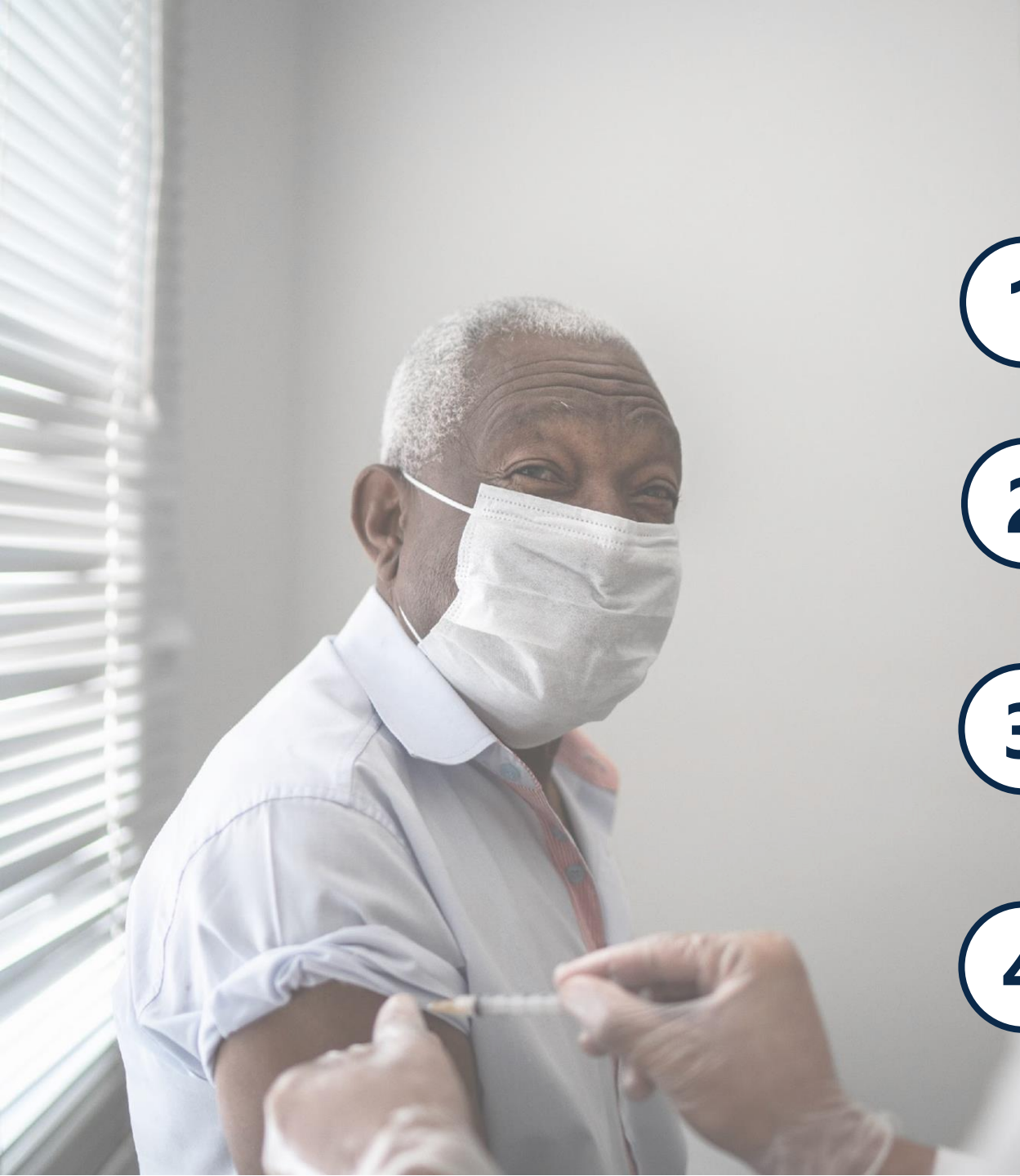


# Equity-First Vaccination Initiative

## Covid-19 Vaccination Pulse Survey Insights

Report on data from September 2021  
(Houston and Newark only)





# 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.”*

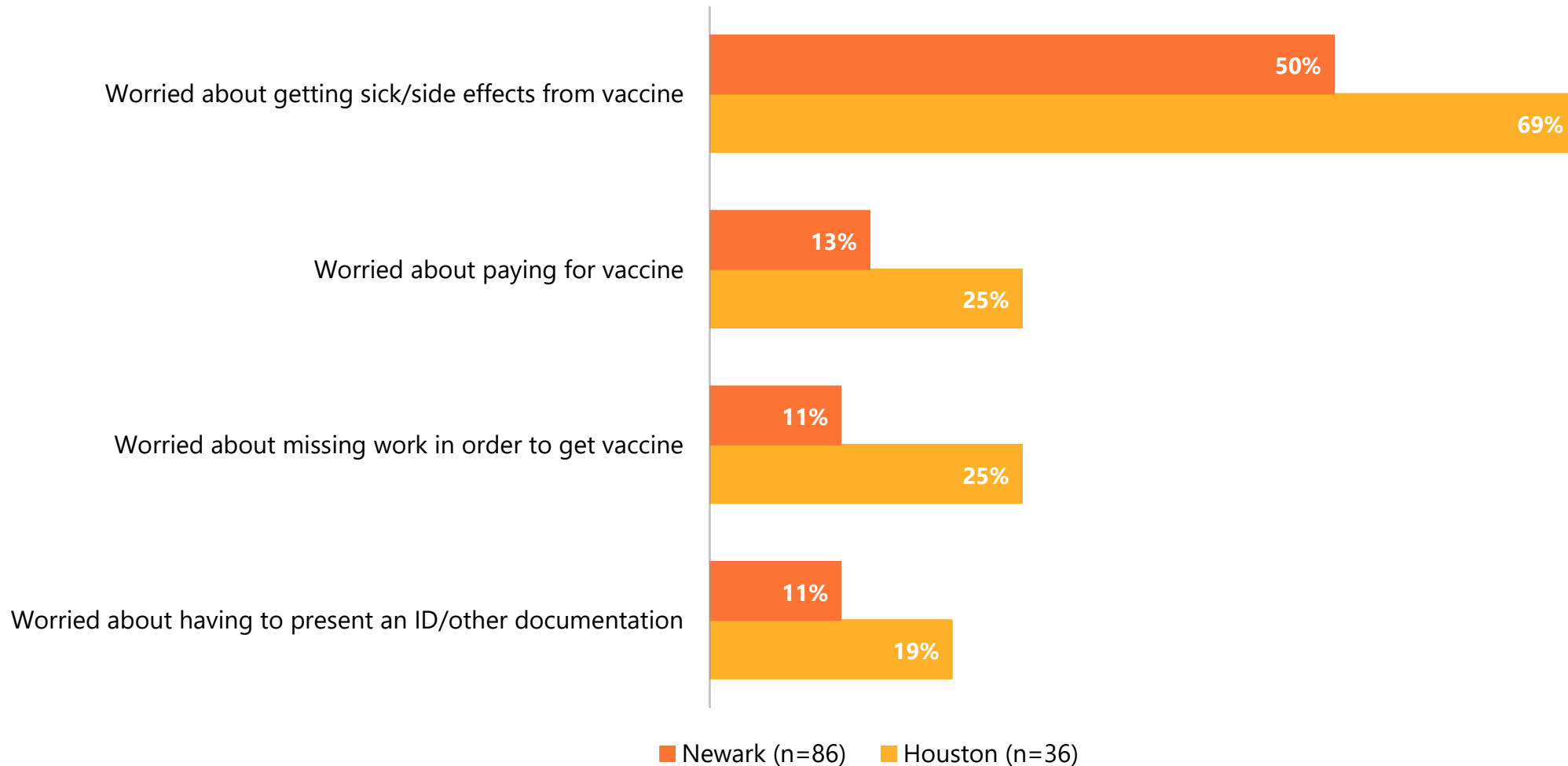
# Survey insights: Cross-site

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

# Top concerns serving as barriers for unvaccinated respondents

From September data

Across both cities, 50% or more unvaccinated respondents were **worried about getting sick or experiencing side effects** from the vaccine. Sites may want to collaborate with each other on messaging/strategies related to this barrier.



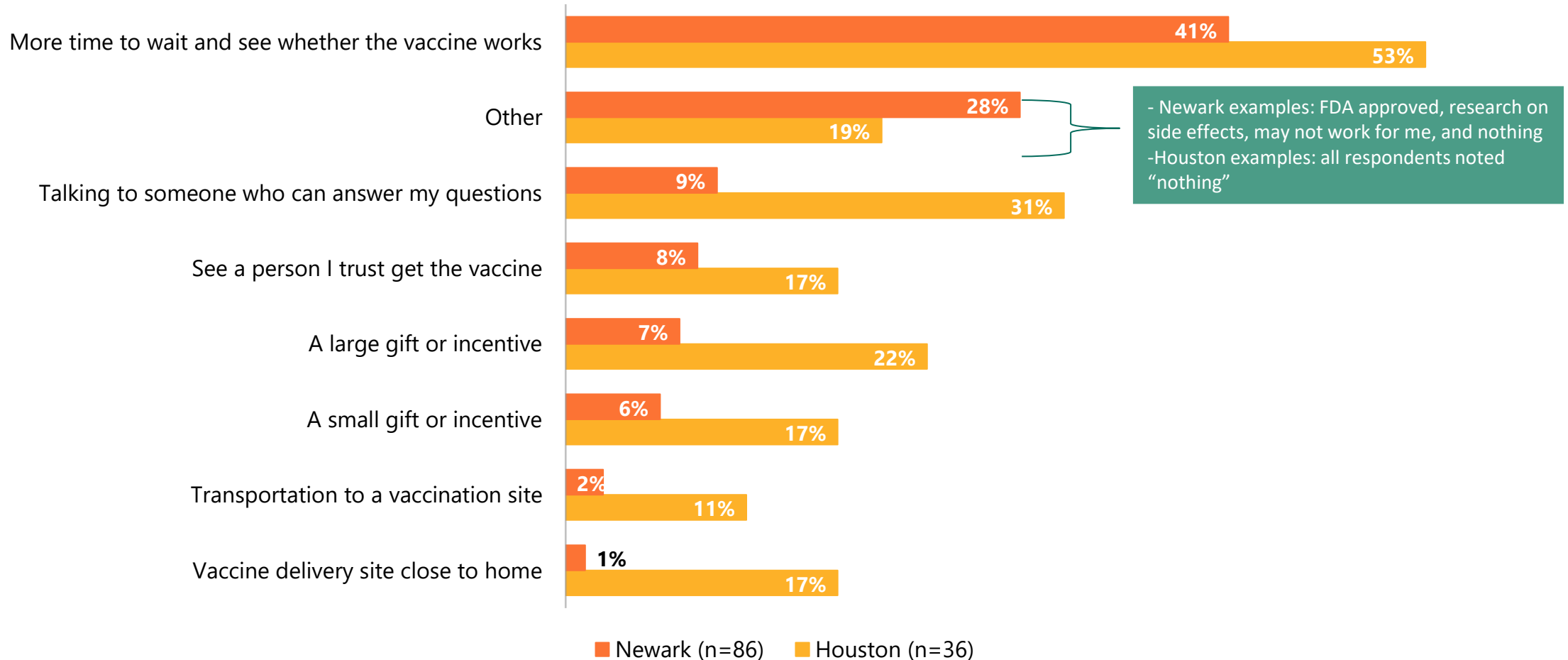
\*Survey question 6b



# Top potential motivators for unvaccinated respondents

From September data

A large share of the unvaccinated respondents for both cities noted that **more time to wait and see if the vaccine works** would be a motivator. Sites may want to collaborate with each other on messaging/strategies related to this topic, such as potentially putting together a focus group to understand what "more time" means.



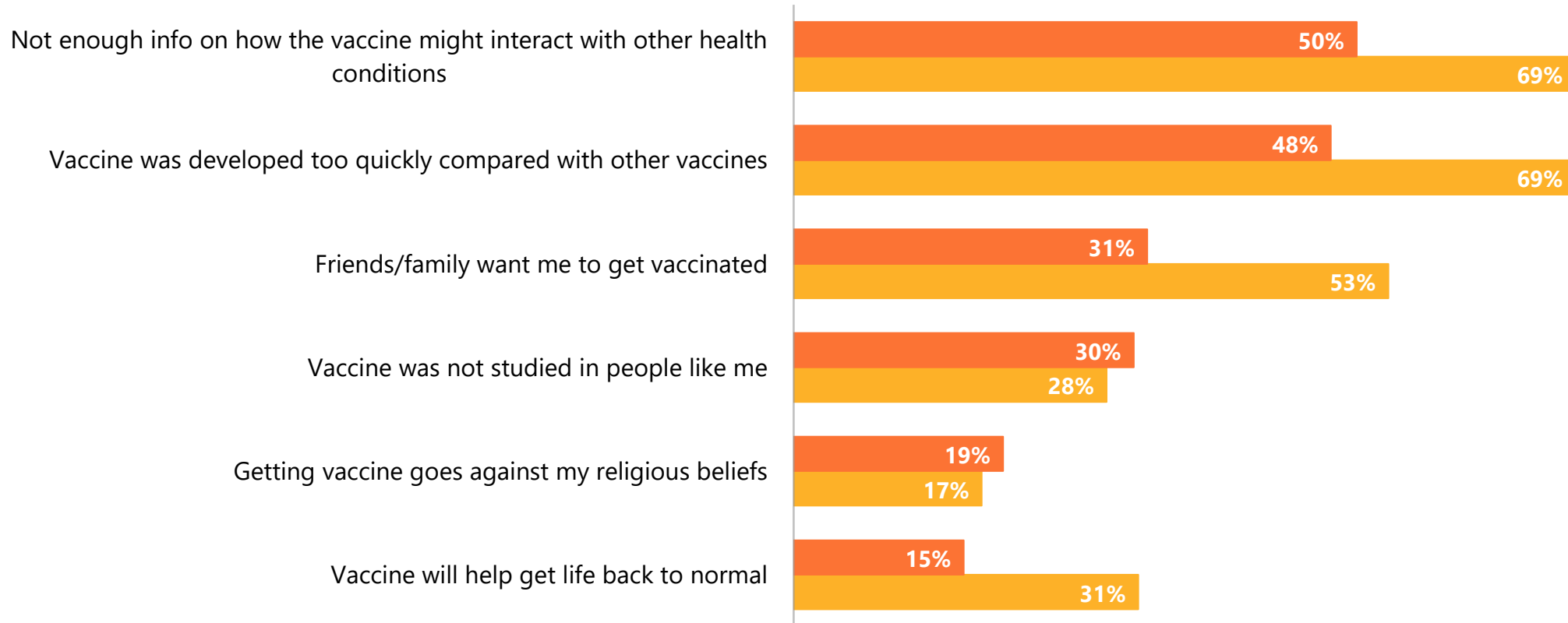
\*Survey question 6c



# Top beliefs reported by unvaccinated respondents

From September data

Across both cities, a large share of unvaccinated respondents were concerned that there is **not enough information on how the vaccine may interact with other health conditions** and that **the vaccine was developed too quickly compared to other vaccines**. Sites may want to collaborate with each other on messaging/strategies related to these topics.



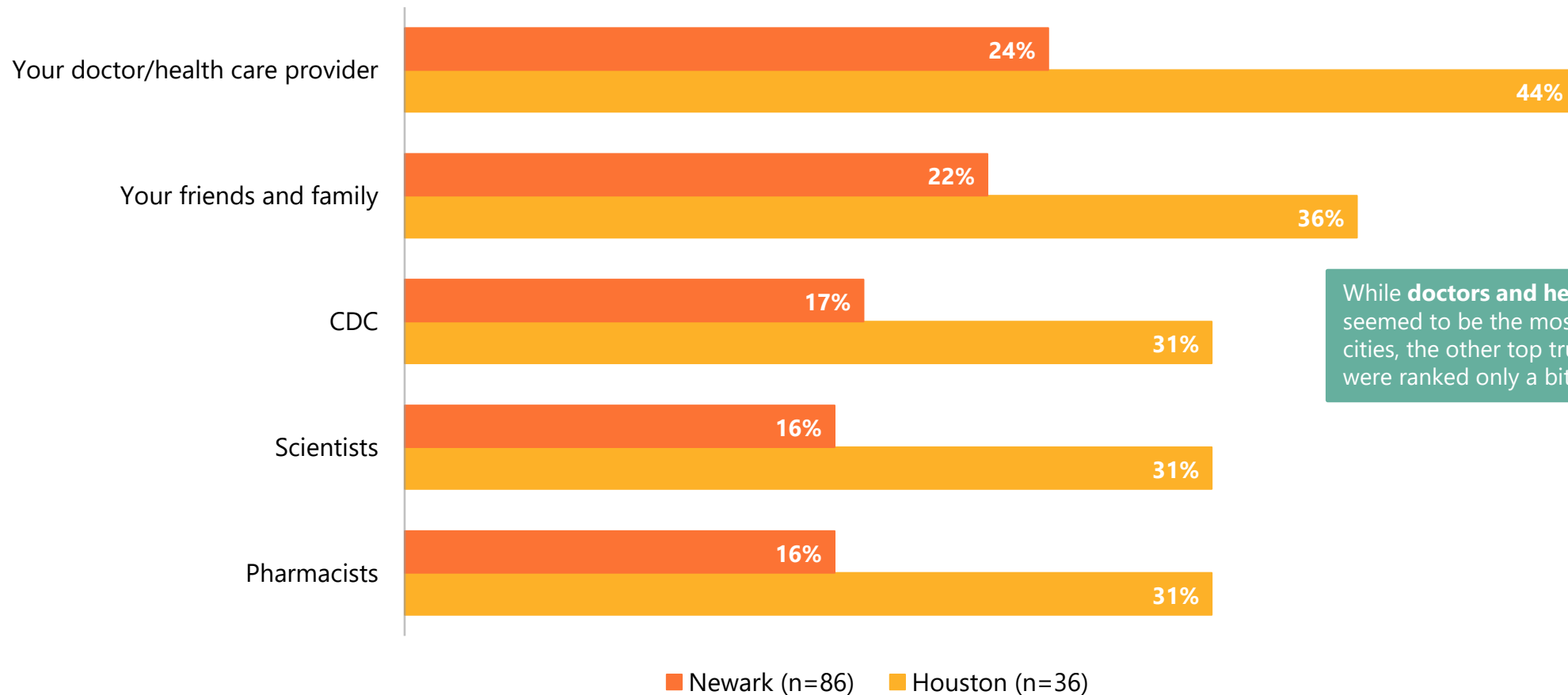
■ Newark (n=86) ■ Houston (n=36)

\*Survey question 7

# Top trusted messengers reported by unvaccinated respondents

From September data

Overall, among the listed sources, there were no clear trusted messengers among the unvaccinated groups.



While **doctors and health care providers** seemed to be the most trusted for both cities, the other top trusted messengers were ranked only a bit lower.

\*Survey question 7

# 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
- Key trends over time
- 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**

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 use tablets to capture respondents' answers in their door-to-door canvassing efforts. They are using census block groups to determine which neighborhoods to reach out to.**

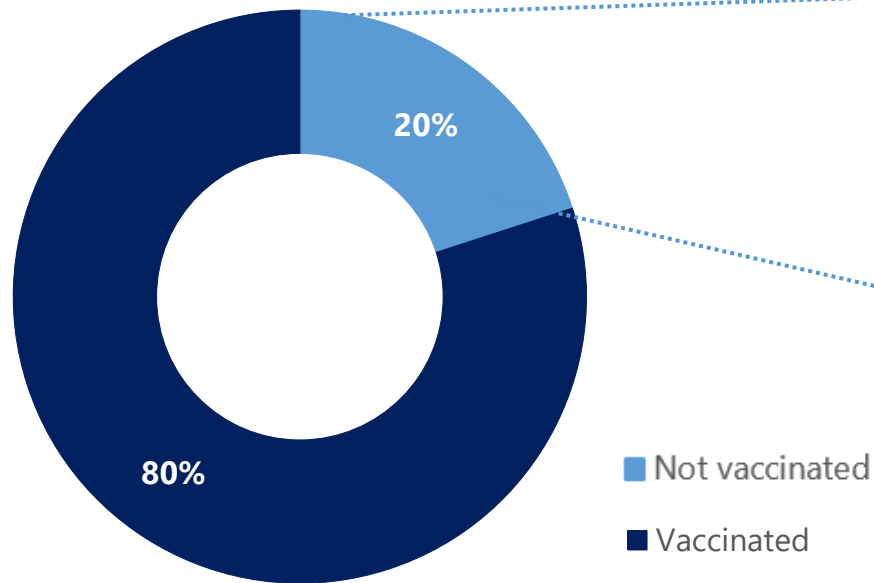
TTB is a canvassing and outreach organization that focuses on reaching out to Houston residents to encourage political and civic engagement

From September data

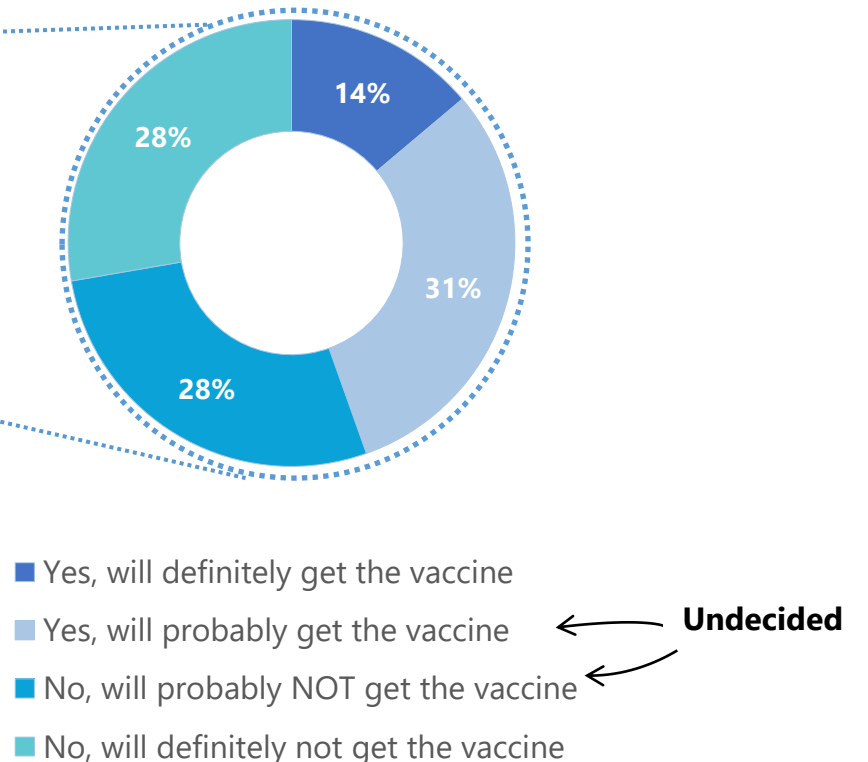
# Vaccination status and intention (n=183)

Most of the sampled population is vaccinated (80%). Among the respondents who are not yet vaccinated, **59% are undecided** and **14% intend to get the vaccine.**

Surveyed population in Houston



Among the 20% who are not vaccinated

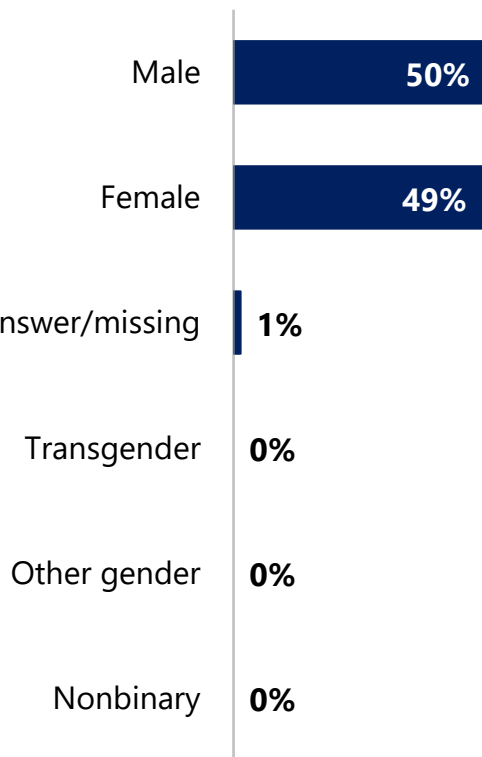


# Who are the vaccinated respondents? (n=147)

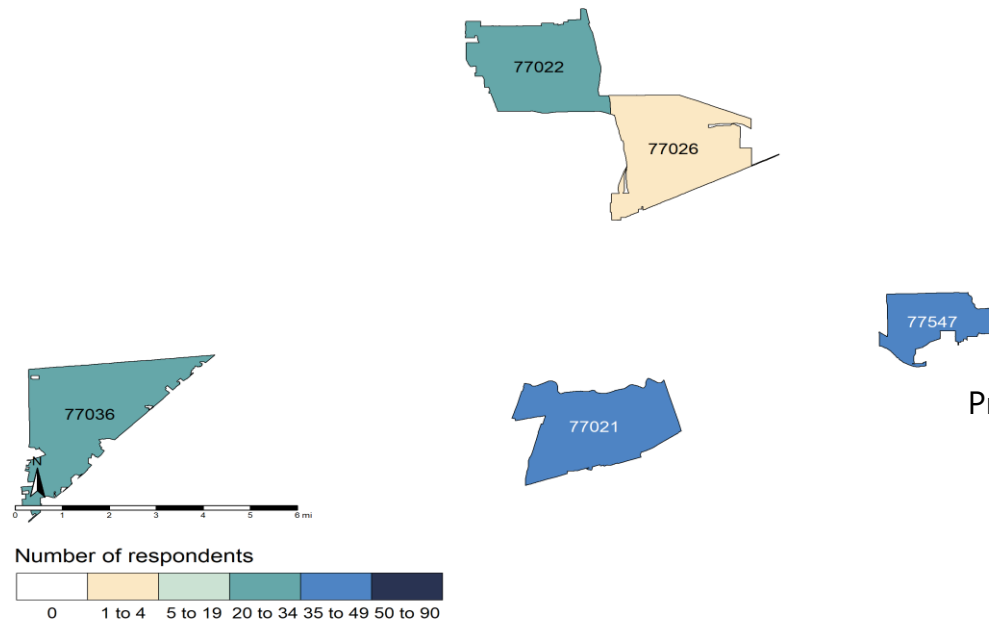
From September data

**Half** of vaccinated respondents were **male**, just **over half** were **Hispanic or Latino/Latinx** and **nearly a third** were **African American or Black**, and a **large number** were from **zip codes 77021 and 77547**.

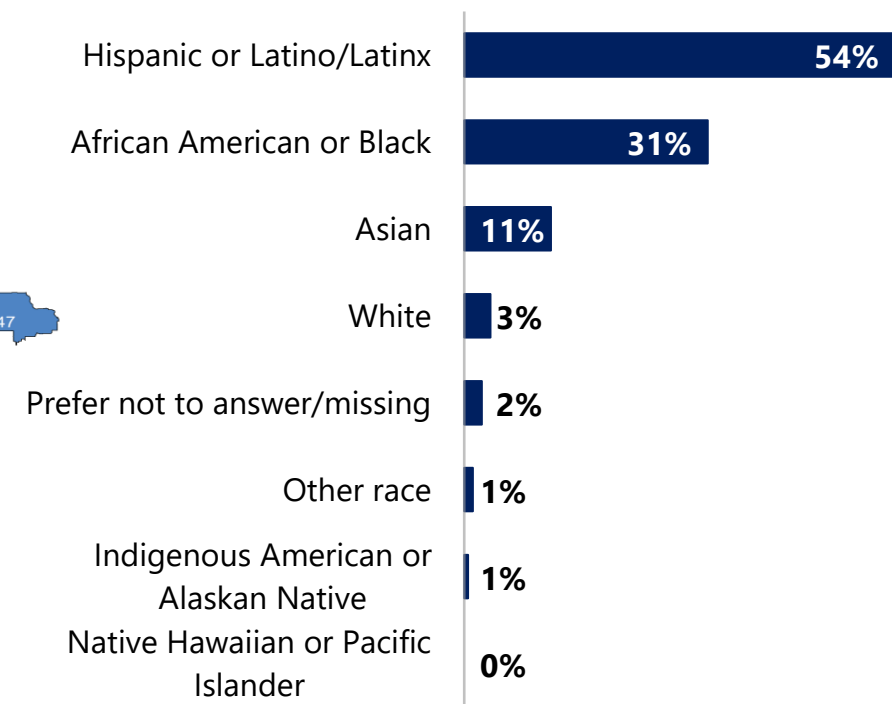
**Gender**  
(select all that apply)



**Where respondents live**  
(by zip code)



**Race/Ethnicity**  
(select all that apply)

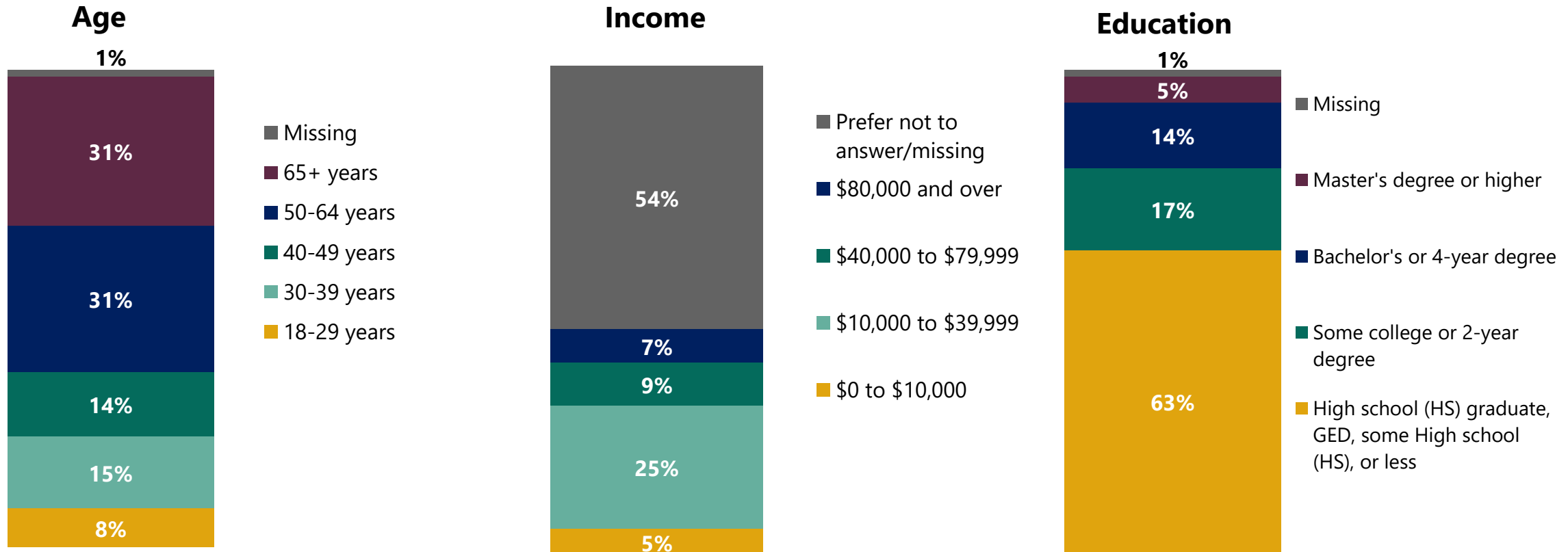


Note: Respondents were from five out of 178 zip codes in the county. This is a zoomed in portion of the map.

From September data

# Who are the vaccinated respondents? (n=147)

The largest share of vaccinated respondents were **50-64 (31%) or over 65 years (31%) old** and have a **high school degree/GED or less (63%).\*\***



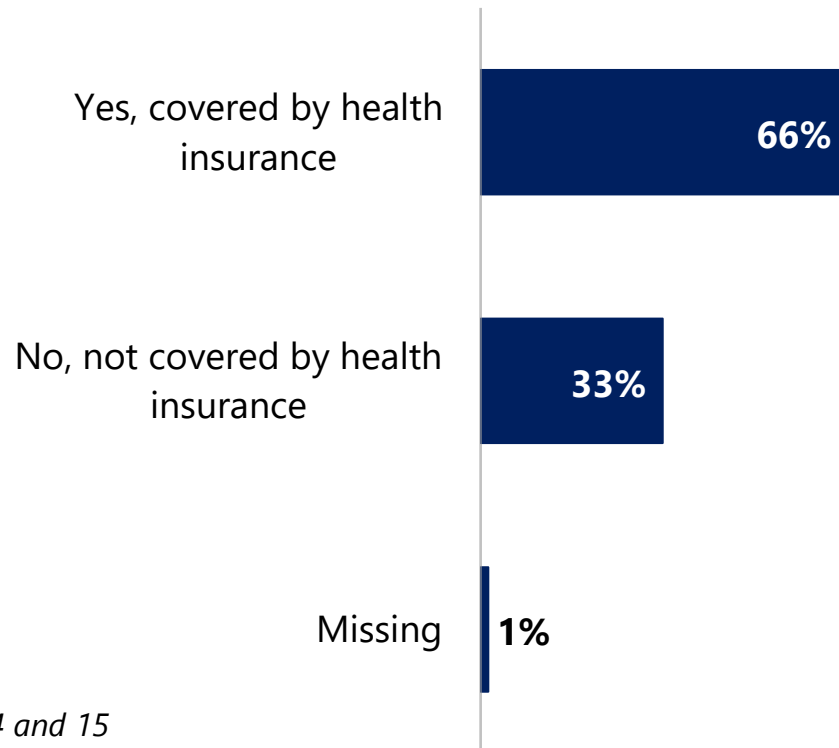


From September data

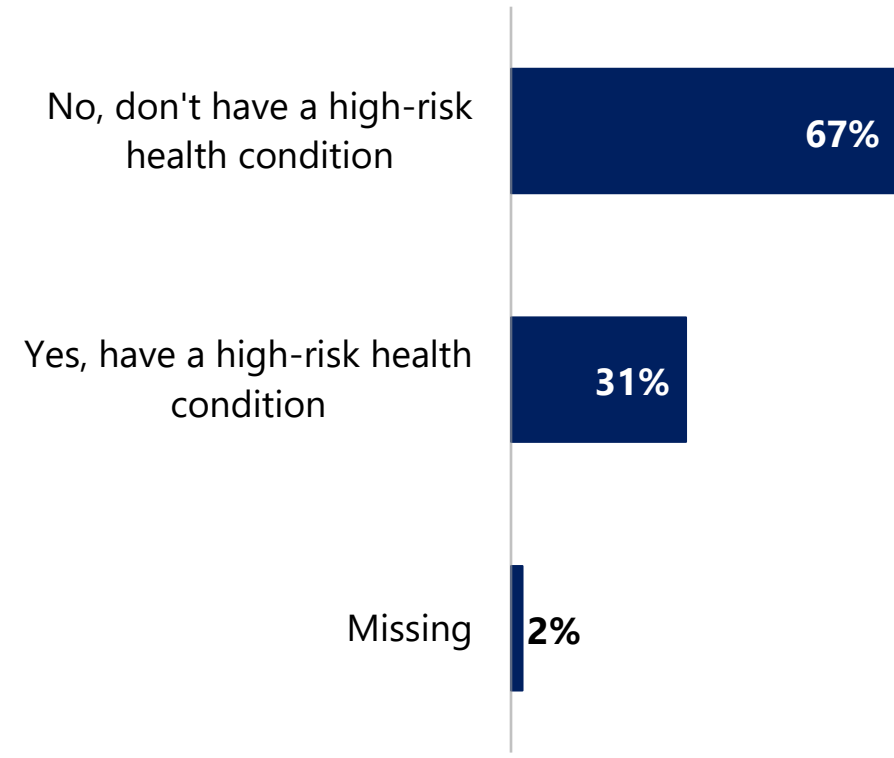
## Who are the vaccinated respondents? ( $n=147$ )

**About two-thirds** of vaccinated respondents reported that they have **health insurance coverage (66%)** and **about two-thirds** reported that they have **no high-risk health conditions (67%)**.

### Health insurance coverage



### High-risk medical conditions\*\*



\*Survey questions 14 and 15

\*\*High-risk health conditions include smoking, heart conditions (including high blood pressure), diabetes, obesity, lung disease (including asthma or COPD), kidney disease, cancer, pregnancy, sickle cell disease, HIV, other chronic diseases, or any condition that impairs your immune system.

From September data

# Among vaccinated respondents (n=147)

## ACCESS



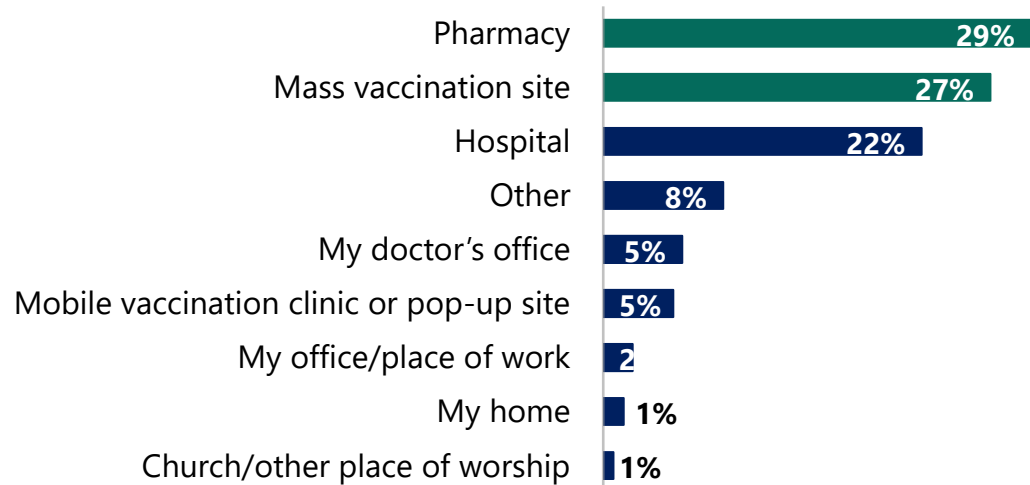
Most respondents said it took **less than 20 minutes (70%)** to get to the location where they received the vaccine.



Most respondents **found it very easy (90%)** to make a vaccine appointment.



Over one half of respondents received their vaccine at a **mass vaccination site (27%) or a pharmacy (29%)**.



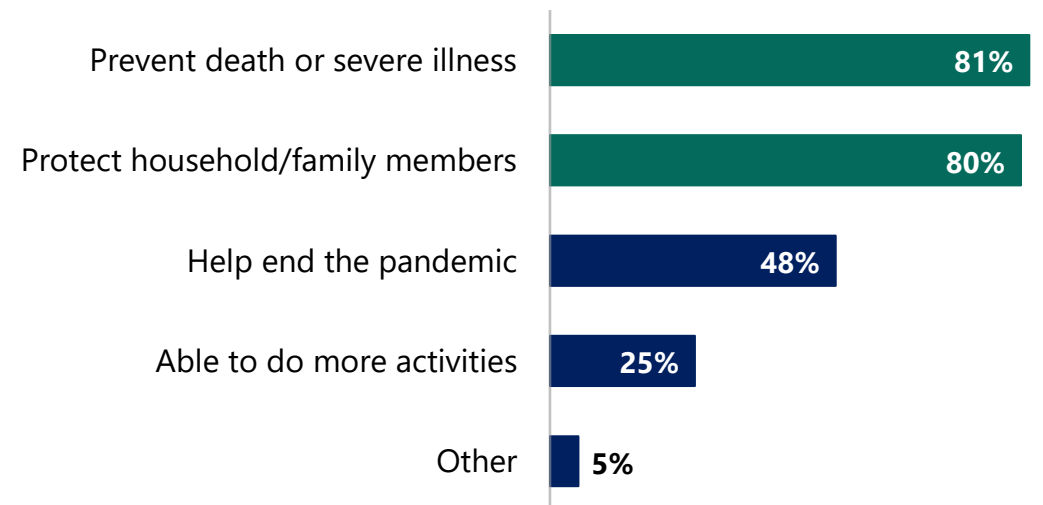
## MESSENGERS AND MOTIVATORS



**Doctors/healthcare providers (67%), scientists (63%), the Centers for Disease Control and Prevention (CDC) (54%), and pharmacists (48%)** were the most trusted sources of information about the COVID-19 vaccine.



Most respondents decided to get the vaccine to **prevent death or from getting severely ill (81%)** and to **protect their household or family members (80%)**.



\*Survey questions 3, 3b, and 4

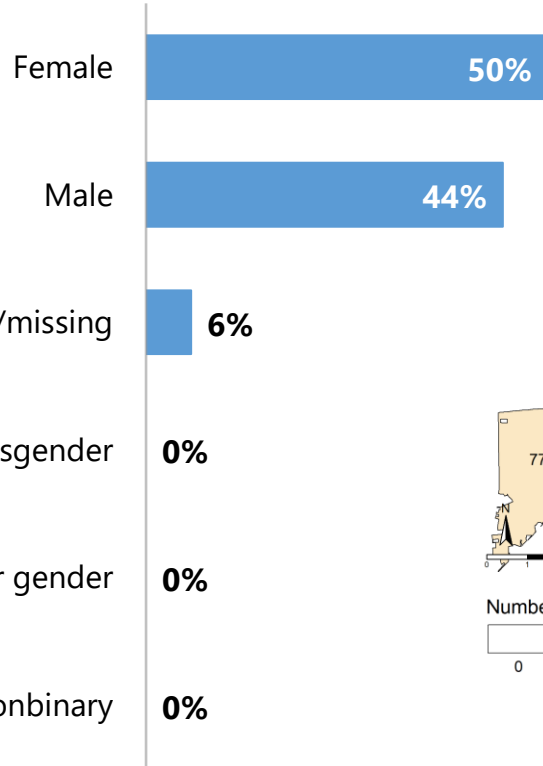
\*Survey questions 5 and 6c

# Who are the unvaccinated respondents? (n=36)

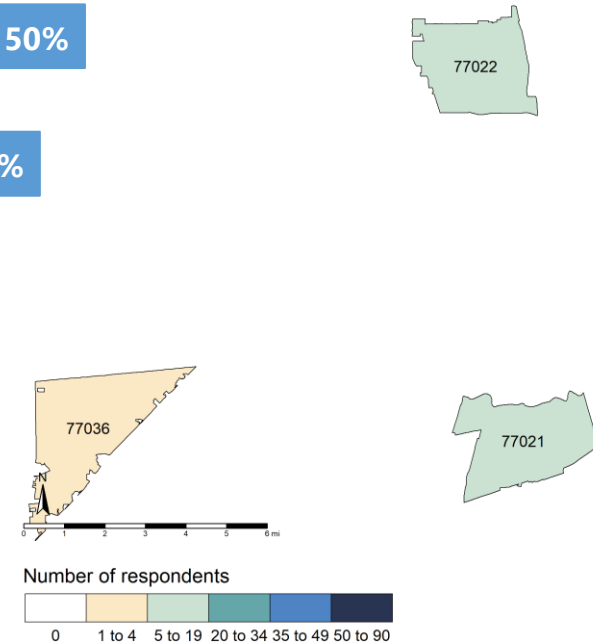
From September data

Half of unvaccinated respondents were **female**, slightly more than half were **Hispanic or Latino/Latinx** and **almost a third** were **African American or Black**, and were largely from **zip codes 77021, 77022, and 77547**.

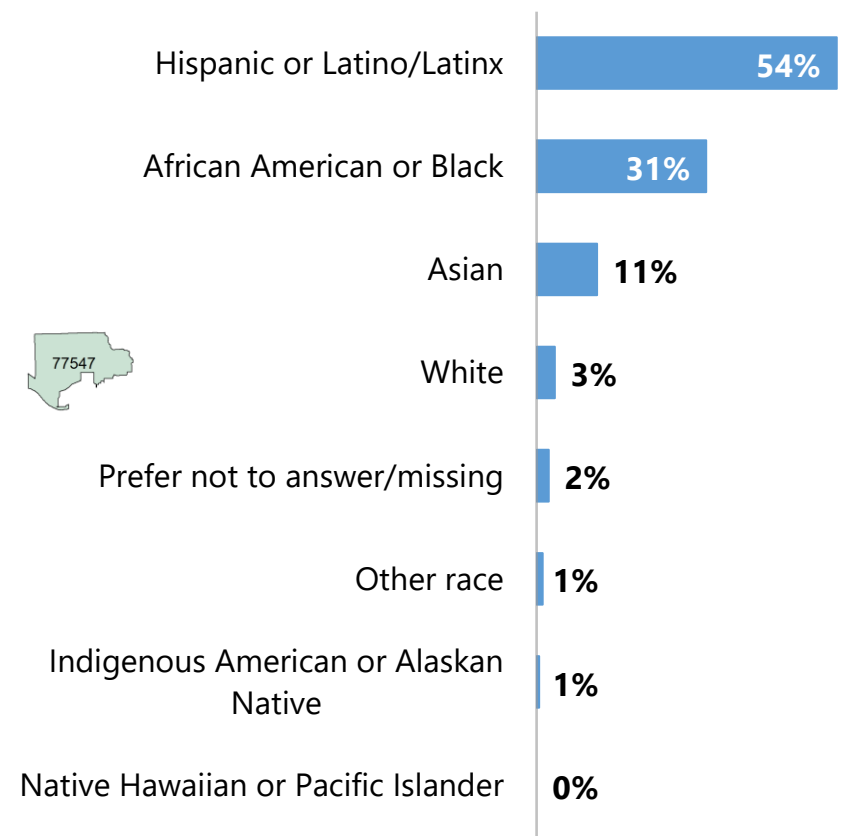
**Gender**  
(select all that apply)



**Where respondents live**  
(by zip code)



**Race/Ethnicity**  
(select all that apply)



Note: Respondents were from four out of 178 zip codes in the county. This is a zoomed in portion of the map.

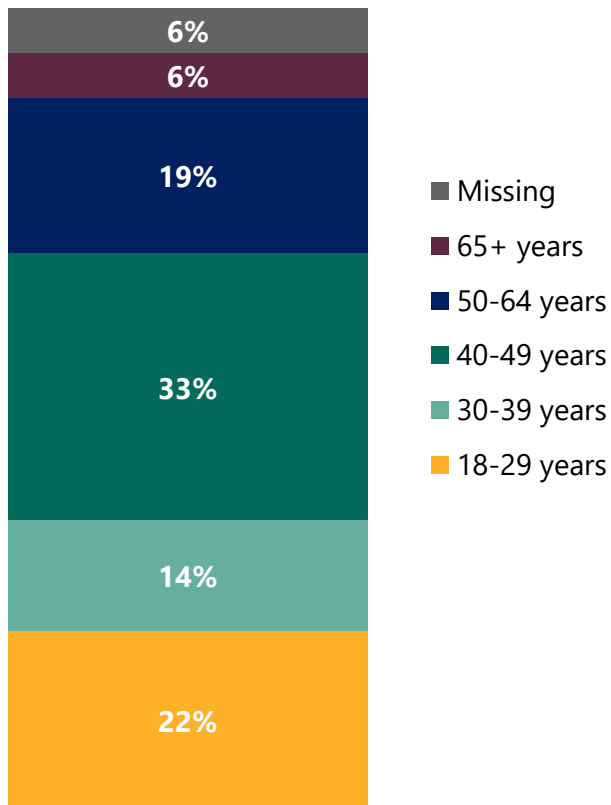
\*Survey questions 1, 10, and 11

From September data

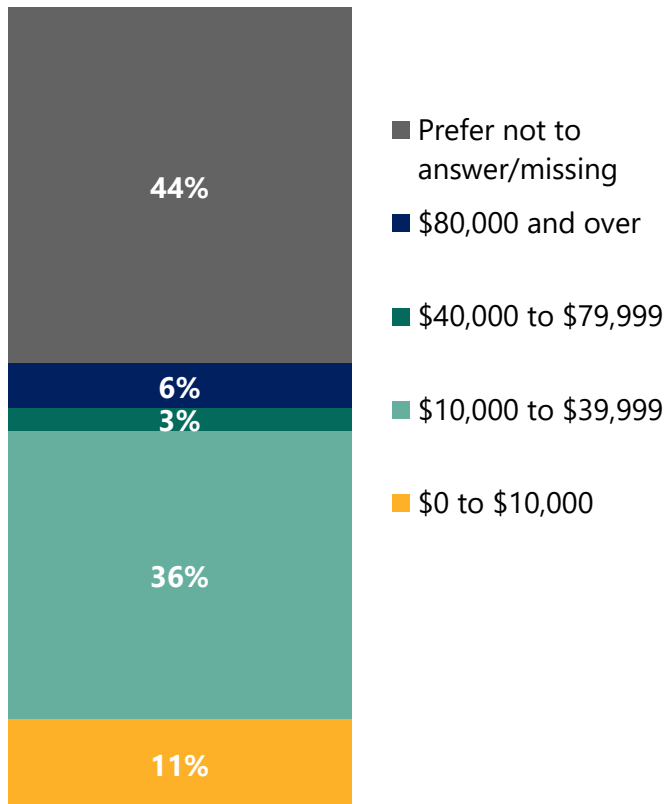
# Who are the unvaccinated respondents? (n=36)

The largest share of unvaccinated respondents were **40-49 (33%) years old** and have **a high school degree/GED or less (61%).\*\***

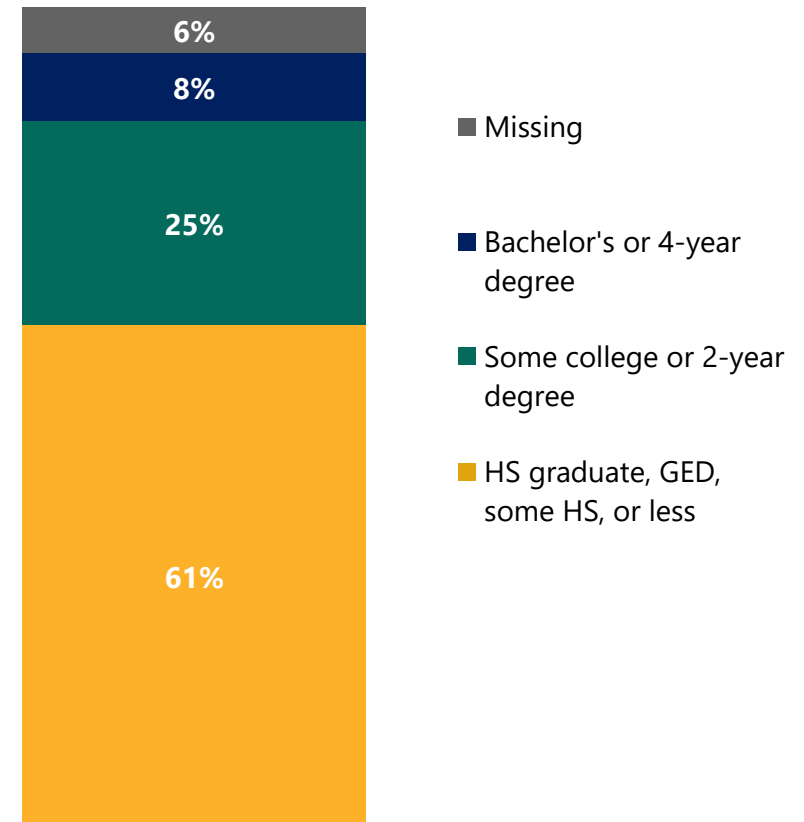
Age



Income



Education



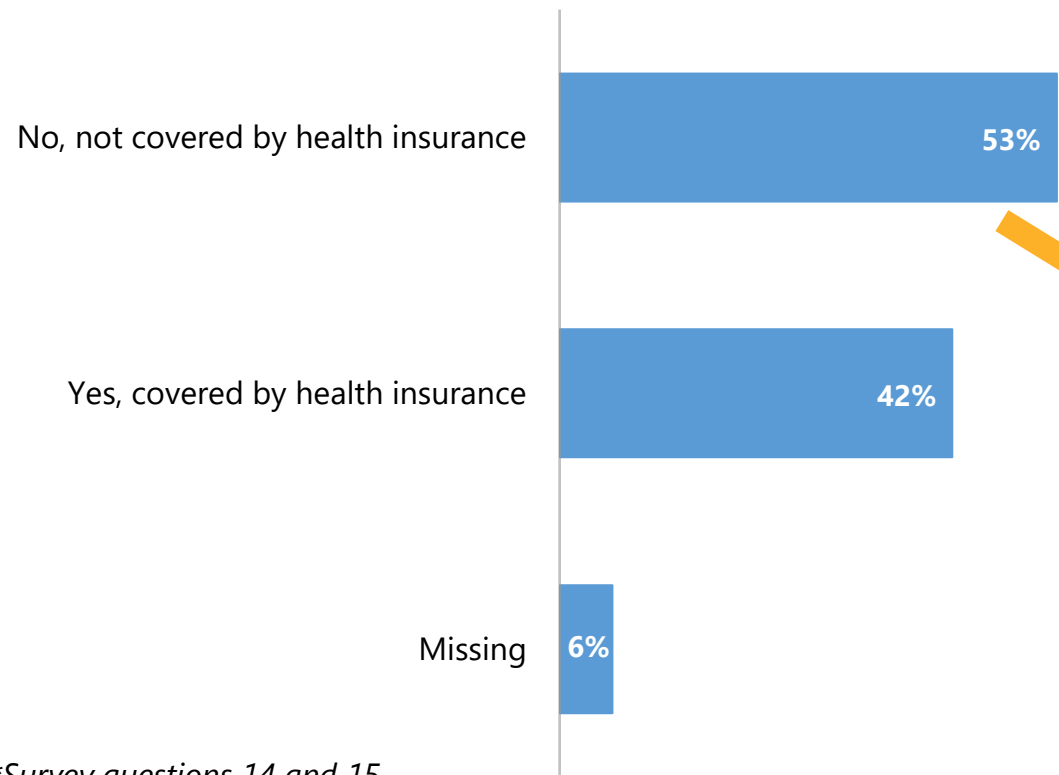
\*Survey questions 9a, 12, and 13; \*\*With such a high % of missing income responses it is difficult to accurately describe the typical income of a vaccinated respondent in this wave.

From September data

# Who are the unvaccinated respondents? (n=36)

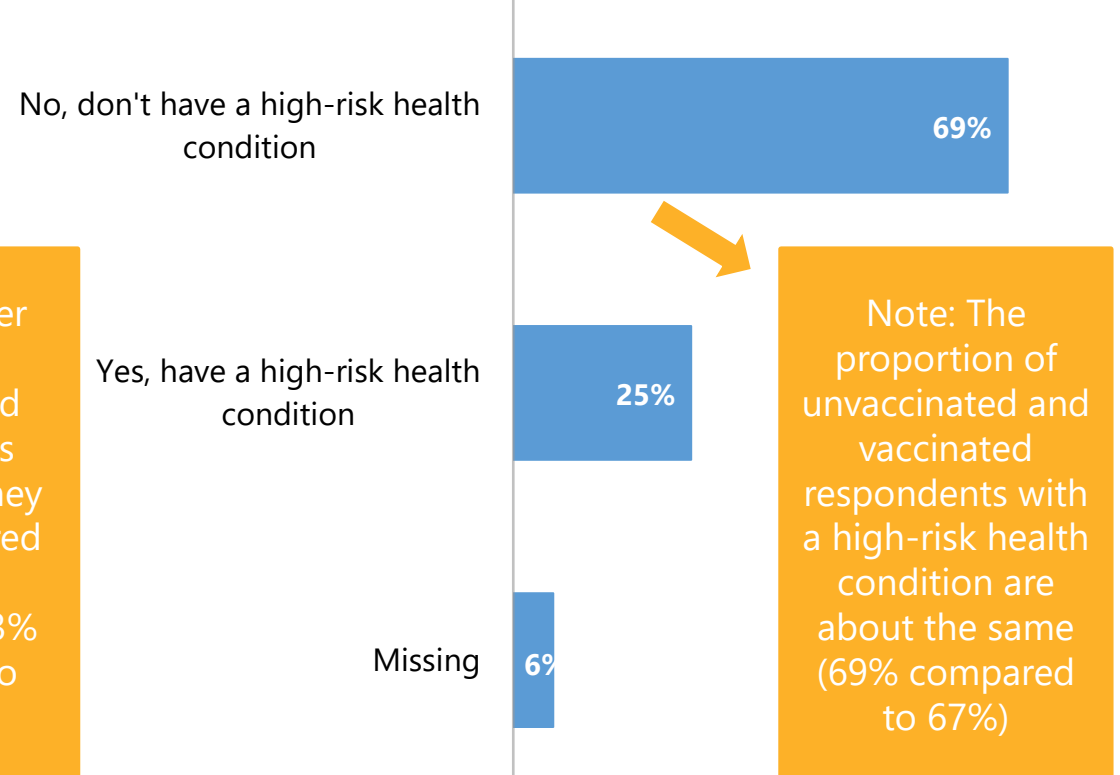
**Over half** of unvaccinated respondents reported that they **do not have health insurance coverage (53%)** and **over two-thirds** of unvaccinated respondents reported that they **do not have high-risk health conditions (69%)**.

## Health insurance coverage



Note: A larger share of unvaccinated respondents report that they are not covered by health insurance (53% compared to 33%).

## High-risk medical conditions\*\*



Note: The proportion of unvaccinated and vaccinated respondents with a high-risk health condition are about the same (69% compared to 67%).

\*Survey questions 14 and 15

\*\*High-risk medical conditions include smoking, heart conditions (including high blood pressure), diabetes, obesity, lung disease (including asthma or COPD), kidney disease, cancer, pregnancy, sickle cell disease, HIV, other chronic diseases, or any condition that impairs your immune system.

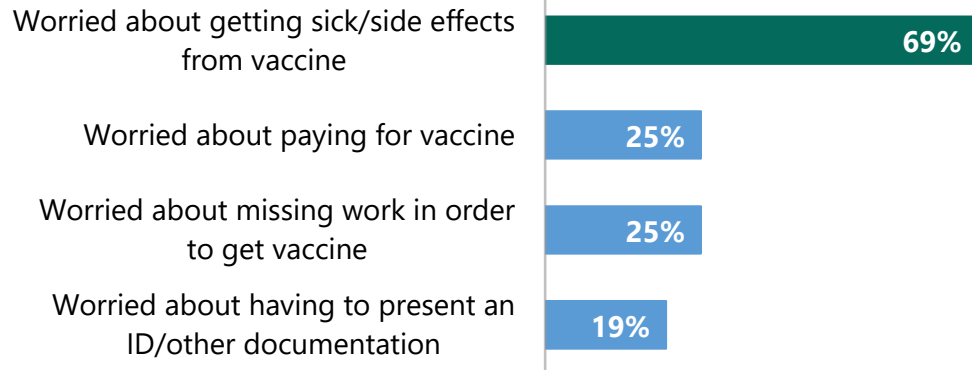
From September data

# Among unvaccinated respondents (n=36)

## BARRIERS



Over two thirds of unvaccinated respondents **worry about getting sick or experiencing side effects from the vaccine (69%)**.



## ENABLERS

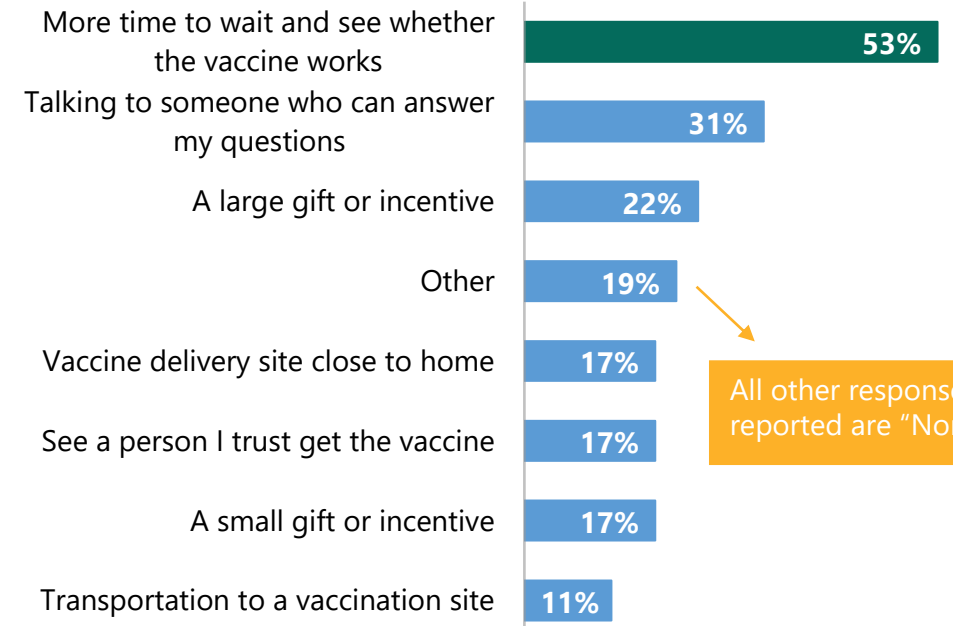


Over two-thirds of the unvaccinated respondents **know where they can get a vaccine (72%)** and **know where they can get information about scheduling a vaccine appointment (69%)**.

## MOTIVATORS



Over half of unvaccinated respondents would prefer to have **more time to wait and see whether the vaccine works (53%)**.



All other responses reported are "None."

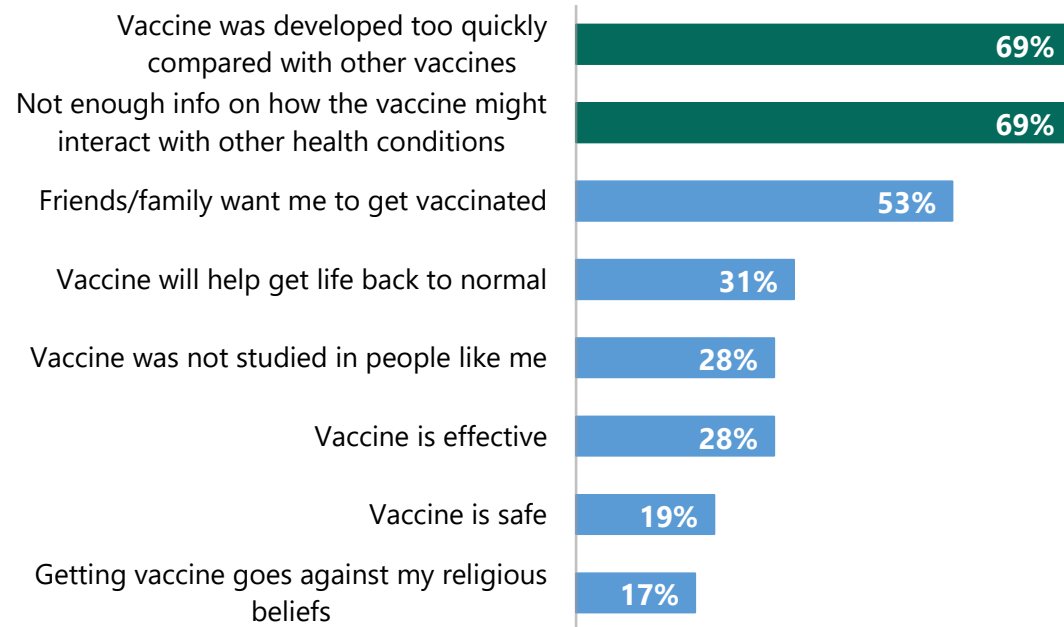
From September data

# Among unvaccinated respondents (n=36)

## BELIEFS



Over two-thirds of unvaccinated respondents believe **the vaccine was developed too quickly compared with other vaccines (69%)**, and that there was **not enough information on how the vaccine might interact with other health conditions (69%)**.

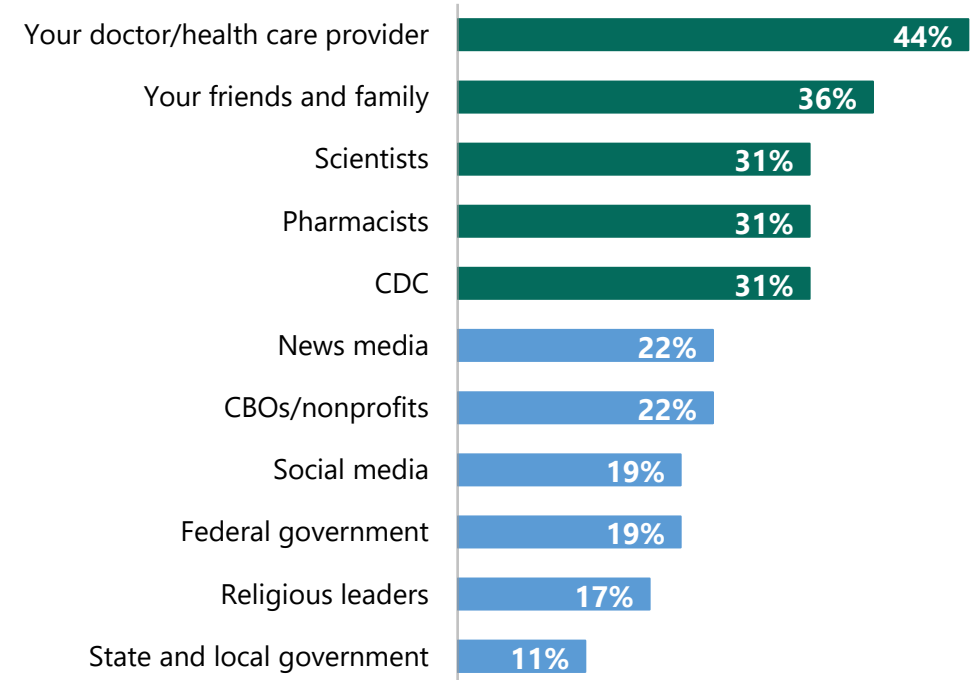


\*Survey question 7

## TRUSTED MESSENGERS



Overall, unvaccinated respondents reported **low trust in all sources for COVID information (all under 50%)**.



\*Survey question 8



From September data

# Differences between different types of unvaccinated respondents

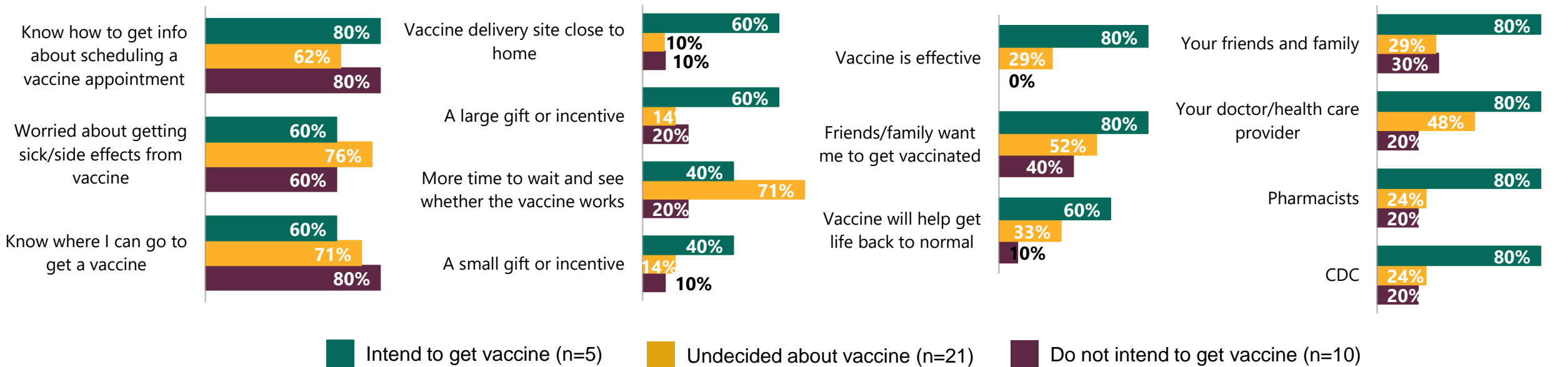
- Across groups, unvaccinated respondents showed similar levels of knowledge on how/where to get the vaccine, as well as concerns about potential side effects.
- More of the **“intend to”** group reported that there are factors could motivate them to get the vaccine; they have more positive beliefs about the efficacy, and impact of the vaccine; and they have more trusted messengers.
- The **“undecided”** group reported needing the more time to see if the vaccine works.
- However, given the small sample size of unvaccinated respondents, it is important to not over interpret these differences.

## BARRIERS & ENABLERS

## MOTIVATORS

## BELIEFS

## TRUSTED MESSENGERS



\*Survey questions 6c, 7, and 8

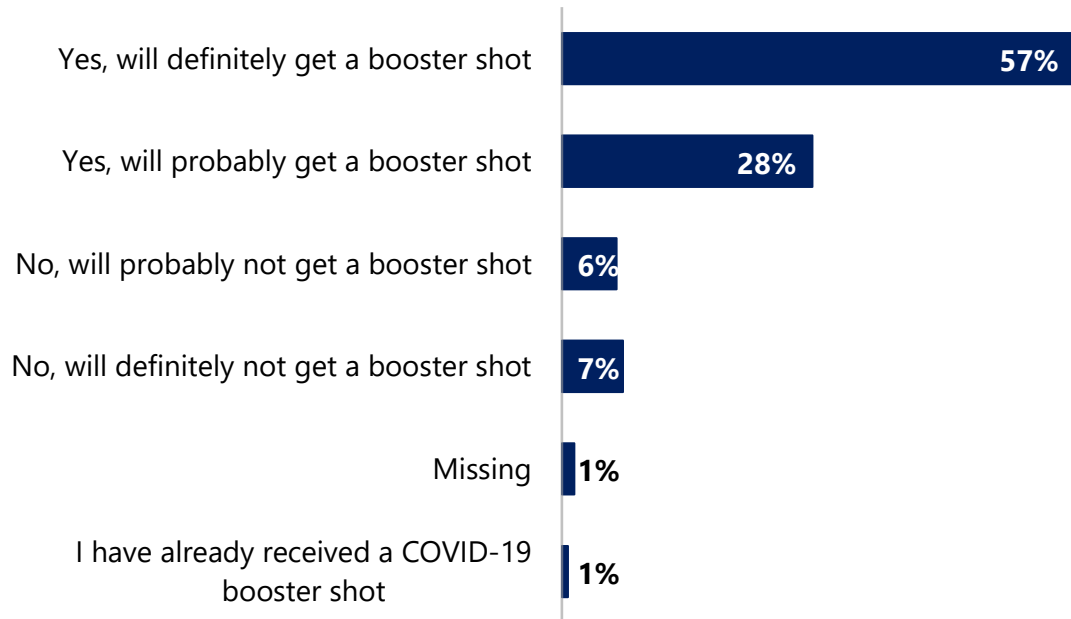
# Attitudes toward booster shot

From September data

## VACCINATED RESPONDENTS



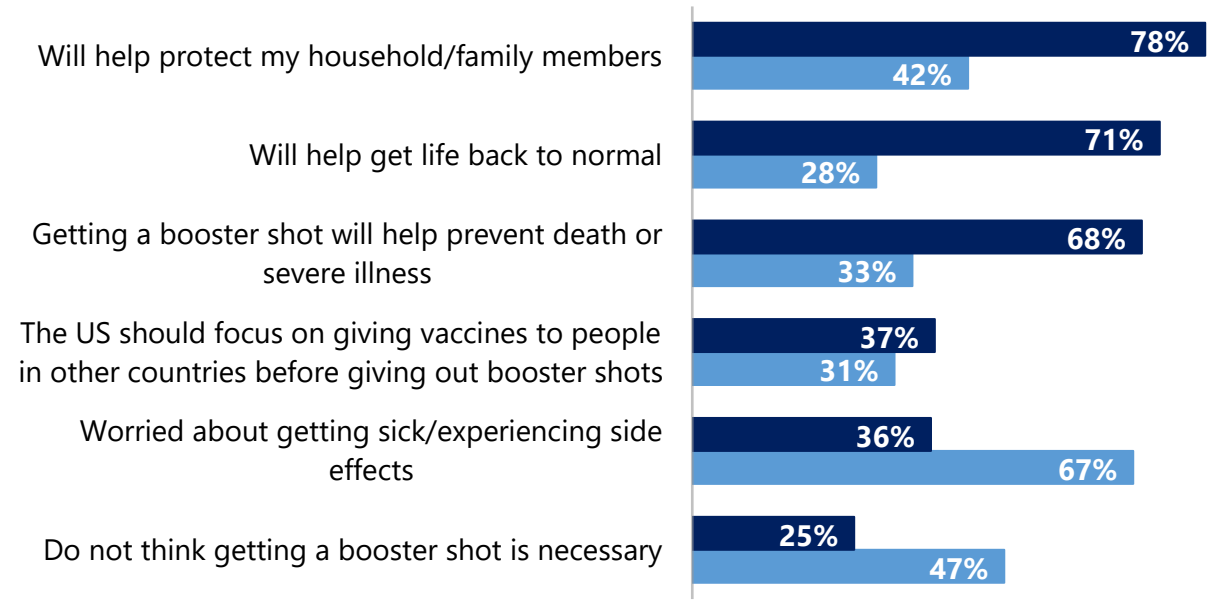
Over one half of vaccinated respondents **intend on getting a booster shot (57%)**, and about a third of respondents are **undecided (34%)**.



## ALL RESPONDENTS



Vaccinated respondents believe getting a booster shot will help **protect their family and household (78%)**, **get life back to normal (71%)**, and **prevent death or severe illness (68%)**. However, a smaller share of unvaccinated respondents believe the booster shot will **protect their family and household (33%)** and remain concerned about **experiencing side effects (67%)**.



■ Vaccinated (n=147)   ■ Unvaccinated (n=36)

\*Survey question 8.1 (New for September)

\*Survey question 8.2 (New for September)

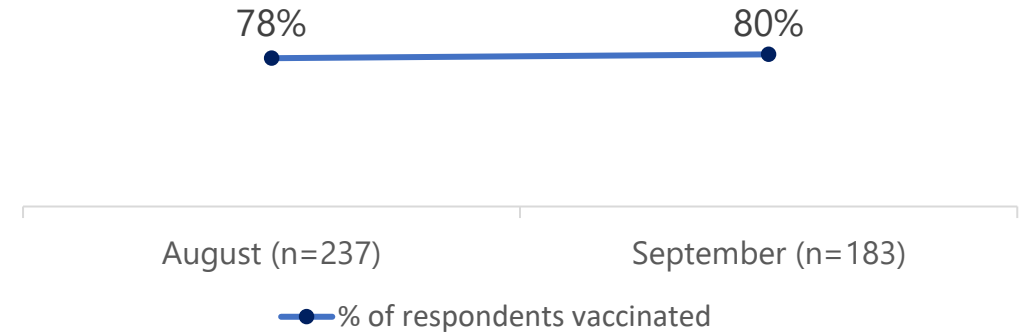
# Vaccination trends from August to September

From August & September data

The share of respondents who were vaccinated in August and September was similar.



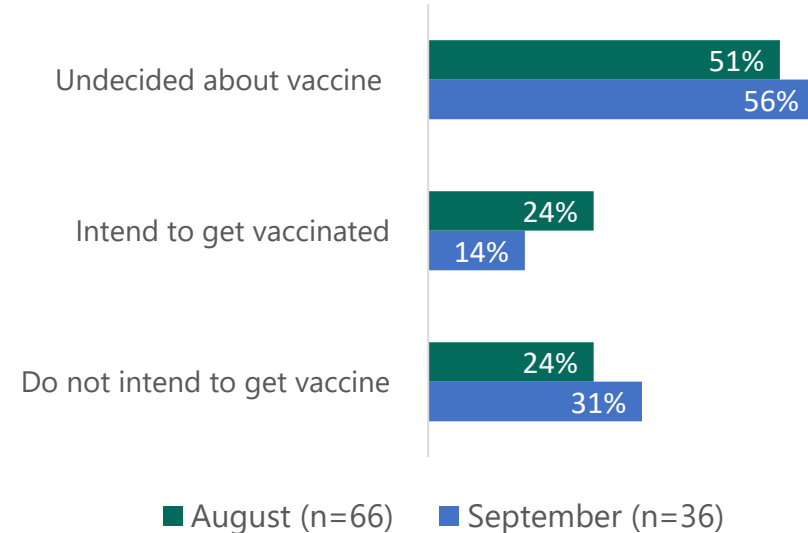
Vaccination rate



Overall, vaccine intention among unvaccinated respondents was similar across months. (Share of respondents who intend to get the vaccine was lower by 10 percentage points in September, but this could be random variation given the small sample size.)



Intent to get vaccinated

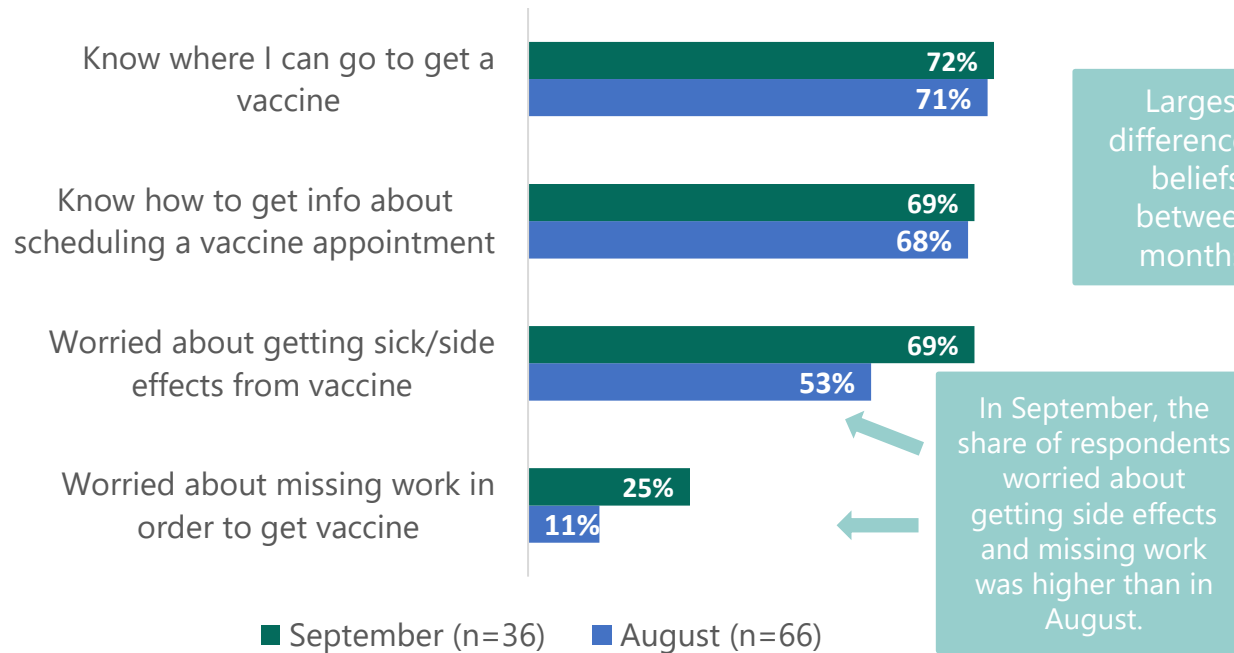


# Trends in barriers and beliefs from August to September

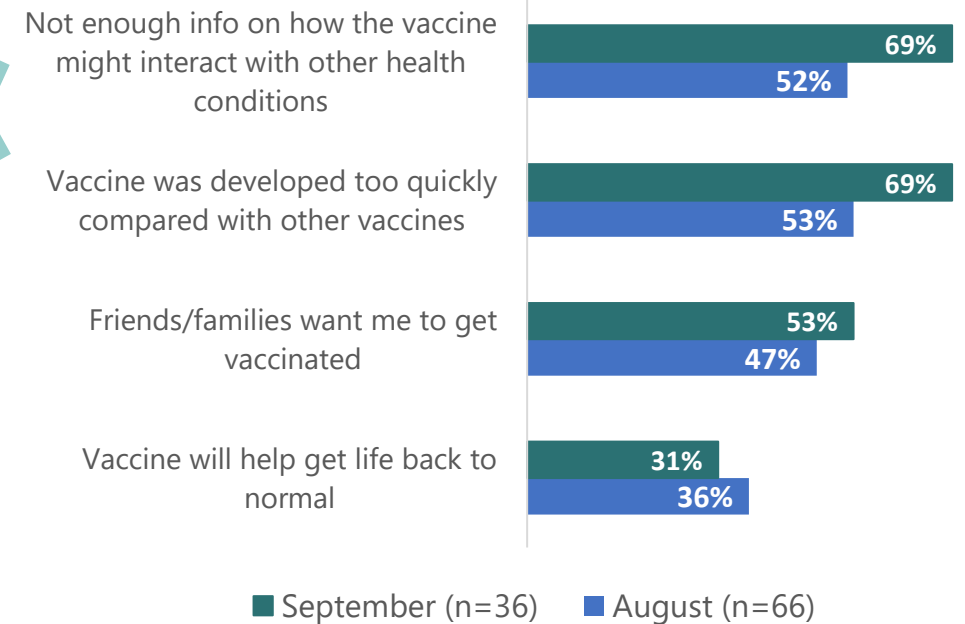
From August & September data

The top barriers and beliefs reported by **unvaccinated** respondents remained largely consistent between August and September. However, it is important to not over interpret these differences given the small sample size.

## Barriers



## Beliefs



\*Survey questions 6b and 7

From September data

# Summary and potential actions

## KEY TAKEAWAYS

### VACCINATED RESPONDENTS

- Were motivated to get the vaccine to protect family/household members and prevent death or severe illness.
- Trust their doctors and healthcare providers the most about vaccine information.
- Found it very easy to travel to and get a vaccine appointment.
- Most would consider getting the booster shot.



## POTENTIAL MESSAGING & OUTREACH STRATEGIES



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



**Support doctors and healthcare providers** in having compassionate conversations about the vaccine.



**Encourage discussions between vaccinated and unvaccinated individuals in your communities** around these motivations.

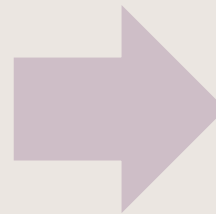
# Summary and potential actions

From September data

## KEY TAKEAWAYS

### UNVACCINATED RESPONDENTS

- Are worried about getting sick/experiencing side effects from the vaccine.
- Need more information on how the vaccine interacts with other health conditions.
- Believe the vaccine was developed too quickly.
- Were not very trusting of any of the listed sources of information about the COVID-19 vaccine.
- Would like more time to see if vaccine works, especially those who are unsure about getting the vaccine.



## POTENTIAL MESSAGING & OUTREACH STRATEGIES



### Provide information that:

- Details **how to manage side effects**
- Provides **resources and contact information** if experiencing side effects
- Demonstrates the **vaccine's safety in the presence of other health conditions**



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



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



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



Keep in mind that there are still people who **may only need a nudge, someone to talk to, or more information before making an informed decision.**

# Houston: Supplemental Data Slides

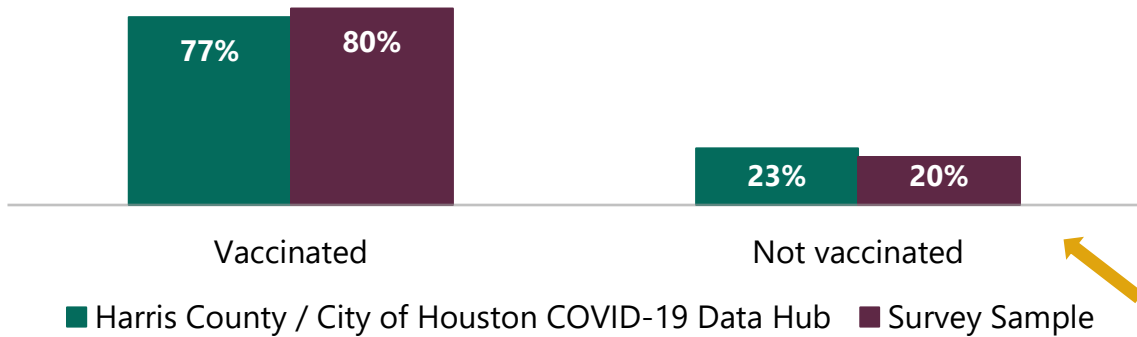
- Survey respondent demographics vs. city BIPOC demographics
- All figures for questions analyzed



From September data

# Survey respondent demographics vs. Houston city BIPOC demographics

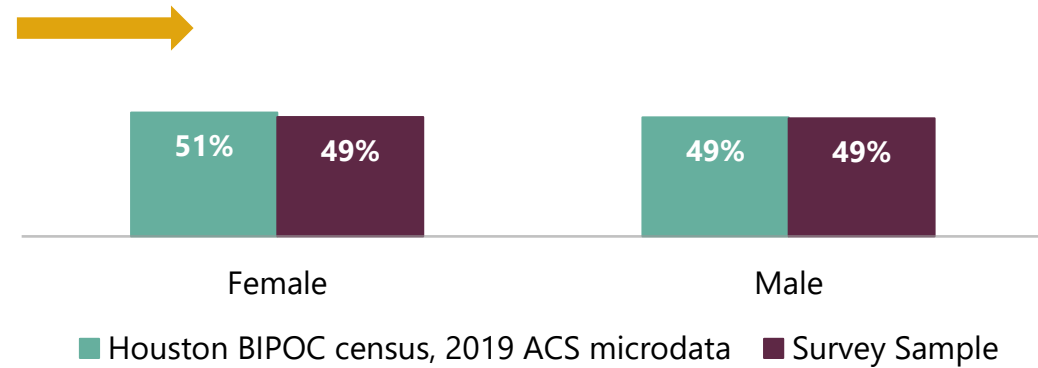
**Vaccination status (at least one dose):  
Houston vs. Survey Sample (n = 183)**



In compared to Houston's BIPOC population, the survey sample had a similar gender distribution.

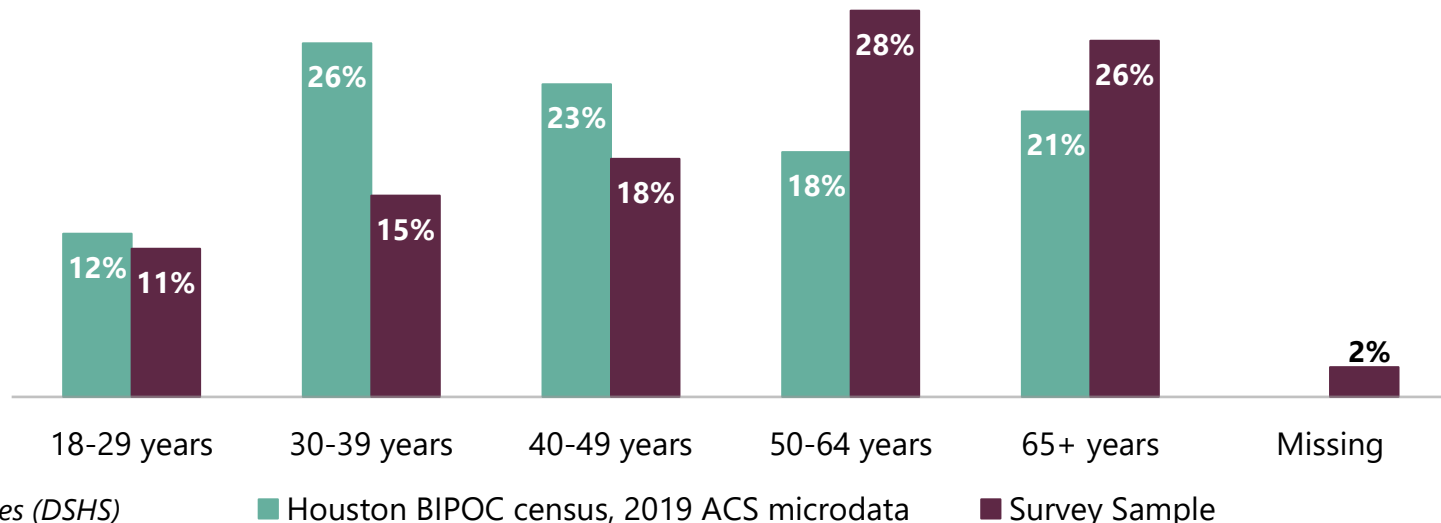
Survey sample has similar vaccination rates as Houston's population (only a difference of 3 percentage points)

**Gender: Houston vs. Survey Sample (n = 183)**



Note: Vaccination rates for Harris County are not specific to the BIPOC population unlike other demographics shown in this slide.

**Age: Houston vs. Survey Sample (n = 183)**



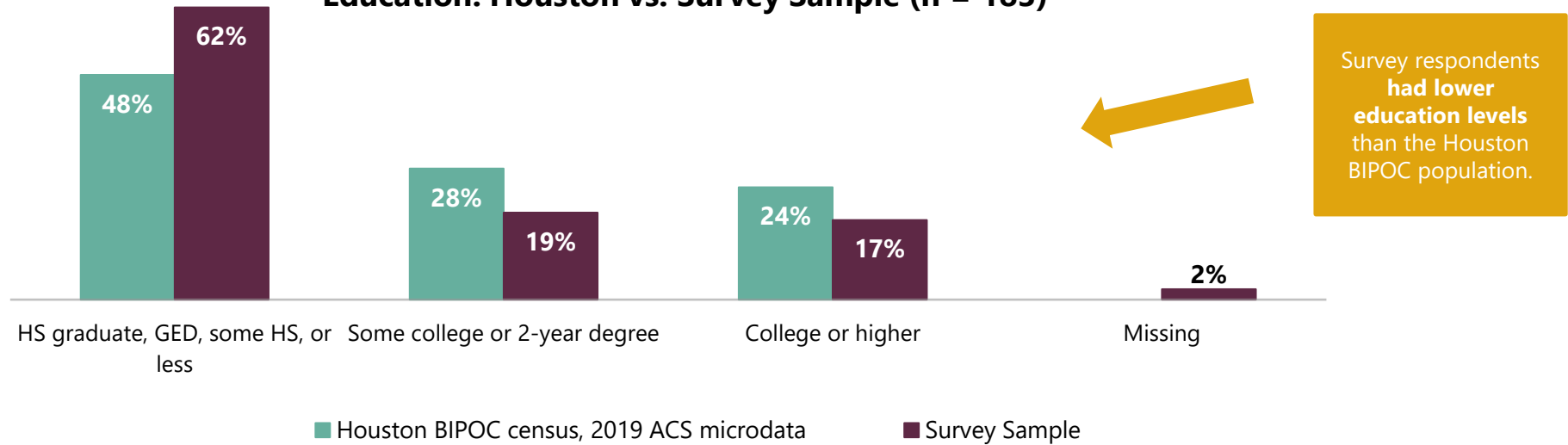
The survey sample skews toward an older population than Houston's BIPOC population. Survey sample has a **smaller share of 30-39-year-olds** and a **larger share of 50-64-year-olds**.

\*Source: Texas Department of State Health Services (DSHS)

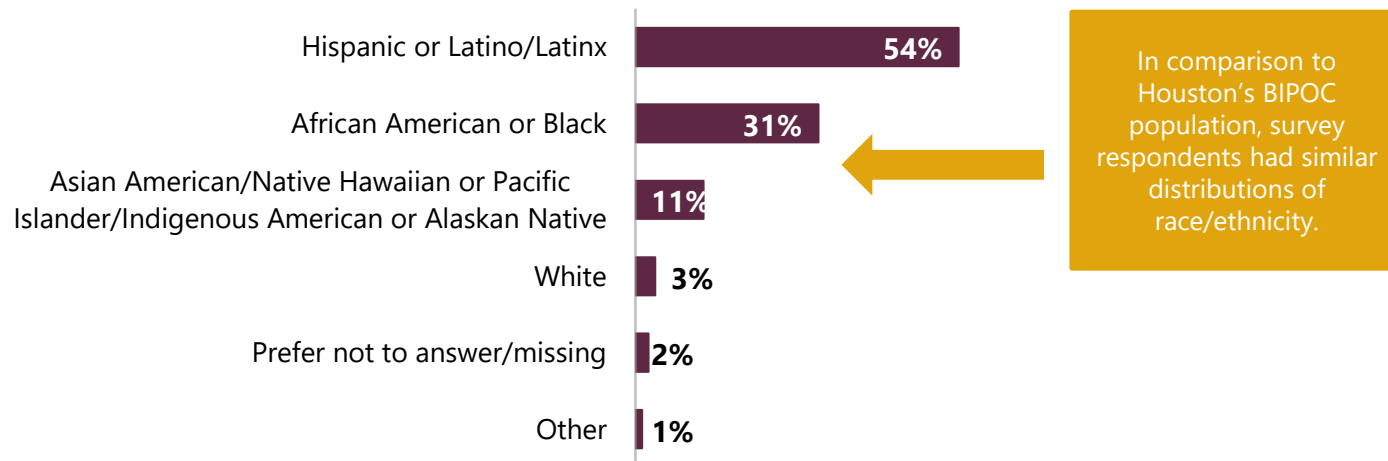
From September data

# Survey respondent demographics vs. Houston city BIPOC demographics

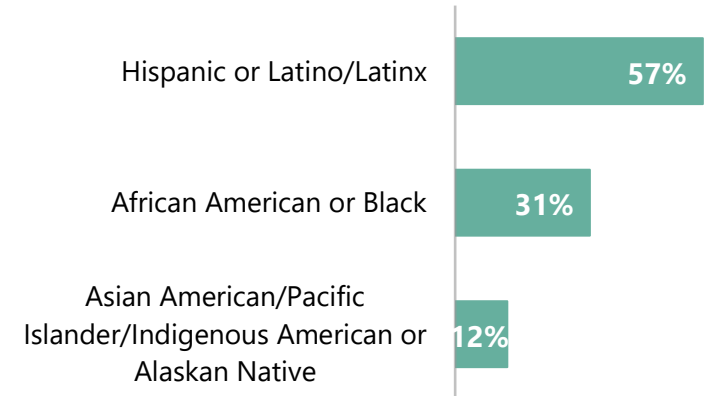
## Education: Houston vs. Survey Sample (n = 183)



## Survey Sample race/ethnicity (n = 183)



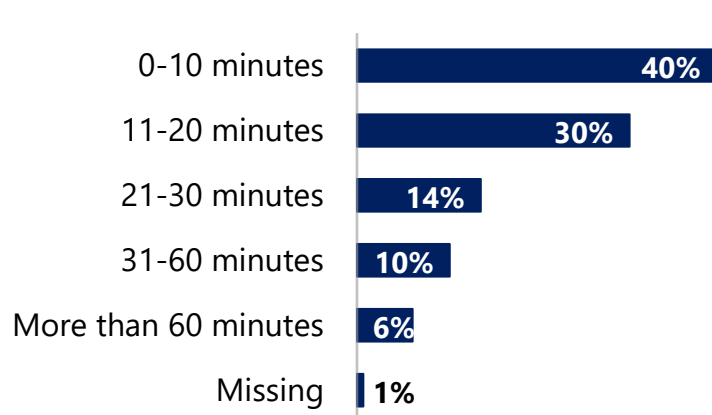
## Houston BIPOC census, 2019 ACS microdata BIPOC race/ethnicity



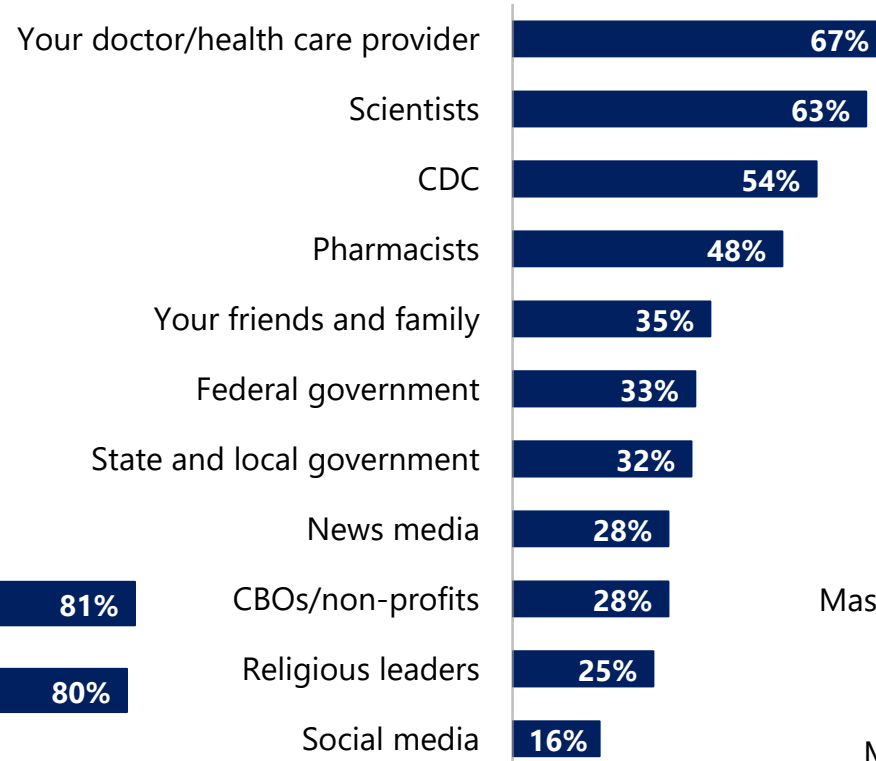
# Among vaccinated respondents (n=147)

From September data

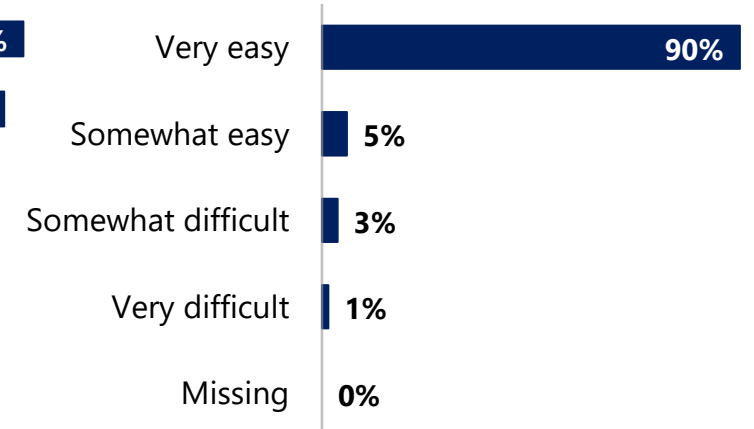
## Time taken to get vaccinated



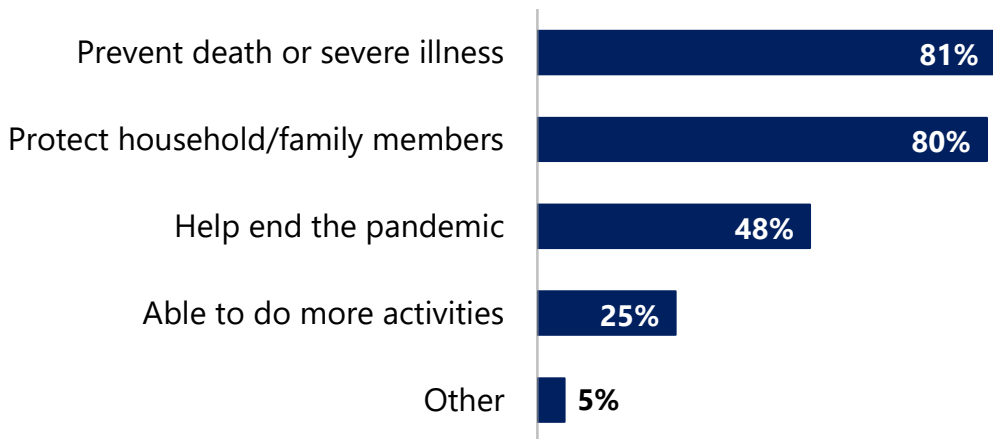
## Trusted sources of information



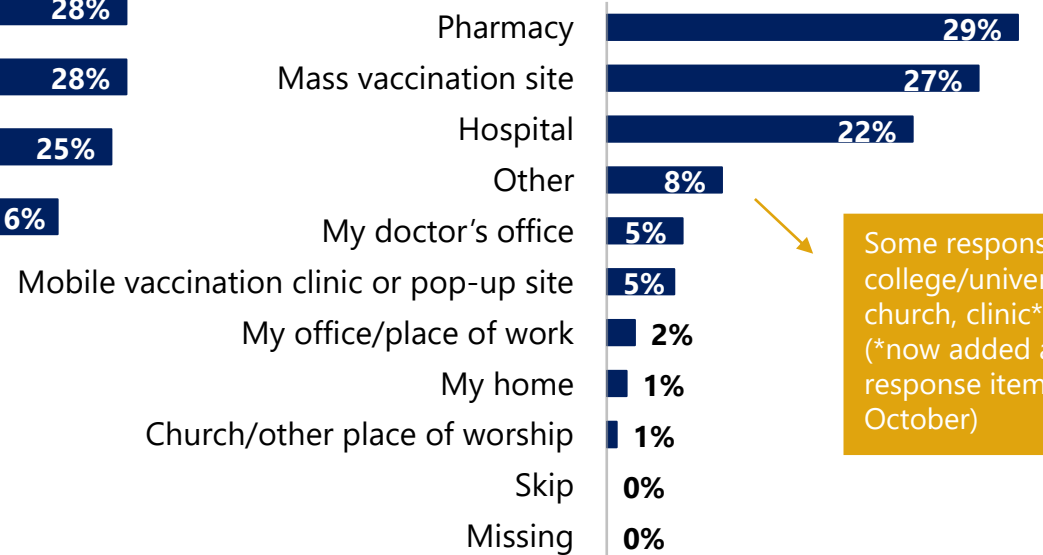
## Ease of getting an appointment



## Reason for becoming vaccinated



## Location of appointment



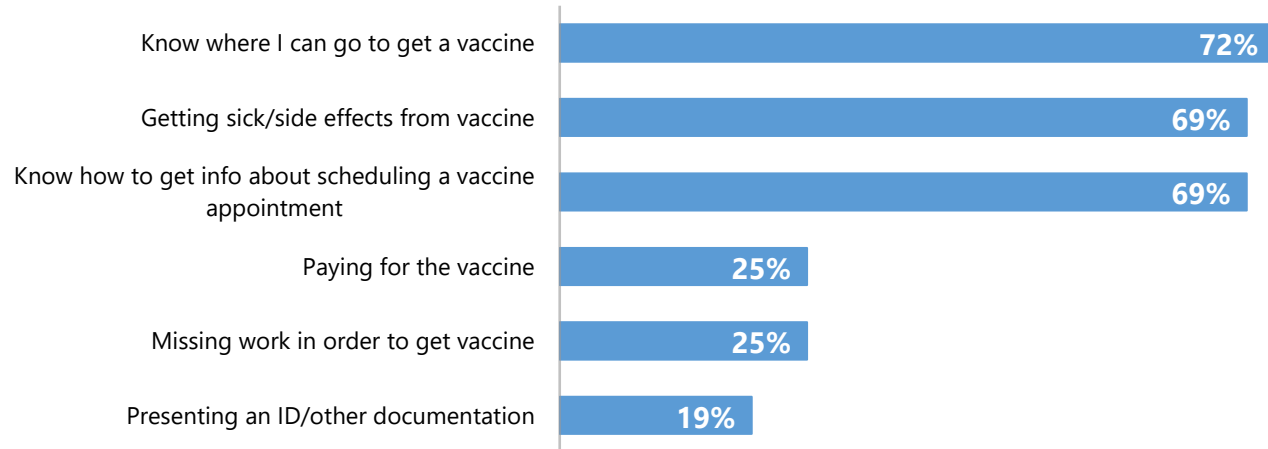
Some responses: college/university, church, clinic\* (\*now added as a response item for October)

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

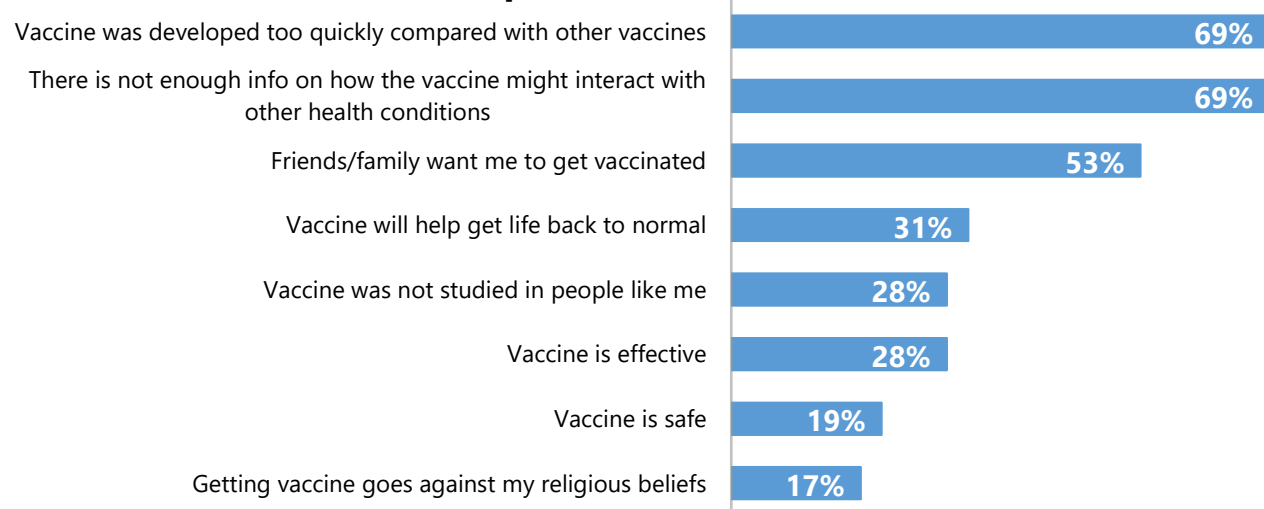
# Among unvaccinated respondents (n=36)

From September data

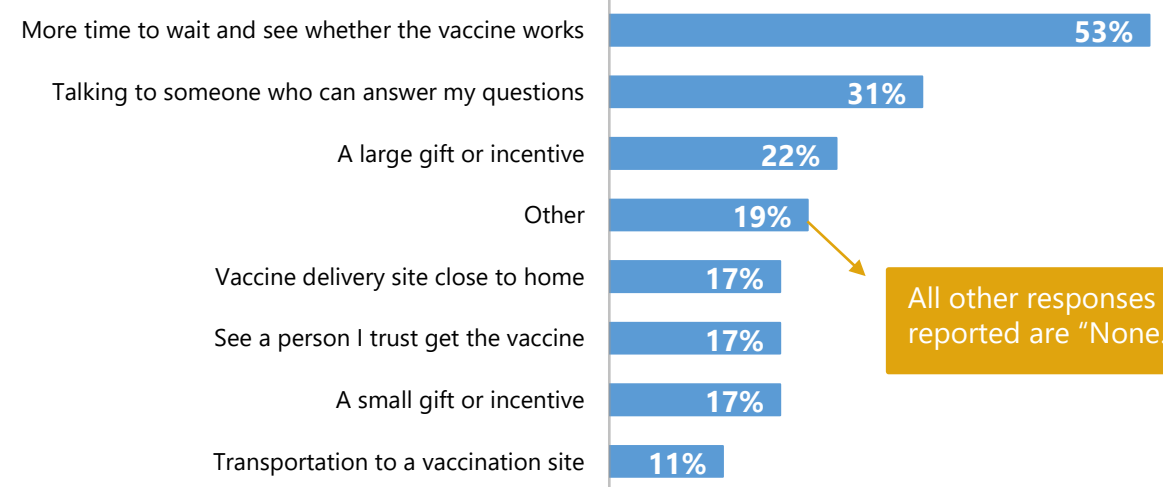
## Respondents worry about:



## Respondents believe that:

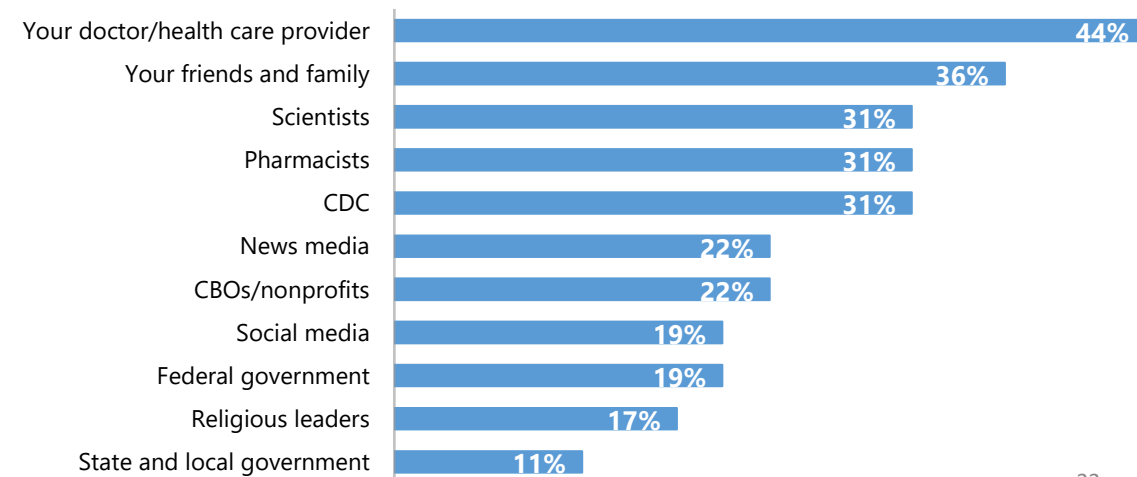


## Motivators to get the vaccine



All other responses reported are "None."

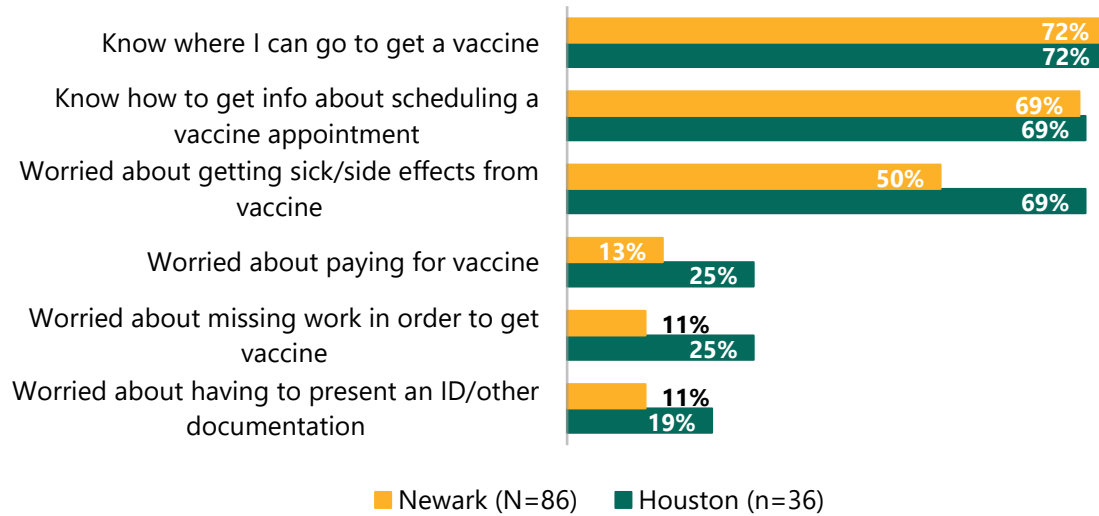
## Trusted messengers



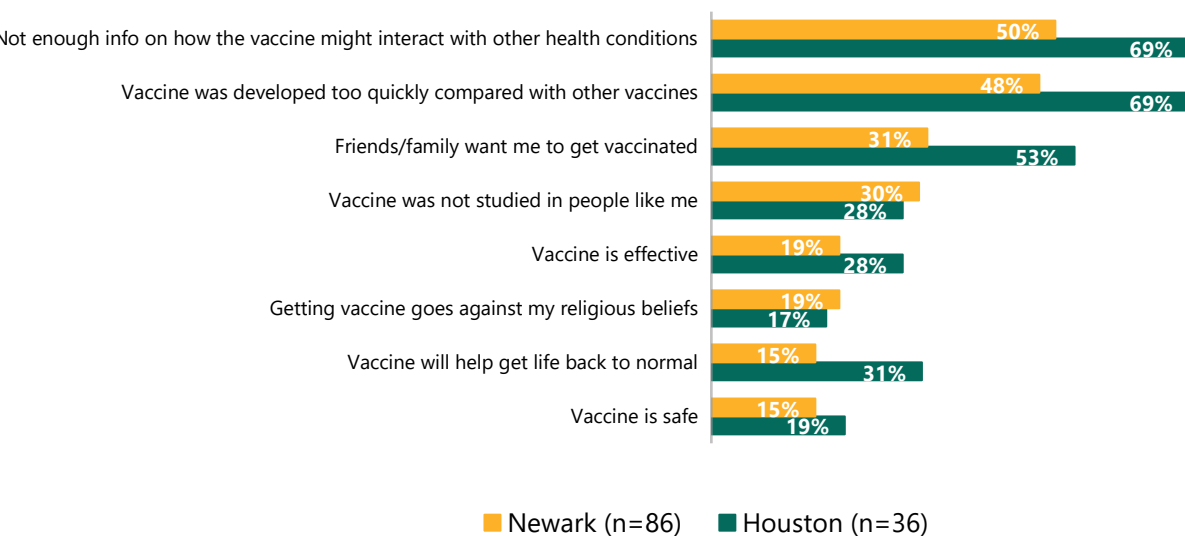
\*Survey questions 3, 3b, 4, 5, 6b, 6c, 7 and 8

# Supplemental slides

## Top Barriers

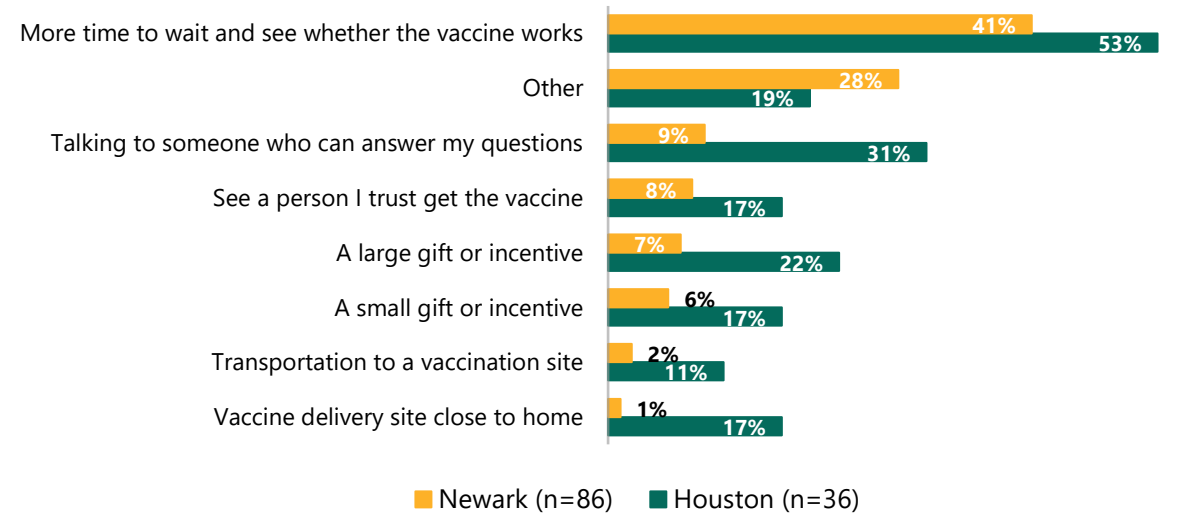


## Top Beliefs

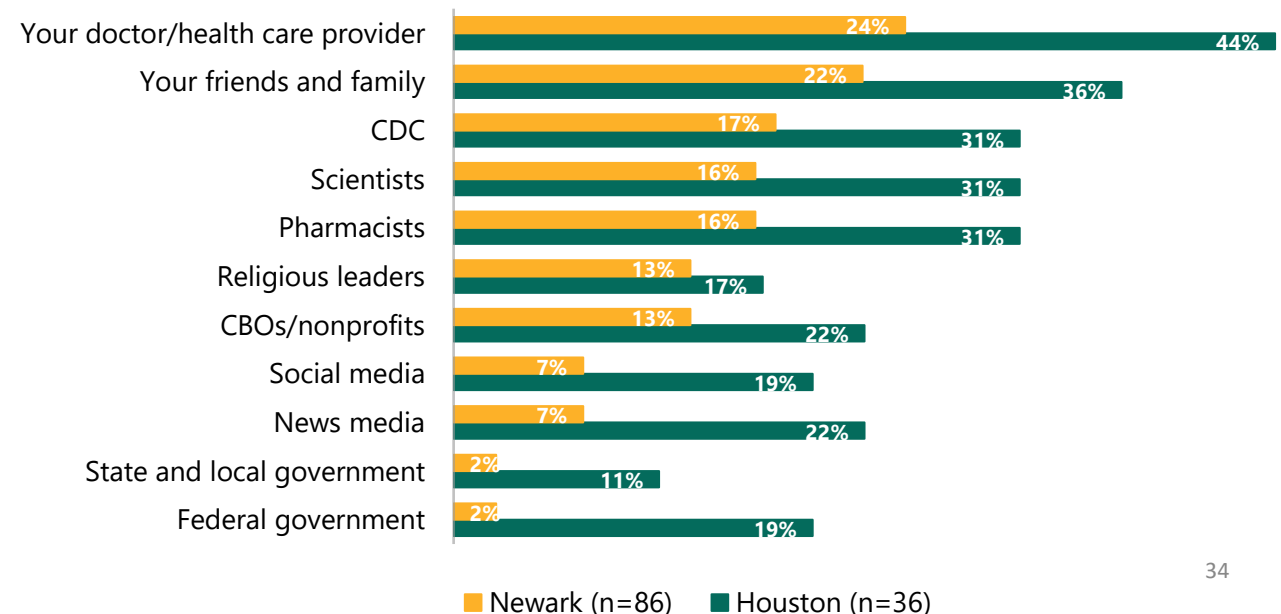


## Top Motivators

From September data



## Top Trusted Messengers



# Survey Insights by City: Newark

- Methodology
- Respondents' vaccination status and intentions
- Characteristics and highlights among vaccinated respondents
- Characteristics and highlights among unvaccinated respondents
- Differences between "types" of unvaccinated respondents
- Key trends over time
- 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.

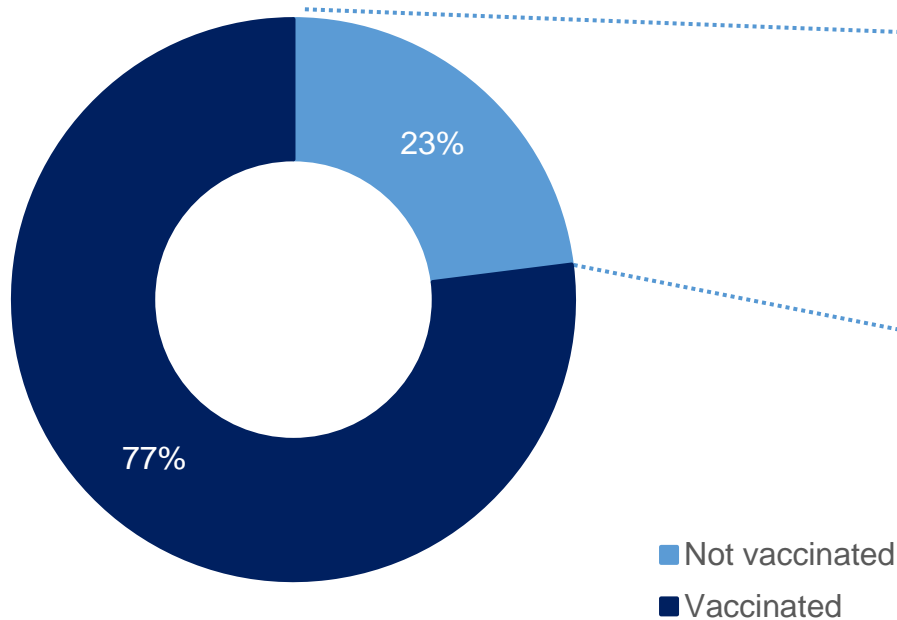
\*\*Member list consists of 13,000 to 14,000 parents or guardians of school aged children.

From September data

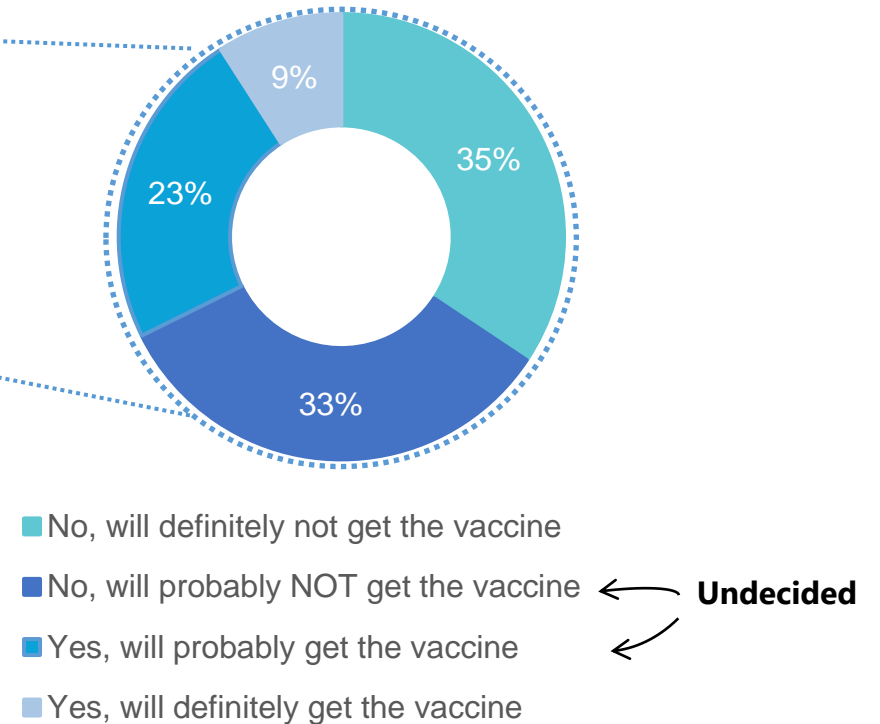
# Vaccination status and intention (n=377)

Over three quarters of the respondents in September reported being vaccinated (77%). Among the unvaccinated respondents (23%), **9% intend to get the vaccine** and **56% are undecided**.

Surveyed population in Newark



Among the 23% who are not vaccinated



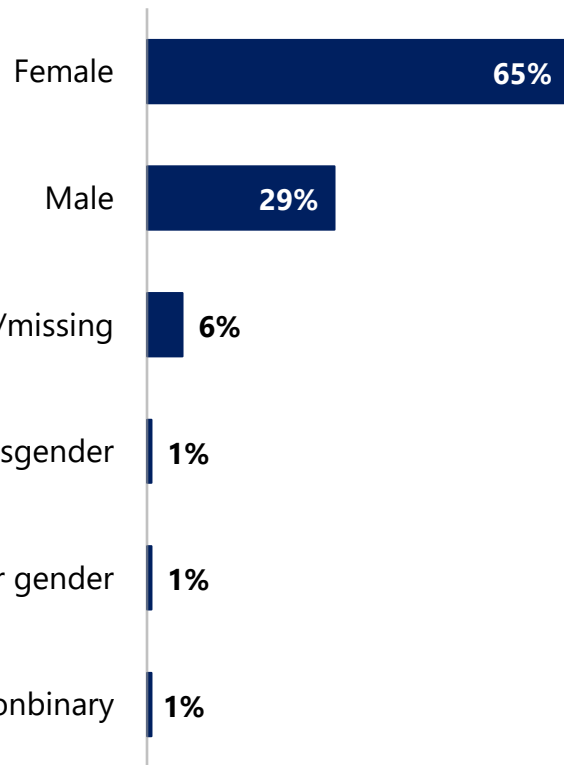


From September data

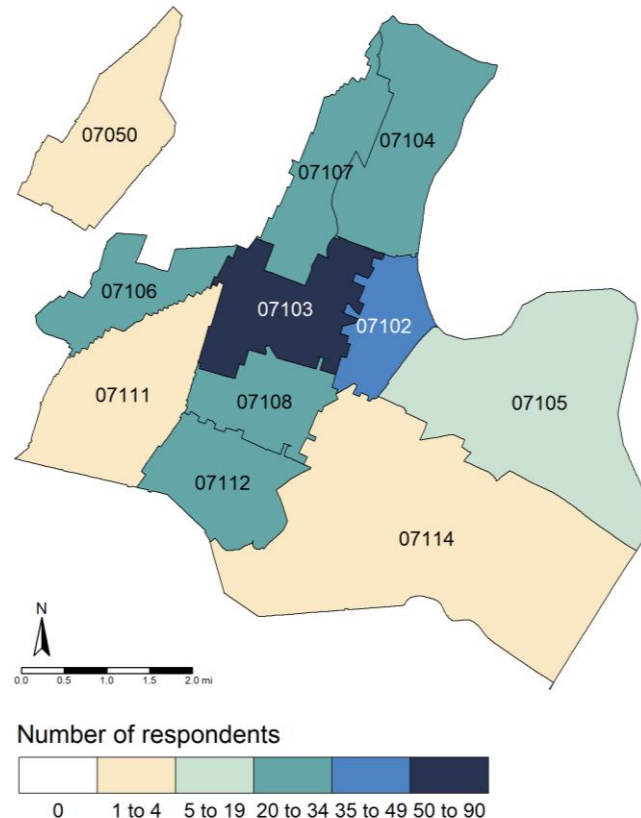
# Who are the vaccinated respondents? (n=291)

Nearly two-thirds of the vaccinated respondents were **female**, just under two-thirds (**62%**) were **African American or black**, and many were from **zip codes 07103 and 07102**.

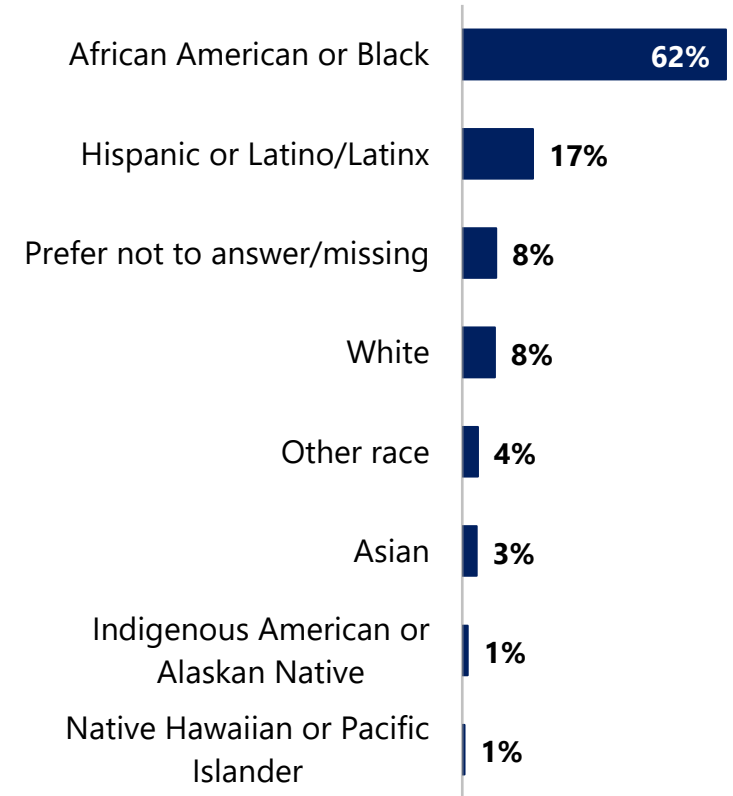
**Gender**  
(Select all that apply)



**Where respondents live (by zip code)**



**Race/Ethnicity**  
(Select all that apply)



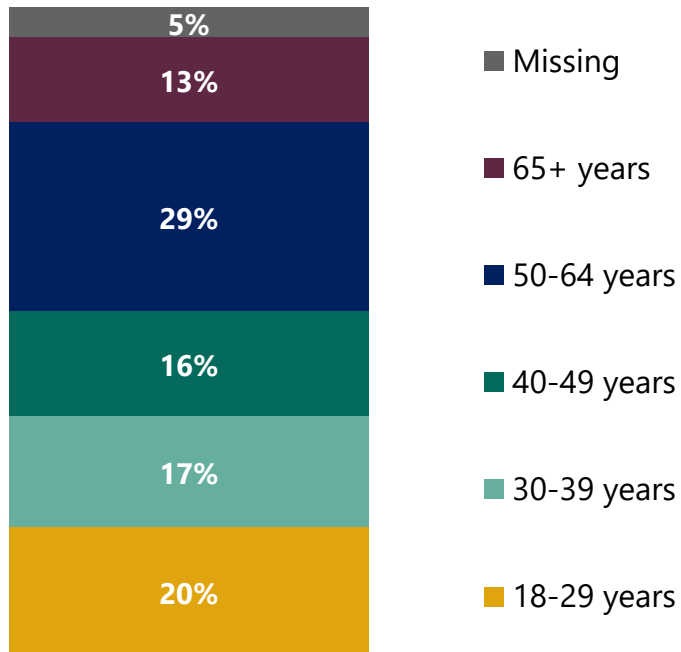
\*Survey questions 1, 10, and 11

From September data

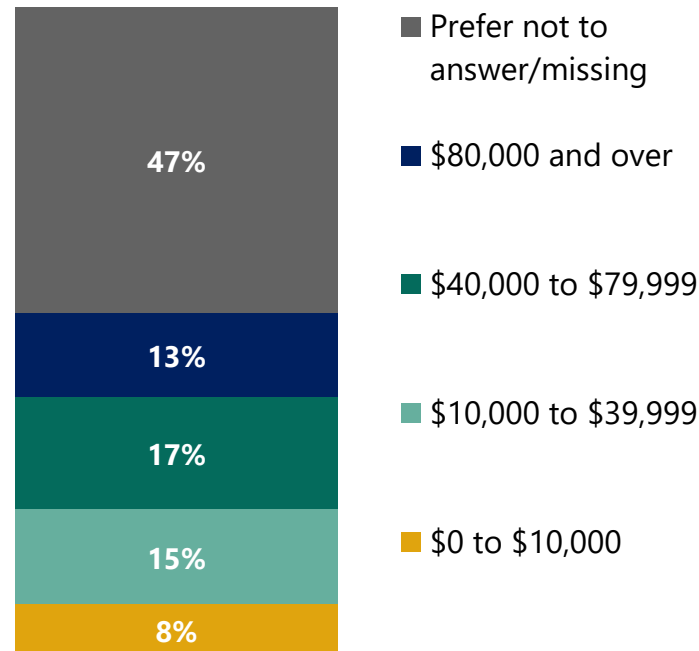
# Who are the vaccinated respondents? (n=291)

The largest share of vaccinated respondents were **50-64 years old (29%)** and **almost half (45%) have a bachelor's or 4-year degree, or higher.\*\***

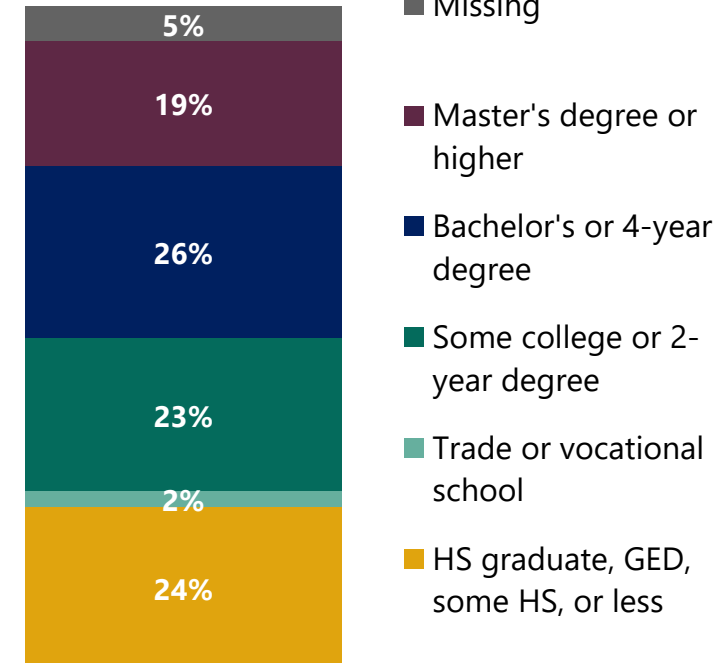
Age



Income



Education



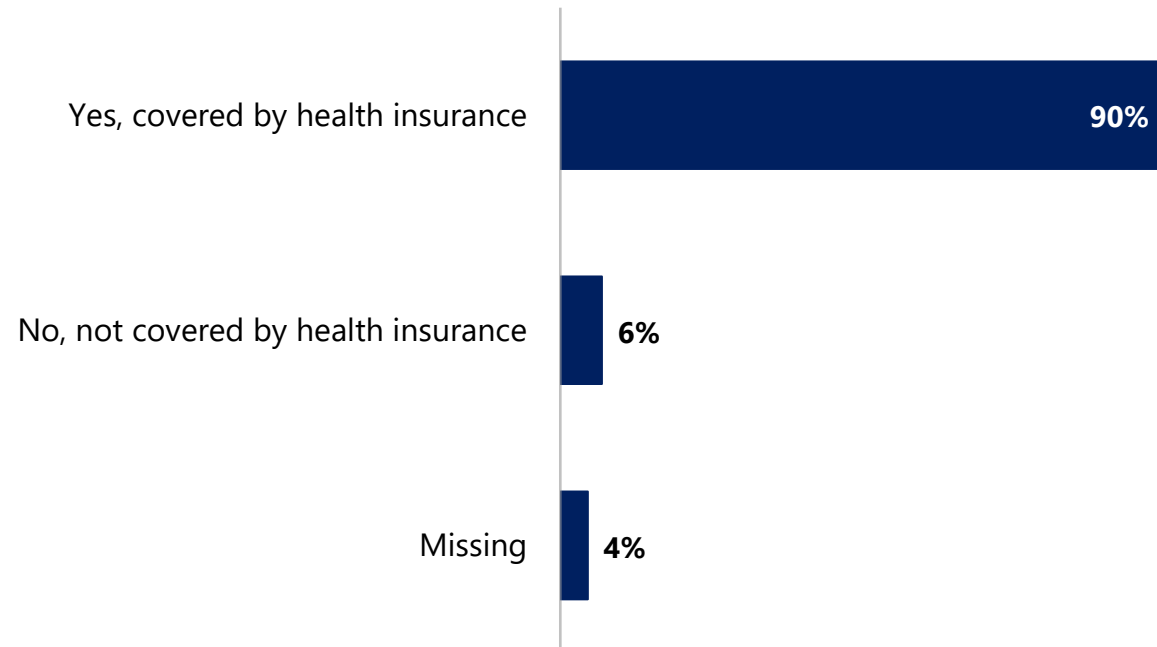
\*Survey questions 9a, 12, and 13. \*\*With such a high % of missing income responses it is difficult to accurately describe the typical income of a vaccinated respondent in this wave.

From September data

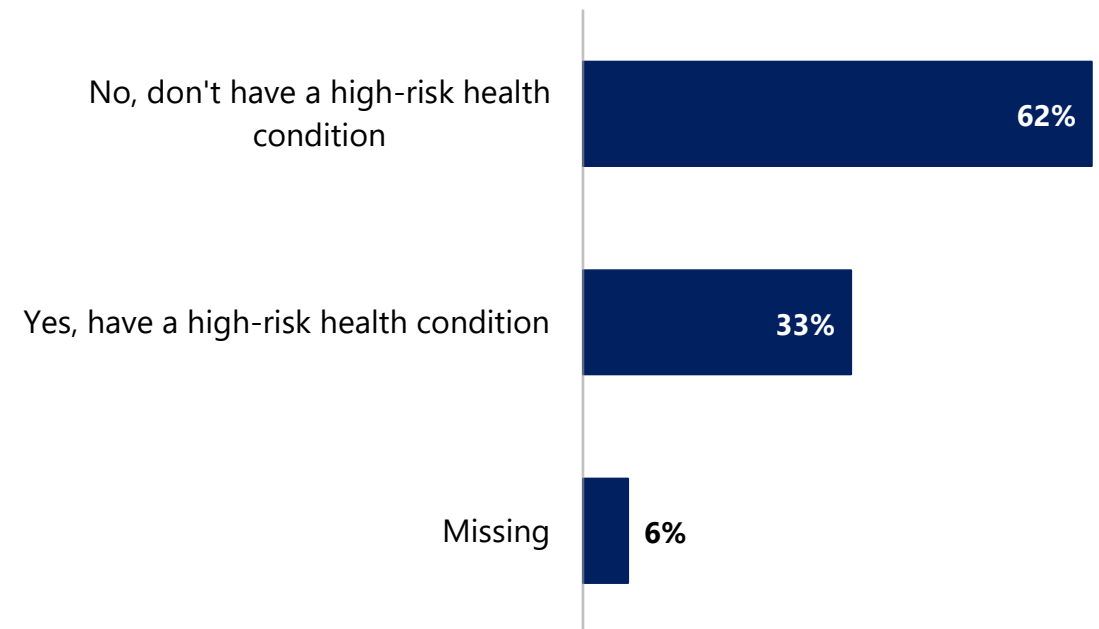
# Who are the vaccinated respondents? ( $n=291$ )

**Most** respondents (**90%**) are covered by **health insurance** and **almost two-thirds (62%)** have **no high-risk health conditions**.

## Health insurance coverage



## High-risk medical conditions\*\*



\*Survey questions 14 and 15

\*\*High-risk medical conditions include smoking, heart conditions (including high blood pressure), diabetes, obesity, lung disease (including asthma or COPD), kidney disease, cancer, pregnancy, sickle cell disease, HIV, other chronic diseases, or any condition that impairs your immune system.

From September data

# Among vaccinated respondents (n=291)

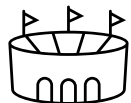
## ACCESS



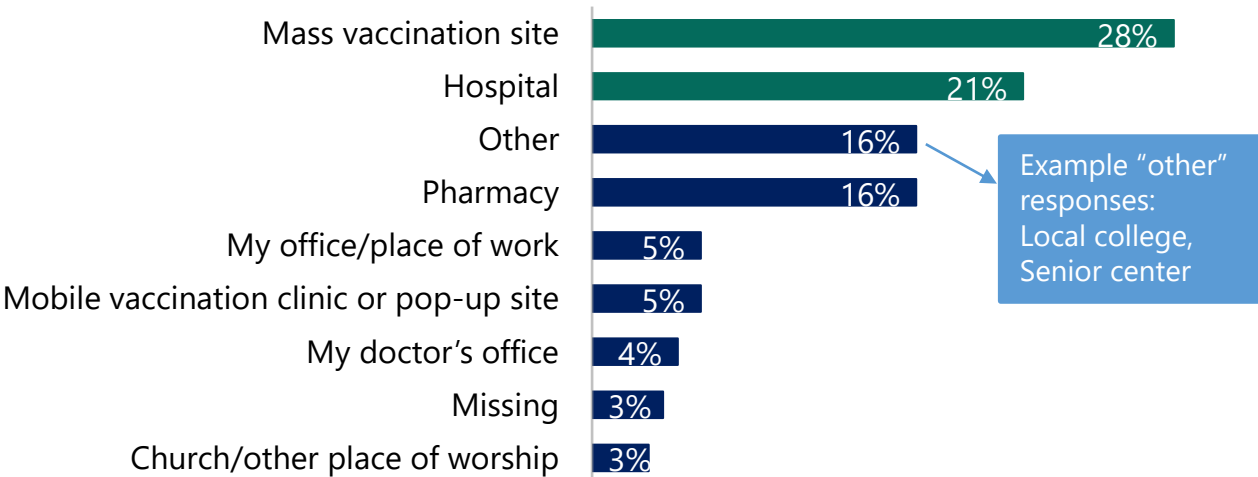
87% of respondents found it **very easy or somewhat easy** to **make an appointment** to receive the vaccine.



Over **three quarters** of respondents (77%) said that it took **less than 20 minutes to get to a vaccine location**.



Nearly half of the respondents received their vaccine at a **mass vaccination site (28%) or hospital (21%)**.



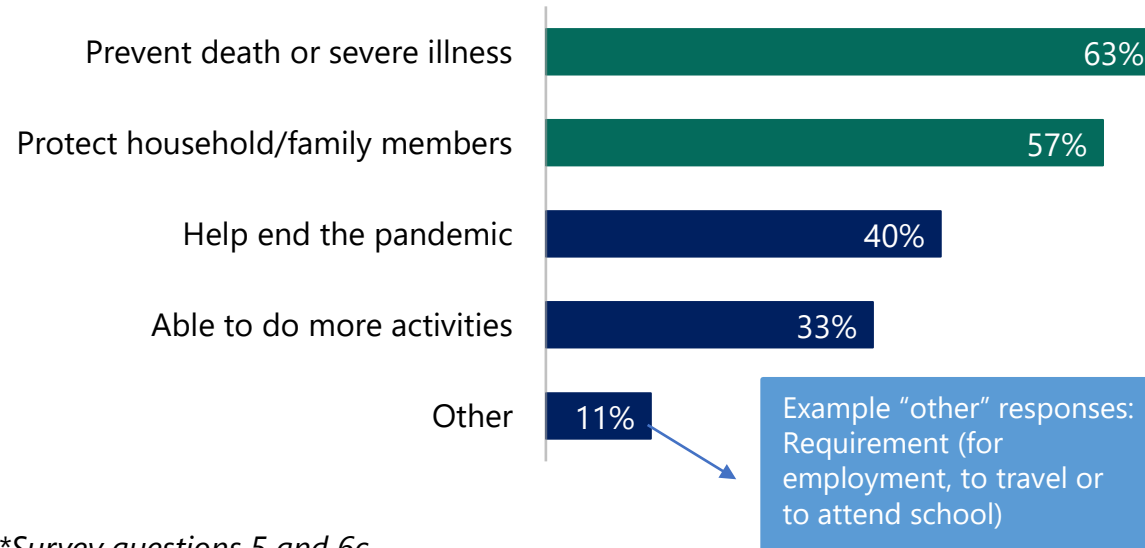
## MESSENGERS AND MOTIVATORS



The top three most trusted sources of information for vaccinated respondents included **doctors/healthcare providers (60%), scientists (48%), and the CDC (47%)**.



Over half of the respondents received the vaccine to **prevent death or severe illness (63%) and to protect their household (57%)**.



\*Survey questions 3, 3b, and 4

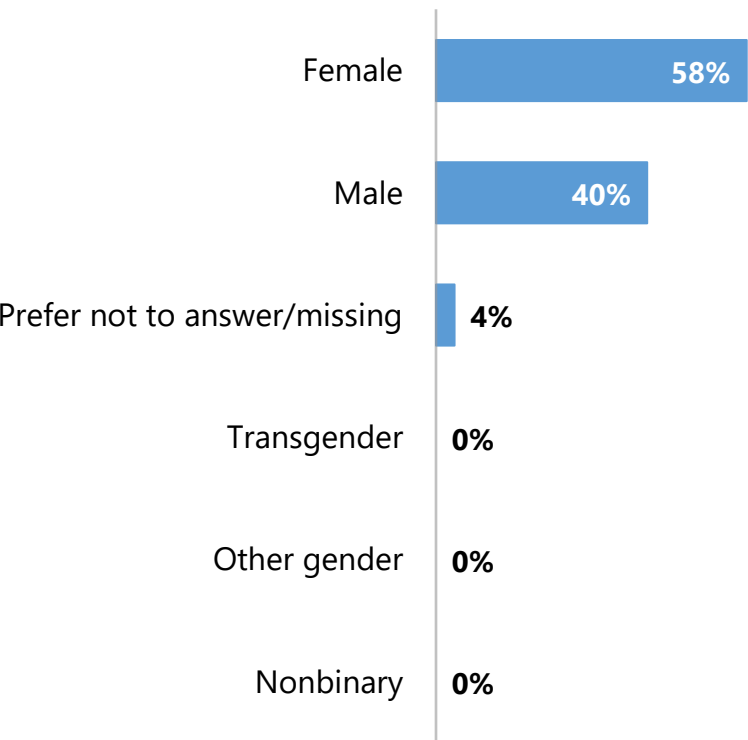
\*Survey questions 5 and 6c

# Who are the unvaccinated respondents? (n=86)

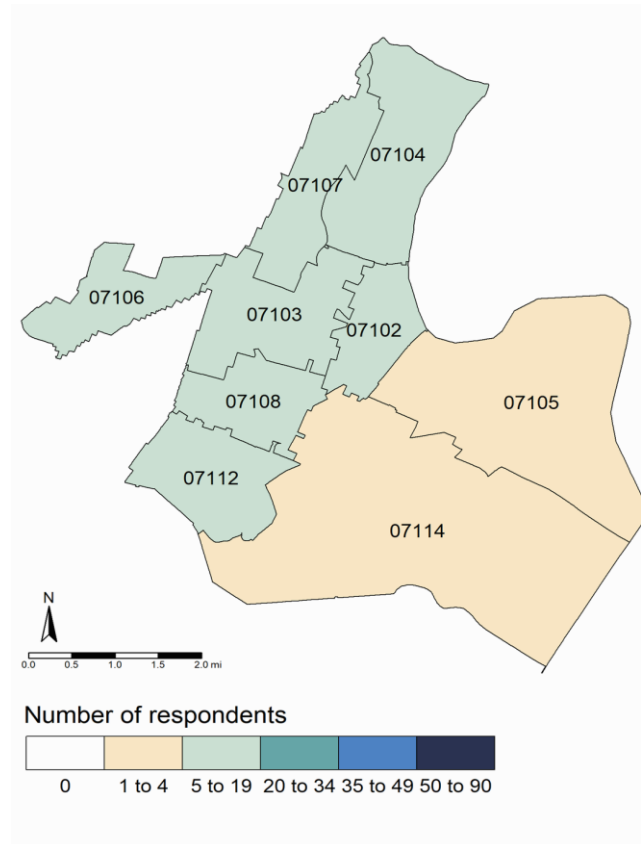
From September data

Nearly **60%** of the unvaccinated respondents were **female** and **almost two-thirds** were **African American or Black**.

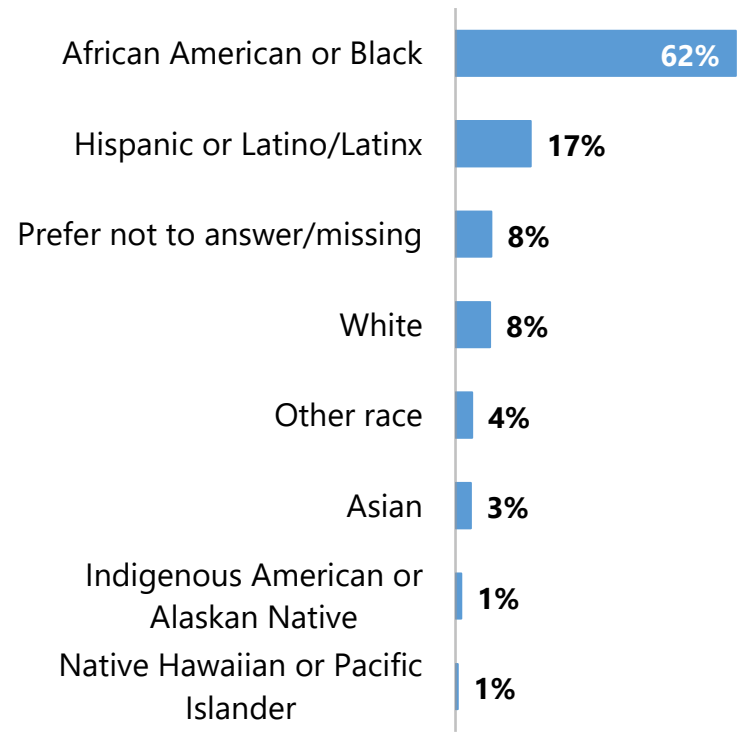
**Gender**



**Where respondents live (by zip code)**



**Race/Ethnicity**



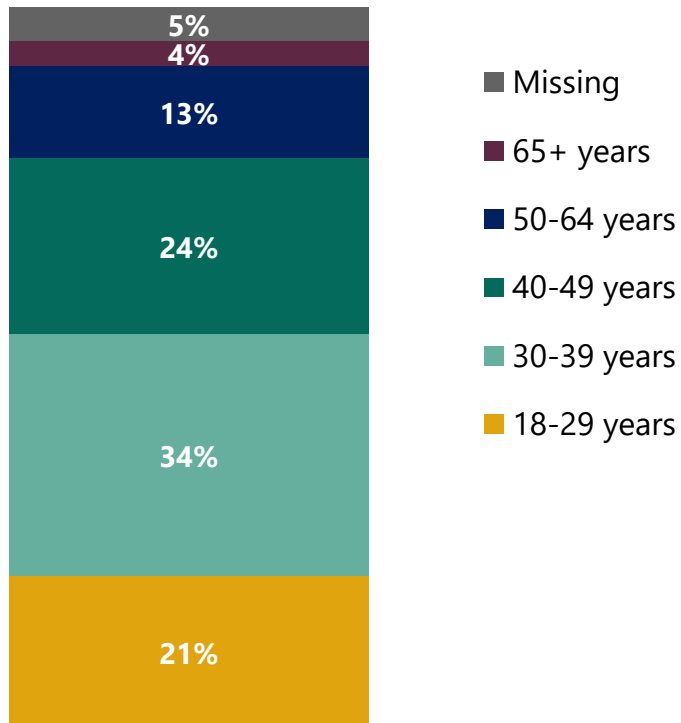
\*Survey questions 1, 10, and 11

# Who are the unvaccinated respondents? (n=86)

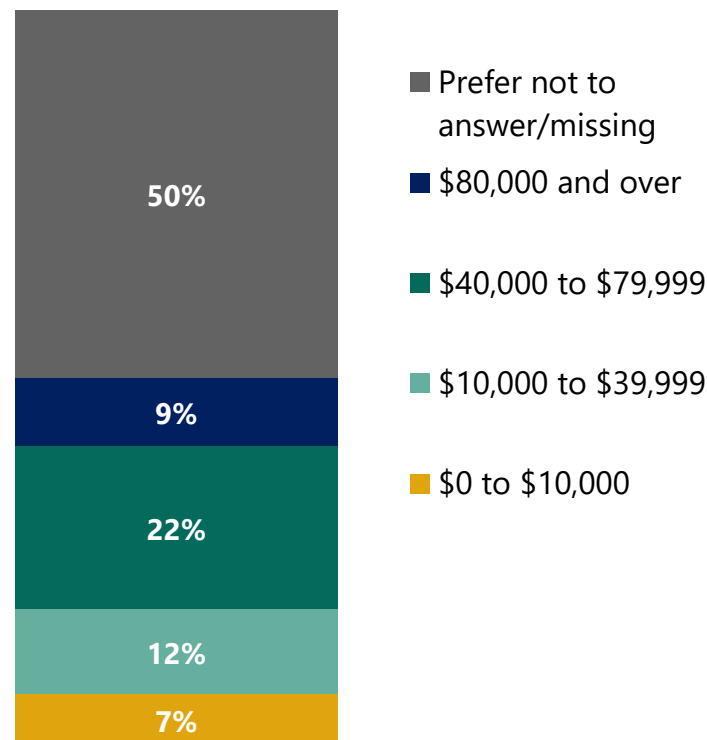
From September data

The largest share of unvaccinated respondents were **30-39 years old (34%)**. **Over one-third** had a **HS graduate degree/GED or less (36%)** and **about one-third** had **some college or 2-year degree (33%)**.\*\*

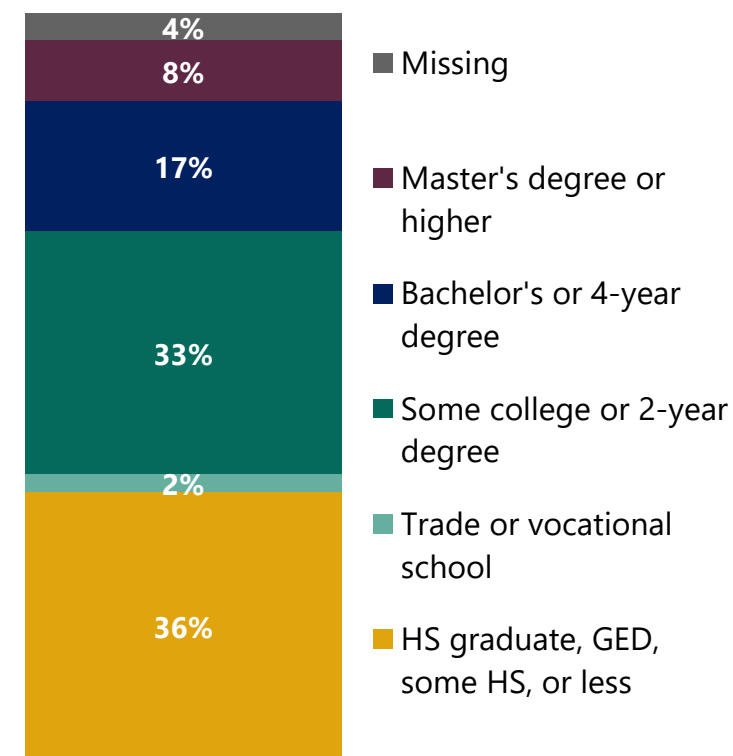
Age



Income



Education



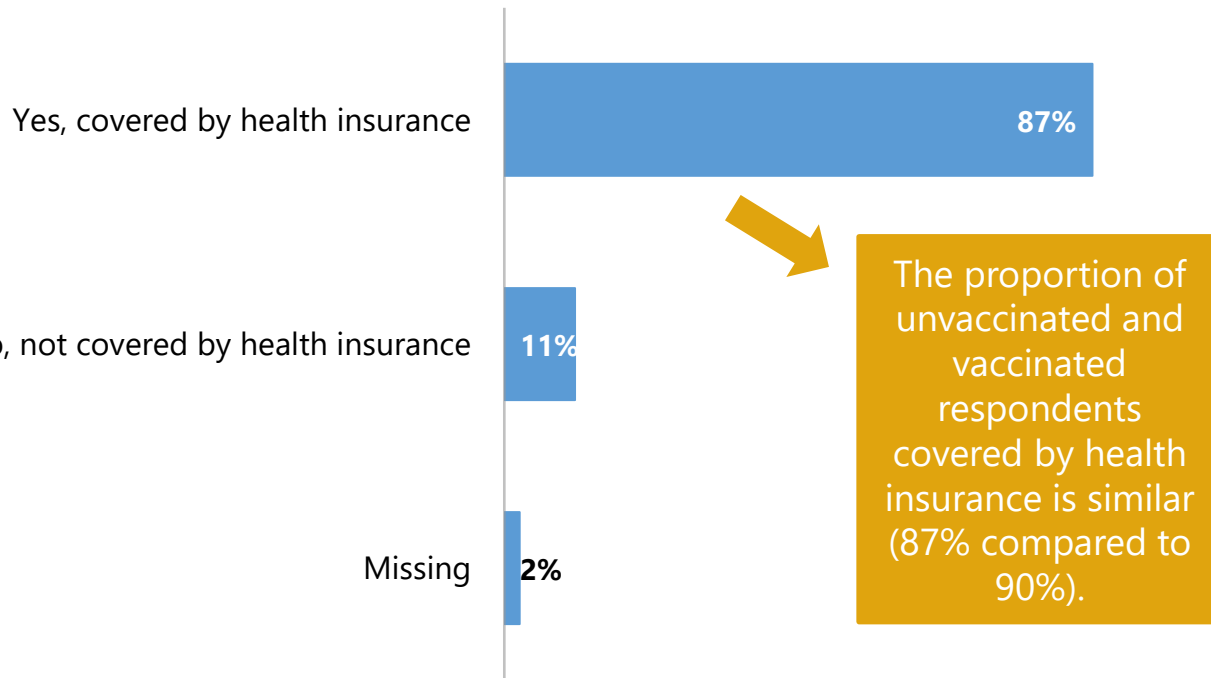
\*Survey questions 9a, 12, and 13. \*\*With such a high % of missing income responses it is difficult to accurately describe the typical income of an unvaccinated respondent in this wave.

From September data

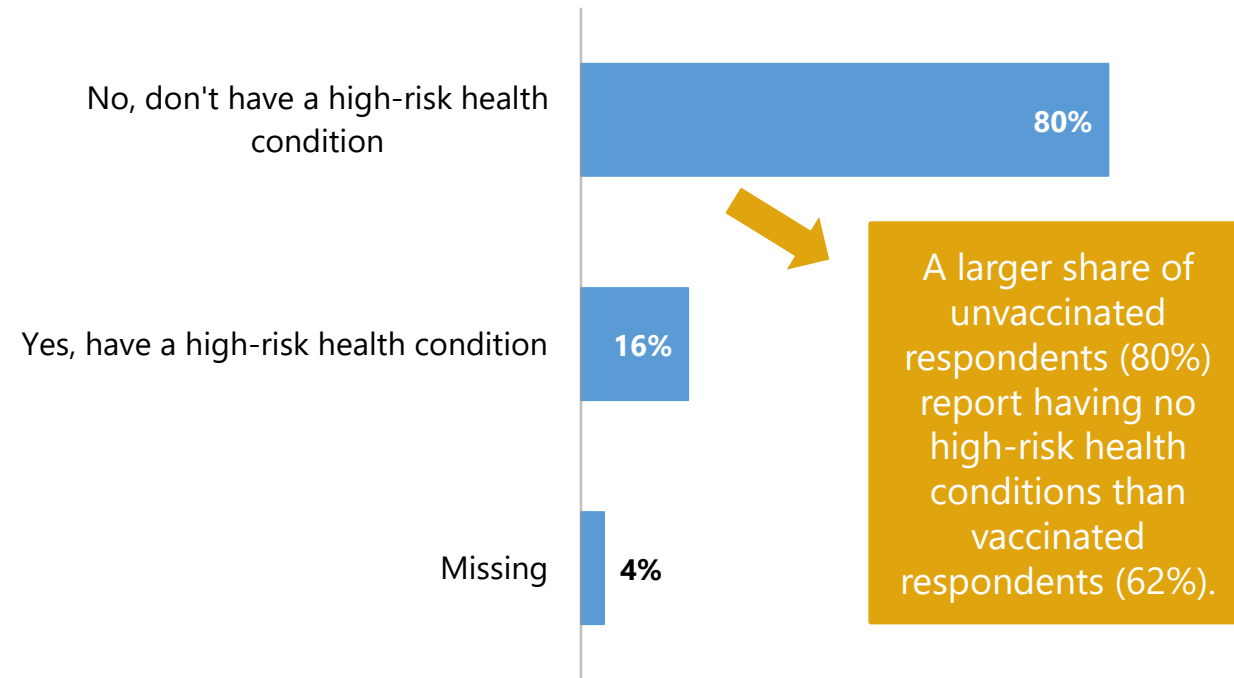
# Who are the unvaccinated respondents? (n=86)

**Most** respondents are covered by **health insurance (87%)** and **don't have high-risk health conditions (80%)**.

## Health insurance coverage



## High-risk medical conditions\*\*



\*Survey questions 14 and 15

\*\*High-risk medical conditions include smoking, heart conditions (including high blood pressure), diabetes, obesity, lung disease (including asthma or COPD), kidney disease, cancer, pregnancy, sickle cell disease, HIV, other chronic diseases, or any condition that impairs your immune system.

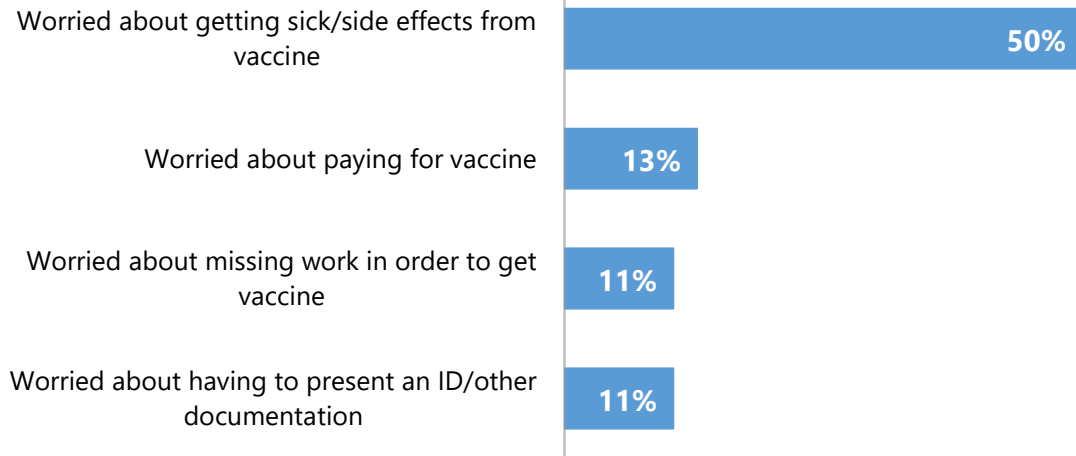
From September data

# Among unvaccinated respondents (n=86)

## BARRIERS



Half of the unvaccinated respondents are **worried about getting sick or having side effects from the vaccine (50%)**.

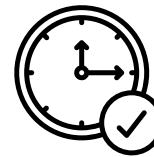


## ENABLERS

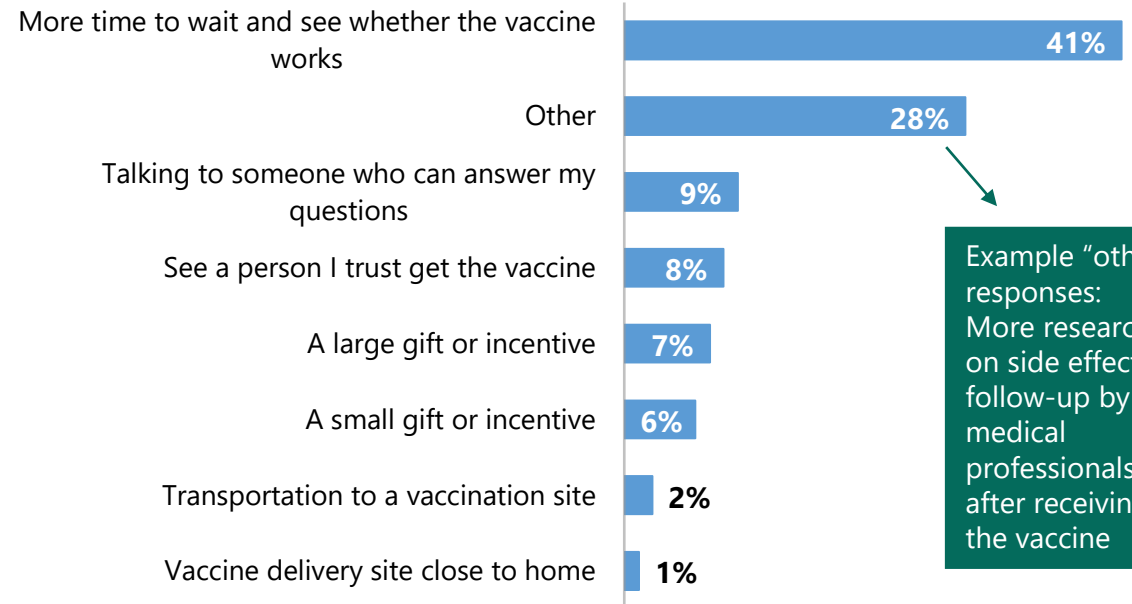


Over two-thirds of unvaccinated respondents knew **where to get information about scheduling a vaccine appointment (69%)** and **almost three-quarters knew where to get a vaccine (72%)**.

## MOTIVATORS



Overall, unvaccinated respondents do not report many motivators towards getting the vaccine. **41% reported needing more time to see whether the vaccine works before receiving it themselves.**



Example "other" responses:  
More research on side effects, follow-up by medical professionals after receiving the vaccine



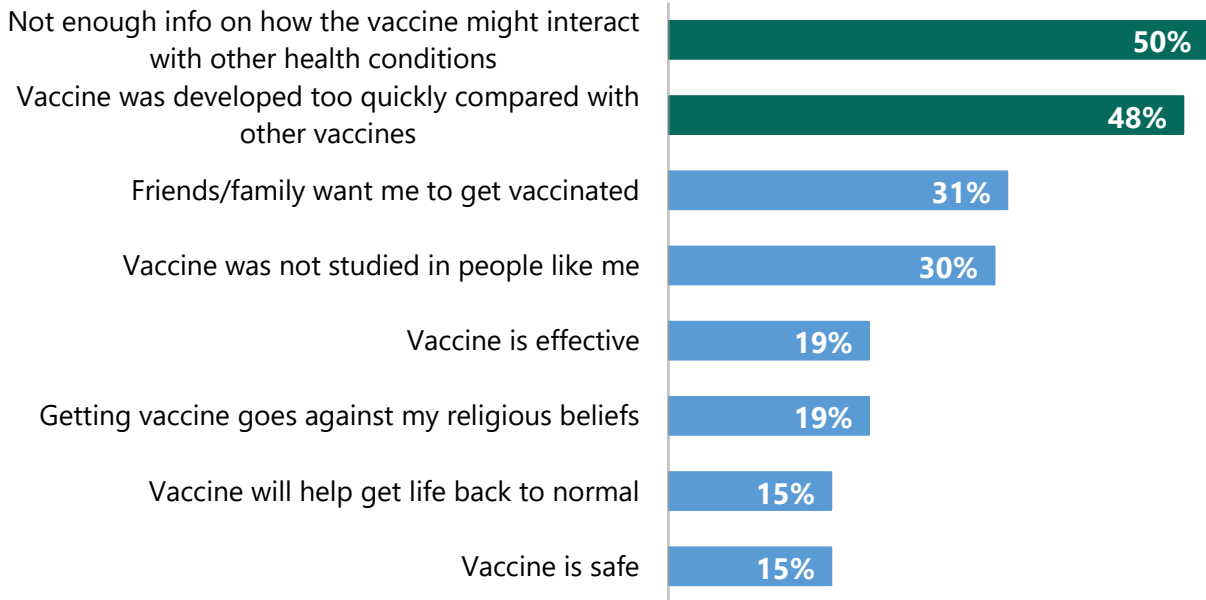
From September data

# Among unvaccinated respondents (n=86)

## BELIEFS



**Half** of unvaccinated respondents believe that there is **not enough information on how the vaccine might interact with other health conditions (50%)** and **nearly half** believe the **vaccine was developed too quickly compared with other vaccines (48%)**.

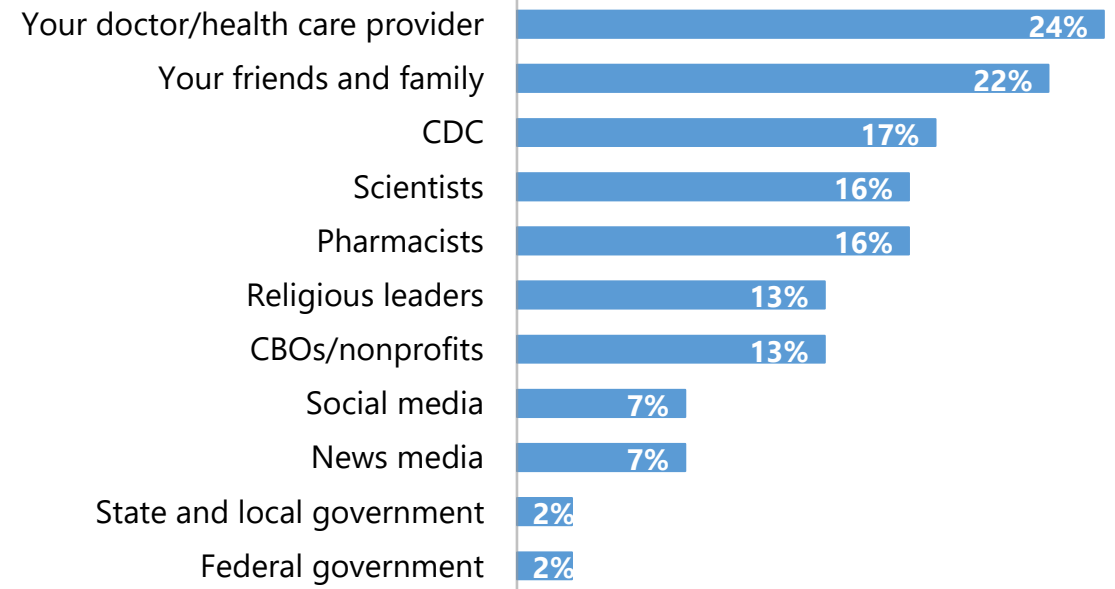


\*Survey question 7

## TRUSTED MESSENGERS



Trust among the various listed sources for information about the vaccine is relatively low amongst unvaccinated respondents, with **less than one-fourth trusting any of the listed messengers a great deal**.



\*Survey questions 8

# Differences between “types” of unvaccinated respondents

From September data

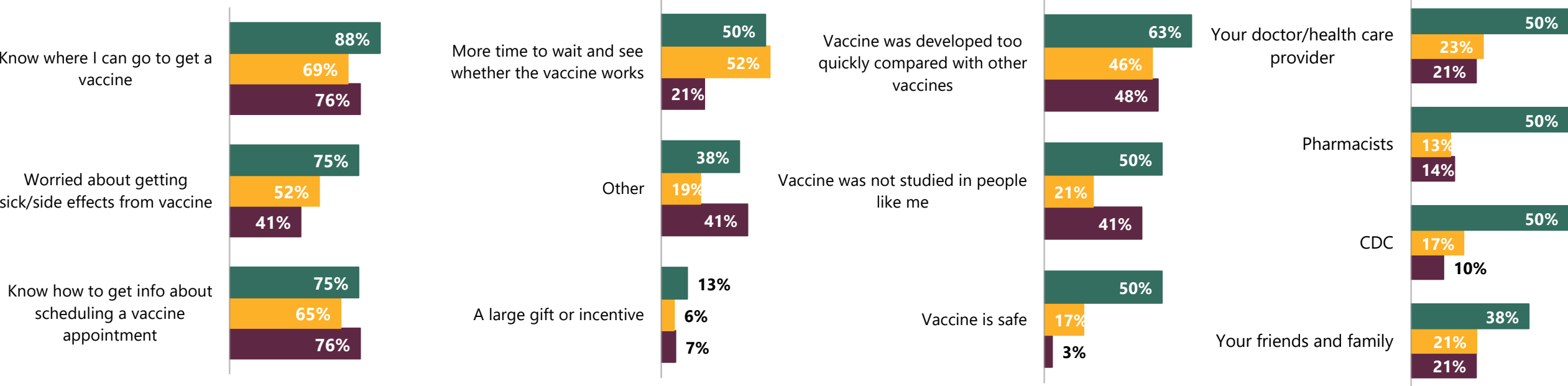
- About half the unvaccinated respondents who **intend to get the vaccine or are undecided** report that **more time to wait and see if the vaccine works** would **motivate them**, while those who **do not intend** to get the vaccine are **less likely to be motivated by more time**.
- Only a small share of respondents who are **undecided** (17%) or **do not intend** to get the vaccine (3%) believe the vaccine is safe.
- Respondents who are **undecided** or **do not intend** to get the vaccine have low trust in all listed sources of information for the vaccine.

## BARRIERS & ENABLERS

## MOTIVATORS

## BELIEFS

## TRUSTED MESSENGERS



Legend: ■ Will definitely get vaccine (n=8) ■ Undecided about vaccine (n=48) ■ Do not intend to get vaccine (n=29)

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

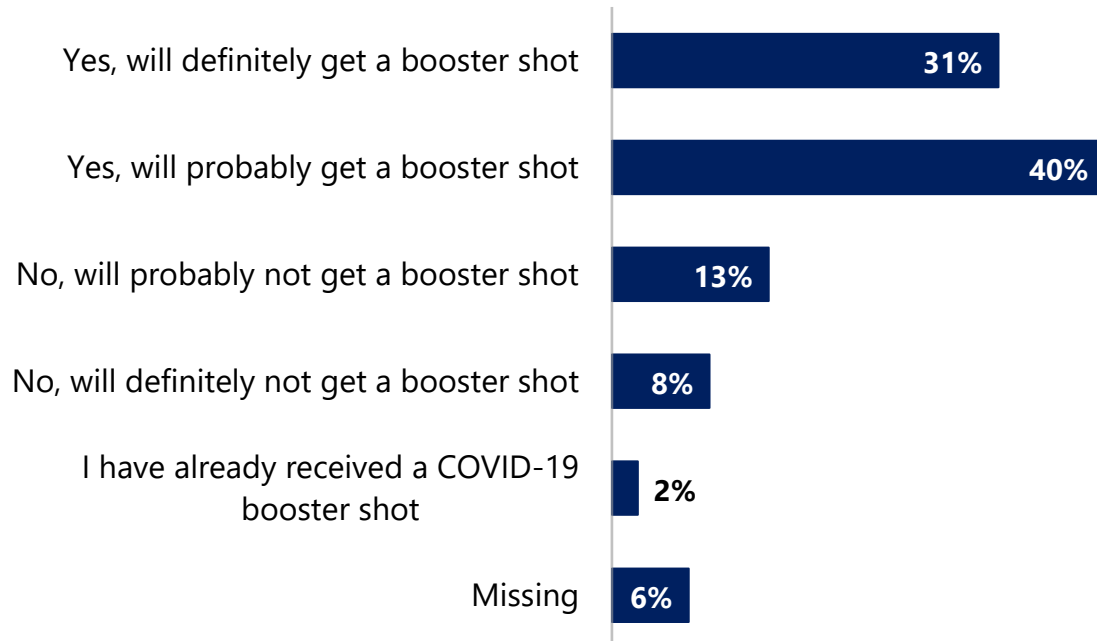
From September data

# Attitudes Towards Booster Shot

## VACCINATED RESPONDENTS



Just under one-third of vaccinated respondents **intend on getting a booster shot (31%)**, and just over half are **undecided (53%)**.

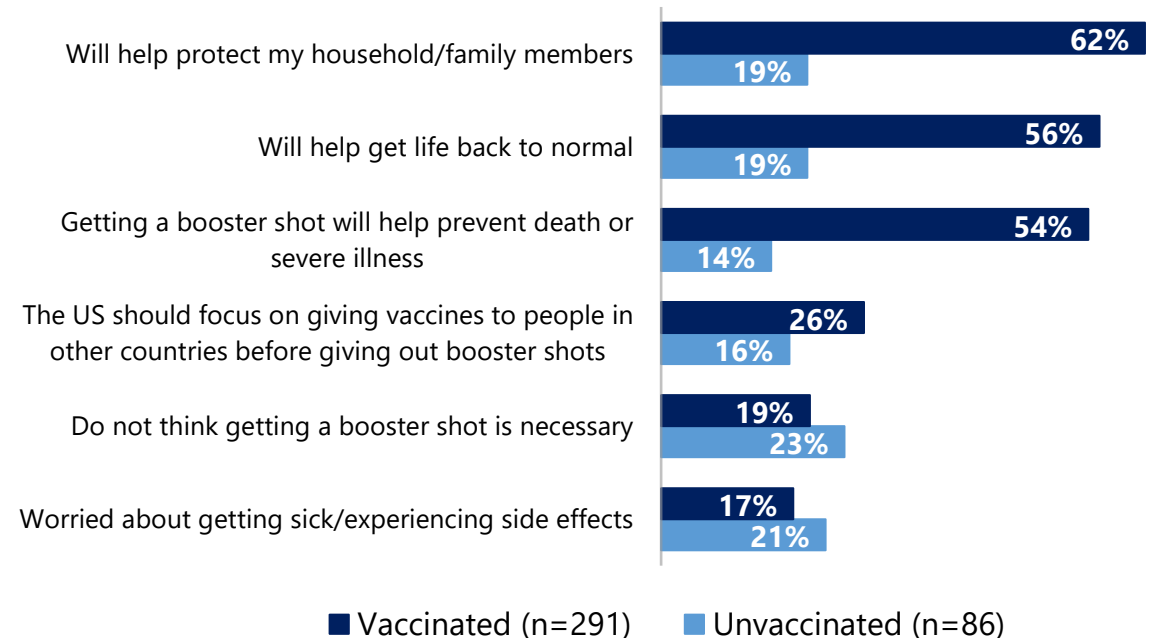


\*Survey question 8.1

## ALL RESPONDENTS



Over half of vaccinated respondents agreed that **booster shots would help to protect household/family members, help get life back to normal, and help prevent death or severe illness**. Few unvaccinated respondents shared these beliefs.



\*Survey question 8.2

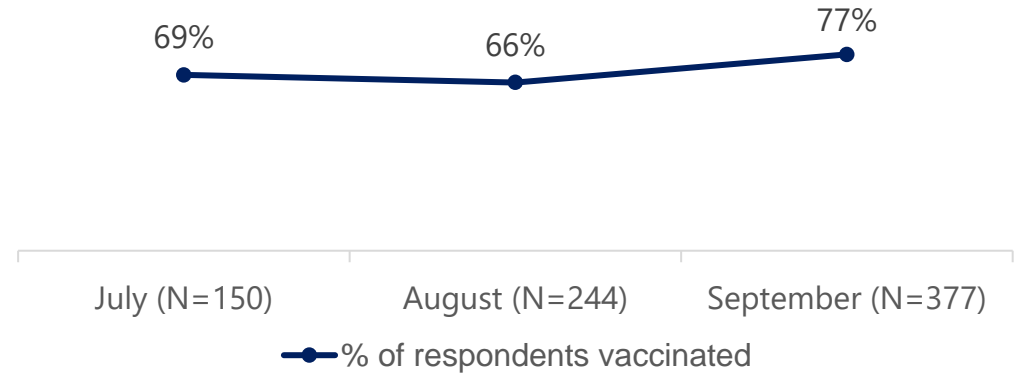
# Vaccination trends from August to September

From July, August & September data

The vaccination rate among the sample surveyed in September was 11 percentage points higher than the sample surveyed in August.



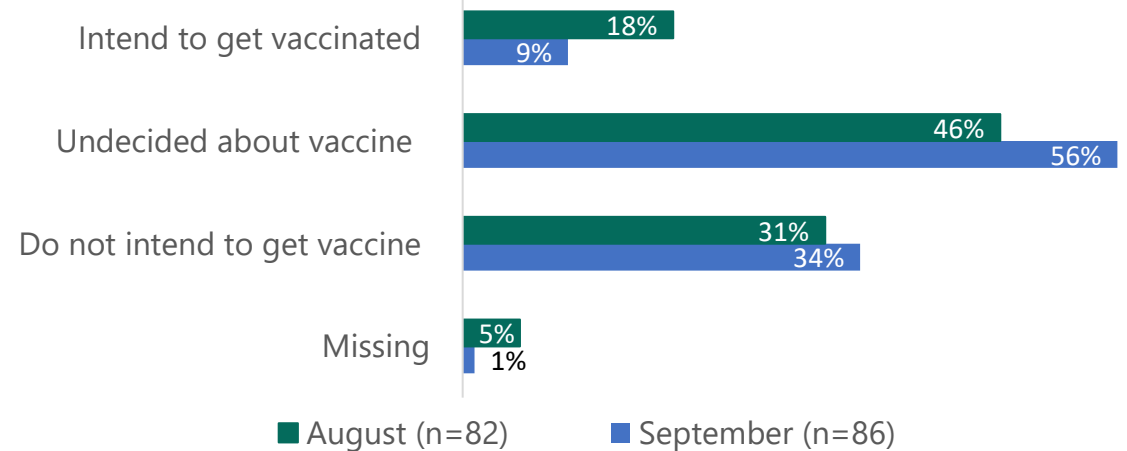
Vaccination rate



Unvaccinated respondents surveyed in September were 9 percentage points less likely than those in August to report that they intend to get the vaccine and 9 percentage points more likely to be undecided about getting the vaccine.



Intent to get vaccinated

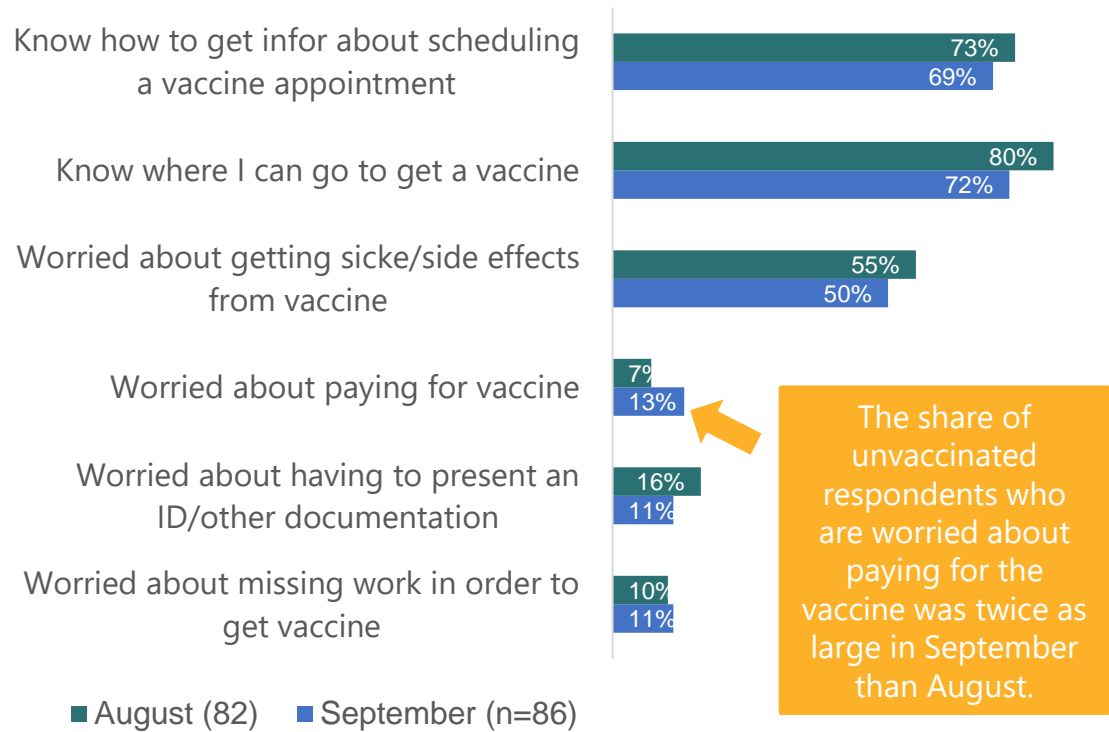


# Trends in barriers and beliefs from August to September

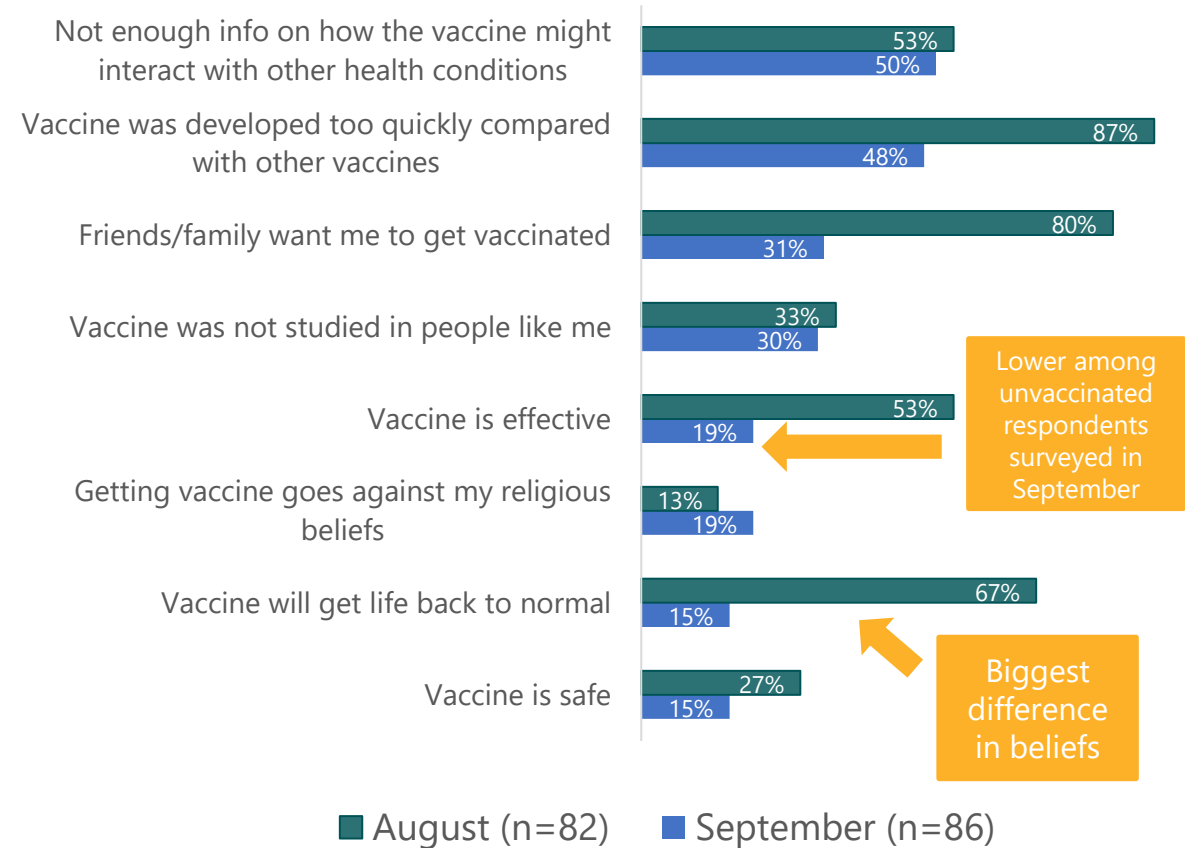
From August & September data

The top barriers reported by unvaccinated respondents have remained relatively consistent between August and September, although there were a few differences. However, it is important to not over interpret these differences given the small sample size.

## Barriers



## Beliefs



\*Survey questions 6b and 7

# Summary and potential actions

From September data

## KEY TAKEAWAYS

### VACCINATED RESPONDENTS



Majority found it easy to schedule and travel to vaccine appointments



Motivated to get the vaccine to protect loved ones and prevent illness or death



Trust their doctors, scientists, and the CDC the most for their vaccine information



Most would consider getting the booster shot



## POTENTIAL MESSAGING & OUTREACH STRATEGIES



Continue to promote discussions about the ease of access to, and safety of the vaccine. Promote messages to inform people that even though vaccinated people can still get COVID, **the chances are lower than unvaccinated individuals**. Additionally, being vaccinated **reduces the risk of severe illness and hospitalization**.



**Support doctors and healthcare providers** in having compassionate conversations about the vaccine.



Encourage discussions between vaccinated and unvaccinated individuals that focus on sharing how vaccines **save lives and prevent serious illness**.

# Summary and potential actions

From September data

## KEY TAKEAWAYS

### UNVACCINATED RESPONDENTS



The majority are **not very motivated** to receive the vaccine and several responded that they **need more time to see if the vaccine works**.



Unvaccinated respondents **do not trust most of the listed sources of information** of the vaccine



Are worried about **getting sick/experiencing side effects** from the vaccine.



Need more information on how the vaccine interacts with other health conditions



Believe the vaccine was developed too quickly



## POTENTIAL MESSAGING & OUTREACH STRATEGIES



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



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



Continue to **encourage vaccinated community members** to have **conversations with friends and family who are not vaccinated**. Also, provide guidance on **messages** vaccinated members should mention in their conversations, e.g., **experiences with any short-term side effects**.



Develop communication materials demonstrating how the testing and production process was **safely compressed into a shorter timeframe** based on decades of research and how the **clinical trials included underrepresented minorities, older age groups and people with other health conditions such as diabetes, obesity, heart, and respiratory conditions**.

# Newark: Supplemental Data Slides

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



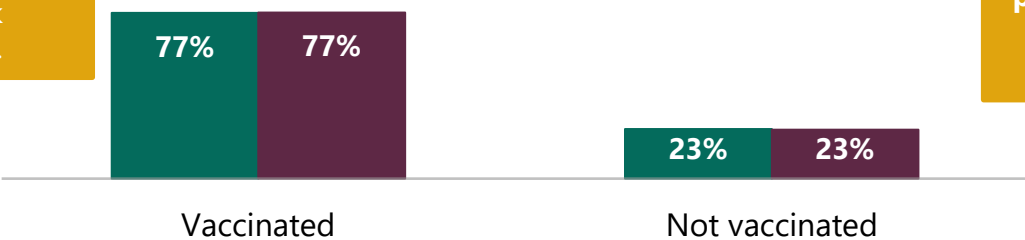
From September data

# Survey respondent demographics vs. Newark city BIPOC demographics

## Vaccination status (at least one dose): Newark vs. Survey Sample (n = 377)

Survey respondents had the same vaccination rate as the Newark population.

The survey sample has a **11% higher female population** and **15% lower male population** than the Newark BIPOC population.



■ New Jersey COVID-19 Information Hub, Newark ■ Survey Sample

Note: Vaccination rates for Newark from the New Jersey COVID-19 Information Hub are not specific to the BIPOC population unlike other demographics shown in this slide.

## Gender: Newark vs. Survey Sample (n = 377)



■ Newark BIPOC census, 2019 ACS microdata ■ Survey Sample

## Age: Newark vs. Survey Sample (n = 377)



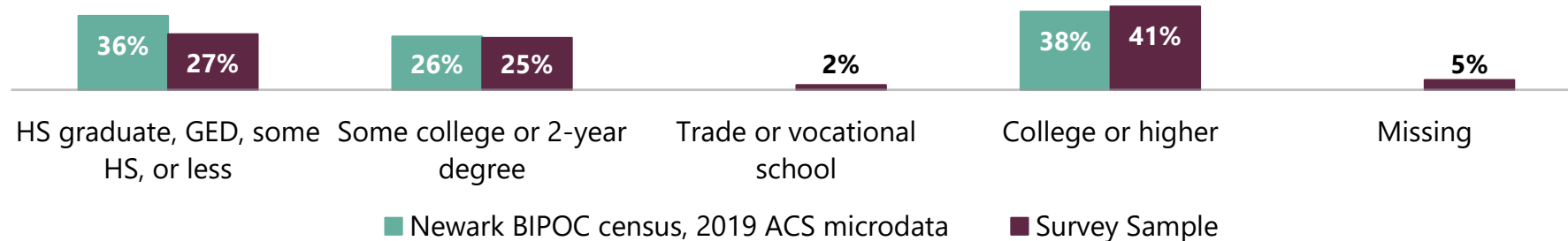
■ Newark BIPOC census, 2019 ACS microdata ■ Survey Sample

Compared to Newark's BIPOC population, the survey population has more **18-29-year-olds** and **50-64-year-olds**, but not as many **65+ year olds**.

From September data

# Survey respondent demographics vs. Newark city BIPOC demographics

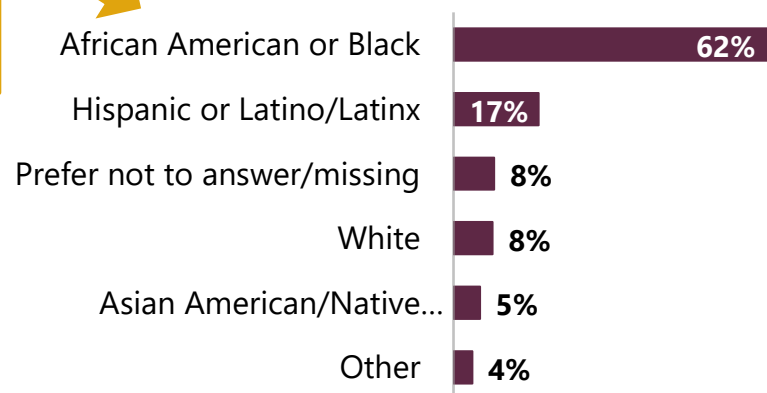
Education: Newark vs. Survey Sample (n = 377)



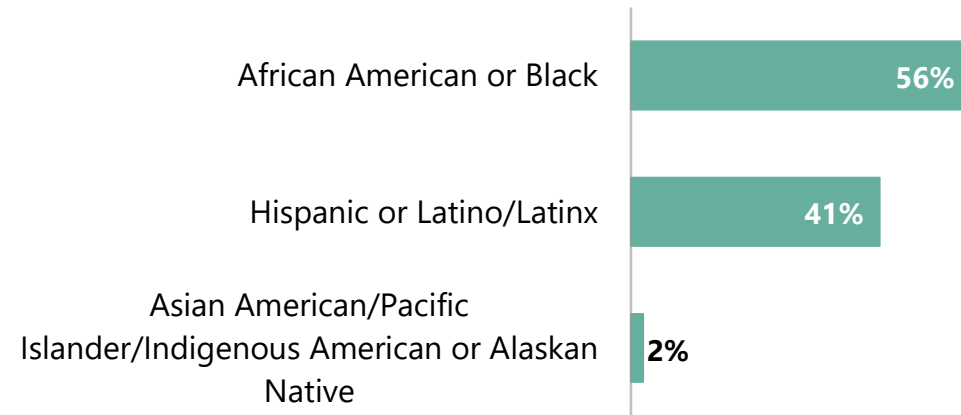
Survey respondents' education levels are very close to Newark's BIPOC population

Compared to Newark's BIPOC population, the survey sample has a smaller share of Hispanics/Latino/Latinx people.

Race/ethnicity: Newark vs. Survey Sample (n = 377)



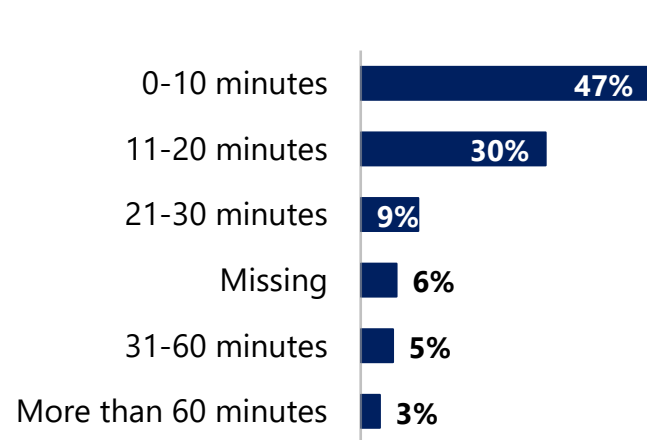
Newark BIPOC census, 2019 ACS microdata BIPOC race/ethnicity



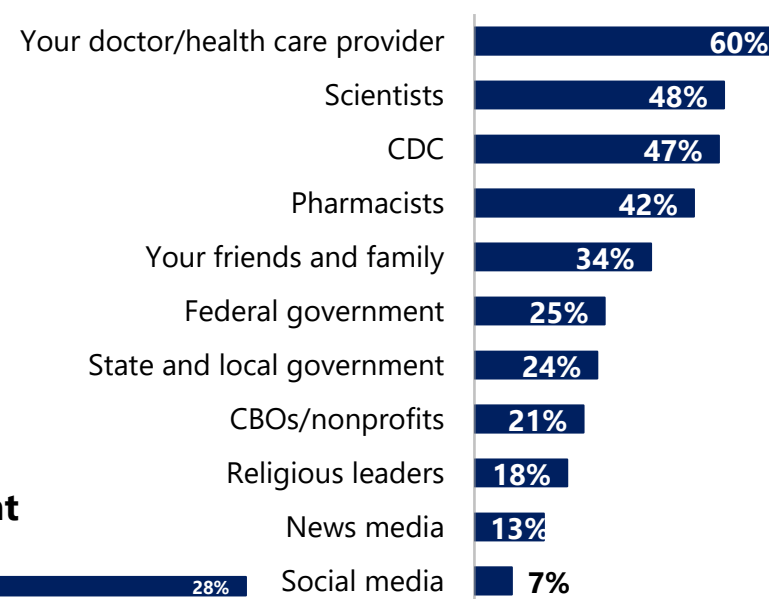
From September data

# Among vaccinated respondents (n=291)

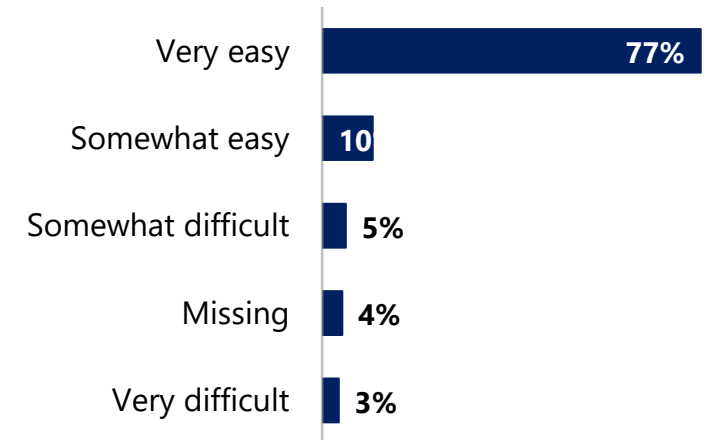
## Time taken to get vaccinated



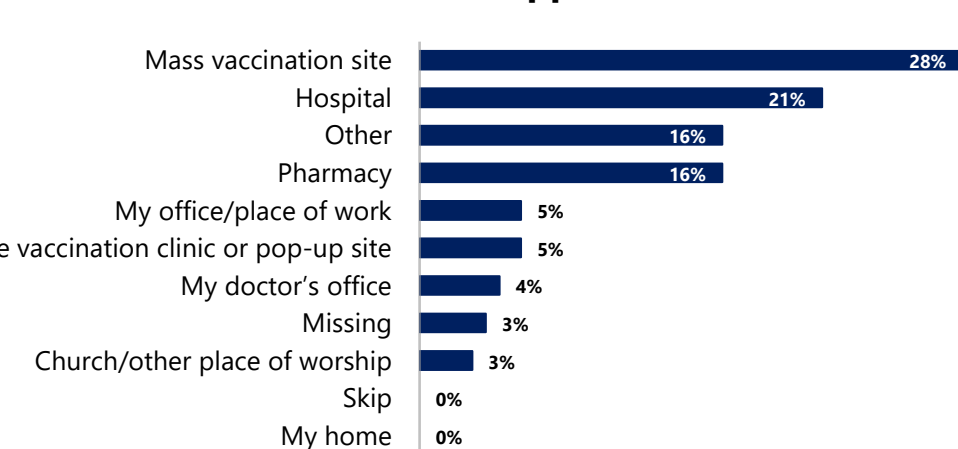
## Trusted messengers



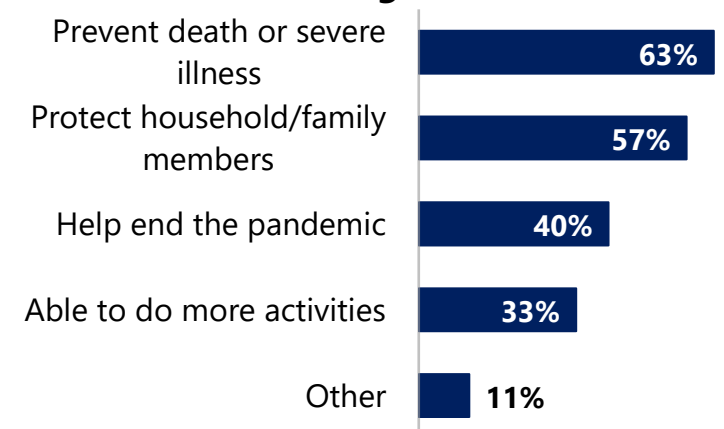
## Ease of getting an appointment



## Location of appointment



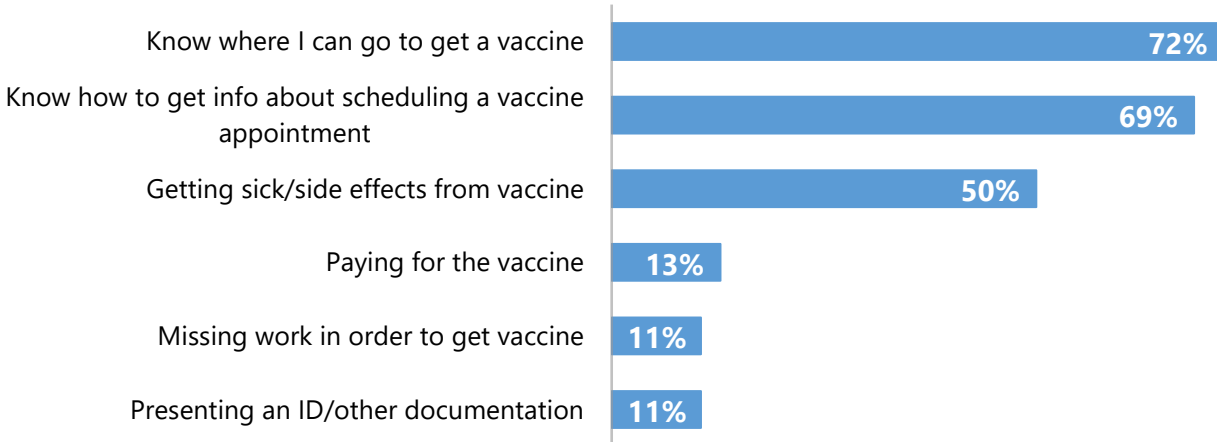
## Reason for becoming vaccinated



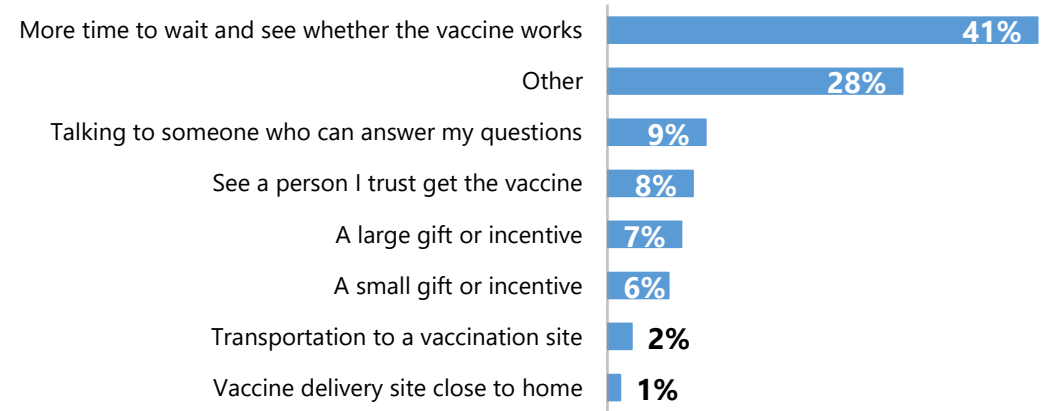
# Among unvaccinated respondents (n=86)

From September data

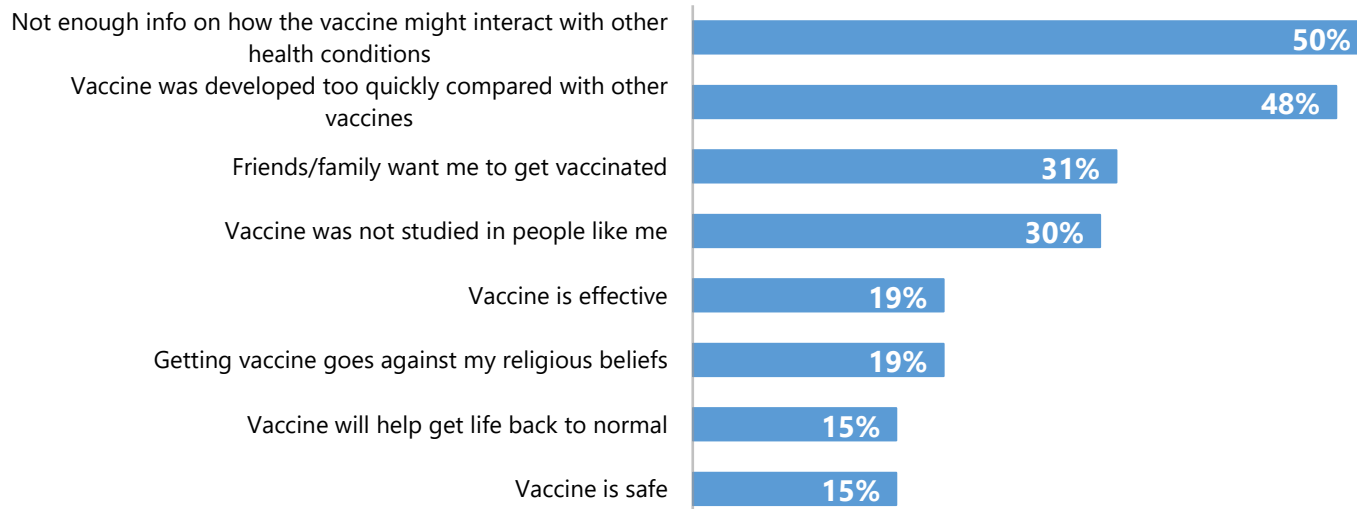
## Respondents worry about:



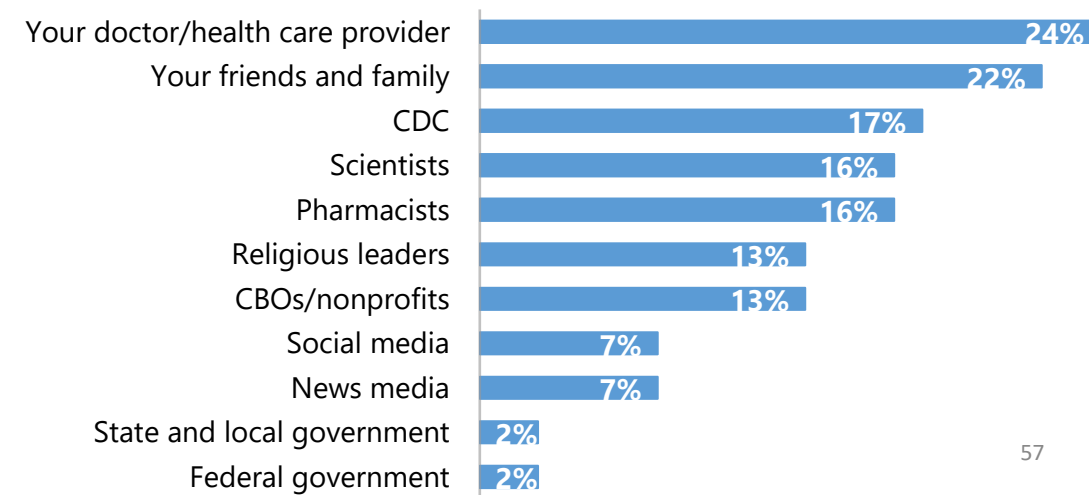
## Motivators to get the vaccine



## Respondents believe that:



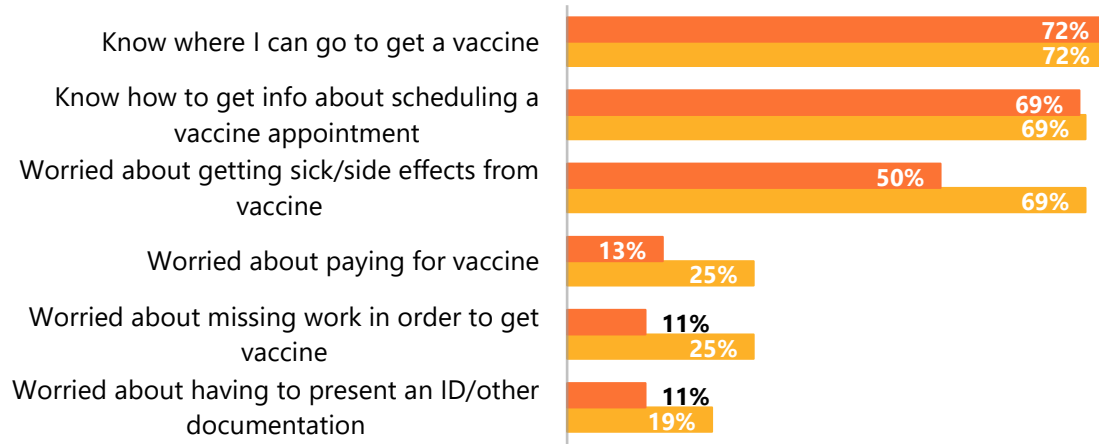
## Trusted messengers



# Supplemental slides

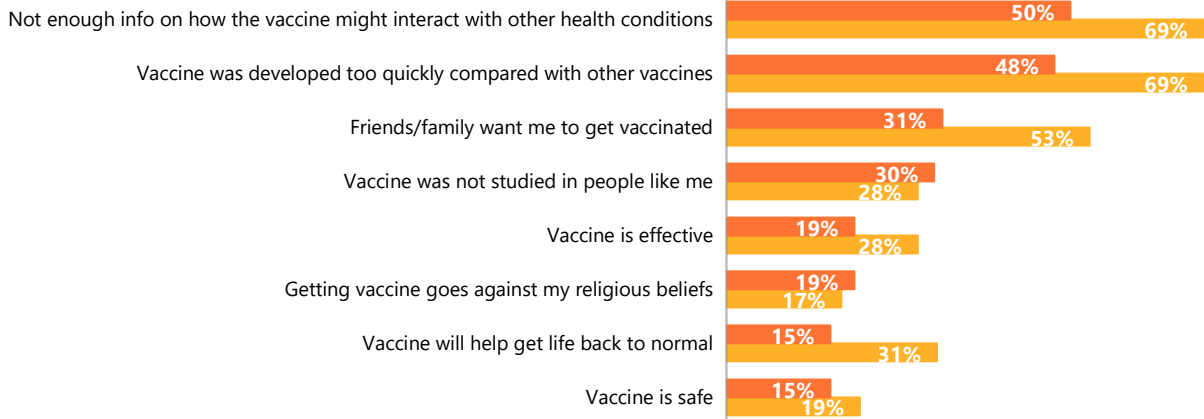
From September data

## Top Barriers



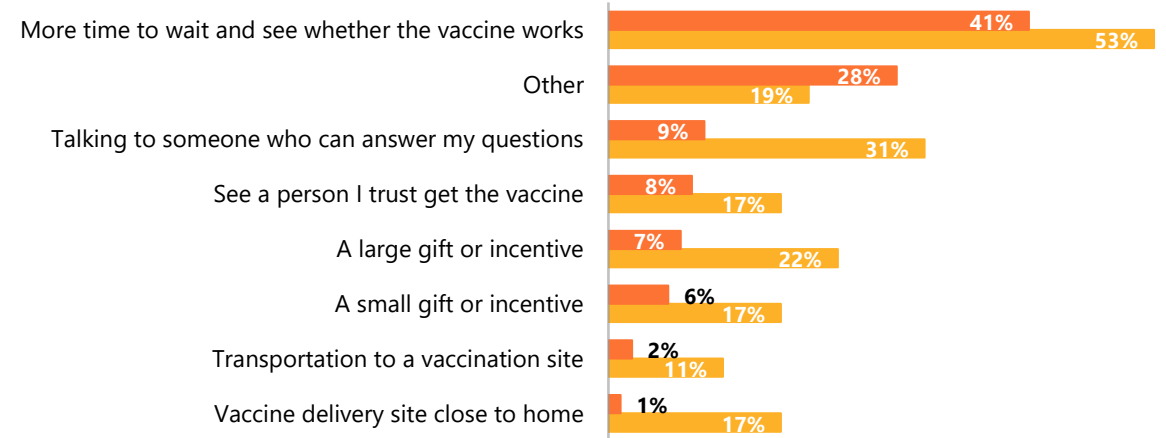
■ Newark (N=86) ■ Houston (n=36)

## Top Beliefs



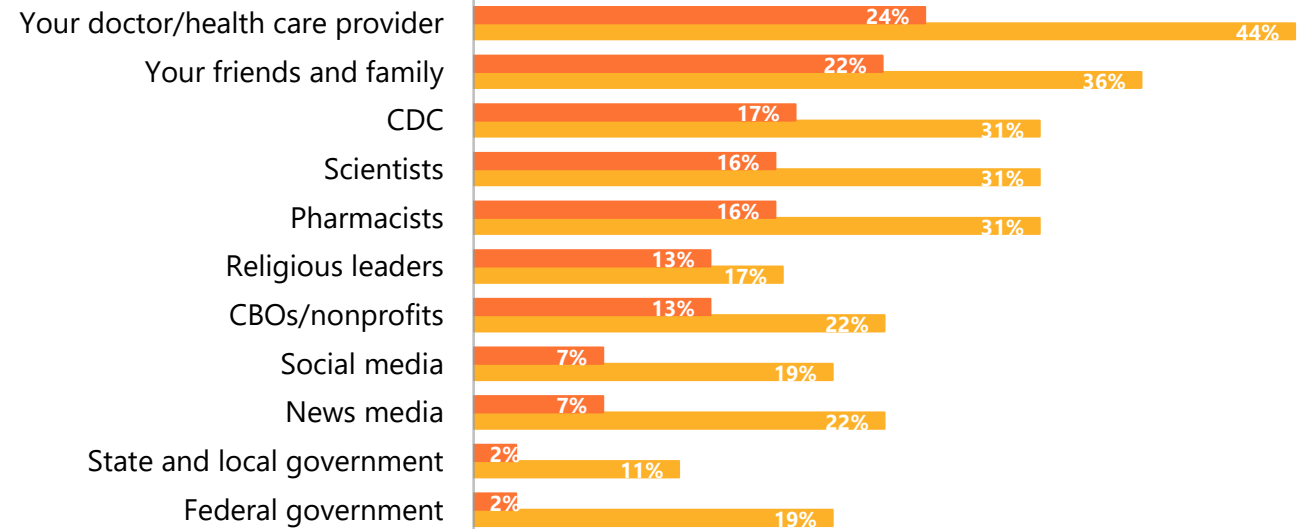
■ Newark (n=86) ■ Houston (n=36)

## Top Motivators



■ Newark (n=86) ■ Houston (n=36)

## Top Trusted Messengers



■ Newark (n=86) ■ Houston (n=36)

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