

COVID-19 Vaccine:

Ensuring equity of uptake through local engagement

INTRODUCTION

High and equitable vaccine uptake

In December 2020 the Behaviour Change Unit released <u>'COVID-19</u> <u>Vaccination: Reducing vaccine hesitancy – Review and recommendations'.</u> The report identified several factors that have been found to consistently influence vaccine uptake for previous pandemics and which were being reported within vaccination intention studies for the COVID-19 vaccine. The factors are:

- **Complacency:** Perceptions of the personal risk of contracting the virus; and perceptions of the severity of having the virus
- **Confidence:** Confidence in the safety of the vaccine; and confidence in the effectiveness of the vaccine
- Convenience: Convenience of having the vaccine

Residents are not a homogenous group and the degree to which these factors influence vaccine uptake has been shown to vary across different groups. Research has identified groups where vaccine uptake is lower, defined as 'under-vaccinated groups' (UVGs), this definition includes:

- Groups where it is <u>anticipated</u> that uptake of the COVID-19 vaccine will be lower than required, based upon research into the uptake of previous vaccines and surveys of intentions to have the COVID-19 vaccine
- Groups where it is <u>observed</u>, that uptake of the COVID-19 vaccine <u>is</u> lower than required based upon the collection of COVID-19 vaccine uptake data



Under-vaccinated groups identified within research include:

- BAME (Black, Asian, and Minority Ethnic)
- Gypsies and Travellers
- Homeless people
- Individuals with learning disabilities
- Vulnerable women (for example, sex workers)

In order to achieve herd immunity and protect the whole population against COVID-19, local authorities must address vaccine hesitancy at a local level and ensure high and equitable uptake of the COVID-19 vaccine. It is therefore key to understand the barriers to vaccination amongst under vaccinated groups (UVGs) as well as the general population and to apply this local intelligence to develop pro-active and reactive communications that speak directly to the identified needs of each UVG within the local population.

Purpose

This resource has been developed to assist local authorities to implement the recommendations made in the <u>review</u>, by providing guidance and tools on how to engage with UVGs in their local area. Engaging with communities will provide the insights needed to ensure that any behaviourally informed approaches to increasing uptake of the COVID-19 vaccine are effective, both in terms of their content and their acceptability by the target group.

Successful vaccine roll-out will only be achieved if we understand, acknowledge, and address the barriers to vaccination for all members of our community. This is where the work of local authorities and other public sector organisations can make a significant difference.

In addition to this guidance and the associated templates, a list of useful resources can be found in Appendix A.

PRE-ENGAGEMENT - LOCAL ANALYSIS

The engagement process will be the same for all UVGs, independently of whether it's observed/anticipated that uptake in said groups will be lower. However, for those groups where it is only anticipated that uptake will be lower, it will be useful to conduct a pre-engagement analysis to determine what is already known.

A pre-engagement analysis template has been provided <u>here</u> to guide you through the process outlined below.

Objective: To conduct research with specific groups to understand:

- The size and demographics of the group
- Any barriers to accessing general healthcare
- The barriers and enablers to vaccine uptake identified within national research



- What interventions have been shown to effectively address these barriers and increase vaccine uptake
- If uptake of the COVID-19 vaccine is likely to be lower in this group within your area based upon local intelligence
- Key demographic information which could be useful for prioritising and allocating resources

Information sources: Review both national research and local data, primarily through desk-based research and consultation with colleagues who are already working with the particular group. Information sources might include:

- Academic literature
- Government guidance on UVGs
- Local demographic data including population size, gender etc
- Surveillance data for previous vaccine-preventable diseases
- Key papers (e.g. research and guidance) for specific sub-groups
- Key stakeholders for the group, including local authority colleagues with existing connections to the community
- National and local data on vaccine uptake
- National and local data on COVID-19 vaccine uptake

Outputs: Pre-Engagement Local Analysis detailing potential barriers and enablers to vaccine uptake identified, and relevant local data.

THE ENGAGEMENT PROCESS

The engagement process ensures that an evidence-informed approach is taken to identify, address, and resolve barriers to the uptake of the COVID-19 vaccine for UVGs. There are three key components of the process.

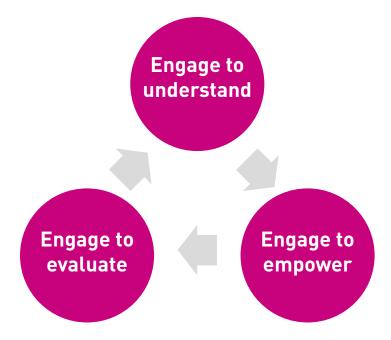


Figure 1: The Engagement Process

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It is important to note that these principles are not followed in a linear fashion, rather they emphasise the dynamic and cyclical nature of engagement with UVGs.

Engage to understand

If we are to effectively address low levels of uptake in identified groups, we need to understand to what extent the various barriers are influencing decisions and what other barriers might exist. Engaging with local stakeholders to gain subgroup specific insights into their needs, values, and beliefs can inform the development of tailored narratives that emphasise the associated benefits of having the COVID-19 vaccine.

Engage to empower

Once an understanding of the influences upon vaccination intentions for a particular group have been identified, involving group members in creating solutions to address any barriers is empowering. In times of uncertainty and where trust may be low, people need to feel informed and trust those providing the information. Working in collaboration with group members to create solutions to identified barriers, empowers members of that group, and can also increase public trust.

Engage to evaluate

It is important to assess if the materials and resources that have been developed are having the impact they were intended to, that is – increasing vaccine uptake. The influences upon individuals' intention to have the vaccine have been shown to fluctuate over time, and as such it is possible that the strategies implemented will need to reflect these changes.

Applying these principles supports the co-development and delivery of communications that:

- Are informed by an accurate understanding of the barriers to vaccination at a local level
- Acknowledge, validate, and address group member concerns and apprehensions
- Are well received by the group
- Adapt to changes in community sentiments and barriers to vaccination
- Build trust in the local authority
- Empowers group members

Further information to support engagement with members of UVGs can be found in the full review.



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Engage to understand

Objective: To engage with members of the group, either directly or indirectly (e.g. through a local partner organisation), in order to achieve the following:

- Understand the barriers and facilitators to vaccine uptake specific to the group within the local area. This can be achieved in several ways, including conducting primary research (e.g. focus groups, surveys, interviews)
- Clarify areas for further investigation based upon intelligence collected to date
- Agree the best way to engage with the community, research activities, and timeline
- Identify key influencers and messengers within the community
- Identify trusted sources of information (where do members of the community get information that they trust?)

Resources/tools: Guidance on questions to consider related to planning an engagement exercise as well as elements to consider regarding **C**apability, **O**pportunity, and **M**otivational barriers (in line with the COM-B model). See the <u>WHO TIP vaccine guidance paper</u>, pages 47-51 for information on different types of research designs and their strengths and limitations, with specific reference to understanding attitudes towards vaccinations.

Outputs: This engagement work will provide insights into the various barriers and enablers to the uptake of the COVID-19 vaccine for those groups identified and prioritised (completed COM-B analysis). Decisions made regarding the design and mode of any communications (who, where, when, how, why).

Engage to empower

Objective: To apply the insights gained from the previous stage to the co-production of solutions together with your target audience. More specifically, you will:

- Co-develop solutions with members of the target group to ensure materials are culturally sensitive, appropriate, acceptable and accessible. The solutions will be linked explicitly to the identified barriers, influences and enablers. You will regularly incorporate feedback from your target audience until all parties involved in this co-creation exercise have agreed that solutions are ready to be implemented
- Consider how you are going to implement the co-produced solutions, how you will be monitoring progress and how you will be measuring success

Resources/tools: A template tailored to this engagement stage, in which you will be able to list all the barriers identified in the previous engagement exercise and plan how you are going to tackle them. The template will guide you through the steps detailed in the objectives section above, so that you can successfully complete this stage and gather all the information that will be necessary to enter the evaluation stage.

Outputs: At the end of this stage, you will have:

- Co-developed, with members of the group, solutions to the identified barriers
- Agreed a delivery plan that details how the solutions will be delivered, when, where and by whom
- Detailed ways in which you will be able to check if the solutions are being delivered as planned
- Determined what data will need to be collected to enable you to assess if your solutions have been effective

Engage to evaluate

Objective: To conduct a process evaluation (to check the intervention is being delivered as intended) and impact evaluation (to assess if vaccine uptake has increased) by collecting data and continuing to engage with members of the group. To also provide a way in which real-time data can be fed back to colleagues and any amendments to communications made, or additional requirements identified.

- Pilot interventions/comms with samples of the sub-group and make any necessary amendments prior to roll-out to the wider group
- Put in place, prior to roll-out, methods to collect data so you can conduct process and impact evaluations (including the collection of baseline data)
- Record details of conversations with the community members regarding sentiments towards the COVID-19 vaccine
- Follow-up with members of the groups who were involved in the 'Engage to understand' stage, for example interviews with individuals or holding follow-up focus groups

Resources/tools: See <u>WHO TIP vaccine guidance paper</u>, pages 81-90 for information and guidance on evaluating interventions to reduce vaccine hesitancy.

Outputs: At the end of this stage you will have implemented and assessed the impact of your co-developed solutions upon vaccine hesitancy amongst members of the target group.

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APPENDICES

Appendix A

Useful resources and tools

General vaccination information

COVID-19 vaccination programme documents https://www.gov.uk/government/collections/covid-19-vaccination-programme

Latest data on COVID-19 vaccine uptake

https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/

Group specific vaccination documents

Factors influencing COVID-19 vaccine uptake among minority ethnic groups

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/952716/s0979-factors-influencing-vaccine-uptake-minority-ethnic-groups.pdf

Increasing uptake of COVID-19 vaccine

World Health Organization, 2019. TIP: Tailoring Immunization Programmes guidance 9789289054492-eng.pdf (who.int)

Communications guidance

Response: A behavioural insights checklist for designing effective communications

https://www.local.gov.uk/sites/default/files/documents/Response%20 Playbook%20Final.pdf

