Addressing vaccine hesitancy in writing: How has COVID-19 changed hesitancy communication, and what works?

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Abstract

To address vaccine hesitancy in writing, it is important to put yourself in your reader's shoes, demonstrate an understanding of the hesitancy, and form an effective response using evidence-based writing techniques, clear communication, courtesy, and empathy. This article examines practical ways to achieve these objectives.

ighteen months before the COVID-19 pandemic began, I wrote about vaccine hesitancy for the March 2018 issue of Medical Writing.

Back then, health communicators were concerned about hesitancy and the MMR vaccine.

We were furious at Andrew Wakefield and frustrated with mothers who spread misinformation online while choosing not to vaccinate their newborns.

How the world has changed.

COVID-19 and hesitancy

As outbreaks and infection rates continue to soar, vaccination - while not a silver bullet - is the only weapon we have against COVID-19. But poor messaging has hindered rollouts and uptake in countries like Australia. For example: our over-60s have had access to vaccines since March - but rates remained low for months. Why? Access issues aside, there are two likely reasons: mixed messaging and a lack of communication specifically addressing hesitations - both of which have created a perfect storm of hesitancy.

In Queensland, where I live, health experts told under-60s not to get the AstraZeneca vaccine1 due to concern about blood clot risks. In other states, experts encouraged under-60s to get whatever vaccine they could access. Months later, Queensland's message changed;² under-60s could get AstraZeneca if they first spoke to their doctor. Critically, health experts did not specifically address their earlier comments and why they changed their message, creating even more public confusion.

Consistent public health messaging is the key to alleviating fears. Reliable communications that address hesitancy will help to avoid mixed messaging around safety. Messaging needs to be strong enough to motivate behaviour change, too. One of our first consistent public health messages was to get vaccinated to do the right thing and protect your community,³ but it has since changed to focus more on "returning to normal".

This perfect storm of hesitancy is, of course, worsened by media fearmongering. Journalists love to spread fear through speculation, sensationalist headlines, and language use. But fear doesn't change behaviours - it creates confusion, which makes hesitancy worse. And, to recap my 2018 piece: knowledge, facts, and evidence alone don't help to address vaccine hesitancy any more than fear does, unfortunately.

The first step towards addressing hesitancy is putting yourself in your audience's shoes. Demonstrate an understanding of the hesitation, and then form an effective response.

Putting yourself in your reader's

Targeted communication is more effective than generic communication. Putting yourself in your reader's shoes and thinking about what they need to know helps you to communicate clearly, giving you a better chance of achieving your desired result. Asking questions that explore people's reasoning behind their decisions is a useful first step. (See the Appendix for a related writing exercise.)

I recently asked my Instagram followers why they got the vaccine, and one astute reader responded with a simple question: Why wouldn't you? The answer requires a big-picture approach. Why do people do things that are bad for them, and why don't they do things that are good for

It's not because of stupidity or ignorance, writes emergency physician Edwin Leap, in MedPage Today.4 "Human decisions are far more complex, nuanced, and personal than most of us realise." He added, "We needn't agree with a choice to understand it," before offering a few logical reasons why people don't do things that are good for them, including:

- science is hard to understand
- an understanding of science is not innate
- people distrust pharma companies and the government in general
- poverty

But importantly, not all people who are hesitating feel and think the same. Vaccine hesitancy is a complex spectrum,⁵ from consideration right through to outright denial. Different stages require different messages, and each fear requires a targeted, consistent response. If a hesitant reader reads a different answer every time they express their specific hesitation, they'll likely feel more confused and hesitant.

Over the past months, I've read many perspectives online to understand more about the spectrum of COVID-19 vaccine hesitancy. Two of the main themes underlying hesitancy

- Fear of the unknown fears related to longterm side effects, unfamiliar ingredients, and pregnancy risks
- Loss of control over choice fears related to loss of ownership over one's body, which also relates to losing control of freedom

Anger and frustration, two highly emotional states, are closely related to these themes. So, it's not surprising that many of us end up in arguments when discussing hesitancy. Putting yourself in your reader's shoes helps you avoid arguments, communicate clearly, and engage in respectful debate.

When I asked a friend about her reasons for hesitation, she was more than happy to discuss



her feelings rationally. It was like I was the only person who had taken the time to have a civil discussion about hesitation with her. And by

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understanding and acknowledging her perspective, I was able to learn more about hesitation. "Treat [people who are hesitant] as potential allies rather than enemies," concludes Dr Leap. "Try to learn from them and apply that information to future situations. But do not, under any circumstance, treat them as simpletons or dismiss their concerns out of hand."

Understanding the reasons for hesitation helps you form an effective, relevant response.

Forming an effective response

An effective response should be targeted, evidence-based, and considerate. And we can look to other public health campaigns to see which communication tactics have successfully changed people's behaviours. For example, health communication research⁶ has shown that, while fear alone doesn't change behaviours, messages

of fear combined with messages of hope help to inspire behaviour change.

This effect worked well in a 2017 skin cancer

prevention public health campaign. Therefore, a consistent fear-hope vaccination message might work well – as long as it's not too menacing. Comparably, research into smoking prevention⁷ has shown that "short and sweet" messages focused on immediate gains work better than highly threatening or fear-eliciting messages.

A separate study⁸ found that negative messages containing deception and disgust pushed readers into defensive responses – making them best avoided. Narratives and real-life success stories are persuasive tools, too. Embedding facts in a story is more persuasive⁹ than simply presenting facts alone. Incorporating stories about hesitant individuals who have changed their minds may work well.

Engaging particular groups through targeted communication is important as well. Speaking to News GP,¹⁰ Associate Professor Holly Seale, an

infectious disease social scientist also at the UNSW's School of Population Health, said: "By being activated, by being primed, the research shows people are more likely to go in to see their GP and their health provider with a more positive mind frame."

The final word

If you're communicating about vaccine hesitancy and you want to discuss the benefits of vaccination, here are the key points to keep in mind:

- Put yourself in your reader's shoes understand your reader's reasons for hesitation
- Form an effective, evidence-based response
 use health communication tactics, such as:
 - Fear-hope messages (but avoid frightening messages)
 - Short and sweet messages focused on immediate gains
 - Narratives and real-life success stories to persuade
- Keep your communication targeted use relevant messages in susceptible communities or age groups



6 tips to help you write clearly about COVID-19

To alleviate pandemic-related anxiety, aim to provide clear, factual communication that supports health literacy.

Clearly define unfamiliar COVID-19 medical terms

Think of the words and phrases that could be unfamiliar to your target audience and define them before using them in a sentence. To determine which terms are unfamiliar, you'll need to research your target audience and gather your requirements in detail. The clearest way to define an unfamiliar medical term is to define the term first, and then use it in a sentence

• CORRECT: The time after exposure and before having symptoms is called the incubation period. The average incubation period for COVID-19 is 4.9-7 days.

Sometimes, you may not be able to define the term before using it in a sentence. While it's best to define the term first, including a definition in the second sentence is better than not including a definition.

EXAMPLE: The average incubation period for COVID-19 is 4.9-7 days. The incubation period is the time after exposure and before having symptoms.

Differentiate between similarsounding terms

Many pandemic-related terms sound similar and can confuse your readers when misused. An essential aspect of writing clearly about COVID-19 is differentiating between common terms to avoid confusion. Here are just some of the many similar-sounding terms you may need to define or explain:

- Restrictions and measures
- Physical distancing and social distancing
- Quarantine and isolation
- Lockdown and self-isolate
- Medication and vaccination

Use key terms consistently One of the fundamental rules of plain English writing is to use consistent key terms. Decide whether you're going to use the term COVID-19 or coronavirus, for example. If you



go with COVID-19, make sure your capitalisation is consistent.

Using consistent key terms is important, as it alleviates confusion. For example, if you use the terms physician, health professional, doctor, and GP interchangeably, your readers may think you're referring to different people.

Tip: SEO best practices tell us to use a range of synonyms for Google's algorithm, but there's a balance between substituting terms for variety and confusing your readers.

Define acronyms Most abbreviations and acronyms need defining, except the ones you can assume everyone understands. For example, writing "Cable News Network (CNN)" is unnecessary. But your readers may not know what PPE or AZD1222 vaccine mean.

The correct way to use an acronym is to spell it out in full at first reference, then include the abbreviation in parentheses. You can then use the abbreviated term throughout your

- CORRECT: Personal protective equipment
- INCORRECT: PPE (personal protective equipment)
- INCORRECT (no need to capitalise every word): Personal Protective Equipment

Tip: You don't have to place an abbreviated term in parentheses if you're not going to refer to it in your content.

Be careful of redundancy Redundancy is when your words and phrases repeat information unnecessarily. These extra words can confuse your readers and make sentences longer, contributing to

poor readability.

Here are some examples:

Global pandemic: Global is unnecessary, as a pandemic is, by definition, global or affecting multiple countries

COVID-19 virus: As COVID-19 stands for coronavirus disease 2019, virus is unnecessary A total of 30,000 people: A "total of" is unnecessary.

Watch out for general redundant words and expressions, like:

- First and foremost
- My own opinion
- Past experience
- Exactly the same

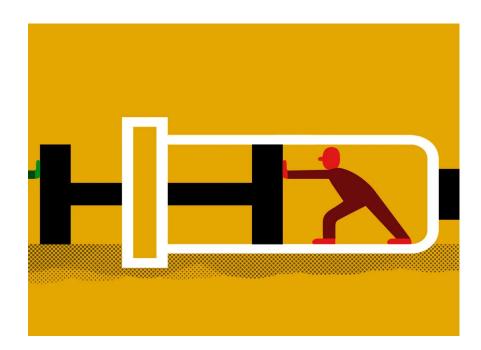
Convey factual information If your writing feels too emotional or threat-based, readers become anxious and may not understand. A review of media dramatisation of the H1N1 pandemic suggested that news content stressed threat-based information over accurate and factual information. creating artificial hype or hysteria around the new virus.

To avoid confusion and alleviate pandemicrelated anxiety, focus on providing:

- Accurate information about the signs, symptoms, and risk factors
- Information on how to effectively prevent or control the disease

Practical, actionable information gives your readers a sense of control and reduces confusion.

An increasing number of people are reading about how viruses spread, how to prevent diseases, and how vaccinations work. By providing good-quality information, we can help our readers make informed choices and create better health outcomes.



Keep communication consistent, clear, and courteous.

Health writers should also continue to:

- Look at what has worked in previous pandemics and public health campaigns
- Look at what is helping to increase rates of vaccination now, in real time

Good scientific writing is about promoting a socially responsible message in line with the best available scientific evidence. And in the COVID-19 pandemic, that message is to get vaccinated. Our job is not to bring all views to the table, because not all views are backed up by evidence. Our job, as health communicators, is to help readers make the choice that leads to better health outcomes and is in the best interest of public health.

Disclaimers

The opinions expressed in this article are the author's own and not necessarily shared by her employer or EMWA.

Conflicts of interest

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Appendix. Vaccine hesitancy writing exercises

1. Addressing common fears

Consider these common hesitations, and write an empathetic, "short and sweet" response that includes a fear-hope message:

Hesitation Your response The AZ vaccine isn't as effective The vaccine won't stop me from getting the virus Why get vaccinated if you can give it to other people? I'm scared of the blood clot risk I'm scared of the risk of immediate death after receiving the vaccine Nobody I know has had COVID I want to wait and see what happens I'm worried the vaccine will affect my fertility It's an experimental vaccine that was rushed to market

2. Common reasons why people get vaccinated

Sharing reasons why others choose to get vaccinated may help to persuade hesitant individuals. Consider these common reasons why people have been vaccinated and write a response to a hesitant individual.

Justification	Your response
Keeping family safe	
I don't want to die of COVID-19	
I care about the community and public health	
I want to travel again and live normally	
I've seen the multitude of benefits of vaccines over so many years, can't see why this is different	
Worried about spreading the virus	
I want the peace of mind	
I want to live without anxiety and fear	
Protection against long COVID-19	