



What Are You Waiting For? Young Adults' perspective on COVID-19 vaccination in Hong Kong



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Background

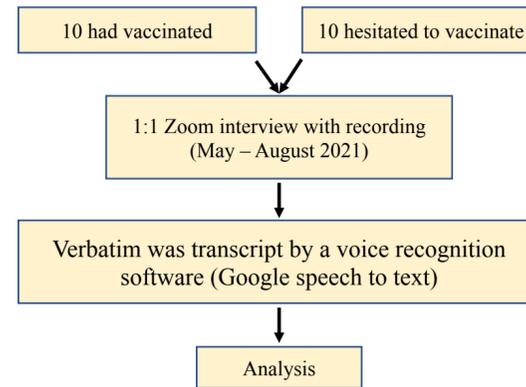
- The coronavirus disease 2019 (COVID-19) has profoundly created a burden around the globe. A large scale of vaccination is of supreme importance to quell the infection rate.
- Young adults (18-29) are a unique demographic group as associated with poor engagement with health-protective behaviors and characterized by higher transmission efficiency than other age group [1-2].
- Vaccine hesitancy, a phenomenon referring to the delay or refusal of vaccination in regardless the availability of vaccine, among young adults rendering a high potential to jeopardize the health of older unvaccinated individuals.
- Even though there is extensive research investigates willingness to take the COVID vaccine and related determinants of vaccine hesitancy using survey-based methodology, the closed-ended questions may contribute to low validity and restrict participant's response [3].
- Furthermore, studies regarding the reconsideration of vaccine among people who are vaccine hesitant are sparse.

Objectives

- Identify up-to-date factors that contribute vaccine acceptance and hesitancy among young adults.
- Explore situations that can boost vaccine uptake among young adults.

Methods and Materials

- 20 Hong Kong residents has been purposely recruited based on convenience sampling on social medial from March to July 2021 for qualitative study.



- Questions were adapted from previous qualitative research [4]

Results

Characteristics		N (%) or mean ± SD
Gender	Male	11 (55)
	Female	9 (45)
Age		22.4 ± 2.04
Occupation	Student	14 (70)
	Healthcare-related	2 (10)
	Engineer	2 (10)
	Education-related	1 (5)
	Service sector	1 (5)

Table 1. Characteristics of participants, Hong Kong, 2021

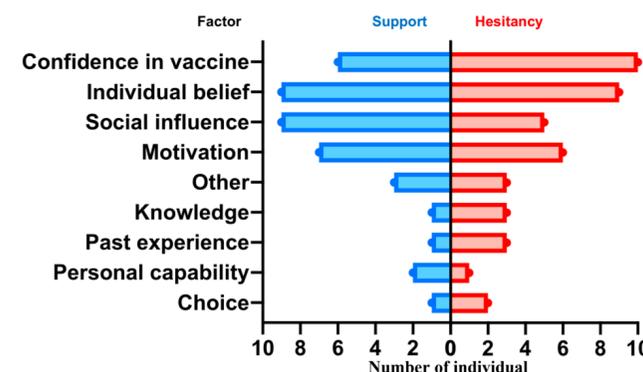


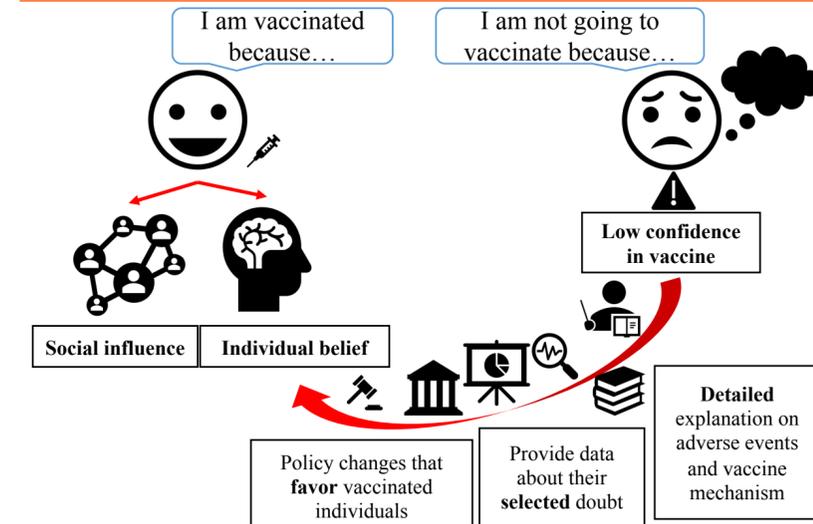
Figure 1. Factors for vaccination attitudes.

Results continued

- | Topic | I will (re)consider vaccination when there is/are |
|----------------------------|---|
| Topic 1. Policy | <ul style="list-style-type: none"> COVID-19 vaccination passport Mask-off policy Relax of social restriction Money (range from \$500-100000) Vaccine-related policy affect one's living Full-paid vaccination leave/day off |
| Topic 2. Data | <ul style="list-style-type: none"> Reports on COVID survivors (long-term health consequences) Effect of vaccine on the society (How likely it can go back to normal) Reports revealing global death rate / adverse events due to COVID vaccine Reports on global vaccine protective rate Research articles that have long study duration |
| Topic 3. Education | <ul style="list-style-type: none"> Public talk delivering principle and importance of vaccination An explanation on the cause of side effects brought by the vaccine |
| Topic 4. Media | <ul style="list-style-type: none"> Ads that explain the mechanism of the vaccine Citation in the ads Health professionals advocate Vaccine manufacturer explains vaccine-related information |
| Topic 5. Sense of security | <ul style="list-style-type: none"> >50% of world population is immunized Reports explain the occurrence of rare events Evidence proved that vaccine does not cause 'specific case' (extreme side effect) Vaccine-related side effects are actively revealed by the government Compensation from the government when rare event exists |
| Topic 6. Severity | <ul style="list-style-type: none"> 20-300 local cases per day |

Figure 2. Topic regarding vaccine reconsideration. Circle size is proportional to the number of participants who talked about.

Discussion and Conclusion



- Study by Quinn provided evidence that social norms correlated to influenza vaccine uptake [5]. A large-scale social norm establishment for vaccine may shift biased perception among hesitant individuals.
- Vaccine education can reduce the involvement of emotion evoked by the media [6]. Contents that are mentioned in Fig. 2 should be available to the public. Health professionals should not undermine young adults' desire for information.
- Our study results provide guidance on policy making and how the related stakeholders should promote and educate the young adults for COVID-19 vaccine.

Limitation

- Most of our study participants are students in which they may exhibited similar perception toward vaccine.
- We only focused on young adults, sample size is small and qualitative research might include researcher's bias.
 - Future quantitative study is warranted to quantify some of the preferences and statements marked on this study to better understand the generalizable of this study among wider group of population.

References

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