



Community insights on the Covid vaccine in Tower Hamlets

Dec 2020

healthwatch
Tower Hamlets



Attitude
towards
vaccine

We analysed
60 comments

about the Covid19 vaccine, collected through social media and our usual outreach

I'm hopeful we can start vaccinating the most vulnerable next month. If those that are younger and healthier, or less worried about catching the virus, could keep up all the good work, then hen we can prevent spread of the virus and hopefully we can get through with as few deaths and as little loss as possible and keep the NHS running as best we can. Last push of holding up the effort!

I am extremely dubious about the vaccine. I think unless it's 100% - which it won't be - people are so scared of catching Covid now that this is just how it will be. In and out of lockdown. Some things are gone forever I think. Cinemas, concerts, sports events, I think are gone. I think we will remain largely very distanced, I'm not sure how people will make new friends or relationships.

I think they need to be more honest about the vaccine. I need to see more of the science rather than what the pharmaceutical companies are saying. They treat the public as if we're stupid. They say that is 95% effective for older people but it was only based on 100 people. I would trust information from the Lancet or an independent scientific journal or source. Once we have that kind of information I would be happy to have it.

I will be getting the flu jab. I won't be getting the Covid vaccine. I am just not sure about it. I don't think the developers of the vaccine or the government will tell us enough about it to reassure me. It feels rushed. Given I'm in a younger age bracket with no underlying health conditions, there's no real need to be one of the first in the queue for it.

Well it's not surprising that our Chief Scientific Officer Sir Patrick Vallance has £600,000 of shares in vaccine is it? I actually read about this a while back and others who were insisting we would all need a vaccine. You couldn't make it up. None of my family will be having it .

Hopeful

Pessimistic

Cautious

Distrustful

Anit-Vaxer

Sees vaccines as the way out of the pandemic/ lockdown

Broadly pro vaccine, but expects pandemic/ lockdown to continue

May worry about long term side effects or want more info; may trust some vaccines more than others.

Concerned about how fast it has been approved, reluctant to "test" it

Generally distrustful of vaccines and scientists as a whole





Hopeful



- Most likely to take the vaccine, sees it as worth it even if not perfect.
- Respects current lockdown/ prevention rules, but is mindful of the negative impact lockdown has on aspects of lives (e.g the economy, mental health).
- May or may not trust the Government to distribute vaccines efficiently.

Engagement:

- Hopeful, positive message about "return to normal".
- Simple, concise info about where and how to get the vaccine.

At the moment I couldn't care less if it won't be the most effective vaccine long as it means a quicker return to normality. Plus I think people being able to see the finish line will motivate most for one last push to suppress the virus before enough are vaccinated.

We are looking to beat something that is essentially unbeatable. It can be mitigated a little, but its a coronavirus. It's a more contagious and dangerous cold, and we have no vaccine for a cold. Money will be flung at high speed and we will get somewhere which will save some lives, but we cannot control and beat everything like we have been led to believe.

Just because there's a vaccine doesn't mean there's a vaccine that works. Or that anyone can be sure will work. Russians and Chinese are supposedly vaccinating now with unproven vaccine. Americans plan to do this soon. Brits plan to wait until there's good evidence the vaccine works.

I wouldn't classify myself as an anti vaxer in the sense that all my kids are fully up to date with their vaccines but I'm strongly considering whether or not to for the kids or I to have the Covid vaccine. I feel it's been so rushed that the potential side effects/long term health effects have not been fully evaluated.

The vaccine is nonsense, they probably just want to test some stuff on us, I don't trust these white people and their government. Do they think we are going to take it? If they start forcing it on us, I'll just have to go back home to Somalia and live out the rest of my life there. I've got God and don't need it.

Pessimistic



- Quite likely to be willing to be vaccinated, albeit somewhat cautious.
- Respects strictly current lockdown/ prevention rules, may go above and beyond (e.g. never going to restaurants even when official advice allows it).
- Distrusts the Government's capacity to deal with the pandemic/ vaccination.

Engagement:

- Appeal to their risk aversion, highlight dangers of not vaccinating.
- Provide reassurance on efficiency and safety.

Cautious



- May trust some vaccines (e.g. Oxford) over others (e.g Chinese or Russian).
- May be reassured by authoritative information from doctors and scientists .
- Dissatisfied with how the Government communicates about the vaccine- would like to see more transparency.

Engagement:

- Transparent communication about researching and producing the vaccine
- Provide reassurance on efficiency and safety.

Distrustful



- Concerned about the long term effect of vaccine; concerned that the vaccine was approved too fast.
- May trust other forms of vaccine (e.g flu jab, childhood immunisations) but have specific concerns about the Covid vaccine.
- Dissatisfied with how the Government communicates about the vaccine- would like to see more transparency.

Engagement:

- Transparent communication about the process of researching and producing the vaccine
- Medical professionals and others who get vaccinated early can provide reassurance on the safety of vaccine.

Anti-vaxer



- Distrusts vaccines and the scientific community in general.
- May not believe lockdown/ prevention measures are necessary.
- May believe Government or scientists have selfish reasons for promoting measures such as vaccinations or lockdowns.

Engagement:

- Understand why such attitude exist in some groups (e.g. BAME). Address them in a culturally sensitive manner, appealing to figures they do trust.



A successful strategy to increase uptake and awareness of the Covid-19 vaccine would need to take into account:

Attitude towards vaccine

Which groups of people are on the fence about taking the vaccine and could be persuaded with information and arguments?

Access to the vaccine/ to information about it

How do we ensure that hard to reach groups have access to the vaccine and know where and how to get it?

Influencers and communication channels

- Where do various groups get information about keeping themselves safe during the Covid-19 pandemic?
- What kind of information/ format would be accessible for different groups? (e.g. disabled, limited English)
- Who would be considered trustworthy and authoritative by different groups?

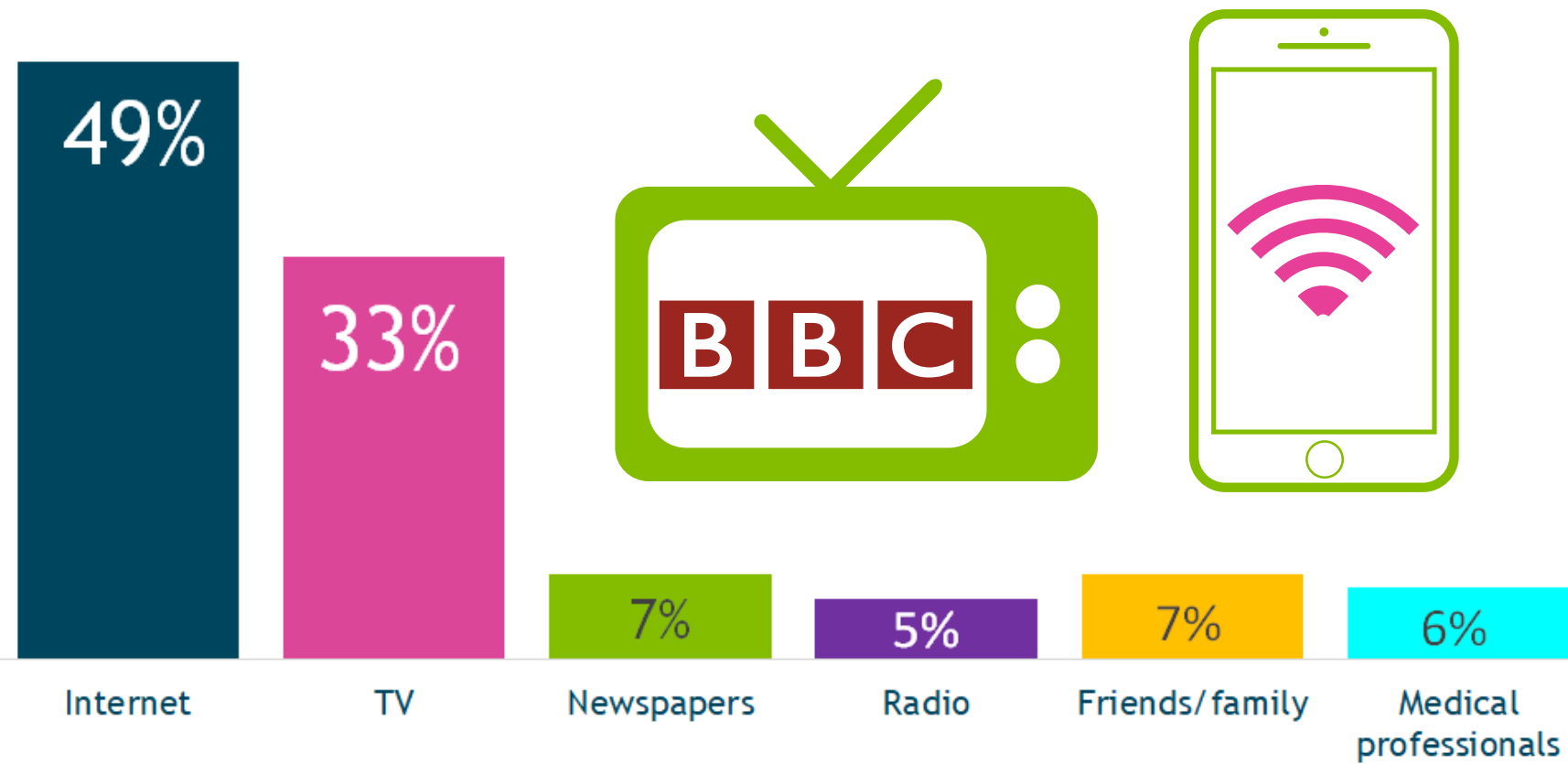


Information about Covid-19

Between April and June 2020 we conducted a survey with **663 respondents** in Tower Hamlets, Newham and Waltham Forest.

The internet was the most used information source for staying informed about Covid-19, followed by TV.

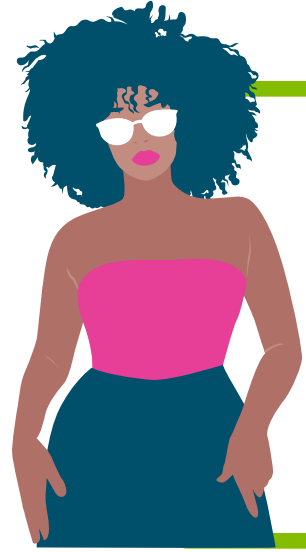
Official websites and social media were used by those who used the internet to stay informed.



BBC news on TV and online were named as a source of reliable information by many respondents.

The government briefings on TV, radio and online were followed by some respondents.

as % of the 324 who used the internet



BAME respondents

were more likely to say they get information about the pandemic from friends and family.

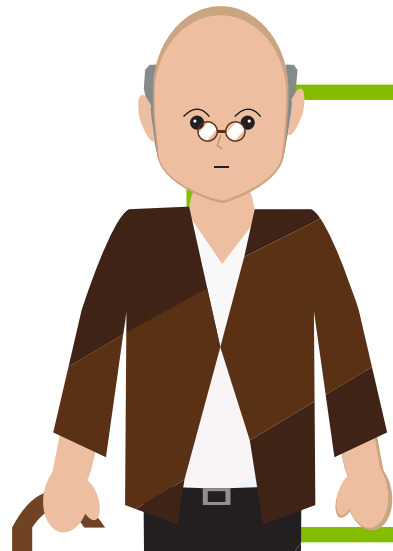
Respondents aged 65+

also relied on friends and family members who used the internet to obtain information, particularly those who spoke limited English.



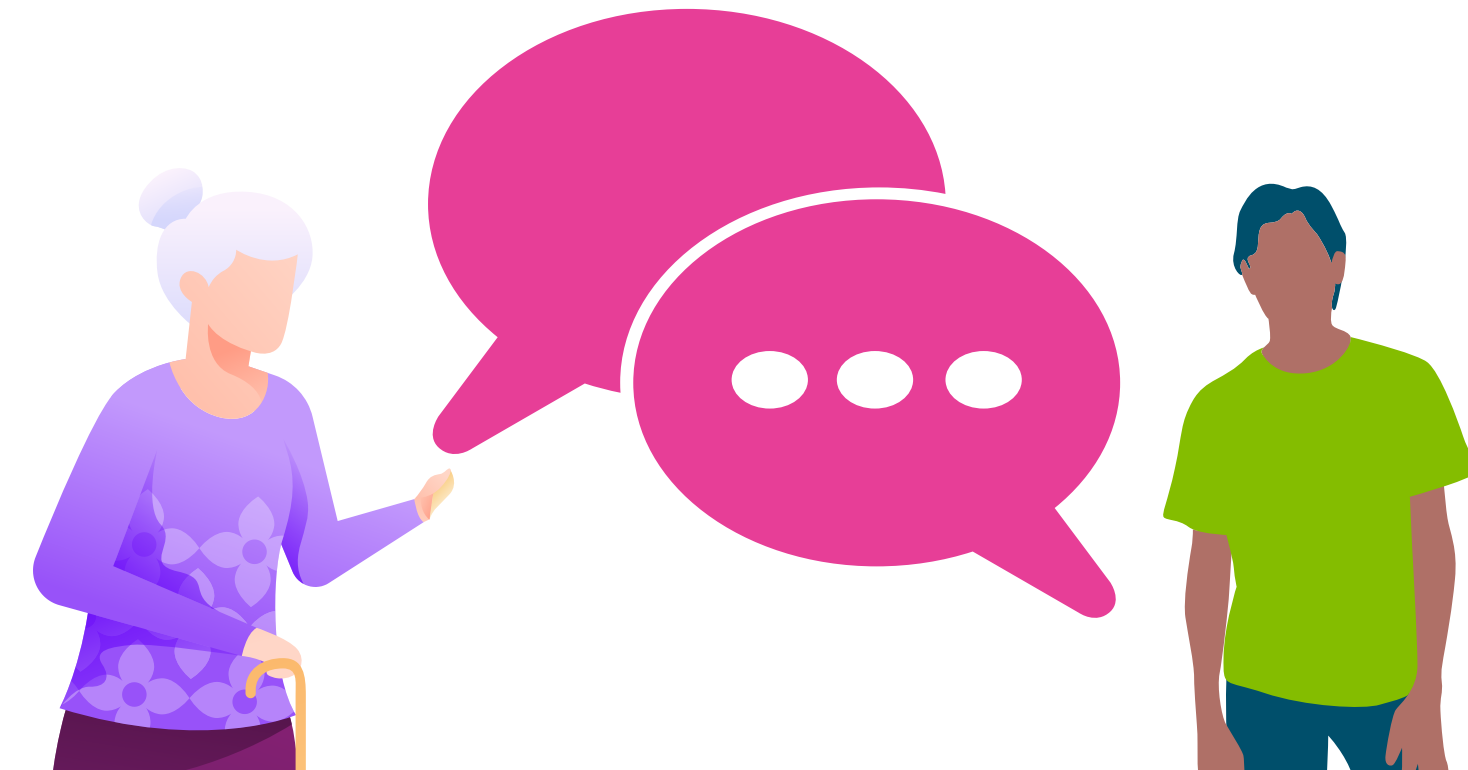
Respondents aged 18 to 24

were the most likely to use the NHS 111 and gov.uk websites.



Respondents aged 65+

were the most likely to get information from TV, radio or newspapers





Potential obstacles to accessing the vaccine

These should be taken into account by a vaccination outreach strategy, in order to ensure the vaccine is available to everyone and prioritise according to need; and to reduce health inequalities.



Who would administer the vaccine and where?

Excessive reliance on primary care providers should be avoided, to prevent excessive pressure on GP surgeries and to avoid excluding those not registered with a GP.

Young men, migrants, those who are homeless, in precarious housing or likely to move between geographical areas frequently are less likely to be registered with a GP.

How will people know where and how to get the vaccine?

Information about vaccination sites needs to be accessible to people with limited English, those with sight, hearing or learning impairments, and those who are digitally excluded.

Special effort needs to be put in place for those disengaged from both primary care and mainstream English-speaking media. Teaming up with employers, schools and migrant charities could be part of the solution.