



29 June 2021

Addressing Vaccine Misinformation in Nursing

Kristen Choi, PhD, RN

Shanina C. Knighton, PhD, RN, CIC

Danielle Perkins, PhD, RN

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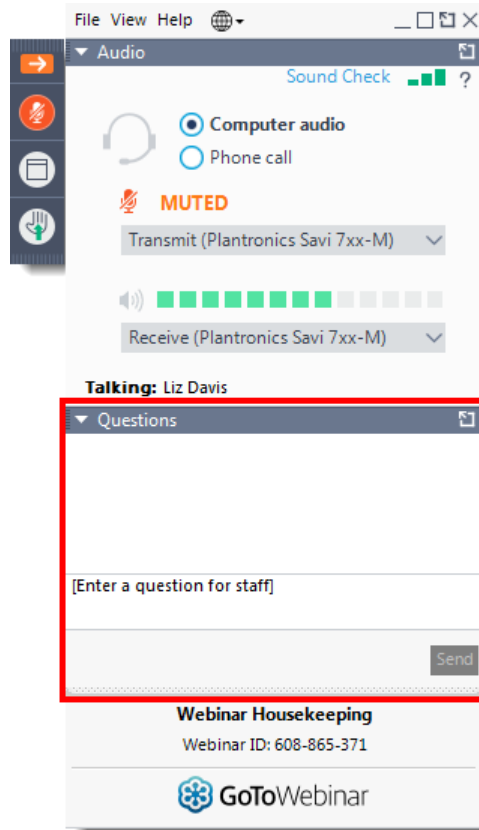


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COVID VACCINE FACTS FOR NURSES

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Addressing Vaccine Misinformation in Nursing

COVID VACCINE
FACTS FOR
NURSES

Exploring common areas of vaccine misinformation, vaccine hesitancy, and how to meet concerns with scientific evidence.

29 June

2-3PM EDT | Online

SPEAKERS

Danielle Perkins, PhD, RN

Sigma Theta Tau International Honor Society of Nursing, Manager of the Chamberlain University Center for Excellence in Nursing Education.

Shanina C. Knighton, PhD, RN, CIC

Instructor, KL2 Scholar
Frances Payne Bolton School of Nursing, Case Western Reserve University

Kristen Choi, PhD, RN

Assistant Professor
UCLA School of Nursing



Learning Outcomes

1. Describe common areas of misinformation about COVID-19 vaccines that contribute to vaccine hesitancy among the general public
2. Explain sources of COVID-19 vaccine hesitancy among nurses
3. Discuss how to counter misinformation and vaccine hesitancy based on evidence

Shanina Knighton, PhD, RN, CIC

Common areas of misinformation about COVID-19 vaccines that contribute to vaccine hesitancy among the general public

Practical Rethinking

Half of Twelve is Six

Half of Twelve is Seven
Fact or Fiction?

$$\frac{1}{2} \text{ of } 12 = 6$$



Fear & Uncertainty Sells

- Exploitation of fragile emotions of those impacted
- News and social media sources can be a breeding ground for hate and intolerance around hot-button issues



2 Basic Types of False Information

Misinformation - inadvertently drawing conclusions based on wrong or incomplete facts

can be corrected with factual information

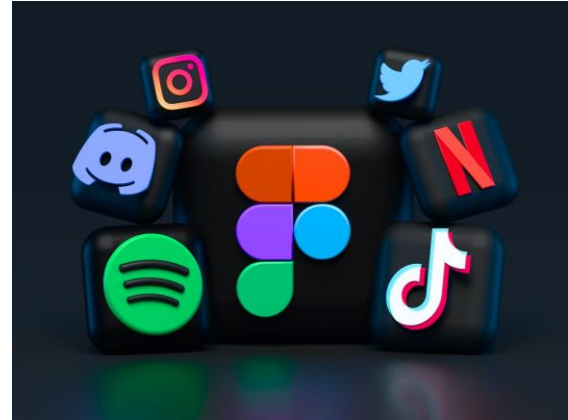
Disinformation - the deliberate spread of falsehoods to promote an agenda #conspiracies

Falsehood on top of falsehood makes it challenging to get to the any truth



Common Sources of Information/Misinformation/Disinformation

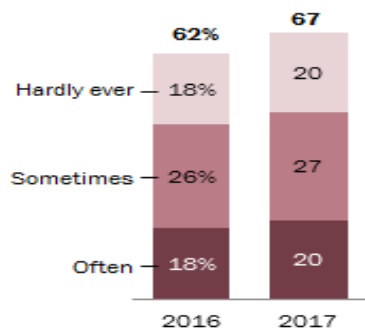
- News/newscasters or reporters
- Newspapers
- Social Media Influencers
- Celebrities/non-experts
- Political affiliates



Social media is a common source for news and information

In 2017, two-thirds of U.S. adults get news from social media

% of U.S. adults who get news from social media sites ...

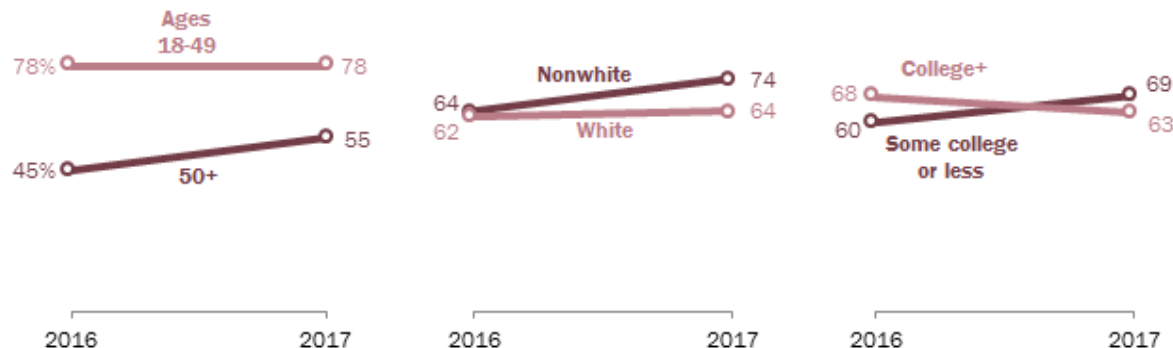


Source: Survey conducted Aug. 8-21, 2017.
"News Use Across Social Media Platforms 2017"

h PEW RESEARCH CENTER

Social media news use increases among older, nonwhite and less educated Americans

% of U.S. adults who get news from social media sites ...



Note: Nonwhite includes all race and ethnic groups other than non-Hispanic whites.

Source: Survey conducted Aug. 8-21, 2017.

"News Use Across Social Media Platforms 2017"

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Top Social Media Sites

- Facebook: Number of active users per month: 1.59 billion approximately
- WhatsApp: Number of active users per month: 1 billion approximately
- Tumblr: Number of active users per month: 555 million approximately
- Instagram: Number of active users per month: 400 million approximately
- Twitter: Number of active users per month: 320 million approximately

Social media is a common source of misinformation

SELF [Fitness](#) [Food](#) [Health](#) [Love](#) [Beauty](#) [Culture](#)

[Health](#) | March 29, 2021

Related Condition Centers [COVID-19 \(Coronavirus\)](#)

These 12 Sources Are Apparently Responsible for 65% of Vaccine Disinformation on Social Media

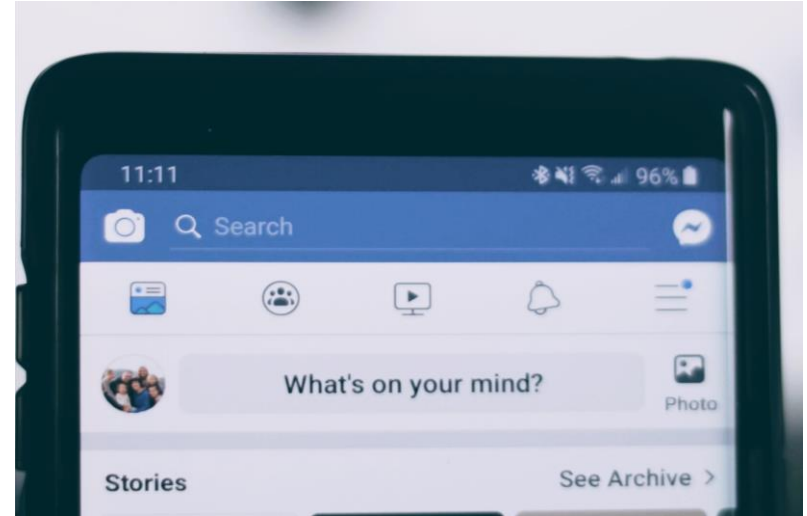
Watch out for the “disinformation dozen.”

By [Sarah Jacoby](#)



Photo by [Joshua Hoehne](#) on

[Unsplash](#)



Social media problem is compounded by “influence bots,” anonymous, automated agents unattached to a real individual

Speaking out against Vaccines and COVID-19 is profitable

Anti-Vaxxer Influencers Profit

Truth About Vaccines founders made \$10 Billion Dollars off COVID19

- Among the most influential conduits for anti-vaccine messages online
- >1.6 million followers on various social media platforms
- 2 million emails subscribed

Social Media Profits

- Social media companies make nearly \$1.1 Billion Dollars off Anti-vaxxers social media presence

Kristen Choi, PHD, RN

**Explain sources of COVID-19 vaccine
hesitancy among nurses**



PERSPECTIVE

**Kristen R. Choi, PhD,
RN**
School of Nursing,
University of California,
Los Angeles; and
Department of Health
Policy & Management,
Fielding School of
Public Health,
University of California,
Los Angeles.

A Nursing Researcher's Experience in a COVID-19 Vaccine Trial

I was scrolling through Instagram in early August 2020 when I saw an advertisement that caught my attention. Usually, I swipe past these without a second glance, but this was for the Pfizer-BioNTech coronavirus disease 2019 (COVID-19) vaccine trial. It was recruiting participants for the highly publicized phase 3 trial of a new vaccine, BNT162b2, that had shown promising results earlier in the year. As a nurse and researcher who has encountered social media recruitment in my own work—and has closely followed the COVID-19 vaccine trials—I was curious to see how Pfizer planned to convince 30 000 people in the US to volunteer. I clicked on the advertisement.

The recruitment website (<https://www.covidvaccinestudy.com/>) was nicely designed with bright photos and thoughtful messaging about the trial. I intended to look at the recruitment approach, but found myself instead thinking about how important it is for people to participate. In the US, as of September 2020 COVID-19 had been diagnosed in nearly 7 million people

ing causality. I had studied the ethics of randomization and why it can be unappealing or even unacceptable to people. But the disconcerting feeling of randomization surprised me. I thought about why getting the experimental vaccine rather than the placebo mattered for me as a health care worker—and then, even those stakes seemed low when I thought about what randomization must feel like for patients.

I sent up a final prayer for the active vaccine as the research nurse finally administered the blind-to-me injection. A visit for the second injection was scheduled for 1 month later. My arm was sore, but I did not notice anything out of the ordinary. I could not begin to guess whether I had received the vaccine or the placebo.

I returned to the research clinic the next month. It was easier and faster this time, although I was dismayed to find that there was another nasopharyngeal swab test. I received the injection and returned home.

The experience after the second injection was dif-



COVID-19 Vaccine Confidence Research

- How are **nurses** and other **healthcare providers** making decisions about getting the COVID-19 vaccines?
- What are some of the reasons healthcare providers are declining the vaccine, and are any of these reasons modifiable?

COVID-19 Vaccine Confidence Research

- Survey in April-May 2021 with 1183 hospital-based nurses in Southern California
- Nurses are receiving COVID-19 vaccines at a higher level than the general public (~80-85%), but at a lower level than physicians, pharmacists, APRNs, PAs
- Lower vaccine confidence among nurses
- Intersection with race/ethnicity: Nurses who identified as Filipino, East Asian, and Hispanic/Latinx nurses had **higher** vaccine acceptance than nurses who identified as White; 100% uptake among nurses who identified as Native American/Alaskan/Hawaiian

COVID-19 Vaccine Confidence Research

Reasons for acceptance:

- “I’m a true believer”
- Protecting self, family, community, patients
- Ending the pandemic
- Going back to normal
- Anticipating requirements for travel, work, etc.

Reasons for declination:

- “Still on the fence”
- Already had COVID-19
- No perceived need/risk
- Concerns about safety/efficacy
- Concerns about side effects
- Barriers to access
- “I don’t just believe”

Danielle Perkins, PHD, RN

**Discuss how to counter misinformation
and vaccine hesitancy based on evidence**

Countering Misinformation Online

- Evidence-based strategies such as the Disseminating Research Information through Facebook and Twitter Framework
- Medical/Scholarly journal dissemination via Social Media
- Collaborate with influencers



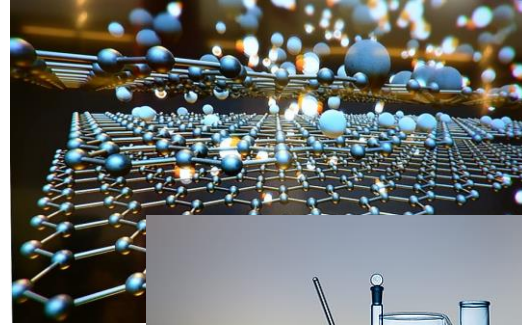
Countering Misinformation in the Community

- Community engagement by nurses, as experts!
- Development of community-specific interventions by health communication professionals and community gatekeepers
- Disseminate information on how to identify misinformation online & increasing health literacy



Publishers, Editors, Researchers, NURSES!

- Curating accurate and accessible lay summaries of important research findings
- Calls for articles reviewing specific controversial health topics
- Further research on combating medical information online



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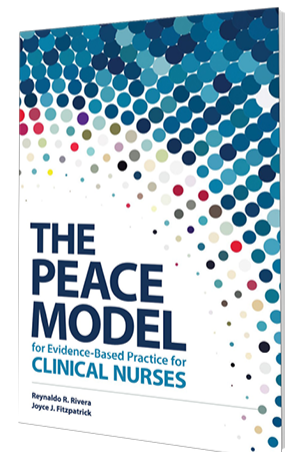
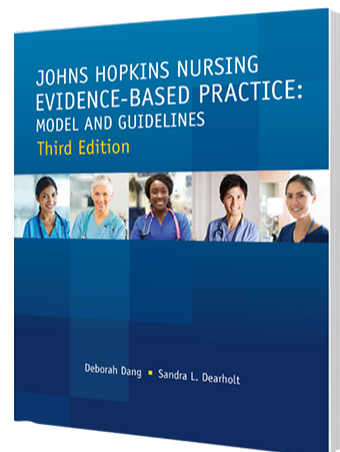
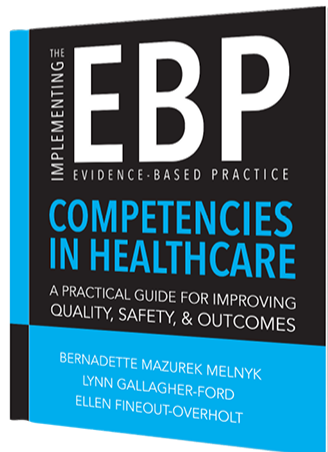
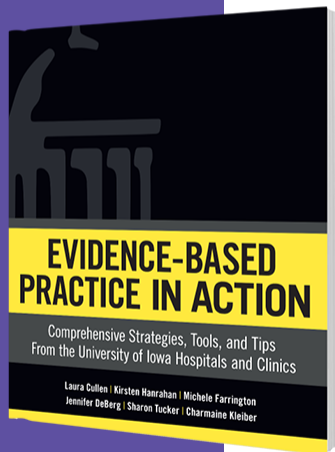
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