

SARS CoV2 Vaccine
Hesitancy Among
Young Adults in
Arizona: 18-26yo

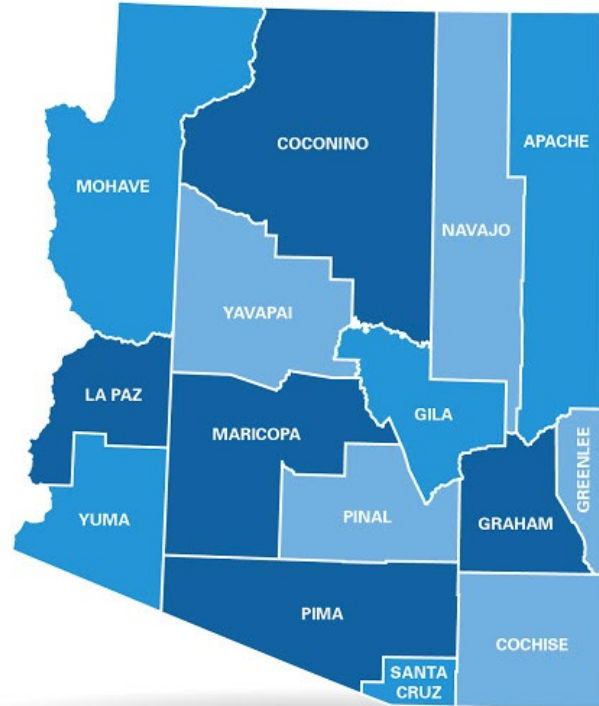
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Partner Organization

- Arizona Local Health Officers Association (ALHOA)
 - County health departments represented by respective Directors



(Rural Reports, 2017)

The Project

Problem:

- AZ Health Officer concern for potential COVID-19 vaccine hesitancy in young Adult Arizonans 18-26 years old

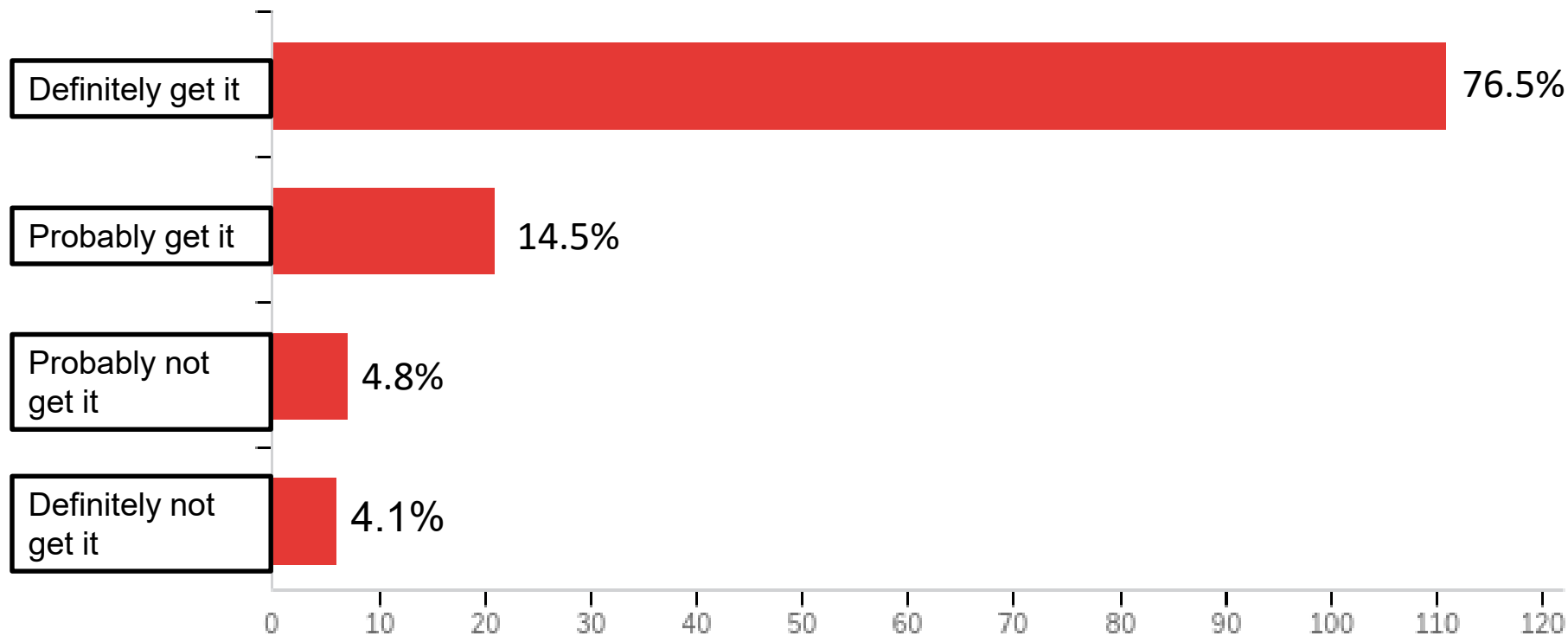
Methods

- Survey designed based on vaccine hesitancy surveys^{2,3,4,5}
- Distributed through social media, email lists, blogs
- Data collected from February 10, 2021 - March 30, 2021

Demographics

- Arizona Resident: 18-26 Years Old
- Overall response rate : 145
- Gender
 - Female: 101 (70%)
 - Male: 38 (26%)
 - Non-Binary: 4 (3%)
 - Prefer not to say: 1 (1%)
- Residential area
 - Urban: 72 (50%)
 - Suburban: 58 (40%)
 - Rural: 15 (10%)
- Ethnic Group
 - White: 85 (59%)
 - Hispanic or Latinx: 41 (29%)
 - Asian: 7 (5%)
 - Other: 5 (4%)
 - Black: 4 (3%)
 - American Indian or Alaska Native: 2 (2%)

COVID Vaccine Intention



Major Concerns

- 87% Want to wait and see
- 84% Possible side effects
- 74% Influence of politics on development
- 48% Do not trust the government
- 47% Do not feel at risk of serious COVID-19 illness
- 32% Risks of COVID-19 are being exaggerated
- 26% Do not trust healthcare system
- 20% Do not trust vaccines in general
- 3% Fear getting COVID-19 from the vaccine

Increasing the Likelihood of Vaccination

92 % Free vaccination

91 % Convenient vaccination locations

88 % Easy scheduling of vaccination appointment

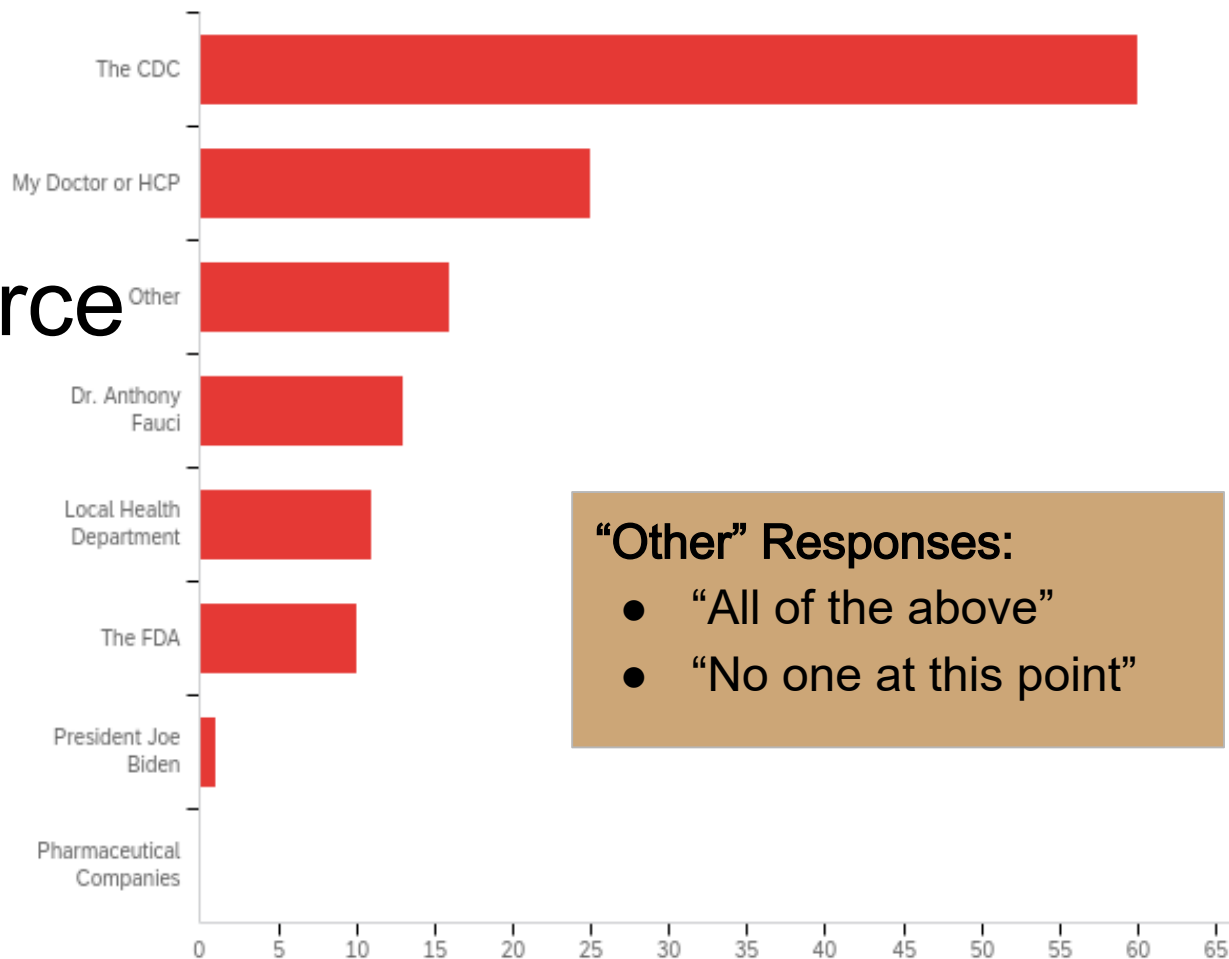
86 % Low cost vaccination

84 % More information from a trusted source

“Other” Responses:

- “No long term effects”
- “Walk-in appts”
- “I want the vaccine no matter what”
- “If I knew that marginalized communities were included in the dissemination of vaccines”
- “Just literally giving any hope that this vaccine is gonna reach young people before winter 2022”

Trusted Source for COVID-19 Vaccine Information



Challenges

- Recruitment
 - Difficulty in recruiting large number of participants
- Sampling bias from convenience sample
 - Individuals distributing survey are in the medical field, academia, or public health
 - Leading to more participants from those fields
 - Lack of representation from individuals who do not have access to internet
 - People with lower incomes, less education, living in rural areas or ages 65 and older are underrepresented
 - Lower response from Males vs. Females
- “Pandemic fatigue”

Social Determinants of Health Impact

- Vaccination disparities

- Education, Health literacy

- “It is not approved by the FDA...”

- “How can we trust a vaccine that was developed so quickly”

- Lower adult vaccine coverage among:^{6,7,8}

- Uninsured, low income, foreign-born persons, non-citizen, undocumented citizens, Hispanics and Black Americans compared to non-Hispanic Caucasians

- COVID-19 Vaccination Disparities

- Health literacy¹⁰

- Sources of information

- Miseducation via social media, word of mouth, etc.

- Fear of the unknown (phobias)

- Barriers - historical, mental, social, and physical⁹

- Stay at home orders, lack of access

- Lack of trust

- Access to health care and primary care - losing patients to f/u

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Compared to those with proficient health literacy, adults with low health literacy experience:

- 4 times higher health care costs

- 6% more hospital visits

- 2 day-longer hospital stays

Source: Partnership for Clear Health Communication at the National Patient Safety Foundation.

Overarching Theme(s)

- Develop a survey to identify motivators and barriers to future COVID-19 vaccination in the young adult population
- Identify how the social determinants of health impact COVID -19 vaccine hesitancy in young adult populations with emphasis on the impact on vulnerable populations - BIPOC, and those living in rural and urban under resourced areas
- Thoughts on strategy for promoting COVID -19 vaccination acceptance in young adult populations considering social determinants of health.

Recommendations

- Make **free** COVID-19 vaccinations **easily accessible** ASAP¹¹
 - Walk-in vaccination at local pharmacies
- **Convenience** - meet young people where they are¹¹
 - Example: vaccinating at bars, clubs, workplaces, mobile vaccine clinics, etc.
- Information from a **trusted source**
 - Strong **HCP** recommendation 1 2^{12,13}
 - Partner with **community leaders/influencers** 11,12
- Inclusivity
 - Make all peoples feel involved in their health care decision making

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