

## COVID-19 Vaccine Confidence and Uptake Survey Results from Minnesota Prison Staff

**Approach:** UMN's project team collaborated with prison leadership at three Minnesota prisons (St. Cloud, Shakopee, and Rush City), to field a brief, web-based survey about vaccine confidence and uptake with their staff. Participants completed this optional survey between November 17, 2021 and December 9, 2021, and could also opt into a drawing to win a \$100 gift card.

**Survey:** This survey posed multiple questions to assess individuals' vaccine confidence and uptake. The questions varied depending on participants' responses and included short answer opportunities to gather detailed information about their willingness to receive the COVID-19 vaccination. We also asked for input on how to increase vaccine confidence and uptake among prison staff.

**Participant demographics:** 190 individuals participated in this survey and the majority identified as women (55%) and white (91%). The average age of survey participants was 44.3 years. Of the three facilities that participated, St. Cloud had the highest response rate (39%).

### Survey findings:

1. Vaccine uptake and intentions. 76% of respondents said they had already received one or more doses of the COVID-19 vaccine. 65% received a vaccine that required two doses, while 35% received a vaccine that required one dose. Of those who received a vaccine that required two doses, most (99%) received both doses. Of those who had not received the vaccine, the majority (71%) did not intend to.

37% of respondents had already gotten a COVID-19 vaccine booster dose, 22% planned to get a booster dose in the future, and 32% did not plan to get a booster dose.

2. Reasons for getting or planning to get the COVID-19 vaccine. Of those who had gotten or planned to receive the COVID-19 vaccine, the most cited reason was to protect the health of family and friends (79%). Many also wanted to protect their own health (73%), the health of coworkers (64%), and wanted to help end the COVID-19 pandemic (62%).
3. Reasons for not getting or hesitating to get the COVID-19 vaccine. The two most cited reasons for refusal or hesitation were not believing the vaccination is necessary (55%) and not trusting the healthcare and public health systems that are recommending the vaccines (55%).

A little over half of respondents also stated they don't want to or are unsure about getting vaccinated because they already had COVID-19 (52%). Other responses cited concerns about side effects (48%), concerns about the vaccine's ingredients (45%), and waiting to see how others react to the vaccine before deciding (45%).

4. Motivations to get the COVID-19 vaccine. 39% of respondents said talking with healthcare and public health professionals about the vaccine would help motivate them to get vaccinated. 35% said money would help motivate them to get vaccinated, and 26% said reading educational materials about COVID-19 vaccines would help motivate them to get vaccinated.

5. Trusted sources of information about the COVID-19 vaccine. 87% of respondents said healthcare professionals were a trusted source of information about the COVID-19 vaccination. A little less than half (44%) also said national health organizations would be another trusted source of information, and 39% said they would trust local or state health departments.
6. Perceptions of employer's role in increasing vaccine uptake. Half (50%) of respondents said they would not find it helpful if their employer provided resources on the COVID-19 vaccine (e.g., fact sheets or lists of nearby vaccination clinics) to overcome vaccine hesitancy, while 42% said they would find it helpful.

### **The most common questions about the COVID-19 vaccine:**

1. Vaccine effectiveness and effectiveness against variants. Prison staff asked questions about how long immunity lasts from vaccination, why people are getting breakthrough cases, and questions about whether vaccination is really necessary. Specific questions about effectiveness against Delta and Omicron variants (as well as future variants) also came up.
2. Boosters and frequency of booster doses. Many staff members asked questions about effects of booster shots, how long it takes for boosters to be effective, how effective booster doses are, and if booster doses are going to be required every 6 months or every year for the foreseeable future.
3. Side effects and long-term effects of COVID-19 vaccines. Many respondents had questions about the overall side effects of the COVID-19 vaccine and concerns about possible long-term effects from vaccination. Some respondents indicated they want to wait and see information and studies come out on long-term effects of the vaccines before they decide to get it.
4. Information about how the vaccine works and how it was developed. Many staff members had questions about how this vaccine compares to previous vaccines that have been developed. Several respondents commented that the COVID-19 vaccines aren't "real" vaccines. Respondents also had questions about how the vaccine was made so quickly, where they were developed, and why this form of vaccine was developed.
5. Mistrust of information and politicization of vaccination. A few respondents had questions about constantly changing information put out by untrustworthy government officials. Some have also expressed concerns that the media is only focusing on the positive aspects of the vaccine and believe the information that is disseminated is one-sided. Several questions and concerns were mentioned about the politicization of COVID-19 and COVID-19 vaccination.

### **Possible strategies for improving vaccine confidence among prison staff:**

1. Mandate vaccines in correctional facilities. In open-ended questions, many respondents were strongly in favor of COVID-19 vaccine mandates as a condition of employment. On the other hand, some respondents were strongly opposed to mandating vaccines, stating that vaccination is a personal choice.
2. Offer incentives for vaccination. Some respondents suggested both monetary and non-monetary incentives for getting vaccinated, including things like approved leave, money, and pay raises. Other incentive ideas included a relaxation of policies such as shaving facial hair, mask-wearing, and weekly testing for those who are vaccinated. However, some respondents suggested that incentive strategies do not work because they believe it is a form of coercion and bribery, and may make people more skeptical about the vaccine.

3. Providing education and information. Many staff members suggested offering more education about COVID-19 vaccination in different forms, such as Q&A sessions with healthcare professionals and written educational materials. Some respondents expressed a desire for clearer data about breakthrough infections and the effectiveness of the vaccines. Others have shared that they want honest answers and facts, as they believe there is a lack of transparency with the information being shared and believe that some data is being fabricated.

**Contact Information:**

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