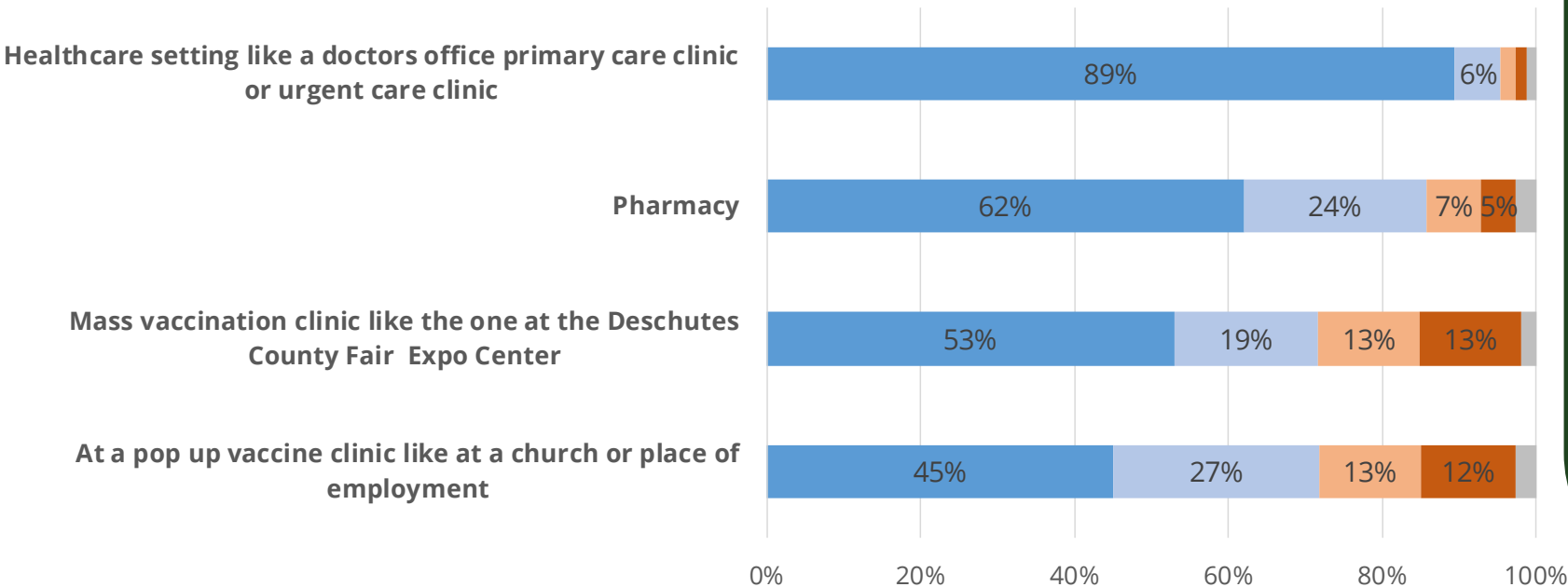


# Healthcare Settings Considered Most Comfortable Vaccination Sites

## Comfort With COVID-19 Vaccination Locations

Sorted in descending order by % very or somewhat comfortable

■ Very Comfortable ■ Somewhat Comfortable ■ Somewhat Uncomfortable ■ Very Uncomfortable ■ Not Sure



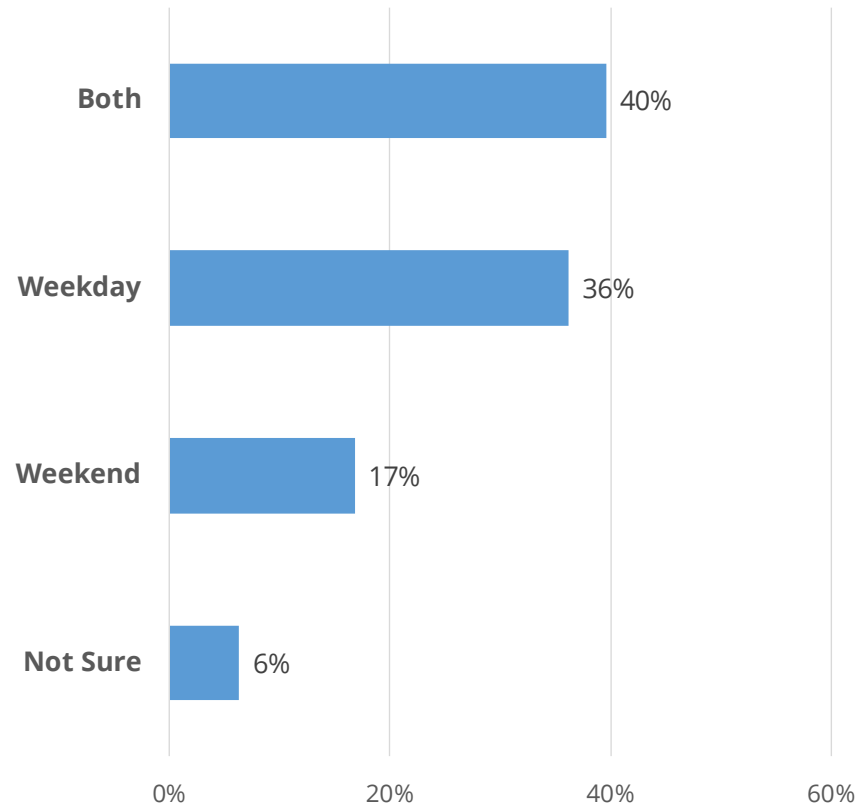
### Takeaways:

- Healthcare settings are by far most preferred, including by those who are “somewhat likely”, “somewhat unlikely” or “not sure” about vaccination.
- While it’s important to consider a variety of locations, healthcare settings are the surest bet.
- Young adults are more comfortable with pharmacies. Thus, pharmacy vaccination programs should be promoted among young adults.



# Preference for Weekdays Over Weekends For Vaccine Scheduling

Are you more likely to schedule a COVID-19 vaccine on a weekday or weekend?



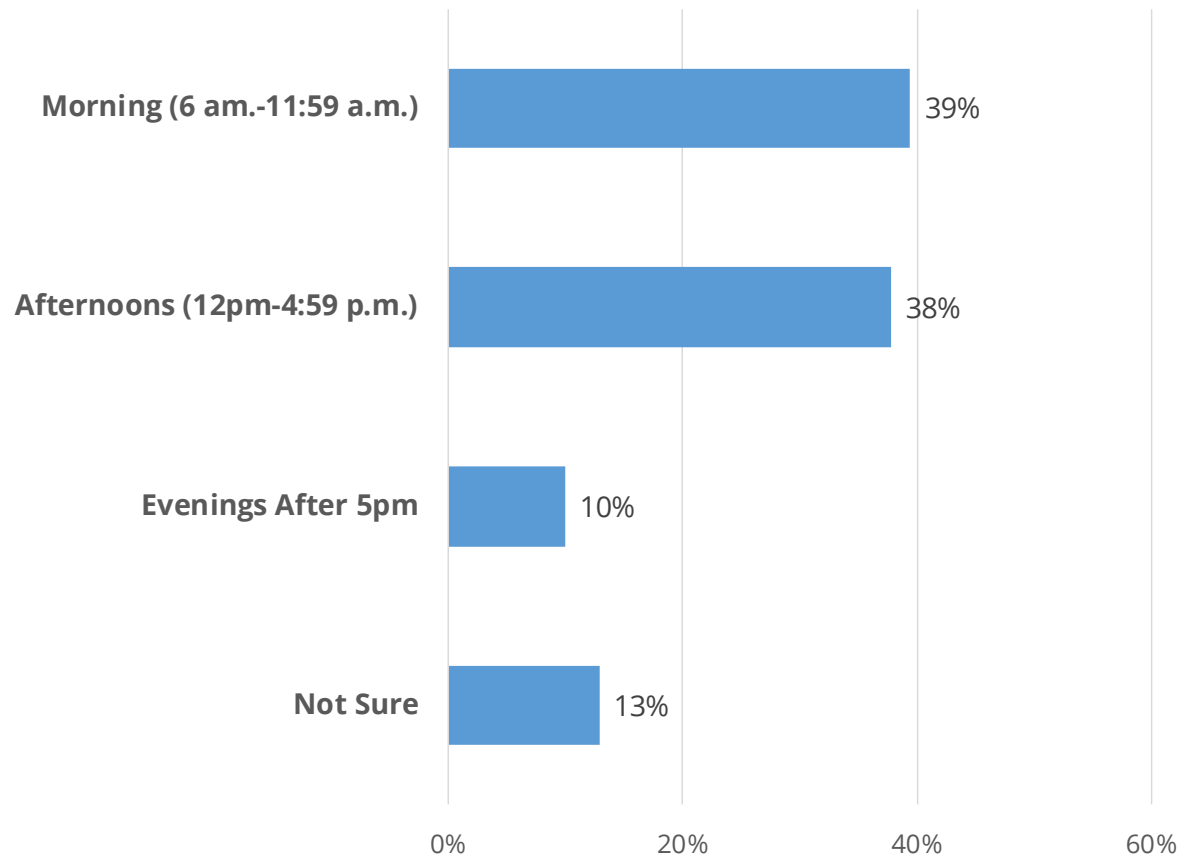
## Takeaways:

- Those eager to get vaccinated are more likely to accommodate both weekdays and weekends.
- Vaccination locations should provide ample scheduling opportunities on weekdays to make vaccination as convenient as people.



# Mornings and Afternoons Similarly Preferred

What would be the best time of the day for you to receive a COVID-19 vaccine?



## Takeaways:

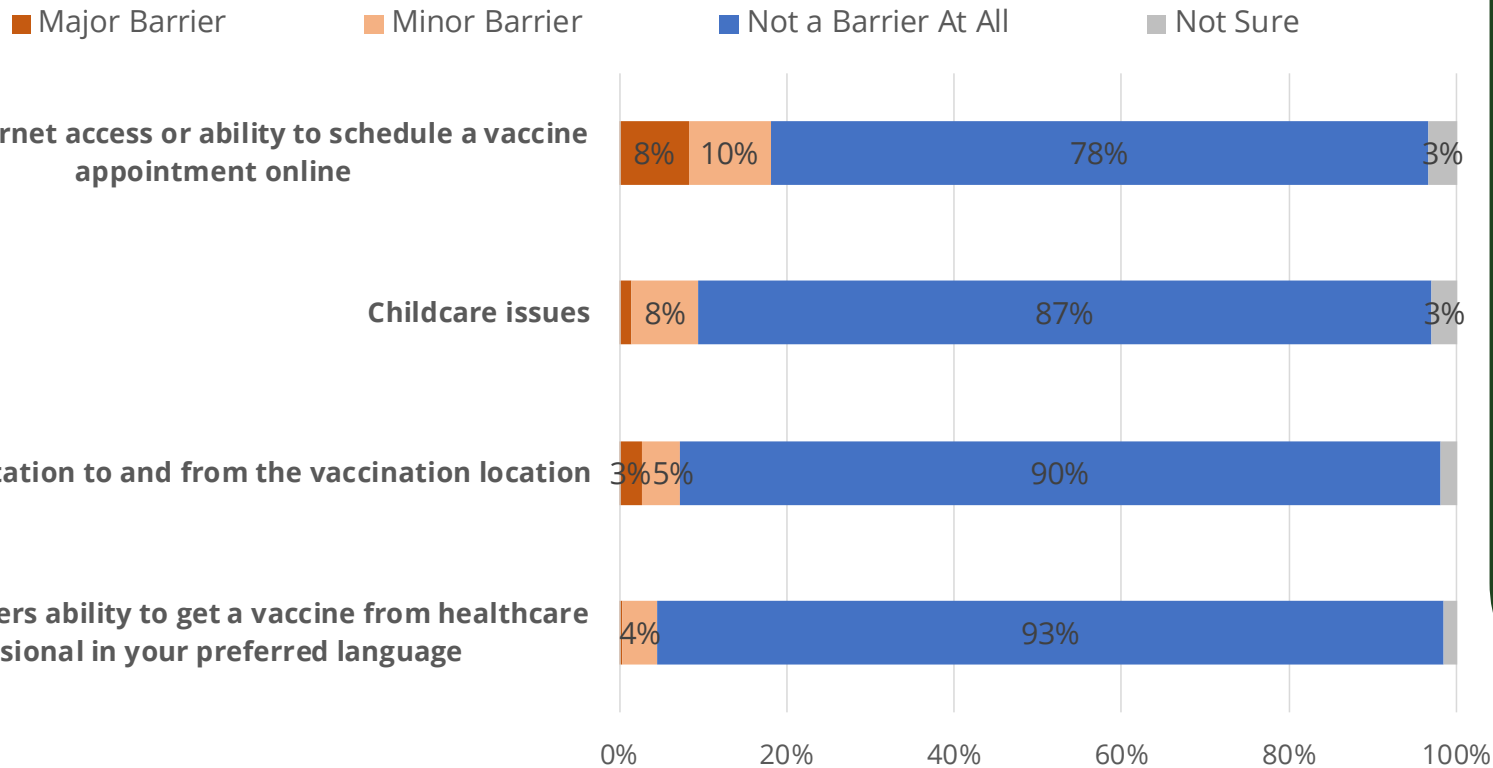
- Vaccination locations should provide ample scheduling opportunities in the mornings and afternoons.
- Young adults are most likely to indicate preference for evenings after 5pm, and thus pharmacies would be well served to consider the availability of evening scheduling.



# Internet Scheduling Somewhat of a Barrier

## Barriers to COVID-19 Vaccination

Sorted in descending order by % major or minor barrier



### Takeaways:

- For the most part, the barriers probed were not major obstacles to getting vaccinated. However, internet scheduling is considered the biggest barrier, especially among seniors and Latino(x) respondents.
- Regardless, access information should be well communicated.
- Internet scheduling alternatives should be given the most consideration.

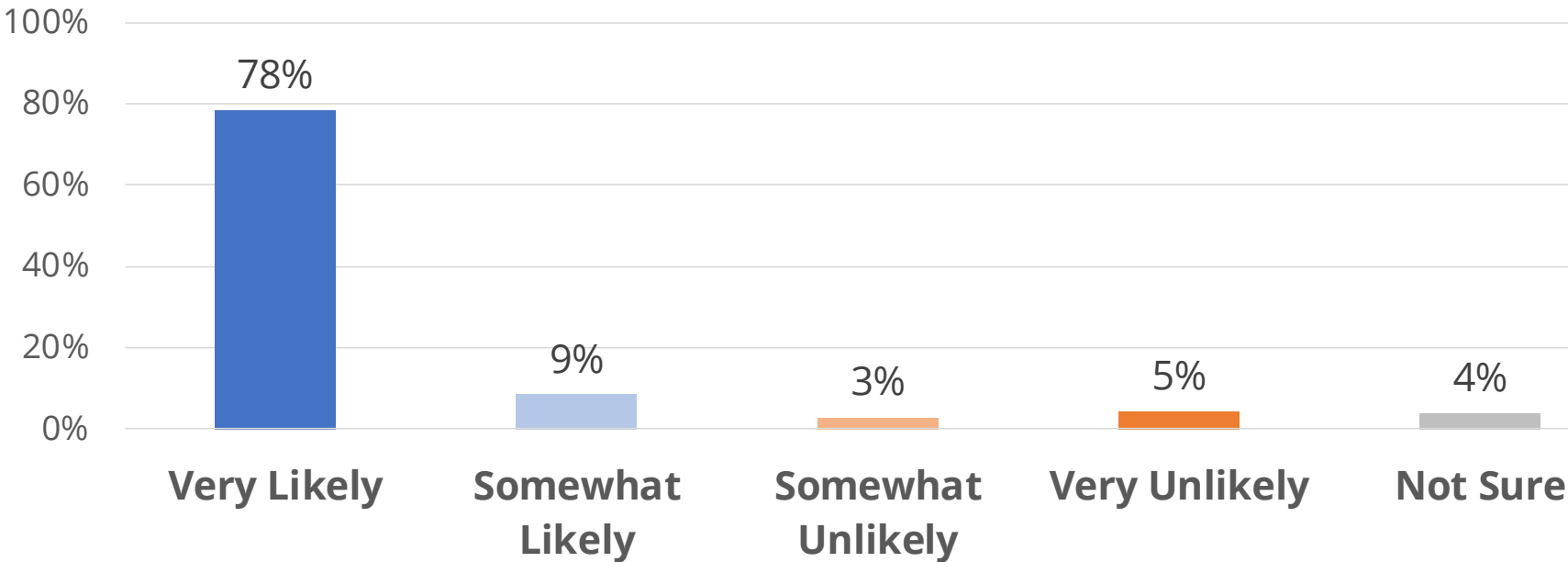
Some "other" barriers cited, including # of appointments available and scheduling around work





# Most Intend to Comply with Mask Mandates After Full Vaccination

How likely are you to wear a mask or face covering when in public or participating in indoor activities once you are fully vaccinated?



Takeaways:

- Intent to wear masks is lower among those who are “somewhat unlikely” or “not sure” about vaccination.
- Results highlight the importance of continuing prevention measure communication.



# Result Implications: Confidence

## Confidence

- **Vaccine communications should address areas of top concern** (e.g., long-term effects, involvement of government in making sure COVID-19 vaccines are safe and effective, serious allergic reactions). It is **important to acknowledge unknowns** as to not cause further distrust. Additionally, it can be beneficial to **provide apolitical data without pleas toward action**.
- Many people are enthusiastic about getting vaccinated but are more concerned with eligibility and appointment availability. Continuing to **clearly set expectations around availability** and how to make an appointment once you become eligible are key to maintaining excitement and confidence.
- Vaccine acceptance has increased over time. To further support this trend, it is recommended to **promote vaccination stories** to help enhance social norms and build excitement.
- There is an overall preference for the mRNA vaccines over “any vaccine available” or the Johnson & Johnson vaccine. Thus, communications **focusing on the benefits of any vaccine available to you** should be prioritized.



# Result Implications: Complacency

## Complacency

- It could prove beneficial to **motivate people to get vaccinated in order to protect others**. This might particularly resonate for those who don't perceive personal risk of getting COVID-19.
- Intent to wear masks after full vaccination is lower among those who are “somewhat unlikely” to get vaccinated or “not sure” about vaccination. Results highlight the importance of **continuing prevention measure communication** and explaining why these measures are still important.



# Result Implications: Convenience

## Convenience

- Those more on the fence about getting vaccinated are more likely to prefer the mRNA Pfizer and Moderna vaccines over the Johnson & Johnson vaccine. Thus, consideration should be given to whether vaccine recipients should be able to **indicate their vaccine preference**, since this may have a bearing on vaccine uptake.
- Healthcare settings are by far considered the most comfortable vaccination location, and thus **vaccine allocation to healthcare settings should be prioritized**.
- **Pharmacy vaccination programs should be promoted among young adults**, as this is a preferred location. Academic institutions could consider partnership. Worth noting is that young adults are more likely to prefer scheduling during evening hours after 5pm.
- Even though they are not major barriers, **transportation, childcare, language access, and - in particular -scheduling alternatives information should be well communicated** via appropriate channels. For example, could consider communicating through schools to let parents know they can take their children to their vaccination appointment or even conducting pop up clinics at school-based sites. Online scheduling emerged as a more of barrier for senior and Latino(x) respondents, and therefore focusing on providing alternatives to online scheduling for these populations is critical.



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# Thank you

