Addressing Vaccine Hesitancy with COVID-19 Vaccination

Vaccine hesitancy was declared by the World Health Organization (WHO) in 2019 as one of the top 10 threats to global health. Pharmacists and other healthcare providers should address vaccine hesitancy with patients by providing accurate information from reliable sources and personalized recommendations to their patients. We've compiled some best practices and talking points to support you in mitigating specific vaccine hesitancy concerns with the COVID-19 vaccine.

General Recommendations[1,2]

Be prepared
Having a strong understanding of the most current vaccine information will help you be confident in your conversations with patients. That confidence comes through when speaking with your patient and can help put them at ease.

- Continue to educate yourself with the most up to date COVID-19 vaccine information as new data becomes available and guidance evolves. A variety of resources and summary documents can be found online from organizations including, but not limited to, the American Pharmacist Association (APhA), Centers for Disease Control and Prevention (CDC), and the Immunization Action Coalition (IAC).
- Have some talking points ready to explain how vaccines work, how the trials have been conducted and the most current findings.
- Keep your ears open for the concerns being raised in social media and news coverage, so you can determine how to best address them.
- It is important to understand your patient population, so you can share facts and information specific to those populations.

Build trust
Invite your patients to share their concerns and questions.

- Be careful not to minimize or dismiss these concerns as you address misinformation.
- Share facts and recommend reliable sources to help them educate themselves.
- Be honest with your patients about what to expect with the vaccine and be clear about what information is still unknown.
- You may not get through to everyone, and that is ok!

Make your recommendation personal
Personal experience and stories can be very impactful.

- If you are comfortable, it may be helpful to share why you got the vaccine and what your experience was.
- If you have had the opportunity to vaccinate others, share what that experience has been like for others as well.
- When recommending the vaccine, consider emphasizing why getting the vaccine should be especially important to that patient, such as an underlying condition they are managing, at risk family member(s) or field of work.

Talking points for specific COVID-19 vaccine concerns or questions

We've assembled some talking points to help you inform your patients and counter misinformation.

SAFETY

Patients concerned about the faster approval process used for COVID-19 vaccines[3]

- Researchers leveraged existing clinical trial networks, allowing testing to begin more quickly.
- Manufacturing of the vaccine began during the clinical trials. Typically, the manufacturing process is not started until the trials are finished.
- mRNA vaccines, such as the Moderna and Pfizer COVID-19 vaccines, are quicker to produce compared to other vaccine types.
- Emergency use approval is only granted if the benefit is greater than the potential risk.

Patients worried about getting COVID-19 from the COVID-19 vaccine

- It is not possible to get COVID-19 from the vaccine.
- The currently available COVID-19 vaccines are not manufactured using the live virus.

Patients expressing general concerns about the COVID-19 vaccine being so new[4,5]

- Even though the mRNA vaccines (such as the Moderna and Pfizer COVID-19 vaccines) are new, the technology used to develop them is not. The mRNA technology has been studied for other vaccines including the influenza, Zika, rabies, and cytomegalovirus (CMV) vaccines. Additionally, mRNA technology has also been used in cancer research.
- Viral vector vaccines (such as the Johnson & Johnson/Janssen COVID-19 vaccine) have been used since the 1970s and have been used for vaccines against Ebola and have been studied for diseases including Zika, influenza, and HIV. Viral vector technology has also been widely used in cancer research.

Patients concerned with the lack of long-term safety data[3]

- Safety continues to be monitored, even after approval. The FDA/CDC Vaccine Adverse Event Reporting System (VAERS) is in place to offer continued monitoring of safety post approval. Necessary action will be taken should safety concerns arise.
- Studies followed patients for at least 8 weeks post vaccine, which is the expected timeframe to see potential adverse effects from a vaccine.
- Both COVID-19 disease and the COVID-19 vaccine are new. Researchers ultimately need more time and more people to get vaccinated to identify rare and/or long-term side effects.

Patients concerned about whether their demographics were represented in the clinical trials[2,6]

- It is important to be mindful that certain racial or ethnic groups may be especially hesitant to receive a vaccine due to mistrust from historical experiences or due to mistrust of the government.
- A wide array of race, ethnicities, sex, and ages were studied amongst all 3 currently approved vaccines.
    - Resource: The CDC offers excellent, vaccine specific data that includes demographic representation within the respective clinical trial. Navigate to the following link, select the specific vaccine of interest, and reference the Demographic information from clinical trials section https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines.html

Patients concerned about potential side effects[2]

- Consider comparing the possible COVID-19 vaccine side effects to another vaccine the patient may have received before.

- Share that the side effects, such as fever, muscle aches, etc., are signs that their immune system is working as it should, providing evidence that the vaccine is working.
- Just like with any vaccine or medication, severe allergic reactions are possible but uncommon.

EFFICACY

Patients expressing uncertainty about how long protection will last[7]

- Be upfront and honest with your patients that we currently do not know how long protection will last (either if you get COVID-19 disease or the vaccine).
- What is known is that COVID-19 has caused very serious illness and death for many people. If you get COVID-19, you also put family and friends at risk of becoming very sick. Receiving a COVID-19 vaccine is a safer choice.

Patients who think the vaccine is not needed if they already had COVID-19[7]

- It is still recommended to get the vaccine even in those who have had COVID-19 because it is still unknown how long protection lasts after getting the disease naturally and also because it is possible to be reinfected with the virus that causes COVID-19 again.

Patients questioning the general efficacy of the vaccine[6]

- Studies show that COVID-19 vaccines are very effective at keeping you from getting COVID-19.
    - Resource: The CDC offers excellent, vaccine specific data including vaccine efficacy statistics found here. Navigate to the following link, select the specific vaccine of interest and reference Information on how well the vaccine works section: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines.html
- For those who get the vaccine and still get COVID-19, it is thought that the vaccine will prevent more serious illness.

ACCESSIBILITY

Patients concerned about not being able to afford the vaccine[7]

- According to the CDC, the federal government provides the vaccine free of charge for all people living in the United States.
- Vaccine providers may bill insurance for an administration fee. Patients cannot be denied a vaccine if they are unable to pay the vaccine administration fee.

Resources

1. Vaccine Hesitancy. APhA COVID-19 Resources: Know The Facts. APhA. Nov 2020. Accessed from APhACOVID-19VaccineHesitancy_1120_web.pdf (pharmacist.com)
2. AMA. COVID-19 vaccine hesitancy: 10 tips for talking with patients. Feb 2021. Accessed from https://www.ama-assn.org/delivering-care/public-health/covid-19-vaccine-hesitancy-10-tips-talking-patients
3. CDC COVID-19 Response Vaccine Task Force. Building Confident in COVID-19 Vaccines Among Your Patients. Jan 2021. Accessed from https://www.cdc.gov/vaccines/covid-19/downloads/VaccinateWConfidence-TipsForHCTeams_508.pdf
4. CDC. Understanding mRNA COVID-19 Vaccines. March 2021. Accessed from https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/mrna.html
5. CDC. Understanding Viral Vector COVID-19 Vaccines. Mar 2021. Accessed from https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/viralvector.html
6. CDC. Different COVID-19 Vaccines. Mar 2021. Accessed from https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines.html
7. CDC. Frequently Asked Questions about COVID-19 Vaccination. Feb 2021. Accessed from https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html