

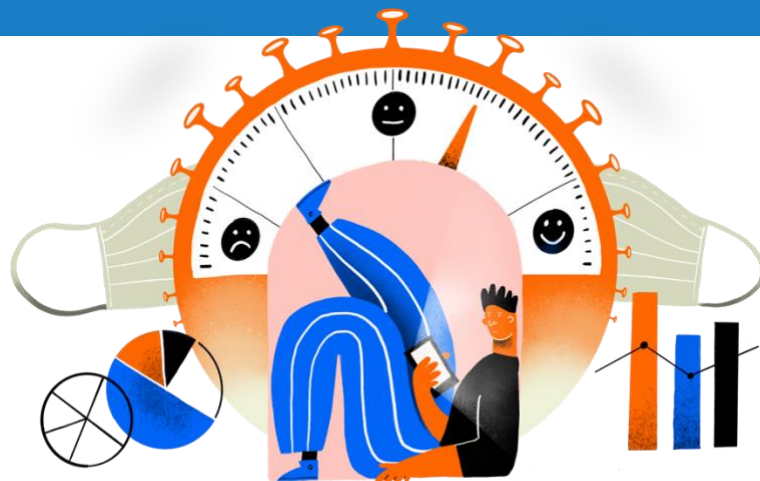
# REPORT 18

## Vaccination willingness and motivation

### The Motivation Barometer

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Reference: Motivation Barometer (December 14, 2020). Vaccination willingness and motivation. Ghent, Belgium.



*The corona crisis is quietly entering a new phase after the positive news from the vaccine front. Results from several vaccine developers are promising and provide light at the end of the dark corona tunnel. At the same time, numerous new challenges arise. Not only must the population be motivated to adhere to the measures for a long time to come, they must also be motivated to be vaccinated. A minimum vaccination rate of 70% is the objective to build up sufficient group immunity. But what percentage of the population wants to be vaccinated today? Does motivation play a role here and what stops people from getting vaccinated? Finally, which individuals can influence vaccination willingness and what barriers are best to remove? In this report, we address these themes for the first time in the latest wave of Flemish respondents (N = 6056; mean age = 48; 63% women) within the Motivation Barometer.*

### Take home messages

- The observation that already today 56% of the population is willing to be vaccinated makes us hopeful. The fact that 57% wants to encourage other persons to do the same is a good thing, because in this way vaccination can become the norm in our society.
- Voluntary motivation is a strong predictor of willingness to be vaccinated and to take on the role of vaccination ambassador. This motivation is focused on solidarity and the common good.
- Lack of confidence in the vaccine is the strongest predictor of not doing it. Vaccination pressure also negatively predicts our willingness to get vaccinated.
- That individuals who are willing to be vaccinated would violate the measures more is not confirmed.
- Older individuals are more willing to be vaccinated, but young adults also have a greater willingness than middle adults do. Individuals that are more educated also show a more positive attitude.
- General practitioners, scientists, and pharmacists exert the greatest impact among all target groups in encouraging vaccination willingness.

### Policy Implications

- Reinforce voluntary commitment to vaccination by highlighting the benefits to others and yourself and using a motivational communication style.
- Communicate transparently about vaccine development, efficacy, and side effects to encourage trust.
- After the most medically vulnerable and those working in health care, it is desirable to give everyone a chance to be voluntarily vaccinated so that the most motivated will be among the first. Vaccination pressure will provoke resistance.
- Engage pharmacists, family physicians, and scientists as key figures in communication and provide training in motivational interviewing.

## Question 1: What is our attitude toward vaccinations?

To assess participants' attitudes toward vaccination, four questions were asked:

1. **Vaccination willingness:** If you had the opportunity to be vaccinated against COVID-19 next week, what would you decide?
2. **Encouragement:** Would you encourage others to get vaccinated?
3. **Ambassador role:** Would you participate in a vaccine campaign?
4. **Mandatory:** Do you think vaccination should be mandatory?

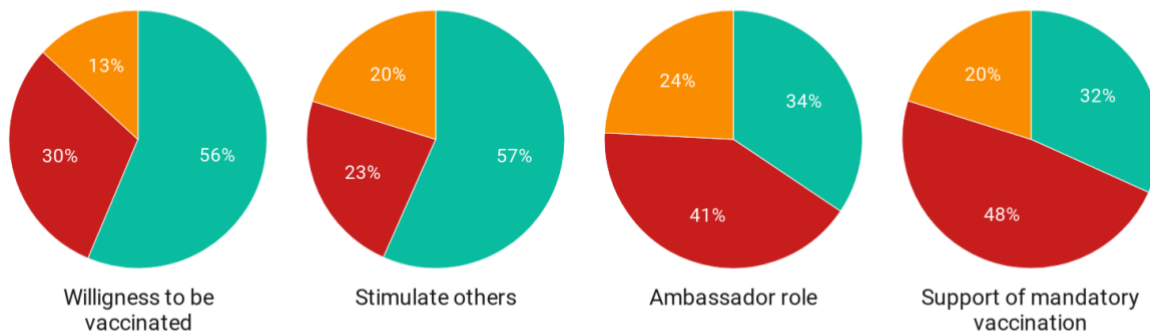
Participants' willingness to be vaccinated appears to vary widely. While some are very confident and would do it immediately, others would absolutely refuse a vaccine. The percentage distribution of vaccination willingness is shown in Figure 1<sup>1</sup>. 56% say they would immediately or almost immediately proceed with vaccination if given the opportunity, while 57% would encourage others to do the same.

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<sup>1</sup> Because the sample is not representative of the Flemish population in terms of sociodemographic composition, a correction was made for this when calculating these percentages.

Figure 1. Attitude toward vaccination.

Coronastudy, Ghent University

■ Agree ■ Disagree ■ Neutral


N = 6056

Further, 1/3rd show willingness to serve as public vaccination ambassadors and 1/3rd feel that getting vaccinated should be more mandatory.

**Conclusion 1:** The observation that already today 56% of the population is willing to be vaccinated makes us hopeful. That 57% also want to encourage others is a good thing, because in this way vaccination can become the norm in our society.

## Question 2: What motivating factors predict vaccination willingness?

Although 56% of those surveyed were willing to be vaccinated, some were more willing and others less willing. Different motivational and demotivational factors were therefore identified (see box below; items in appendix). These different motivational aspects are logically related. The greater the voluntary motivation, the smaller the 'must'-ivation, the more limited the experienced discomfort and distrust and the smaller the resistance to vaccination. For 'must'-ivation, just an opposite pattern is observed. 'Must'-ivated individuals see all kinds of obstacles to getting vaccinated and are thus more likely to be demotivated. Figure 2 shows the average scores. Voluntary motivation is - fortunately - more strongly present than 'must'-ivation, while distrust is the most pronounced demotivating factor. What is further striking is that opinions are very divided: for example, there are individuals who are very convinced and have great confidence in the effectiveness of the vaccine, while others just harshly distrust the vaccine.

### Motivational aspects:

- **Voluntary or autonomous motivation:** expresses the degree to which one is fully convinced of the added value and necessity of vaccination, for example because it offers protection for oneself, loved ones, or the population.
- **'Must'-ivation or controlled motivation:** expresses the degree to which one feels obligated to be vaccinated, for example, because others expect it or to avoid criticism.
- **Effort** expresses the degree to which getting vaccinated requires a great deal of effort.
- **Distrust** expresses the degree to which one distrusts the efficacy of the vaccine or the person recommending vaccination.
- **Resistance** expresses the degree of opposition to the government that one perceives as meddlesome and finds the measures it takes excessive.

These various (de)motivating factors play a key role in explaining respondents' vaccination readiness. Two factors stand out. For example, voluntary motivation is the most important predictor of why people want to be vaccinated, while distrust about the vaccine is the most important predictor of not doing so. Resistance to a meddling government is also an important reason for not getting vaccinated (Figure 3). The same pattern but less pronounced can be noted for the effort one has to put in to get a vaccine. Vaccination pressure also appears to reduce willingness to vaccinate.

Interestingly, voluntarily motivated individuals are not just doing it for themselves. They also want to encourage others to do the same and they are even willing to serve as ambassadors in a vaccination campaign. Therefore, they also want to encourage their loved ones and the general population to be vaccinated.

Figure 2. Averages with error bars for types of vaccination (de)motivation

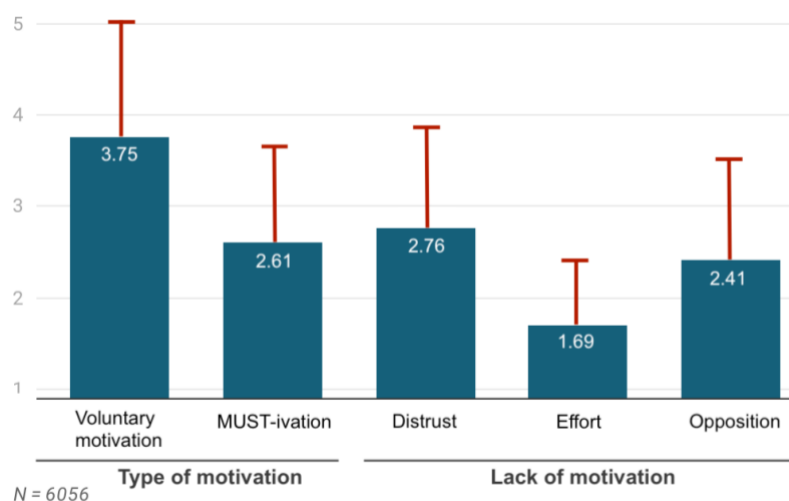
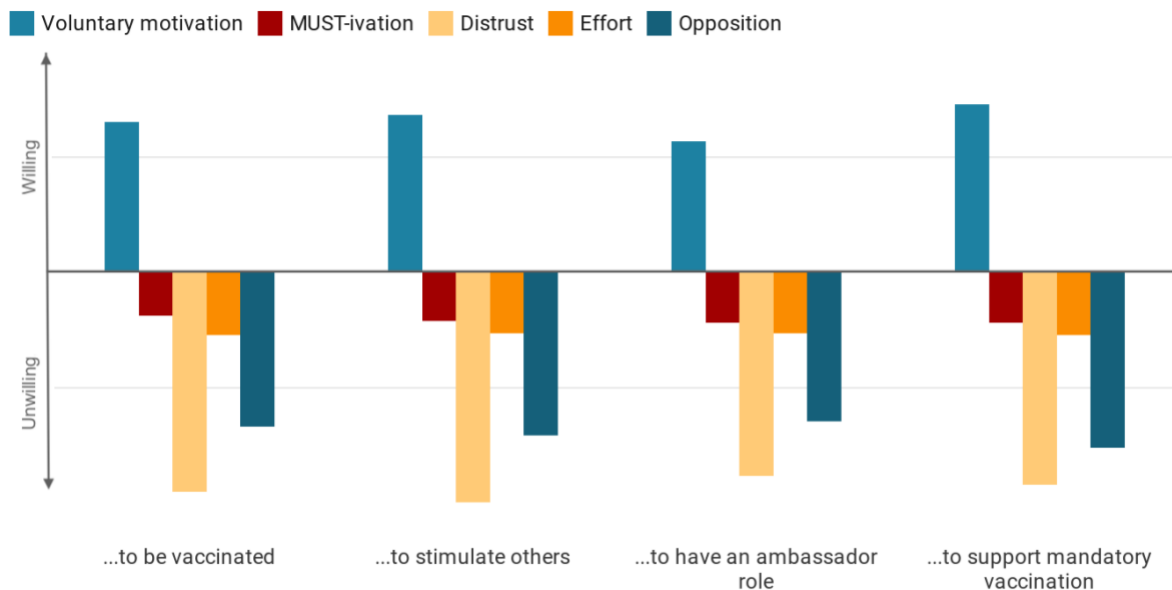


Figure 3. (Un)willingness to be vaccinated in prediction of type of motivation.



N = 6056

**Conclusion 2:** Voluntary motivation is a strong predictor of willingness to be vaccinated and to take on the role of vaccination ambassador. This motivation is focused on solidarity and the common good. Lack of confidence in the vaccine is the strongest predictor of not doing it. Vaccination pressure also negatively predicts willingness to vaccinate.

## Question 3: Are vaccine-prepared individuals less likely to comply with the measures?

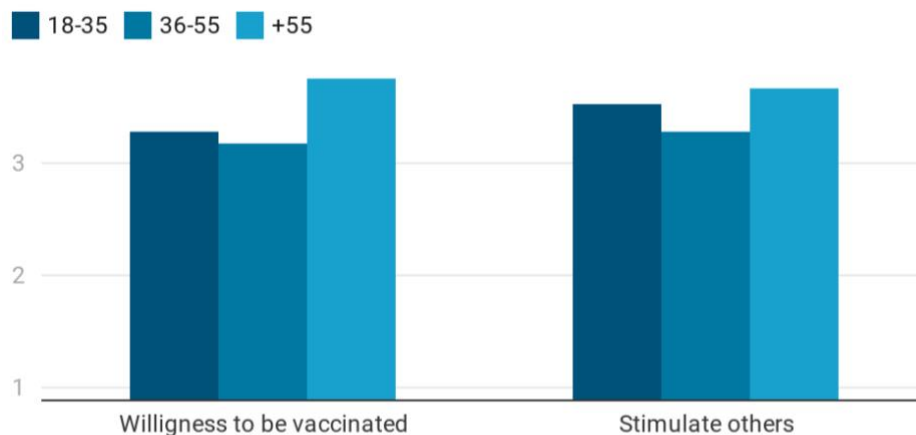
One question that arises today is whether the prospect of vaccination makes us less compliant with the measures. Although this question requires following up with a sample over time, it already appears from this cross-sectional survey that the relationship between vaccination readiness and adherence to the measures is not negative, but positive. So, the more someone follows the measures, the greater their willingness to vaccinate. Thus, the data do not show that we are going to become less compliant as soon as the possibility of vaccination becomes a reality.

**Conclusion 3:** That individuals who are willing to be vaccinated today are more likely to violate the measures is not confirmed.

## Question 4: Does vaccination willingness differ among target groups?

A number of sociodemographic characteristics correlate with vaccination willingness. For example, older individuals (+ 55 years) appear more willing to be vaccinated and would be more likely to encourage others to do the same. Interestingly, this is not a linear effect, as young adults (18-35 years) show slightly higher vaccination willingness than middle-aged adults. Similarly, men and more educated individuals show greater willingness and would encourage others around them to vaccinate more compared to women and less educated individuals.

Figure 4. Vaccination attitudes by age group.



N = 6056

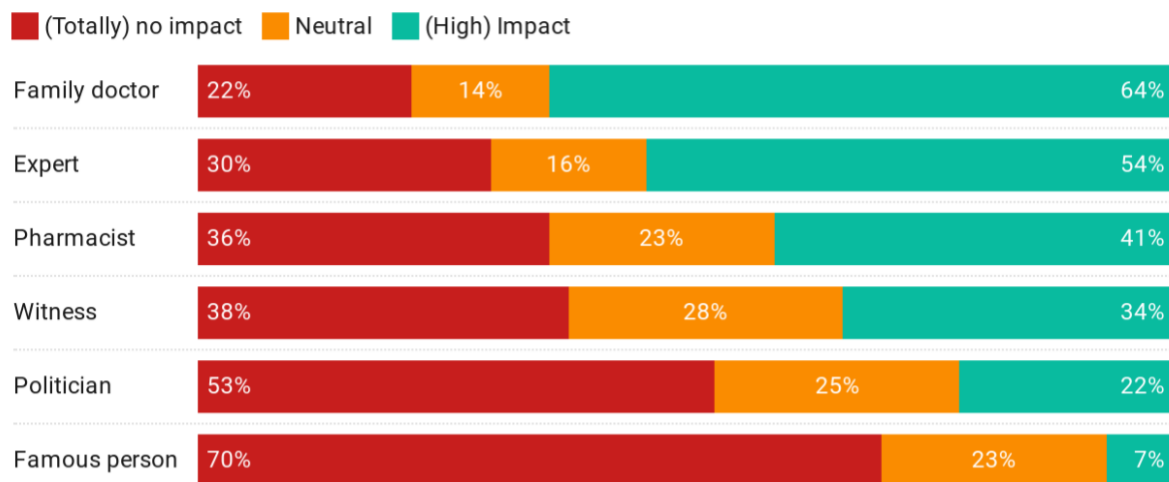
**Conclusion 4:** Older individuals are more willing to be vaccinated, but young adults also have a greater willingness than middle adults. Higher educated individuals also show a more positive attitude.

## Question 5: Which individuals can exert the most positive influence?

According to our respondents, which people are best placed to convince others to get vaccinated? Figure 5 shows that most participants would (very) definitely be convinced by their family doctor, pharmacist or a scientific expert. These percentages are a lot lower for politicians, well-known Flemish people or a witness who has already been vaccinated. Our results showed that family doctors, pharmacists and scientific experts have a greater impact because respondents experience a greater bond of trust with them and/or have

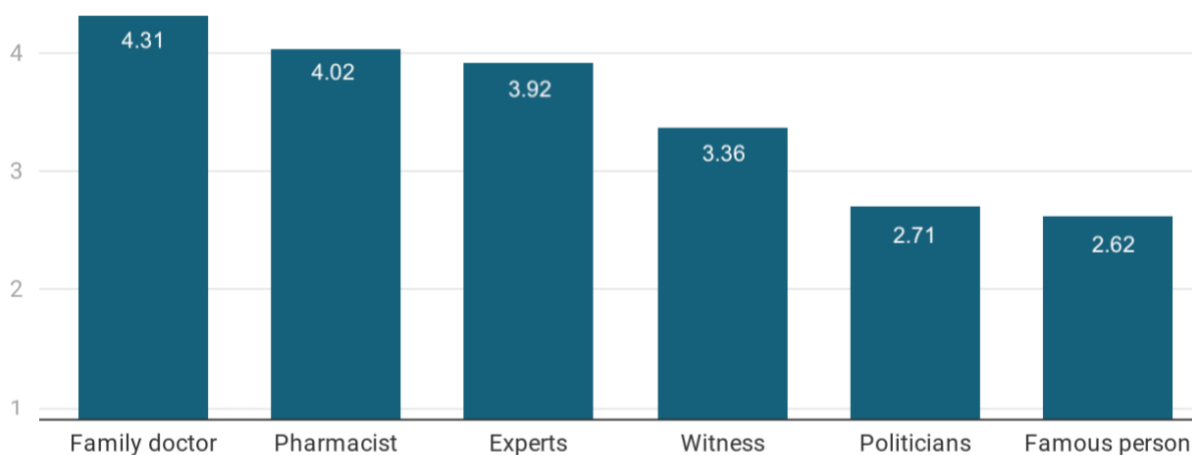
more confidence in their expertise. Thus, if we want to win over doubters; family doctors, pharmacists and scientists are best placed to take a leading role (see Figure 6). These ratings do not differ between men and women or between persons with or without a partner, while age and level of education play a limited role. The overall pattern can be seen in all target groups, but older persons could be influenced even more by their family doctor, pharmacist or experts. People with a higher education diploma indicate that they can be influenced a bit more by experts than people with a lower education.

Figure 5. Impact of different sources to get vaccinated.



N = 6056

Figure 6. Vaccination attitude by source



N = 6056

**Conclusion 5:** Doctors, scientists, and pharmacists exert the greatest impact among all target groups in encouraging vaccination readiness.



# Recommendations

1. **It is undesirable to make vaccinations mandatory. Instead, strengthen voluntary motivation to vaccination.** This can be done in several ways:
  - a. General message: frame vaccination as an act of solidarity that benefits both yourself and others.
  - b. Personalize the message: Encourage people to have a specific person in mind for whom they will be vaccinated.
2. **Communicate transparently about vaccine development, efficacy and side effects to encourage trust.** This can be done by:
  - a. Have experts explain the scientific development of the vaccine in a clear manner via video messages.
  - b. Explain efficacy in a personal invitation letter to vaccination.
3. **After vaccinating the most medically vulnerable groups and the healthcare sector, it is desirable to give all citizens the opportunity to be vaccinated on their own initiative. Vaccination pressure will provoke resistance. Voluntary engagement has numerous advantages:**
  - a. Voluntarily motivated individuals are willing to make an extra effort to be vaccinated (e.g., 2 doses)
  - b. Voluntarily motivated individuals will encourage others to do the same and want to take on an ambassadorial role. This can easily cause being vaccinated to become the norm.
  - c. Voluntarily motivated people are more likely to take the undesirable side effects as unavoidable so they will complain less and spread a negative message.
  - d. Giving priority to voluntarily motivated individuals avoids spending unnecessary energy on hesitant people and those who stubbornly resist.
4. **Engage pharmacists, family doctors, and scientists as key figures:**
  - a. Emphasize that our health care system as a whole is very reliable.
  - b. Ask these key people to get themselves vaccinated as an example to everyone else.
  - c. Provide training in motivational interviewing for these key people so that they have the necessary skills to communicate in a motivational way with doubting citizens.

## Appendix - Items for (lack of) motivation

- **Voluntary or autonomous motivation:**
  - I understand why being vaccinated is important.
  - I fully support the decision to be vaccinated.
  - I personally think being vaccinated makes sense.
  - Being vaccinated aligns with my personal values.
- **'Must'-ivation or controlled motivation:**
  - I feel pressured to get vaccinated.
  - I feel obligated to get vaccinated.
  - I get criticized if I don't get vaccinated.
- **Effort**
  - The vaccine takes too much effort for me.
  - I can't make the effort to get vaccinated.
  - I do not feel competent to take the necessary steps toward vaccination.
  - I don't know how to get the information to get vaccinated
- **Distrust**
  - I am concerned about possible side effects of the vaccine.
  - I don't think the vaccine will work well.
  - I am concerned about becoming infected with the coronavirus through the vaccine.
  - I don't trust the vaccine.
  - I doubt that the research on how the vaccine works is thorough enough.
  - I would rather stay safe than get vaccinated immediately.
- **Resistance**
  - The COVID-19 pandemic is not as serious as some claim.
  - I don't believe that vaccinating helps solve the corona problem.
  - The government should not interfere with what I do.
  - The government should not interfere with whether I get vaccinated. I will decide that myself.

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