



*July 15, 2021*

**Addressing  
COVID-19 Vaccine  
Hesitancy in  
Your Community**



*Ethnographic Research*

Attitudes

+

Beliefs

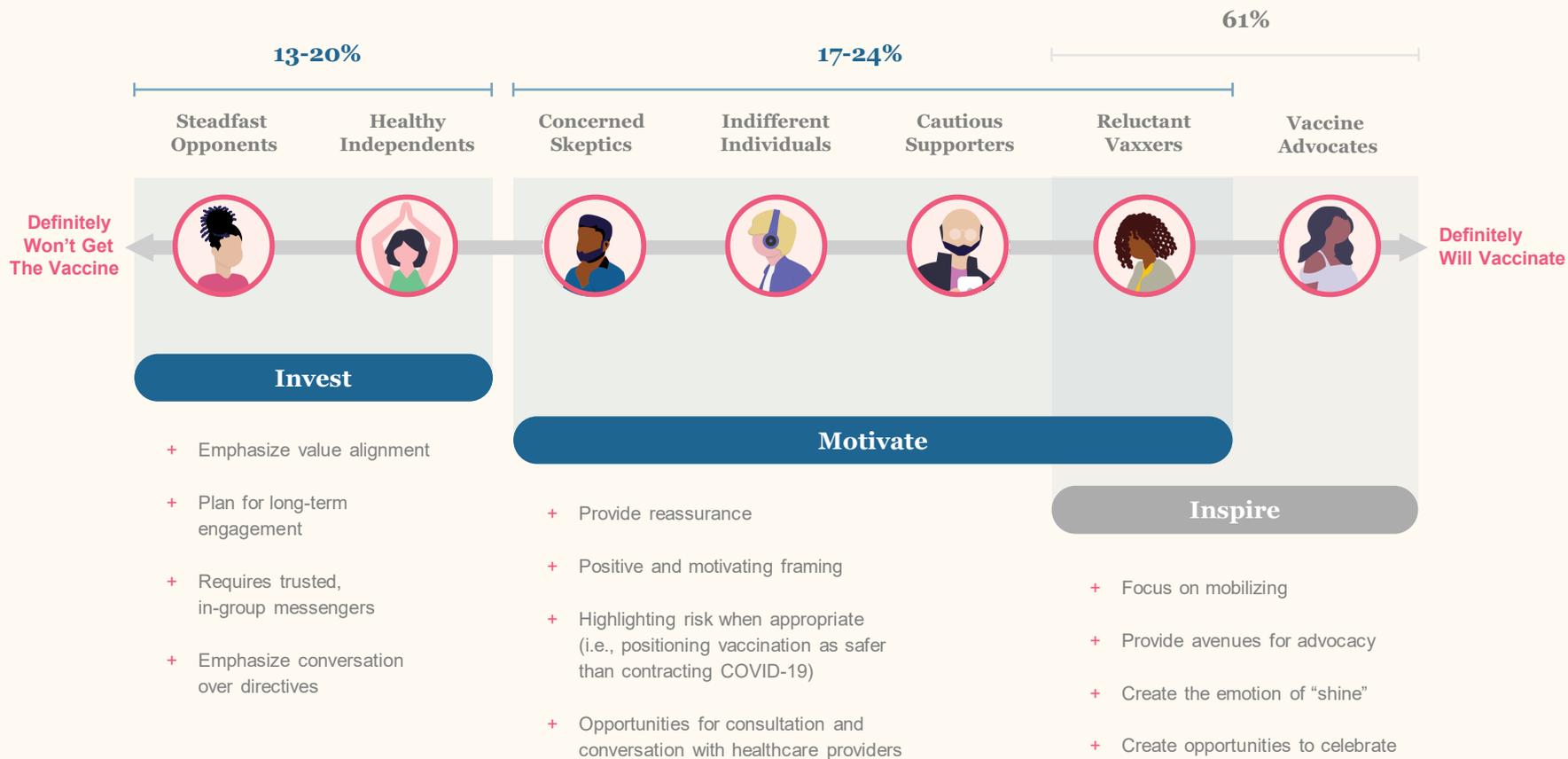
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Behavior

*Quantitative Survey Data*

Archetypes

# Array of Engagement Strategies



1

## Inform

*Before we provide an ask, we need to listen and fill information needs.*

- + Don't just tell people to get vaccine development (show insight into the development process)
- + Emphasize clinical trial inclusiveness as a "win" – positive reframe

2

## Equip

*After we start to fill information needs, we should use trusted messengers to spur conversation and give individuals tools and resources to share.*

- + Show trusted leaders in support of the vaccine
- + Encourage conversation and sharing of content
- + Equip with resources for easy sharing amongst family and friends

3

## Empower

*Lastly, we give people the ask to "join in and get vaccinated," once we have established trust and credibility.*

- + Ask for participation – "we need your help"
- + Encourage engagement with the portal
- + Emphasize the individual and community benefits of the vaccine



# Steadfast Opponent



## VACCINE MINDSET / ATTITUDE

This group is against getting the vaccine and **do not see themselves getting the vaccine** in the future, often because it opposes their deeply-held beliefs.

## RECOMMENDATIONS

Require more than just facts, but also careful listening and empathy. **Listening sessions and provider 1 on 1s are vital.**

**Informal communication networks are key.** Social media grassroots campaigns and in-person canvassing may be needed.

**Often has a religious or trusted family leader** who they will listen to. Find and leverage these leaders.



# Healthy Independents



## VACCINE MINDSET / ATTITUDE

This group believes that the **vaccine is fine for others** who are most vulnerable to COVID-19, but **trust in their good health and immune systems** above the vaccine in order to keep themselves safe.

## RECOMMENDATIONS

Do not emphasize the "greater good," but rather, **personal and external incentives to vaccinate.**

**Communicate risk for healthy individuals** without sounding alarmist. Tailor these messages personally.

**Provide deep listening and understanding** that avoids debate or directives. Validate concerns or opinions as needed.



# Concerned Skeptics



## VACCINE MINDSET / ATTITUDE

**This group is fearful of side effects** and what the short- and long-term health implications would look like for their unique health condition. They will likely not consider the vaccine for years.

## RECOMMENDATIONS

**Personalize communications** – physicians are the most trusted sources and should communicate condition-specific information.

**Highlight monitoring efforts and new, longer-term data** to show vaccine safety over time, including clinical trial successes.

**Provide geographically accessible and at-home solutions** for those with chronic conditions or mobility limitations.



# Indifferent Individuals



## VACCINE MINDSET / ATTITUDE

**Getting the vaccine is not top of mind** for this group. They do not think it is necessary or do not prioritize taking the time to schedule an appointment.

## RECOMMENDATIONS

Emphasize **convenience and persistent communication**

**Make vaccination locations as accessible as possible** by location and scheduling

**Highlight long-term COVID-19 risks and the social and lifestyle benefits** of vaccination

Leverage **messengers with shared values** and opinions and deemphasize government officials and experts in the field



# Cautious Supporters



## VACCINE MINDSET / ATTITUDE

This group **believes that the vaccine is helpful**, but they do have **a few reservations** for themselves or loved ones in getting the shot.

## RECOMMENDATIONS

**Use risk-based messaging** that highlights risk comparisons, as well as vaccine development facts and evidence of efficacy and safety.

**Provide easy avenues to answer questions.**

**Conduct direct physician outreach** to communicate that the risk of COVID is likely much higher than the risk of vaccination.

**Host accessible education sessions** that parents can join to ask questions and learn more from pediatricians regarding their child's safety.



#### VACCINE MINDSET / ATTITUDE

This group has **reservations about the vaccine**, how rushed it was, and what the side effects would be, but are ultimately willing to get the shot.

#### RECOMMENDATIONS

**Don't restate the myth** to avoid instigating alarm or speculation.

Message vaccination as the **safest way to congregate** with family and friends, attend school, and “open up.”

**Create a seamless service experience for these individuals.**  
Create easy scheduling on-ramps

**Partner with pediatricians** to have open discussions.

Have **trusted in-group messengers** (other parents and kids) share their wins.



# Reluctant Vaxxers

# Vaccine Advocates



## VACCINE MINDSET / ATTITUDE

This group is **fully supportive of getting the vaccine** or have already been vaccinated. They may have some questions, but fully trust the shot.

## RECOMMENDATIONS

**Leverage these individuals as community motivators** and provide them with tools to share stories or discuss with others.

**Create a volunteer corps for sign-up assistance, PTA opportunities, coalitions/partnerships with local pediatricians, and “Get Out the Vote” models** of community engagement using vaccine advocates.

# Translating archetypes and insights from concept to practice



**IMPORTANT INFORMATION: COVID-19**

## VACCINATION

### Vaccine confidence enablers

While the tactics used to influence people vary, there are several vaccine confidence enablers that work across all communities.

- A Expanding Access / Equity**

COVID-19 has disproportionately impacted communities of color and low economic status. These same communities face significant barriers to getting vaccinated. Remove barriers and expand cultural acceptance.
- B Trusted Messengers**

Spokesperson, messenger, and / or authority figures delivering information about the vaccine is just the message itself. Product of expertise, familiarity, and shared values. Introduce trusted voices, including community members who have credibility in the community.
- C Employer Outreach**

Employers are key partners in making vaccination sites convenient and removing work-related barriers to vaccination. Provide employer groups with specific tactics and support to assist with vaccinating their workforce.
- D Designate "vaccine ambassadors"**

Designate "vaccine ambassadors" across different business units and facilities to engage employees. Consider additional incentives for employees to promote vaccinations across the workforce.
- E Government Resources**

Work in partnership with local, county, and state government agencies to implement programs that move the unvaccinated from contemplation to action at scale.
- F Monolithic national campaigns**

Monolithic national campaigns are no longer effective. Use a deep understanding of audience segments and needs to answer their questions, tailor messages, engage through multiple channels, and drive behavior change.

**COVID-19 Vaccine Confidence Toolkit**

**KAISER PERMANENTE.**

[Click here to view the toolkit](#)  
[Click here to read the full report](#)