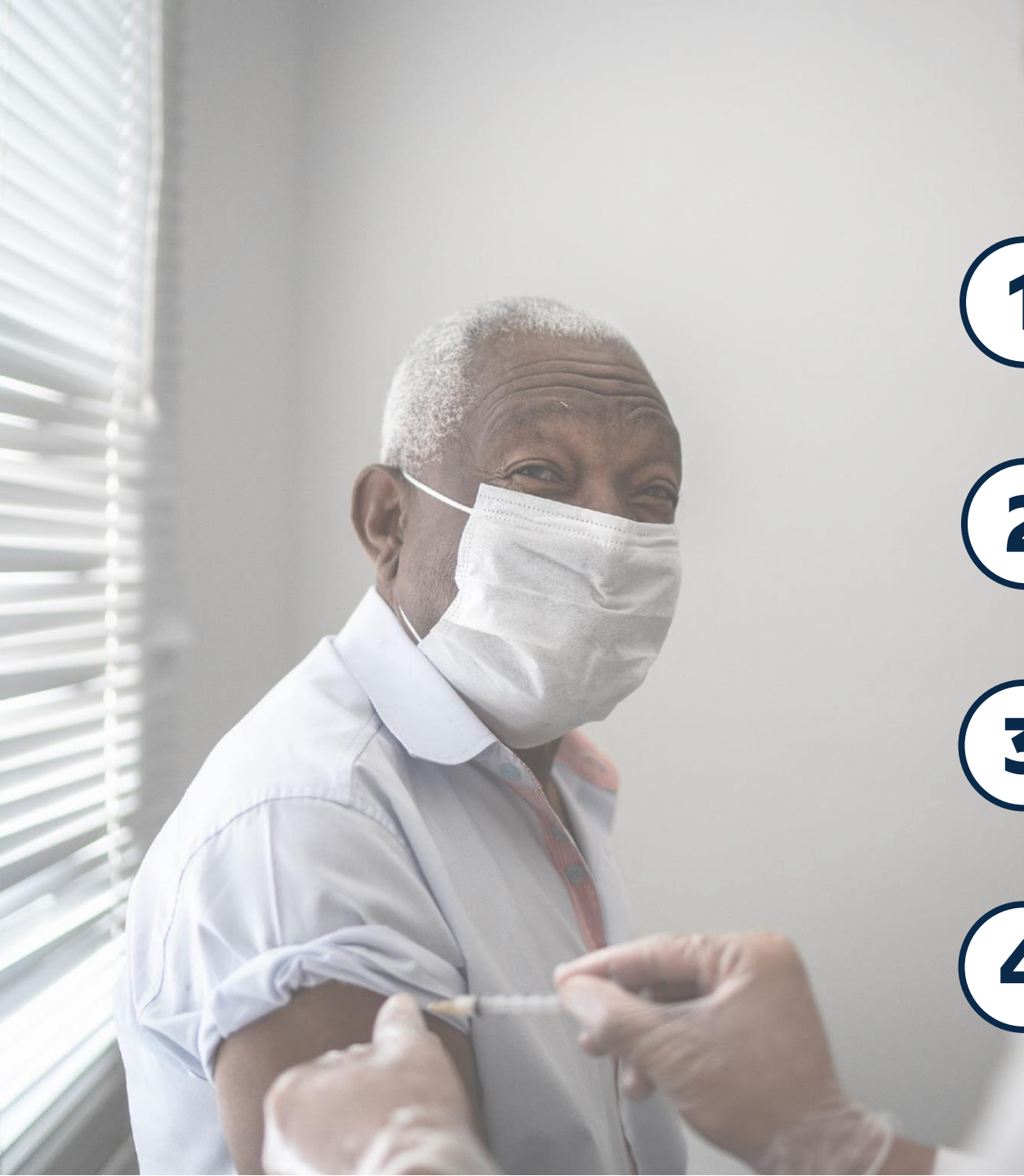


Equity-First Vaccination Initiative

Covid-19 Vaccination Pulse Survey Insights

Data pulled on September 14, 2021





Insights and interpretation

- 1** Overview and data interpretation
- 2** Survey insights: cross-site
- 3** Survey insights by demonstration city
- 4** Supplemental data slides

Overview

As part of The Rockefeller Foundation's Equity-First Vaccination Initiative, the Foundation's partners in five focal jurisdictions (Baltimore, Maryland; Chicago, Illinois; Houston, Texas; Newark, New Jersey; and Oakland, California) are collecting and analyzing survey data about COVID-19 vaccination with support from Mathematica. The black, indigenous, and people of color (BIPOC) communities' monthly vaccination pulse survey serves to support the Equity First Vaccination Initiative by providing up-to-date evidence about community members' knowledge, attitudes, and behaviors related to COVID-19 vaccination, as well as potential motivators for vaccination and barriers to access. This evidence can then be used to inform the Foundation and its partners' strategies on how to encourage vaccine uptake and will allow community-based organizations (CBOs) in these jurisdictions to adapt their work to the specific and changing needs of their communities.

Important notes on methodology and limitations in using this data

- Given how survey respondents are identified and recruited, the following survey results speak to the people who took the survey. ***The survey results are not necessarily generalizable to the population of each city as a whole.***
- In many instances, the number of respondents is quite small, meaning the ***trends might exist only among those we surveyed and not the larger population.*** Be especially careful when interpreting data from survey questions with a sample size of less than 50 respondents. For example, think of the values as indicating whether something was reported more commonly or not, rather than focusing on the specific percentages.
- ***The respondents who agreed to participate in the survey might have demographic characteristics, experiences, attitudes, and beliefs that are different from those who declined to participate.***
- For cross-site results, each city has different methods for fielding the survey and a different demographic makeup. Thus, ***although it is interesting to compare results across different cities, it is a bit like comparing apples and oranges.***
- Results are based on ***descriptive analysis of raw data*** without additional statistical considerations.

**So, what do these data tell us?
How can we talk about them?**

*“These are the people we talked to in our community,
and this is what they said about the Covid-19 vaccine.”*

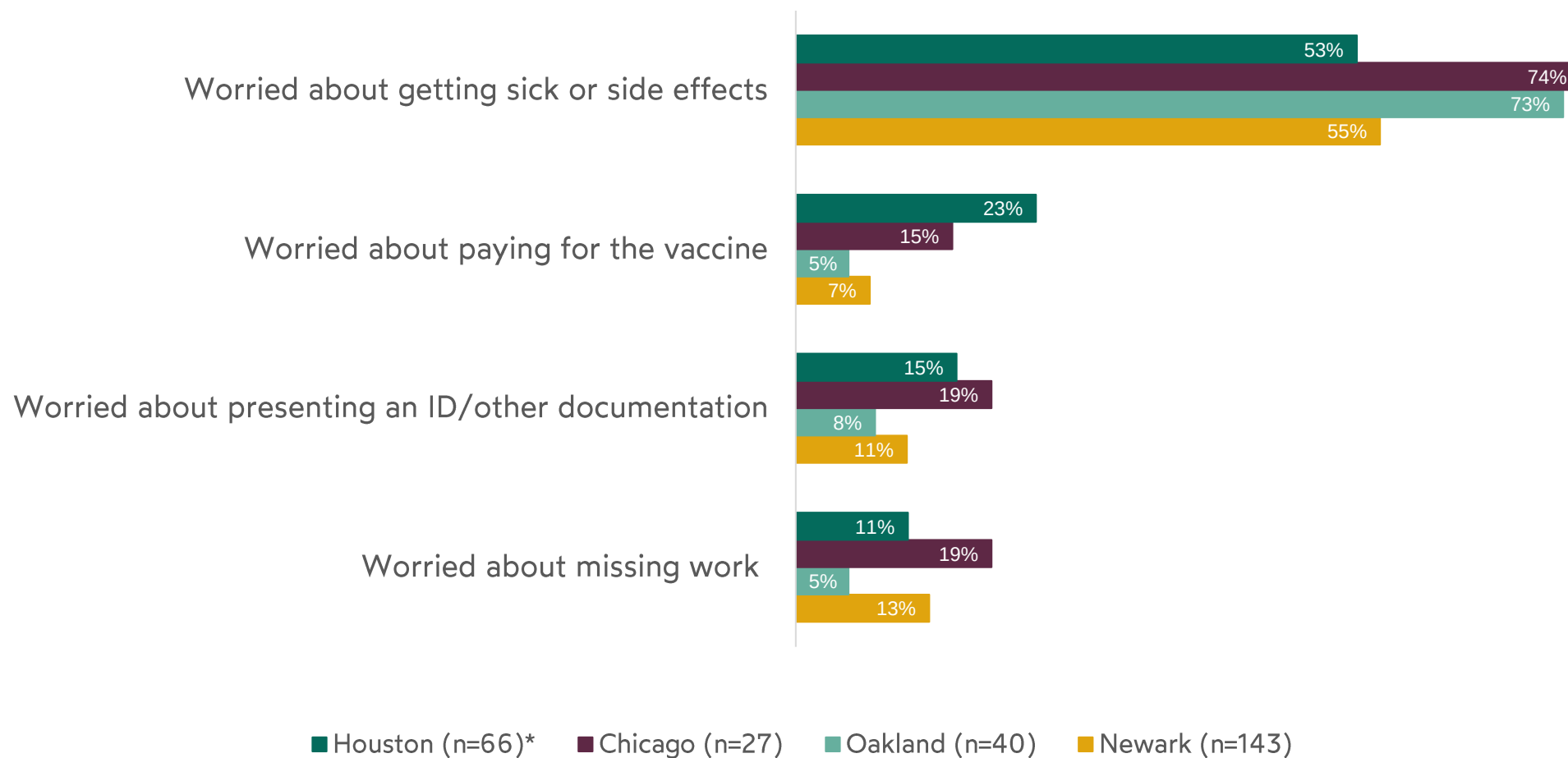
Survey insights: Cross-site

Top barriers, motivators, and beliefs reported by unvaccinated respondents in each city

Top concerns serving as barriers for unvaccinated respondents

From July & August data

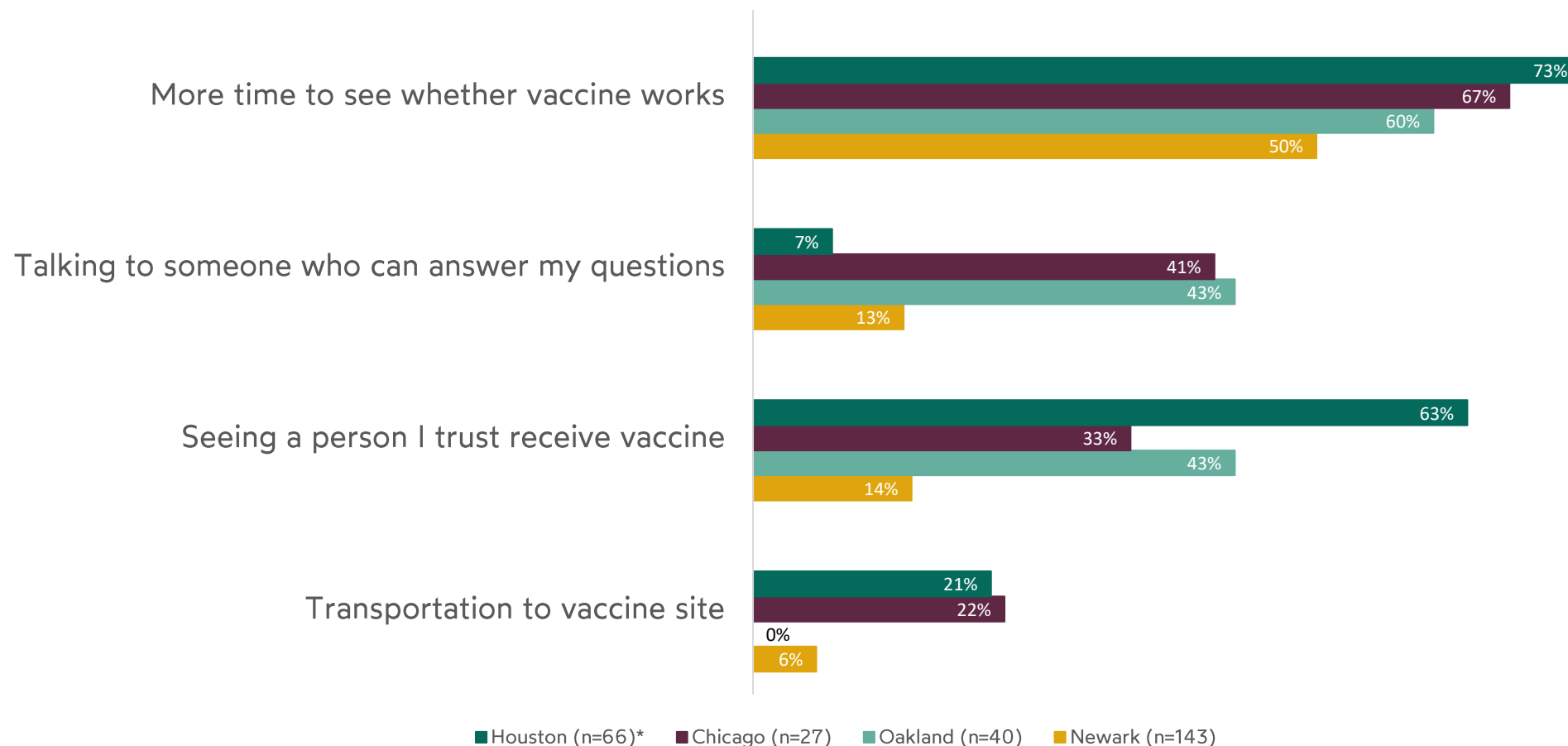
Across all five cities, more than half of unvaccinated respondents were **worried about getting sick or experiencing side effects** from the vaccine. Sites might want to collaborate on messaging and strategies related to this barrier.



Top potential motivators for unvaccinated respondents

From July & August data

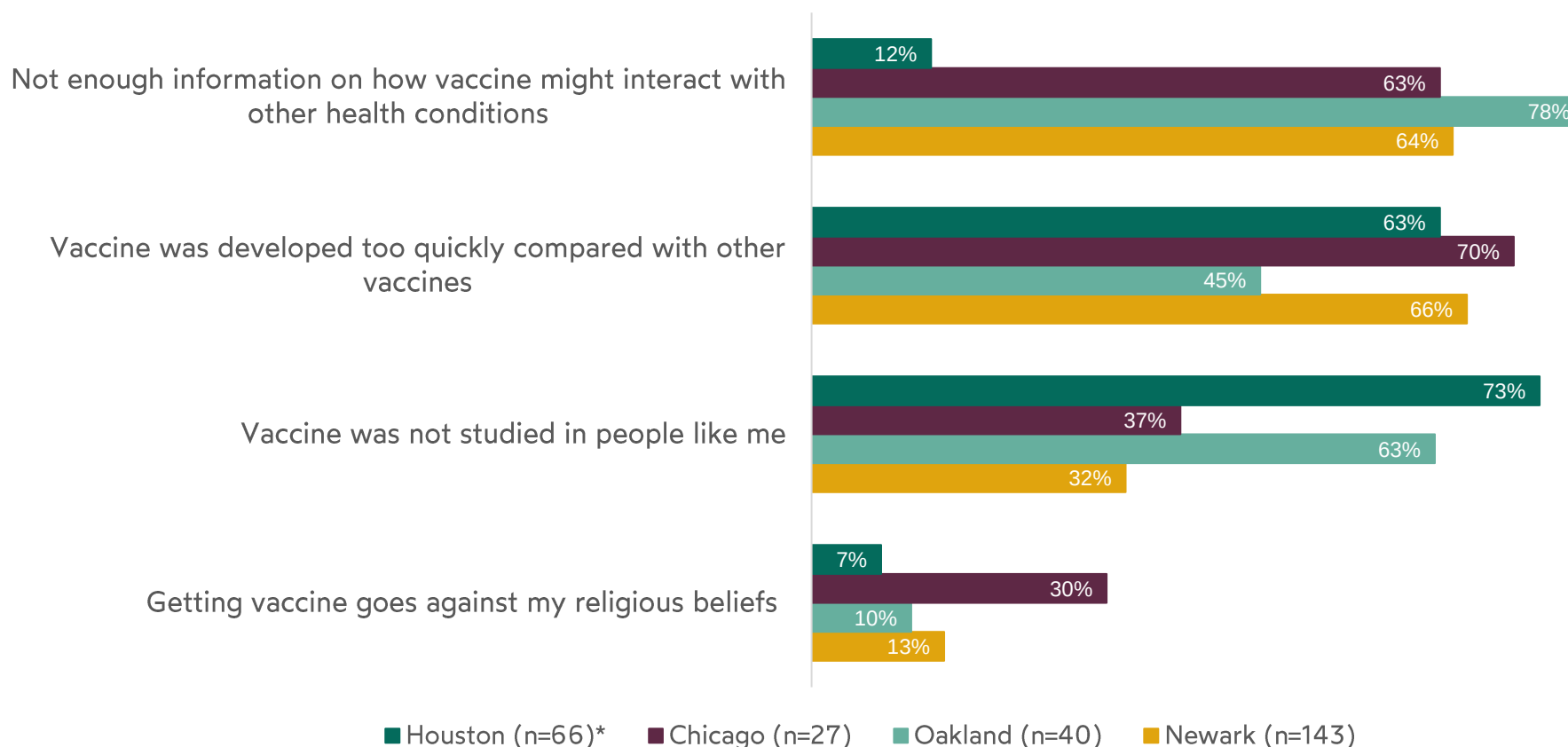
For all cities, a top motivator was that respondents wanted **more time to see whether the vaccine works**. Sites might want to collaborate on messaging and strategies related to these topics, such as conducting a focus group to examine what “more time” means.



Top beliefs reported by unvaccinated respondents

From July & August data

Across three cities (all except Houston), unvaccinated respondents were highly concerned that there is **not enough information on how the vaccine might interact with other health conditions**. Across all four cities, unvaccinated respondents were concerned **the vaccine was developed too quickly compared with other vaccines**. Sites might want to collaborate on messaging and strategies related to these topics.



**From July &
August data**

**Results pending.
Baltimore data will be available in future reports.**

Survey insights by city: Chicago

- Methodology
- Respondents' vaccination status and intentions
- Characteristics and highlights among vaccinated respondents
- Characteristics and highlights among unvaccinated respondents
- Differences between “types” of unvaccinated respondents
- Summary and potential actions

Methodology



Monthly goal: 100 responses

The main partner leading this effort is **Chicago Community Trust**.

Partnered with

Sinai Urban Health Institute (SUHI)
leads the data collection efforts.

SUHI partners with community members and organizations to document disparities and improve health outcomes in vulnerable neighborhoods in Chicago.



THE CHICAGO
COMMUNITY TRUST
AND AFFILIATES

Chicago Community Trust brings together donors, nonprofit organizations, and residents to address critical needs within the city.



Community Health Workers (CHWs) administer survey in person at canvassing events.*



Use a screener that is distributed via social media or emailed or texted directly to client lists of local organizations.** Screener includes questions about eligibility and respondents' preferred contact method.



CHWs and other SUHI staff reach out by phone, email, or text based on request.

*Health fairs, summer church events, back-to-school events, food pantries, and concerts

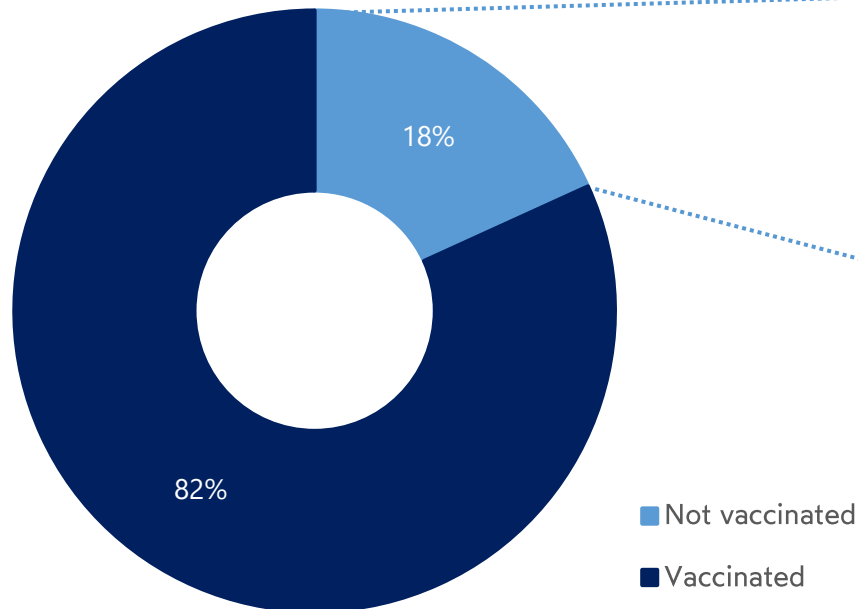
**There are 15 participating organizations. Examples include Access Living, Equal Hope, and Phalanx.

Vaccination status and intention (n = 148)

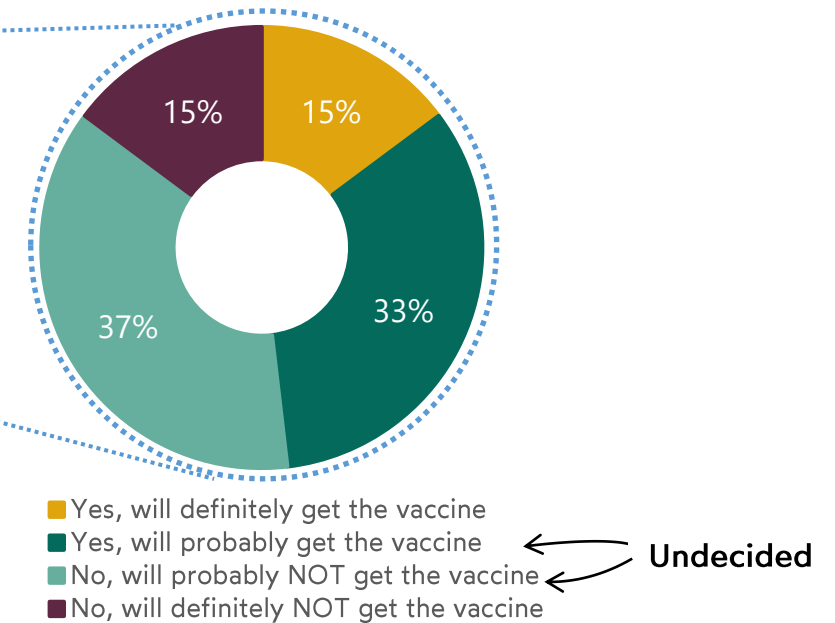
From July & August data

Most of the surveyed population is vaccinated (82%). Among the respondents who are not yet vaccinated, **70% are undecided**, and **15% intend to get the vaccine**.

Surveyed population in Chicago



Among the 18% who are not vaccinated

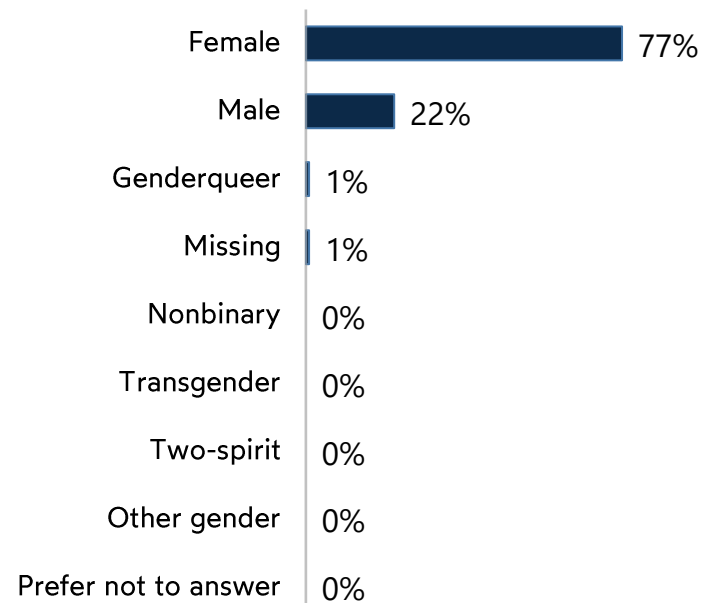


Who are the vaccinated respondents? ($n = 121$)

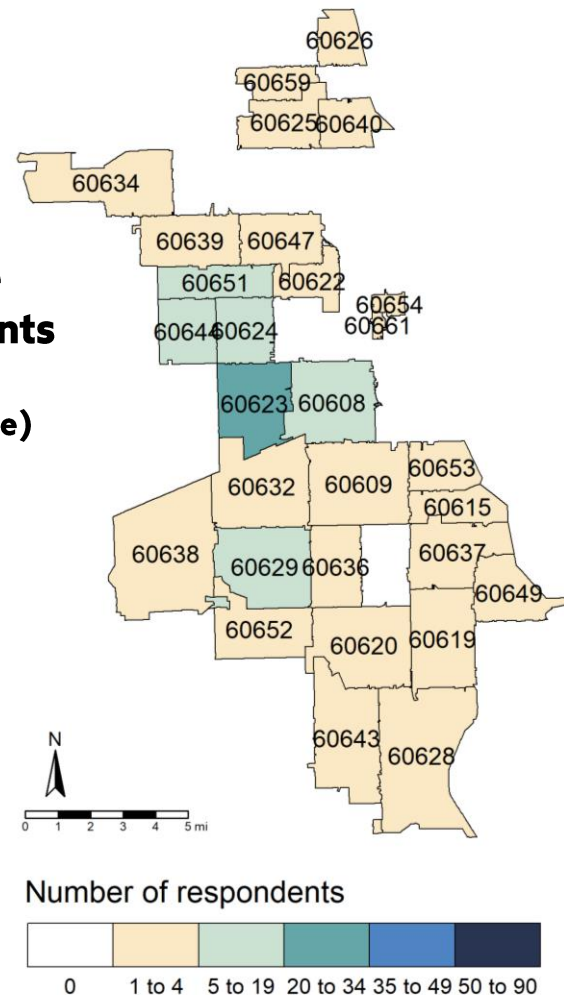
From July & August data

Most vaccinated respondents were **female**, slightly more than half were **Hispanic or Latino/Latinx**, and many lived in **zip code 60623**.

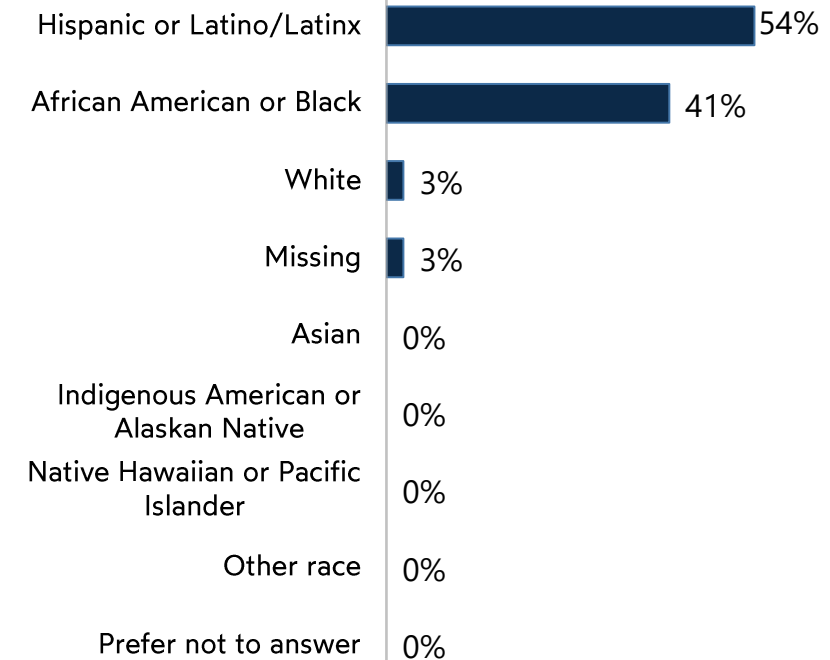
Gender (select all that apply)



Where respondents live (by zip code)



Race/ethnicity (select all that apply)

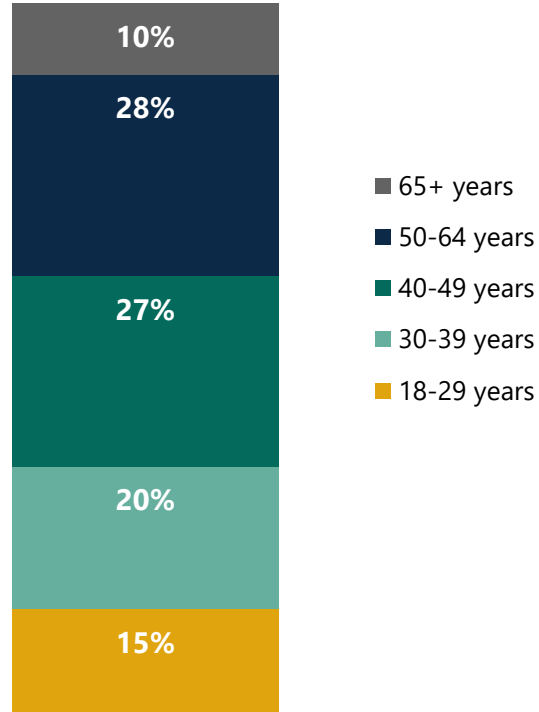


Who are the vaccinated respondents? ($n = 121$)

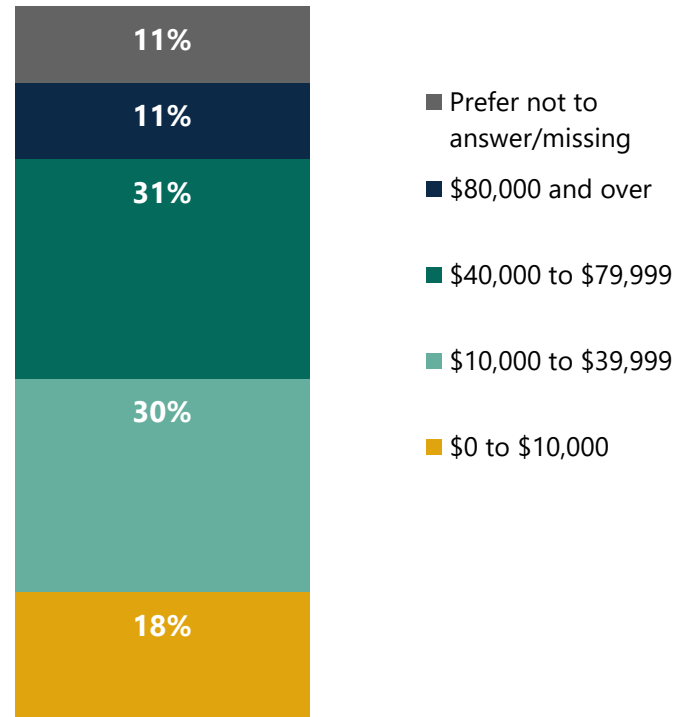
From July & August data

Most vaccinated respondents are ages **30–39 (27%)** or **50–64 (28%)**, have an income of **\$10,000–\$39,000 (30%)** or **\$40,000–\$79,000 (31%)** a year, and have a **bachelor's degree or higher (47%)**.

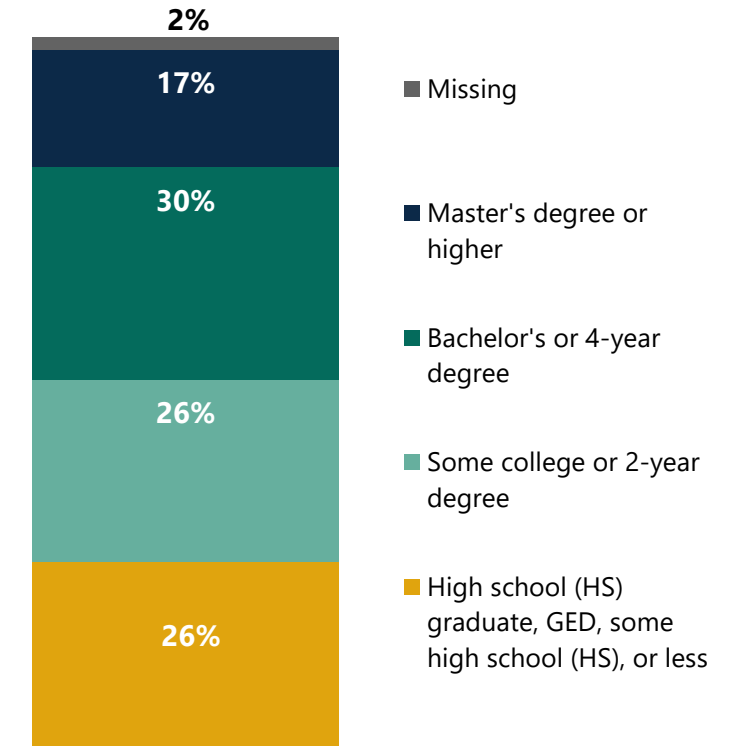
Age



Income



Education



Among vaccinated respondents ($n = 121$)

From July & August data

ACCESS



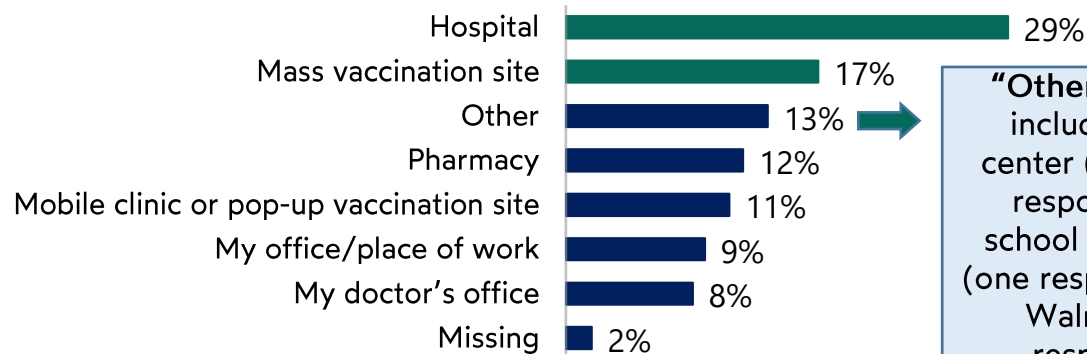
Most respondents noted that it took **20 minutes or less (66%)** to get to the location where they received the COVID-19 vaccine.



Most respondents (**64%**) found it **very easy** to make a vaccine appointment; only **12%** found it **somewhat or very difficult**.



Almost half of the respondents got their vaccine at a **hospital (29%)** or a **mass vaccination site (17%)**.



"Other" locations include a health center (one-third of respondents), a school or university (one respondent), and Walmart (one respondent).

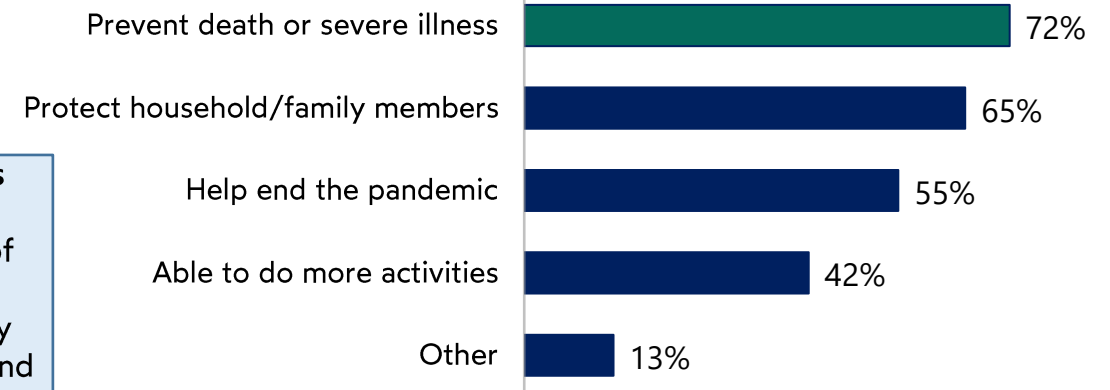
MESSENGERS AND MOTIVATORS



Doctors or health care providers (70%), scientists (64%), and the Centers for Disease Control and Prevention (CDC) (62%) were the most trusted sources of information about the COVID-19 vaccine.



Most respondents decided to get the vaccine to **prevent death or severe illness (72%)** and to **protect household or family members (65%)**.

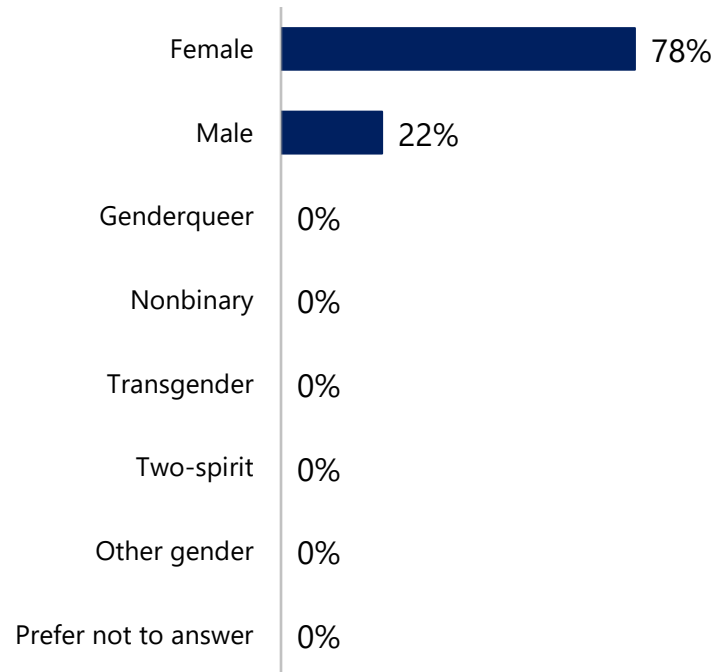


Who are the unvaccinated respondents? ($n = 27$)

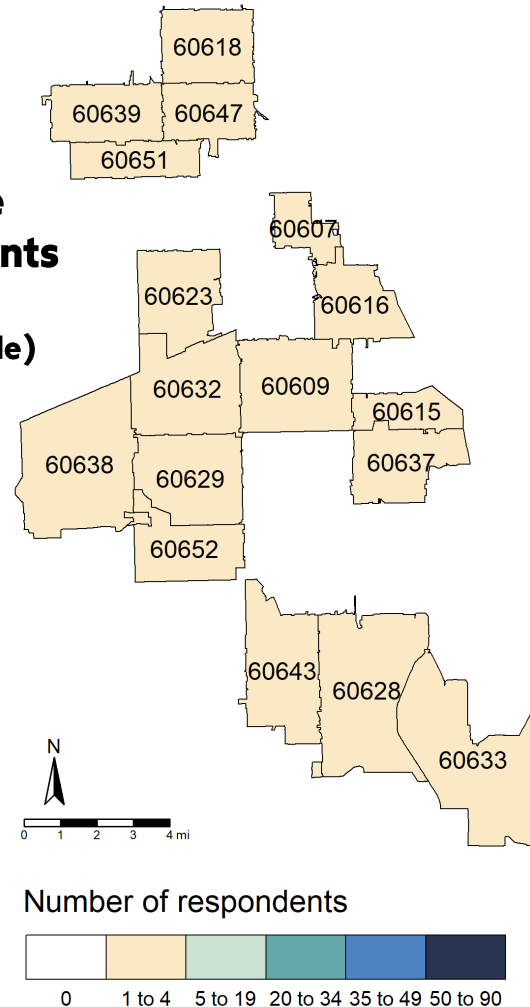
From July & August data

Most unvaccinated respondents were **female**, and more than half were **African American or Black**.

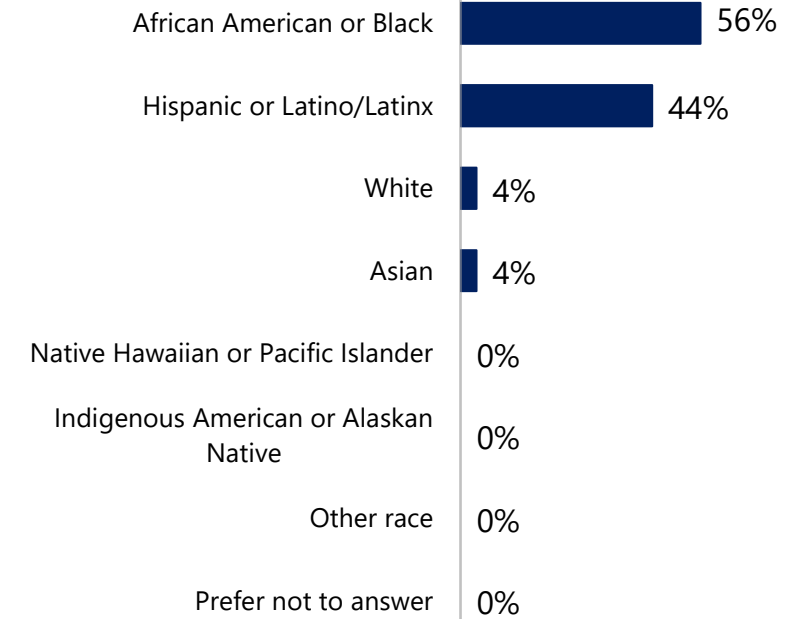
Gender (select all that apply)



Where respondents live (by zip code)



Race/ethnicity (select all that apply)

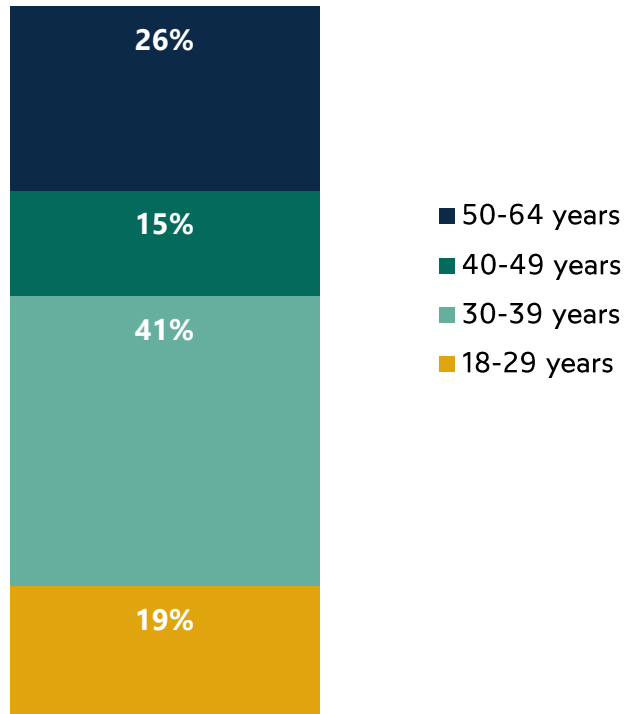


Who are the unvaccinated respondents? ($n = 27$)

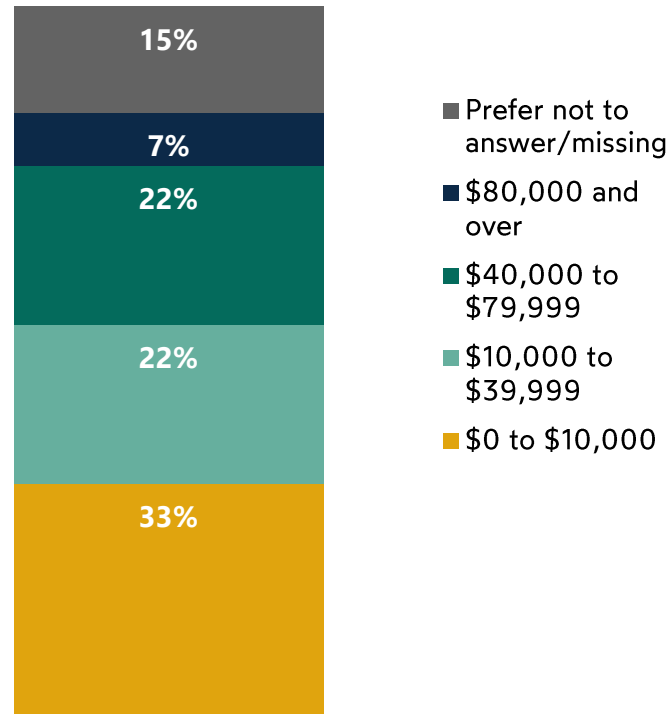
From July & August data

Most unvaccinated respondents are ages **30–39 (41%)**, reported an income of **less than \$10,000 a year (33%)**, and have a **high school diploma/GED or less (41%)**.

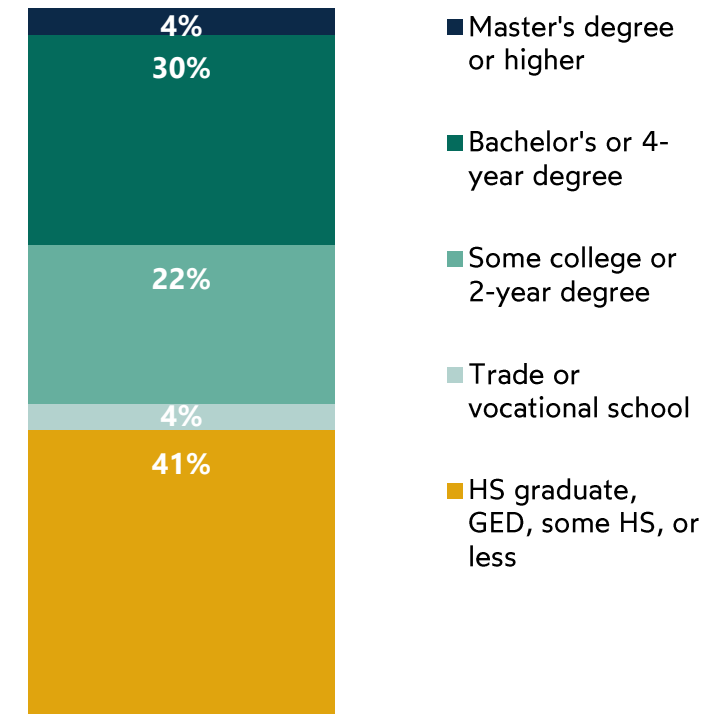
Age



Income



Education



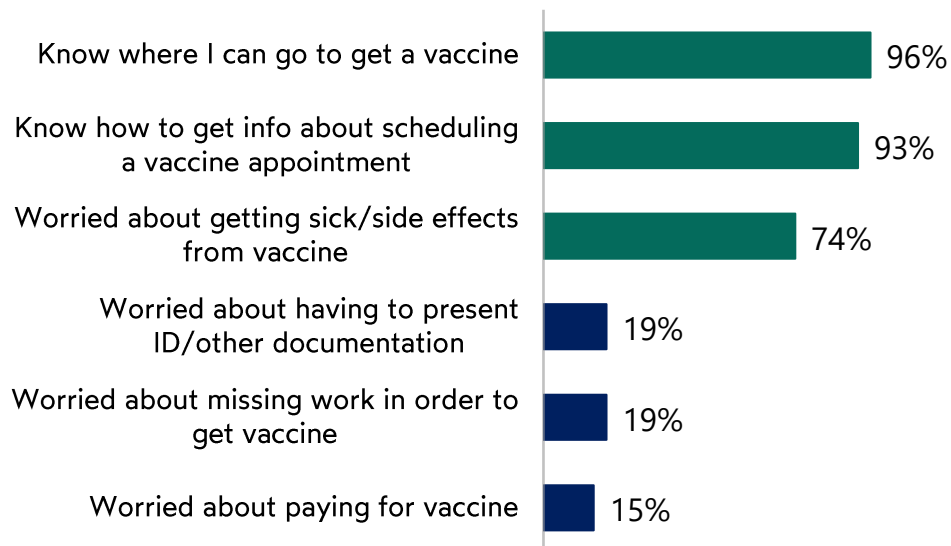
Among unvaccinated respondents ($n = 27$)

From July & August data

BARRIERS & ENABLERS



Although nearly all unvaccinated respondents know where they can go to get a vaccine or info about scheduling a vaccine, many unvaccinated respondents **worry about getting sick or experiencing side effects from the vaccine (74%)**.

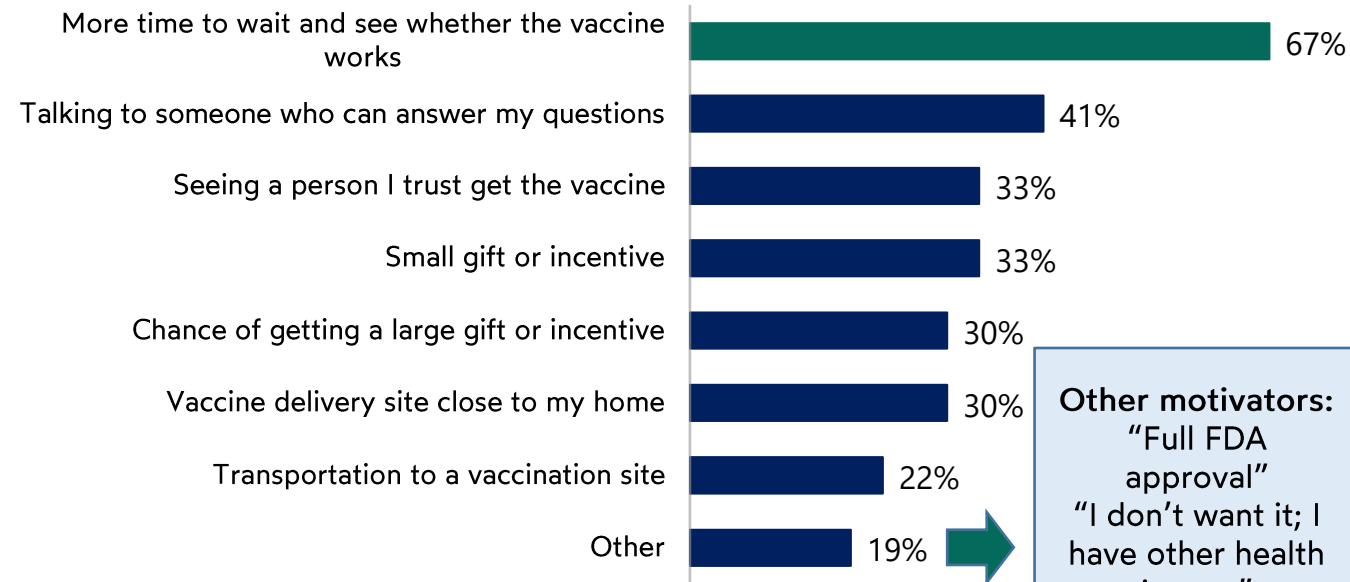


*Survey question 6b

MOTIVATORS



Two-thirds of unvaccinated respondents would prefer to have **more time to wait and see whether the vaccine works (67%)**.



Other motivators:
"Full FDA approval"
"I don't want it; I have other health issues."

*Survey question 6c

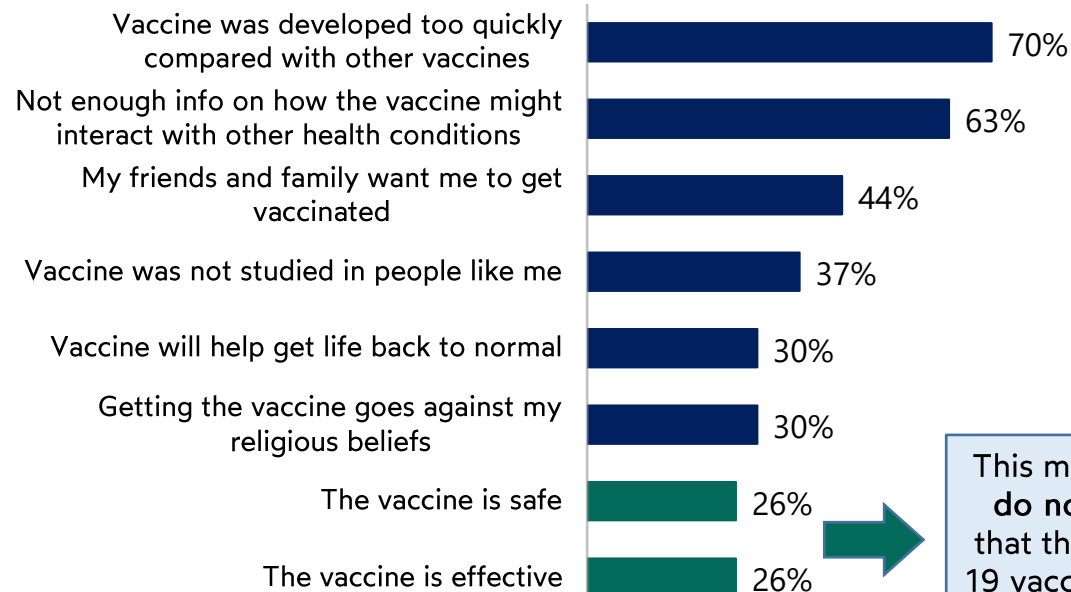
From July &
August data

Among unvaccinated respondents ($n = 27$)

BELIEFS



Most unvaccinated respondents believe **the vaccine was developed too quickly compared with other vaccines (70%)**, and **only about a quarter agreed that the vaccine was safe or effective (26%)**.

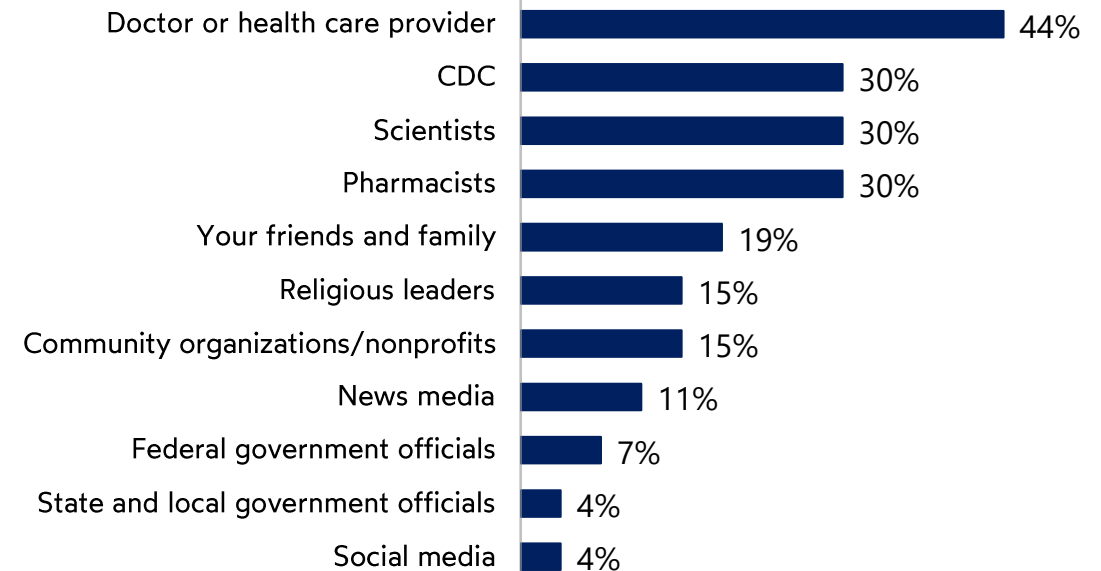


This means 74%
do not agree
that the COVID-
19 vaccine is safe
or effective

TRUSTED MESSENGERS



Many unvaccinated respondents reported **trusting their doctor or health care provider (44%)**, but overall, this group did **was not very trusting of any of the listed sources of information** about the COVID-19 vaccine.

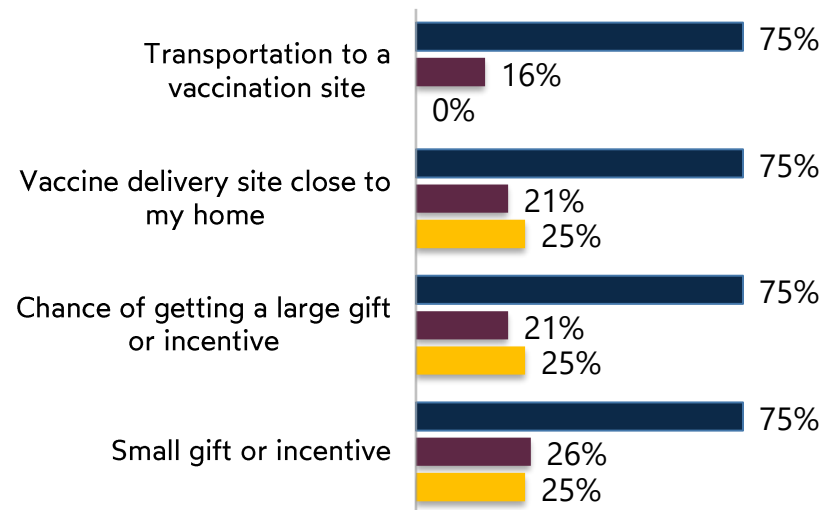


From July &
August data

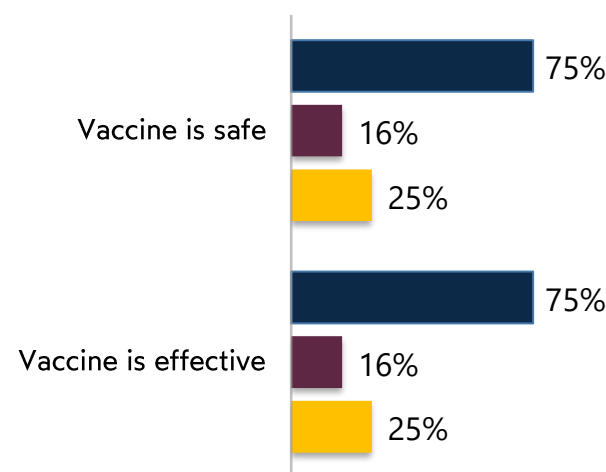
Differences between “types” of unvaccinated respondents

- The small group of **respondents who “intend to get the vaccine”** looks quite different from the **respondents who are “undecided”** and **“do not intend to get vaccine.”**
- Most who “intend to” reported that many factors could motivate them to get the vaccine; they believe the vaccine is safe and effective; and they have more trust in doctors, scientists, and the CDC.

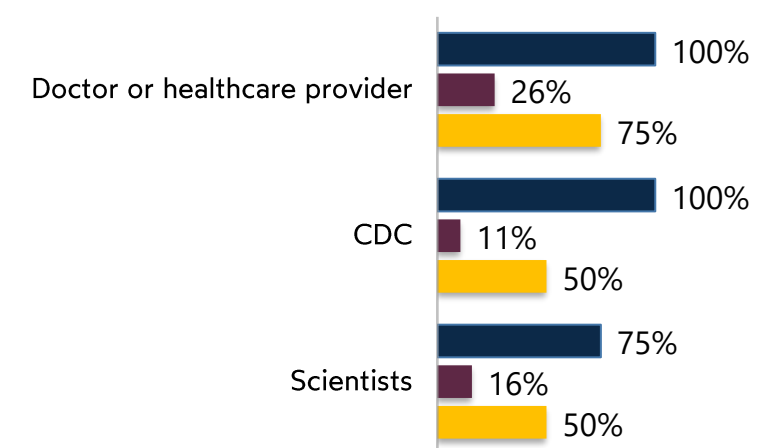
MOTIVATORS



BELIEFS



TRUSTED MESSENGERS



■ Intend to get vaccine (n=4)

■ Undecided about vaccine (n=19)

■ Do not intend to get vaccine (n=4)

Summary and potential actions

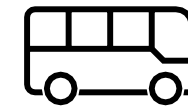
From July & August data

KEY TAKEAWAYS

VACCINATED RESPONDENTS

- Although most vaccinated respondents found it easy to make a vaccine appointment and were able to get a vaccine less than 20 minutes away from home, one-third of the respondents had to travel longer than 20 minutes each way to get a vaccine.
- Vaccinated respondents were motivated to get the vaccine to prevent death or severe illness or to protect family and household members.

POTENTIAL MESSAGING OUTREACH STRATEGIES&



Continue to work on **eliminating access barriers related** to transportation and location convenience (for example, pop-up or mobile clinics co-hosted by trusted local organizations in focus areas).



Continue to refine and promote messaging that says that vaccines are very good at preventing **severe illness and death**, and still worth getting even though breakthrough infections can happen.

Summary and potential actions

From July &
August data

KEY TAKEAWAYS

UNVACCINATED RESPONDENTS

- Are worried about getting sick or experiencing side effects from the vaccine
- Believe the vaccine was developed too quickly
- Would like more time to see whether vaccine works
- Would like to talk to someone about their questions about the vaccine
- Were not very trusting of the listed sources of information about the COVID-19 vaccine



POTENTIAL MESSAGING & OUTREACH STRATEGIES



- Provide information that details **how to manage side effects**, and/or provides **resources and contact information** for those experiencing side effects.



- Develop messaging that describes **how the vaccine testing and production process was safely compressed into a shorter time frame.**



- **Validate and support people who want more time to wait and see** (for example, focus on other risk-reduction behaviors like masks and testing).



- Talk to the community about **who they trust when it comes to information about COVID-19 and vaccines.**

Chicago: Supplemental data slides

- Survey respondent demographics vs. city Black, Indigenous, People of Color (BIPOC) demographics
- All figures for questions analyzed

BALTIMORE

CHICAGO

HOUSTON

NEWARK

OAKLAND

Survey respondent demographics vs. Chicago city BIPOC demographics

From July &
August data

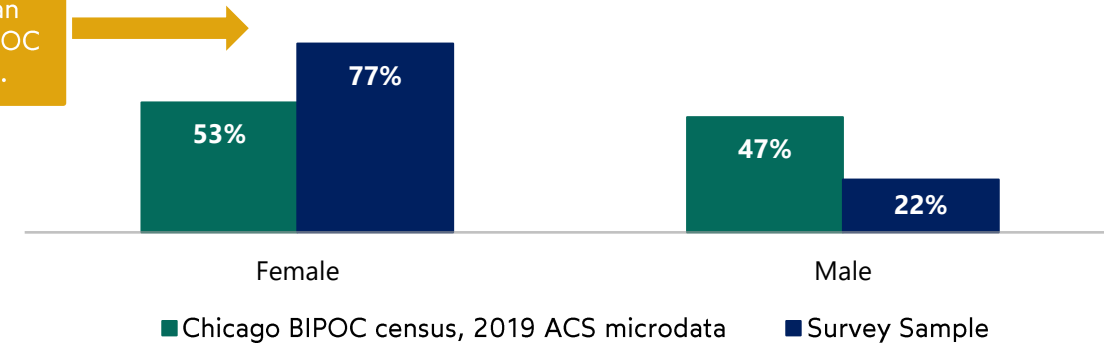
Vaccination status (at least one dose): Chicago vs. Survey Sample (n = 148)



Survey sample has more females than Baltimore BIPOC population.

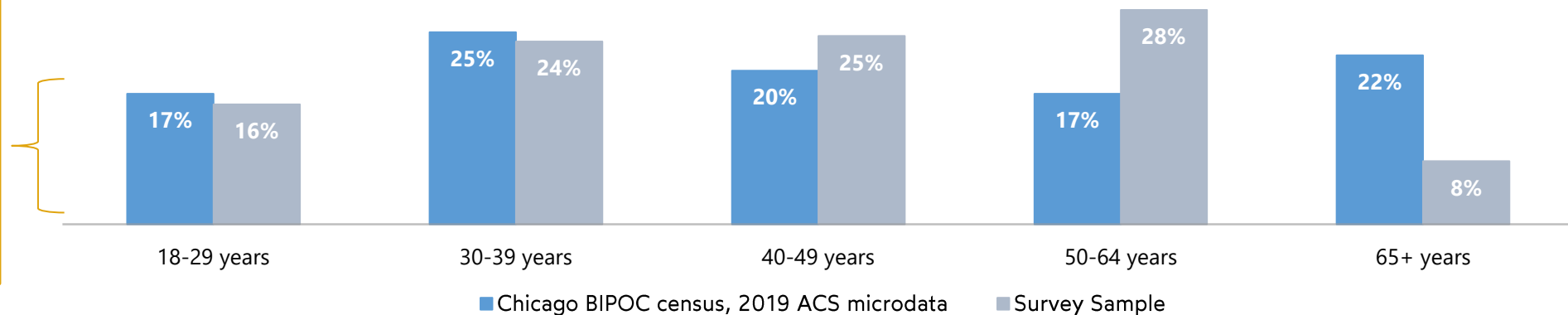
Survey sample has higher vaccination rates than Chicago BIPOC population.

Gender: Chicago vs. Survey Sample (n = 148)



Age: Chicago vs. Survey Sample (n = 148)

Survey sample had a similar age distribution to the Chicago BIPOC population; however, it had a larger share of respondents ages 50–64 and a smaller share older than 65.



BALTIMORE

CHICAGO

HOUSTON

NEWARK

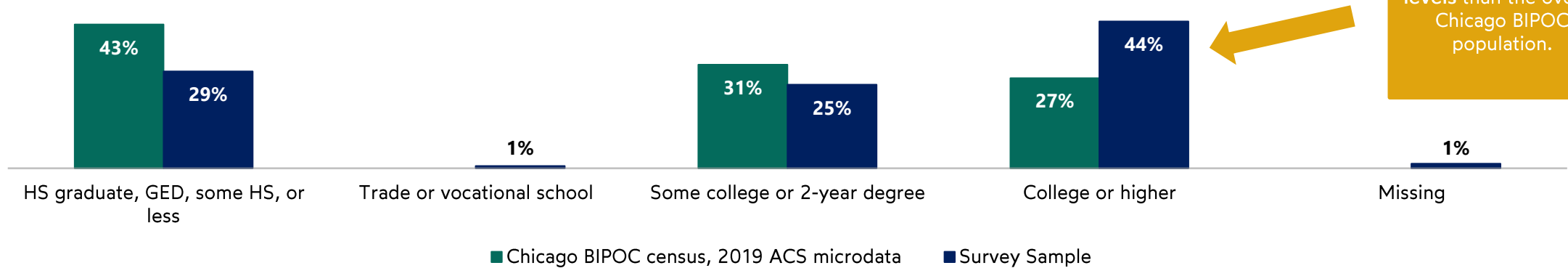
OAKLAND

Survey respondent demographics vs. Chicago city BIPOC demographics

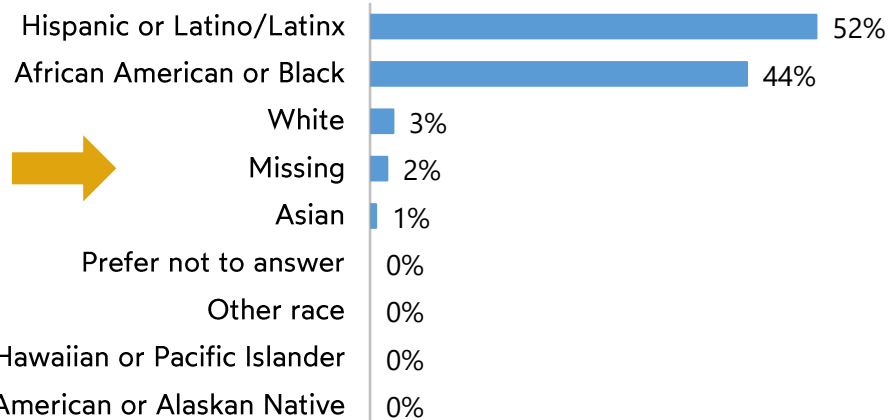
From July & August data

Education: Chicago vs. Survey Sample (n = 148)

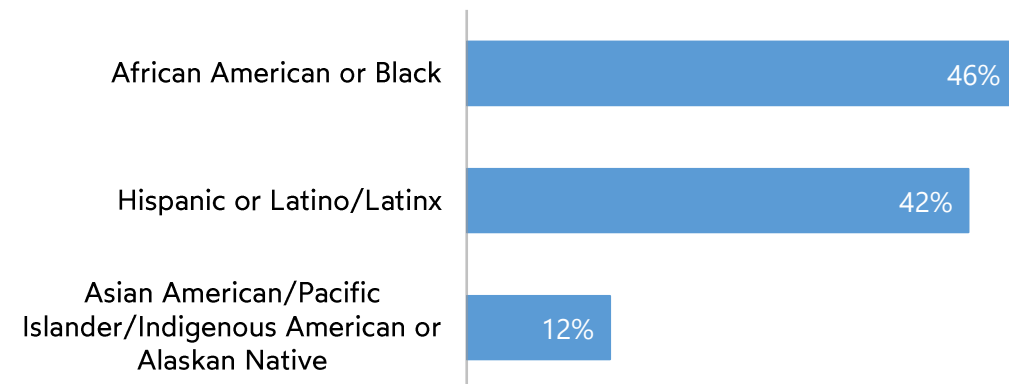
Survey respondents had higher education levels than the overall Chicago BIPOC population.



Survey sample race/ethnicity (n = 148)



Chicago BIPOC census, 2019 ACS microdata BIPOC race/ethnicity



BALTIMORE

CHICAGO

HOUSTON

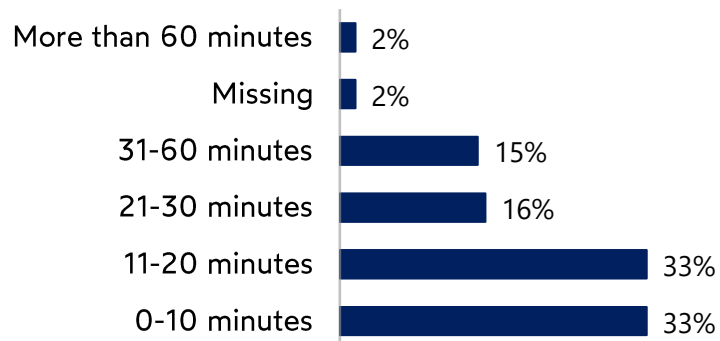
NEWARK

OAKLAND

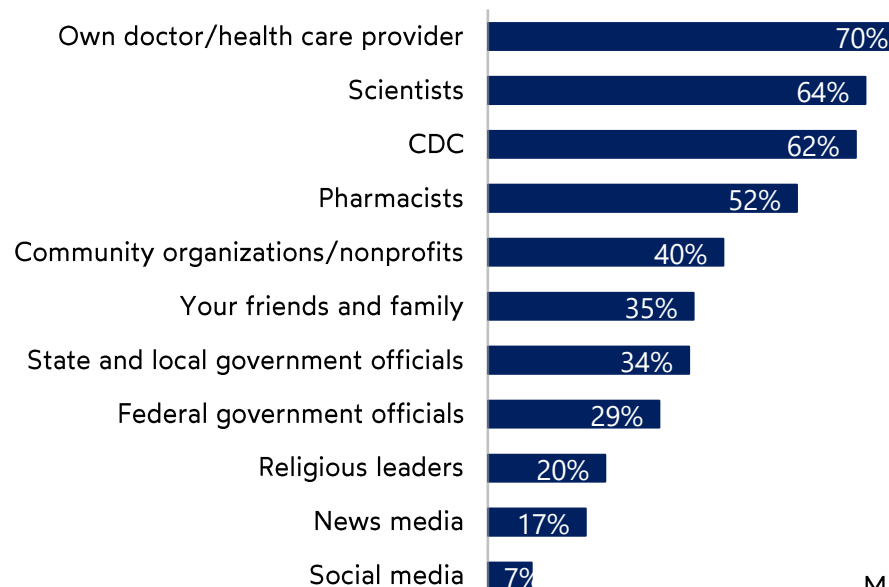
Among vaccinated respondents (n = 121)

From July &
August data

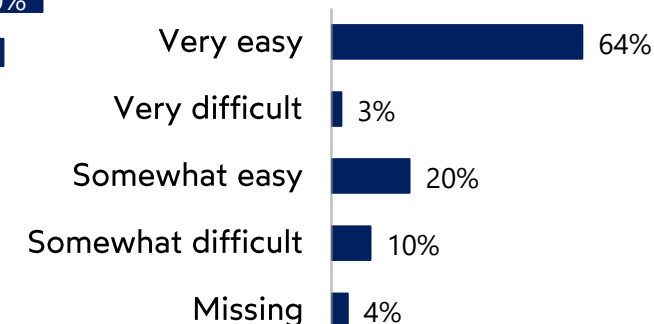
Time taken to get vaccinated



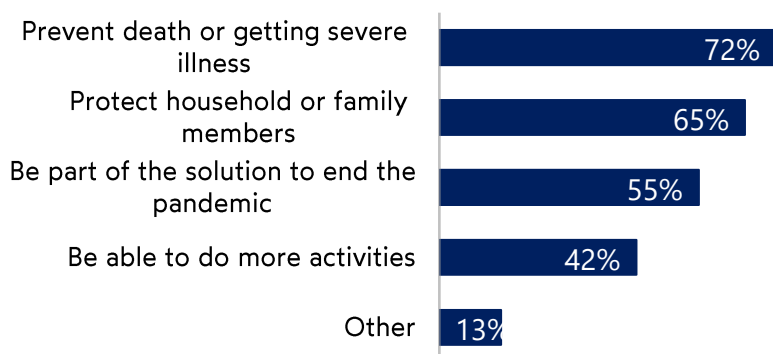
Trusted sources of information



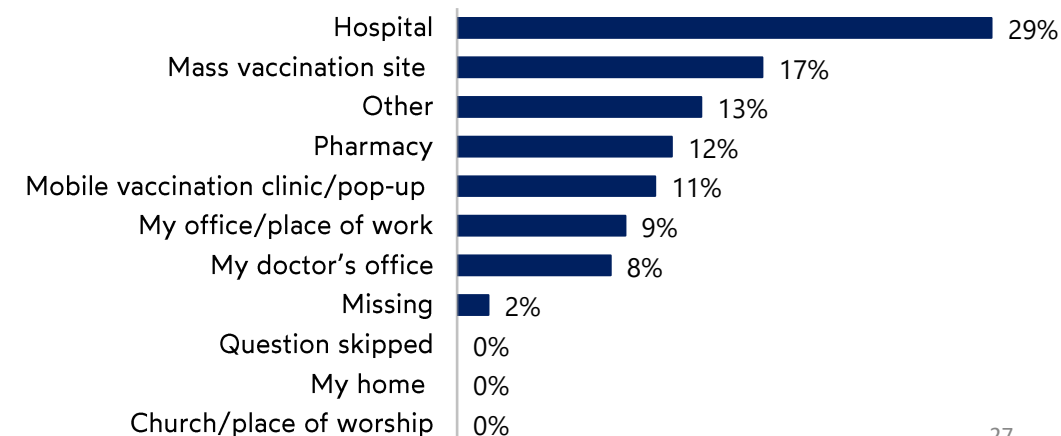
Ease of getting an appointment



Reason for becoming vaccinated



Location of appointment



*Survey questions 3, 3b, 4, 5, 6b, 6c, 7 and 8

BALTIMORE

CHICAGO

HOUSTON

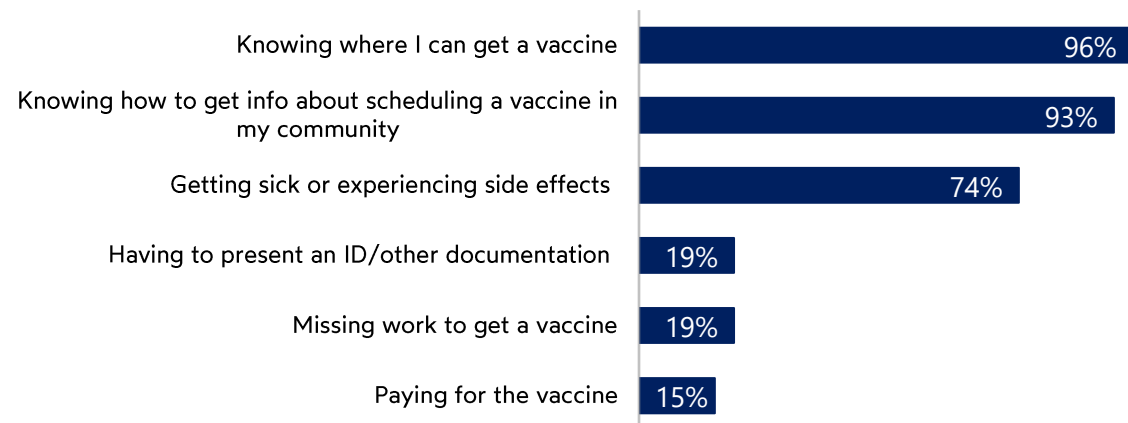
NEWARK

OAKLAND

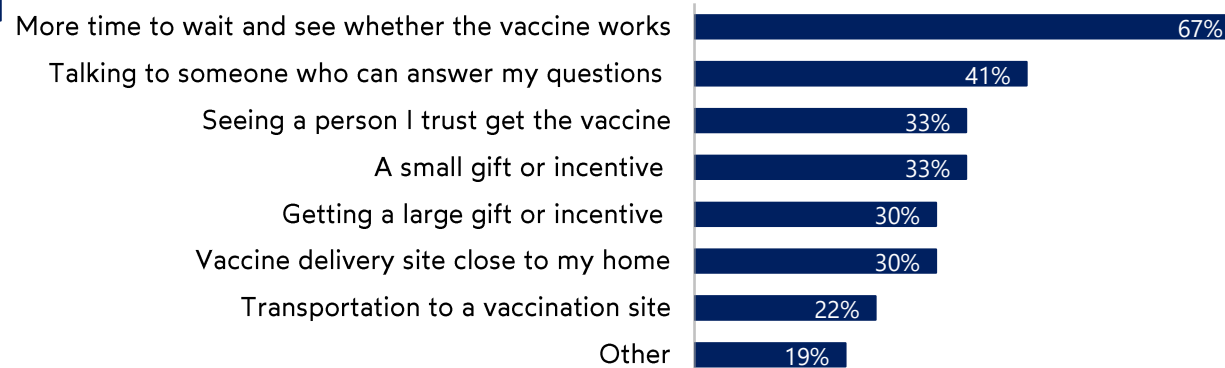
Among unvaccinated respondents (n = 27)

From July &
August data

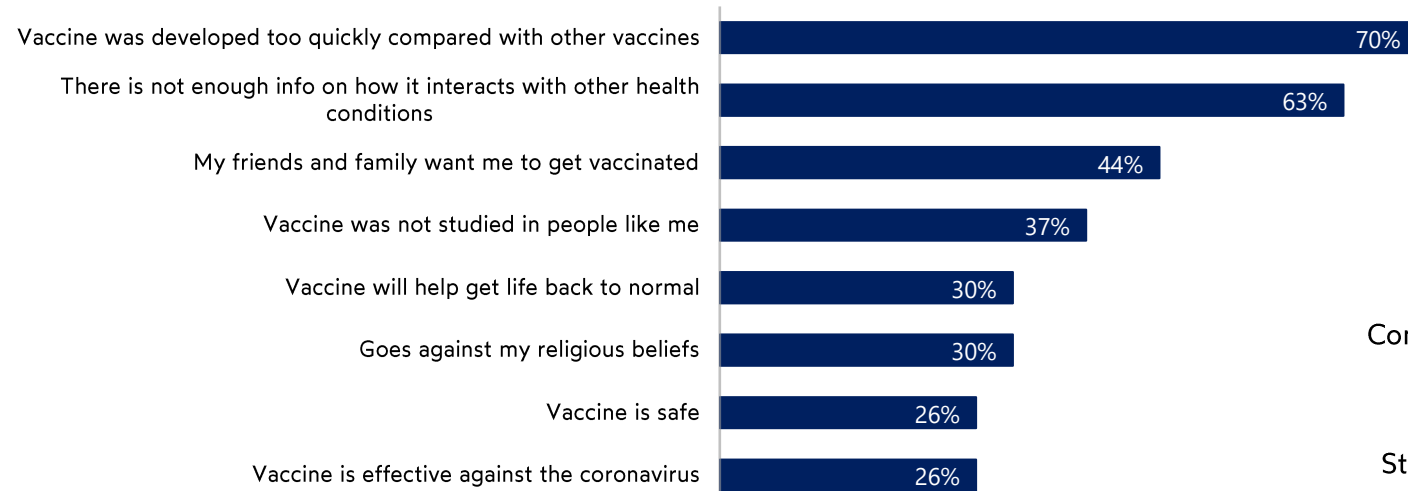
Respondents worry about:



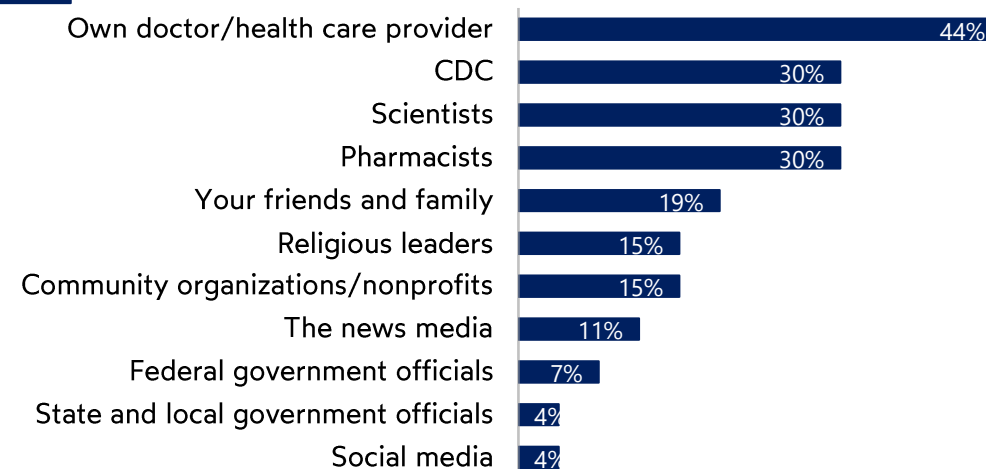
Motivators to get the vaccine



Respondents believe that:



Trusted messengers



*Survey questions 3, 3b, 4, 5, 6b, 6c, 7 and 8

Survey insights by city: Houston

- Methodology
- Respondents' vaccination status and intentions
- Characteristics and highlights among vaccinated respondents
- Characteristics and highlights among unvaccinated respondents
- Differences between “types” of unvaccinated respondents
- Summary and potential actions

Monthly goal: 150 responses

Methodology

The main partner leading this effort is **Houston in Action.**

Partnered with

Texas Toolbelt (TTB) leads the data collection efforts.



Houston in Action is a partnership that consists of organizations that aim to strengthen community-led civic participation and organizing culture in Houston.

Methods



TTB uses tablets in its door-to-door canvassing efforts to capture respondents' answers. It is using census block groups to determine which neighborhoods to reach out to.

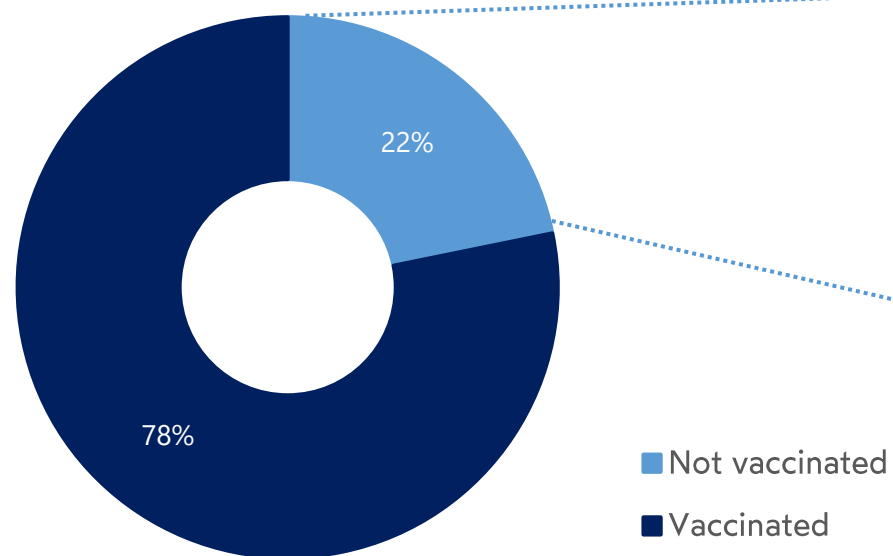
TTB is a canvassing and outreach organization that reaches out to Houston residents to encourage political and civic engagement.

Vaccination status and intention (n = 303)

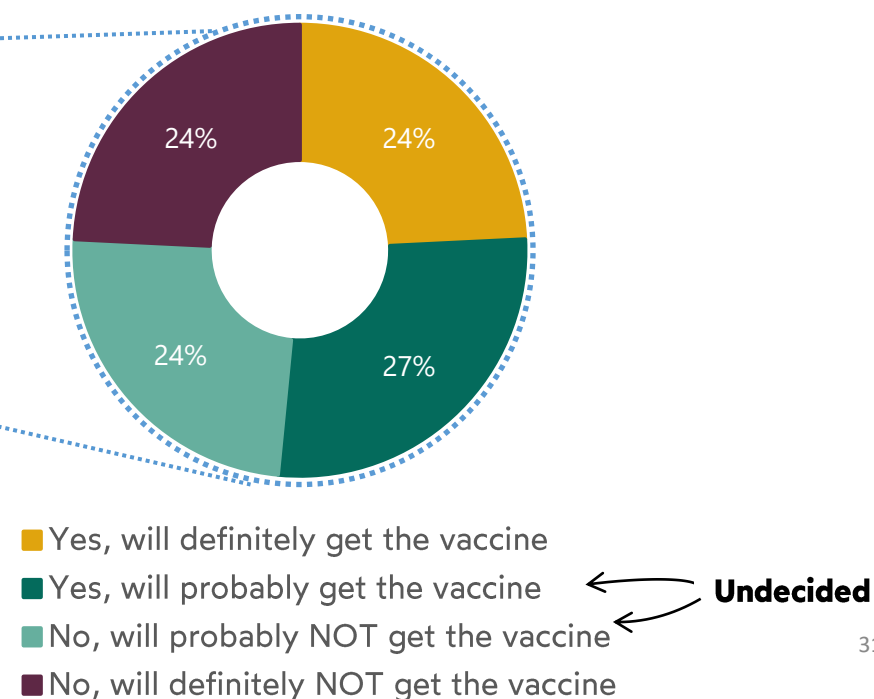
From August data

Most of the sampled population is vaccinated (78%). Among the respondents who are not yet vaccinated, **51% are undecided, and 24% intend to get the vaccine.**

Surveyed population in Houston



Among the 22% who are not vaccinated



Who are the vaccinated respondents? ($n = 237$)

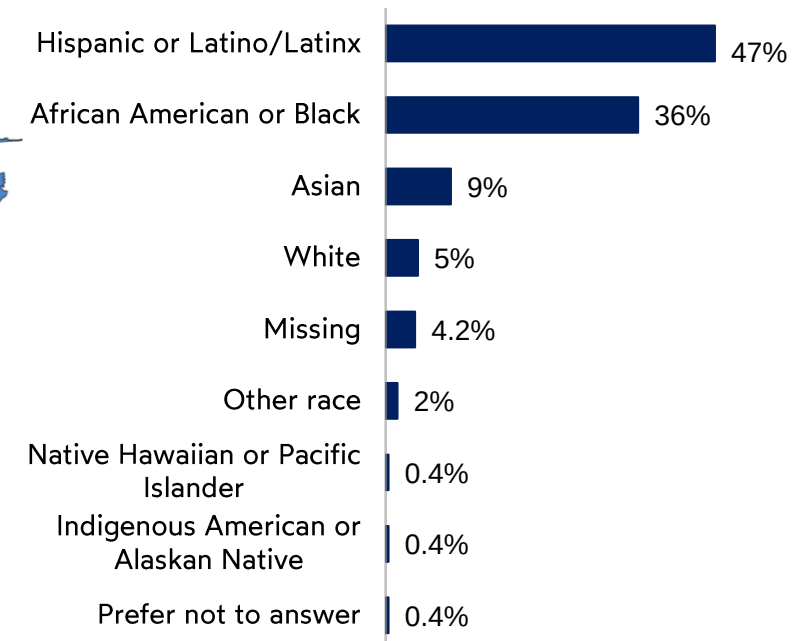
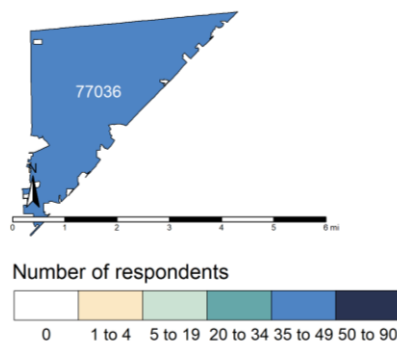
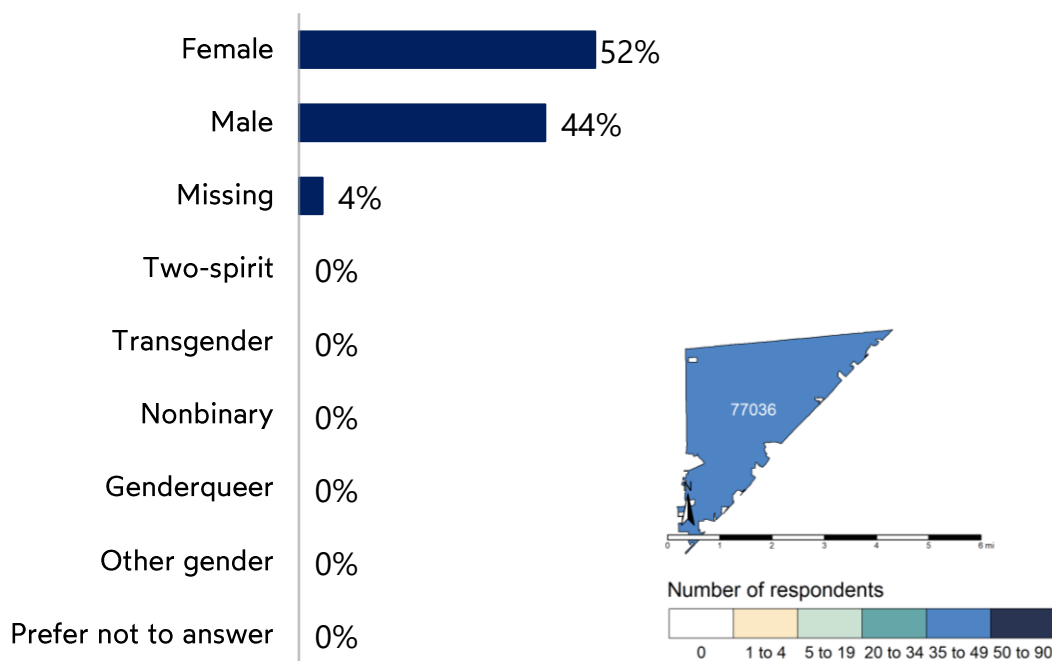
From August data

Around half of vaccinated respondents were **female**, nearly half were **Hispanic or Latino/Latinx**, and many were from **zip code 77021**.

Gender
(select all that apply)

Where respondents live
(by zip code)

Race/ethnicity
(select all that apply)

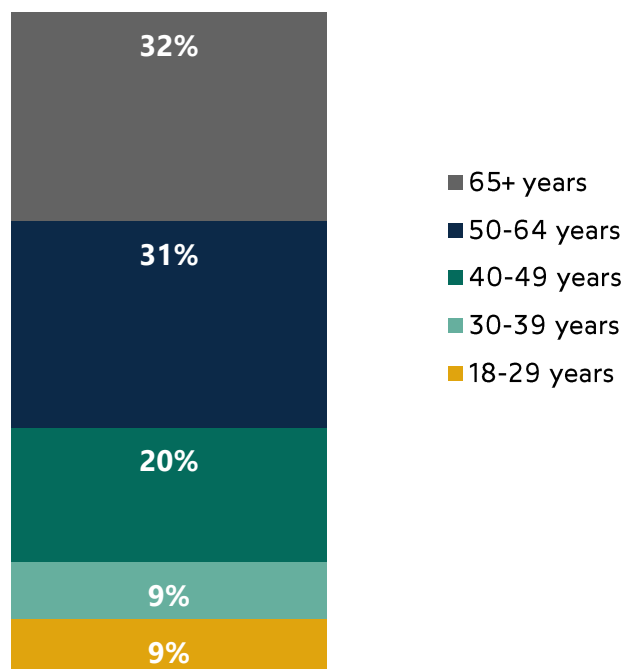


From August data

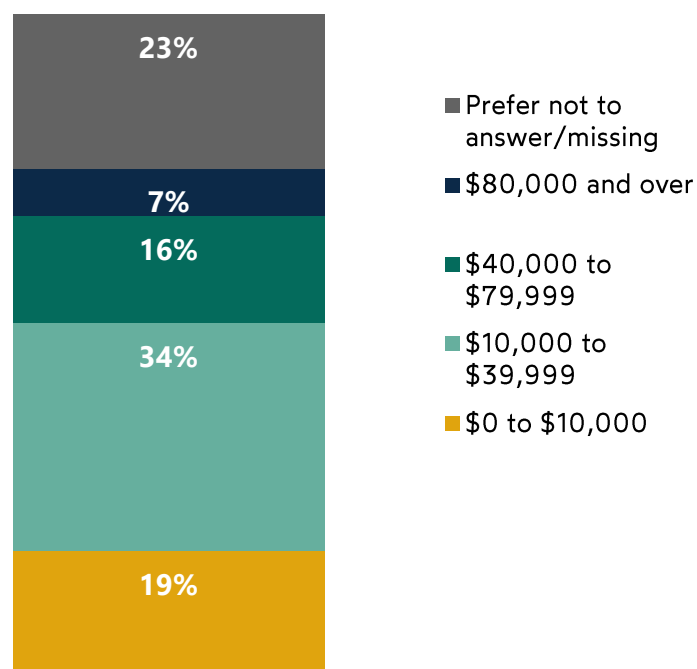
Who are the vaccinated respondents? ($n = 237$)

Most vaccinated respondents are ages **50–64 (31%)** or **older than 65 (32%)** and have a **high school diploma/GED or less (57%).****

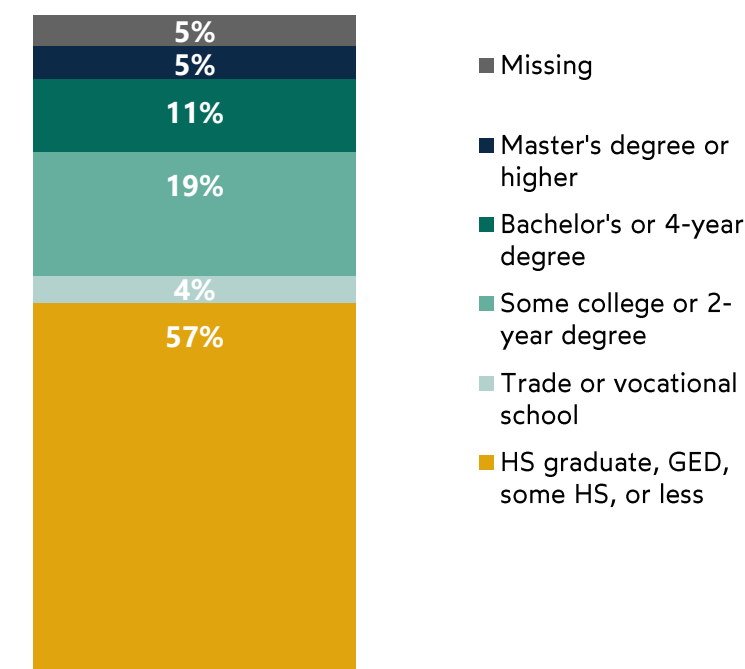
Age



Income



Education



From August data

Among vaccinated respondents ($n = 237$)

ACCESS



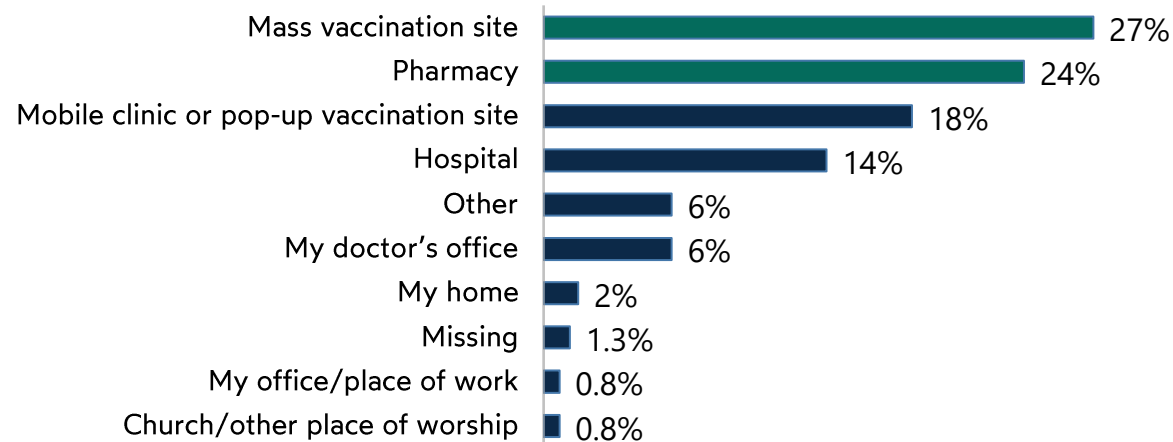
Most respondents said it took **less than 20 minutes (68%)** to get to the location where they received the vaccine.



Most respondents **found it very easy (81%)** to make a vaccine appointment.



Around half of the respondents received their vaccine at a **mass vaccination site (27%)** or a **pharmacy (24%)**.



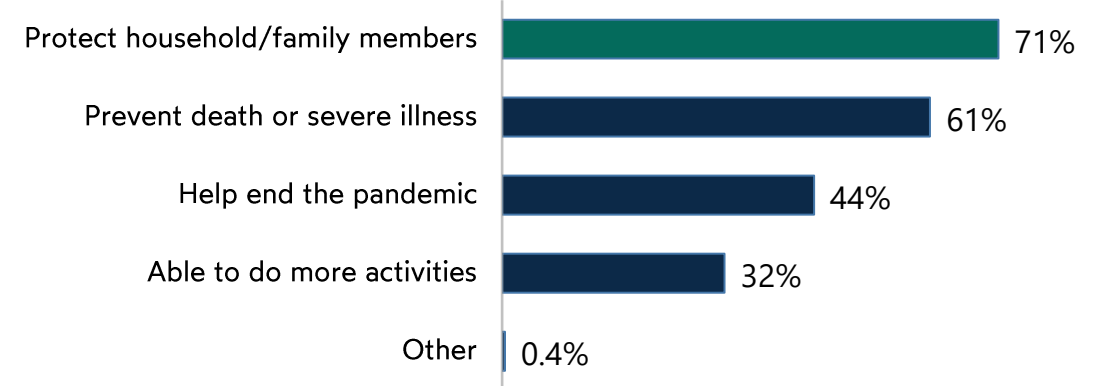
MESSENGERS AND MOTIVATORS



Doctors and health care providers (67%), scientists (57%), the CDC (52%), and pharmacists (49%) were the most trusted sources of information about the COVID-19 vaccine.



Most decided to get the vaccine to **protect their household or other family members (71%)** and **prevent severe illness or death (61%)**.



Who are the unvaccinated respondents? ($n = 66$)

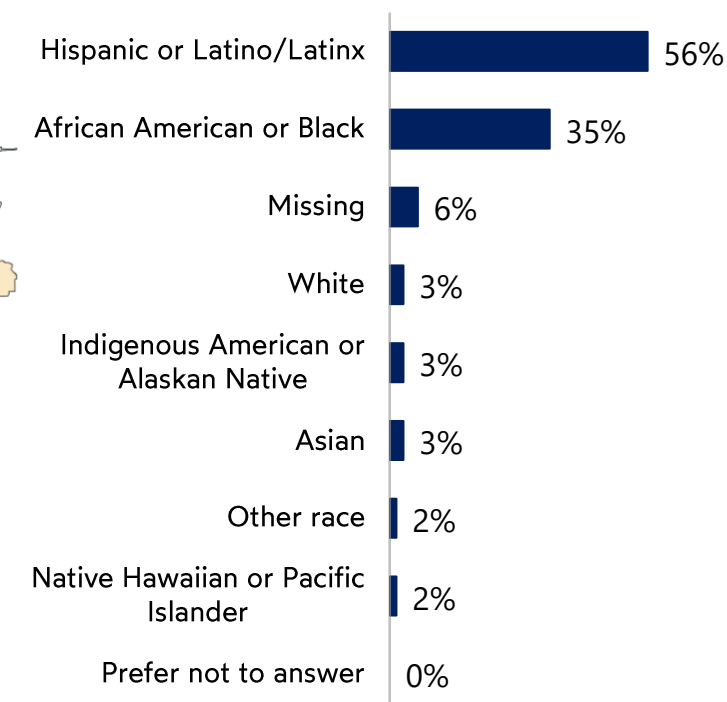
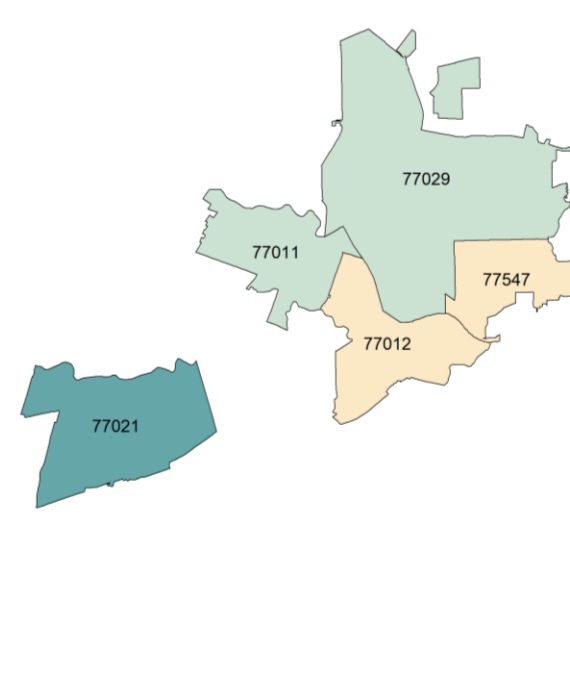
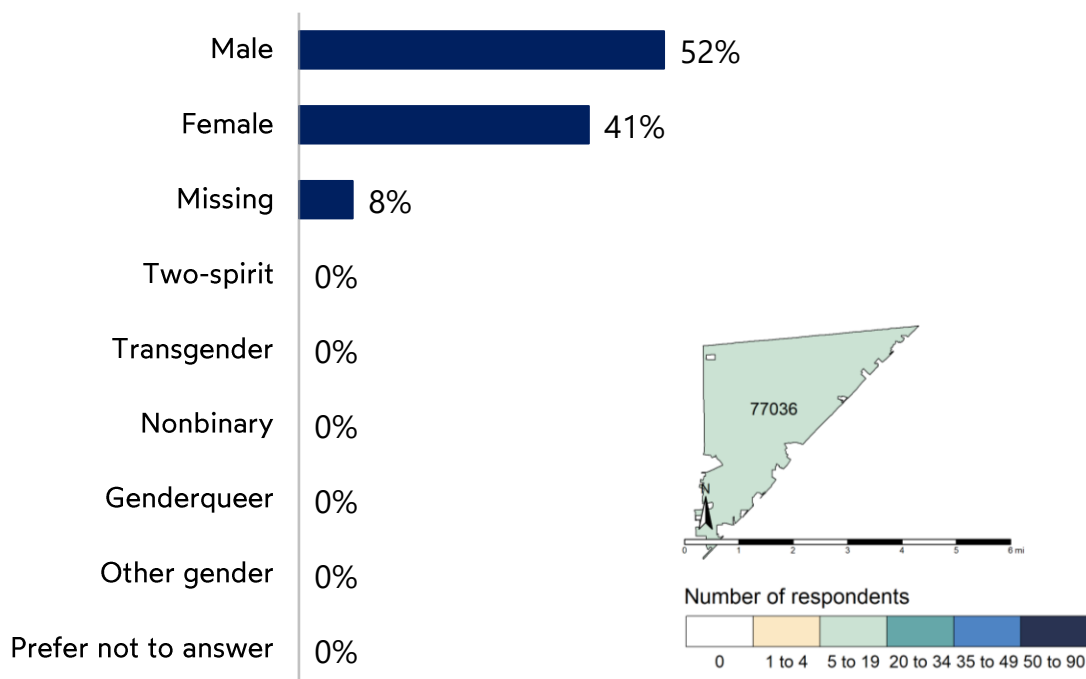
From August data

Around half of unvaccinated respondents are **male**, slightly more than half are **Hispanic or Latino/Latinx**, and many are from **zip code 77021**.

Gender
(select all that apply)

Where respondents live
(by zip code)

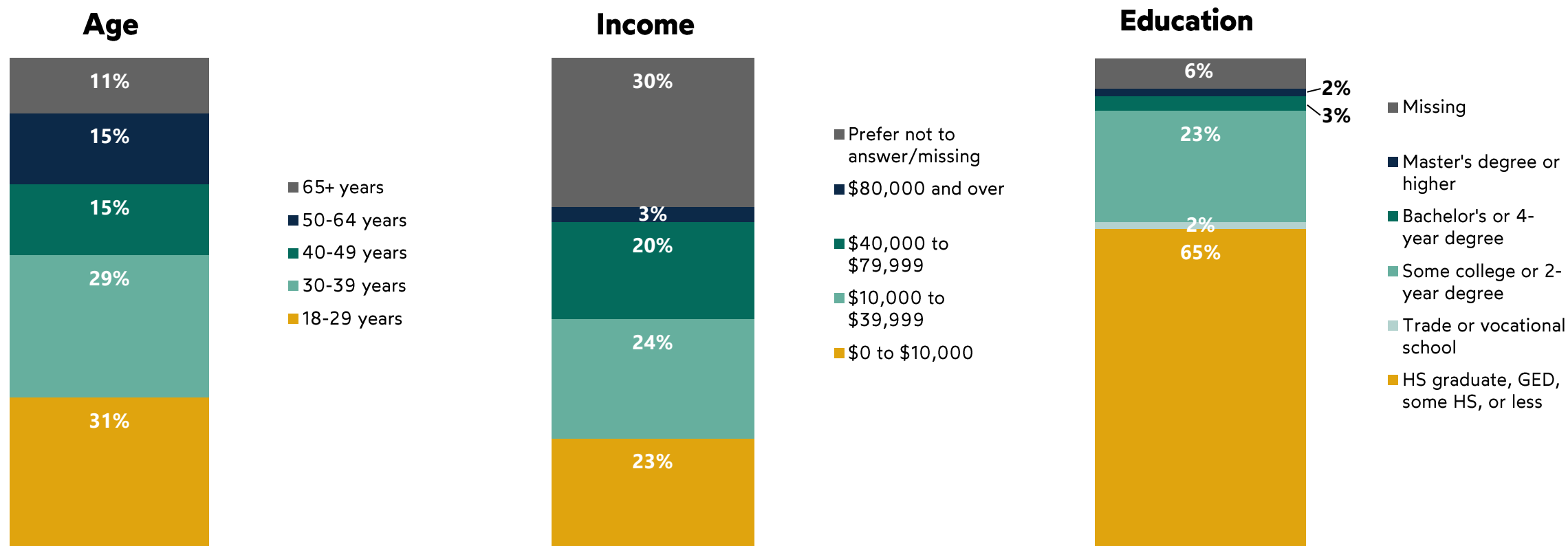
Race/ethnicity
(select all that apply)



Who are the unvaccinated respondents? ($n = 66$)

From August data

The largest share of unvaccinated respondents are ages **18–29 (31%)** or **30–39 (29%)** and have a **high school diploma/GED or less (65%)**.**



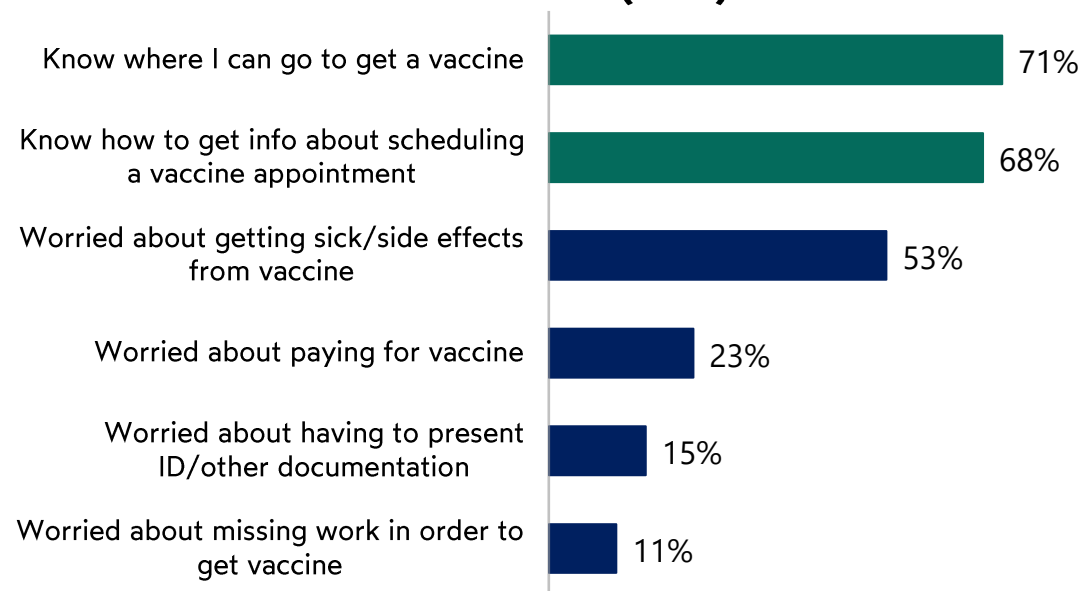
From August data

Among unvaccinated respondents ($n = 66$)

BARRIERS & ENABLERS



Although many unvaccinated respondents know where they can get info about scheduling a vaccine (71%) or get a vaccine (68%), more than half of unvaccinated respondents **worry about getting sick or experiencing side effects from the vaccine (53%)**.

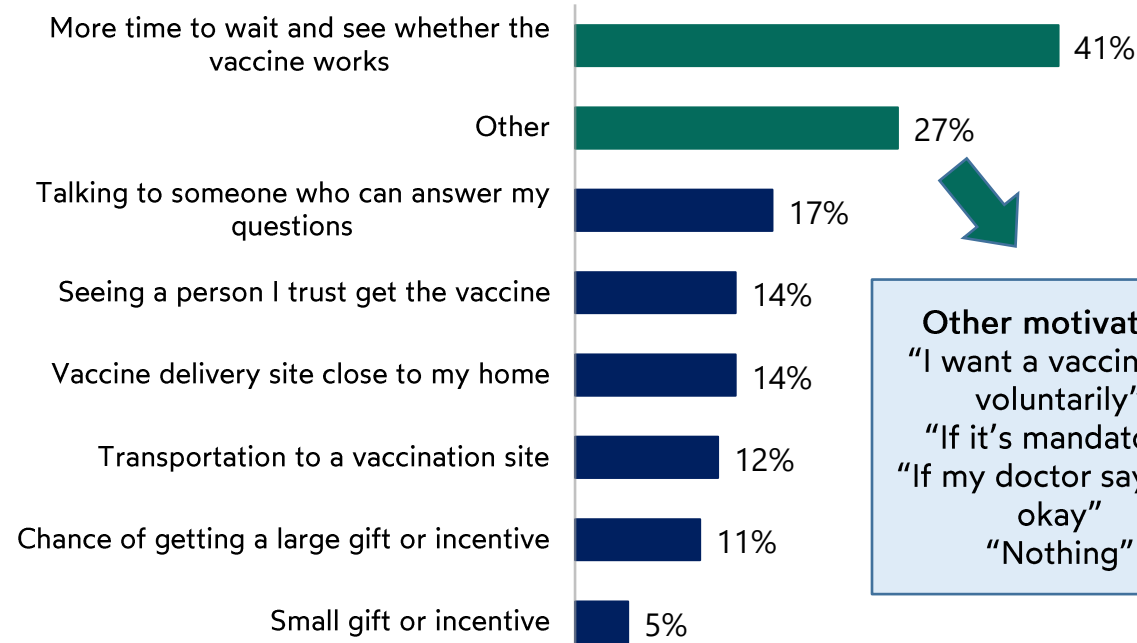


*Survey question 6b

MOTIVATORS



Four in 10 unvaccinated respondents would prefer to have **more time to see whether the vaccine works (41%)**.



Other motivators:
 "I want a vaccination voluntarily"
 "If it's mandatory"
 "If my doctor says it is okay"
 "Nothing"

*Survey question 6c

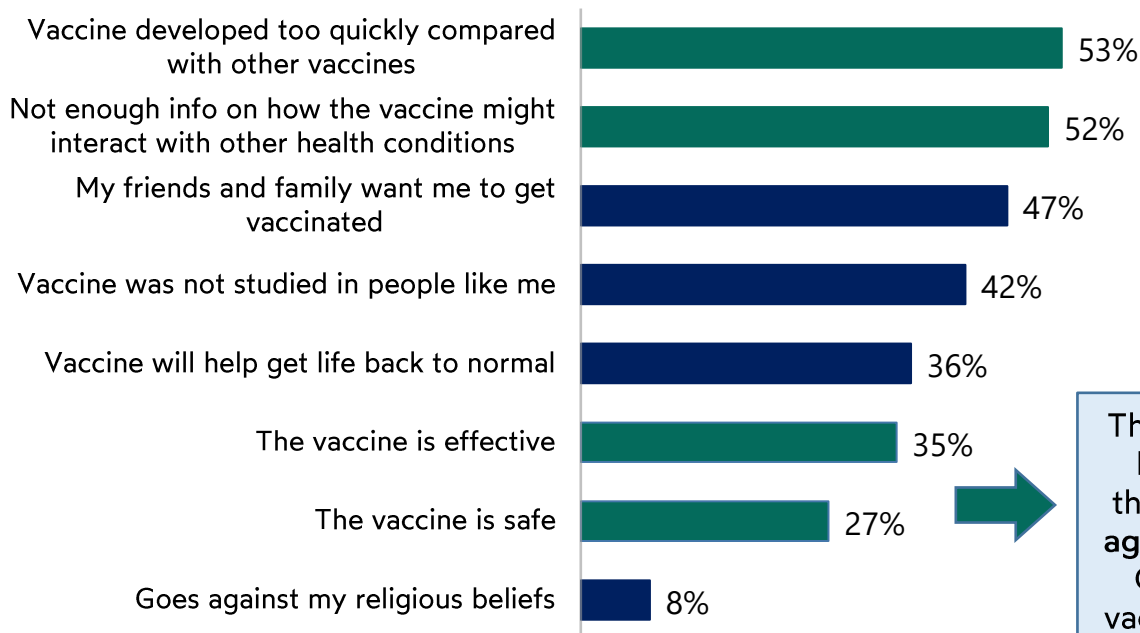
From August data

Among unvaccinated respondents ($n = 66$)

BELIEFS



More than half of unvaccinated respondents believe **the vaccine was developed too quickly compared with other vaccines (53%)**, and that there is **not enough info on how the vaccine might interact with other health conditions (52%)**.



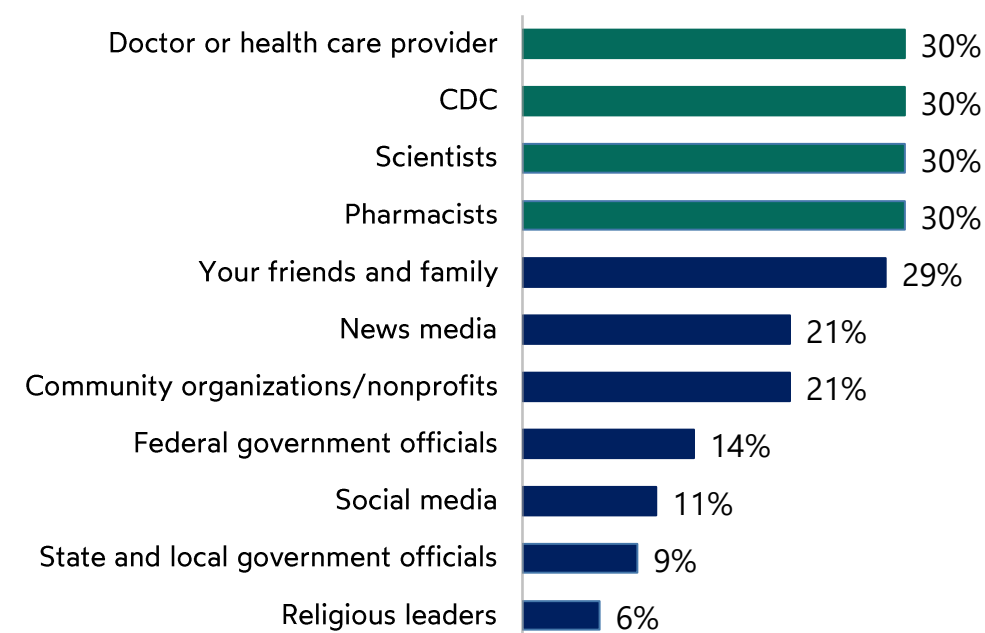
This means at least two-thirds **do not agree** that the COVID-19 vaccine is safe or effective.

*Survey question 7

TRUSTED MESSENGERS



Although about a third of unvaccinated respondents said they **trusted their doctor, the CDC, scientists, and pharmacists a great deal**, there was **no clear trusted messenger among the unvaccinated respondents**.



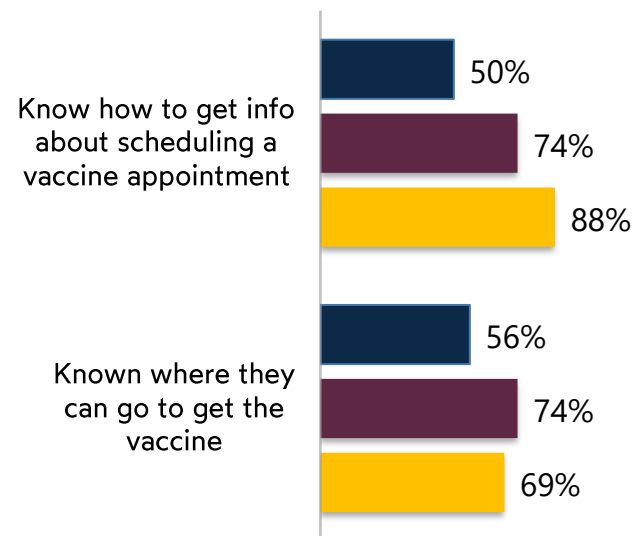
*Survey question 8

From August data

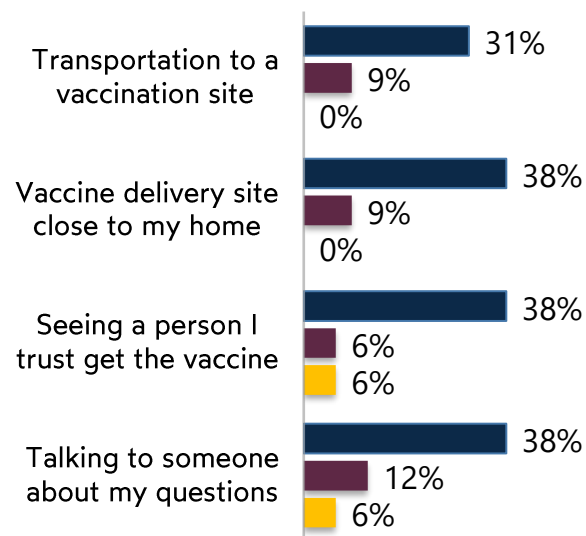
Differences between types of unvaccinated respondents

- The smaller group of respondents who “intend to get the vaccine” looks quite different from the respondents who are “undecided” and “do not intend to get vaccine.”
- Fewer who “intend to” know how to get information about the vaccine or where to go to get it. More who “intend to” reported that there are factors could motivate them to get the vaccine; they have much more positive beliefs about the safety, efficacy, and impact of the vaccine; and they have more trust in the CDC, doctors and health care providers, pharmacists, and scientists.

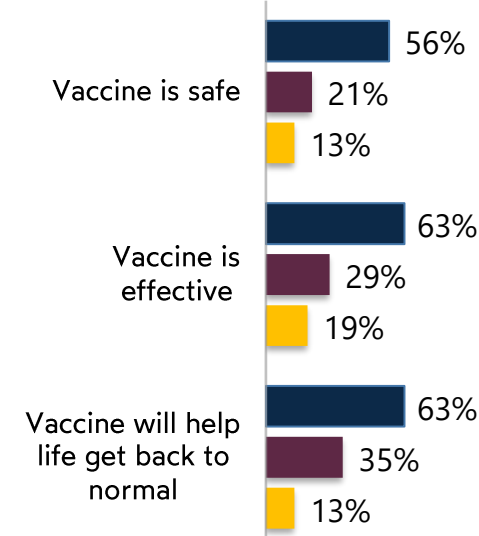
ENABLERS



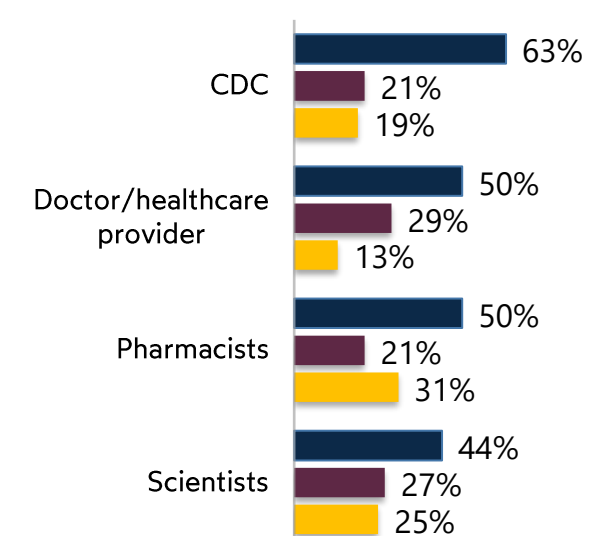
MOTIVATORS



BELIEFS



TRUSTED MESSENGERS



■ Intend to get vaccine (n=16)
 ■ Undecided about vaccine (n=34)
 ■ Do not intend to get vaccine (n=16)

Summary and potential actions

From August data

KEY TAKEAWAYS

VACCINATED RESPONDENTS

- Were motivated to get the vaccine to protect family or household members and prevent death or severe illness



POTENTIAL MESSAGING & OUTREACH STRATEGIES



Continue to refine and promote messaging that says (1) **vaccines lower transmission rates and help protect household and family members**, and (2) **vaccines are very good at preventing severe illness and death**, and still worth getting even though breakthrough infections can happen.

In addition, you could **encourage vaccinated and unvaccinated individuals in your communities to discuss** these motivations.

Summary and potential actions

From August data

KEY TAKEAWAYS

UNVACCINATED RESPONDENTS OVERALL

- Are worried about getting sick or experiencing side effects from the vaccine
- Believe the vaccine was developed too quickly
- Would like more time to see whether vaccine works
- Were not very trusting of any of the listed sources of information about the COVID-19 vaccine.

UNVACCINATED + INTEND TO GET VACCINATED

- The small group of respondents who “intend to get the vaccine” are quite different from other unvaccinated respondents: more trusting, have more reported motivators, etc.

POTENTIAL MESSAGING & OUTREACH STRATEGIES



- Provide information that details **how to manage side effects**, and/or provides **resources and contact information** for those experiencing side effects.



- Develop messaging that describes **how the vaccine testing and production process was safely compressed into a shorter time frame**.



- **Validate and support people who want more time to wait and see** (for example, focus on other risk-reduction behaviors like masks and testing).



- Talk to the community about **who they trust when it comes to information about COVID-19 and vaccines**.



- Keep in mind that there are still people out there who **might only need a nudge, some information, or a bit of help accessing the vaccine**.

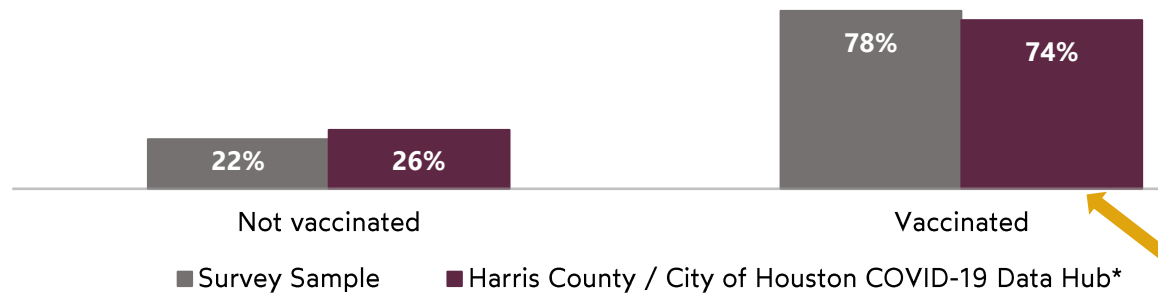
Houston: Supplemental data slides

- Survey respondent demographics vs. city BIPOC demographics
- All figures for questions analyzed

Survey respondent demographics vs. Houston city BIPOC demographics

From August data

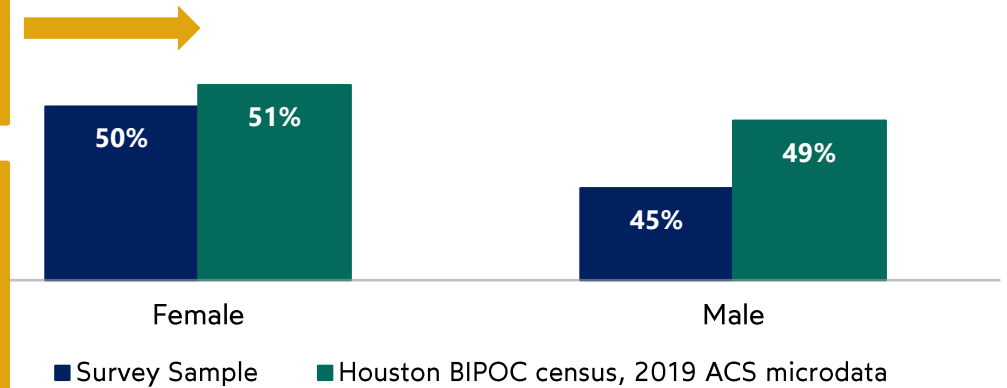
Vaccination status (at least one dose): Houston vs. Survey Sample (n = 303)



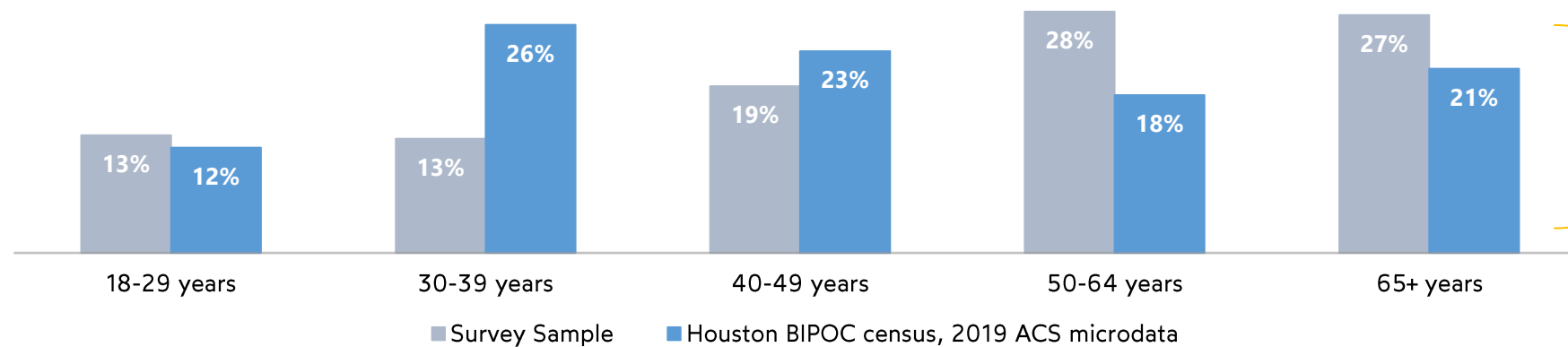
Survey sample had gender distributions similar to Houston's BIPOC population.

Survey sample has vaccination rates similar to Houston's population (a difference of only 4 percentage points).

Gender: Houston vs. Survey Sample (n = 303)



Age: Houston vs. Survey Sample (n = 303)

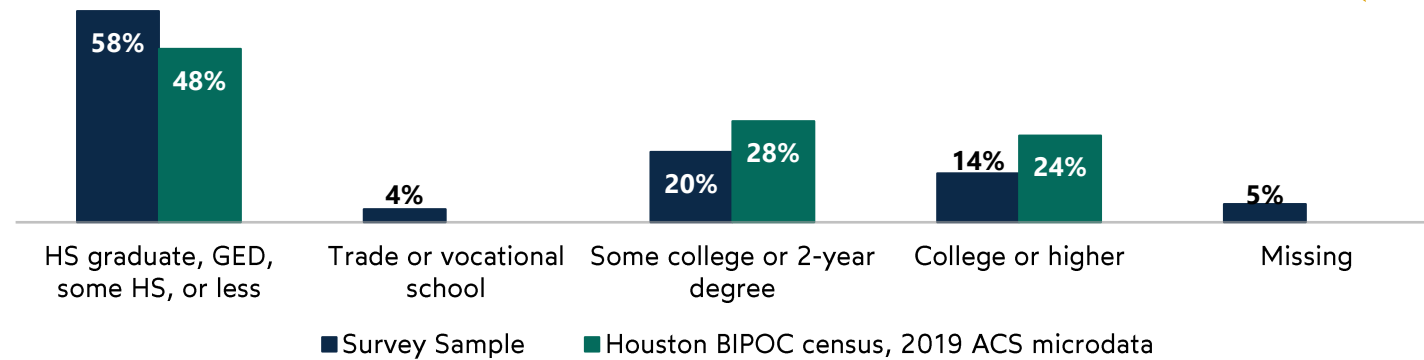


Survey sample has a smaller share of respondents ages 30–39 than the Houston BIPOC population and a larger share of respondents ages 50–64.

From August data

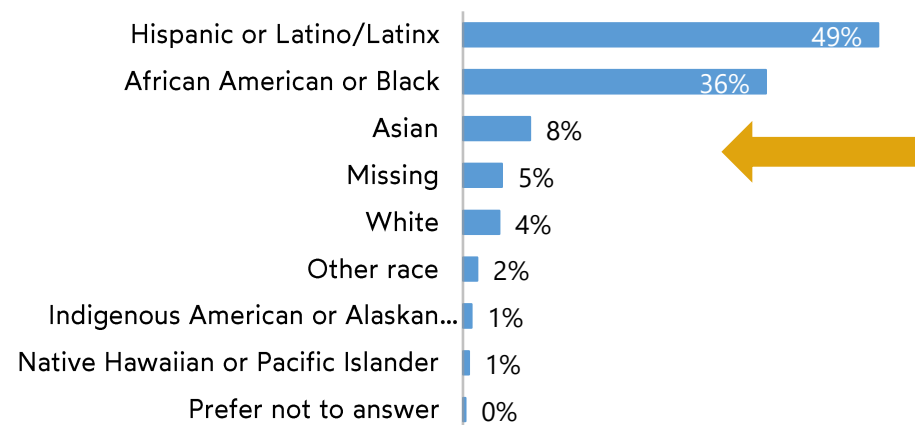
Survey respondent demographics vs. Houston city BIPOC demographics

Education: Houston vs. Survey Sample (n = 303)



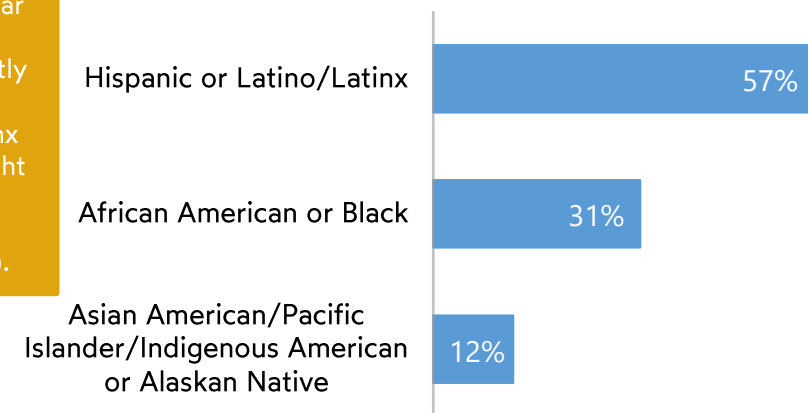
Survey respondents had lower education levels than the Houston BIPOC population.

Survey sample race/ethnicity (n = 303)



Compared with Houston's BIPOC population, survey respondents had similar distributions of race/ethnicity (a slightly lower proportion of Hispanic/Latino/Latinx respondents. This might be due to the other category responses and/or missing data).

Houston BIPOC census, 2019 ACS microdata BIPOC race/ethnicity



BALTIMORE

CHICAGO

HOUSTON

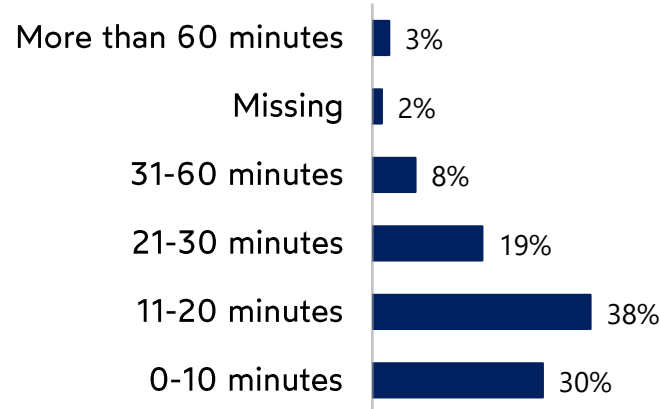
NEWARK

OAKLAND

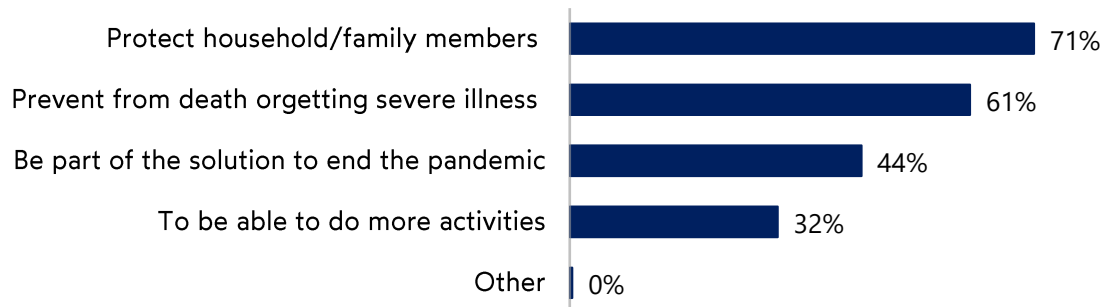
Among vaccinated respondents (n = 237)

From August data

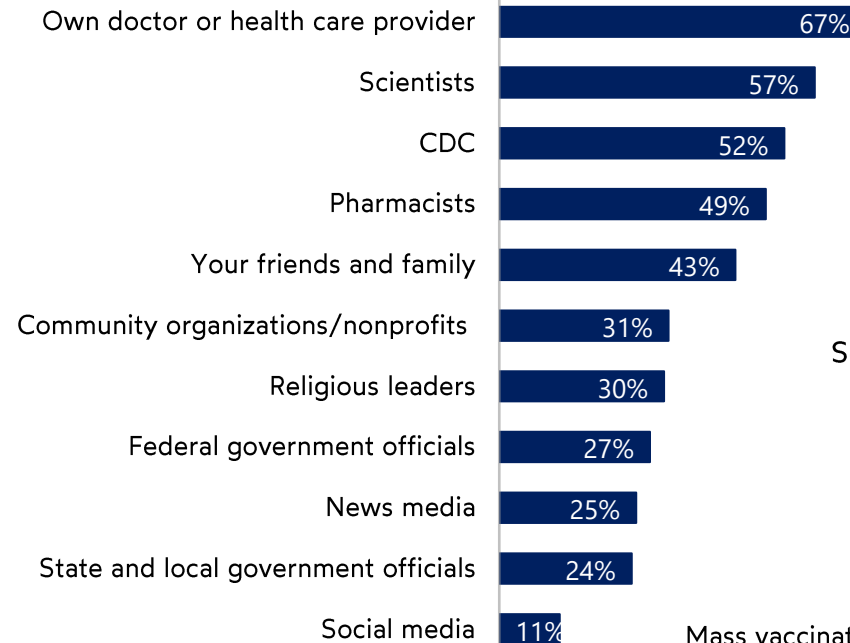
Time taken to get vaccinated



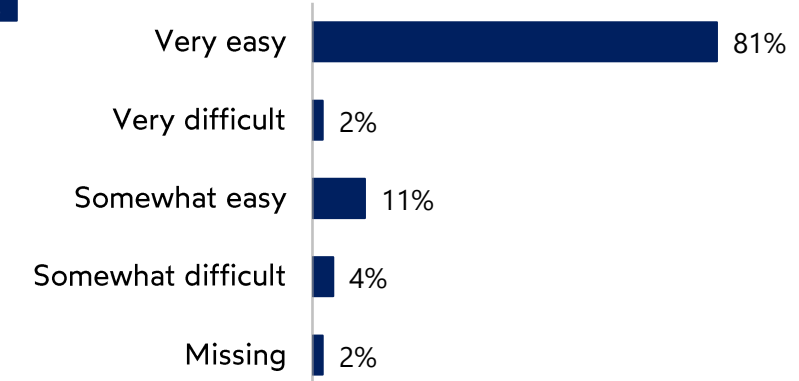
Reason for becoming vaccinated



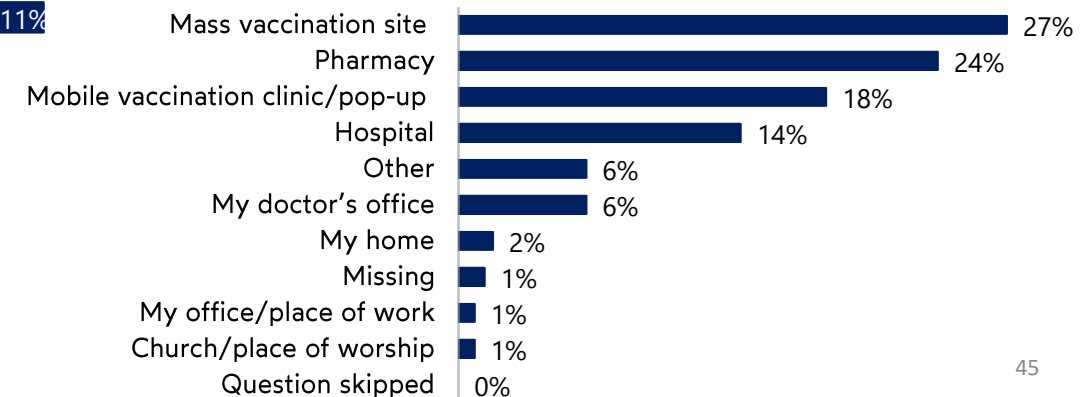
Trusted sources of information



Ease of getting an appointment



Location of appointment



*Survey questions 3, 3b, 4, 5, 6b, 6c, 7 and 8

BALTIMORE

CHICAGO

HOUSTON

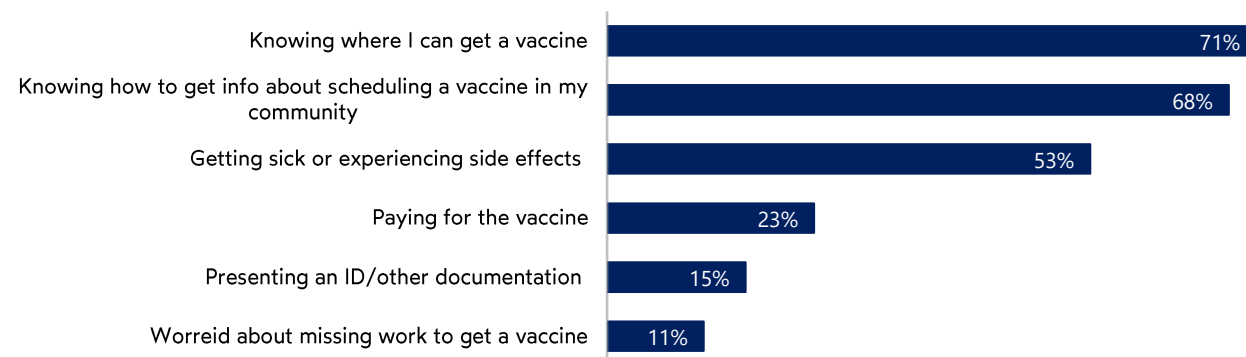
NEWARK

OAKLAND

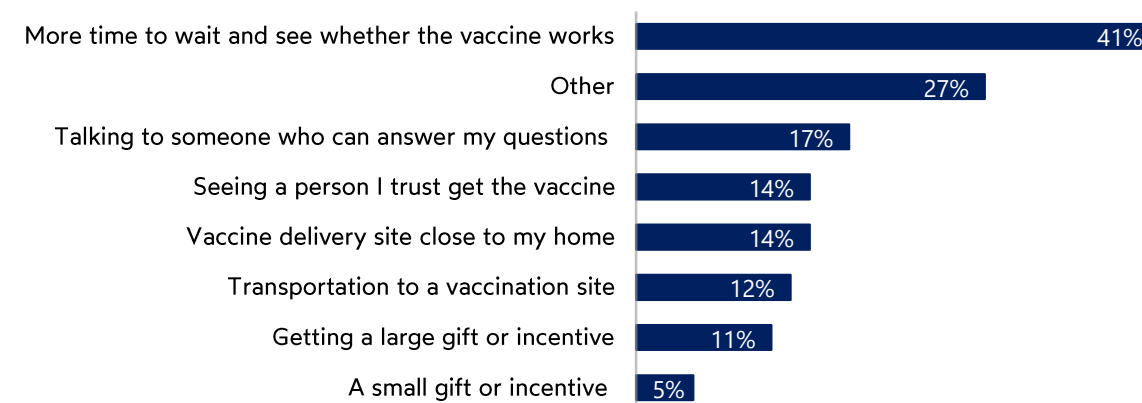
Among unvaccinated respondents (n = 66)

From August data

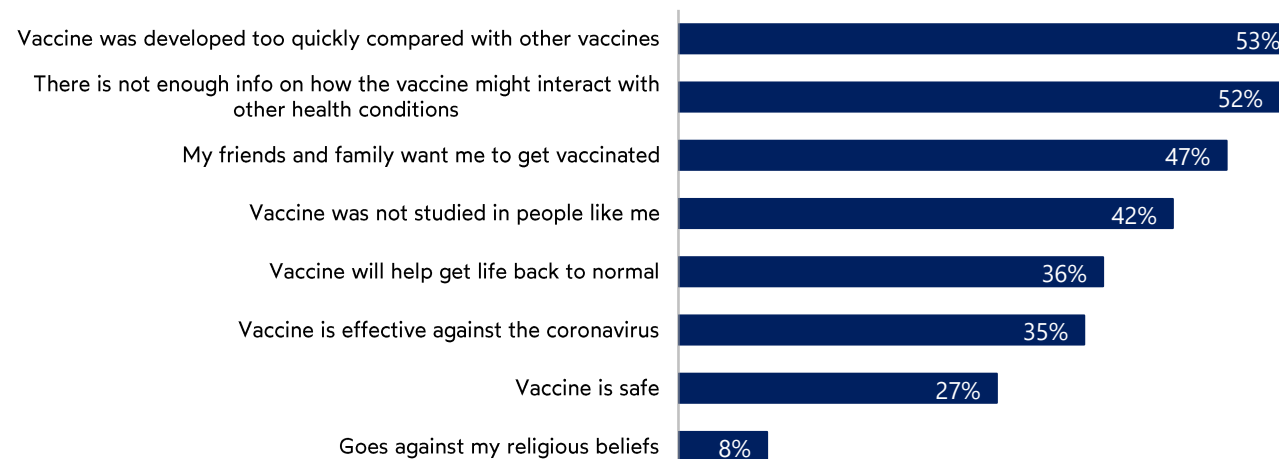
Respondents worry about:



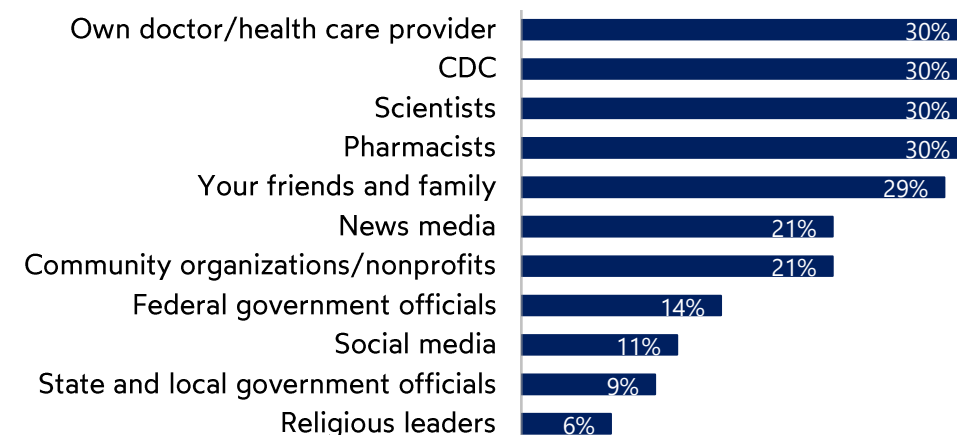
Motivators to get the vaccine



Respondents believe that:



Knowledge about the vaccine



*Survey questions 3, 3b, 4, 5, 6b, 6c, 7 and 8

Survey insights by city: Newark

- Methodology
- Changes in key trends over time
- Respondents' vaccination status and intentions
- Characteristics and highlights among vaccinated respondents
- Characteristics and highlights among unvaccinated respondents
- Differences between “types” of unvaccinated respondents
- Summary and potential actions

Methodology

Monthly goal: 200 responses

The main partner leading this effort is **United Way of Greater Newark.**



United Way of Greater Newark seeks to improve the lives of individuals, children, and families to strengthen the collective community. Their programs and service initiatives try to address the root causes of community concerns.

Partnered with

Project Ready leads the data collection efforts.



Project Ready is conducting the survey through phone banking, pulling from active voter lists and Project Ready's member list.**

Serving all areas of Newark, NJ, Project Ready works to close the opportunity gaps and improve life outcomes by powering communities to demand social justice through civic engagement.

****Member list consists of 13,000 to 14,000 parents or guardians of school aged children.**

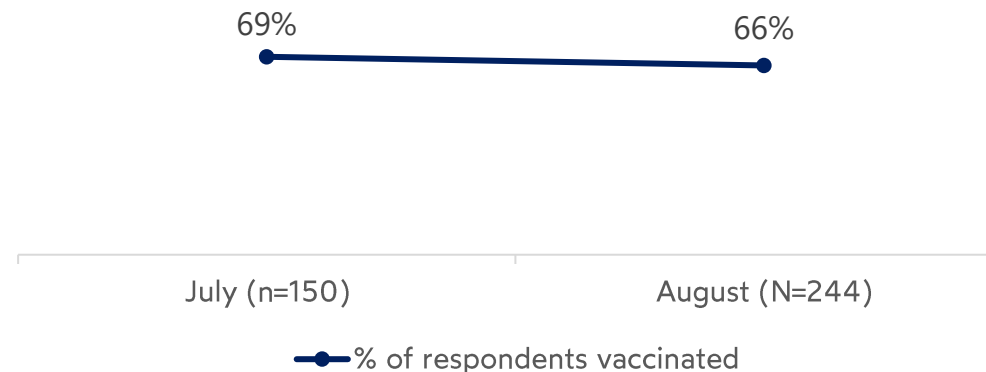
Vaccination trends from July to August

From July & August data

The vaccination rates among the surveyed population remained similar. (There was a small decrease of 3% that might be due to increased sample size.)



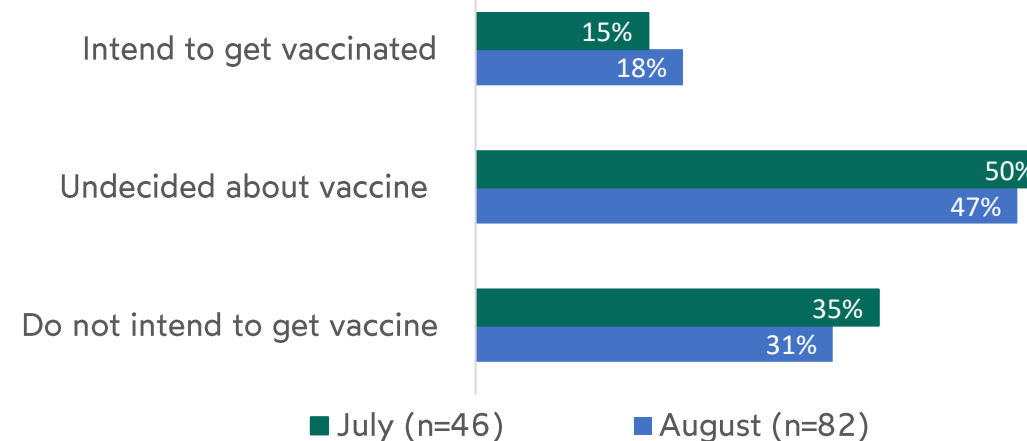
Vaccination rate



Overall, vaccine intention rates among unvaccinated respondents remained similar across months. (Those who intend to get the vaccine increased by 3%. However, this could be due to increased sample size.)



Intent to get vaccinated

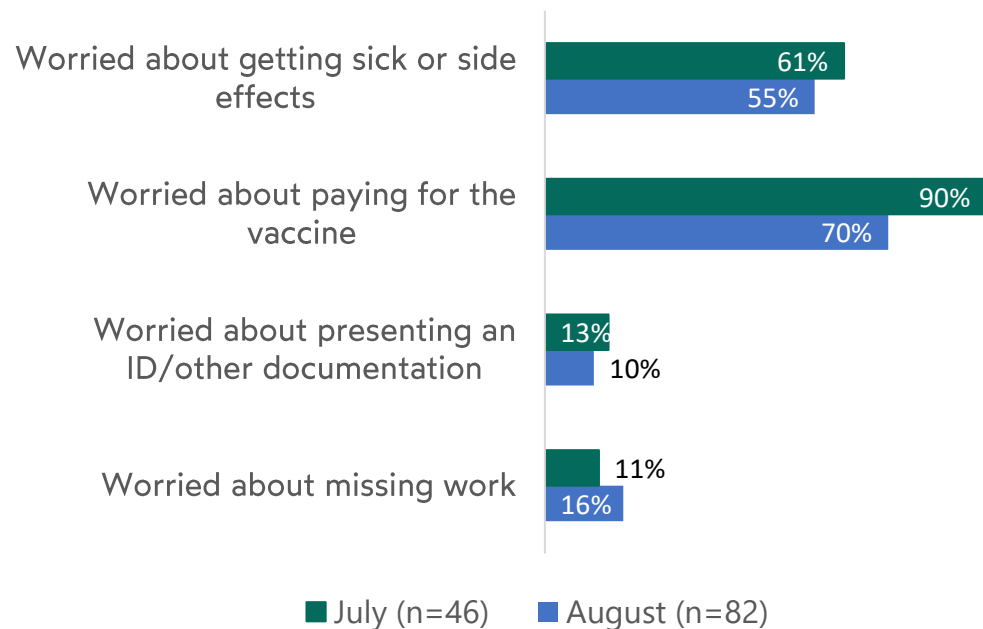


Trends in barriers and beliefs from July to August

From July & August data

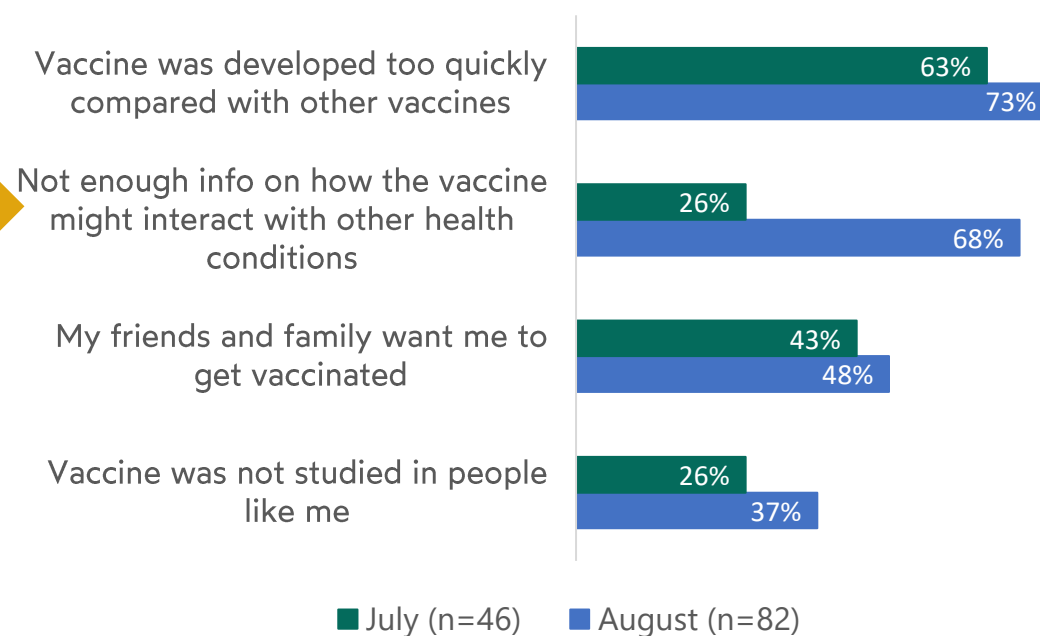
The top barriers and beliefs reported by unvaccinated respondents remained largely consistent between July and August.

Barriers



Biggest shift in beliefs

Beliefs



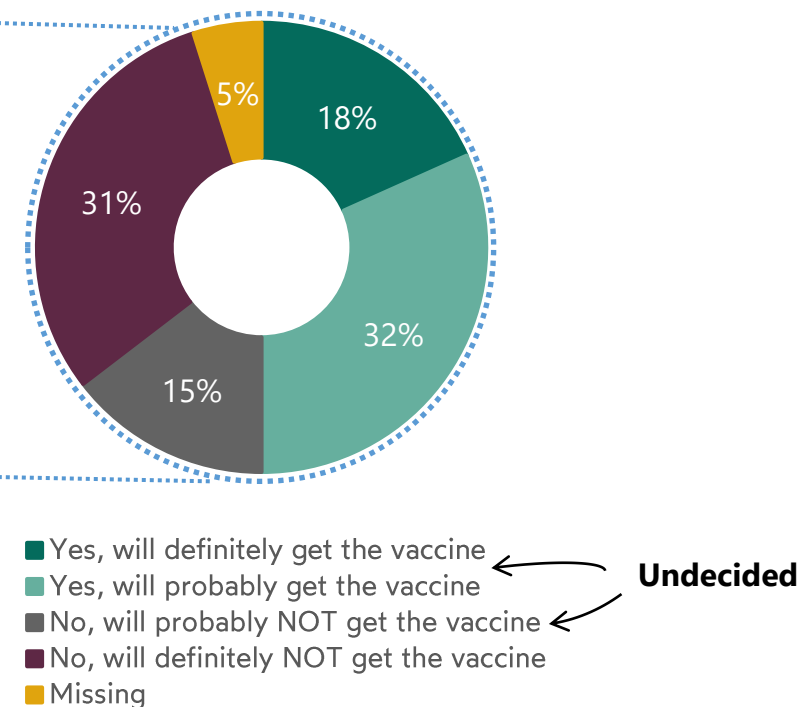
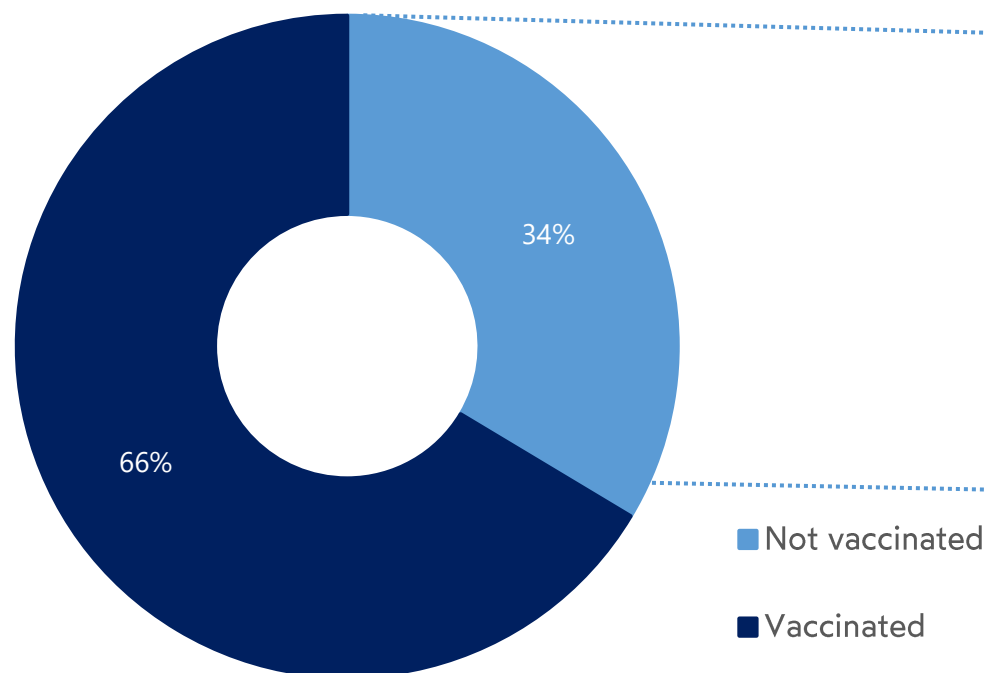
Vaccination status and intention ($n = 244$)

From July &
August data

More than half of respondents in August reported being vaccinated (66%). Among the unvaccinated respondents (34%), **18% intend to get the vaccine**, and **47% are undecided**.

Surveyed population in Newark

Among the 34% who are not vaccinated

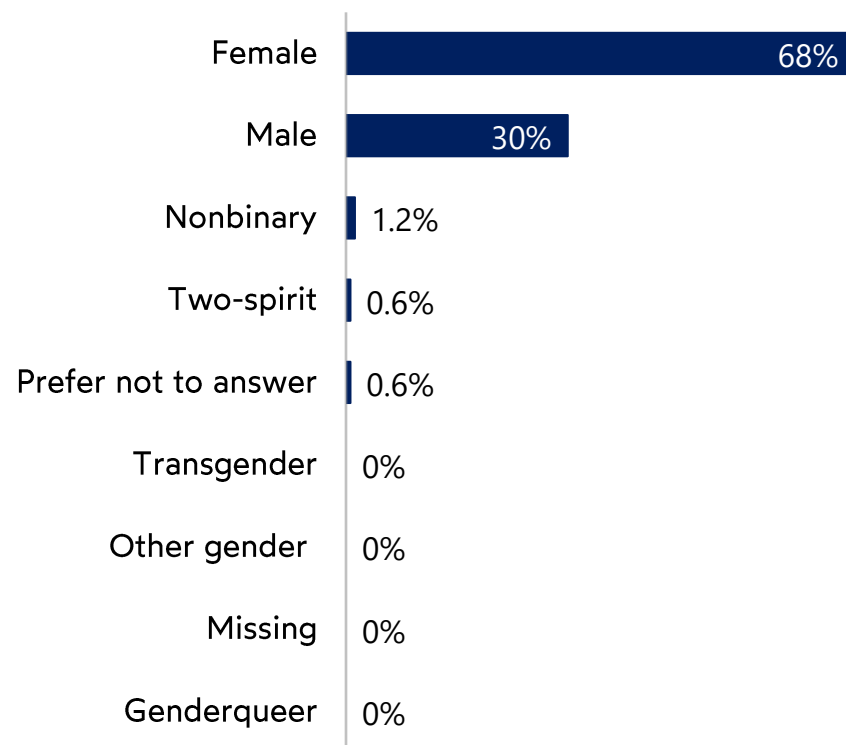


Who are the vaccinated respondents? ($n = 162$)

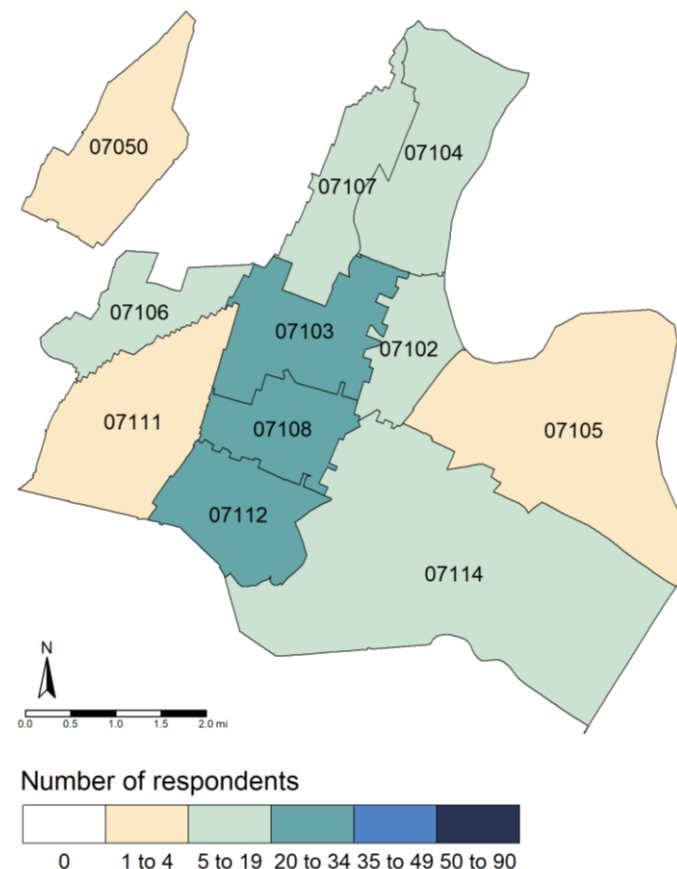
From July & August data

More than two-thirds of vaccinated respondents were **female**; **more than 80% were African American or Black**; and many were from **zip codes 07103, 07108, and 07112**.

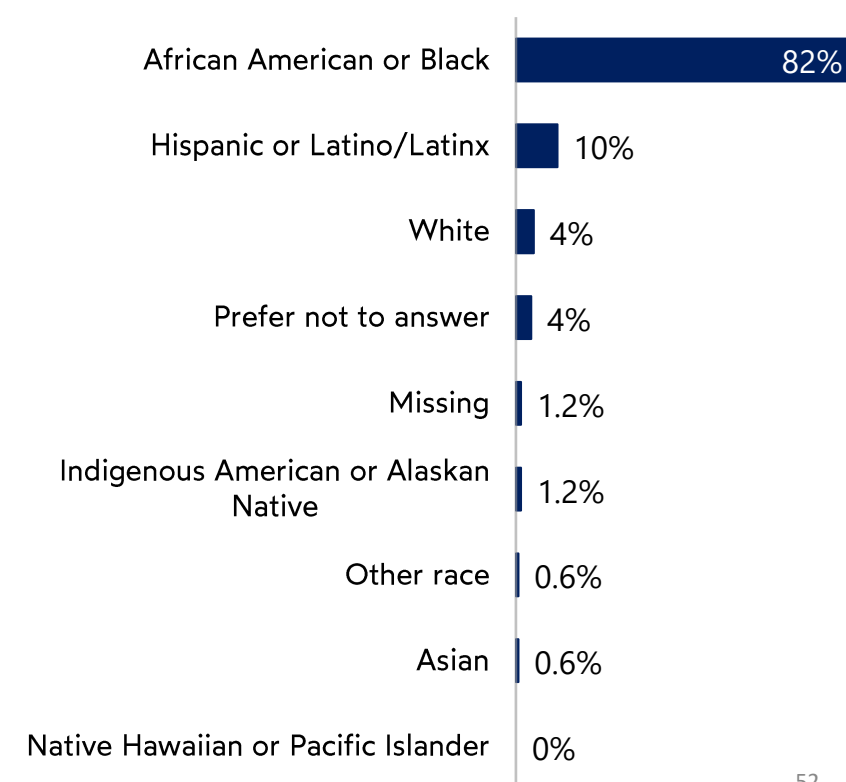
Gender
(Select all that apply)



Where respondents live (by zip code)



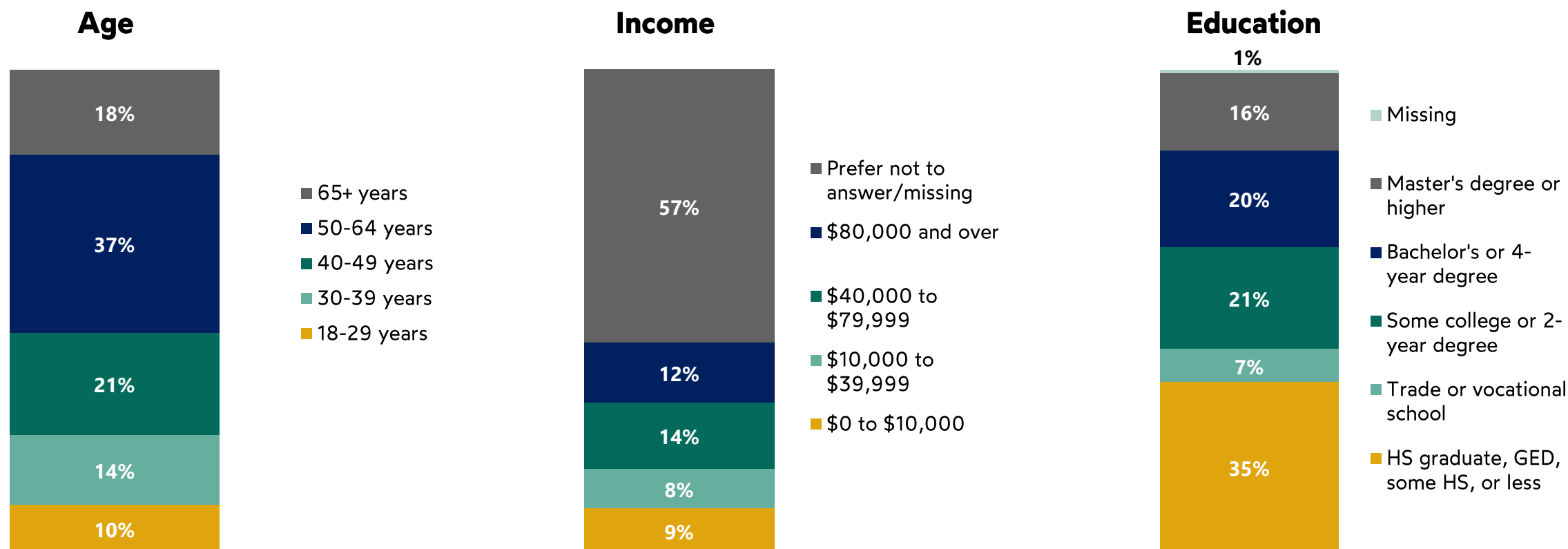
Race/ethnicity
(Select all that apply)



From July &
August data

Who are the vaccinated respondents? ($n = 162$)

The largest share of vaccinated respondents are ages **50–64 (37%)** and have a **high school diploma/GED or less (35%)**.**



Among vaccinated respondents ($n=162$)

From July &
August data

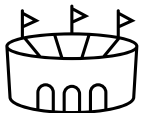
ACCESS



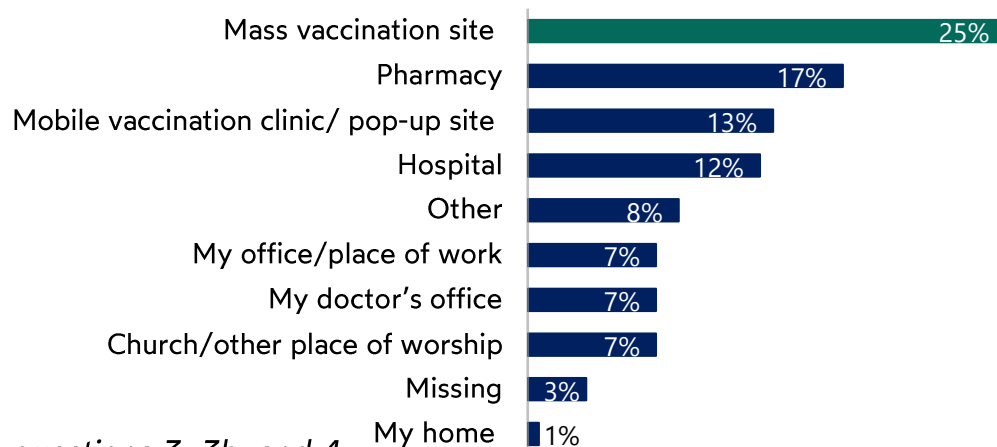
Nearly **80%** of respondents took **less than 20 minutes** to get to the location of their vaccine appointment.



Most respondents **found it very easy (83%)** to make a vaccine appointment.



One-fourth of respondents received the vaccine at a **mass vaccination site (25%)**.



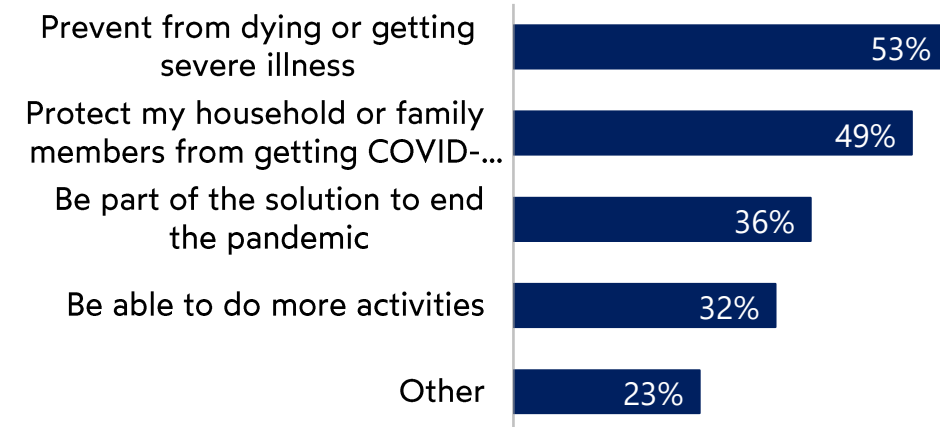
MESSENGERS AND MOTIVATORS



The most trusted messengers among the vaccinated respondents are people working in **health care (doctors or health care professionals and pharmacists) and scientists**.



Just over half of the respondents noted they decided to get the vaccine to **prevent death or severe illness (53%)**, and just under half noted they wanted to **protect their household and family members from getting COVID-19 (49%)**.

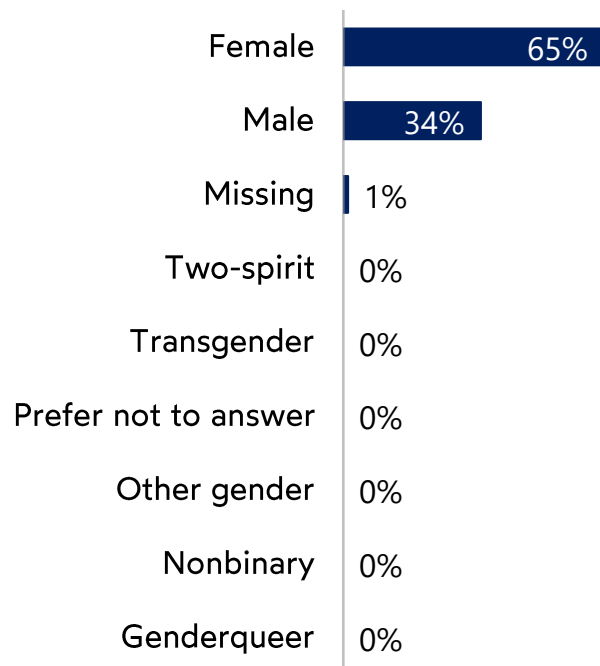


Who are the unvaccinated respondents? ($n = 82$)

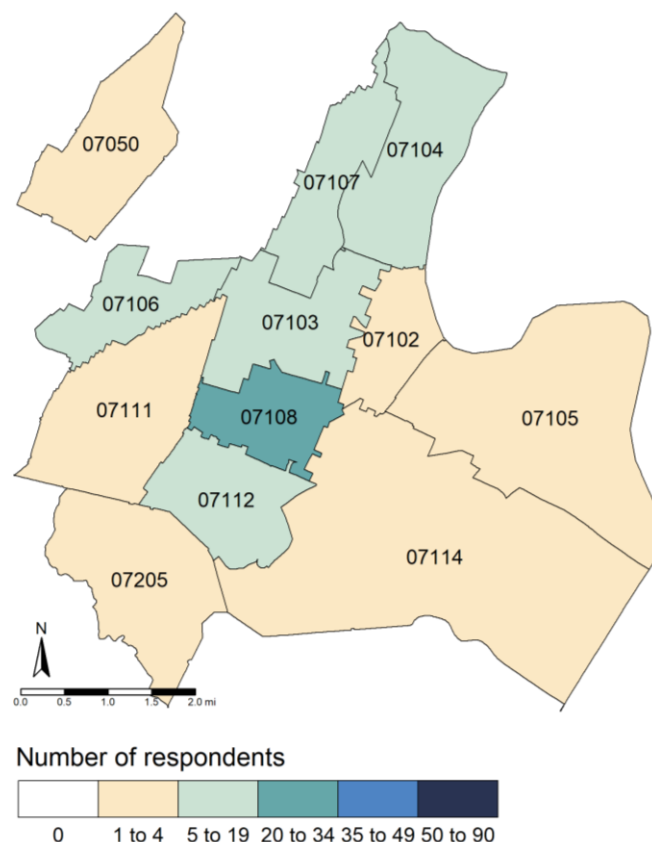
From July & August data

Nearly two-thirds of unvaccinated respondents were **female**, almost **90%** were **African American or Black**, and many were from **zip code 07108**.

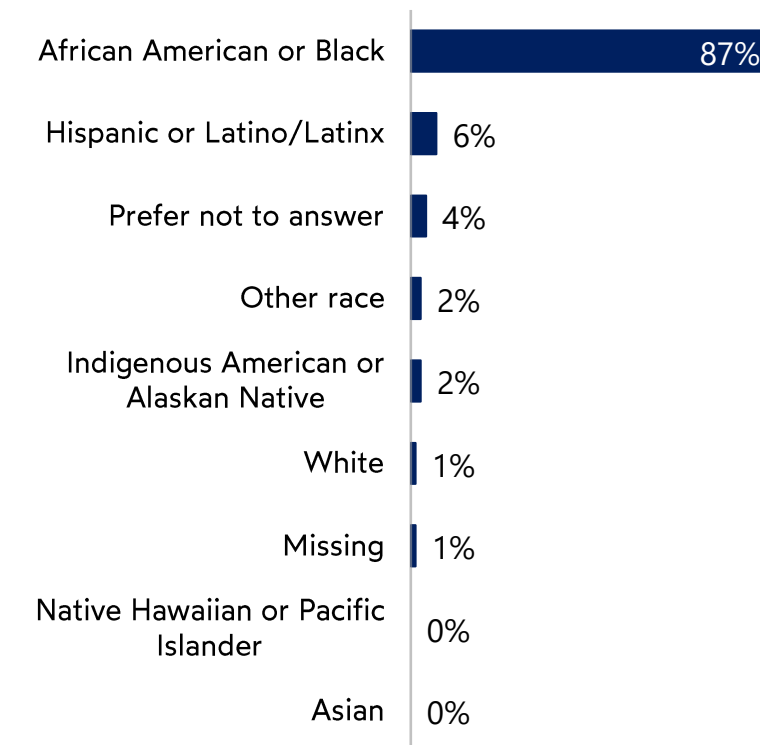
Gender



Where respondents live (by zip code)



Race/ethnicity

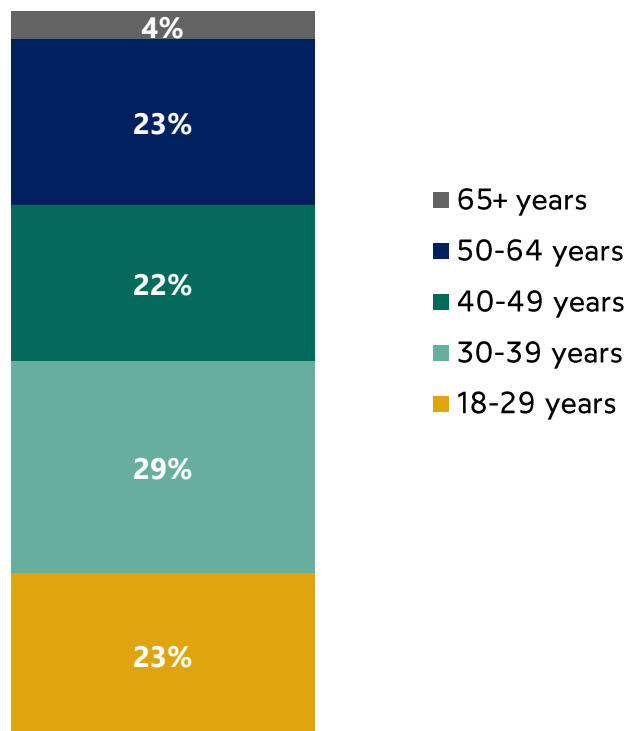


Who are the unvaccinated respondents? ($n = 82$)

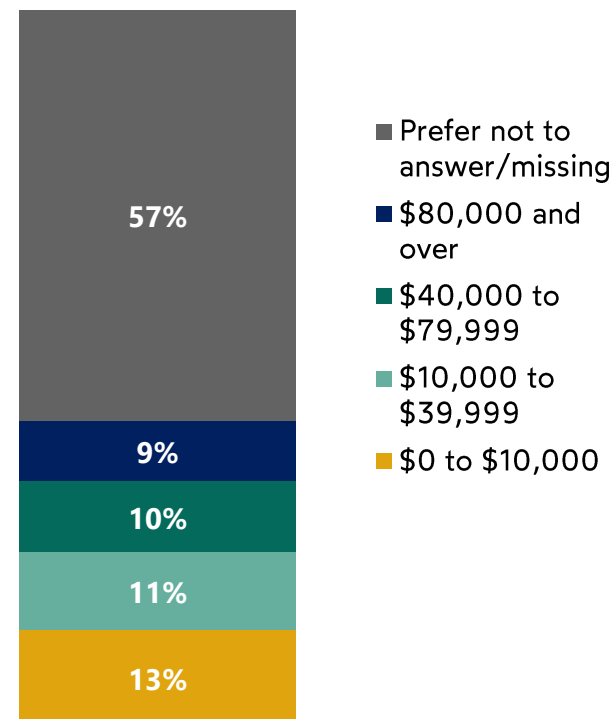
From July & August data

The largest share of unvaccinated respondents are ages **30–39 (29%)**. More than one-third had **some college or a two-year degree (38%)**, and just under one-third had a **high school diploma/GED or less (32%)**.

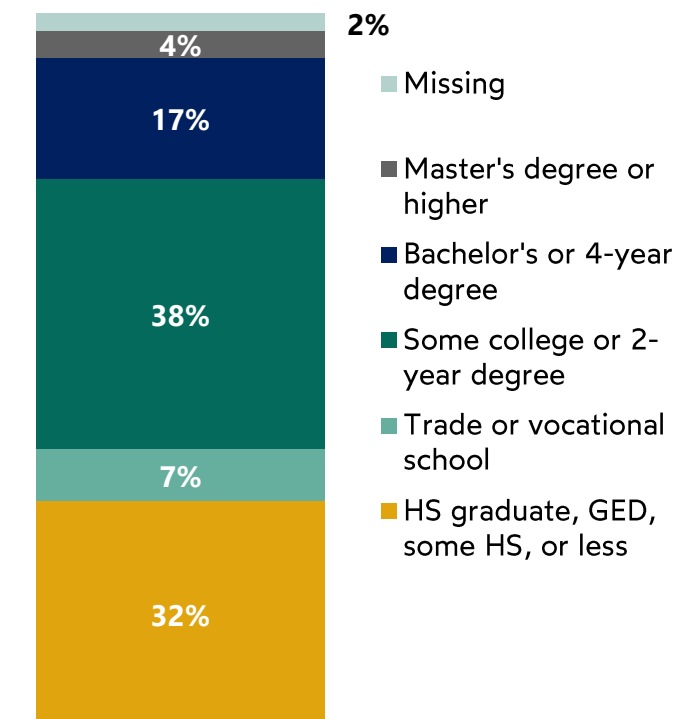
Age



Income



Education



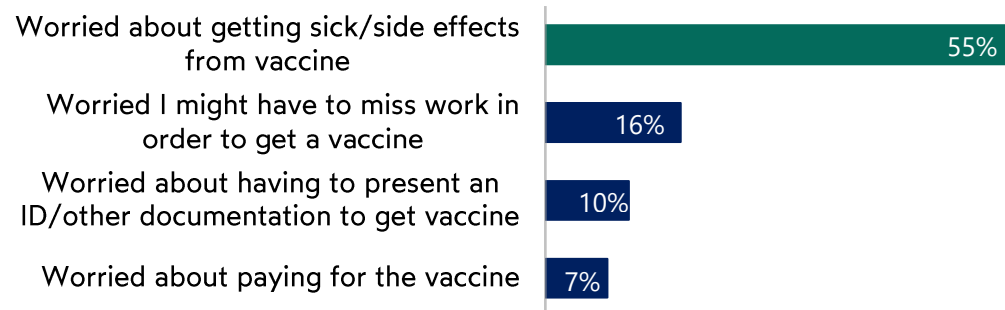
Among unvaccinated respondents ($n = 82$)

From July & August data

BARRIERS



A little more than half of unvaccinated respondents were **worried about getting sick or experiencing side effects from the vaccine (55%)**.

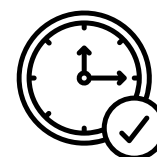


ENABLERS

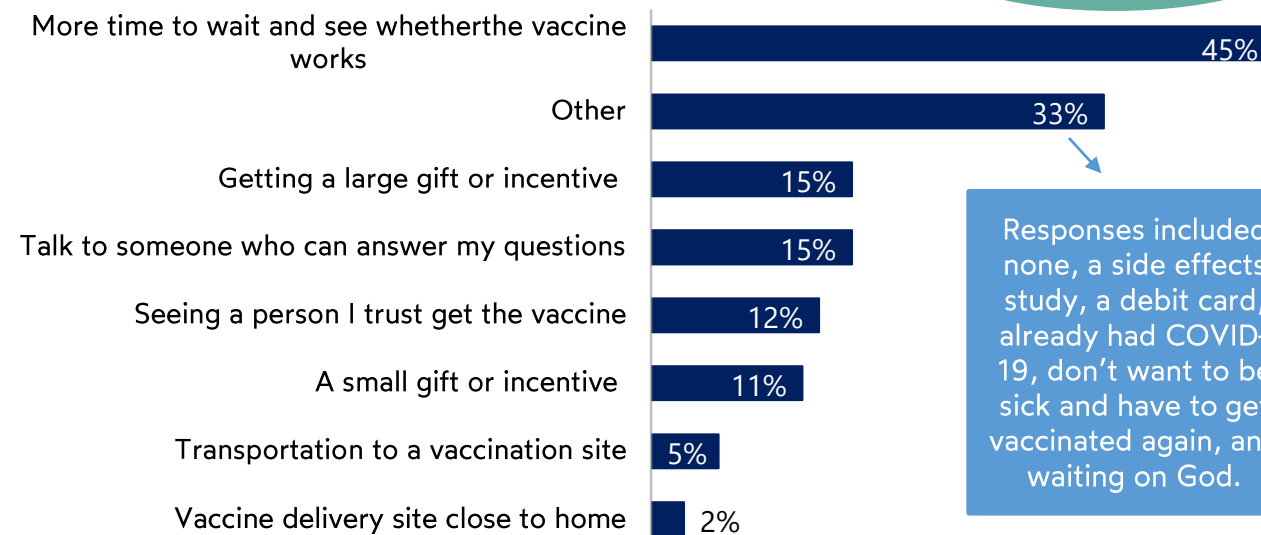


More than half of respondents noted they **know how to get information about scheduling a vaccine in their community (70%)** and **know where to get a vaccine (66%)**.

MOTIVATORS



Just under half of the respondents would prefer **more time to wait and see whether the vaccine works (45%)**.



Potential focus group question

Responses included none, a side effects study, a debit card, already had COVID-19, don't want to be sick and have to get vaccinated again, and waiting on God.

Among unvaccinated respondents ($n = 82$)

From August data

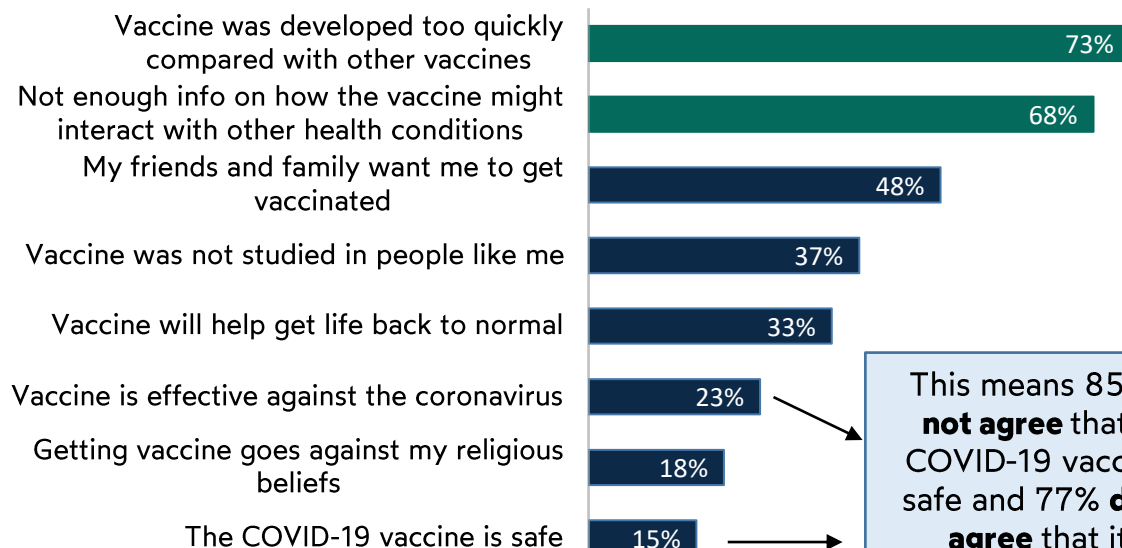
BELIEFS



Nearly three-fourths of respondents believe **the vaccine was developed too quickly compared with other vaccines (73%)**.



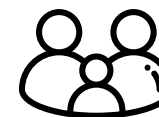
More than two-thirds of respondents believe **there is not enough information on how the vaccine might interact with other health conditions (68%)**.



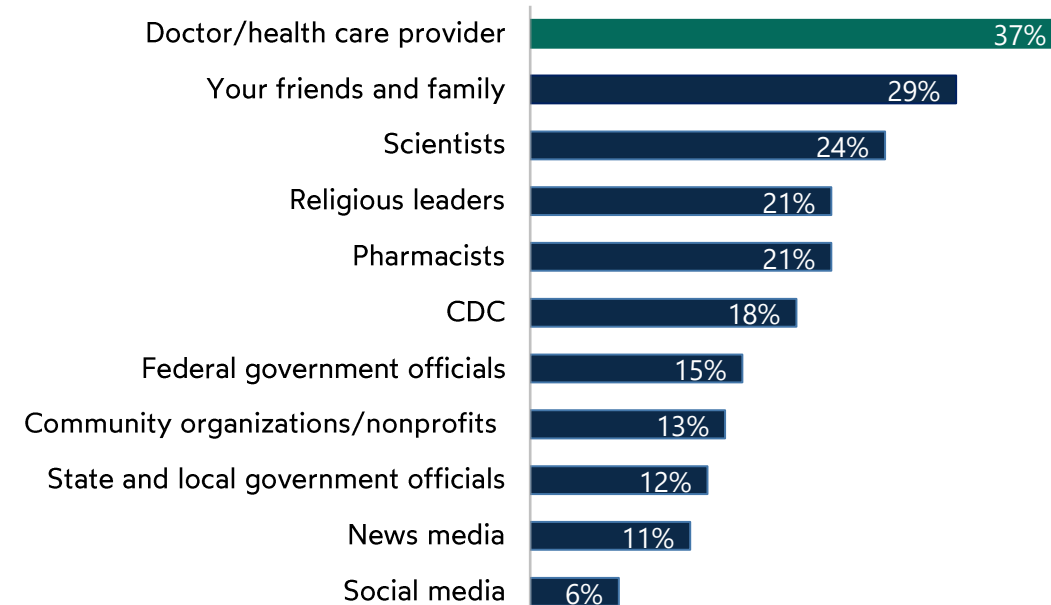
This means 85% **do not agree** that the COVID-19 vaccine is safe and 77% **do not agree** that it is effective.

*Survey question 7

TRUSTED MESSENGERS



Just over a third of the respondents trust their **doctor or health care provider (37%)** for information about the COVID-19 vaccine. Trust in other listed sources of information was lower.



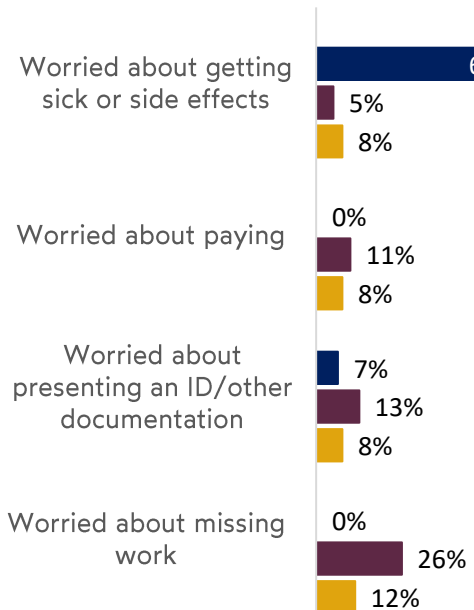
*Survey questions 8

From August data

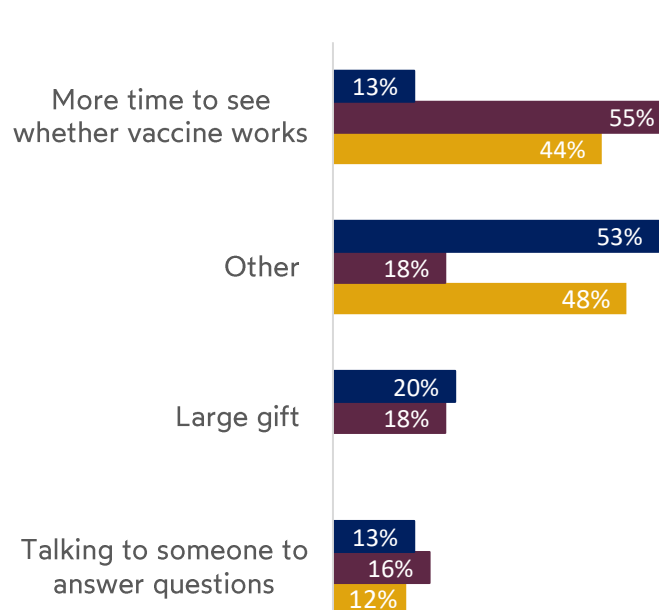
Differences between “types” of unvaccinated respondents

- The small group of **respondents who “intend to get the vaccine”** looks somewhat different from the respondents who are **“undecided”** and **“do not intend to get vaccine.”**
- Most who “intend to” believe that the main barrier to getting a vaccine is worrying about getting sick or side effects; they mostly reported “other” factors that could motivate them, such as receiving a debit card or more studies on side effects; they believe the vaccine is effective but not too many believe it is safe; and they have more trust in doctors, pharmacists, and religious leaders.

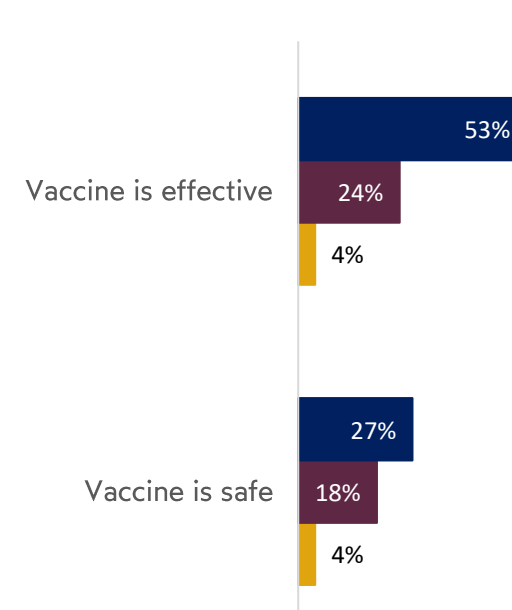
BARRIERS



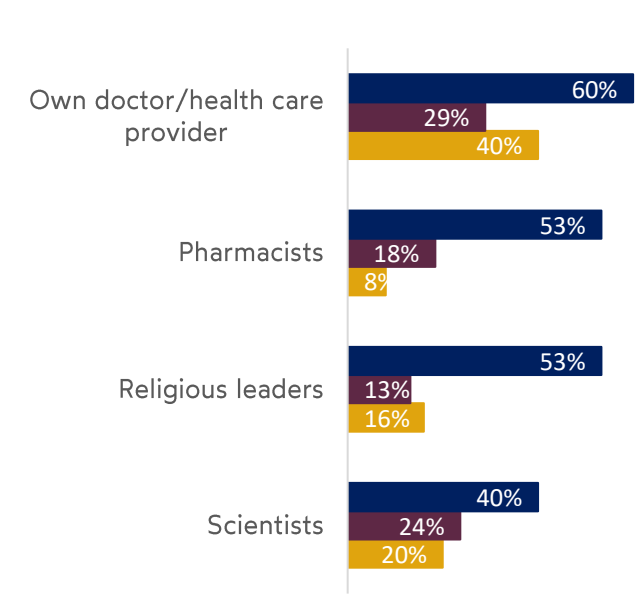
MOTIVATORS



BELIEFS



TRUSTED MESSENGERS



*Survey questions 6b, 6c, 7, and 8

■ Intend to get vaccinated (n=15)

■ Undecided about vaccine (n=38)

■ Do not intend to get vaccine (n=25)

Summary and potential actions

From August data

KEY TAKEAWAYS

ALL NEWARK RESPONDENTS

- Trust their doctors and health care providers the most to provide vaccine information

VACCINATED RESPONDENTS

- Were motivated to get the vaccine to prevent death and severe illness

POTENTIAL MESSAGING & OUTREACH STRATEGIES



Provide training/resources to local health care workers about **how to have compassionate conversations with patients who are not vaccinated.**



Encourage discussions between vaccinated and unvaccinated individuals that focus on how vaccines are very good at preventing **severe illness and death.**

Summary and potential actions

From August data

KEY TAKEAWAYS

UNVACCINATED RESPONDENTS OVERALL

- Are worried about getting sick and side effects
- Believe there is not enough information regarding the vaccine's interaction with other health conditions
- Would like more time to see whether vaccine works
- Believe friends and family would like them to get vaccinated
- Believe the vaccine was developed too quickly



POTENTIAL MESSAGING & OUTREACH STRATEGIES



Provide information that does the following:

- Emphasizes that you **cannot get COVID-19 from the vaccine**
- Details **how to manage side effects**
- Provides **resources and contact information** for those experiencing side effects
- Demonstrates **vaccine's safety in the presence of other health conditions**
- Shows how the vaccine **works to prevent severe illness**



Support and encourage vaccinated community members to have **compassionate conversations with friends and family** who are not vaccinated.



Develop communications materials demonstrating how the testing and production process was safely compressed into a shorter time frame based on decades of research.

Newark: Supplemental data slides

- Survey respondent demographics vs. city BIPOC demographics
- All figures for questions analyzed

BALTIMORE

CHICAGO

HOUSTON

NEWARK

OAKLAND

From August data

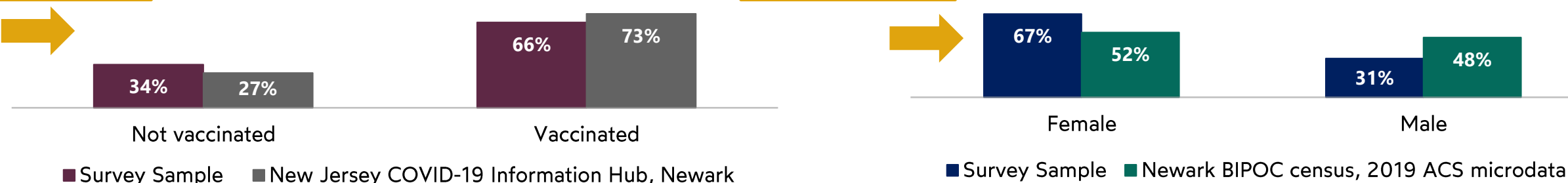
Survey respondent demographics vs. Newark city BIPOC demographics

Vaccination statuses of survey respondents are close to Newark's full population (7% different).

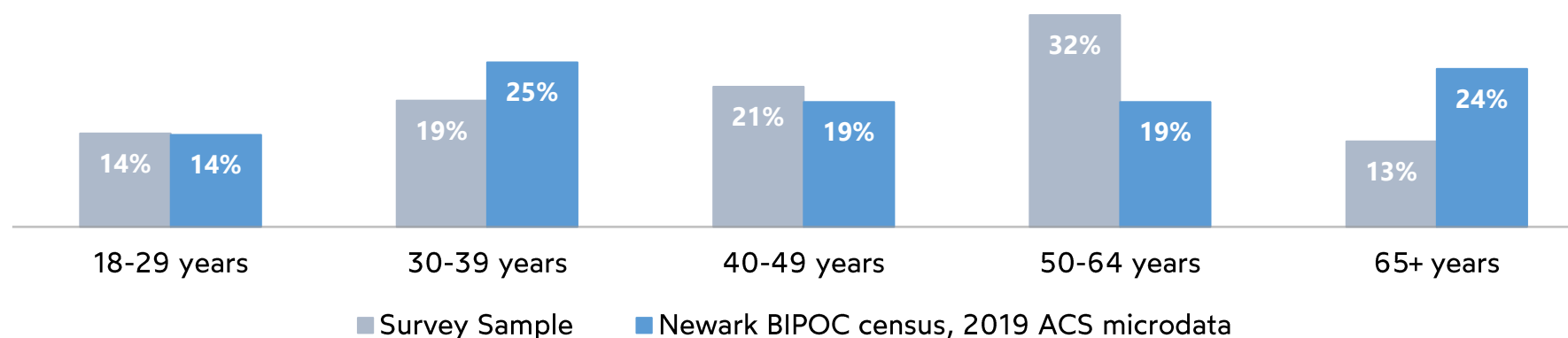
Vaccination status (at least one dose): Newark vs. Survey Sample (n = 244)

Survey sample has 15% more females than the Newark BIPOC population.

Gender: Newark vs. Survey Sample (n = 244)



Age: Newark vs. Survey Sample (n = 244)

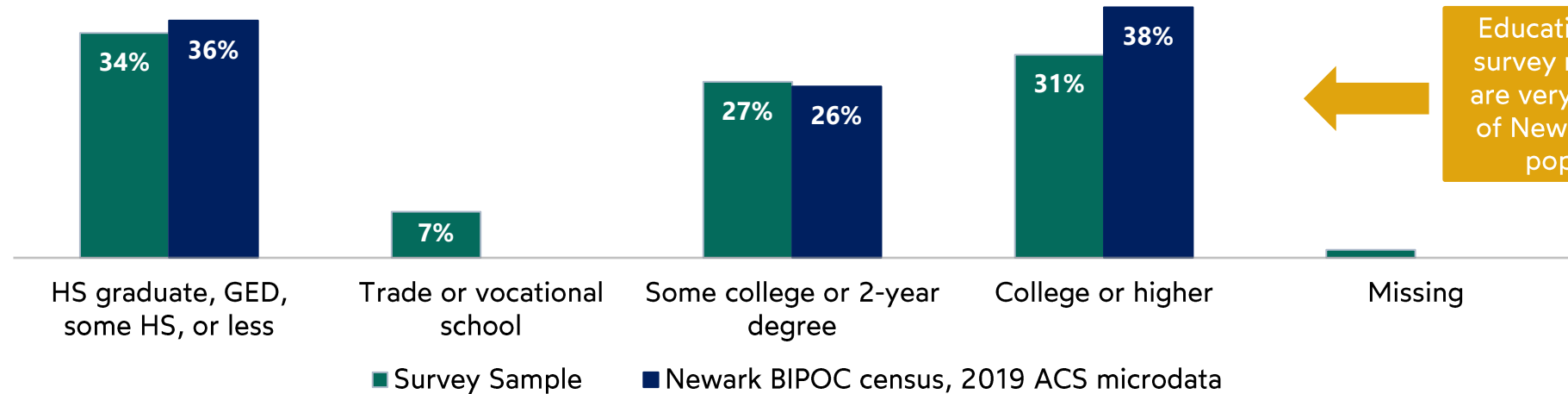


Compared with Newark's BIPOC population, the survey population has more respondents ages 50–64 and fewer respondents older than 65.

From August data

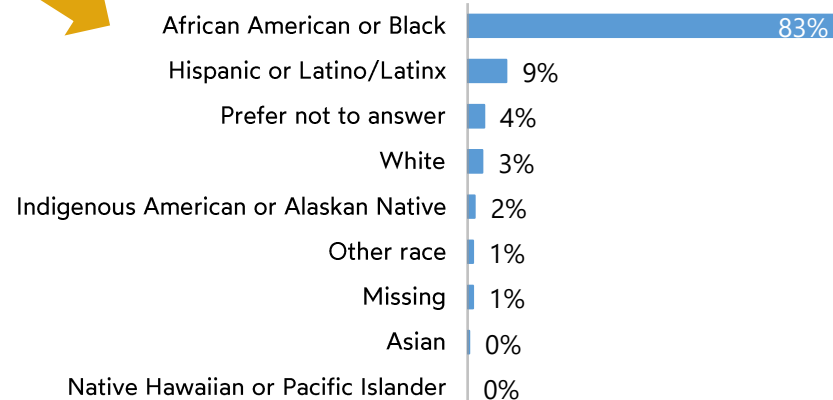
Survey respondent demographics vs. Newark city BIPOC demographics

Education: Newark vs. Survey Sample (n = 244)

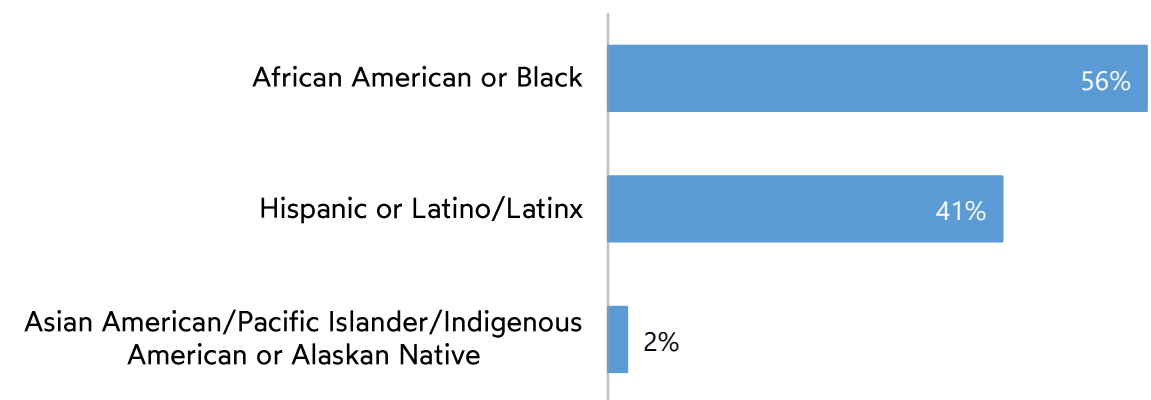


Compared with Newark's BIPOC population, the survey sample has more African American or Black people and fewer Hispanic or Latino/Latinx people.

Survey Sample race/ethnicity (n = 244)



Newark BIPOC census, 2019 ACS microdata BIPOC race/ethnicity



BALTIMORE

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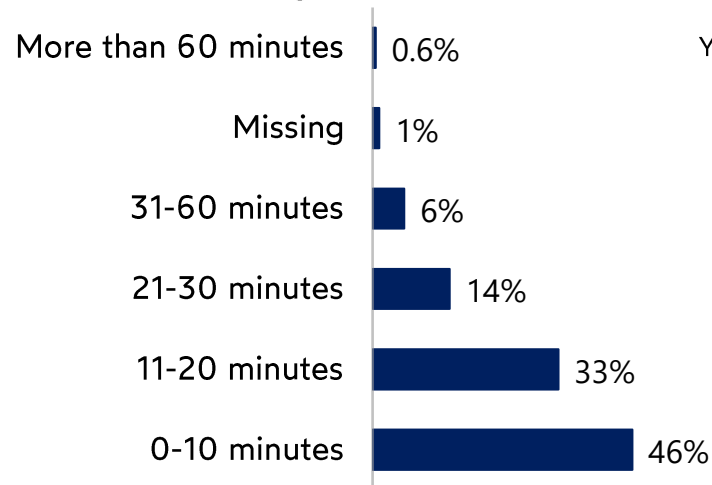
NEWARK

OAKLAND

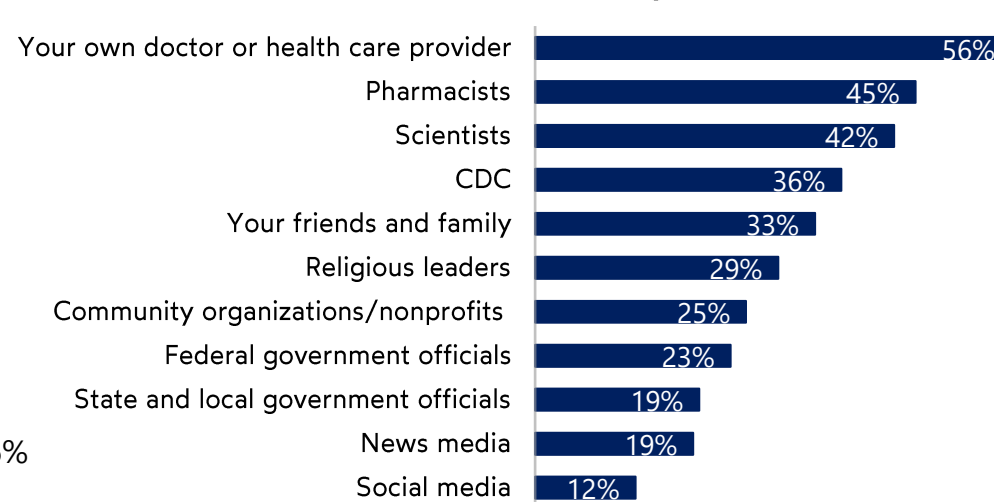
From August data

Among vaccinated respondents (n = 162)

Time taken to get vaccinated



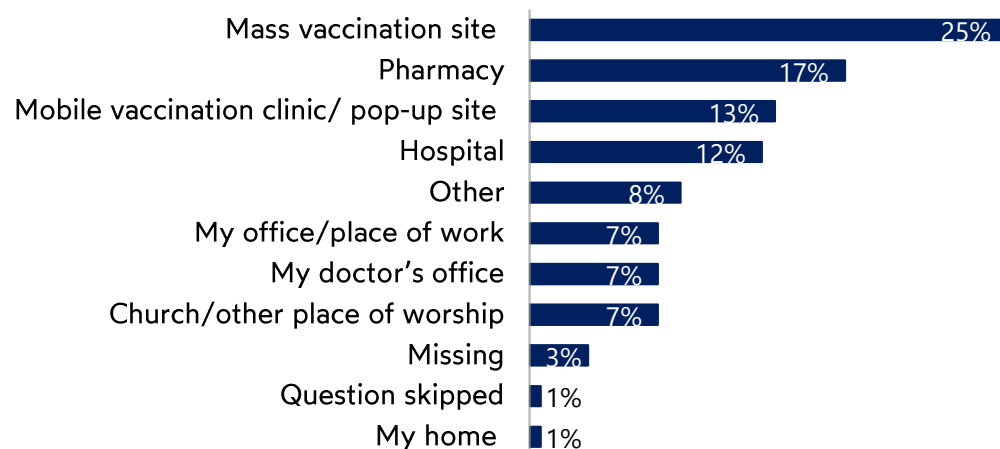
Trusted messengers



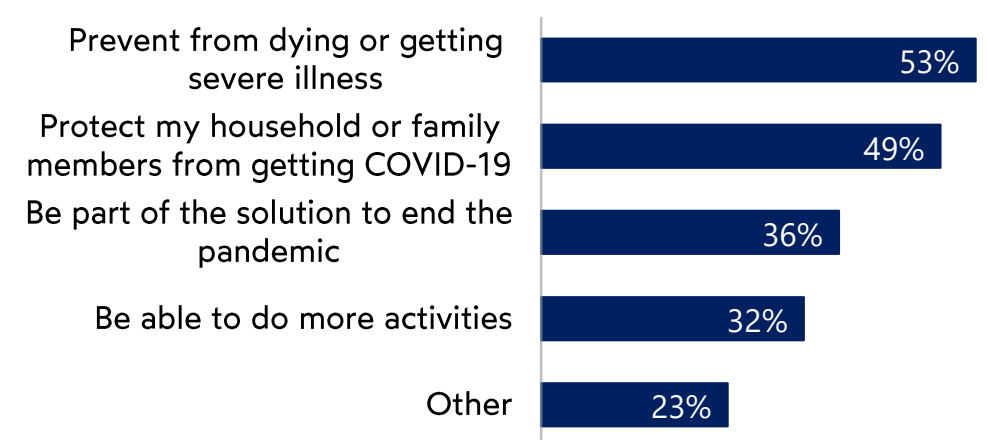
Ease of getting an appointment



Location of appointment



Reason for becoming vaccinated



BALTIMORE

CHICAGO

HOUSTON

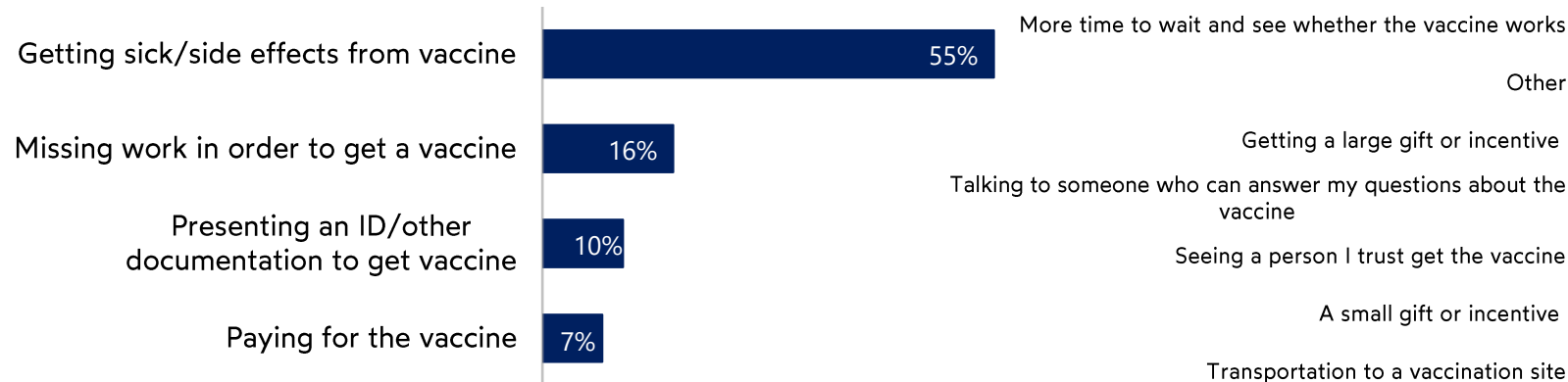
NEWARK

OAKLAND

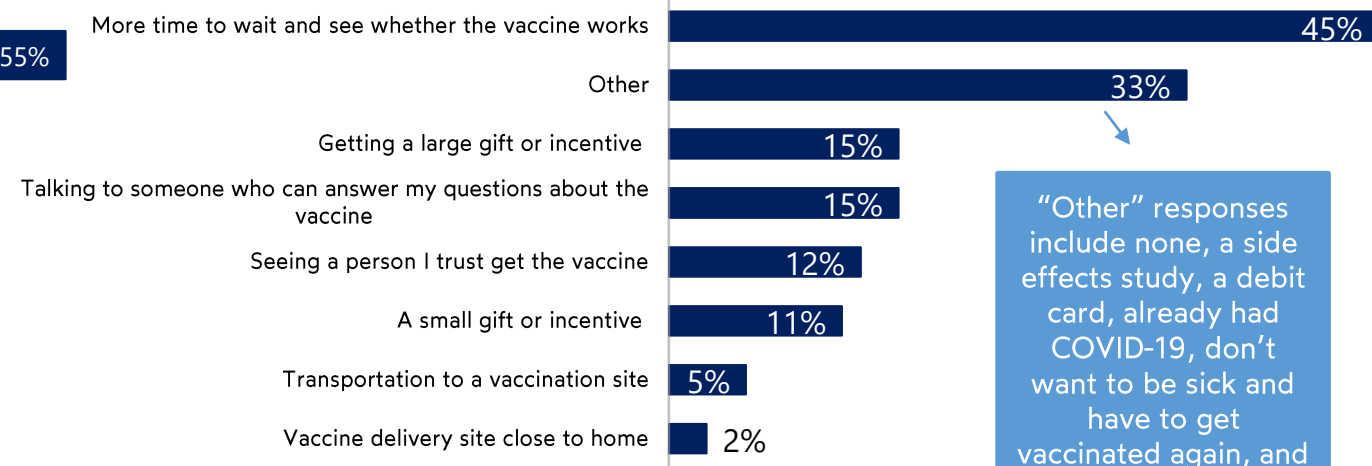
Among unvaccinated respondents (n = 82)

From August data

Respondents worry about:

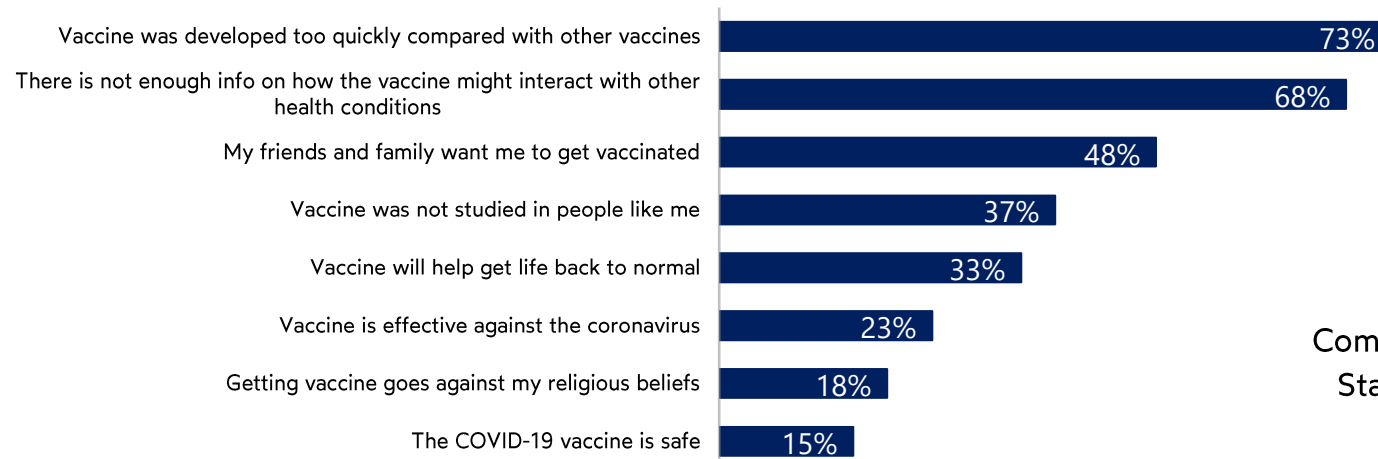


Motivators to get the vaccine

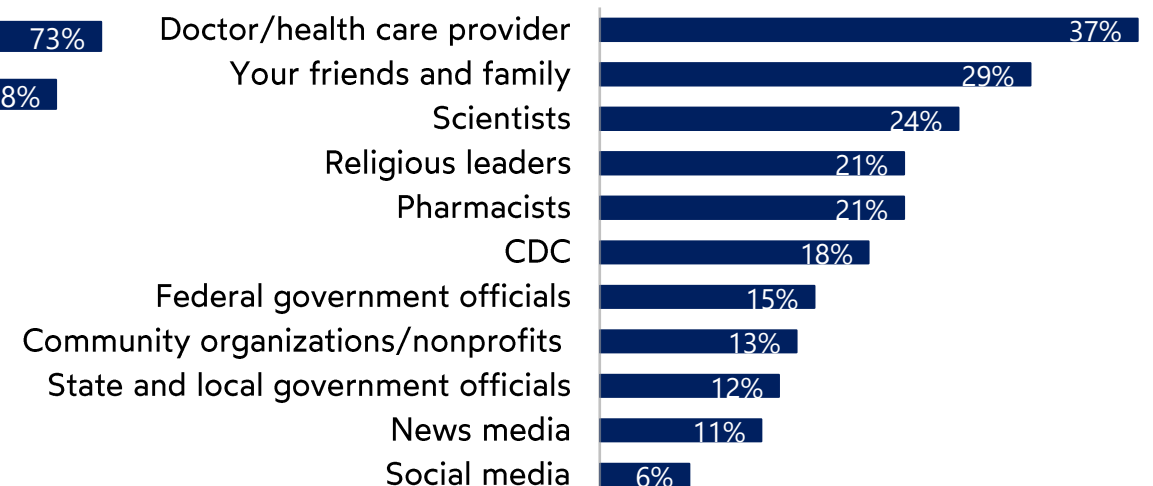


"Other" responses include none, a side effects study, a debit card, already had COVID-19, don't want to be sick and have to get vaccinated again, and waiting on God.

Respondents believe that:



Trusted messengers



Survey insights by city: Oakland

- Methodology
- Respondents' vaccination status and intentions
- Characteristics and highlights among vaccinated respondents
- Characteristics and highlights among unvaccinated respondents
- Differences between “types” of unvaccinated respondents
- Summary and potential actions

Monthly goal: 100 responses

Methodology

The main partner leading this effort is **Faith In Action**.



Faith In Action is a partnership of congregations, schools, and community organizations dedicated to addressing social issues, such as violence reduction, immigration rights, education equity, and health care.

Partnered with



Centro Legal de La Raza and Legal Services for Prisoners with Children (LSPC) leads the data collection efforts.



Centro Legal contacts respondents primarily via email and text. Its listserv includes clients, donors, and volunteers.

Centro Legal is dedicated to empowering Latino, immigrant, and low-income communities.



Centro Legal conducts in-person interviews at tabling opportunities outside its offices.



LSPC conducts in-person interviews at local businesses such as barbershops, nail salons, and other venues. It uses a combination of paper intercept surveys and self-administered web surveys.

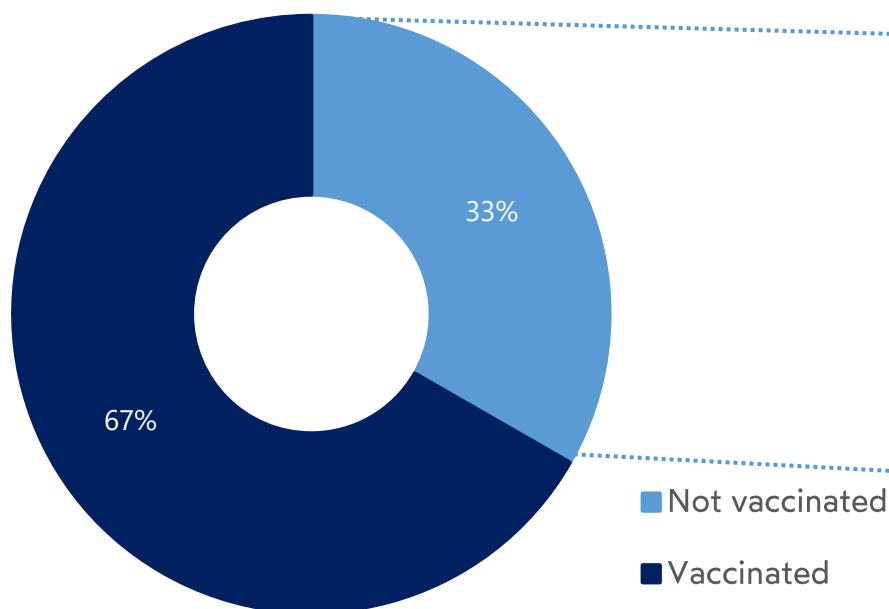
LSPC is dedicated to serving incarcerated and formerly incarcerated people and their families.

Vaccination status and intention ($n = 120$)

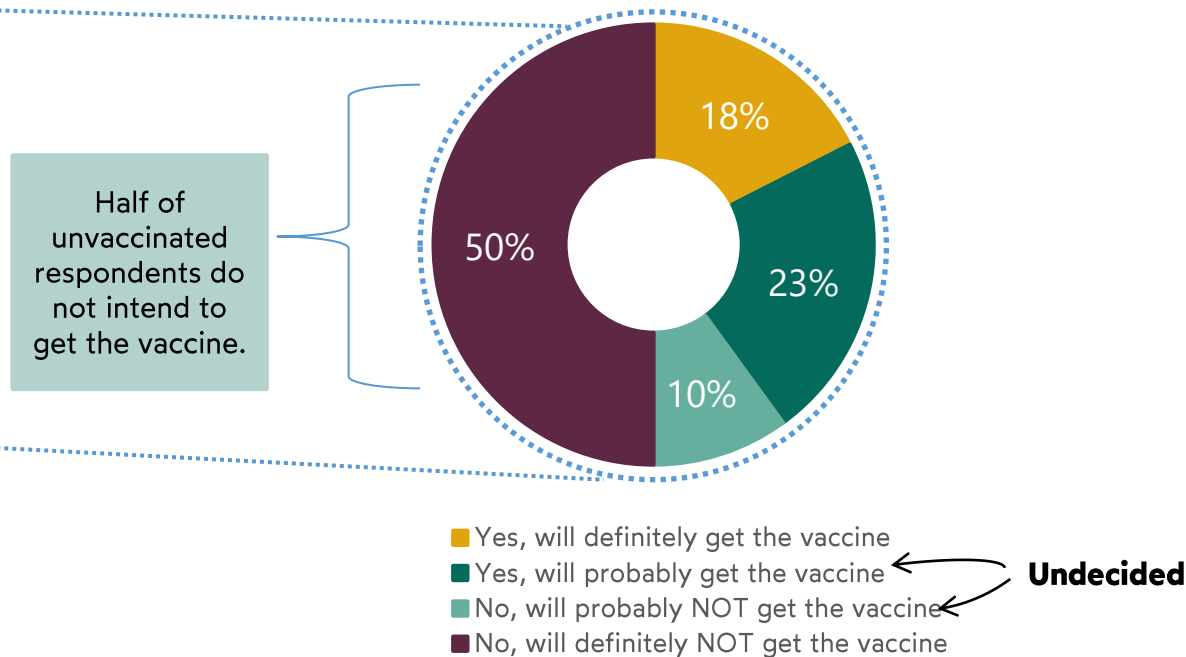
From July & August data

Approximately **one-third of the respondents are not vaccinated**. Among this share of respondents, **18% intend to get the vaccine**, and **33% are undecided**.

Surveyed population in Oakland



Among the 33% who are not vaccinated

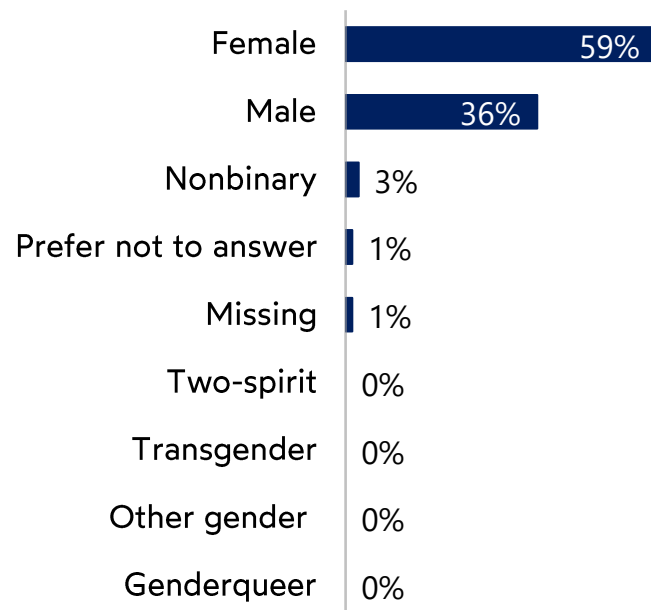


From July & August data

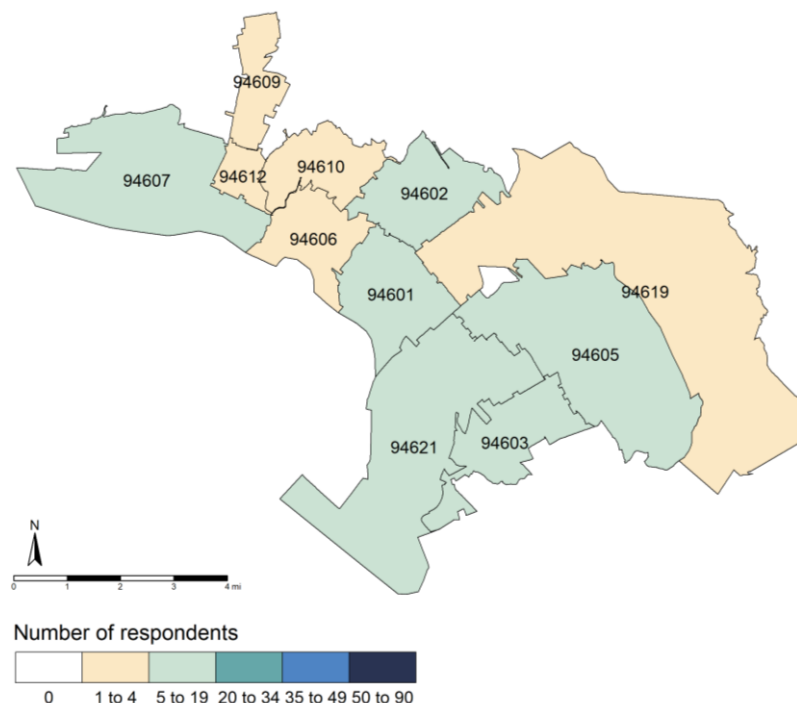
Who are the vaccinated respondents? ($n = 80$)

Most vaccinated respondents were **female**, and more than half were **African American or Black**.

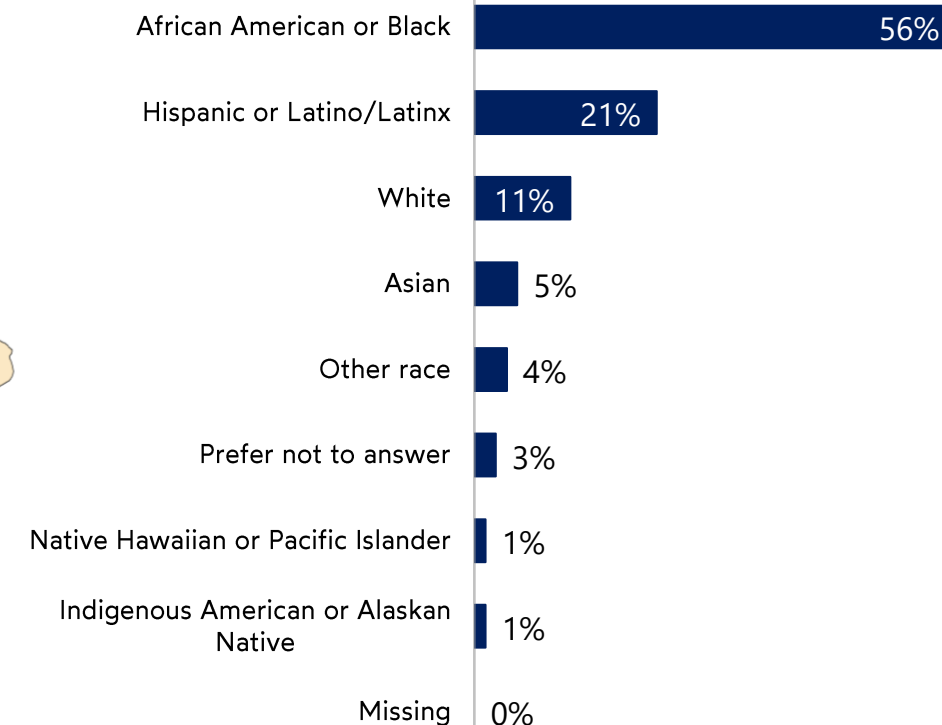
Gender (Select all that apply)



Where respondents live (by zip code)



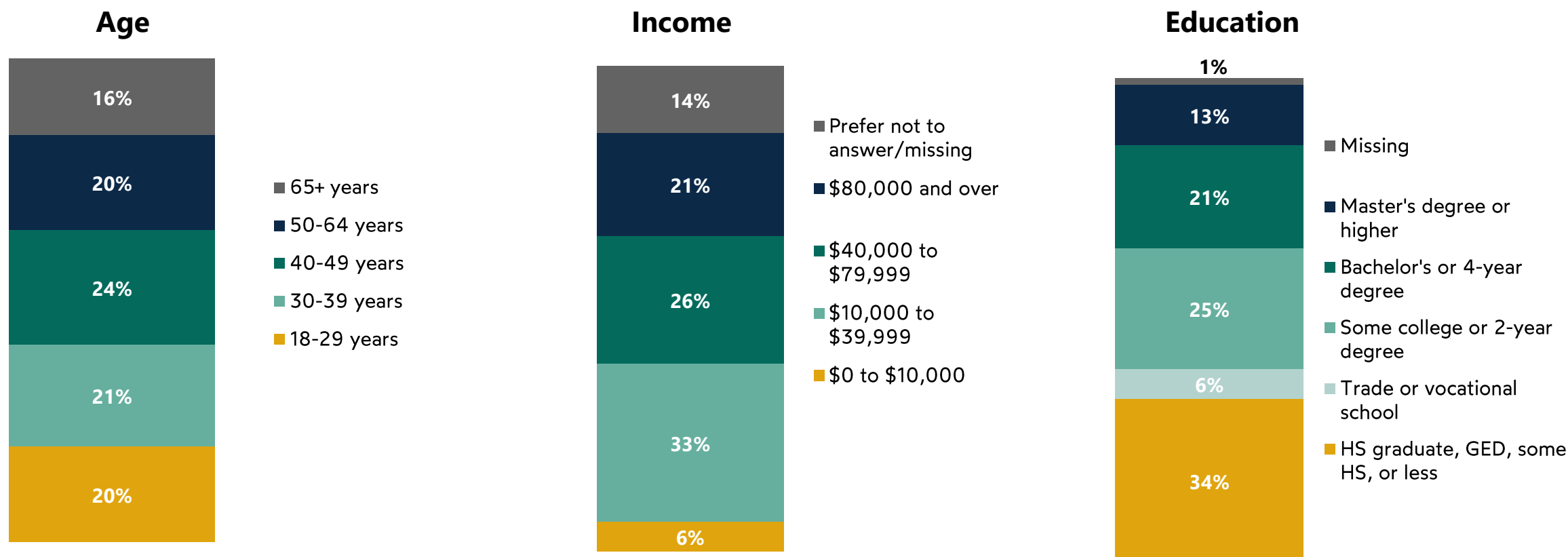
Race/ethnicity (Select all that apply)



From July & August data

Who are the vaccinated respondents? ($n = 80$)

Vaccinated respondents are distributed across age groups roughly evenly, with a slightly more ages **40–49 (24%)** and slightly fewer ages **65 and older (16%)**. About one-third have an **income of \$10k–\$39,999 (33%)** and have a **high school diploma/GED or less (34%)**.



From July & August data

Among vaccinated respondents ($n = 80$)

ACCESS



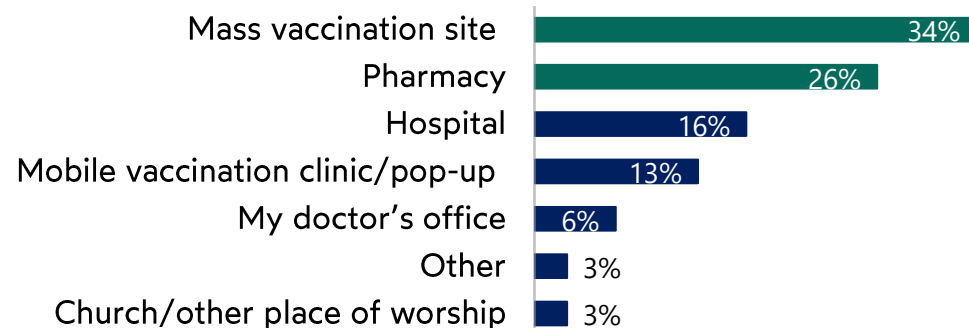
It took **40% of respondents 11–20 minutes to get to** get to the location where they received the vaccine. It took **30% of respondents less time** and **29% more time** to get to the vaccine location.



Many respondents **found it very easy (65%)** to make a vaccine appointment. About **15% found it somewhat or very difficult**.



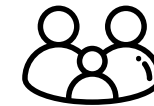
Many respondents got the vaccine at a **mass vaccination site (34%) or pharmacy (26%)**.



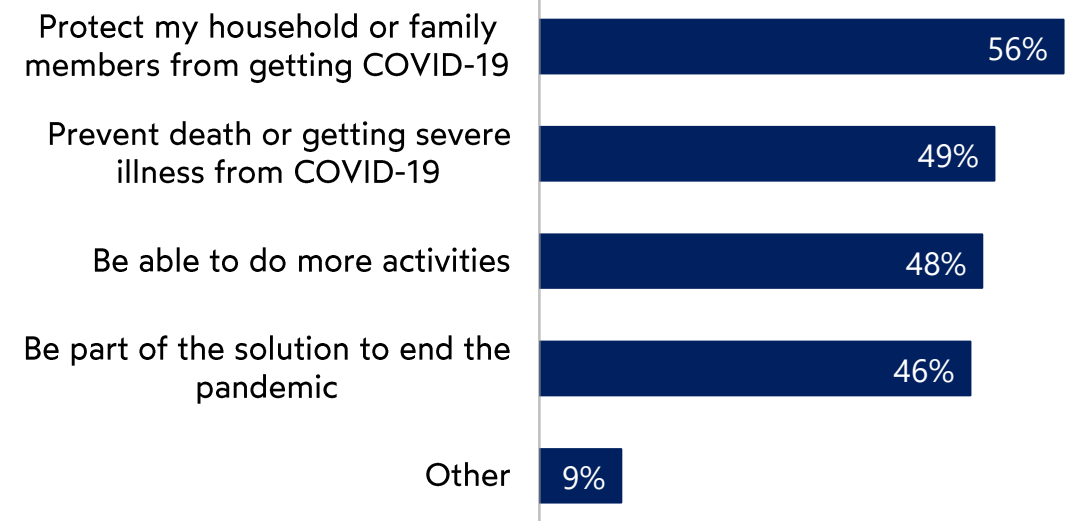
MESSENGERS AND MOTIVATORS



Respondents' doctors and health care providers (56%) and scientists (48%) were the most trusted sources of information about the COVID-19 vaccine.



Many vaccinated respondents were motivated by multiple reasons to get the vaccine:

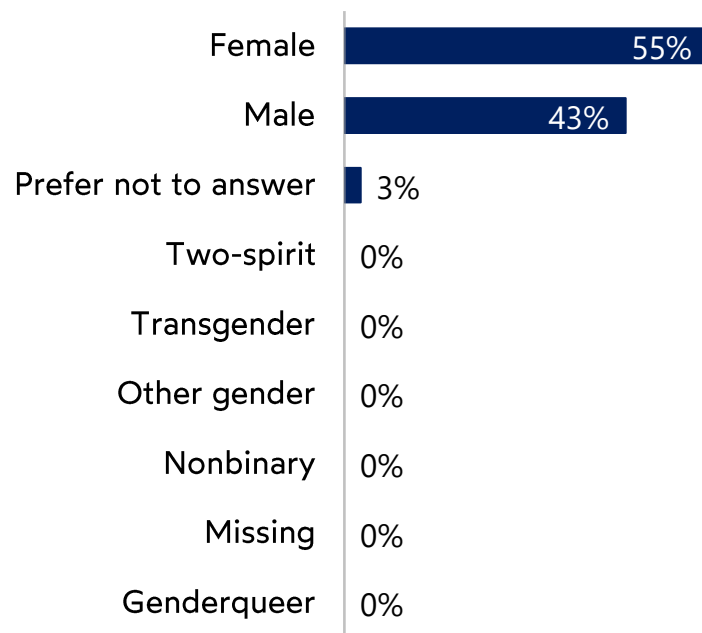


Who are the unvaccinated respondents? ($n = 40$)

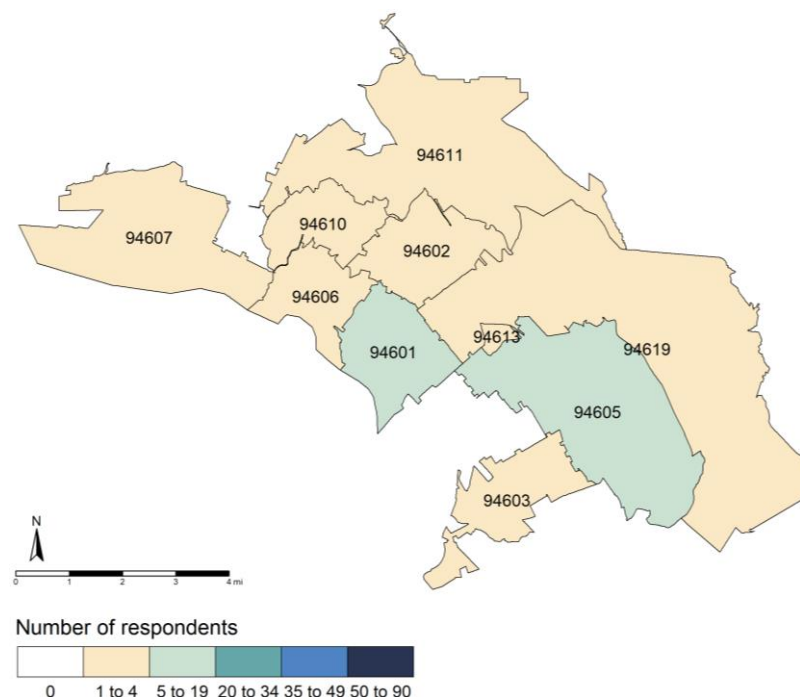
From July & August data

Over half the unvaccinated respondents were **female**, nearly **two-thirds** were **African American or Black**, and many were from **zip codes 94601 and 94605**.

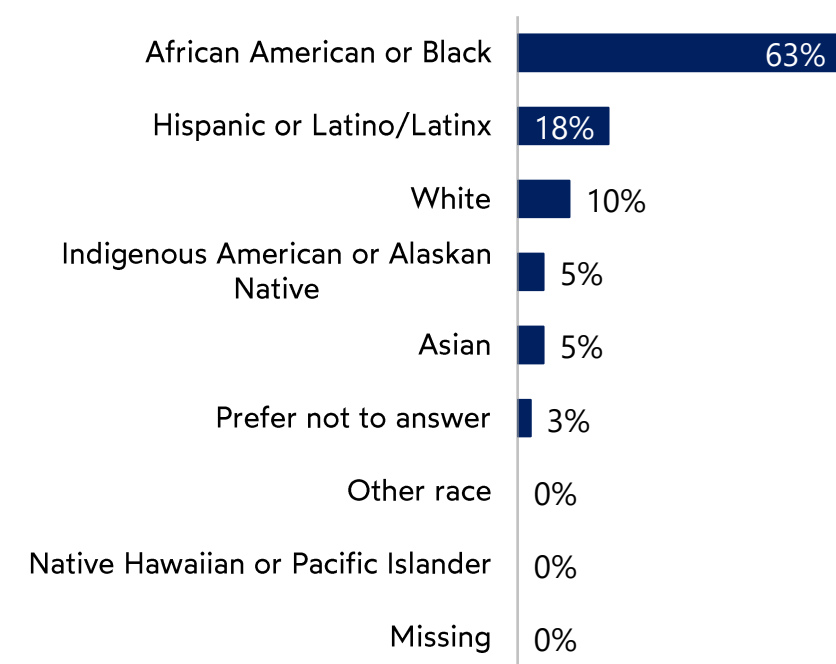
Gender (Select all that apply)



Where respondents live (by zip code)



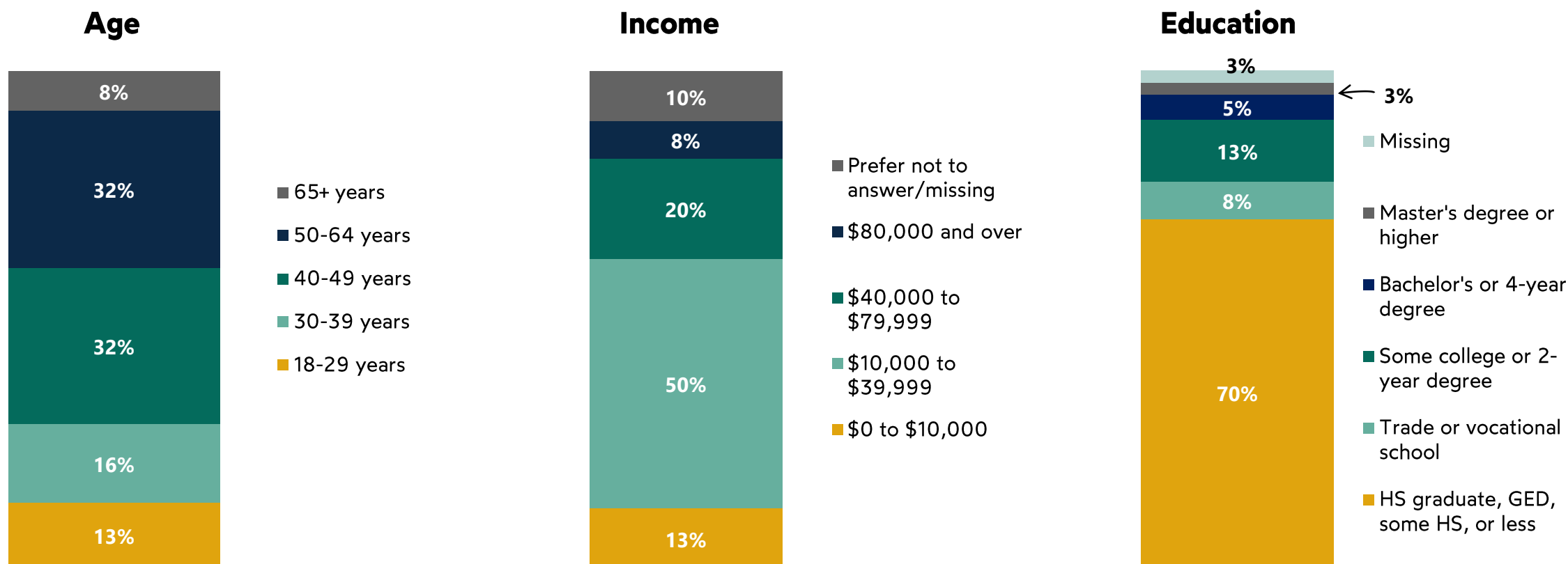
Race/ethnicity (Select all that apply)



Who are the unvaccinated respondents? ($n = 40$)

From July & August data

The largest share of unvaccinated respondents are ages **40–54 (64%)**, have an **income of \$10,000–\$39,999 (50%)**, and have a **high school diploma/GED, some high school experience, or less (70%)**.



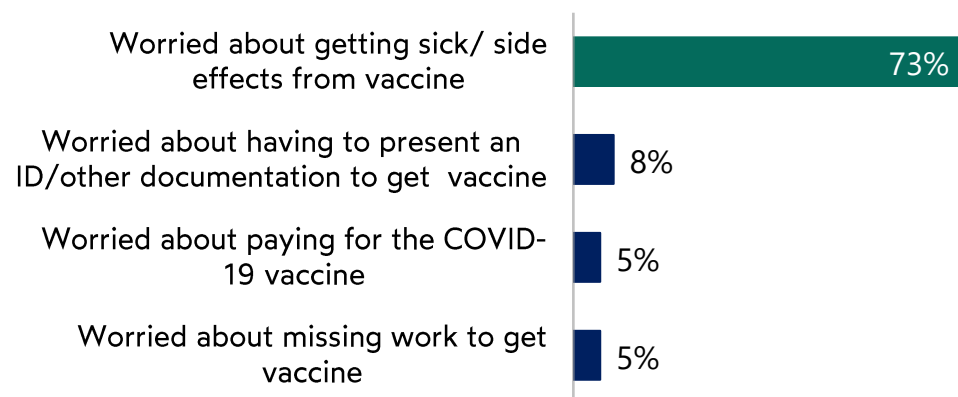
From July & August data

Among unvaccinated respondents ($n = 40$)

BARRIERS



Nearly three-quarters of the unvaccinated respondents are **worried about getting sick or experiencing side effects from the COVID-19 vaccine (73%)**.



ENABLERS



Most unvaccinated respondents **know how to get information about scheduling a COVID-19 vaccine in their community (83%)** and **where they can go to get a COVID-19 vaccine (80%)**.

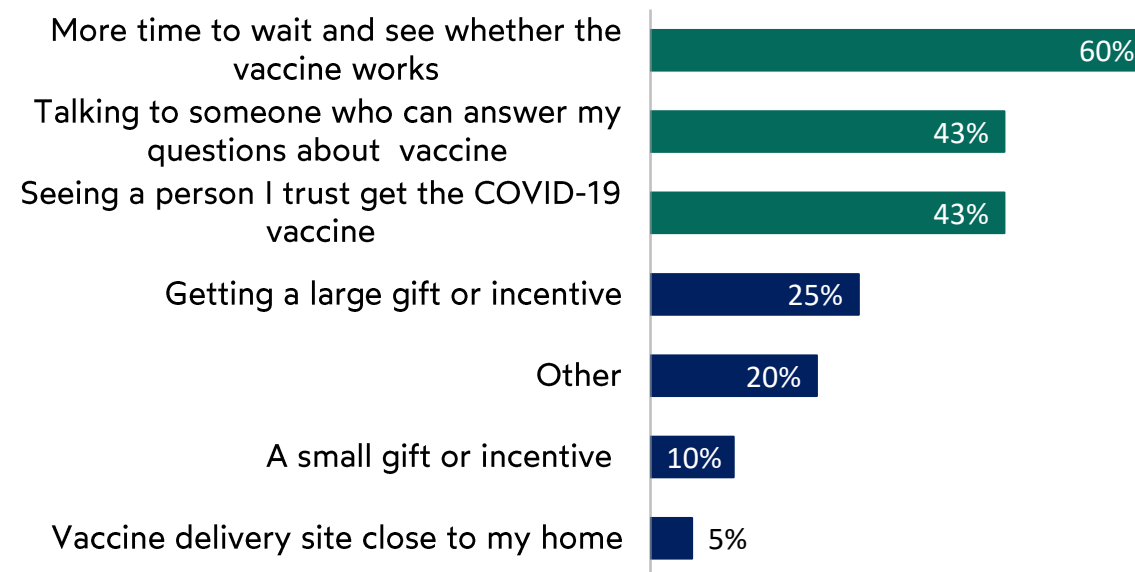
MOTIVATORS



Many unvaccinated respondents would prefer **more time to wait and see whether the vaccine works (60%)**.



Just under half of respondents (**43%**) noted that it would be **helpful to talk to someone who can answer their questions and see a person they trust get the vaccine**.



From July & August data

Among unvaccinated respondents ($n = 40$)

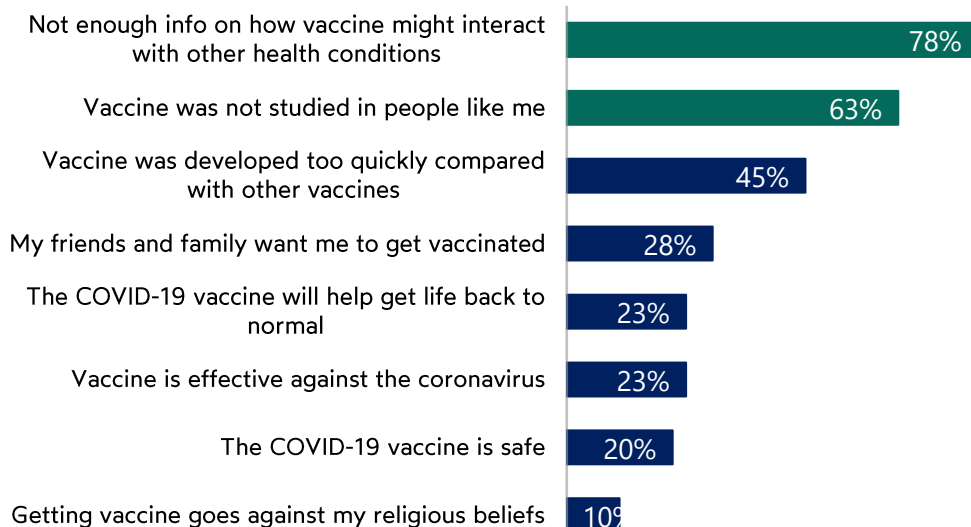
BELIEFS



Many of the respondents believe **there is not enough information on how the vaccine might interact with other health conditions (78%)**.

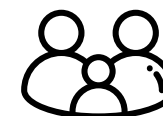


Over half of the respondents believe **the vaccine was not studied in people like them (63%)**.

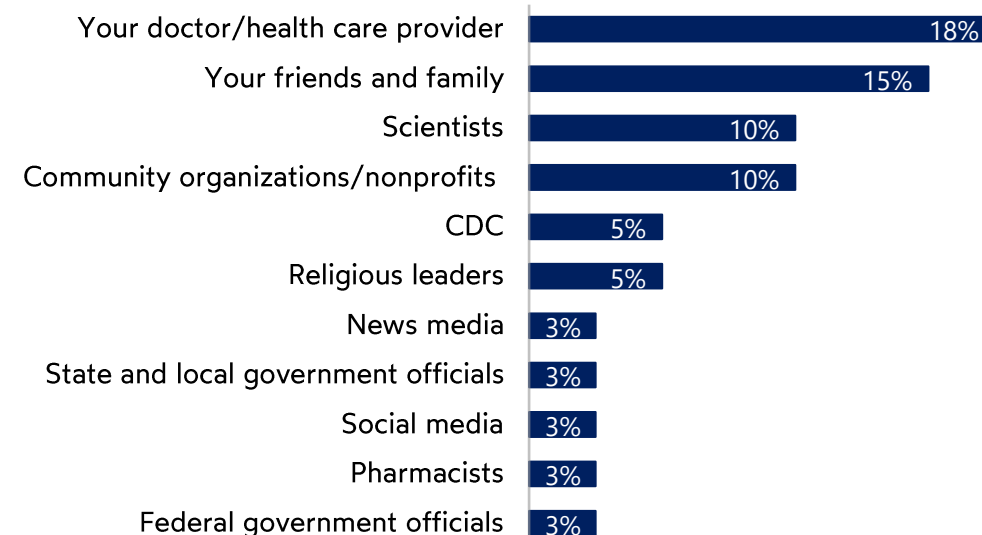


*Survey question 7

TRUSTED MESSENGERS



Unvaccinated respondents noted fairly low rates of trust in all the sources of information listed below. **The top two choices** that respondents noted they **“trusted a great deal”** were **their doctor or health care provider (18%)** and **their friends and family (15%)**.



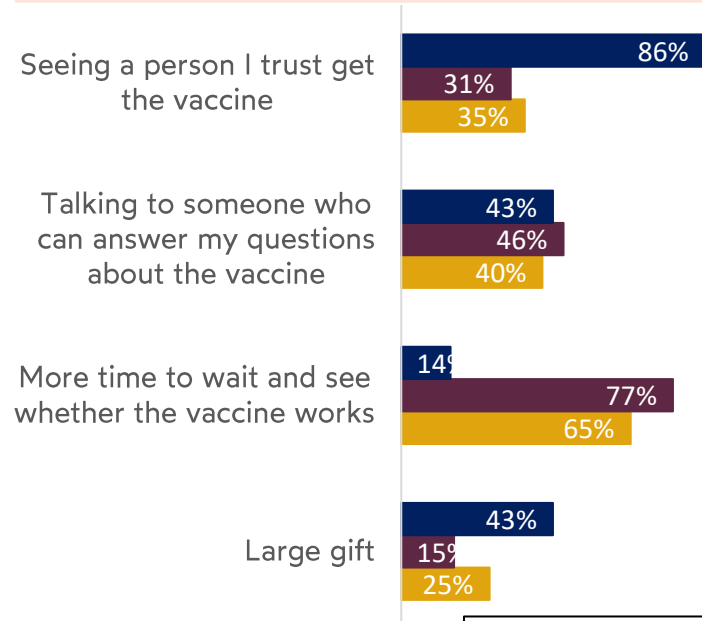
*Survey question 8

From July & August data

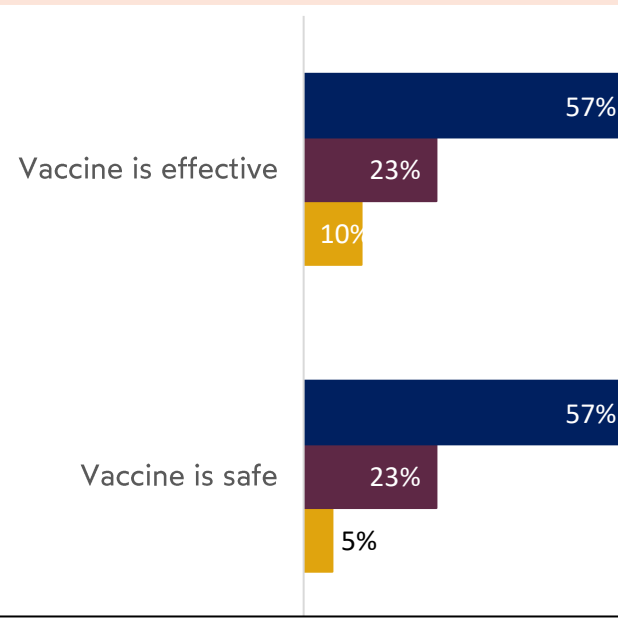
Differences between “types” of unvaccinated respondents

- The small group of **respondents who “intend to get the vaccine”** looks different from respondents who are **“undecided”** and **“do not intend to get vaccine.”**
- Most who “intend to” reported they would be motivated to receive the vaccine if they saw a person they trusted get the vaccine; more than half believe the vaccine is safe and effective; and they trust their doctors and health care providers and scientists the most for information about the vaccine.

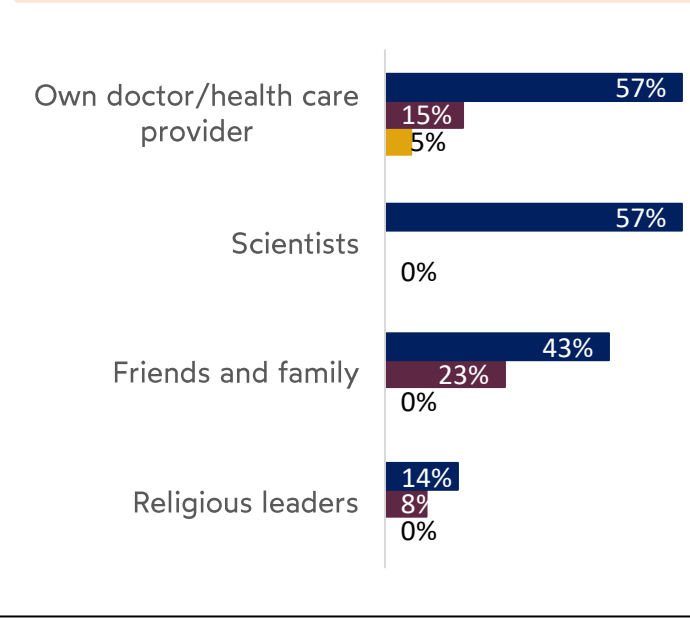
MOTIVATORS



BELIEFS



TRUSTED MESSENGERS



■ Intend to get vaccinated (n=7) ■ Undecided about vaccine (n=13) ■ Do not intend to get vaccine (n=20)

*Survey questions 6c, 7, and 8

Summary and potential actions

From July & August data

KEY TAKEAWAYS

ALL OAKLAND RESPONDENTS

- Trust their doctors and health care providers the most about vaccine information

UNVACCINATED RESPONDENTS OVERALL

- Are worried about getting sick and experiencing side effects
- Believe there is not enough information regarding the vaccine's interaction with other health conditions
- Would like more time to see whether vaccine works
- Believe that vaccine wasn't studied in people like them

POTENTIAL MESSAGING & OUTREACH STRATEGIES



Provide training/resources to local health care workers about **how to have compassionate conversations with their patients that are not vaccinated.**

Provide information that does the following:

- Emphasizes that you **cannot get COVID-19 from the vaccine**
- Details **how to manage side effects**
- Provides **resources and contact information** for those experiencing side effects
- Demonstrates the **vaccine's safety in the presence of other health conditions**
- Shows how the vaccine **works to prevent severe illness**



Develop communication materials and encourage conversations that highlight how **the clinical trials for the COVID-19 vaccines included underrepresented minorities, older age groups, and people with other health conditions, such as diabetes, obesity, and heart and respiratory conditions.**

Oakland supplemental slides

- Survey respondent demographics vs. city BIPOC demographics
- All figures for questions analyzed

From July & August data

Survey respondent demographics vs. Oakland BIPOC demographics

Vaccination status (at least one dose): Oakland vs. Survey Sample (n = 120)

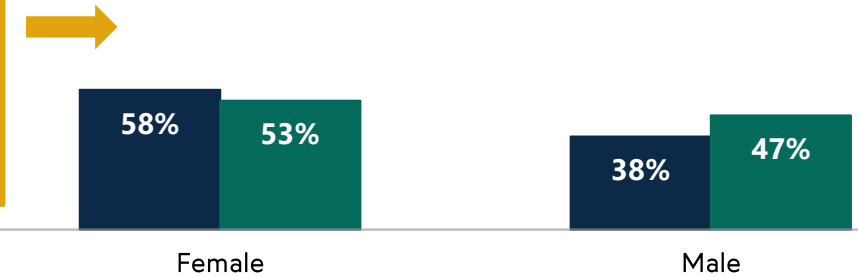
Survey sample has lower vaccination rates than the Oakland population.



■ Survey Sample ■ Alameda County COVID-19 Vaccination Dashboard*

Gender: Oakland vs. Survey Sample (n = 120)

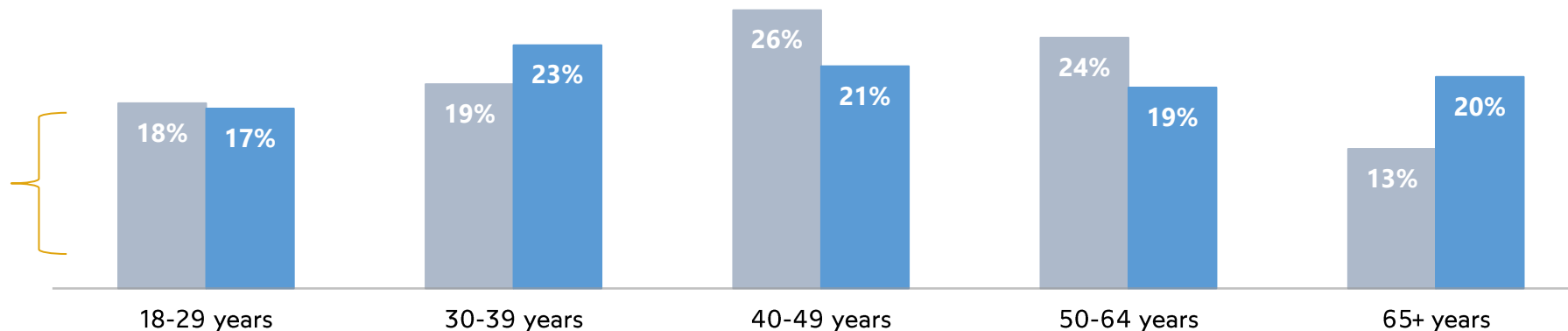
Survey sample has slightly more males than the Oakland BIPOC population.



■ Survey Sample ■ Oakland BIPOC census, 2019 ACS microdata

Age: Oakland vs. Survey Sample (n = 120)

Survey sample is fairly similar in age to the Oakland BIPOC population.



■ Survey Sample ■ Oakland BIPOC census, 2019 ACS microdata

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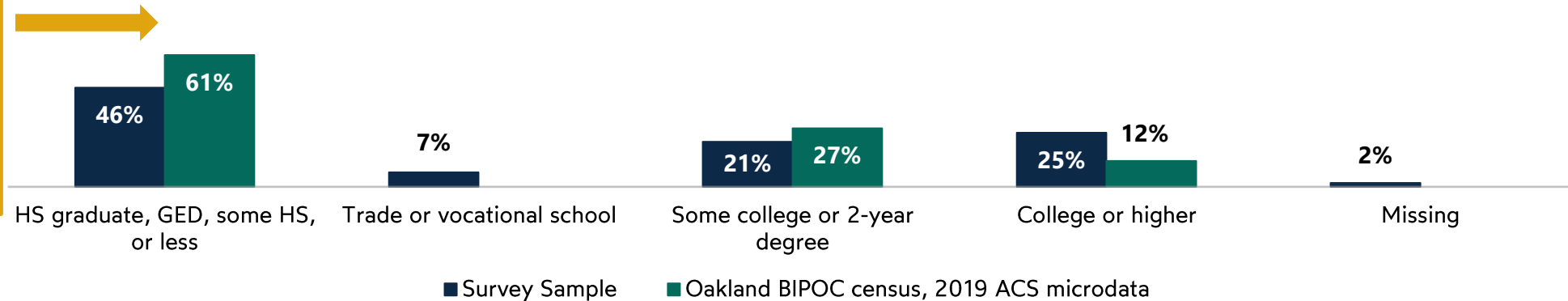
OAKLAND

From July & August data

Survey respondent demographics vs. Oakland BIPOC demographics

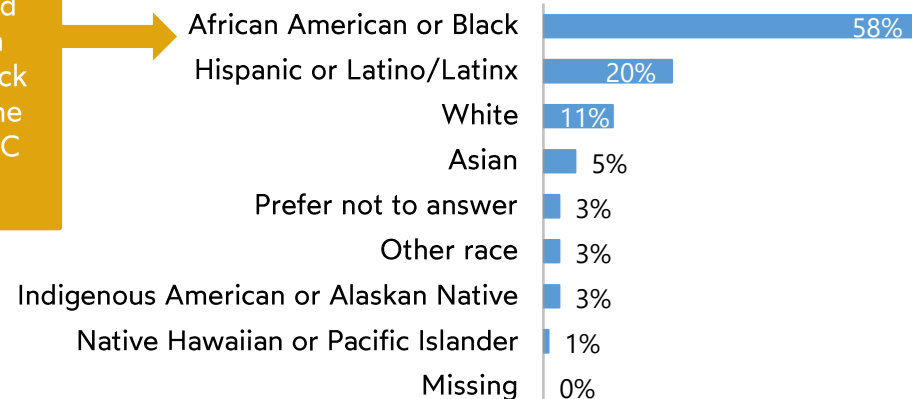
Education: Oakland vs. Survey Sample (n = 120)

Compared with the Oakland BIPOC population, the survey sample had more respondents who had a college or higher degree and fewer respondents with a high school diploma or less.

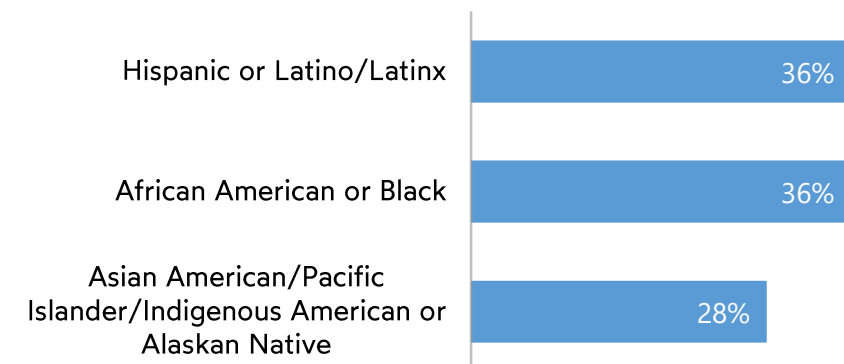


The survey population had more African American/ Black people than the Oakland BIPOC population.

Survey sample race/ethnicity (n = 120)



Oakland BIPOC census, 2019 ACS microdata BIPOC race/ethnicity



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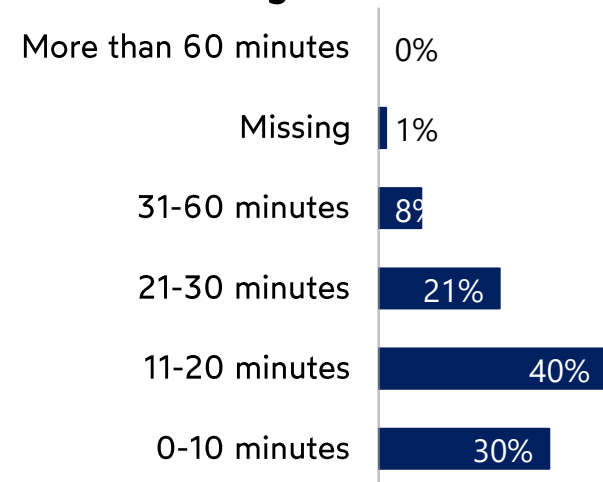
NEWARK

OAKLAND

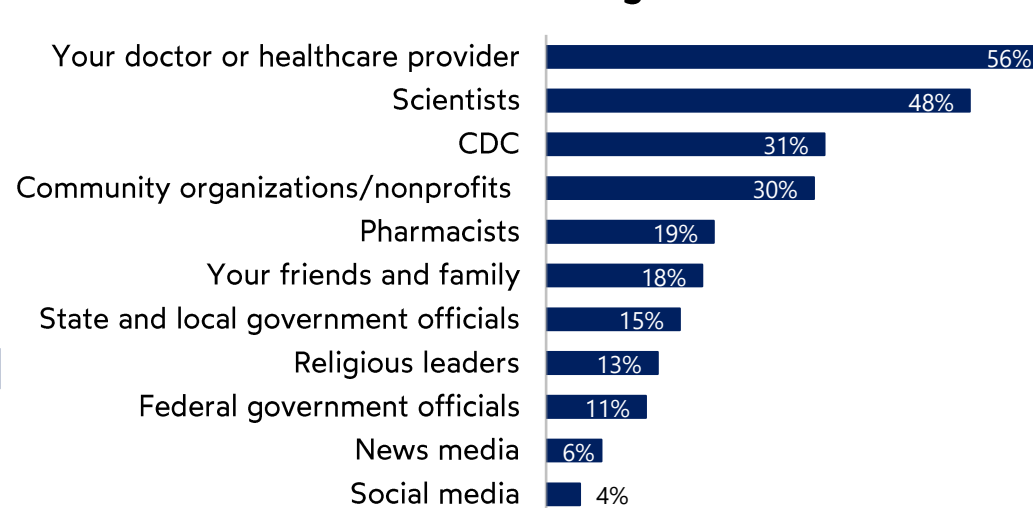
From July & August data

Among vaccinated respondents (n = 80)

Time taken to get vaccinated



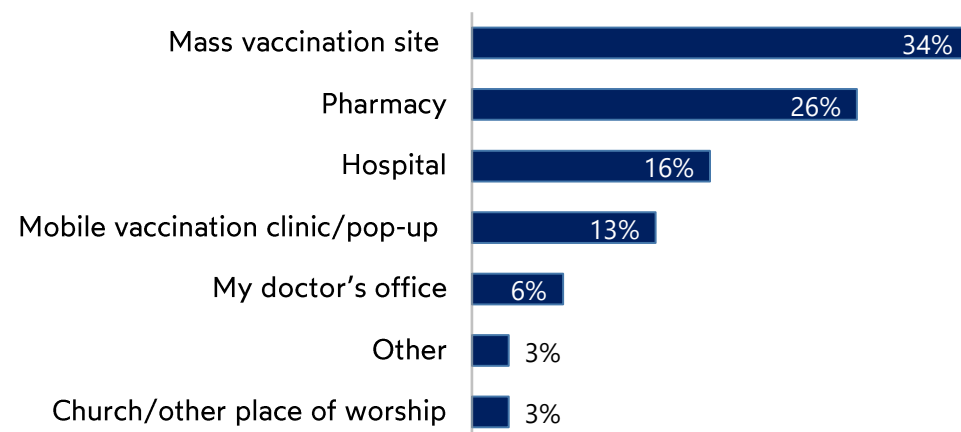
Trusted messengers



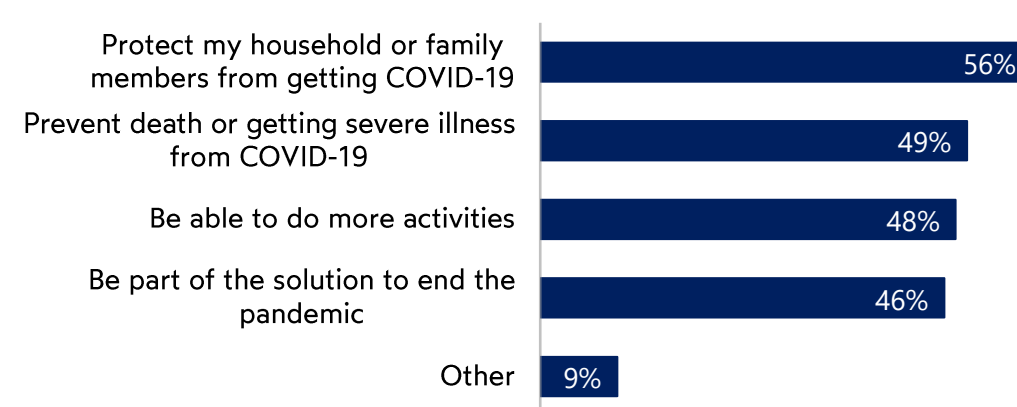
Ease of getting an appointment



Location of appointment



Reason for becoming vaccinated



BALTIMORE

CHICAGO

HOUSTON

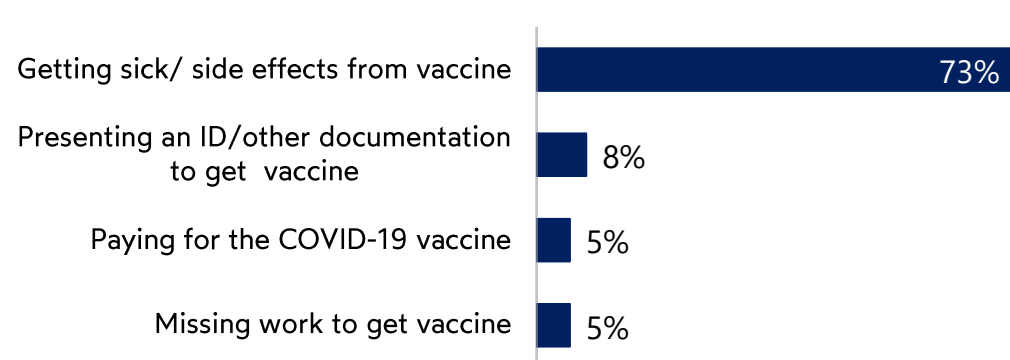
NEWARK

OAKLAND

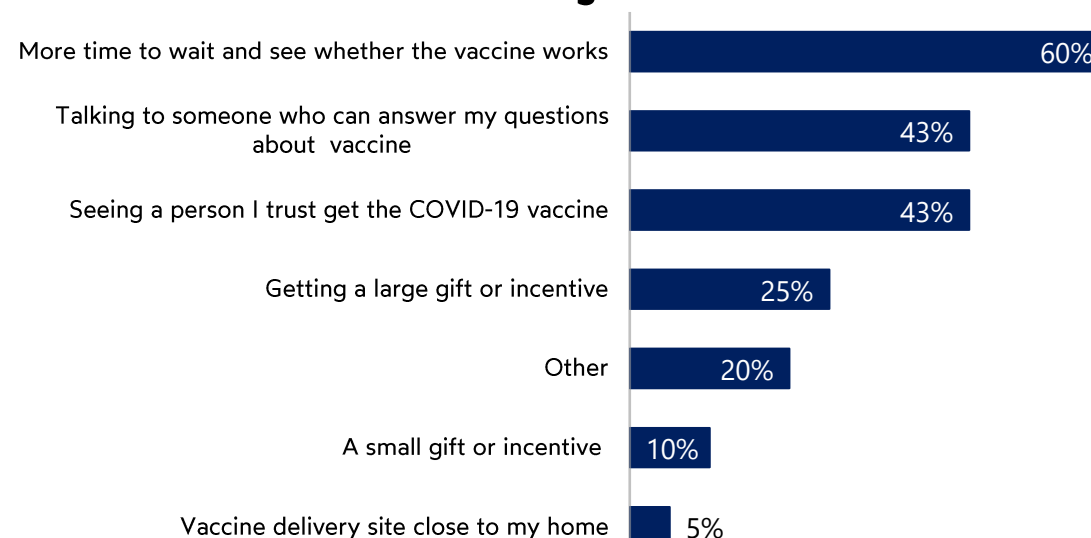
Among unvaccinated respondents (n = 40)

From July & August data

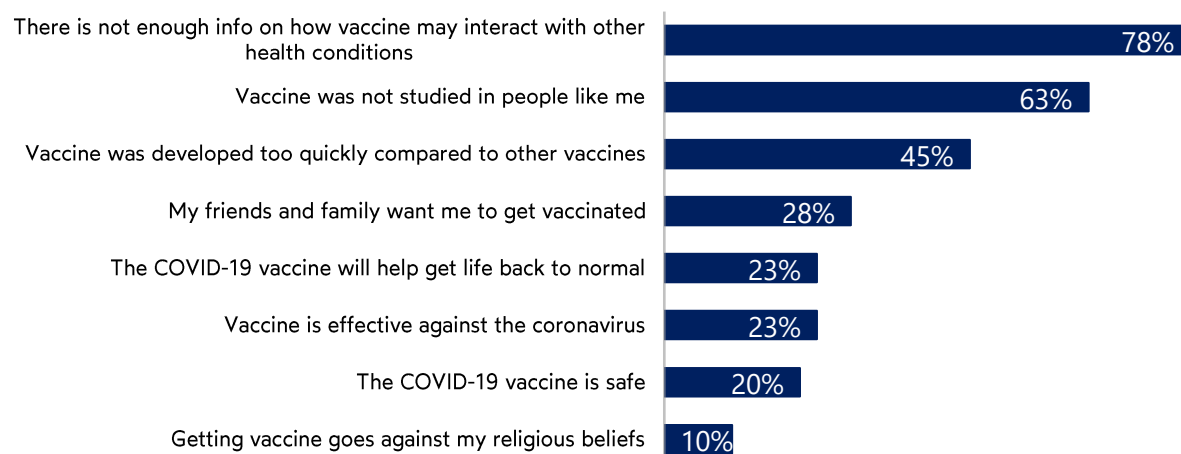
Respondents worry about:



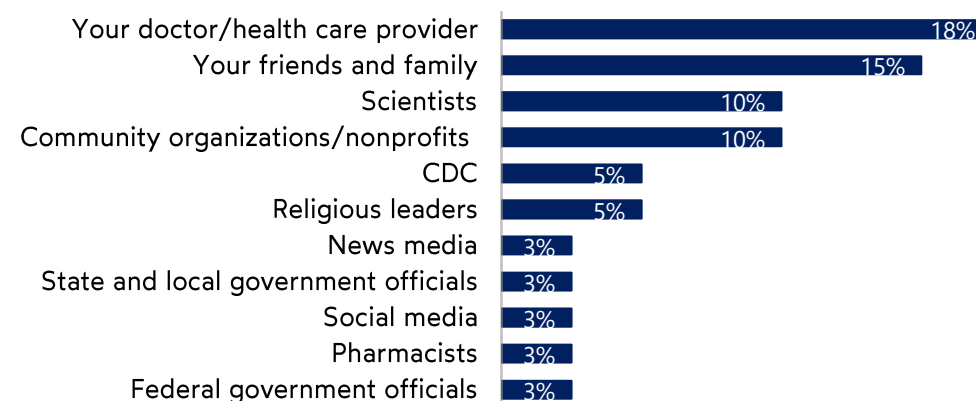
Motivators to get the vaccine



Respondents believe that:



Trusted messengers



Contact Information

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