

A Qualitative Analysis of COVID-19 Vaccination Intent and Recommendations to Increase Uptake Among Residents and Staff in Six Seattle Homeless Shelters

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INTRODUCTION

COVID-19 vaccination coverage remains lower among people experiencing homelessness (PEH) than the general population.

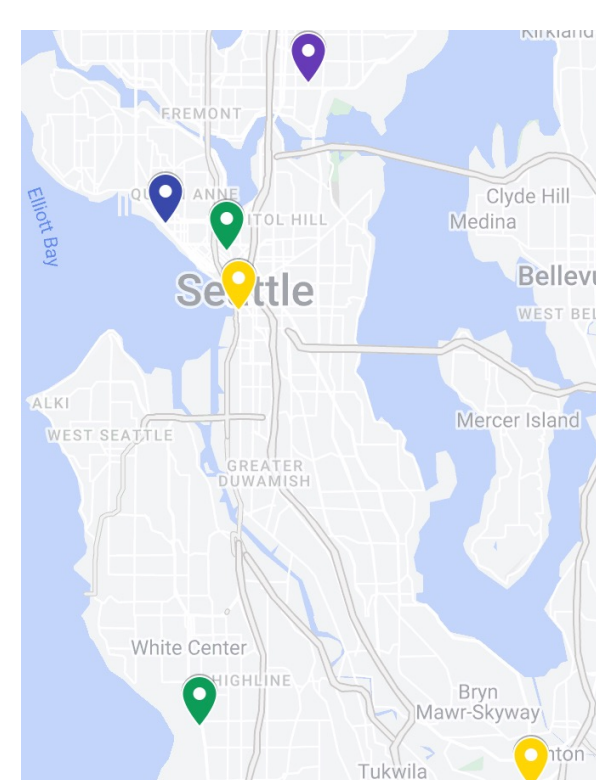
- PEH have higher prevalence of comorbidities, and are at increased risk of severe COVID-19
- PEH and the staff who work in shelters are at high risk for viral infections and outbreaks

Homelessness in Seattle King-County

- Among top 5 US cities with most PEH
- 53% of PEH in Seattle reside in shelters
- Racial & ethnic minorities are overrepresented

METHODS

Objective: To describe perceptions of COVID-19 vaccines in shelter settings over time and identify modifiable factors to improve acceptance among PEH



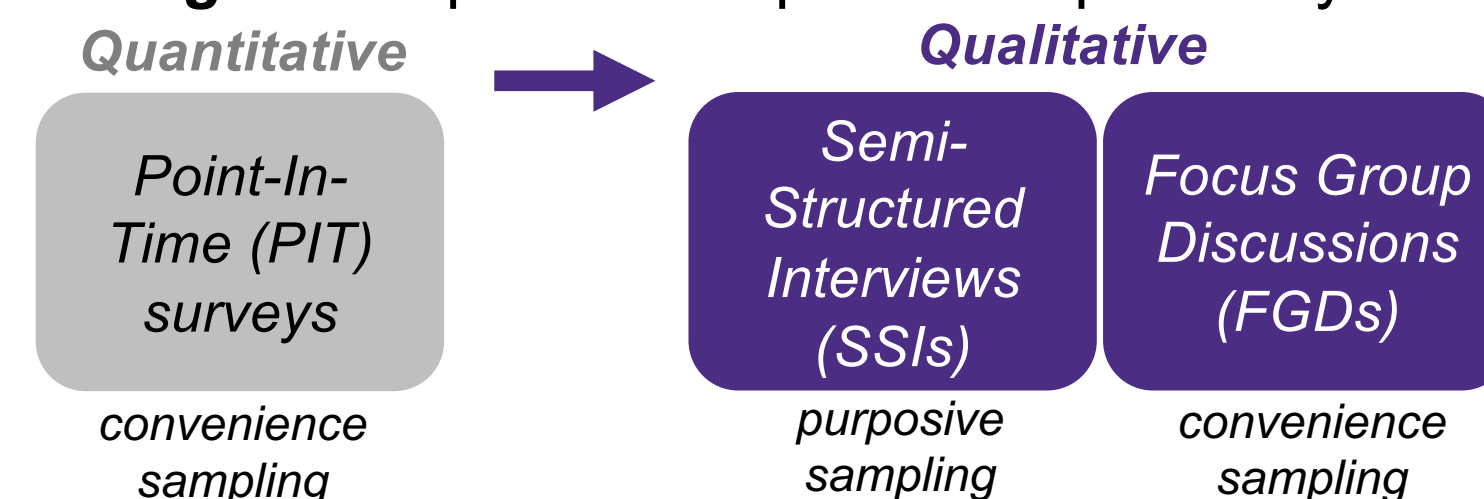
Study population: shelter residents and staff 18+ years across 6 homeless shelters in Seattle, WA from July 27 - October 15, 2021

Shelter site legend

- Adult mixed-gender (n=2)
- Mixed-gender family (n=2)
- Older adult male (n=1)
- Young adult (n=1)

Map of homeless shelter sites

Design: Two-phased sequential explanatory



Data collection: Retrospective information about perceptions of and intent to receive COVID-19 vaccines between March 2020 - October 2021

Thematic analysis in Dedoose

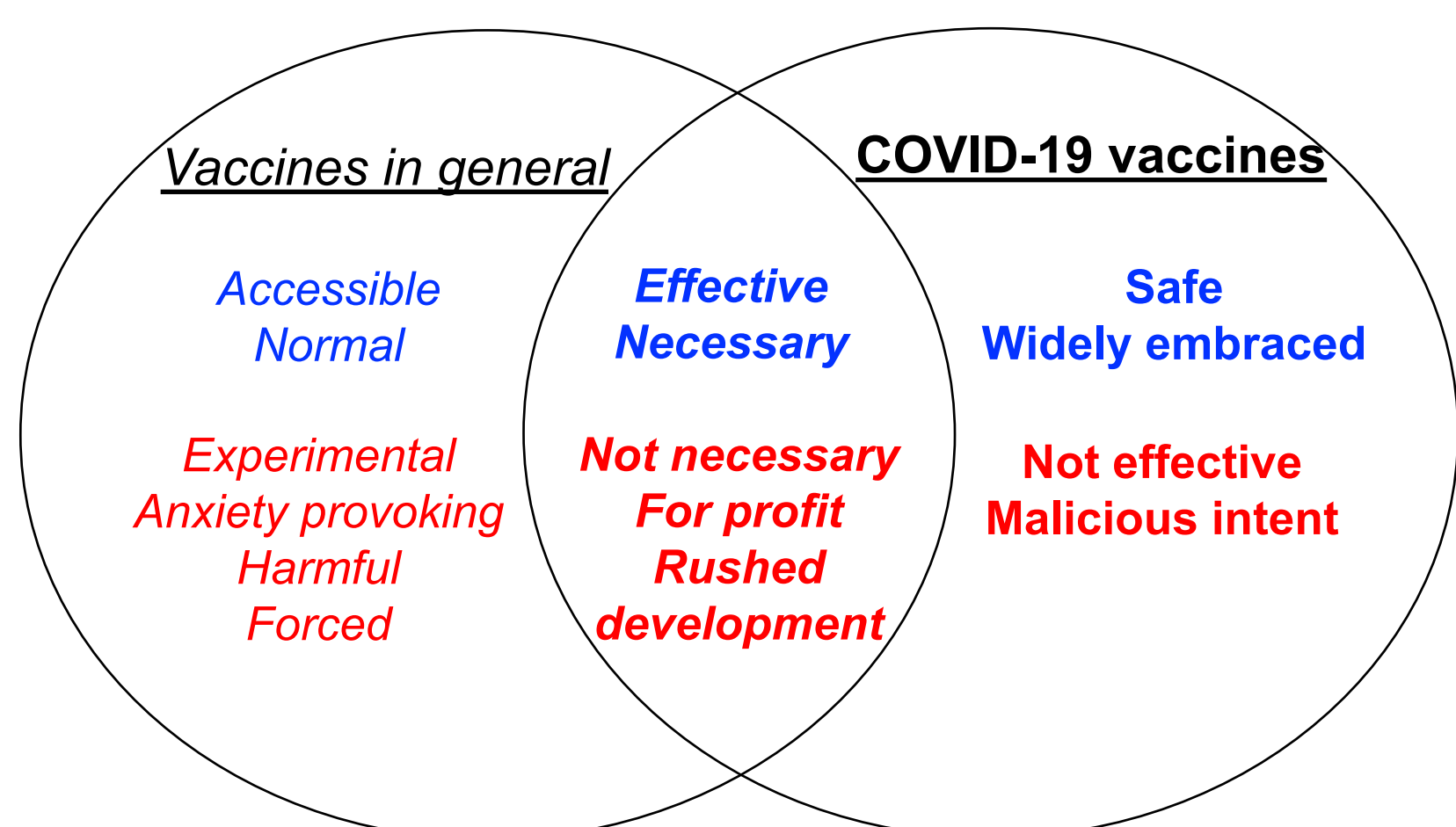
RESULTS

31 SSIs (25 residents, 6 staff) and 8 FGDs (43 residents)

Participant characteristics

- 54% 18-49 years, 32% 50-64 years, 14% 65+ years
- 58% cisgender men, 27% cisgender women, 8% non-binary
- 41% White; 35% Black or African American
- 9% Hispanic or Latinx

Figure 1. Venn diagram of perceptions of vaccines in general and COVID-19 vaccines specifically



Positive vaccine perceptions (blue), negative vaccine perceptions (red). Perceptions about vaccines in general (italicized), COVID-19 vaccines (bolded), and both vaccines in general and COVID-19 vaccines (italicized and bolded).

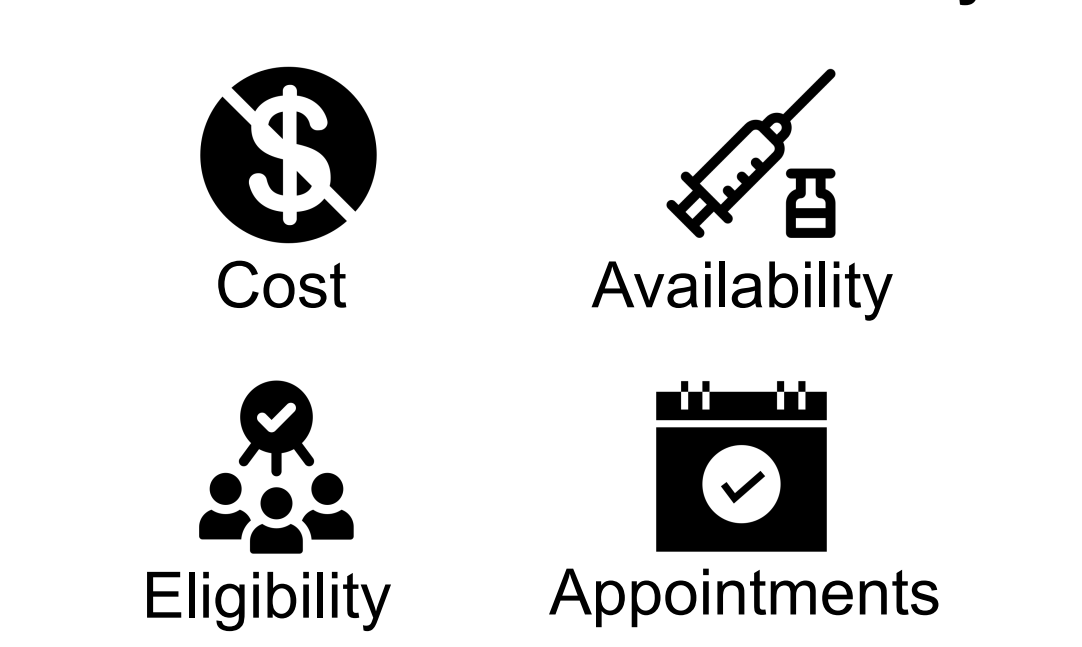
Table 1. Contributors to vaccine decision-making

Reasons to get vaccinated	Reasons not to get vaccinated
<ul style="list-style-type: none"> • Fear of poor health outcomes • Desire to protect others • Desire to "return to normal" • Requirement 	<ul style="list-style-type: none"> • Uncertainty of long-term effects • Reliance on natural immunity • Competing demands • Mistrust • Religious beliefs • Individual concern & superiority

"We were exposed on a regular basis, and I just couldn't have us falling ill. We **didn't have the luxury of being sick...becoming homeless had a huge play in how I looked at the vaccine.**"

"You're worrying about money, about finding a place... You're not worrying about 'Oh, I need to go get the shot, so I can be okay,' **No, you are worrying about life.**"

Figure 2. Factors contributing to COVID-19 vaccine accessibility



"Incentives like **getting a gift card, I definitely would have got [the COVID-19 vaccine] sooner. It wouldn't necessarily change people's minds, but it would definitely help people be like, 'Okay. Let me get the vaccine.'**"

Table 2. Recommendations to increase COVID-19 vaccine uptake in shelter settings

COVID-19 Vaccine Access	COVID-19 Vaccine Information
<ul style="list-style-type: none"> • Bring vaccination services to shelters • Allow drop-ins • Pop-up sites near community, shelter • Provide transport to vaccination sites • Offer choice of COVID-19 vaccine type • Improve appointment sign-up interface • Pre-schedule additional doses if desired 	<p>Information content</p> <ul style="list-style-type: none"> • Simplify message; no complex statistics • Provide details on side effects, what the vaccine does • Highlight importance in communal living settings • Frame as a choice, without threatening language • Do not generalize or ostracize demographic groups <p>Information delivery to residents</p> <ul style="list-style-type: none"> • Reiterate message • Make available in multiple languages • Provide paper-based materials, post where visible in shelters • Shelter staff build rapport and engage residents in discussion • More educational events at shelter • Encourage talking to health care providers • Clarify how to get vaccinated relative to shelter location • Restrict posting of misinformation <p>Information delivery to staff</p> <ul style="list-style-type: none"> • Regular training on how to connect residents to resources • Communicate both verbally and written
COVID-19 Vaccine Incentives & Requirements	
<p>Incentives</p> <ul style="list-style-type: none"> • Money, gift cards • Food • Clothes • Housing • Paid time-off work, childcare for vaccination and recovery <p>Requirements</p> <ul style="list-style-type: none"> • Only mandate when necessary 	

Figure 3. Word cloud of COVID-19 vaccine information sources



Reasons for trust:
objective, honest, professional, recommended by others

Reasons for mistrust:
inconsistent, mishandled, profit-driven

"Later on he said that his information wasn't accurate, it's because they didn't know yet, and **he'd admitted that, that makes him really show trust. I can trust him.**"

CONCLUSION

- This study identified several COVID-19 vaccination strategies that are rooted in the voices and experiences of PEH, which can inform improved vaccine implementation.
- Future research should evaluate recommended strategies to determine feasibility and effectiveness in shelter settings.

ACKNOWLEDGEMENTS

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