



COVID-19 Vaccine Hesitancy Research among people experiencing Drug and Alcohol Addiction in Partnership with Turning Point

Summary Report



August 2022



Table of Contents

- **3** Acknowledgement
- 4 Background and local approach
- **5** Research Objective and method
- **6** Key findings- Vaccine uptake
- 7 Key findings- Reasons for hesitancy
- **8** Key findings- Outreach and Logistics
- **9** Key findings- Accessibility issues
- **10** Key findings- Vaccine brand
- **11** Key findings- What influences choice?
- **12** Learning
- **13** Conclusion
- **14** Next steps

Acknowledgement



Oxford City Council are grateful to the clients of Turning Point who shared their experiences of accessing COVID-19 vaccination in Oxford. We also thank Turning Point Oxford, especially Mark, Edward and all the Community Champions who worked very closely with us and encouraged their client group to take part in the survey. We could not have gathered such insightful data from those experiencing drug and alcohol addiction without the support of Turning Point.

We also want to acknowledge the contributions from development stage, by our health colleagues namely Oxfordshire County Council Public Health and OCCG now Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ICS).





Community Vaccine Champions Programme

BACKGROUND

In January 2022, the Department of Leveling Up, Housing and Communities funded 60 Local Authorities which have the lowest rates of vaccination uptake (according to the available NHS data at the time) to response to unequal effects of the pandemic, address vaccine inequity, promote vaccine uptake and behaviour change. Oxford was one of the local authorities who received funding in the second round.

Since the launch of the national COVID-19 vaccination programme, it has become clear that there are also regional and local disparities in vaccine uptake between various groups and communities. These disparities occur at a very local level and have a wide range of causes. These new disparities are again affecting cohorts with prior vulnerabilities, in both COVID-19 impact and socio-economic terms; and it is these groups that the Community Vaccine Champions programme will seek to support.

LOCAL APPROACH

In Oxford, we did not lose sight of the stack inequality in the city. 10 of Oxford's 83 neighbourhood areas are amongst the most deprived in the country. In these areas people die approximately a decade earlier than those living in the wealthiest parts of the city. In respond to these inequalities, we have expanded the programme with Government's permission, to look at wider health inequalities and barriers to accessing health services and work with communities to co-produce practical solutions to best meet their needs. We have ensured that our recruitment is inclusive with Champions coming from all works of life and backgrounds, showcasing the diversity of the city.

We have also utilised Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ICS) data to identify priority groups with low uptake and those experiencing drug and alcohol addiction were among our priority groups, although one of the challenges is that there was very little record and evidence of vaccination status in this cohort.

Recognising that we may not be best placed to do this work solely, we adopted a community-centred approach and grant funded anchor organisations who have the expertise and are trusted by their communities to recruit and support Champions, facilitate outreach and gather insights into barriers to accessing vacination and other health services from their communities. Each anchor organisation has a set of agreed outcomes depending on the cohort, reach and activities planned. Turning Point is one of the anchor organisations that received funding from us to support this work strand.

We are proud to have made the programme accessible to grassroot groups and charity organisations with very simple expression of interest and co-produced Memorandum of Understanding agreed by both stakeholders. Anchor organisations also had the discretion and flexibility to focus and implement what's important to their communities as oppose to a prescriptive or 'top-down' approach. This aligns with our Thriving Communities Strategy principles and the commitment made in our Equalities Strategy.

Designed to add capacity and upskill the voluntary and communities sector where there are lesser recognised 'formal volunteering', we offered all Community Champions mandatory and optional trainings such as Making Every Contact Count to give them the skills needed to do their role effectively and efficiently. Champions are also offered a £200 for personal development training budget of their choice with ongoing support from our Volunteer Coordinator at Oxfordshire Community and Voluntary Action (OCVA).

4



Department for Levelling Up Housing & Communities





Research Objectives and Approach





Objectives

- To understand barriers to accessing COVID-19 vaccination among those experiencing drug and alcohol addiction
- To understand what influence their choice to take or not to take the vaccine
- To understand accessibility issues including logistical barriers
- To increase vaccine equity by addressing local barriers to access
- To share insights with health colleagues to co-create practical solutions including feeding into the autumn vaccine booster programme

Method

Once funding from Government was confirmed, we approached Turning Point to engage in the Community Champions programme. They suggested to conduct a survey among their client group to understand uptake and assess barriers to accessing COVID-19 vaccine.

Due to capacity issues at the time, Turning Point asked us to develop a number of questionnaires to use in their field work.

In April 2022, they conducted the survey with 15 questions that we developed around COVID-19 vaccine access. Turning Point were asked to review the questionnaire and amend as necessary. The questionnaire were simple and in plain English and Turning Point felt that they were good conversation starters.

87 respondents participated in the survey, all of whom were Turning Point's clients. 15% were female and 85% were male with age range predominantly between 30-50 years old. They did face to face meetings using hard copies of the questionnaire to facilitate conversation with participants in their own space. Communications for the survey were promoted by Turning Point's Mentors and Community Champions using posters and face to face interactions at all temporary accommodations. Engagement varied from 1-1s to group conversations.



Key Findings



Vaccine Uptake

Have you had the COVID-19 vaccine?



69 (79%) out of the 87 respondents have been vaccinated

Vaccine Hesitancy



6

7

Key Findings

Reason for Hesitancy

Top 3 reasons for hesitancy:

- Side effects
- Limited knowledge about the vaccine
- Unsure about long term safety of vaccine



- How it might affect fertility
- Created too quickly
- Unsure it is not Halal
- Unsure it isn't safe in the long term
- It is difficult to get to a vaccine venue
- My friends and family aren't having it
- I don't know enough about the vaccine







OXFORD CITY COUNCIL

www.oxford.gov.ul

Did outreach influence uptake?



QUESTIONS ASKED

Preferred Venue

Outreach

and

Logistics

Doctor's Surgery	56
Walk-in Centre	56
High street Pharmacy	51
Hospital	49
Pop-up Sites	42
Community Centre	32
Preferred Venue	29



COVID-19 vaccine hesitancy among people experiencing drug and alcohol addiction

8

Barriers to Access



Accessibility Issues



1/3 of people who have not had the vaccine would get it if they could receive it at a local pharmacy

People who have not had the vaccine and whether they would go to local pharmacy to get it



If a Covid-19 vaccine was available at your local pharmacy, would you get it?



9

Influences





Brand of Vaccine

Did the brand of vaccine for example, Pfizer or Astra Zeneca, affect your choice?



Privileges for the Vaccinated

Did the freedom given to fully vaccinated people influence you to take the vaccine?



COVID-19 vaccine hesitancy among people experiencing drug and alcohol addiction 10

What influences Choice?





If your friends were thinking of getting a Covid-19 vaccine, would you get it too?



The respondents gained the majority of their influences from communications with their peers.



Learning



From group discussions the conversation seemed to sway to a negative view of the vaccine uptake, however when this was done as 1-1 sessions with people, they were more open to having the vaccine and more open to the discussion with less conflicted views.

As a local authority, we couldn't have been able to do this survey so quickly, reach this many people and gain rich insights on our own without the support of anchor organisations like Turning Point who have the expertise, experience and trust in working with this cohort.

Initial data obtained from Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ICS) in January 2022 identified this cohort among low vaccine uptake group (although there was very little record and evidence of vaccination status in this cohort), however, the results from this survey suggest that uptake has improved among this group. The results of this survey will be shared with health colleagues to agree on next steps.



Conclusion



Despite the high uptake among this cohort, 48% of the 87 respondents were hesitant to take the vaccine.

There was still a lot of uncertainty about the vaccine among those who ended up taking the vaccine.

The data shows that the respondent's decision not to take the vaccine would not change regardless of distance or free travel, however uptake may be higher if the vaccine came to them.

Other places respondents would like to go to receive vaccine are prison and Turning Point hub.

There is no stand out barrier but more people did felt that having pre-booked appointments discouraged them from taking up the vaccine.

The results also shows that the different brand of vaccines had hardly any effect on decision.

Although it is not an overriding result it looks like freedoms may have an effect on around 50% of people answering the survey.

It can be seen that people gained the majority of there influences from communications with their peers around them.

From the data gathered accessibility is key. The data shows this cohort would have preferred to go and get the vaccine somewhere local with less travelling time or if someone could come to them would be appreciated.



Next Steps



- Turning Point will host a series of pop up health and wellbeing sessions throughout the autumn & winter at various sites
- We will work with BOB ICS to facilitate access to vaccine mobile clinics and dates for sites at Turning Point
- Continuing to promote COVID-19 vaccination through wordof-mouth throughout the partnerships
- Targeted approach to service user requesting the vaccine, supporting them to attend accompanied if needed and supporting with transport
- Local pharmacies near Turning Point sites to have vaccine available on site and administer to this cohort
- Communication and promotional materials to target existing sites for dissemination
- Direct engagement with this cohort by external services may be ineffective, however going through existing staff or volunteers who are trusted may have a bigger and more meaningful impact

