

# Vaccine Hesitancy in the Philippines: WHAT, WHAT and WHY

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# Key Questions

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What is it?

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What is the extent of the problem?

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Why does it happen?

# Understanding Hesitancy

- Vaccine hesitancy has **many inter-related determinants**
  - Assessed in a **systematic manner**  
→ explore individual, group, and contextual influences, as well as any vaccine/vaccination specific issues
  - Diagnosis of the underlying reasons for hesitancy should **differentiate between barriers related to acceptance and access**
- Addressing vaccine hesitancy requires
  1. **Understanding** of the magnitude and setting of the problem
  2. **Diagnosis** of the root causes
  3. Tailored **evidence-based strategies** to address the causes
  4. **Monitoring and evaluation** to determine the impact and sustainability of the intervention

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# Vaccine hesitancy

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- Delay in acceptance or refusal of vaccination despite availability of vaccination services (SAGE, 2014)
- A motivational state of being conflicted about, or opposed to, getting vaccinated (BeSD Working Group 2022)
  - New definition recognizes hesitancy as an intention or motivation and is separate to the resulting behaviour
  - Enables behaviors and their many other influences to be better understood and measured separately

# Core concepts: A continuum of attitudes and behaviours



**Vaccine hesitancy: a delay in acceptance or refusal of vaccines, despite available services.  
Is complex and context specific, varying across time, place, and vaccine**

# Vaccine Hesitancy

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- Vaccine-hesitant individuals are a heterogeneous group who hold **varying degrees of indecision** about specific vaccines or vaccination in general
  - Vaccine-hesitant individuals may **accept all** vaccines but remain concerned about vaccines, some may **refuse or delay some** vaccines, but accept others; some individuals may **refuse all** vaccines

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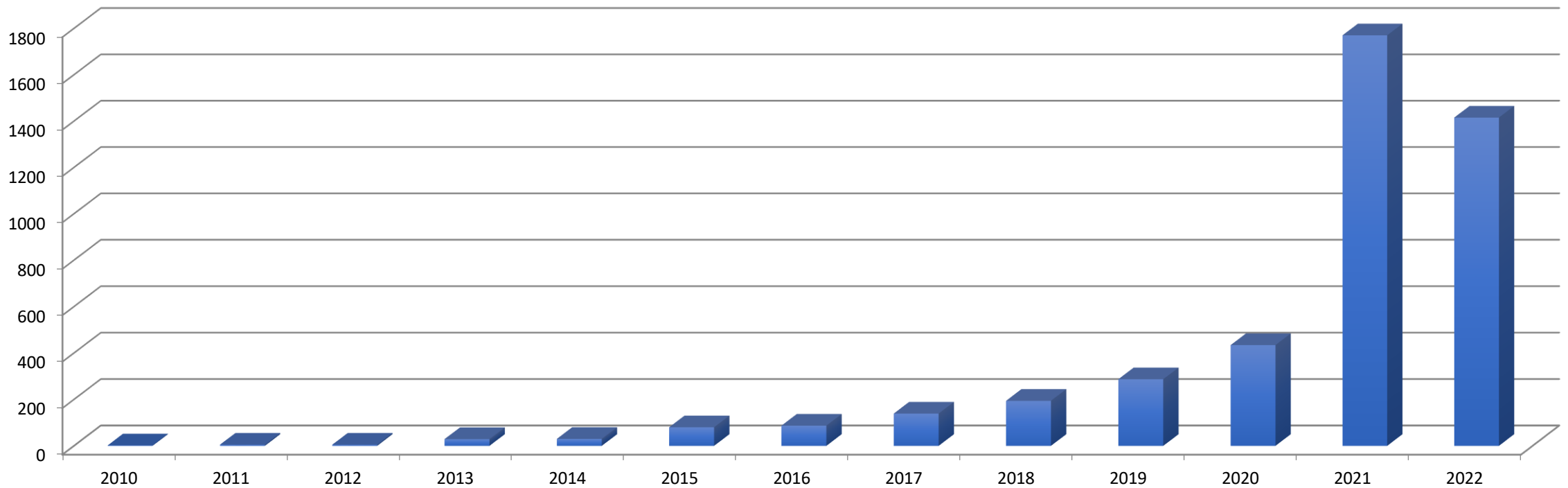
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Why does it happen?





# No of publications on vaccine hesitancy, PubMed, 2010-2022





# World Health Organization



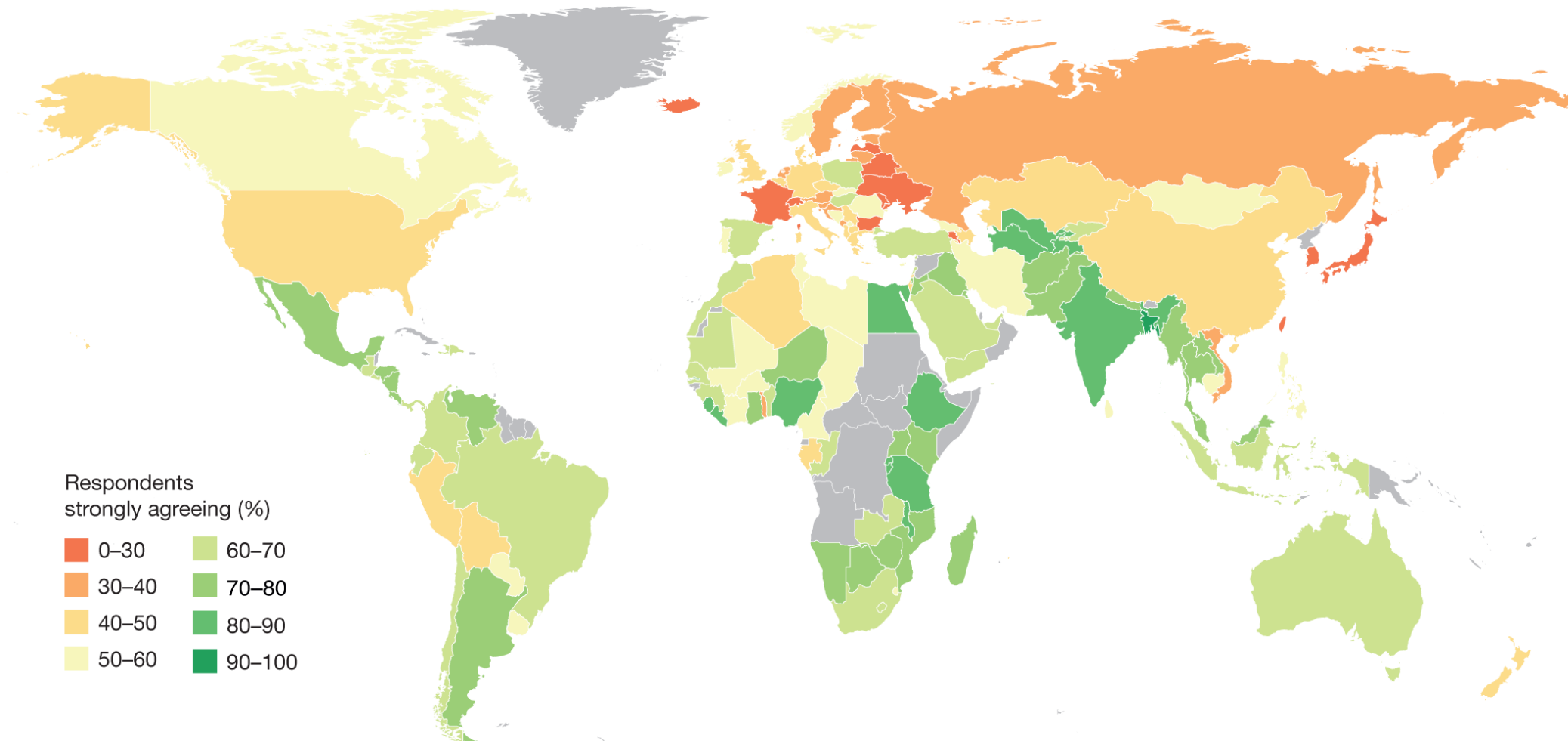
Ten threats to global health in 2019

## Major Threats to World Health in 2019

- 1 Vaccine hesitancy
- 2 Air pollution and climate change
- 3 Influenza pandemic
- 4 Ebola and other pathogens
- 5 Non-communicable diseases
- 6 Vulnerable communities
- 7 Antibiotic resistance
- 8 Dengue
- 9 HIV/AIDS
- 10 Weak primary healthcare

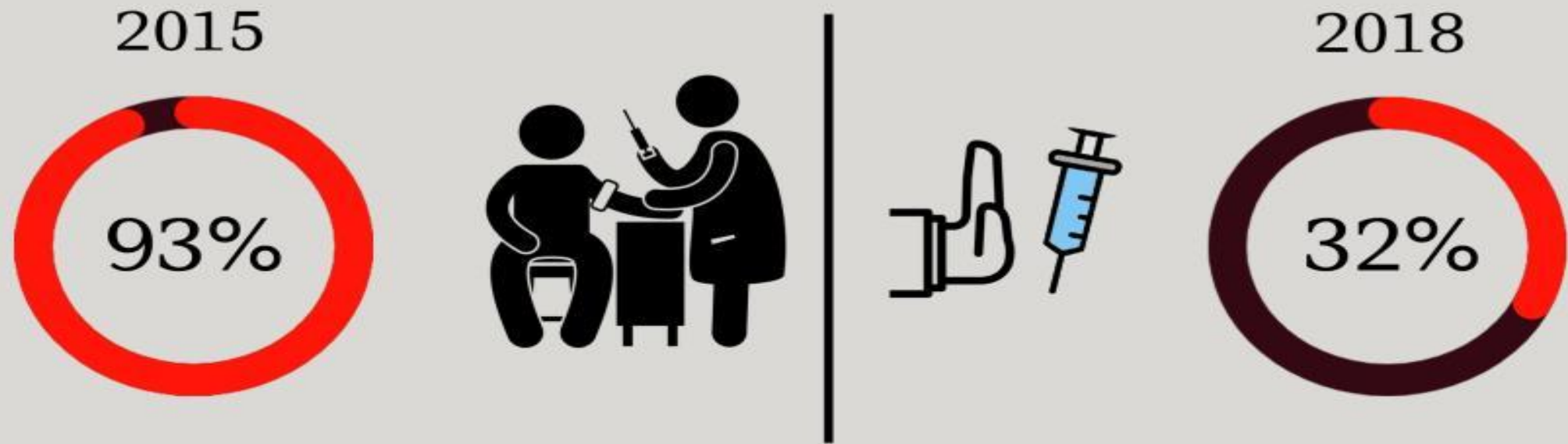
*\*Information courtesy of WHO*

# Global confidence in vaccine safety in 2018



Levels of confidence in vaccine safety varied considerably across countries and regions, with several countries showing very low levels of confidence...

# Dramatic drop in vaccine confidence in the Philippines

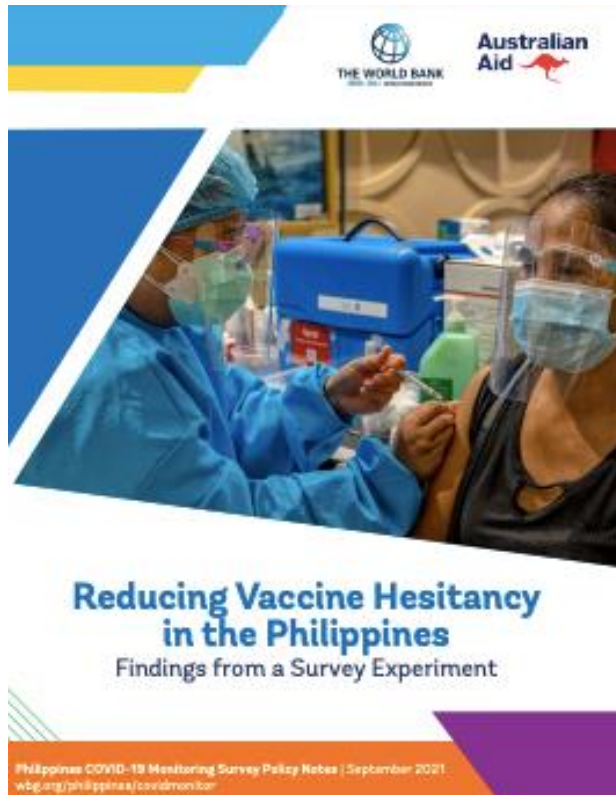


1,500 participants were re-surveyed in 2018 to analyze the Philippines' confidence data against 2015 data for the country <sup>2</sup>

Vaccine **safety**: four-fold drop in confidence, from 82% strongly agreeing that vaccines are safe in 2015, to only 21% in 2018 <sup>2</sup>

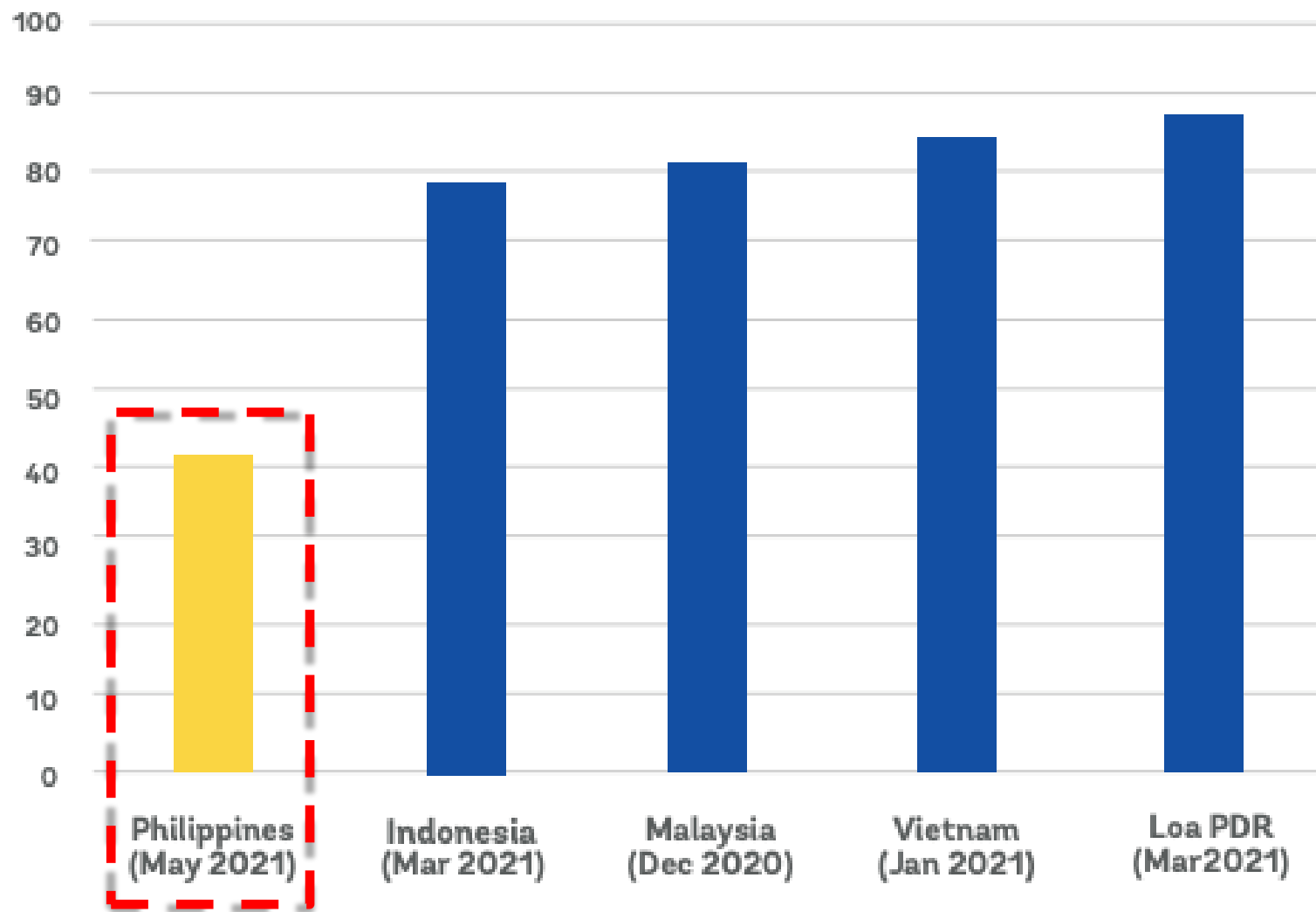
Confidence in the **effectiveness** of vaccines dropped from 82% in 2015 to 22% in 2018 <sup>2</sup>





Vaccine hesitancy is not unique to the Philippines, but the level of hesitancy in the country is higher than other countries

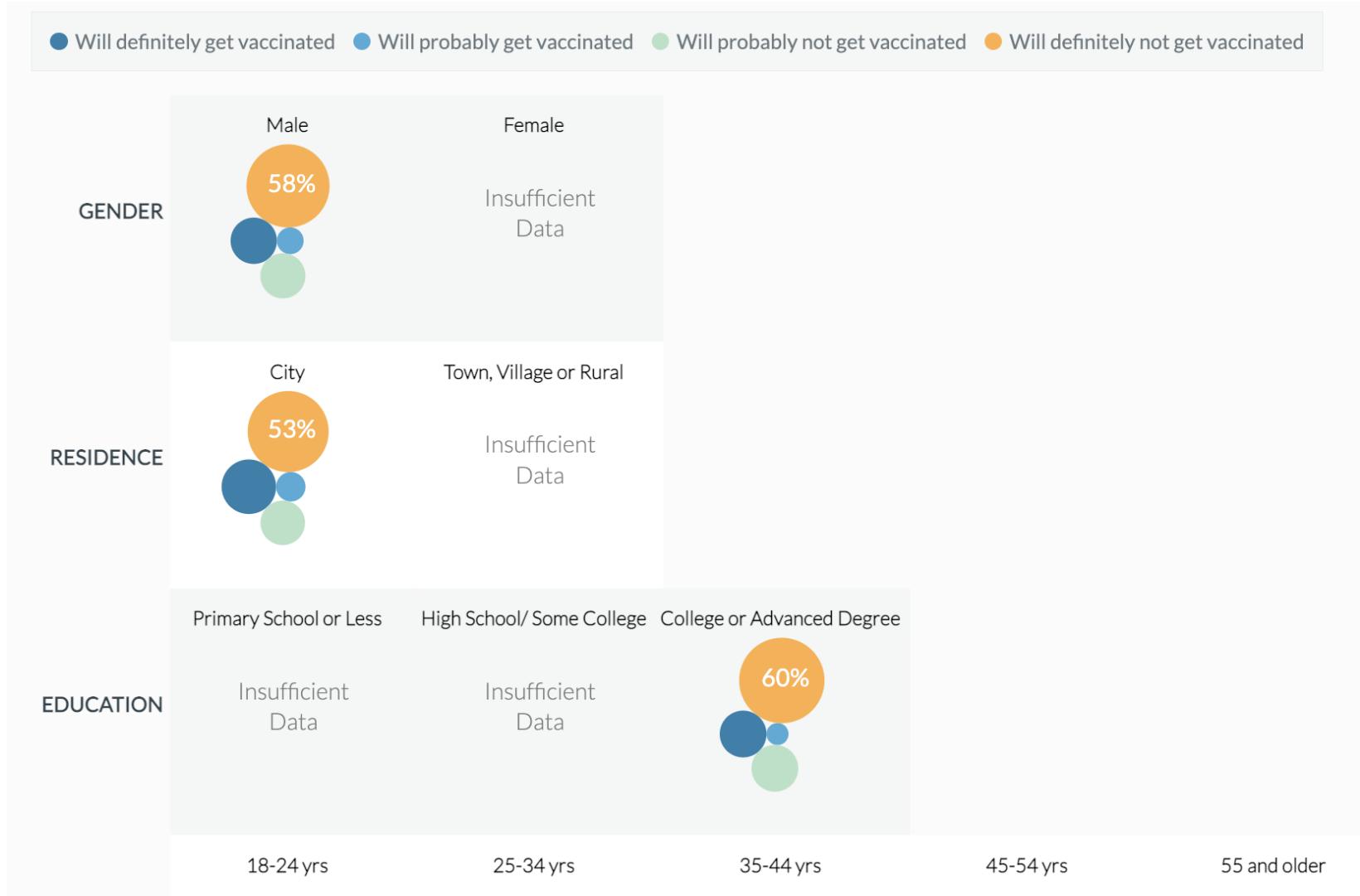
**Figure 1. Share of respondents willing to receive vaccines**



Source: World Bank High Frequency Monitoring Survey

# COVID Behaviors Dashboard

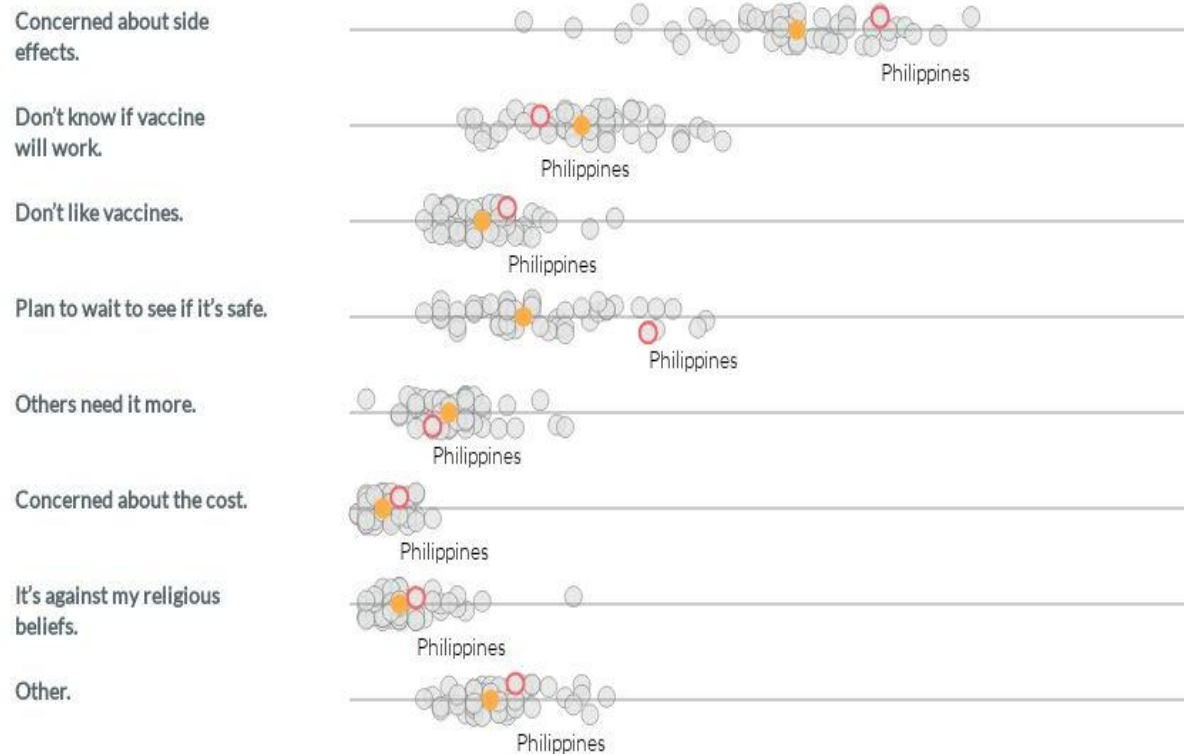
Among **unvaccinated** participants, who is most willing to accept a vaccine?



## What are the reasons driving vaccine hesitancy?

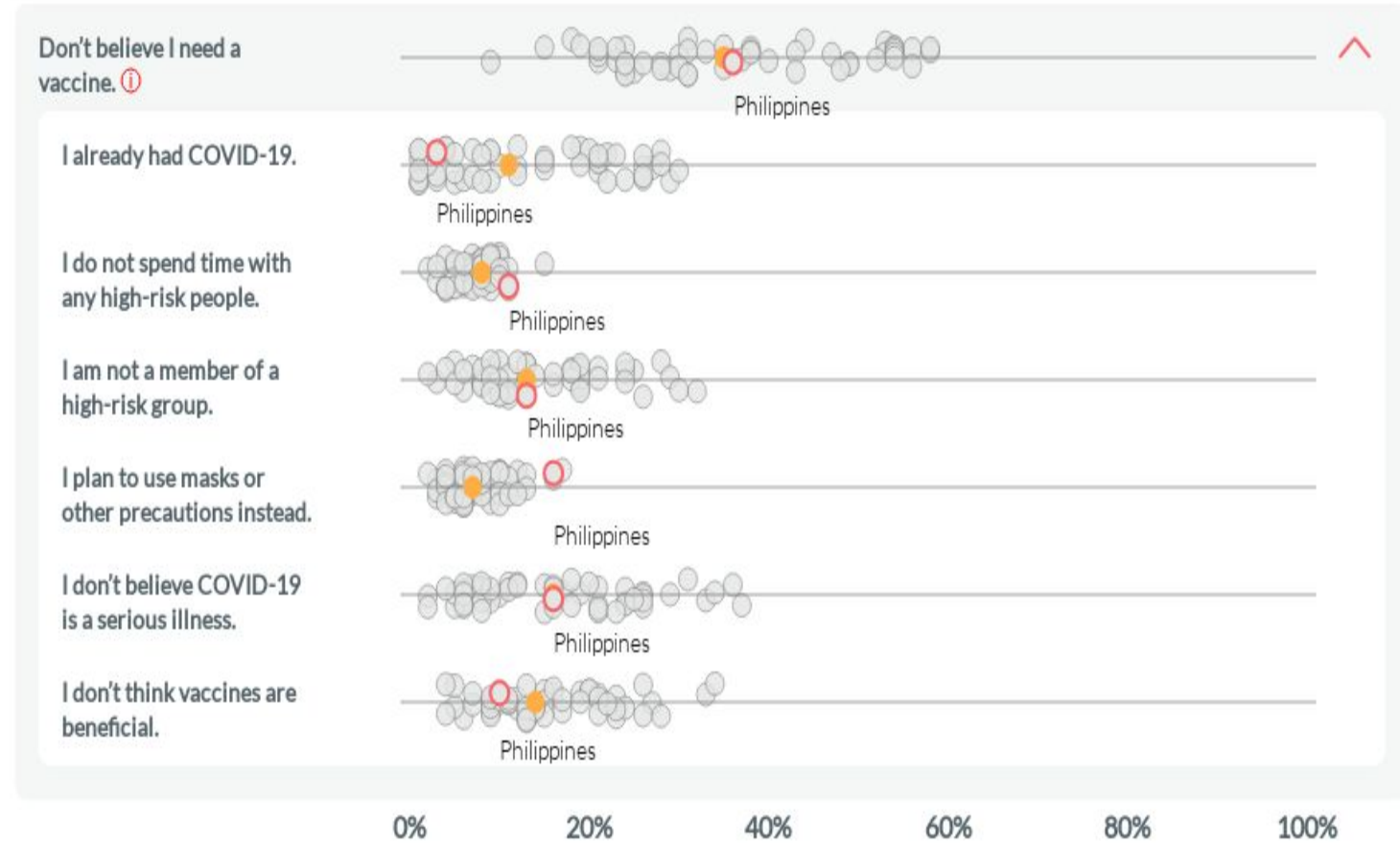


● Represents the **Weighted Percentage** for one country   ● The global median   ● The selected country



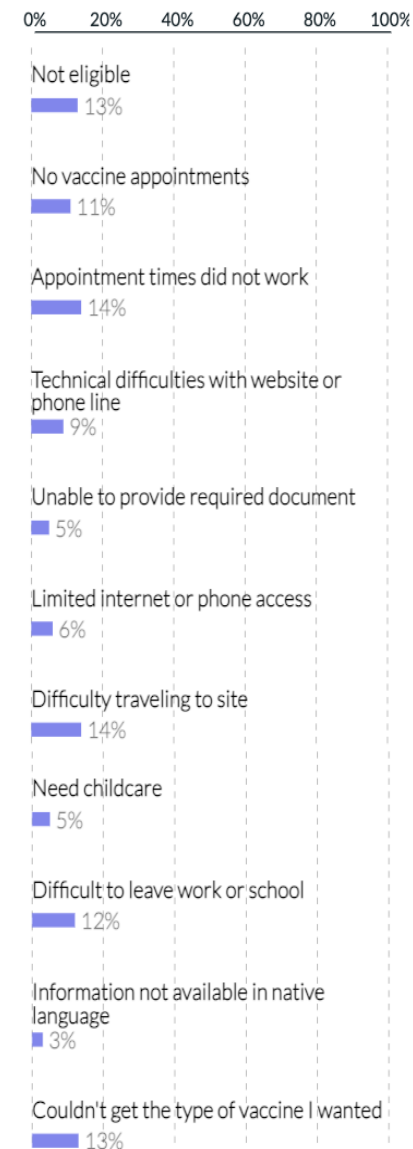
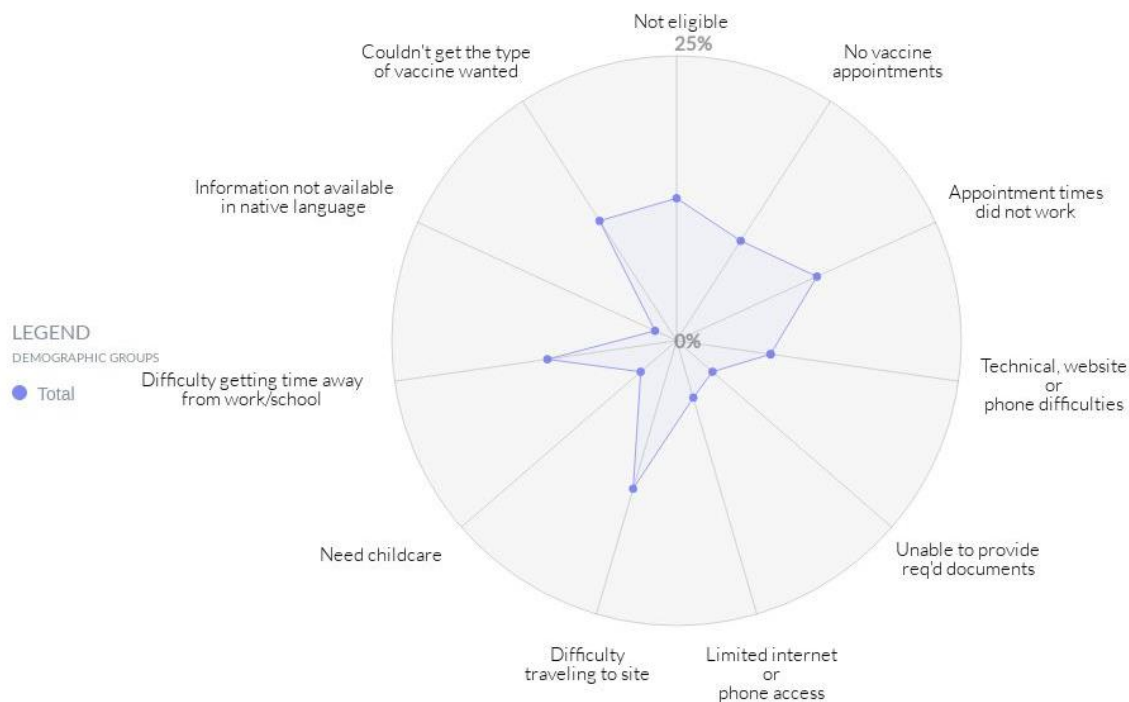


What are the reasons driving vaccine hesitancy?



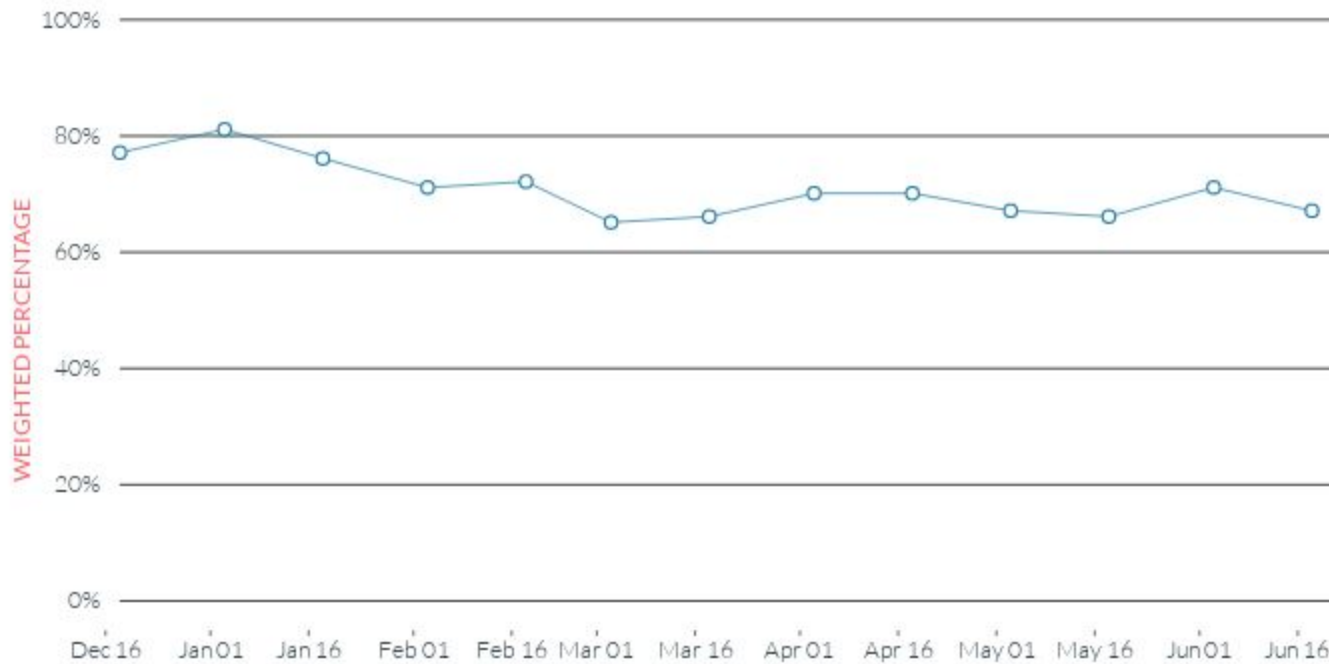
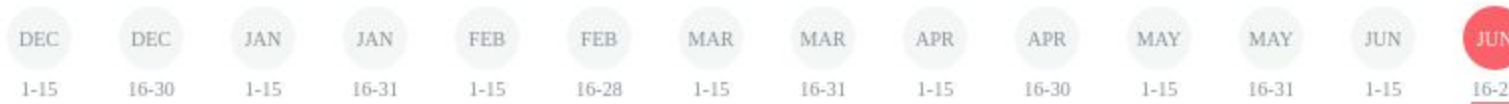
# COVID Behaviors Dashboard

What are the structural barriers reported by people who are **unvaccinated** but will definitely or probably get a COVID-19 vaccine?



# COVID Behaviors Dashboard

Will people choose to get a COVID-19 vaccine for their oldest child under age 18 when eligible?



START OF DATA COLLECTION PERIODS

## COVID-19 perceptions and behavioural insights survey



DOH Health Promotion Bureau x WHO RCCE Team



## Vaccine acceptance at a glance

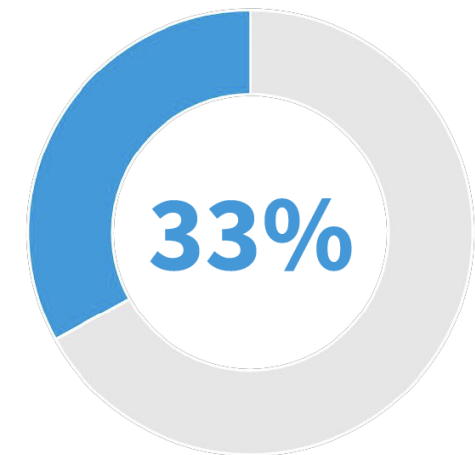


**97%** acceptance of general vaccines

**95%** acceptance of COVID-19 vaccines

**97%** advocacy for all vaccines

### Respondents that have had booster doses



## COVID-19 perceptions and behavioural insights survey



DOH Health Promotion Bureau x WHO RCCE Team



## Reasons for vaccine acceptance



Illness protection

80%

Protection from variants

77%

Return to normal life

65%

Stopping the spread

64%

Keeping schools open

60%

# Key Questions

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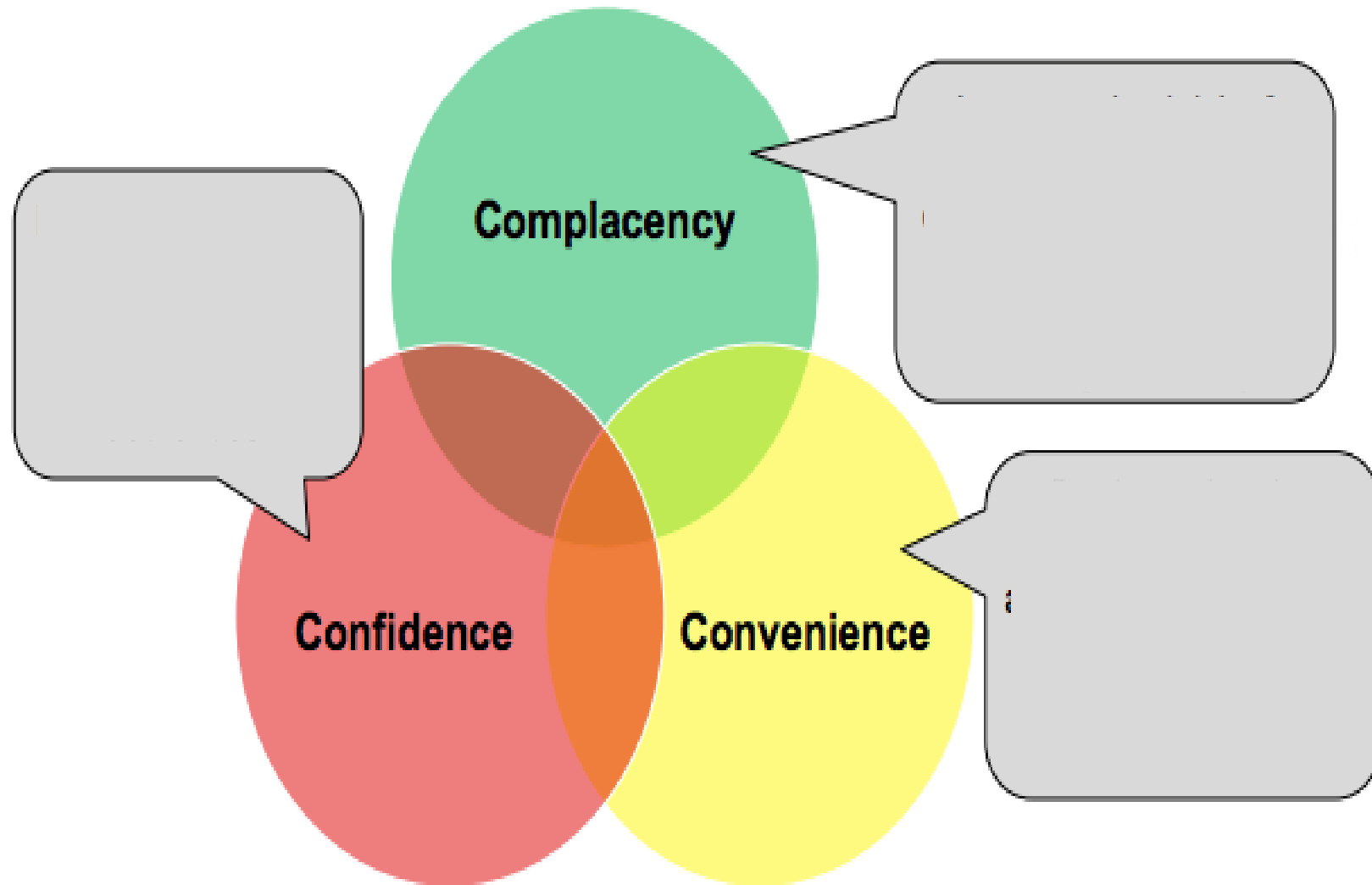
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**Why does it happen?**

# Vaccine Hesitancy

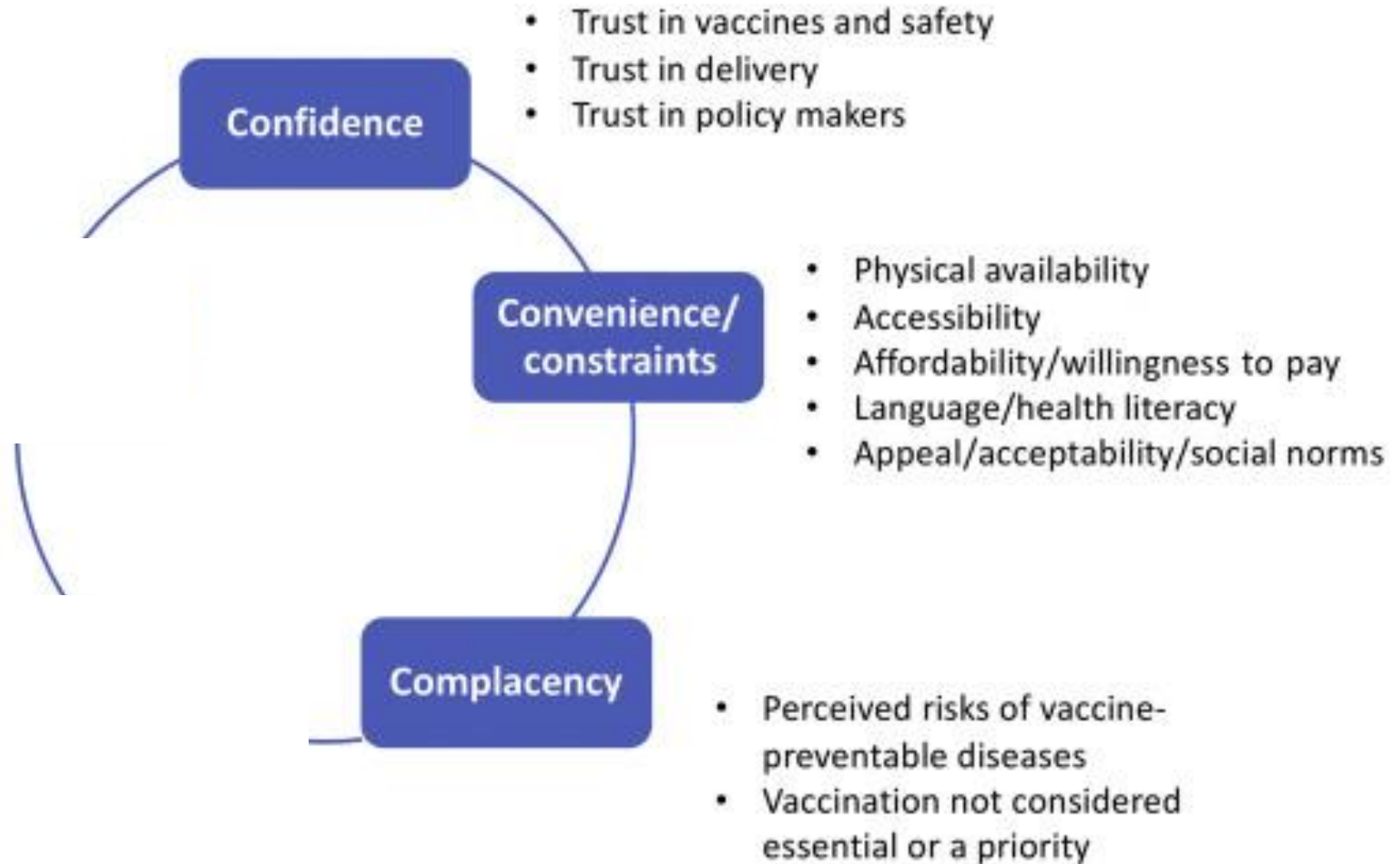
- A behavior, influenced by a number of factors including issues of:
  1. **Confidence:** do not trust vaccine or provider
  2. **Complacency:** do not perceive a need for a vaccine, do not value the vaccine
  3. **Convenience:** access

# Factors contributing to hesitancy





# The 5C model of factors influencing vaccine hesitancy and acceptance



# The Problem: COVID-19

- *Deliberate attempts to disseminate wrong information to undermine the public health response and advance alternative agendas of groups or individuals.*
- *Mis- and disinformation can be harmful to people's physical and mental health; increase stigmatization; threaten precious health gains; and lead to poor observance of public health measures, thus reducing their effectiveness and endangering countries' ability to stop the pandemic.*

Image Source: KPBS.org



Source: Managing the COVID-19 infodemic: Promoting healthy behaviours and mitigating the harm from misinformation and disinformation  
Joint statement by WHO, UN, UNICEF, UNDP, UNESCO, UNAIDS, ITU, UN Global Pulse, and IFRC

# Cause & Contributing Factors

## Coronavirus misinformation: quantifying sources and themes in the COVID-19 'infodemic'

Sarah Evanega<sup>1,2</sup>, Mark Lynas<sup>1</sup>, Jordan Adams<sup>2</sup>, Karinne Smolenyak<sup>2</sup>

<sup>1</sup>The Cornell Alliance for Science, Department of Global Development, Cornell University, Ithaca, NY

<sup>2</sup>Cision Global Insights, Ann Arbor, MI

\*Corresponding author: [snd2@cornell.edu](mailto:snd2@cornell.edu)

## The COVID-19 Social Media Infodemic

Matteo Cinelli<sup>1</sup>, Walter Quattrociocchi<sup>2,1,3</sup>, Alessandro Galeazzi<sup>4</sup>,  
Carlo Michele Valensise<sup>5</sup>, Emanuele Brugnoli<sup>1</sup>, Ana Lucia Schmidt<sup>2</sup>, Paola Zola<sup>6</sup>, Fabiana Zollo<sup>2,1</sup>, and Antonio Scala<sup>1,3</sup>

<sup>1</sup>CNR-ISC, Roma

<sup>2</sup>Universit Ca Foscari di Venezia

<sup>3</sup>Big Data in Health Society, Roma

<sup>4</sup>Universit di Brescia

<sup>5</sup>Politecnico di Milano

<sup>6</sup>CNR-IIT, Pisa

Financial Gain

Political Gain

Experimental Manipulation

# Key Questions

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*What is it?*

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*What is the extent of the problem?*

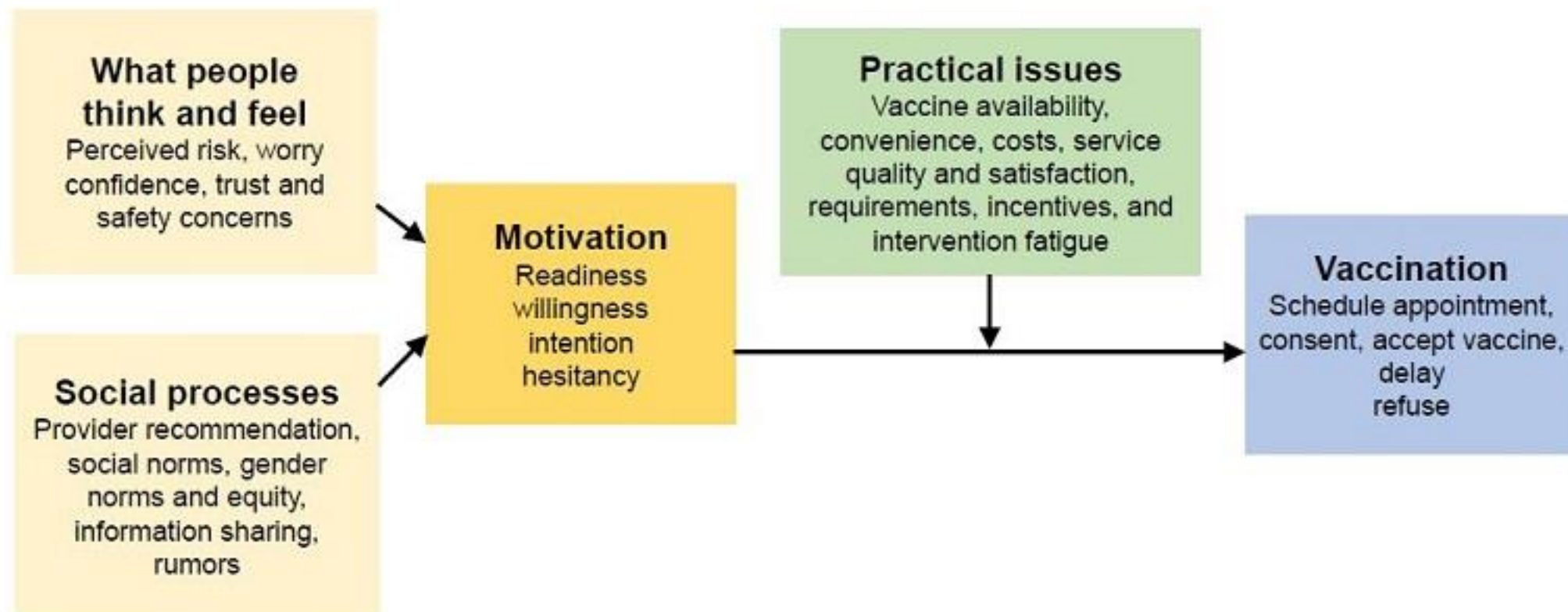
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*Why does it happen?*

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**How can we help?**

# Increasing Vaccination Model



Source: The BeSD expert working group. Based on: Brewer NT, Chapman GB, Rothman AJ, Leask J, and Kempe A (2017). Increasing vaccination: Putting psychological science into action. *Psychological Science for the Public Interest*. 18(3): 149-207



## BUILDING TRUST IN VACCINATION

- **Avoid correcting misperceptions**
- **Pivot to focus on the disease**
- **Use presumptive communication**
- **Utilize motivational interviewing**
- **Build trust through empathy**
- **Tailor communication efforts**
- **Communicate often and transparently**

NATION



## COVID-19 vaccine hesitancy in PH continues to drop — SWS

By: [Gabriel Pabico Lulu](#) - Reporter / @GabrielLuluINQ INQUIRER.net / 10:37 PM January 20, 2022

- Only **8% of adult Filipinos expressed hesitancy** over immunization compared to 18% in September 2021.
- Latest survey showed that **only 6% have admitted being uncertain** about getting vaccinated, compared to the 19% in September 2021; 24% in June 2021; and 35% in May 2021.
- Percentage of those reporting they got at least one dose of the COVID-19 vaccine has steadily increased from 10% in June 2021 to **35% in September 2021**
- **Vaccine hesitancy fell in all areas**, with the largest drop coming from Mindanao

## Framing our messages

Vaccine acceptance has been increasing.

## What we can do



Engage trusted voices



Strengthen last-mile approach



Tell stories that promote safety and protection against severe disease



## SUMMARY

# Sustained management of COVID-19 and crossing the last mile

## Key messages to strengthen



The pandemic isn't over yet.

Let us continue to follow safety measures to protect ourselves and our loved ones.



Booster doses can protect us  
from severe disease.

Let us prioritise those most vulnerable to  
severe disease to get vaccinated now.



Everyone deserves access  
to healthcare.

Amid the pandemic, let's work to ensure  
patients get the care they need.

# In order to tailor booster vaccination communication strategies, an updated 2022 vaccination survey was released in September.

<b>Audience reached</b>	n=2,019 Adult Filipinos (aged 18 years old and above)
<b>Duration</b>	September 13-15, 2022 (3 days)
<b>Methodology</b>	<a href="#">Online survey</a> (through Google Forms), in English and Filipino
<b>Dissemination</b>	Link posted online (Facebook & Viber)
<b>Variables collected</b>	<ol style="list-style-type: none"><li>1. Main barriers &amp; enablers to booster vaccination</li><li>2. General willingness for Omicron-specific bivalent booster vaccines</li></ol>

**SA BOOSTER PINASLAKAS**

★ **SAGUTIN ANG SURVEY NA ITO** ★

Kung ikaw ay Pilipino na 18 na taon pataas,  
kailangan namin ang sagot mo!  
I-access ang survey form sa link at QR code na ito!

[bit.ly/2022BoosterVaxSurvey](https://bit.ly/2022BoosterVaxSurvey)

f /officialDOHgov @DOHgovph www.doh.gov.ph (02) 894 - COVID / 1555

# Overall Discussion

- **Employed respondents** were more likely to complete vaccination with primary series. **Lower socioeconomic status** (i.e. lower education level, income level, or not employed) was associated with hesitancy or refusal of booster vaccination (*May results*).

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*What is the extent of the problem?*

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*Why does it happen?*

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*How can we help?*



“Never, never, assume what is in the minds and emotions of people.  
And never forget that they can change.”

Heidi J Larson  
Director , The Vaccine Confidence Project



# Vax hesitancy PHL

- <https://newsinfo.inquirer.net/1543095/covid-19-vaccine-hesitancy-in-ph-continues-to-drop-sws>
- <https://thedocs.worldbank.org/en/doc/9b206c064482a4fbb880ee23d6081d52-0070062021/original/Vaccine-Hesitancy-World-Bank-Policy-Note-September-2021.pdf>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8426681/>
- <http://www.sws.org.ph/swsmain/artclisppage/?artcsyscode=ART-20220127125240>

# Public trust and the COVID-19 vaccination campaign: lessons from the Philippines as it emerges from the Dengvaxia controversy

Ronald U. Mendoza , Manuel M. Dayrit, Cenon R. Alfonso, Madeline Mae A. Ong

First published: 19 August 2021 | <https://doi.org/10.1002/hpm.3297>

<https://onlinelibrary.wiley.com/doi/full/10.1002/hpm.3297>



# Multiplying champions with Medical and Allied Health Professionals Associations

## Accomplishments

- ✓ **Town Hall with Doctors (in partnership with PMA) (14 Jan)**  
→ Attended by 600-700 participants, livestreamed on DOH FB
- ✓ **Town Hall with Nurses (in partnership with PNA) (16 Jan)**  
→ Attended by 700-800 participants, livestreamed on DOH FB
- ✓ **Town Hall with Pharmacists (in partnership with PPHA) (23 Jan)**  
→ Attended by 800-900 participants, livestreamed on DOH FB
- ✓ **Town Hall with Midwives (in partnership with IMA) (30 Jan)**  
→ Attended by >800 participants, livestreamed on DOH FB

## Upcoming Activities

- ▶ **Town Hall with Confederation of Health Professional Societies**  
→ Includes doctors, nurses, midwives, med tech, rad techs, etc.

***\*\*\*Regional town halls ongoing spearheaded by national organizations***



**How likely are you to get the COVID Vaccine if available, with safety and effectiveness comparable to other common vaccines, and with FDA approval for public use?**

	Town Hall with PMA (14 Jan 2021)	Town Hall with PNA (16 Jan 2021)	Town Hall with Pharmacists (23 Jan 2021)	Town Hall with Midwives (30 Jan 2021)
	Entry Poll (N=301)	Entry Poll (N=298)	Entry Poll (N=534)	Entry Poll (N=298)
Highly Likely	84%	67%	58%	<u>47%</u>
Not Likely	2%	4%	10%	<u>15%</u>
Not Sure	17%	29%	33%	<u>38%</u>



**How likely are you to get the COVID Vaccine if available, with safety and effectiveness comparable to other common vaccines , and with FDA approval for public use?**

	Town Hall with PMA (14 Jan 2021)		Town Hall with PNA (16 Jan 2021)		Town Hall with Pharmacists (23 Jan 2021)		Town Hall with Midwives (30 Jan 2021)	
	Entry Poll (N=301)	Exit Poll (N=293)	Entry Poll (N=298)	Exit Poll (N=314)	Entry Poll (N=534)	Exit Poll (N=723)	Entry Poll (N=492)	Exit Poll (N=492)
Highly Likely	84%	<u>94%</u>	67%	<u>83%</u>	58%	<u>88%</u>	<u>47%</u>	<u>75%</u>
Not Likely	2%	<u>1%</u>	4%	<u>4%</u>	10%	<u>3%</u>	<u>15%</u>	<u>5%</u>
Not Sure	17%	<u>7%</u>	29%	<u>13%</u>	33%	<u>9%</u>	<u>38%</u>	<u>20%</u>

**Town halls are effective ways of encouraging medical and allied health professionals to get vaccinated.**



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# Addressing Vaccine Hesitancy

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- Although researchers have developed many tools for understanding the prevalence of vaccine hesitancy and the factors that drive it, moving toward effective and scalable strategies to build confidence in vaccines is more complex
  - This is understandable, given that vaccine decisions are made across the lifespan, can change over time, are highly individual, and often take place within the context of limited personal experience with vaccine-preventable diseases....

# Addressing Vaccine Hesitancy

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- Many interventions and strategies focus on supporting successful provider-patient communication about vaccines, and building a culture of immunization support through practice-level activities and systems
- One common thread is the **role of the individual clinician as a trusted source of vaccine information and advice** for patients or their parents
  - This holds true, even for parents who express vaccine hesitancy or who do not plan to follow vaccine recommendations

## **Table 1**

Talking vaccination: some rules of thumb.

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Remember importance of your recommendation and example

Present vaccination as the default

Alert to local reactions

Address one concern

*But*

Listen first

Beware of debunking myths

Use facts sparingly

Be careful with fear

Maintain your authority

Have your own vaccination story

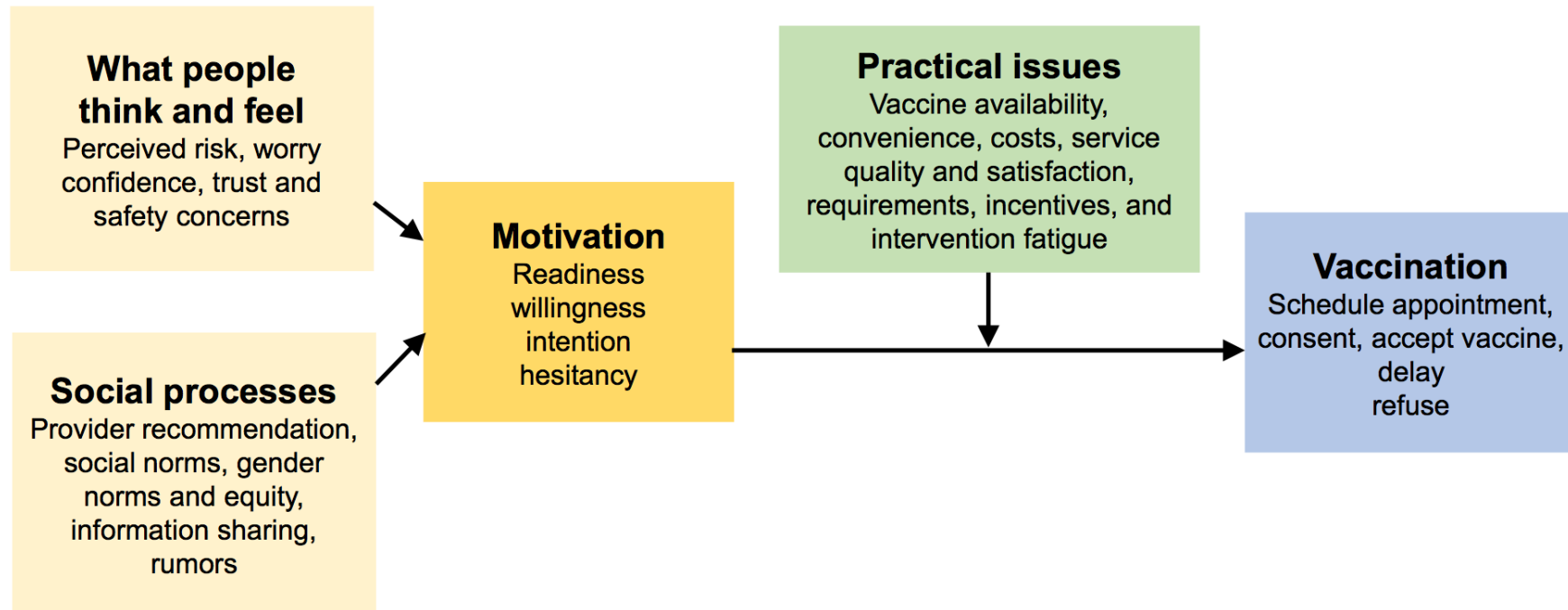
If multiple concerns, elicit underlying beliefs

Minimize pain of vaccine

Remain presumptive to the end

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# Increasing Vaccination Model



Source: The BeSD expert working group. Based on: Brewer NT, Chapman GB, Rothman AJ, Leask J, and Kempe A (2017). Increasing vaccination: Putting psychological science into action. *Psychological Science for the Public Interest*. 18(3): 149-207