

# **COVID VACCINE REFUSAL IN READING**

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# About this report

This report sets out findings of a Healthwatch Reading project commissioned at the end of January 2022 by the Berkshire West Vaccination Action Group. The action group is run by Berkshire West NHS Clinical Commissioning Group (BWCCG), the body that funds and plans local health services for Reading, Wokingham and West Berkshire. The group's members include representatives of the CCG, local authority-based Public Health, GPs, primary care networks, hospital and community health providers and three local Healthwatch.

The action group wanted to understand why Reading has lower Covid vaccination rates than neighbouring areas and the national average, particularly among younger, working age adults and certain ethnic minority groups. At the launch of this project, nearly 50,000 people in Reading, aged 12 and over, had not yet come forward for Covid vaccination – around one-quarter of the eligible population.

This project had a tight deadline, so Healthwatch Reading chose a short online survey as the quickest method to capture feedback. Initially we launched it English, followed by translated versions in seven different languages. It was completed by 163 people over several weeks in February and March 2022. Concurrently, we facilitated online discussions on Facebook, involving 86 self-selecting participants who contributed 277 comments. We have included in this report anonymous excerpts of exchanges between people on the top themes they chose to discuss.

Our findings are timely, coming as the NHS launches in April 2022 a Spring booster campaign, continues its 'Evergreen' offer to people who've never come forward and as Reading Borough Council starts a Community Health Champions project to carry out targeted outreach with vaccine-hesitant people to overcome misinformation, build vaccine confidence and encourage people to come forward for their jabs.

## Executive summary

- **79%** of survey respondents had not had any dose of a Covid vaccine
- **68%** said they hadn't come forward for a Covid vaccine booster
- **76%** said concerns about vaccine side-effects had put them off coming forward
- **34%** said they hadn't come forward because Covid was now a mild disease
- **28%** said they thought they were 'covered' by previously having been infected with Covid
- **71%** said their mind was made up about not getting vaccinated
- **15%** said more information about vaccine safety could change their mind
- Most people who took part in Facebook discussions were against vaccinations
- The main points debated in online discussions were:
  - Is it a vaccine or gene therapy?
  - Young healthy people don't need the vaccine
  - Getting a vaccine should be like wearing a seatbelt
  - What is the true number of people who have died directly from Covid?

# Background information

## Vaccination roll-out

Reading, along with the rest of England, launched its Covid vaccination programme in December 2020. It started at five primary care network-led sites at GP surgeries and a community hall, targeting elderly and clinically vulnerable people.

A mass vaccination centre, overseen by Oxford Health NHS Foundation Trust, then opened at the Madejski Stadium in south Reading, in February 2021, widening vaccines to more adults.

In mid-June 2021, a temporary drop-in vaccine clinic ran for several weeks at Reading Civic Offices in the town centre for anybody living, working or studying in Reading. Pop-up sites began in mid-July, via an NHS Health on the Move van, starting with Reading's Oxford Road Community Centre.

When vaccines were approved for 12-15-year-olds, a school-based roll-out was launched in late September 2021, led by Berkshire Healthcare NHS Foundation Trust.

At the start of October 2021, the mass vaccination centre moved to Broad Street Mall in central Reading, offering a mix of booked or drop-in vaccinations, seven days a week. Some pharmacies had also signed up as local vaccine sites.

In March 2022, the NHS was planning a Spring booster campaign for elderly and vulnerable people, the launch of first doses for 5-11-year-olds and continuing an 'Evergreen' offer for anyone who hadn't come forward.

## Reading vaccine uptake

By 1 April 2022, 77% of eligible Reading people aged 12 and over, had received a first Covid vaccine dose, according to NHS data. This was fewer than in Wokingham and West Berkshire (89% each) and lower than the average of 85% for the NHS strategic planning area of Buckinghamshire, Oxfordshire and Berkshire West ('BOB').

Similarly, Berkshire Public Health data shows that between 8 December 2020 and 20 March 2022, 52% of eligible Reading people had had their first Covid doses and a booster, compared with 71% in Wokingham, 70% in West Berkshire and the national average of 59%. In the 50+ group (comprising the initial vaccine priority groups), Reading had vaccinated 79% of people, compared with the national average (85%). Only Slough has lower vaccine rates in Berkshire.

## Understanding hesitancy

Reading's diversity has been suggested as one reason for lower uptake rates. Around 25% of the population are Black, Asian, Mixed or in other minority ethnic groups.

In February and March 2021, Healthwatch Reading worked with the Reading Kenyan Association and ACRE (Reading's Alliance for Cohesion and Racial Equality) to run Zoom Q&A sessions between local people and health professionals or public health experts. Concerns centred around the safety of a very new vaccine, language barriers, misinformation on social media, general mistrust in authorities or stigmatising ethnic minority people on vaccine uptake.

Ethnicity is not yet routinely recorded by the NHS when people book or attend for vaccines. However, age is, and data to the end of March 2022 shows uptake for first doses and booster is highest (89%) in people aged 75+, compared with younger adults: 35% of 18-25s; 38% of 25-29s; 42% of 30-34s; 46% of 35-39s and 52% of 40-44-year-olds.

## Project method

The Berkshire West Vaccination Action Group, run by Berkshire West NHS Clinical Commissioning Group (BWCCG), proposed the idea of a project in mid-January 2022 to understand low booster uptake and overall lower-than-average vaccination uptake in Reading, in order to present findings to the 18 March meeting of the Reading Health and Wellbeing Board (the statutory board comprising councillors, health and care leaders and commissioners, local Healthwatch and the local voluntary sector).

In particular, the group wanted views from Reading people:

- Aged 18-49
- Who spoke a variety of languages: Arabic, Chinese, English, Lithuanian, Romanian, Swahili or Urdu

Due to the short timeframe, Healthwatch Reading proposed a quick, anonymous online poll, promoted via paid ads on Facebook and Instagram and also via community partners, our website and our newsletter. We advised the group that from our previous project experience, and latest discussions with ACRE, that an online survey was likely to get lower engagement from minority ethnic people than outreach in person would have, if the time frame had been longer. We attempted to improve access to our poll by offering people translated versions of the six, non-English languages.

We also proposed less formal engagement with people who might not wish to complete surveys, via online discussions.

The project was fully approved by 2 February and involved:

**Part A:** Promotion of online vaccine poll in English, 7-21 February and translated polls, 23 February - 7 March, 2022.

We created a variety of advertisements about our poll and funded their placement on Facebook and Instagram, targeted at audiences aged 18-49. We also contacted representatives at 15 local community organisations, who agreed to promote the poll through their own channels. In addition, we asked the local NHS and council to share details to the public.

**Part B:** We invited people to comment via online discussions on Facebook if they didn't want to answer the survey. People contributed between 4-28 February 2022.

The survey findings and online comments were analysed solely by Healthwatch Reading. The report has also been independently prepared by our staff.

# Findings: Part A

## Survey findings

The survey was completed by 163 people, two-thirds of whom were aged between 18-44. Most respondents were women (61%) and white British (60%). Around 7% were Black, Asian or Minority Ethnic. Of those that answered the question, most people lived in the RG1 postcode area.

### 1. Which Covid-19 vaccine have you delayed having or chosen not to have? (Select all that apply)

157 answered this question, 6 skipped it.

- 79% hadn't had a first vaccine dose
- 68% hadn't had a booster
- 56% hadn't had a second dose

### 2. What are your main reasons for delaying or deciding not to have a Covid vaccine? (Select all that apply) 160 answered, 3 skipped

- **76%\*** are concerned about vaccine side-effects
- **34%\*** believe Covid-19 is now a mild disease
- **28%\*** think they're covered by already having had Covid-19
- **16%** are worried it could affect their fertility
- **11%\*\*** believe it's untested or too experimental
- **9%\*\*** distrust government or authorities
- **9%** don't live with an elderly or clinically vulnerable person
- **9%** are pregnant or breastfeeding and worried it could affect their baby
- **6%** are scared of needles
- **4%\*\*** believe the vaccines don't work
- **3%** think previous vaccine dose/s they've had are enough
- **3%** trust their immune system
- **3%** are generally uneasy about it
- **2%** just haven't got around to it
- **1%** say the nearest vaccine centre is too far away
- **0%** don't know where to go to get it done
- **0%** don't know how to book a vaccine appointment
- **4%\*\*\*** answered 'Other' with various free text, one-off reasons

#### Key:

\* This figure comprises, after analysis, total number of people who ticked this reason, added together with people who described this reason in their free text answer to the 'Other' option

\*\* This figure is the total number of people who described this reason in the free text Other option; it was not included as an original tick-box option

\*\*\* This figure is the remainder of Other answers, following analysis; originally 51% selected Other

## In their own words: people's reasons for not getting vaccinated



### Side-effects:

"I know personally people who had worrying side effect, a member of my family died of heart attack 1 month after a jab."

"2 members of my family contracted stroke after that jab."

"I'm worried about how it will affect me as after having the Flu vaccine I was ill for 3 weeks."

"Family history of stroke/heart attack which AstraZeneca is proven to cause, allergies prevent me getting the Pfizer."

"Look at all the side effects now being brought to light when we all got told the jabs are safe."

"I've been ill and don't want it to make my recovery worse."

"Side effects from first two are making me feel physically low."

### Covid is a 'mild' disease:

"I had covid and it was very mild and ordinary natural remedies I use for cold worked sufficiently."

"I have had covid before and I was fine, I see no reason to then get vaccinated for something I've already had and poses little threat to me."

"Covid has never been a threat."

### **Trusting own immunity:**

"I have had covid and my body did what it was naturally meant to do."

"I'm a healthy young adult that believes my own immune system is strong enough. I have also had Covid and was fine, thus proving my point"

### **It's too experimental:**

"I am not taking an experimental drug still in early clinical trials, with no long-term safety data, that is killing and injuring recipients, that prevents neither the contraction nor the spread of something that has a better than 99.7% survival rate, something with an average death age higher than that of all-cause mortality, something that can be prevented and successfully treated early with existing tried and tested remedies."

"MRNA is an experiment with no safety data."

"I don't do drug trials, No liability for manufacturers, no benefit: all risk."

"I don't know where to find the known and up to date risks and benefits."

### **Distrust in authorities:**

"I don't believe the Government have our best interests at heart. I don't believe a single word the media say and I don't believe the giant pharmaceutical companies who make billions of pounds each year from sick people, want to keep us healthy."

"I don't like coercive tactics used by government (threatening lockdowns if we don't vaccinate)."



## Covid vaccines 'don't work':

"It simply doesn't work. You can still catch it, pass it on and be hospitalised even after 3 or 4 doses."

"It does not compare to other life-long vaccines. Within a year, we should not be at 4th boosters. Clearly, something isn't working right."

"My mum was double vaccinated, due to have booster 6 days after catching covid. She passed away, the vaccines did nothing. I have no faith in them anymore."

## General unease:

"Cannot explain. Just something holding me back. [I'm] Not an antivax and don't think I'll end up tuned in to 5g."

"I'm not anti vax per se but I believe in informed consent and individual choice. Nobody should be forced or coerced into anything."

"I just don't want it."

## Other:

"The NHS Covid pass does not include my full name....But in Asian countries they require all three words of my name shown in Covid pass. Otherwise I cannot get on the flight from the UK. I try to report this issue to my GP and NHS app technical team three times, but no-one helps me....I will only get job if this problem can be solved."

"Not available privately. I am exclusively a private patient. I have no NHS number and do not consent to being on NHS databases."



### 3. What might help you make a final decision to get vaccinated? (Select all that apply)

159 responded, 4 skipped

- 71%\* agreed with the statement, 'Nothing, my mind is made up'
- 15%\* want more information from national studies or experts about vaccine safety'
- 4% would like to discuss it with their GP or another known health professional
- 4% want reassurance that friends or family have been vaccinated without any major side effects
- 4% might act if a new Covid variant emerged that made people very unwell
- 3% would come forward if they needed a Covid pass to get into sports venues/concerts etc
- 3% might be persuaded by news reports featuring interviews with local doctors
- 1% said if someone in their family developed a new, serious health problem
- 1% said if there were more convenient vaccination venues
- 1% said if it was needed for travel to another country
- 1% said if it was needed for their job
- 14%\*\* answered 'Other'

#### Key:

\* This figure comprises, after analysis, total number of people who ticked this reason, added together with people who described this reason in their free text answer to the 'Other' option

\*\* This figure is the remainder of Other answers, following analysis; originally 22% selected 'Other'

## In their own words: what people need to change their mind



### Proof of vaccine safety & effectiveness:

"Categoric proof that the side effects will not cause an end to my pregnancy."

"Long term side effect studies and more in depth scientific journals relating to the efficacy of two different vaccine types and their combined risks of current and future medical concerns."

"Seeing a neurologist to investigate why I have been in constant pain since having previous doses 7 & 9 months ago."

"Long term info."

"When Pfizer release the full data from their clinical trials and when doctors and scientists with opposing views are allowed to speak freely on TV and are not censored."

## Other factors:

"If someone could come to me or if there was a needless option."

"Extra support for people with severe anxiety about having the jab due to mental health issues."

"If the government let me choose what type of the job I want to have. Also offer more than 2 types of jobs."

"I will get the booster, but I am waiting until I have several clear days with no commitments, since the first and second jabs gave me flu-like side effects which lasted the best part of a week. I am in no way anti-vax, but I do think that side effects have been played down, to the extent that I was actually quite worried when I felt so ill after the first one, because nobody had warned me that you can actually feel really awful for a few days. I'd still have had it, but I would have liked to be pre-warned, because if I'd had any important plans at that time, I would have had to cancel them."

## Nothing will change my mind:

"Nothing. I am not having it."

"I will not take it."

"If hell freezes over. No way on God's earth."

"Vaccine mandates are evil especially with manufacturers being immune from legal liability."

"Would much rather get the virus."



# Findings: Part B

## Online discussions

As well as running a survey, we gave people an alternative way to give feedback, via three online discussions on Facebook. Participants were self-selecting and responded to open-ended questions, which included: 'Not vaccinated against Covid? Tell us why?' 'Not yet gone for a Covid jab? Tell us why?'

In total, 86 people took part in the Facebook discussions, contributing 277 comments. The majority of people appeared to be opposed to vaccination. Some cited scientific papers and government data that they claimed supported their views. Some pro-vaccination people attempted to refute their claims.

### Online discussion 1

- 4 February 2022
- 19 people took part, giving 33 comments
- 3 people gave explicitly pro-vaccination comments, the remainder were 'anti' or questioning

#### In their own words: Facebook discussion 1



#### In favour of vaccination:

"Think I would have it [Covid] worse if did not have jabs."

"A vaccine literally is training for your immune system to deal with it"

#### Against vaccination:

1. I have an immune system.
2. I have natural antibodies that by FAR outweigh the fake ones.
3. I don't support pyramid schemes.
4. I would rather my shots be donated to another country/person in need than I.
5. I don't want a heart condition or any of the 100's of adverse reactions.
6. I understand risk.
7. I'm willing to accept that risk.
8. I don't want it."



## Online discussion 2

- 4-11 February 2022
- 15 people took part, giving 46 comments
- 3 people gave explicitly pro-vaccination comments, the remainder were 'anti' or questioning
- 3 main debates took place

### The seatbelt analogy (3-person discussion, 7 February 2022)



"[I] Know too many people who've had the vaccine and still get ill or worse. And if it was so bad, why am I not dead yet then? As far as I'm aware, every time I have tested all my results have been negative.

"I know people who've been injured in car accidents despite having a seatbelt, that doesn't make me think seatbelts don't work. But this is your backwards logic with vaccines. Why do you presume, despite all the science, that vaccines are a kind of magical defence against illness, rather than boosting your immunity and giving you a better chance of surviving?"

"I don't presume nothing. I'm just not 100% confident whether to have it or not. No backward logic, just want to be sure before I put whatever is in that vaccine in my body. Wearing a seat belt and having a vaccine is not a good comparison. Of course, I'd wear a seat belt. They have proven they're safe. They haven't proven if the vaccine is safe or even works."

"Every study on the entire planet has agreed they're safe AND that they work.... don't know why I'm wasting my time debating an antivaxer, it's pointless."

"Lots of people were anti-seatbelts when they were introduced. People didn't like being told what to do or complained they were too restrictive, and all of those used the fact they weren't dead yet despite no seatbelt, so why do they need them (because most of us even if involved in a collision, haven't been in a serious crash). I actually think it is a good analogy."





"Had Covid twice in 2020 and just recently over Xmas – both times it was mild symptoms. So tell me why I should risk getting a sore arm or worse from having a jab!? To protect the NHS!? The same NHS who aren't taking me seriously and not treating me and telling me lies."

"You're not taking the NHS seriously because you think vaccines don't work – why should the healthcare system take you seriously if you don't take them seriously?"

"How would you feel if you were in pain all the time and the doctors ignored what you were telling them and tell you it's in your head?"

"Why should they listen to you when you won't even get a vaccine to protect the NHS staff and other people? If you won't follow medical advice the entire world is agreed on, no doctor can help you."

"Their own website says what I've got should be treated promptly but they're just not interested. My problem happened long before vaccines were available."

"Their own website also says you should get the vaccine as soon as possible... which you deny. Do you trust what's written on the website, or not, or only when it suits you?"

"I never said I don't believe in the vaccine, for my age group I don't see why I should take it yet. I'll let all u people be the guinea pigs first."



## Protecting the vulnerable (2-person discussion, 11 February 2022)



"Sat with Covid and zero jabs. I'm fine. No worse than a bad cold."

"Glad you are okay but the problem is, by not being vaccinated it will make it more likely for variants to arise as they mutate when they infect people. Also, it's important to protect the vulnerable in society. Completely your choice, I respect both sides of the argument."

"So vaccinated people don't get infected or spread the virus?"

"Yes, but it's less likely with the vaccine."

"If you say so."



### Online discussion 3

- 26–28 February 2022
- 52 people took part, giving 277 comments
- People quoted scientific papers, science organisations, governments and media, to support their argument, including:
  - The Lancet (British journal)
  - British Medical Journal
  - British Society of Immunology
  - American Journal of Gastroenterology
  - Medicines and Healthcare Products Regulatory Agency page on gov.uk
  - Current Issues in Molecular Biology (Swiss journal)
  - Centers for Disease Control and Prevention (US Government agency)
  - The Conversation.com – online independent academic media outlet
  - Forbes (US business media organisation)
  - YouTube videos
- Main topics debated:
  - It's not a vaccine, it's gene therapy
  - I'm too young and healthy to need a vaccine
  - Deaths caused by Covid have actually been low

"A vaccine stops you getting something, this is not a vaccine. I trust my immune system all the way."

"I think a vaccine is meant to activate your memory cells when you get a virus, so the virus is recognised by your body earlier than it would have with no vaccine. It's not meant to stop you getting the virus in the first place."

"You're wrong, a vaccine is supposed to protect you." [Links to definition of vaccine]

"Basically, that article is exactly what I just wrote."

"A vaccine resists. This doesn't resist. You shouldn't have a vaccine and then still be affected by whatever you're vaccinated against. It's an immune booster, it boosts your immune response and will help those who need the help survive an infection. It simply isn't a vaccine though."

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"Four 'vaccines' so far approved in Europe do NOT try to expose your immune system to a virus. Instead, they are novel 'gene therapy-based treatments' that provide genetic material (mRNA or DNA) to some cells...then the hope is if your body is exposed to the real virus, your immune system will know what to do. In terms of scientific ingenuity, it is certainly a clever concept.

But the fact that governments, the media and social media have been shutting down discussion of this new technology and describing them as "vaccines"...suggests to me that there is a fear many people would change their minds if presented with an accurate description."



## Too young to need a vaccine? Discussion, 26 February 2022

"I am in an age bracket with ridiculously low fatalities with no underlying conditions. I made a choice for myself and it's paid off so far....

If I was above the age of 50, for example, I would have 100% had the jabs.

If I was 28 years old with underlying health conditions, I would have 100% had the jabs. Science told me there wasn't much need....

I mean, I was forced to wait months before my age group became eligible. So Covid would have left me alone until I had my opportunity for a jab? When the elderly and vulnerable started getting their vaccines the death numbers lowered. Great promo for the jab, also tells you though that the unjabbed during those periods weren't really contributing to said fatality figures.

**"You've shown little evidence of understanding science so far. On the contrary. You've also shown little concern for the fate of others, only yourself."**

## The Covid death toll. Discussion 26 February 2022

"6,183 people with only Covid entered as the cause of death, the average age being 82.5 years. It's on the Office of National Statistics website. Don't believe me go look for yourself."

**"Those 6,183 people were unusual in only suffering from Covid [and not any other condition]. 82.5 years. Should we value people less because of their age? Do you actually care about anybody other than yourself?"**

"You stated [earlier] 160,000 died from Covid – clearly false – and I proved it."

**"Government figures are 160,000 lives lost to Covid. [i.e., with, but not exclusively from, Covid]"**

# Discussion

## A snapshot of views

This project has provided a 'snapshot' of opinion from Reading people who have chosen not to have a Covid vaccine, especially among one of the target groups, of 18-49-year-olds.

Three-quarters of survey respondents identified concern about side-effects as a reason for not coming forward. Seven in 10 people said their minds were completely made up not to get vaccinated, but of those who could be persuaded, information about vaccine safety was the most important factor. This provides clues as to how vaccine confidence could be improved among people who are still unsure.

Extra comments volunteered by people in the survey, such as 'my family member had a stroke/heart attack after getting the jab' show that more nuanced conversations might be needed to help people understand that serious health events that may have happened anyway have occurred during the pandemic and were not necessarily caused by the vaccine itself, according to safety data. Respondents' calls for more 'long-term info' also suggest that people want to be updated about vaccine safety as evidence continues to build.

Public Health expertise will be needed to translate complex concepts into easy-to-understand messages for the public, which can convey for example, the large number of vaccines delivered versus the small percentage of reported or proven side-effects. This [article](#) by a GP surgery pharmacist in Brighton, for example, honestly acknowledges the dilemma even she felt as a health worker in getting her children vaccinated but systematically works through the pros and cons to reach a conclusion in favour of vaccination.

The second most common reason chosen by respondents for not getting vaccination, was their belief that Covid was now a mild disease. Some people told us they had proof of this from their own personal experience of having mild illness and easy recovery after catching Covid.

## National messages

People may also be influenced by national messages about the status of the pandemic.

Just before we launched this survey, Prime Minister Boris Johnson announced on 19 January 2022 that in England he was ending pandemic legal restrictions, including facemasks, and encouraging people to return to offices. This was a major change of tone compared to warning a month earlier on 12 December 2021 that a 'tidal wave' of Omicron was coming and people needed to 'get boosted now'.

On 21 February 2022, the government published its 'Living with Covid' plan, saying it was ending free PCR and lateral flow testing for most people and removing the legal requirement on

people to self-isolate if infected. Since then, there have been no regular press conferences involving England's chief medical officer Prof Chris Whitty.

On 21 March 2022, health secretary Sajid Javid launched the Spring booster campaign for over-75s, insisting there was no "particular cause for concern" about rising Covid cases. For the "two out of 10" adults who had not yet had their booster jabs "it's still a very good time to come forward", he said. However, the government appears to have stopped earlier, targeted messaging aimed at young adults to 'grab a jab and protect your Nan'.

In addition, children and young people are now being advised they may only need to avoid contact with others for 3 days after a positive test, compared with 5 days for adults, in new guidance from the UK Health Security Agency on 1 April 2022.

Without an explicit national campaign aimed at healthy, young adults, local Public Health and NHS experts may need to consider tailored, local messages that make the case for the benefits to the whole community, not just individuals. In our online discussion, we heard young people question why they needed a jab if the risk of dying from Covid was so low for their age group.

The other main theme that came through in the survey and online discussions, was people's attitudes towards an 'experimental' vaccine which some claim is more like 'gene therapy' and/or isn't effective in reducing infection or transmission. Somewhere in the messaging, has been lost the aim of Covid vaccines being to reduce severity of illness so you will not need to be hospitalised, rather than it being a guarantee of life-long immunity'.

### Limitations of our project

The number of ethnic minority survey respondents was lower than hoped, and only two people chose to complete translated surveys. In the third online discussion, around 20% of participants appeared to have names of eastern or central European origin but that does not necessarily equate to a particular ethnicity or spoken language.

We believe a longer timescale, to enable an alternative, outreach engagement method, would have increased the number of minority ethnic respondents.

Overall, survey respondents and online discussion participants were self-selecting, rather than a randomly selected sample representative of the Reading population.

The online discussions in particular appeared to be biased towards people with strong views against vaccination. In some cases, we had to step in and moderate the discussions by reminding people to be kind and respectful towards others, when people on both sides of the debate levelled personal insults at each other.

### Tackling misinformation

Online misinformation, where people may repeat or assert 'facts' or views due to their own knowledge gaps and/or the influence of others (which is distinct from disinformation, where

people deliberately spread known falsehoods) has been recognised as ongoing problem during the pandemic.

An [article](#) on the UK parliament website cites a September 2020 survey of 4,000 UK respondents led by the London School of Hygiene and Tropical Medicine and Imperial College London, which found that the proportion of respondents who said they would 'definitely' take a COVID-19 vaccine fell by 6.2% after participants had been exposed to misinformation about the vaccine, relative to a control group who were shown factual information.

The article describes high-level initiatives by government, such as pressuring social media companies to do more to tackle spread of misinformation.

The national health protection agency in the US – the Centers for Disease Control and Prevention – has useful [advice](#) on tackling misinformation about Covid vaccination:

- Listen to and analyse misinformation circulating
- Engage with and listen to your community
- Share accurate, clear, and easy-to-find information that addresses common questions
- Use trusted messengers.

For the latter point in particular, Reading has an opportunity to make a difference.

## Vaccine champions

Reading is one of 60 local authorities which has successfully won funding from the Department for Levelling Up, Housing and Communities and Levelling Up for a community vaccines champion scheme. The £485,000 allocation for Reading will fund six months of outreach, targeting:

- Minority ethnic people, including Chinese, Black or Black African and Asian/Asian British Pakistani groups
- Younger adults
- People living in areas of deprivation
- Vulnerable groups such as people who are homeless or asylum seekers or refugees.

Community vaccine champions – trusted and known in their local community – will be recruited and in some cases be paid to help get information out. People will be able to attend local evening talks with health professionals to get their questions answered and access vaccines at local, pop-up sites, with the help of community transport if needed. GPs may also get incentive payments to work with patients who haven't yet come forward.

Our project shows that it will be crucial for vaccine champions to be equipped with easy-to-understand vaccine safety messages to help address people's misgivings.

In conclusion, Healthwatch Reading believes this commissioned project has given local NHS and Public Health decision-makers useful insight into the factors surrounding Covid vaccine refusal in Reading.

**Note (see page 19)** – an additional guide to tackling misinformation is available via [this link](#) to a handbook written by a Professor at the University of Bristol and other researchers.

## Appendix 1

### Demographics of survey respondents

Woman: 100 (61%)

Man: 41 (25%)

Prefer not to say: 22 (13%)

Age:

12-15: 1.34% (2)

16-17 : 0.00% (0)

18-24: 5% (8)

25-34: 23% (37)

35-44: 38% (62)

45-54: 13% (22)

55-64: 6% (9)

65+: 2% (3)

Prefer not to say 12% (20)

Ethnicity:

Black, Asian or Minority Ethnic: 12 (7%)

White British: 97 (60%)

Other White: 19 (12%)

Other: 11 (6%)

Prefer not to say: 24 (15%)



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