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ANALYSIS: How Can We Vaccinate a Majority of Americans for COVID-19 Quickly? By Prioritizing Three Types of People and Their Specific Barriers

Leveraging New Survey Findings, Surgo Urges Prioritizing the Persuadable (43% of U.S. Population): The “Watchful (20%),” The “Cost-Anxious (14%),” and The “System Distrusters” (9%)

WASHINGTON, February 19, 2021—Surgo Ventures today encourages those working to increase COVID-19 vaccine uptake in their communities to take a page from the behavioral science and marketing playbook: Prioritize those Americans who are persuadable (43% of the U.S. population) by dividing them into psychobehavioral segments and focusing on the specific barriers those three segments—The ‘Watchful,’ (20%), The ‘Cost-Anxious,’ (14%), and The ‘System Distrusters’ (9%)—perceive to getting vaccinated.

Surgo developed the psychobehavioral segments by leveraging a nationally representative survey of 2,747 U.S. adults they conducted December 21, 2020 through January 4, 2021 via NORC at the University of Chicago’s AmeriSpeak panel.

“What’s especially tricky about COVID-19 is that unlike a ‘normal’ vaccination campaign, we have extremely limited time that we can’t waste trying to convince people who simply won’t be convinced,” said Dr. Sema K. Sgaier, Co-Founder and CEO of Surgo Ventures and Adjunct Assistant Professor at Harvard T.H. Chan School of Public Health. “Our approach goes beyond parsing people solely based on demographics to look at the barriers that truly drive someone’s intention to get vaccinated.”

Previous studies have found certain subgroups—women, essential workers, Black individuals, rural residents, Republicans, and lower-income individuals—tend to express lower likelihood of vaccine uptake. But Surgo believes that targeting these demographic groups—and worse, addressing barriers to their vaccine uptake based solely on their demographics—would be a mistake.

The five psychobehavioral segments of Americans Surgo identified from its survey are:

1. The “Enthusiasts” (40% of the U.S. population). Every person in this group said they would get the vaccine as soon as it is made available to them. There are no barriers to vaccination.
for people in this group—in fact, the key challenge will be ensuring vaccine supply meets their demand before they lose enthusiasm, as we’re seeing now as people struggle to sign up.

2. The “Watchful” (20% of the U.S. population). For this segment, social norms are important: Before they get the shot themselves, people in this segment first need to see that others in their peer group or community are getting vaccinated and having safe, positive experiences.

3. The “Cost-Anxious” (14% of the U.S. population). For this segment, time and costs are the primary barriers to getting the vaccine. Every member of this group reports having delayed seeking care for their health in the past due to the expense. The irony: Only 28% of people in this group lack health insurance, indicating that their concerns about costs override having insurance to cover them.

4. The “System Distrusters” (9% of the U.S. population). This group primarily believes that people of their own race are not treated fairly by the health system. Members of this group are likely to belong to, but are not exclusively, communities of color. There are multiple, complicated barriers for this segment, but most of them are related to trust in and access to a health system that has an inequitable history.

5. The “Conspiracy Believers” (17% of the population). This segment has perceived barriers around COVID-19 vaccination that Surgo believes are simply too hard to shift in the short term. It includes people who don’t believe in vaccines in general, but the primary barrier for people in this group is their very specific and deeply-held beliefs around COVID-19. Every person in this group believes in at least one conspiracy theory:
   - 84% believe that COVID-19 is exploited by government to control people
   - 65% believe COVID-19 was caused by a ring of people who secretly manipulate world events
   - 36% believe microchips are implanted with the COVID-19 vaccine

The three most persuadable psychobehavioral segments Surgo recommends prioritizing are the “Watchful”, “Cost-Anxious” and “System Distrusters” for maximum benefit. Each segment has specific barriers to overcome:

1. For The “Watchful”
   - Barrier to overcome: COMMUNITY NORMS
   - Solutions could include:
     - Making it clear (visible) that people they know are getting vaccinated and having positive experiences e.g. allowing people on social media to tag themselves as “vaccinated.”
     - Holding community vaccination events where they can see who’s getting vaccinated, get their concerns addressed.
     - Sharing national coverage data to establish positive social norms around vaccination.
     - Encouraging discussions among trusted family members

2. For The “Cost-Anxious”
   - Barrier to overcome: COST & TIME
Solutions could include:

- Prioritizing messaging from credible messengers (namely, insurance companies) that the vaccination is totally free
- Making vaccinations available at employment sites
- Offering employees time off to get the vaccine

3. For The “System Distrusters”

   Barriers to overcome: TRUST, ACCESS, INEQUITY

   Solutions (which demand a mix of interventions due to the complexity of barriers) could include:

   - Hosting vaccination clinics in trusted non-healthcare settings with providers that reflect one’s own community.
   - Having listening sessions with trusted local community leaders asking, “What is your ideal vaccination/healthcare experience?”
   - Being transparent about equity: Tracking and elevating data on racial disparities in vaccination

Importantly—all three “The Persuadable” segments share one common concern—vaccine safety. This includes beliefs about the vaccine testing and approval process and related concern around serious side effects (71% of respondents in these segments thought they had at least a moderate chance of short-term vaccine side effects, and 67% thought they had at least a moderate chance of long-term vaccine side effects). Solutions to address this concern could include:

- Reframe language around side-effects from “side-effects” to “expected reactions” and clearly communicate what is known about these reactions.
- Explain in simple terms why the vaccine process is credible, highlighting that the reduced timeline resulted from the removal of bureaucratic rather than clinical checkpoints.
- Highlight that long-term side-effects of vaccines do not last beyond 2 months

“Ultimately, these solutions must be localized to communities and neighborhoods as context shapes how these barriers manifest,” said Sgaier. “Local stakeholders will have to engage the right stakeholders and leverage the right channels to implement solutions that reach these segments and address underlying issues. With precise, parallel efforts across the country, we can rapidly reach community immunity.”