

Dispel myths and build trust to combat vaccine hesitancy among ethnic minority health workers

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Addressing misinformation, using more inclusive communication, and promoting vaccination through trusted networks, could play important roles in reducing the high rates of vaccine hesitancy among ethnic

minority healthcare workers, finds a new study involving UCL researchers.

In the study, carried out with the University of Leicester and University of Nottingham, 11,584 UK clinical and non-clinical [healthcare](#) workers were surveyed, with almost a quarter (23%, 2,704) reporting vaccine hesitancy.

The findings, published on the pre-print server medRxiv, show that COVID-19 vaccine hesitancy was more common among healthcare workers of Black Caribbean (54.2%), Mixed White and Black Caribbean (38.1%), Black African (34.4%), Chinese (33.1), Pakistani (30.4%) and White Other (28.7%) ethnic groups compared to those of White British ethnicity (21.3% hesitant).

Figures were also higher amongst younger people, pregnant women, those who had not taken up the [flu vaccine](#) and those who had previously tested positive for COVID-19.

Lead author, Dr. Katherine Woolf, Associate Professor at UCL Medical School, said: "We urgently need strategies to build trust and dispel myths surrounding the COVID-19 vaccine, particularly within communities where there are greater levels of hesitancy.

"Public health communications should be inclusive, non-stigmatizing and use trusted networks."

The study was undertaken as part of the £2.1m UK-REACH study, led by the University of Leicester, seeking to understand the impact of COVID-19 on ethnic minority healthcare workers.

Dr. Manish Pareek, Associate Clinical Professor in Infectious Diseases at the University of Leicester and Chief Investigator on the study said:

"Healthcare workers are a priority group for vaccination against COVID-19 as they have a higher risk of being exposed to the virus.

"This is the largest study of COVID-19 vaccine attitudes in a multi-ethnic sample of UK healthcare workers at the start of a vaccine roll-out. The combination of quantitative and qualitative data provides an in-depth understanding of hesitancy among different [ethnic groups](#)."

Dr. Laura Nellums, Assistant Professor in Global Health, Faculty of Medicine & Health Sciences at the University of Nottingham said: "It is important to understand the concerns driving [vaccine hesitancy](#) in order to effectively address them, provide reassurance, and build trust.

"The research demonstrates that addressing hesitancy will require tackling mistrust and misinformation through meaningful involvement of healthcare workers from diverse ethnic backgrounds."

Some of the key concerns around the COVID-19 vaccine raised by participants in the study included how safe the vaccine was due to the speed of development, and the lack of ethnic diversity in vaccine studies.

Participants felt the delivery of vaccines to ethnic minority communities might be improved through more inclusive communication, involving healthcare workers in the [vaccine](#) rollout and promoting vaccination through trusted networks.

In addition, the study's findings highlighted how tackling misinformation relating to COVID-19 was important—even amongst healthcare workers—and interventions aimed at addressing this may facilitate delivery of vaccinations to this group and the population at large.

The UK-Reach study is the largest and most comprehensive research project assessing the risk of COVID-19 for 18,000 clinical and non-

clinical staff. It was launched after growing evidence showed how people from ethnic minority backgrounds had double the risk of severe COVID-19 infection compared to that of the White population.

More information: Katherine Woolf et al. Ethnic differences in SARS-CoV-2 vaccine hesitancy in United Kingdom healthcare workers: Results from the UK-REACH prospective nationwide cohort study, *medRxiv* (2021). [DOI: 10.1101/2021.04.26.21255788](https://doi.org/10.1101/2021.04.26.21255788)

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