

October 2021

At a glance: COVID-19 vaccine research insights

This research is part of an ongoing series that looks into New Zealanders' attitudes and public sentiment towards the COVID-19 vaccine.

Background

Horizon Research, in association with the School of Population Health, University of Auckland, have been commissioned to survey New Zealanders' attitudes and sentiment towards COVID-19 vaccines.

Eleven distinct but related online surveys were undertaken for this series:

- 1,451 respondents between 24 – 28 September 2020
- 1,438 respondents between 1 – 4 December 2020
- 1,317 respondents between 16 – 19 February 2021
- 1,350 respondents between 26 March – 1 April 2021
- 1,387 respondents between 23 April – 2 May 2021
- 1,234 respondents between 28 – 30 May 2021
- 1,472 respondents between 25 – 30 June 2021
- 2,509 respondents between 26 July – 1 August 2021
- 2,334 respondents between 24 – 29 August 2021
- 2,479 respondents between 28 September – 1 October 2021
- 2,447 respondents between 28 October – 9 November 2021



Te Kāwanatanga o Aotearoa
New Zealand Government

**Unite
against
COVID-19**



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MANATŪ HAUORA

Key insights¹

Overall vaccine uptake

- Encouragingly, the overall potential uptake estimated in October including those already vaccinated and those who are likely to get vaccinated has increased to 92%.
- This represents a five-percentage point increase since September and demonstrates the considerable efforts that have been made across the country in recent months (September 87%, August 86%, July 79%, June 77%, May 80%, April 77%, March 69%).
- A further 2% of respondents are unsure whether they will get the vaccine, 2% are unlikely and 4% of respondents say they will definitely not get the vaccine.
- The table below illustrates we have been effective at getting those likely to get the vaccine over the line and made some small gains in nudging those who are unsure or unlikely to get the vaccine. Those who 'definitely won't' get vaccinated are showing minimal movement over time.

Status - All Respondents	Oct 2021	Sept 2021	Aug 2021
Already vaccinated	90%	81%	53%
Likely to get	2%	6%	33%
Predicted uptake	92%	87%	86%
Unsure	2%	4%	5%
Unlikely to get	2%	5%	5%
Definitely won't	4%	4%	5%

- Overall potential uptake by Māori respondents, including those already vaccinated and those who are likely to get a vaccine, has increased to 78% in October, up from 73% in September (the margin of error for the Māori sub-sample at a 95% confidence level is ±6.8%).

¹ Margins of error for the ethnic group sub-samples at a 95% confidence level are: Māori ±6.8%; Pasifika ±14.1%; Asian ±7.8%; Indian ±9.8%; NZ European/Pākehā ±2.3%; Other European ±6.8%; Other ±14.4%.

- Overall potential uptake by Pasifika respondents, including those already vaccinated and those who are likely to get a vaccine, is at 89% up from 81% in September. (the margin of error for the Pasifika sub-sample at a 95% confidence level is ±14.1%)
- Overall potential uptake by respondents who identify as disabled has also increased to 87% from 82% in September.
- Please note that changes in overall potential uptake reported by ethnicity are within the margin of error for the sample sizes achieved and therefore are not statistically significant. They should be treated as indicative only.

Vaccinating youth and children

- Three quarters (78%) of those who care for 12 to 15 year olds would 'definitely' or 'likely' allow children of this age to be vaccinated – the same result as September. However, there was an increase in the proportion who said they would not allow their 12 to 15-year-olds to get a COVID-19 vaccine: up to 20% from 14% in September. There was a commensurate drop in those who were unsure: down to 3% from 8% in September.
- Almost seven in ten (68%) of those who care for 5 to 11 year olds would allow their child or children to get a COVID-19 vaccine, a slight increase since September 63%.

The remaining unvaccinated

- Reflecting the changing vaccination profile of New Zealand, the breakdown for the unvaccinated group continues to change, so comparisons between months should be made cautiously.
- As vaccination rates increase considerably with nationwide efforts, the pool of people who are still likely to get vaccinated has correspondingly decreased. In October, 24% of the unvaccinated are likely to get the vaccine (3% of the population) compared to 33% of the unvaccinated population in September (6% of the population) and 70% in August (33% of the population).



- Unvaccinated respondents are increasingly adamant that they will not get vaccinated, 38% of unvaccinated respondents said they “definitely won’t” get vaccinated, up from 20% in September.

Status - Unvaccinated	Oct 2021	Sept 2021	Aug 2021
Likely to get	24%	33%	70%
Unsure	21%	22%	10%
Unlikely to get	17%	26%	10%
Definitely won't	38%	20%	10%

- Of the unvaccinated who are not definitely intending to get vaccinated, 12% intend to make a decision in the next 2 months, 16% in the next 3-12 months, and 20% are a year or more away from making a decision.
 - Those who are definitely or probably never getting vaccinated are older than average, lower than average income, less likely to be employed, and more likely to live in a regional town or a rural area.
 - Those waiting for a year or more are younger than average, more likely to be female, lower than average income, more likely to be living in a rural area.
 - Those making a decision in the next three to twelve months are younger than average, higher than average income, and less likely than average to be living in a large city.
 - Those making a decision in the next two months are younger than average, lower than average income, more likely to have school level qualifications only, and less likely to reside in a regional town.

Encouraging second dose uptake

- Efforts should go into encouraging second dose uptake, with just 56% of those who have had one dose say they will “definitely” get another dose, below the 77% recorded in September.
- It is estimated that there are around 66,500 people 12+ who have had one dose but are not currently committed to their second dose.

- Among those who said they were unsure or unlikely to get their second dose, side effects from the first dose were the main reason for their hesitation, and a perception that the vaccine would not be effective against the new strain.

Barriers to vaccination

- As more of those who were unsure or likely to get vaccinated have decided to get vaccinated, the remaining unvaccinated population represent a more steadfast group who are more sceptical about the vaccine.
- As in September the main reasons for being unsure or unlikely to get a vaccine relate to a view that long term effects are not known/ it’s just an experiment or trial (27%) and that there are serious side effects/deaths from the vaccine – it is not safe/its effects are worse than COVID/it’s a poison (20%). However, the remaining unvaccinated are more likely to say the government wants to control/ bully us into getting the vaccine/I don’t trust the government (20% vs 13% in September), that it’s not a real vaccine/I want a real/traditional vaccine (14% vs 7% in September), I don’t trust the vaccine/ don’t trust Pfizer or ‘big pharma’ (7 % up from 0%).
- Respondents who were not vaccinated were also asked what was holding them back from getting a vaccine (from a prescribed list covering various emotional and physical aspects). For a significant proportion, the barriers are emotive, related to feeling pressured, anxious and overwhelmed by the pandemic. The main aspects holding them back are:
 - There’s too much social pressure to get vaccinated (33%).
 - I’m under enough pressure coping with everyday life to think about getting the vaccine (14%).
 - I’m feeling overwhelmed by the pandemic (12%).
 - I’m feeling too anxious about the pandemic and the vaccine (9%).
 - I’m feeling paralysed because I haven’t been able to find the information that I want on the vaccine (7%).
- Those who say there is “too much social pressure”, they are “under enough pressure coping with everyday life” or “feeling overwhelmed by the pandemic” are generally: More likely than average to be female, generally younger than the average



age – primarily under 45 years of age and lower income. They are also less likely to respond to any of the messaging or activities put forward in the research.

- Emotive barriers varied depending on vaccination intention:
 - Those who are unlikely to get vaccinated are more likely to say they there’s “too much social pressure to get vaccinated” (58%) and “I’m under enough pressure coping with everyday life to think about the vaccine” (27%).
 - Those who are unsure if they’ll get vaccinated are more likely to say “there’s too much social pressure to get vaccinated” (38%), “I feel paralysed because I haven’t been able to find the information that I want on the vaccine” (21%), “I’m under enough pressure coping with everyday life” (20%), and “I’m feeling too anxious about the pandemic and vaccine” (17%).
 - Those who are likely but haven’t booked are more likely to say “there’s too much social pressure to get vaccinated” (28%), “I don’t feel comfortable going to a vaccination centre” (21%), “I just haven’t got around to it yet” (17%), “I feel too anxious about the pandemic and vaccine” (14%), “I feel paralysed because I haven’t been able to find the information that I want on the vaccine” (12%).
- Around a quarter (24%) of respondents not already vaccinated believe they have medical or health problems that mean they are unable to get the vaccine, up from 19% in September.
- Being immunocompromised (33%), taking blood thinning medication (23%) and a previous allergic reaction to any vaccine (22%) are the top three health barriers. However, there are a range of other reasons given: getting another vaccine (14%), taking antibiotics (7%), have cancer (7%), feeling unwell/fever (6%), heart disease (6%). Two percent mentioned being either pregnant or trying to conceive as a barrier to getting vaccinated.

Perceived risk of infection

- Perceived risk has more than doubled, with 69% of all respondents now considering some or a high chance of being infected with the virus, up from 30% in September. Unvaccinated respondents

are less likely to perceive a risk of infection and more likely to consider there’s no chance of being infected with the virus (14% vs the total 3%). There is opportunity here to communicate the likelihood of interacting with the virus.

- Education also plays a role in people’s assessment of their chances, with those with degrees are more likely to think there is some chance (75%), compared to 62% with a high school education (or none at all).
- Asian, Indian and Pasifika respondents think they are less likely to get infected (59%, 57% and 48%) and Māori respondents think they are more likely (77%).

The one convincing thing

- Unvaccinated respondents were asked the one thing that would absolutely convince them to get a vaccine. While a third said nothing would convince them, key themes among those who provided a comment were:
 - Having access to a traditional/ non-experimental vaccine (15%, up from 3% in September).
 - Long-term data (13%, no change since September).
 - Knowing it works (8%, down from 15% in September).
 - Government transparency (8%, up from 1% in September).

Talking with others

- Nine in ten (92%) of vaccinated respondents said they would likely recommend getting the vaccine to others, 4% were unlikely to recommend doing so, and 4% were unsure.
- 85% of vaccinated respondents indicated they would be prepared to talk with others about getting the vaccine, 15% would not. Sixty one percent were prepared to talk with their friends and a nett 65% were prepared to talk with their family/whanau (i.e.: parents 44%, brothers 41%, sisters 39%, other family/whānau 39%, elderly relatives 36%, and cousins 34%).
- When asked what they could say to convince people to get the vaccine, they would talk about their own vaccine journey (18%), getting



vaccinated to protect friends and family (15%), getting vaccinated for the community (14%), share medical information (11%), and the impact of not getting vaccinated on their ability to carry out activities (9%). Interestingly some recognise that conversations may be futile - 9% said “they just want to be left alone”.

- The types of information that would support people in these conversations would detail: How the vaccine protects health (43%), where they can get expert advice (41%), that the vaccine is unlikely to cause a serious adverse reaction (40%), and what it is like to have COVID-19 (40%).
- The top five sources for receiving or accessing advocacy support information are: Government websites (47%), news online (43%), email (43%), TV news (40%), and printed information from GPs and pharmacies (40%).
- Unvaccinated respondents (excluding those who definitely won't get a vaccine) were asked if they would like to have a personal chat about the vaccine with someone they trust. Just 11% would like a personal conversation with a trusted person, 14% were unsure and 75% said they did not want a conversation with someone they trust about the vaccine.
- Among the few who would speak with someone, medical providers 59% and family 52% were most widely mentioned as trusted people these would speak with about the vaccine.
- One in ten (10%) of unvaccinated who were not definitive about getting the vaccine would attend a local meeting to chat about the vaccine with local doctors and others. 30% indicated they were unlikely to attend and 53% said they definitely would not attend. Those aged 25 to 34 and those living in large cities were more likely to say they would attend a local meeting (18% and 14% respectively).

Official Communications

- The majority (91%) had seen official COVID-19 or vaccine information advertising in the past 30 days.
- Television is the highest source (free to air 63%, on demand 21%) but social media advertising is also widely recalled (47%).

- Nearly four in ten (38%) said seeing official advertising had reinforced their decision to have the vaccine, down from 49% in September.
- Nearly a fifth (18%) said this official advertising made them more likely to get a vaccine (up from 4% in September).
- Half (49%) said this advertising made no difference to their decision and 5% said seeing advertising made them less likely to get a vaccine.

Information needs

- Nearly four in ten (38%) of those not vaccinated feel they definitely have enough information to decide whether or not to get vaccinated, up from 25% in September.
- Half (50%) have potential information gaps, indicating they need to know more, don't quite/or mostly have the information they need, down from 64% in September.
- The types of information that would help people to decide whether to get vaccinated includes:
 - More information on the possible side effects and risks (49%)
 - Evidence that the vaccine I am offered is unlikely to cause a serious adverse reaction (41%)
 - Information about the number of people in Aotearoa and around the world who have safely taken the vaccine, what it's like to have COVID-19 and the long-term symptoms (18%)
 - Information about the protection the vaccine will give me (15%)
 - How likely I am to catch COVID-19 (11%)
- Online news (37%), Government websites (29%), TV news (24%) and email (23%) are the most preferred ways to receive information. However, there's strong opportunity across a variety of print media including printed information available at GPs/pharmacies/community locations (20%), newspapers (16%), magazines (13%), community newspapers (12%), information delivered via letterbox (11%), and information at workplace (9%).



Opening up with the new Covid-19 management system

- The COVID-19 management system will happily nudge some people over the line, but for most there's a level of resentment and for some this may hold them back from getting vaccinated at all.
- Only 5% of unvaccinated respondents said they will willingly get two doses and are happy with the new management system and 6% said they were happy with the system but it wouldn't make them get vaccinated.
- 16% said they would get two doses but weren't happy about it as they felt pressured.
- Nearly a third (31%) said that no restrictions would change their mind, 8% said they won't get the vaccine because there's too much pressure, and 18% said they are unhappy about the new requirements and won't get a vaccine because of them.

Earlier move to more freedoms for Auckland, South Island

- A third (33%) would be definitely or more likely to get vaccinated to end the Level 3 Lockdown in Auckland and to shift to Alert Level 2 in the South Island.
- 27% indicated they would definitely not get vaccinated for Auckland and South Island to change alert levels, and a further 23% said it was unlikely to encourage them to get vaccinated.
- Interestingly Aucklanders were no more supportive of this prospect than the average. Canterbury was the most supportive region in the South Island – reflected in the considerable boost in vaccination rates for this region.

Getting vaccinated to do more

- Unvaccinated respondents and those who had received one dose, were asked whether the opportunity to use all businesses, and be able to do more activities if fully vaccinated makes them more or less likely to get two doses of the vaccine.
- Nearly four in ten (37%) were definitely or more likely to get two doses to be able to use all businesses and do more activities. 29% said it would definitely not make them more likely to get two doses. Of interest, 38% of those who are

booked to get vaccinated were not sure whether this opportunity would make them more or less likely to get a vaccine or not.

- Unvaccinated respondents and those who had received one dose were asked whether they would get two doses of the COVID-19 vaccine just so that they could go to, or do, a range of activities. Of all activities put forward, attending family/whānau gatherings (39%) and travel between regions (33%) is most likely to encourage two doses.
- Those who are currently booked or had their first dose are more motivated to get their two doses to access all types activities.
- Those who are unvaccinated and unlikely to do so are less motivated to get their two doses to access all types of activities. None of the listed activities would drive any change from those who currently say they would "definitely not" get a vaccine.
- Those who are unvaccinated but likely to do so are more motivated to get two doses to go to the gym (28% vs. 16% for the total).

Getting vaccinated to go to work

- Only 18% of those not currently vaccinated would be likely (most likely or definitely) to get the vaccine to retain their job. Those unlikely to get vaccinated to retain their job are more likely to be older with only 7% of those over 55 years of age "likely" to vaccinate for work.

Misinformation

- Over half (57%) of respondents had come across what they believed to be misinformation on COVID-19 vaccines, consistent with September 56%.
- Social media (66%) and friends or family (38%) remain the top two main sources of misinformation. Friends (22%), main-stream media (21%), acquaintances (20%), and websites (20%) are mentioned to a similar level.
- Comments regarding misinformation suggest some of the remaining unvaccinated consider misinformation is coming from Government and that there is a sinister motive.
- As was evident in September, the remaining unvaccinated are increasingly susceptible to misinformation.



- Nearly half (45%) would look for official information if the misinformation was of concern, up from 36% in September
- Three in ten (30%) would not take a vaccine if misinformation looked credible, up from 19% in September.

Persuasive messages

- Respondents who were not vaccinated were asked to select from a list of reasons that would make them more likely to get a COVID-19 vaccine. Over half of people who are not vaccinated said they would not get vaccinated for any of the reasons presented to them (54%).
- All messages have a small incremental impact on those who are not vaccinated. Getting vaccinated to protect one's own health is likely to be the most impactful message, at 29%. Other messages that point to the need to uphold the medical system are also likely to have some impact: 20% to make sure hospitals are not overwhelmed, 18% to ensure family can get medical care when needed, 18% make sure medical care can continue, 17% to help stop the spread throughout the country, and 17% to keep the number of people needing hospital care at manageable levels.
- Having read information about delayed and "long haul COVID", 19% of unvaccinated respondents said that this would make them more likely to get the vaccine. Indications are that these people were primarily those already likely to get vaccinated. It has no impact on those who currently say they will "definitely not" get vaccinated.

Protecting others by getting vaccinated

- Respondents who were not vaccinated were asked to select from a list who, if anyone, they would most like to protect from COVID-19 and the Delta strain by getting vaccinated.
- 45% of unvaccinated respondents would get vaccinated to protect someone on the list and 25% specifically said they would not get vaccinated to protect others.
- Elderly relatives (24%) and parents (23%) are the two groups people most want to protect. Other family members also feature and, to a lesser extent, people in the wider community.

- Nearly a fifth (18%) of those who are yet to be vaccinated indicated they could be motivated to get vaccinated to protect children under 12 and those who can't take the vaccine for medical reasons, down from 32% in September.
- Four in ten (39%) said they would definitely not get vaccinated to protect others, up from 21% in September.

Needs met during vaccination process

- In October 93% of those who had received at least one vaccine said their language needs had "definitely" been met during the vaccination process.
- Only 56% of those with a disability or impairment who had received at least one vaccine said their needs were definitely met (a decrease from 62% in September; August 69%; July 68%) and 16% said they were "mostly" met (September 11%).

Trust in management of the pandemic

- The average trust in the Ministry of Health and Government to manage the pandemic, on a scale of 0 to 5 (with 5 being highest) has dropped to 3.3 out of 5, the lowest measured level of trust since monitoring began in February 2021.
- Those who have been fully vaccinated (two doses) have an average trust level of 3.6, and 62% totally trust or mostly trust the Ministry of Health and Government to manage the pandemic.
- Those unvaccinated and un-booked have an average trust level of 1.0 out of 5, with only 8% of totally or mostly trusting the Ministry of Health and Government, and 48% saying they totally distrust them.
- This suggests a large divide in the population between those who trust the MoH or Government and those who do not, with a person's decision to get vaccinated or not strongly related with their level of trust.
- Rating of the vaccination response has deteriorated over time and now sits at the lowest reported level since monitoring began, dropping slowly over time from a high of 7.2 out of 10 in February 2021 to 5.9 in October 2021.

