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Title

COVID-19 virus and vaccination attitudes among healthcare workers in Michigan

Priority 1 (Research Category)

COVID-19

Presenters

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Abstract

Context: Mass vaccination serves as a potential solution to combat the Coronavirus disease 2019 (COVID-19) pandemic, with vaccine hesitancy being a recognized impediment. Collection of data defining the characteristics of healthcare worker (HCW) attitudes towards the vaccine can provide insight into vaccine hesitancy.

Objective: To determine HCWs' attitudes regarding the COVID-19 vaccination and reasons for vaccine hesitancy.

Study Design and Analysis: This cross-sectional study surveyed the attitudes of HCWs in Michigan using three-point agree/disagree scale questions. t-test and analysis of variance were used to measure HCWs' attitudes towards the COVID-19 virus and vaccines.

Population studied: 120 HCWs from Isabella, Saginaw, Sanilac, and Wayne counties in Michigan.

Results: Most HCWs received (95.9%) and recommended (98.3%) the COVID-19 vaccine. The top three factors that HCWs cited for recommending a COVID-19 vaccine to a patient are: 1) Efficacy of the vaccine, 2) Current exposure to patients with active COVID-19 infection and risk of virus spread, and 3) Safety of vaccine and long-term follow-up. Being a female HCW ($P=0.01$) or being a HCW outside of the 55–64 years age range ($P=0.036$) was associated with increased concern of contracting COVID-19. Regarding the COVID-19 vaccines, our data demonstrated that: 1) HCWs who specialized in family medicine ($P=0.028$) were more likely to agree that there was adequate testing compared to those who did not specialize in family medicine; 2) White HCWs ($P=0.024$) were less concerned with the speed of

development compared to non-white HCWs; 3) Of all age groups, HCWs aged 55-64 years ($P=0.02$) were the least concerned about side effects 4) Of all provider types, physicians ($P=0.017$) were the least concerned about long-term effects.

Conclusion: Gender, age, ethnicity, provider type, and medical specialty showed statistically significant differences among attitudes towards the COVID-19 virus and vaccines. Vaccine hesitancy among HCWs can have negative effects on their patients. Focusing educational efforts on HCW demographics who are more likely to have negative attitudes can potentially decrease vaccine hesitancy.