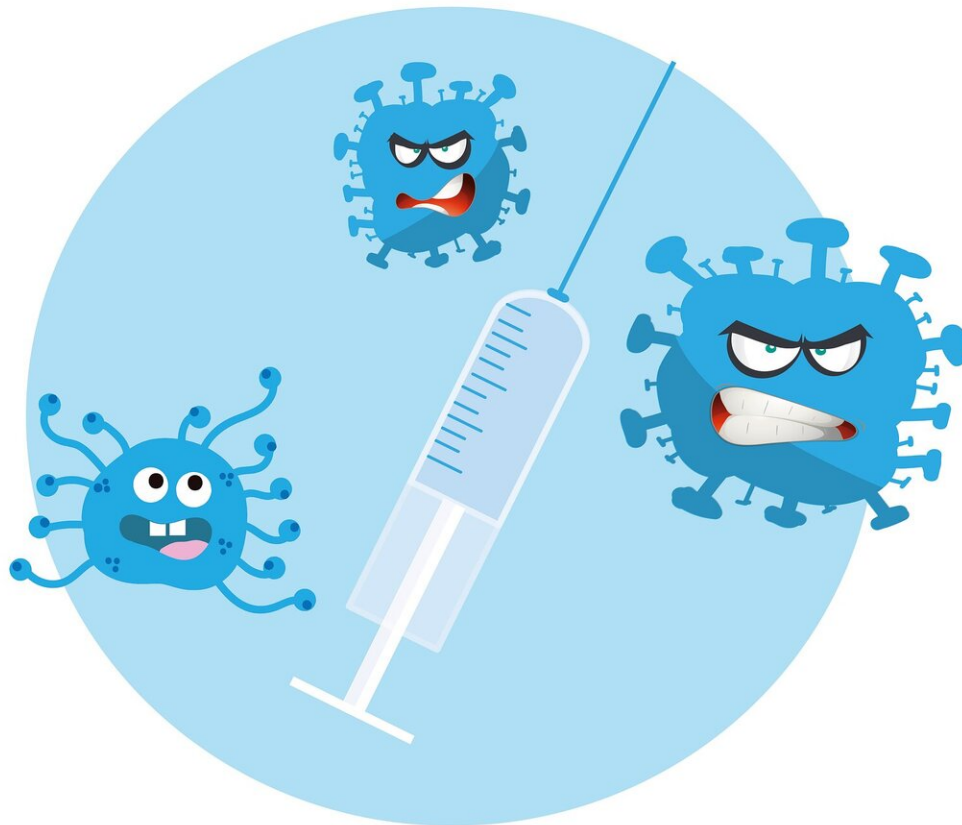


Study finds more than half of respondents are unlikely to get COVID-19 vaccine under emergency use authorization

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The first COVID-19 vaccine has received emergency use authorization. Yet a key question remains: Will U.S. adults be willing to get it?

A new study led by a Virginia Commonwealth University professor is among the first to examine the psychological and social predictors of U.S. adults' willingness to get a future COVID-19 [vaccine](#) and whether these predictors differ under an emergency use authorization release of the vaccine.

The study, "Willingness to Get the COVID-19 Vaccine with and without Emergency Use Authorization," will be published in the *American Journal of Infection Control*. It involved a survey of 788 U.S. adults, and found that 59.9% of respondents were definitely or probably planning to receive a future coronavirus vaccine, while 18.8% were neutral and 21.3% were probably or definitely not planning to get it.

When asked if they would get the vaccine under an emergency use authorization, 46.9% of respondents said they were definitely, likely, or somewhat willing to do so; while 53.1% said they were definitely, likely, or somewhat unwilling to do so.

"The biggest issue coming out of this study is that participants seemed worried about receiving the COVID-19 vaccine under emergency use authorization," said lead author Jeanine Guidry, Ph.D., an assistant professor in the Richard T. Robertson School of Media and Culture in the College of Humanities and Sciences and director of the Media+Health Lab at VCU.

The study found that concerns about side effects were a significant barrier, Guidry noted.

"[Such concerns are] not unusual," she said, "but we now also know that two of the vaccines—Pfizer and Moderna—may have some expected

side effects ... [and that] may make people hesitate to get the vaccine."

The study also found troubling disparities among demographic groups. For example, younger respondents were more likely than older respondents to express a willingness to get the vaccine. And it found that white respondents were more likely than Black respondents to be willing to get the vaccine, either under emergency use authorization or regular Food and Drug Administration approval.

"That is something researchers have found in other previous vaccine studies as well, but it is more worrying with COVID-19 because we know that Black Americans are infected with COVID-19 significantly more frequently than white Americans, and they are also more likely to die from the virus," Guidry said.

"Unfortunately, there is history of medical mistreatment of African Americans and individuals from low-income communities in the U.S.," said co-author Bernard Fuemmeler, Ph.D., a professor in the Department of Health Behavior and Policy in the VCU School of Medicine.

"Against this backdrop it is understandable that mistrust among certain communities will be an issue to contend with as we hope to make progress in delivering the vaccine to those most in need," Fuemmeler said. "It starts with recognizing this history and providing people with the information they desire to alleviate their justifiable wariness about the vaccine."

The researchers found that significant predictors of a willingness to get the [coronavirus](#) vaccine included education level and having health insurance, as well as a high-perceived susceptibility to COVID-19. Predictors of a willingness to get the vaccine under an emergency use authorization included age and race/ethnicity.

The study's findings could help shape health communications and messaging as distribution of the vaccines begin across the country. It suggests that messages should address concerns about the COVID-19 vaccine and its development and reinforce its benefits. It also suggests that these efforts may need to go beyond just communications campaigns correcting misinformation about a vaccine to focusing on re-establishing [public trust](#) in government agencies and medicine.

"A vaccine is only effective if people are vaccinated, and so it is really crucial that people trust the vaccine, and are willing to get it," Guidry said. "We will only reach community-level immunity if about 70% of the population has gotten the vaccine. So knowing what some of the barriers are to getting this vaccine is really important, because we may be able to better communicate and address these concerns."

Guidry added that the study reflects significant concerns and misunderstandings that must be addressed in the months ahead.

"[It is] a reminder that there are some real fears among the public about the vaccine being developed too quickly," she said. "In reality, while this particular vaccine was developed rather quickly, the science that has allowed for this to occur has been progressing for the past 10 years. I think we need to make sure people better understand the vaccine development process, and what exactly it means when a vaccine becomes available under emergency use authorization."

More information: Jeanine P.D. Guidry et al, Willingness to get the COVID-19 vaccine with and without emergency use authorization, *American Journal of Infection Control* (2020). [DOI: 10.1016/j.ajic.2020.11.018](https://doi.org/10.1016/j.ajic.2020.11.018)

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