

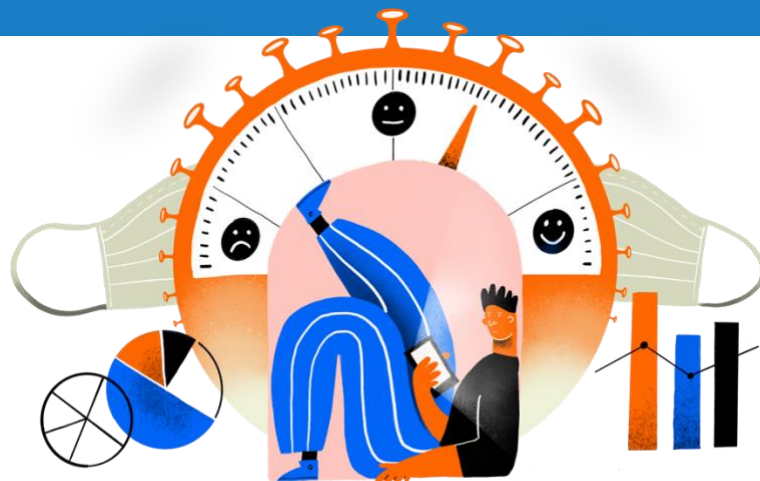
# REPORT 32

## Obliging health workers to be vaccinated: a good idea?

### The Motivation Barometer

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Reference: Motivation Barometer (14 July 2021). Obliging health professionals to be vaccinated: a good idea? Ghent & Leuven, Belgium.



At the moment health professionals are being obliged to be vaccinated in a number of other European countries, the debate is once again opened in Belgium. In the motivation barometer, we asked healthcare workers (N=4771) and people from the general population (N=25056) how they felt about such an obligation. This question was observed across three groups of people: those who refuse vaccination, doubters and those who are willing or already vaccinated (i.e., convinced persons). The opinion on vaccination willingness of healthcare workers is far apart between these three groups: while a majority of the convinced persons are in favor (74% of the general population, 64% of health care professionals), a large majority of those who refuse vaccination are against (78% of the general population; 92% of health care professionals). As other motivational strategies (e.g., sensitisation, empathic approach, rhythm respect) have a more positive motivational impact, it is important to continue using them for the time being. An obligation will only be accepted if it is perceived as legitimate by refusing or doubting healthcare workers. If not, it risks to provoke resistance. Therefore, it is a matter of increasing the motivational support for obligation in dialogue with the sector and the healthcare workers. We formulate four recommendations.

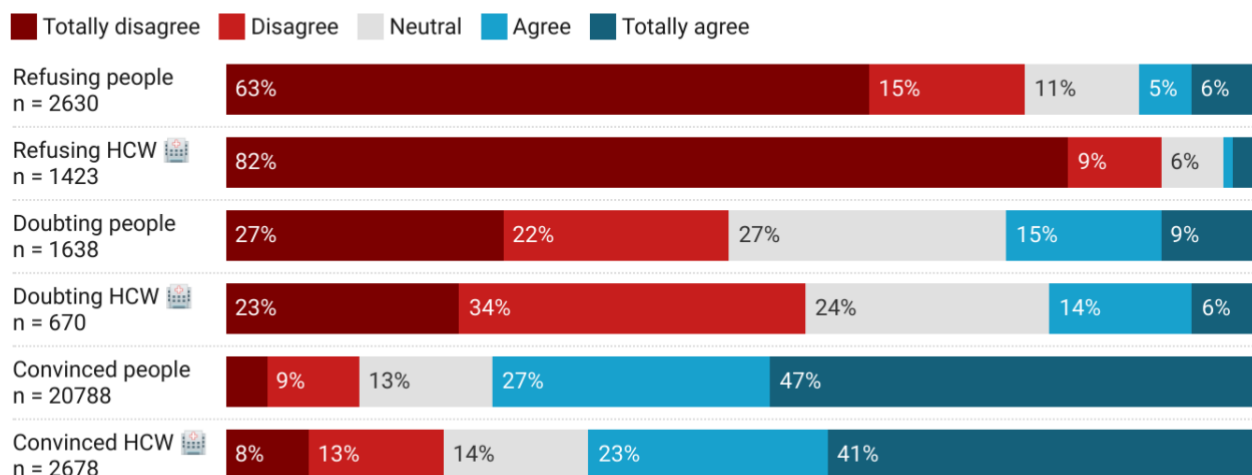
## Question 1: How many percent are in favor and against obligatory vaccination of healthcare workers?

Between April and June 2021, 4771 health professionals and 25056 persons from the general Belgian population were asked whether they were in favor of obligatory vaccination of healthcare workers. As can be seen in Figure 1, the opinions are far apart. While refusers of the vaccine are strongly against it, a majority of those who are convinced (a combination of those who are vaccinated and those who will certainly accept the vaccine) are in favor of it. The doubters are in between. Specifically, 91%, 57% and 21% of refusing, doubting and convinced healthcare workers are opposed, respectively. Conversely, 3%, 20% and 64% of the refusing, doubting and convinced healthcare workers are in favor. The percentages in the general population are similar, although a larger proportion of those who are convinced are in favor (74%). These numbers point to potential tensions and even polarization between population groups, with everyone at risk of being left behind misunderstood. Vaccine doubters feel unheard and even misunderstood in their doubts, while the convinced are too slow.

Figure 1

### "I think vaccination should be obligated for healthcare workers"

The Motivation Barometer  
April-June 2021, healthcare workers versus others



HCW = healthcare worker

### Description of samples

#### Health workers

- Cross-sectional data waves since April 2021
- N = 4771
- Average age = 44.91 years (87.1% female; 72% Dutch; 26.9% master's level)
- *N* vaccinated: steady increase over the months, from 87% in March to 97%\* in July.

#### General population

- Cross-sectional data waves since March 2021
- N = 25056
- Average age = 46.32 years (68.7% female; 67% Dutch speaking; 34.7% master level)
- *N* vaccinated: steady increase over the months, from 64% in March to 91%\* in July.
- Status: 45% employed full time, 13% part time, 9% unemployed, 4% student, and 29% retired

## Question 2: How to motivate doubting health professionals?

In addition to the finding that vaccine proponents and doubters are opposed to obligation, we also found in Report 31 that a coercive communication style, compared to one that supports autonomy, has a negative impact on the consideration of, and the intention to vaccinate. What vaccine proponents do see as an appropriate strategy is exercising the necessary patience and providing targeted information in response to their doubts and questions so that they can come to an informed decision themselves.

However, the individual wishes and concerns of vaccine refusers must be set against the collective, societal challenge of vaccinating as many people as possible. The individual autonomy of vaccine objectors and doubters is at some point at odds with our collective autonomy. The trick is therefore to **create a motivational tipping point whereby vaccine refusers do not experience an obligation as an attack on their autonomy but as a legitimate policy choice**. Timing is crucial here. If introduced too early, it risks provoking psychological reactivity, even among doubters or refusers in the general population who also expect to be obligated. If it is introduced in a motivating context and with appropriate timing, it is perceived as fair. In exchange for voluntarily setting aside their own doubts and preferences, vaccine doubters and refusers help realize a collective and unifying goal of protecting each other and regaining our collective freedom. However, the figure in this report indicate that this

commitment may come too soon today. Therefore, it is currently crucial to continue investing in other, more effective motivation strategies and to gradually increase the motivational support for obligation. We formulate four recommendations:

- Encourage public debate: Bring the topic up in the media, with supporters and opponents among health professionals and the general population. This way, different groups can get to know each other's opinions, which is a basic condition for mutual understanding.
- Invest in group discussions: Under the guidance of an expert psychologist, organize a group discussion with vaccine refusers and doubters and persons who have overcome their vaccine doubts. Report #31 shows that the vast majority of vaccine doubters and refusers leave their doubts behind and eventually get vaccinated. The pitfall of such group discussions is that they are designed to convince vaccine refusers or doubters. This agenda shines through and creates pressure, which drives doubters away. The objective of the group discussion is therefore quite modest: to better understand what keeps someone from being vaccinated or makes them decide to be vaccinated anyway. Autonomy-supporting counsellors will respect the dignity of doubters or refusers, but at the same time inform them of the advantages and disadvantages of vaccination for themselves and for society in general (e.g., protection against the delta variant) on the basis of scientific data.
- Framework obligation as a logical consequence: Given the role and tasks of health professionals - to provide adequate care to our vulnerable - it is crucial that they get vaccinated. Getting vaccinated as a health professional is therefore not just an individual issue and choice, but also a societal choice, with implications for others. Given that vaccination is increasingly becoming the social norm and that not being vaccinated has consequences for others, the opinion of others on compulsory vaccination (as reported herein) is relevant. Moreover, society also has a moral responsibility to protect its vulnerable members. From this background, obligation can be framed as a logical-necessary consequence. In such circumstances, obligation does not feel coercive but a legitimate step towards regaining our collective protection and freedom.
- Ensure clarity: Ensure clarity by ...
  - ... indicate when vaccination will become obligatory (timetable)
  - ... invite people for an individual or group discussion within that period of time
  - ... invite them again to vaccinate
  - ... indicate the consequences for the exercise of the profession in the event of permanent refusal. Provide the possibility of a reorientation of the job in which they no longer come into contact with vulnerable target groups.

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