Vaccines to prevent COVID-19 infection are continuing to be distributed to states, who are then prioritizing their residents to receive them in tiered, risk-based categories. While the vaccine provides the clearest path to resolving this global pandemic, many people have understandable reservations about receiving the vaccine. Research on COVID-19 vaccine acceptance varies widely, with one November 2020 study finding 39% of respondents indicating they probably or definitely will not get the vaccine, while a December 2020 study found 27% did not plan to do so. Improving confidence in the vaccine will increase the number of people who chose to get it, strengthening public health goals to ensure as many people as possible are protected against COVID-19 infections.

People may not be comfortable getting the COVID-19 vaccine for many reasons, but two explanations stand out for people experiencing homelessness. First is the poor treatment people who are homeless have experienced when accessing medical care, where they are regularly disrespected and offered poorer quality care. Second is a pervasive mistrust of the health care system because of structural racism. The United States has a long history of exploiting people of color, including in our medical and research systems, which continues to be pervasive. Because of racism, Black, Indigenous, and People of Color (BIPOC) experience homelessness at far greater rates than their white counterparts, elevating the mistrust for people without homes.

For those who are both homeless and BIPOC, the dual stigma further compounds an understandable reluctance to engage in health care services in general. Therefore, vaccine hesitancy is likely to significantly impact people experiencing homelessness, especially for BIPOC individuals. Providers must therefore carefully assess the best ways to encourage vaccination while also respecting the valid reasons some patients want to either delay getting the vaccine, or forgo it altogether.

To better understand how people experiencing homelessness view the COVID-19 vaccine, the National Health Care for the Homeless Council conducted focus groups with steering committee members of its National Consumer Advisory Board and with consumers from local community homeless service programs. This brief is intended to (1) share their direct feedback so those planning vaccination events can better reach priority populations like those experiencing homelessness, and (2) identify actions that should be taken now to maximize the uptake of the vaccine.
Consumer Perspectives

Consumers expressed a number of concerns about the vaccine process but they also shared strategies that public officials and service providers might consider to achieve higher vaccination rates in this population. Many of the concerns are similar to those held by the general population, but several issues are specific to people experiencing homelessness.

Common views/concerns

- The vaccine isn’t safe:
  - “I do not want to be guinea pig.”
  - “I don’t want to be the first, I don’t know what I am getting.”
  - “There’s too many things that are unknown but I think there were corners cut on safety—there had to have been given the short time they made this vaccine. Now they just want us to try it and see what happens—that’s scary to me. It’s scarier than the virus.”

- Unsure of how the vaccine will impact them specifically:
  - “Vaccine may not be safe for me to take because of my other conditions or medications.”

- Vaccines are a way of the government having more control over people:
  - “I am afraid of that chip. I am afraid they are tracking me. I don’t mind taking the vaccine, but I don’t want that chip in me.”
  - “If they make it mandatory, I’ll be really scared. If I have the option, I won’t be as afraid because I’m making the decision on my end. When they force you, you have to ask why they are making me do this.”

- Vaccine may have negative side effects but the consequences of not taking it are worse (i.e. contracting or spreading COVID-19, continuing to stay isolated):
  - “Every vaccine/medication has side effects, so I would rather take it and deal with the side effects.”
  - “When I get afraid, I ask—do you want to stay in the house forever? I might be one of those people who take it and get hives, but I’d rather have hives than drop dead.”

“I feel that any immunity I get from the vaccine is better than nothing at all. There is not a ton of data but they did have the trials and I am basing it on the trials and trusting the experts.”
— Amy Grassette from Worcester, MA

Suggested strategies for helping consumers feel safer with the vaccine

- Allow people to see or hear about a trusted provider getting vaccinated and then hearing about their experience.
- Encourage people to talk with their health care provider and get a specific recommendation to get the vaccine. This is especially important for those concerned
about how the vaccine will impact them specifically (based on their diagnoses, medications, etc.).

- Use consumer leaders or peer specialists (or others) to promote vaccines so that patients hear from “someone like me.”
- Ensure the vaccine is optional (not mandatory), which will increase the feeling that it is safe to take.
- Develop a trauma-informed communications plan for consumers who choose to sit out an initial vaccination opportunity, but may grow more confident after hearing the experiences of trusted peers and providers who got vaccinated earlier.

### Advice for Health Care Providers

Based on consumers’ expressed concerns and suggested strategies, the National HCH Council suggests the following actions for health care providers:

- Acknowledge and address racism in the health care system, which is a driving factor to lack of vaccine confidence. Conduct unconscious bias training to help eliminate racism in the health care system and create a trusted environment for vaccine information and administration.
- Improve service delivery, adopt trauma-informed approaches to care, act on patient satisfaction feedback, and build trust by treating patients with dignity and respect.
- Conduct consumer focus groups and feedback sessions to learn about concerns, misconceptions, and challenges to vaccine confidence.
- Create messaging materials that address consumers’ concerns and provide information on how vaccines work, their effectiveness, and the side effects to anticipate. Directly discuss myths and misinformation in a non-judgmental way.
- Acknowledge unknown and changing information related to the vaccine. Transparency in communication will help build trust and offer opportunities for additional conversations as more information is available.
- Identify and train consumers and/or their advocates to serve as ‘Vaccine Ambassadors.’ Engage consumer leaders, community health workers, outreach workers, and frontline staff who have regular contact with clients and are viewed as trusted resources (see text box pull-out below).

#### Vaccine Ambassadors: Example from Heartland Alliance Health

Heartland Alliance Health, the HCH program in Chicago, IL, is using donated gift cards to pay 5-6 shelter residents to serve as ‘Vaccine Ambassadors:’ those passionate about getting vaccinated and dedicated to helping others get the vaccine as well. Members of their Nursing and Community Health Work teams trained them on using effective talking points and provided FAQ documents to share with others as they discuss their reasons for getting vaccinated.
COVID-19 & the HCH Community: Consumers & Vaccines

- Distribute “I got my COVID-19 Vaccine” stickers or buttons to encourage conversations.
- Help patients schedule vaccination appointments (if required, noting that many systems are web-based and require detailed information) and dedicate sufficient time to answer questions and address concerns ahead of that time.
- Partner with homeless services providers to reach a broader number of people in shelters, encampments, and other venues.
- Actively engage in the planning process for vaccine distribution with your state/local health authority and other public agencies to better inform how the process can better reach people who are homeless.
- Provide clients with the information they need to feel safe receiving the vaccine, but do not mandate or coerce clients to get vaccinated.

Advice for Homeless Service Providers/Continuums of Care (CoCs)

Based on these consumers’ expressed concerns and suggested strategies, the National HCH Council suggests the following actions for community homeless service providers:

- Partner with health care providers to get fact-based communication materials and request assistance with vaccination efforts. Invite health care providers to make presentations to clients about vaccination.
- Provide medical respite care accommodations for patients needing to recover from any vaccine side effects.
- Conduct consumer focus groups to learn about client concerns, misconceptions, and challenges.
- Consider offering incentives to get a vaccine (e.g., tangible items or gift cards).
- Plan on-site vaccination events for clients and staff, working together with the state/local health authority and/or health care partners.
- Identify and train consumers and/or their advocates to serve as ‘Vaccine Ambassadors.’ Engage consumer leaders and trusted staff members who can talk with clients, provide information, and promote the benefits of vaccination.
- Distribute “I got my COVID-19 Vaccine” stickers or buttons to encourage conversations.
- Help patients schedule vaccination appointments (if required, noting that many systems are web-based and require detailed information) and dedicate sufficient time to answer questions and address concerns ahead of that time.
- Identify transportation options to ensure clients are able to access vaccination events.
- Setup comment boxes asking “What questions do you have about COVID-19?” so clients can submit questions and have providers respond directly to them.

ESG-CV Funding Policy & Practice Note:
Program participants cannot be required to “receive treatment or perform any other prerequisite activities as a condition for staying in any shelter or receiving services.” Hence, providers cannot require clients be vaccinated. [Section E.3(g) and Section F.10]
Looking Ahead

Each state has a unique vaccination distribution plan, and people experiencing homelessness (as well as the staff who provide services) will be receiving vaccines at different times. As more people get vaccinated and more information becomes available, trust in the vaccine will likely increase. Use the strategies in this brief to talk directly with consumers about the vaccine, share information, and discuss their concerns. Being responsive to questions and giving people space to make informed decisions that are best for them will ultimately help increase the number of people willing to get vaccinated, which is vital in order to better protect a high-risk population like those experiencing homelessness from COVID-19 infections.

A Multitude of Resources:

- HUD: [Questions to Assist CoCs and Public Health Authorities to Plan and Prepare for Vaccine Distribution](https://www.hud.gov/programadminresources/coronavirus/covid-19/questions Russians to Assist CoCs and Public Health Authorities to Plan and Prepare for Vaccine Distribution)
- HUD: [Vaccine Ambassador Program and Job Description](https://www.hud.gov/programadminresources/coronavirus/covid-19/vaccine-ambassador-program-and-job-description)
- Kaiser Health News: [Black Americans Are Getting Vaccinated at Lower Rates Than White Americans](https://khhn.org/black-americans-getting-vaccinated-at-lower-rates-than-white-americans)
- Kaiser Family Foundation: [Community Health Centers’ Role in Delivering Care to the Nation’s Underserved Populations During the Coronavirus Pandemic](https://kff.org/other/state-indicator/community-health-centers-role-in-delivering-care-to-the-nation-s-underserved-populations-during-the-coronavirus-pandemic/)
- Kaiser Family Foundation: [Addressing Racial Equity in Vaccine Distribution](https://kff.org/other/state-indicator/addressing-racial-equity-in-vaccine-distribution/)
- COVID Collaborative: [Coronavirus Vaccine Hesitancy in Black and Latinx Communities](https://covidcollaborative.org/coronavirus-vaccine-hesitancy-in-black-and-latinx-communities/)
- NHCHC Issue Brief: [COVID-19 & the HCH Community: Vaccines for Patients and Staff](https://www.nhchc.org/covid-19-hch-community-vaccines)