Why do US health care workers continue to refuse vaccination against COVID-19?

Katy Kinner 11 February 2021

In January, when COVID-19 vaccines were first rolled out among US health care workers, news stories quickly surfaced with reports that large numbers of health care workers were refusing to be vaccinated.

In a press briefing on January 4, Ohio Governor Mike DeWine announced that roughly 60 percent of the state's nursing home workers refused the first round of vaccinations.

Other areas reported a similar phenomenon. In Los Angeles County, between 20 and 40 percent of all health care workers refused the vaccine when first available, and 50 percent in neighboring Riverside County refused.

Dr. Jeremy Boal, the chief clinical officer at the Mount Sinai Hospital system in NYC, told the *Gothamist* in early January that across the eight hospitals in the system, vaccine acceptance ranged from 25 to 65 percent.

The trend of vaccine skepticism among health care workers is especially dangerous because these workers are in more frequent contact with both COVID-19 patients and patients who are more vulnerable to deadly COVID-19 complications. Health care workers also play a crucial role in influencing the general population to accept the vaccine.

Updated data from the Kaiser Family Foundation (KFF) COVID-19 vaccine monitor shows that compliance with the COVID-19 vaccine is increasing among health care workers as well as the general population. However, health care workers are still accepting vaccination at alarmingly low rates.

The KFF COVID-19 vaccine monitor is an ongoing research project that tracks the public's attitude toward the vaccine using a combination of qualitative research and surveys.

As of January 27, 32 percent of surveyed health care workers say they have received at least the first dose and 26 percent say they plan to receive it as soon as they can. Twenty-eight percent state they want to "wait-and-see," while 9 percent say they will never get it. Of those refusing or delaying vaccination, 68 percent cited fear of long-term side effects as their primary concern.

According to the KFF vaccine monitor, despite high levels of vaccine hesitancy, health care workers are still vaccinated or plan to be vaccinated at higher rates than the general population. Fifty-eight percent of surveyed health care workers have been vaccinated or plan to become vaccinated as soon as

possible compared to 47 percent of the surveyed general population.

Another survey by the non-profit group Surgo Ventures, focused solely on health care workers, allows for a more detailed analysis. The Surgo survey polled 2,500 health care workers between December 17 and 30. Respondents were split into three categories: health care professionals (nurses, physicians, dentists, pharmacists, physician's assistants), allied health professionals (phlebotomists, nurse assistants, EMTs, medical technicians) and support staff (environmental services, kitchen staff, patient transporters, etc.).

At the time of the survey, 50 percent of respondents had been offered the vaccine and, across all groups, an average of 15 percent had refused vaccination. The group most likely to refuse the vaccine were allied health professionals, with a refusal rate of 22 percent.

The Surgo data also showed that long-term care facility (i.e., nursing home) workers were most likely to refuse the vaccine, with 7.5 of 10 long-term care facility workers compliant with the vaccine compared to 8.1 out of 10 hospital health care workers.

According to the Surgo study, 31 percent of those who refused the vaccine stated they were concerned about lack of evidence and safety of the vaccine. Another 24 percent had concerns about long-term side effects of vaccination. Sixteen percent felt the process of vaccine research and rollout was too rushed, and 12 percent stated they wanted to wait to observe side effects or issues in others.

Health care workers also hold an immense influence on the rest of the population's opinion of vaccination for COVID-19. Eighty percent of non-health-care workers surveyed in the KFF survey stated that they would turn to a health care provider for more information if they were unsure about receiving the COVID-19 vaccine. Additionally, the Surgo survey found that 14 percent of physicians working in long-term care facilities stated they would advise a vaccine-hesitant patient to decline the COVID-19 vaccine compared to 3 percent of physicians working in hospitals.

Both surveys offer advice to fight this phenomenon. They suggest educational campaigns and styles of questions or types of information that are most likely to convince a vaccinehesitant citizen. Public health research and strategies on ways to increase vaccination against COVID-19 are crucial in the fight against the spread of preventable disease and against the reactionary anti-vaccination movement.

However, neither survey addresses the political, social and historical context in which hesitancy toward COVID-19 vaccinations among health care workers is taking place. There is no question that the inadequate, criminal, chaotic and disorganized response by the ruling class to the coronavirus pandemic has contributed to the reluctance of health care workers to embrace a safe and efficacious vaccine.

In April, then-President Trump urged Americans to inject themselves with disinfectant and insert ultraviolet lights into their bodies, measures that would kill those unfortunate enough to follow the president's advice. He claimed that COVID-19 was no worse than the flu, pronounced that his "gut" instinct told him the pandemic would be over in April, and promoted use of hydroxychloroquine against the FDA's warnings. In September, Trump made false claims that the White House could overrule the FDA if the agency maintained its standards for approval of COVID-19 vaccines.

The constant barrage of brazen lies from the Trump administration on the fight against the coronavirus has led millions who hate Trump to distrust the COVID-19 vaccines and doubt their efficacy, against scientific evidence. To this must be added, of course, millions more who have been fooled by right-wing propaganda—initially embraced by Trump—that the coronavirus itself is a "hoax," or no worse than the flu, and therefore a vaccine against it is not necessary. Health care workers are to be found in both these segments of the population.

Health care workers have also been frontline victims of the bipartisan homicidal "herd-immunity" strategy, which allowed the disease to run rampant against all medical and scientific advice. This has had a direct effect on the lives of all workers, especially health care workers who see and feel each surge and outbreak. Their backs hurt from proning more patients in the ICU. Their facial skin breaks down from more time wearing personal protective equipment (PPE). Their brains are foggy from exhaustion after picking up more overtime shifts to make up for co-workers who have fallen ill or died. When offered a vaccine from the same ruling class that has put them through hell, some health care workers interpret this as another experiment, where they again are the lab rats.

Health care worker refusal of the vaccine has also likely been influenced by the continued campaign from the ruling class to minimize the severity of SARS-CoV-2 and normalize death. This outlook is rooted in the class interests of the ruling class, which prioritizes economic "health" over human life. The media, the political establishment, in both parties, and the financial oligarchs all embrace this outlook.

After taking office, Democratic President Joe Biden stated that "there is nothing we can do to change the trajectory of the pandemic in the next several months." This is a blatant lie, as blatant as any that has come out of Trump's mouth. This too contributes to the atmosphere of helplessness and fatalism that underlies the distrust of vaccination by those who are in the greatest need.

A patient approach to the reluctance of some health care workers to be vaccinated does not imply any conciliation with the reactionary anti-vaccination movement, cultivated in a small, privileged section of the upper middle class, based on a total rejection of modern science.

Famously flawed and fabricated studies, such as the *Lancet* publication by Andrew Wakefield that falsely linked the MMR vaccine with autism, continue to play a role in the misinformation peddled by the anti-vaccination movement.

Despite its small size, anti-vaccination efforts have had a significant and deleterious public health effect. Measles requires herd-immunity rates of 93 to 95 percent to create an umbrella of protection for the community. Levels even slightly below this have recently caused deadly measles outbreaks across the world. Last year, the US reported its highest measles caseload in 25 years, according to the WHO.

The longstanding anti-vaccination campaign is now being reinforced by a significant right-wing element mobilized by Trump in his efforts to build a fascist movement. On January 30, a mass vaccination site at Los Angeles Dodger stadium was shut down for about an hour by 50 demonstrators who blocked the entrance.

The demonstration was organized by the group "Shop Mask Free Los Angeles," which stated that the protest would be staged to be against "everything COVID, Vaccine, PCR Tests, Lockdowns, Masks, Fauci, Gates, Newsom, China, digital tracking, etc." This small group of far-right demonstrators were allowed to disrupt a major public health operation while the LAPD officers stood by and watched. The demonstration was promoted publicly on social media and was not unexpected. The LAPD was not caught off guard, but chose not to act, in line with the police response to previous anti-lockdown protests as well as the January 6 insurrection.



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