

# **PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health**

**Senate Select Committee on COVID-19**

**Inquiry into Australian Government's response to the COVID-19 pandemic**

**20 April 2021**

**PDR Number: IQ21-000078**

**Vaccine hesitancy and surveys**

**Spoken**

**Hansard Page number: 15**

**Senator: Katy Gallagher**

## **Question:**

CHAIR: Thank you. Professor Kelly, you mentioned vaccine hesitancy and some surveys that you are doing. Can you provide to the committee a copy of the surveys that you have done around that and also outline what your surveys are finding.

Prof. Kelly: I'll take that on notice.

CHAIR: Which bit?

Prof. Kelly: I will provide—

CHAIR: About whether you'll provide? I don't hold out much hope if you are taking it on notice. Presumably that is cabinet in confidence or a national security document too, like the AHPPC minutes? Prof. Kelly: There are a range of surveys and a range of data that we are collecting—

CHAIR: I'd ask for all of it. I'll have the range that you have.

Prof. Kelly: I'll take that on notice.

CHAIR: Alright, if you're not going to provide that to the committee, if you are going to take it on notice, what can you tell us about the survey? Which groups are particularly worried and have become increasingly so over the last three weeks?

Prof. Kelly: As I mentioned in my previous answer, firstly, on the good news side, for people who are in the most vulnerable group, as my colleague the secretary has mentioned, which is elderly people in particular, confidence remains high. They understand the balance between risk and benefit that Professor Cheng has mentioned. Quite reasonably, for those who don't see the high benefit of vaccination—young people, who are less likely to have severe COVID—confidence has decreased since the announcement on 8 April.

CHAIR: What do you mean when you say it has decreased—by a lot, by a small amount?

Prof. Kelly: A relatively small amount. People in the 50 to 70 age group, unless they are in one of the identified high-risk groups that we've talked about before, are not currently eligible to have the vaccination. That's how it is at the moment. They were asked, 'If you were offered a vaccine now would you take it?' That's a somewhat theoretical question. But for those in the older age group who are asked that question, the proportion who said they would continue to want to have that vaccination immediately if offered has remained quite high. The other group, though, has decreased by some percentage points. I'm sorry, I don't have the data in front of me, but I can provide that on notice. The other thing to mention—and this is very important when we think about vaccine hesitancy—is the theory called the health belief model whereby, if people feel that they are at risk of suffering from a particular disease, they're much more likely to be lining up to get the vaccination, and that's something that's dropped over a period of time. Since March last year, where around 70 per cent of Australians were very worried about COVID affecting themselves personally, that's dropped to about 30 per cent now. So those two things are happening. People hear the news about the blood clots and so forth, and, even though it is an extremely rare event, it is serious. So they weigh that up, and that's a very logical thing for people to be doing.

CHAIR: Okay, if you could take that on notice.

**Answer:**

The Department commissions and accesses several monitors of vaccine intent. The most recent data from the September Quantum AustraliaNow survey is published on the Operation COVID Shield section of the Department's website, available at: <https://www.health.gov.au/resources/collections/operation-covid-shield-covid-19-vaccine-sentiment-summaries>. The Quantum monitor samples 1000 Australians aged 18 and over each month.

Other monitors regularly accessed include the Australian Bureau of Statistics' Household Impacts of COVID-19 survey, the Department of Prime Minister and Cabinet's Citizen Engagement Survey, Ipsos Global Monitors, the Australian National University's Longitudinal COVID-19 survey, the Melbourne Institute's Taking the Pulse of the Nation survey, and Roy Morgan surveys.

The trend across monitors has been that intention to vaccinate has fluctuated with perceived risk of COVID-19 and local outbreaks, the commencement of the roll out, eligibility of different cohorts, vaccine availability, and perceptions of specific vaccines. Throughout the first half of 2021, there was a decrease in intent to vaccinate as the vaccine moved from hypothetical to a reality, and coverage of the Astra Zeneca issues was prominent. Decreased intent was attributed to increased concerns about the vaccines and a low sense of urgency due to concern about COVID-19 being at its lowest point since March 2020. The decrease was also attributed to a comfort in existing measures to control the spread of COVID-19 lowering perceived threat of the virus. However, as outbreaks have occurred and more of the population have become eligible in recent months, hesitancy has halved and intent has increased to at least 80 per cent.

Data across monitors shows there has consistently been concerns about safety and side effects, even amongst those very likely to be vaccinated.