



The Tasmania Project

Attitudes towards COVID-19 vaccination

Summary of findings from the fourth general survey (29 Apr – 12 May 2021)

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TASMANIA 

— Institute for Social Change

AstraZeneca haven't made COVID vaccine eligible medical weeks time month one trying
appointment next week health become available ready due also soon plan
flu work vaccinated will vaccinated available waiting GP
vaccination want first know yet need booked will soon
waiting tomorrow vaccine still will sure
appointment First dose weeks m May go next week shot
booked next week injection GP days table made appointment later see intend
jab around yet vaccine available side effects time Astra Zeneca vaccine doctor flu shot

Key Findings

Findings from the Fourth General Survey of The Tasmania Project (TTP4) show that almost 9% of respondents are choosing not to be vaccinated, with another 10% saying they do not yet know if they will be vaccinated or not.

More than 4 out of 5 respondents (n=1176) either have been vaccinated or intend to be vaccinated, and men and the most educated are more likely to choose to be vaccinated.

Respondents seem to be more likely to accept a vaccine than Australians in general, however the difference is small.

- Respondents aged 65 years and above and those with a university degree are more likely to accept a vaccine, and more women than men are unsure.

- We observed a strong association between willingness to receive a COVID-19 vaccine and an influenza vaccine.
- Respondents are more likely to accept the Pfizer-BioTech vaccine than AstraZeneca or other vaccines, however approximately one third of all respondents would accept any vaccine.
- The most common motivation for choosing to receive the vaccine are to help prevent the spread of COVID-19 in the community, to be protected from COVID-19 and to support vaccination programs in general.
- Most respondents who are unsure or would not accept the COVID-19 vaccine are concerned about its safety, possible side-effects and the lack of information available, and believe more research, development and testing is required.

Methodology

Data for the Fourth General Survey of The Tasmania Project (TTP4) were collected between 29 April and 12 May 2021 using an online survey questionnaire. An email invitation with a link to the survey was sent to about 3500 Tasmanians who had registered to be involved in The Tasmania Project. An invitation to the survey was also shared via social media and through a range of community, government and business contacts. A total of 1176 full responses were collected.

Variable	n	%
Gender		
Female	718	66.7%
Male	345	32.1%
Prefer not to say/self describe	8	0.7%
Age		
18-24 years	24	2.3%
25-44 years	189	17.9%
45-64 years	477	45.1%
65+ years	367	34.7%
Education		
High School	125	11.6%
(Adv) Diploma, Certificate	213	19.8%
Bachelor's degree+	736	68.5%
Region		
Greater Hobart	533	45.3%
Launceston	106	9.0%
Rest of Tasmania	537	45.0%

Table 1: TTP4 respondents by sociodemographic variable

Findings in this report have not been weighted to represent Tasmania's population, however we have been able to make some estimates at a state-wide level based on our data. The quality of these estimates is not expected to change if data are adjusted to population benchmarks.

Willingness to receive the COVID-19 vaccine

One of the aims of TTP4 was to study the attitude of Tasmanians towards COVID-19 vaccination. During the survey period, vaccination roll-out in Tasmania extended from the 1B category (individuals aged 70 years and over) to the 2A category (individuals aged between 50 and 69 years) from 3 May.

Respondents were asked two questions on their willingness to receive COVID-19 vaccine:

- *Have you been partially or fully vaccinated against COVID-19?*
- *When a COVID-19 vaccine becomes available for you, will you be vaccinated?*

Responses to these two questions were combined to estimate the proportion of Tasmanians willing to receive the COVID-19 vaccine.

The data show that about 1 in 3 respondents had been offered a vaccine prior to survey completion (that is, they had been partially or fully vaccinated or had chosen not to be vaccinated). For respondents aged between 50-69 years, this was 39%, and 76% for those aged 70 years and over.

The data shows that approximately 4 out of 5 Tasmanians intend to be vaccinated or have already been vaccinated. The proportion of respondents who chose or will choose not to be vaccinated is close to 9%, and about 1 out of 10 respondents were still unsure about receiving a vaccine.

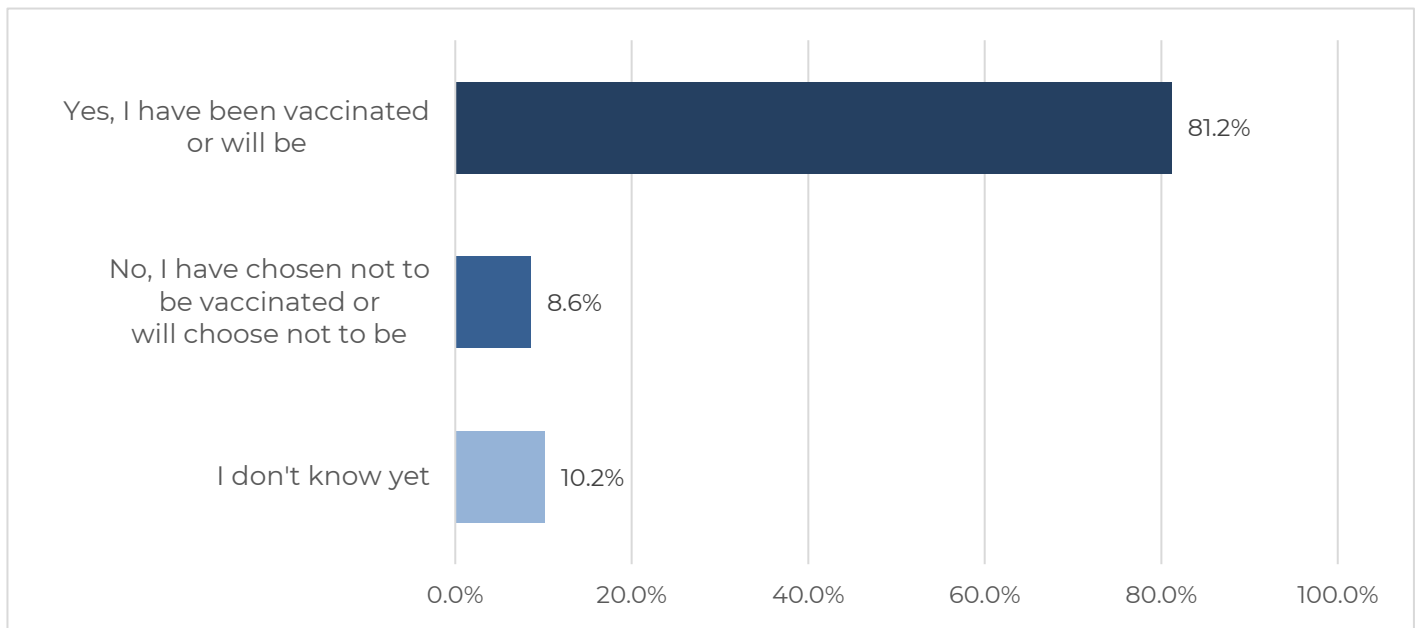


Figure 1: Willingness to receive the COVID-19 vaccine in Tasmania (April/May 2021)

Comparison of the results from Australian surveys on attitudes towards COVID-19 vaccination

As this is a topic of national importance, a number of surveys have been conducted in Australia to study attitudes toward COVID-19 vaccination, with a focus on the willingness of Australians to receive the vaccine.

Generally speaking, there is a negative trend, with Australians becoming more hesitant to receive a COVID-19 vaccine over time.

While the data were collected from different samples, probability and nonprobability, and questions on willingness to receive vaccine were worded differently, the results for Australian's adult population are fairly consistent.

Moreover, respondents in the Fourth General Survey showed greater willingness towards COVID-19 vaccination in Tasmania in comparison to the whole Australian adult population – after November 2020, all other studies reported that less than 80% of respondents (and as low as 61%) are willing to receive the COVID-19 vaccine.

The difference could be attributed to particular structural differences of survey samples, as explained in the next section.

Socio-demographic characteristics affecting the decision to be vaccinated

Previous studies reported different levels of willingness to receive the COVID-19 vaccine among different socio-demographic groups (e.g., Biddle et al. 2021).

In this summary, we look at gender, age, education, and regions in Tasmania as predictors of attitudes towards vaccination.

In TTP4, we can observe some notable differences between particular socio-demographic groups. After confirming the differences with logistic regression, we can report higher levels of willingness to receive the vaccine among the oldest, the most educated, and those living in Greater Hobart.

Surveys	Investigator	Sample	Measure	Willingness to receive COVID-19 vaccine	Other findings
Fourth General Survey (TTP4), The Tasmania Project	University of Tasmania	Convenience online sample (recruited via University of Tasmania website and social media)	Willingness to be vaccinated for COVID-19 (% of respondents already fully or partially vaccinated or planning to be)	81.2% (Apr/May 2021)	24.5% of all respondents were already vaccinated for COVID-19, 7.2% chose not to be
ANUpoll longitudinal surveys	Australian National University	Probability online panel sample of Australians (Life in Australia)	Likelihood for Australians to receive vaccine (% of definitely & probably will)	87.4% (Aug 2020) 79.2% (Jan 2021)	At the individual level, 31.9% became less willing and 9.9% became more willing to receive vaccine
Taking the Pulse of the Nation Surveys	University of Melbourne	Stratified by gender, age and location to be representative of the Australian population	Willingness to be vaccinated for COVID-19 (% of Yes)	73.6% (Oct 2020) 68.7% (Mar 2021)	
Repeated cross-sectional online panel surveys	University of Sydney	Nonprobability online panel sample of Australians (Dynata)	Proportion agreeing to a COVID-19 vaccine if it became available (% of Agree)	76.2% (Apr 2020) 71.4% (Nov 2020)	
Online surveys with longitudinal and repeated cross-sectional samples	Central Queensland University	Australians recruited via email lists, social media networks, and paid Facebook advertisement	Proportion of respondents who would get vaccinated immediately if COVID-19 was released, and safe and effective (% of Agree)	87.2% (Apr 2020) 78.9% (Dec 2020)	For the repeated cross-sectional sample, proportion declined from 85.0% (Apr 2020) to 60.7% (Dec 2020)

Table 2: Examples of Australian surveys on the willingness to receive the COVID-19 vaccine

In TTP4, we can observe some notable differences between particular socio-demographic groups. After confirming the differences with logistic regression, we can report higher levels of willingness to receive the vaccine among the oldest respondents, the most educated respondents, and those living in Greater Hobart.

There are more undecided respondents among women than men, those younger than 65 years, and those with high school level of education. These results are fairly consistent with those reported by Biddle and colleagues (2021) for the whole Australian population. They also reported that women tend to be more hesitant, and that those living in capital cities are more willing to be vaccinated.

The data we present here are unweighted and skewed towards older individuals with a higher level of education (more willing to receive vaccine) and towards women (more likely to be unsure). As a result, the willingness to receive vaccine in TTP4 might be slightly overreported.

The gap in willingness to receive COVID-19 and flu vaccines

We examined the relationship between respondents' willingness to receive the COVID-19 vaccine and their intention to receive the influenza (flu) vaccine.

		Flu		
		Yes	No	<i>I don't know</i>
COVID-19	Yes	66%	12%	3%
	No	3%	5%	0%
	<i>I don't know</i>	4%	5%	1%

Figure 2: Association between willingness to receive the COVID-19 and influenza vaccines

The results show that about 2 out of 3 respondents from TTP4 plan to receive, or have already received, both the COVID-19 and flu vaccines. Slightly less respondents have received or plan to receive the flu vaccine (73%) than a COVID-19 vaccine (81%). This is consistent with the findings from Dodd and colleagues (2021).

The fact that more people are in favour of being vaccinated against COVID-19 than the flu is illustrated by the following: of the whole sample, 12% plan to receive COVID-19 but not the flu vaccine, while 3% plan to receive the flu vaccine but not COVID-19.

The respondents are also more likely to be unsure about receiving the COVID-19 vaccine than the flu vaccine.

Main reasons for choosing to receive the COVID-19 vaccine

We also examined why TTP4 respondents would choose to receive the COVID-19

vaccine, and determine if any differences in motivation between socio-demographic groups exist.

The most common reasons for choosing to receive the COVID-19 vaccine are to:

- help prevent the spread of COVID-19 in the community (76.1%)
- be protected from COVID-19 (67.3%)
- support vaccination/immunisation programs in general (62.8%)

The oldest respondents (65+ years) are more likely to receive the COVID-19 vaccine to protect themselves, while those aged between 25-64 years are more likely to be vaccinated to protect their family. Respondents younger than 45 years tend to be more motivated by protecting their friends and close contacts.

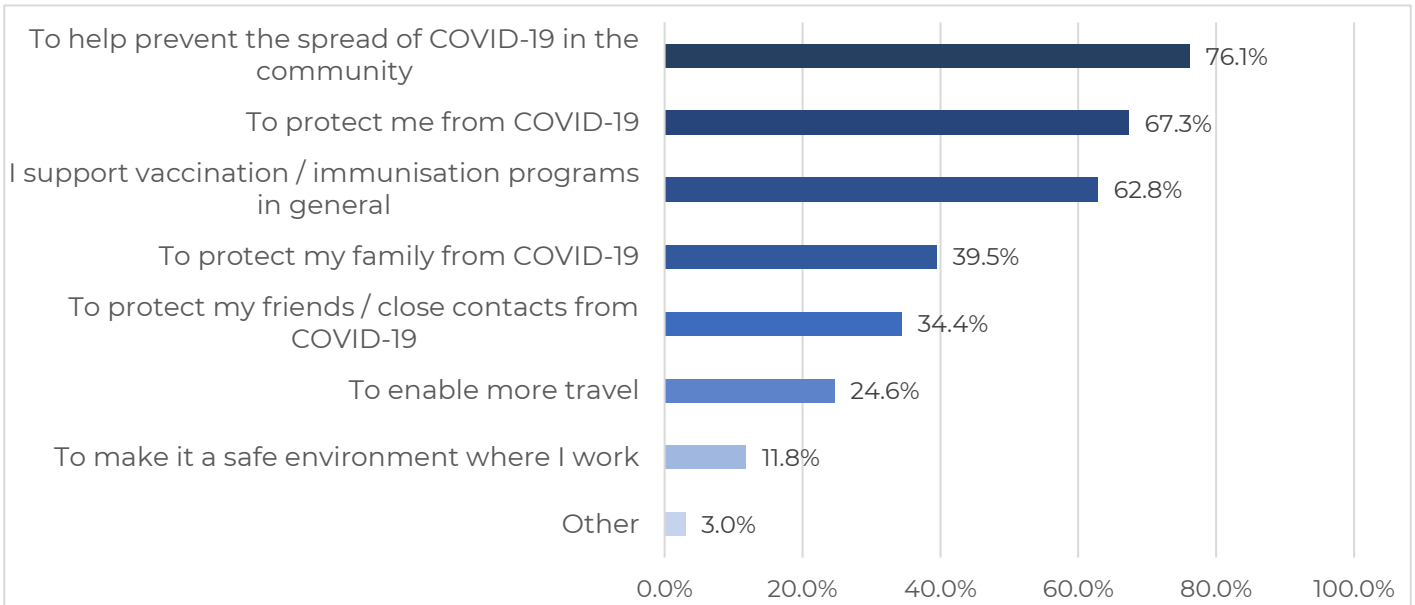


Figure 3: Main reasons for choosing to receive the COVID-19 vaccine

Which COVID-19 vaccine would Tasmanians accept?

Given concerns amongst the Australian population about the safety of certain vaccines, which has been influenced by news about blood clotting (Biddle et al. 2021), we asked TTP4 respondents about which COVID-19 vaccine/s they would accept.

The results show that 85% of respondents would accept Pfizer-BioNTech, 72% would accept AstraZeneca, 44% would accept

another available vaccine, and 37% would accept any vaccine. Almost 1 in 10 respondents are unsure what vaccine they would accept.

There are notable differences in the willingness to accept the AstraZeneca vaccine – it substantially increases with age, is higher in Launceston, and lower amongst females. Respondents with an (Advanced) Diploma or Certificate as their highest level of education are less willing to accept the Pfizer-BioNTech vaccine.

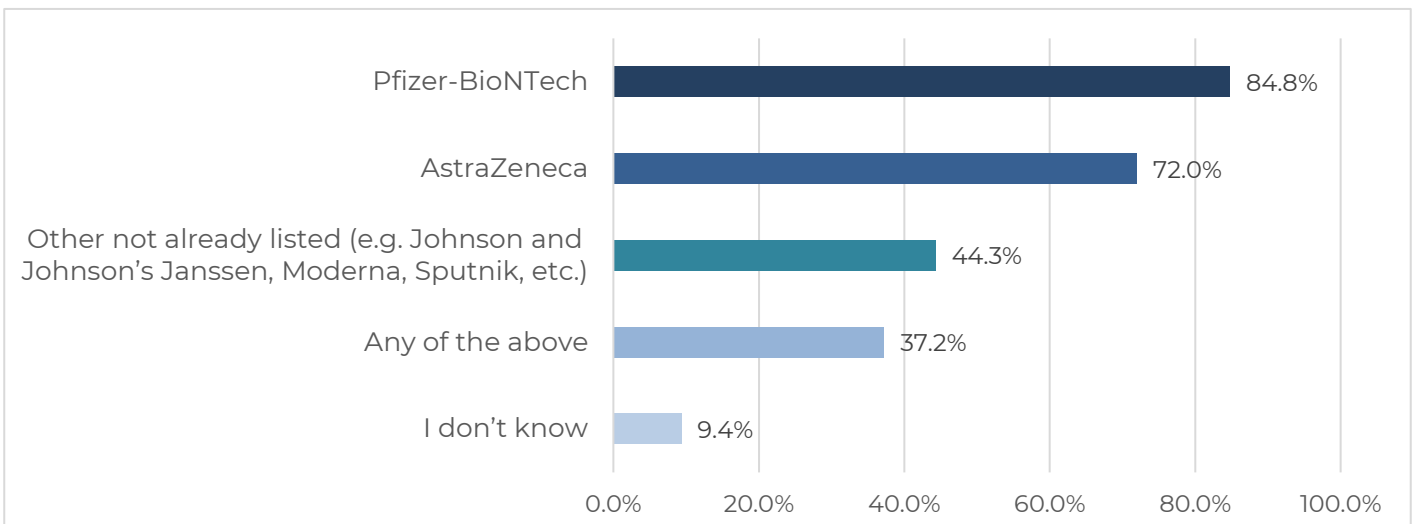


Figure 4: Which of the following COVID-19 vaccines would you accept?

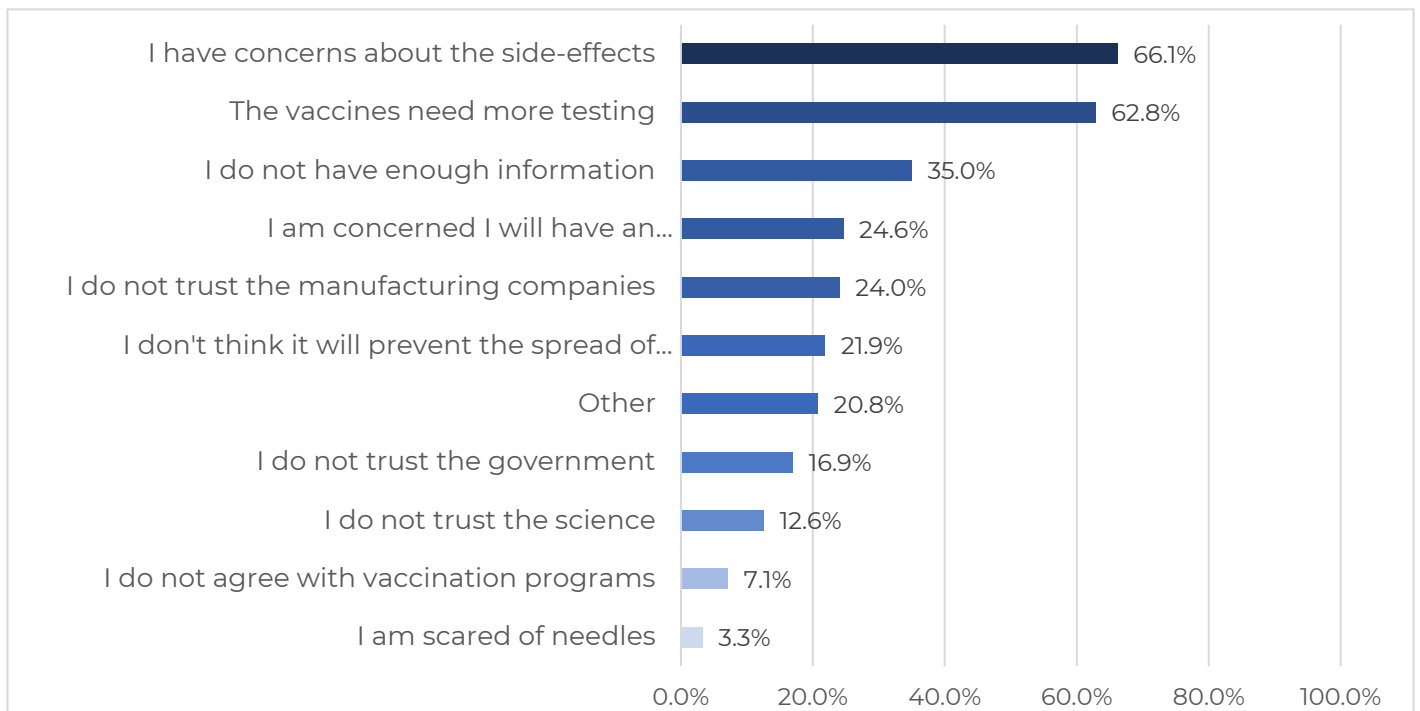


Figure 5: What are your main reasons for choosing NOT to receive, or being unsure about receiving, the COVID-19 vaccine? (n=183) *answer options with 1% or more are presented

What would increase likelihood of receiving the COVID-19 vaccine?

Those who were unsure, chose not to, or will choose not to receive the COVID-19 vaccine were also asked why they weren't willing to receive a COVID-19 vaccine and what would increase the likelihood of receiving the vaccine in the future.

The most common reasons were:

- I have concerns about the side-effects (66%)
- The vaccines need more testing (63%).
- I do not have enough information (35%)
- I am concerned I will have an allergic reaction (25%)
- I do not trust the manufacturing companies (24%).

While there are mostly negligible differences between socio-demographic groups, respondents aged 65 years and above are more likely to be concerned they would have an allergic reaction.

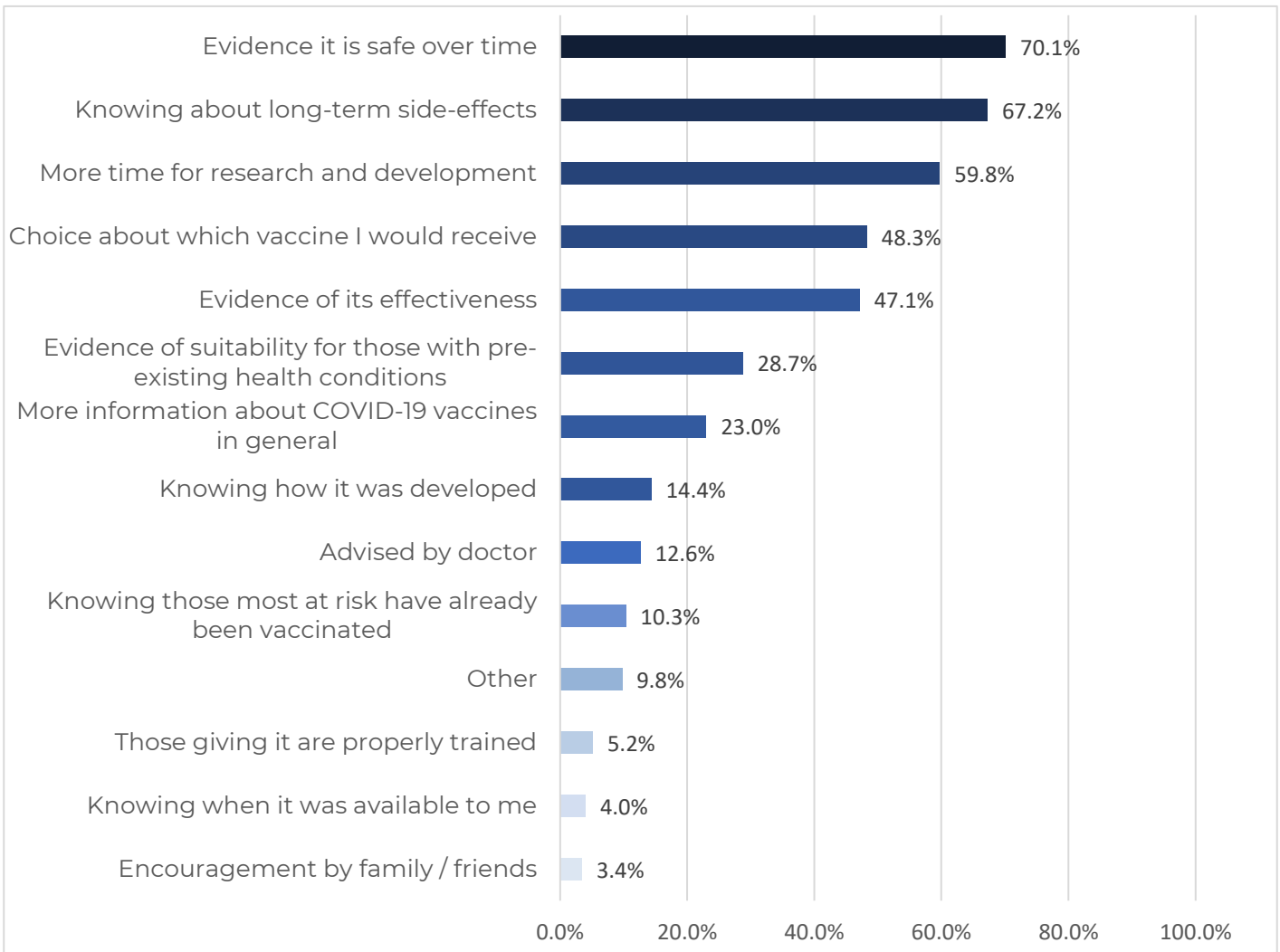


Figure 6: Would any of the following increase the likelihood of you receiving a COVID-19 vaccine? (n=174)

The majority of respondents who are unsure, chose not to, or will choose not to receive the COVID-19 vaccine could potentially be persuaded to receive it if/when:

- there is evidence the vaccine is safe over time (70%);
- they know more about the long-term side effects (67%); or
- more time was invested for research and development (60%).

Respondents would also like to have a choice about which vaccine they would receive (48%), and evidence of its effectiveness (4%).

There are little differences between respondents from different socio-demographic groups. Respondents aged between 25 and 44 years could potentially be persuaded if more time was invested for research and development.

Having a choice of the brand of vaccine would increase the likelihood of women receiving it compared to men and for respondents from Greater Hobart compared to those from other parts of Tasmania.

Biddle, N., Edwards, B., Gray, M., & Sollis, K. (2021). Vaccine willingness and concerns in Australia: August 2020 to April 2021.