
**COVID-19
VACCINATION
HESITANCY
PAMPHLET**

Raj Aurora and Ashwin
Sooriyakumar

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Vaccine Hesitancy Among Clinic Patients

Small but significant number of patients are COVID-19 vaccine hesitant

- This behavior puts young children under these individuals' care and associated contacts at risk for infection

Cited reasons by patients include:

- Distrust of established scientific organizations
- Mistrust into political pundits who have denounced scientific evidence

Public Health Considerations and Costs

- As of 9/27, 70% of Fairfield County is vaccinated.
- As of 9/23/21, 74.8% of hospitalized patients in CT [282 individuals] are not fully vaccinated.
- According to the recent executive order, State employees, K-12 teachers and staff, childcare workers must be vaccinated by 9/27.
- On average, COVID-19 hospitalizations on Medicare and Medicaid cost \$24,033/person.
- In CT alone, the current cost to hospital networks due to unvaccinated patients is \$5M per day.

Community Perspectives:

Dr. Nick Florio:

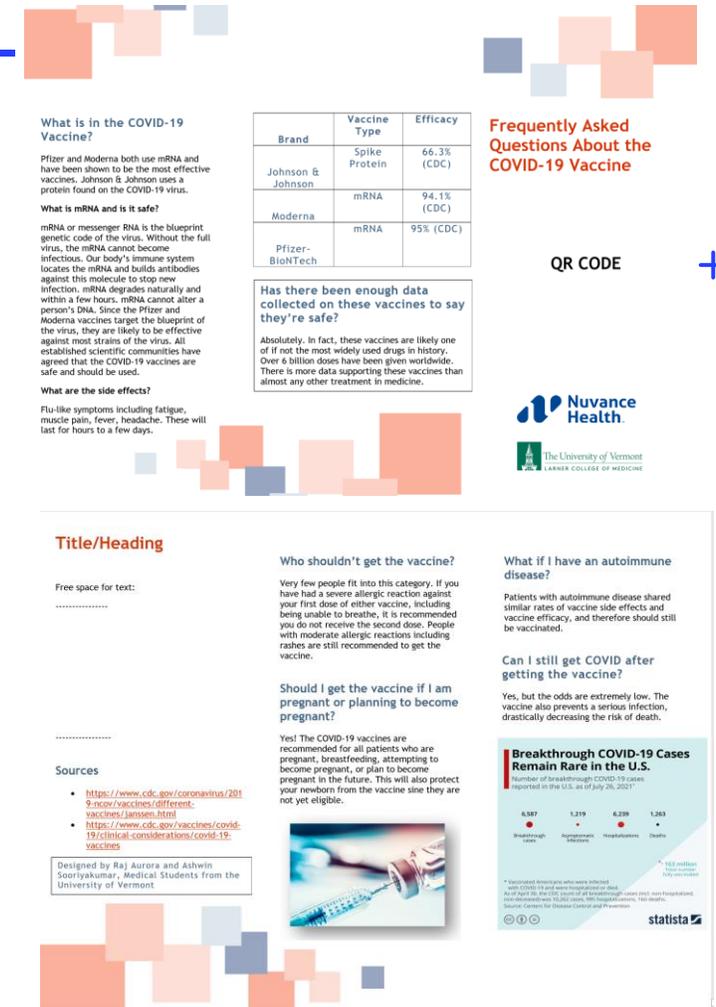
- Many patients view the vaccine as a political issue
- Many are uncertain regarding the mRNA component. It's important to note that we have been researching mRNA vaccines for over a decade. This isn't a new concept.
- Some of the vaccine rejectors are embedded in webs of misinformation through the internet. It's quite difficult to argue scientific facts with these individuals.
- Others have gotten COVID and justify rejecting the vaccine given their lasting immunity, though that has been shown to wane faster than vaccine immunity.
- It is important to emphasize to patients that we have a ton of data regarding the mRNA vaccines. We have mapped out all the side effects but there could be possible long-term effects, which can scare patients away.

Dr. David Lo

- Common issues with the vaccine include:
 - it's only been around for a year, is it safe?
 - I'm young and would survive COVID anyway. Why should I get the vaccine?
 - How likely are the disastrous side effects of the vaccines including blood clots or heart disease?
- Patients with special circumstances who often inquire about getting the vaccine and can be convinced include pregnant patients, those with autoimmune disease, and patients with allergic reactions to previous antibiotics or vaccinations. For these specific patients, we can get polyethylene glycol testing.
- This type of intervention lacks efficacy in communities with high vaccination rates. These interventions should be replicated in communities in the southern states.

Intervention: Vaccine Hesitancy Pamphlet

- Patient's report greater levels of confidence in their provider's understanding of COVID-19 than that of scientific institutions such as the CDC or FDA.
- Given physician's limited time in a patient encounter, we designed a brief pamphlet with accessible language to answer commonly asked questions.
- While the information is still derived from sources like the CDC, we believe that local branding and delivery of information from the patient's primary care office along with easy-to-understand language discussing the pros of the COVID-19 vaccine may help address vaccine hesitancy.
- The pamphlet will be also available in a digital format through a QR code for easy dissemination of information.



Mock images of the Pamphlet

Projected Results and Impact

- In measuring impact, we classify patients into three groups: the vaccine endorses, vaccine ambivalent, and vaccine rejectors.
- While we have not yet been able to disseminate the pamphlet to patients due to limited time, we hope for the pamphlet to have a 20-30% conversion rate for vaccine ambivalent patients.
- Given each clinic's encounter rate of 1 vaccine ambivalent patient per day, we hope to encourage 2-3 vaccinations/week.
- If any of those vaccinated individuals were to instead remain unvaccinated and be admitted/be the reason someone else was admitted for COVID-19, we would save the health system \$24,033 per patient.

Efficacy and Limitations

- Point of access:
 - Currently, this pamphlet will be available at 2 primary care offices, which has a limited reach.
 - To overcome this barrier in part, we have introduced a QR code to make online dissemination of this material easier. We hope other primary care clinics and institutions in the Nuvance system adopt this pamphlet and code, furthering our potential impact.
- Vaccine Polarization:
 - Many vaccine rejectors are firm in their thinking and will be unaffected by this intervention.
- Population Impact:
 - The target population stands to benefit from this intervention, but in a far smaller scale than a community with a lower vaccination rate, say in one of the Southern States.
 - Interventions like this should be applied in these areas to observe maximum impact.

Recommendations

- Based on the interviews and research conducted, we recommend providers in primary care clinics keep this type of program material available for patients who are debating getting the COVID-19 vaccine.
- We hope that these initiatives spread in particular to regions with reduced vaccination rates, such as many states in the South and Midwest. We believe this intervention in those states, between local providers whom patients trust, would yield the highest number of converted vaccinations.

References

- <https://www.healthsystemtracker.org/brief/unvaccinated-covid-patients-cost-the-u-s-health-system-billions-of-dollars/>
- <http://c-hit.org/2021/09/24/coronavirus-faqs-resources/>
- <https://www.courant.com/coronavirus/hc-news-coronavirus-daily-updates-08192021-20210819-kdsx7ecmoverxpptfns3aplqiy-story.html>