

COVID-19 Immunity in Our Community Podcast

Transcript for Episode 5: Addressing Hesitancy with Caregivers and Health Care Navigators

Announcer: Welcome to COVID-19 Immunity in Our Community.

Before we kick off the show, here's the latest COVID-19 vaccination news at the time of this recording on Monday, May 24th.

At the start of this week, over 285 million vaccines have been administered in the U.S. and 6 out of 10 American adults have received at least one COVID vaccine dose.

The FDA recently authorized the Pfizer COVID vaccine for adolescents between 12 to 15 years old.

The CDC recently updated mask guidelines. Fully vaccinated individuals can resume activities without wearing a mask or physically distancing. You are fully vaccinated two weeks after your final dose.

That's it for now, enjoy the show.

Robin Roberts: (MUSIC BEGINS, THEN FADES) Hello—yeah, you! Hi! – I'm Robin Roberts of ABC's Good Morning America and welcome to COVID-19 Immunity in Our Community, brought to you by the U.S. Department of Health and Human Services. (MUSIC SWELLS, THEN FADES)

> COVID-19 Immunity in Our Community has been created to provide you with the groundbreaking science, honest facts, unvarnished truth about the deadly coronavirus and the revolutionary vaccines that can put this pandemic behind us.

> Today, we're talking about vaccine hesitancy, and the people that bridge the gap of trust between hesitant folks and the health care providers who want to help them. (MUSIC SWELLS, THEN FADES)

> These liaisons are community health care navigators. Sometimes the people who take on this role are professional mediators through government programs, but other times they are simply our neighbors or our family.

> Many of these figures are women responsible for balancing social distancing, homeschooling, remote work, and the health care decisions for their own

families. But what does it take to change minds about the safety of COVID-19 vaccines?

Well to find out, we sat down with Heather Simpson, a mother who used to be part of the anti-vaccine community. However, some compassionate friends and thoughtful experts led her to research the science behind the COVID-19 vaccines.

Now, she's a community health care navigator herself. Heather offers her unique insight on how we can best convince others to roll up their sleeves and get vaccinated.

Then, we talked to Dr. Rochelle Walensky, director of the Centers for Disease Control and Prevention. She discussed the Community Health Workers Initiative, an effort to support health care workers and navigators. She also covered how our health care system can work to build and repair trust in these hesitant communities, and what each of us can do to help. (MUSIC SWELLS, THEN FADES)

Once upon a time, Heather Simpson was stringently anti-vaccine or "anti-vax". When COVID-19 hit and talk of a vaccine started to circulate, she knew she wouldn't take her daughter to be vaccinated. Nope, Heather had long been active in anti-vax Facebook groups.

One year, you know what she did? She dressed as measles for Halloween because it was the least scary thing she could imagine. (LAUGHS) That image of Heather in her costume circulated the internet and earned her no shortage of mocking online. The anti-vax community was the only place Heather felt really understood and accepted.

But when the COVID-19 pandemic hit the country hard, Heather still felt it was important to wear masks and protect the community. The anti-vax Facebook groups didn't agree -- and they turned against her.

After losing her anti-vax community, Heather decided to speak to experts about the efficacy of vaccines. Slowly, she realized that vaccines are safe -and now, Heather has been vaccinated against COVID-19.

Here's Heather Simpson now to share her story of how she came to become anti-vaccine, how she realized that vaccines work, and how empathy played a key role in that journey. Then, she'll talk about her mission to spread the truth about COVID-19 vaccines.

(MUSIC SWELLS, THEN FADES)

Heather Simpson: I am a mother of a three-and-a-half-year-old girl and her name is Charlotte. She is a wild child. She loves dinosaurs and the great outdoors and she quite literally never stops going.

I grew up vaccinated. I got my Hep-B series when I was a teen. I guess that was a different schedule back then. And, that's just what we did. We didn't worry about it. We didn't like them, but we just did it.

When I was 18 and going off to college, my mom gave me the choice to get my meningitis shot. And I hate needles. So being 18, I said, no. I guess there was a little spark of hesitancy in me at that point, like, "Why do we get vaccinated? What would be the dangers?" But I just kind of shut that down.

A couple of years later, I poked myself with some old jewelry. So I ran to the local clinic and I got a tetanus shot. A couple of years after that I had to get a flu shot for school. I almost passed out, but I wasn't worried that I would have a crazy side effect.

It wasn't until I think 2015, when me and my husband started thinking about having a kid and trying to get pregnant that we realized, "Oh my goodness, we're going to have this life that we're in charge of. We have to meet these kinds of heavy decisions." And that's when we were at our most vulnerable.

And that's when I saw this ad for a documentary series about vaccines and it was completely anti-vaccine. It was about nine hours long and we decided to watch it all.

The hard part about it was it was full of doctors and anti-vaccine doctors. But, growing up, having trusted doctors, I'm listening to these doctors like, "Wow, they're correct. This is, this is crazy. How have I not known that vaccines are so dangerous?"

They blamed everything under the sun on vaccines and I just ate it up. I was terrified after that.

Robin Roberts: At the same time she developed her distrust of vaccines, Heather and her husband were experiencing fertility issues that no doctor could seem to solve. She didn't feel like she was being listened to by the medical professionals in her life.

> Then, when natural methods finally helped Heather get pregnant, she decided to go the natural route for good. Natural medicine seemed to help her when no doctor could.

Heather Simpson: When COVID kind of became this big pandemic and the vaccine was being talked about, I in no way wanted anything to do with it. I definitely didn't want my daughter to have it, I didn't want myself to have it, I didn't want my husband to have it.

> I did not trust it. I was a bit of a conspiracy theorist. I was still an anti-vaxxer when COVID hit and still somewhat vocal about my anti-vaccine beliefs online.

> So as ironic as it is that a doctor made me distrust Western medicine, another doctor turned the situation around for me.

I have endometriosis. Last February, it was really bad and my gynecologist wanted to do surgery.

I posted online to my friends, my anti-vax friends, and they were telling me, "It's the lazy way out. You just need to eat healthier and doing the surgery is just kind of pathetic."

And then I went to my doctor and I cried and asked her if this was my fault, if I just needed to eat better. And she told me it was not my fault and I needed the surgery and I felt better after the surgery. And that was when I started to trust Western medicine more.

Robin Roberts: As Heather started to warm up to the medical system, the anti-vax community turned against her. Heather also noticed that the anti-vax community was stringently anti-mask -- but wearing masks in public was something Heather felt passionate about.

> Because of her different opinions, the community completely rejected her. She turned to her friends, and vaccine experts, for the truth.

Heather Simpson: I had a friend named Jess, that poured hours and hours of her time into talking with me about my fears and to have someone care so deeply and actually listen to me, that was one of the biggest things that turned the tide for me.

> I mean, she was just so empathetic. And in all of our previous conversations, she never judged. She would ask "Why are you scared of that? What is your thought process behind that? Okay, this is why I believe that's not correct."

I started reading actual pro-vaccine books instead of anti-vaccine propaganda.

And then I started talking to online doctors that became friends on Facebook and online scientists that became friends on Facebook. And they were so happy to help answer my questions. And they actually explained the science to me.

A lot of anti-vaccine people believe that aluminum from vaccines gets into your brain because they read these studies that show that there's aluminum in your brain.

What actually happens at the end of these studies, if you read the details, it's environmental aluminum, it's not the vaccine aluminum. And that, that blew my mind. We've been reading all these studies wrong. We're not doctors.

I still feel this fear. I think every parent feels a little bit of anxiety going in to get your child's vaccines, because you don't know. I mean, one in a million can have anaphylaxis, probably not your kid, but it's just a medical procedure.

Everybody has a little bit of anxiety, but telling myself those scientific facts, it was just such a relief to know that there's hard science out there that you can trust.

Robin Roberts: After learning the truth about vaccines from experts, and speaking to empathetic friends, Heather made it her mission to use the same science and patience to spread the facts about all vaccines. She also booked her COVID-19 vaccine appointment.

Heather Simpson: I am nervous because needles—I have been known to faint, but that happens and I'm glad to be part of herd immunity.

> I have heard a lot of rumors that the COVID vaccine affects fertility or, "My mom died the next day." Things like that.

What I'm doing is posting and trying to explain to people the science that I've read. I personally got to talk to Dr. Paul Offit about that, because that was kind of my theory. When you read about fertility and you want another kid, you don't want to stop that.

He put my my fears at ease, and that was just such a wonderful conversation. I'm confident moving forward that it is a good vaccine with solid science behind it. All I can do is just share those articles with my friends and share what I know.

If you are going to talk to a vaccine-hesitant person or an anti-vaxxer and try to bridge that gap, just keep in mind that they are terrified. And they truly believe what they believe.

Mocking them is not going to do anything. Being sarcastic is only going to build that wall. When I got a ton of hate as an anti-vaxxer that just strengthened my platform and I believed, "Oh, I got hate? That means I'm doing something right."

So just be on their team and these hard scientific facts that you can't get around, have those ready, have those written down, whatever you need to do, that there are hard scientific facts, even about the COVID vaccine that you can't feel your way out of it. You can't argue your way out of.

You can empathize with them and say, "I understand how scary it is to read these stories." You can explain, "You know, there's actually a lot of 'funny correlation does not equal causation' things on the internet."

That's what helped me, and the scientific facts. I couldn't argue my way out of those scientific facts.

Robin Roberts: Heather Simpson stressed the importance of listening to vaccine hesitant people without judgement, patiently sharing the real science with them.

> That's what changed her mind about vaccines and turned her into a community health care navigator.

To learn more about how the medical system can build trust in the communities they serve, we spoke to Dr. Rochelle Walensky, director of the Centers for Disease Control and Prevention.

Dr. Walensky was a professor at Harvard Medical School for eight years, and Chief of the Division of Infectious Diseases at Massachusetts General Hospital for three years.

She also spent a year working on the front lines of the COVID-19 pandemic. This gave her an up-close understanding of how this disease has impacted vulnerable communities, as well as what may cause those communities to be hesitant about vaccines.

Dr. Walensky discussed how the CDC is working to support and fund community health care workers and navigators, as well as what you listeners can do from home to become small-scale health care navigators yourselves.

Dr. Walensky: I think it's really important that we understand where people are when they're thinking about vaccines and whether they are confident in the vaccines, whether they want the vaccines, and who they get their information from, because not everybody trusts everyone.

> They have trusted people in their lives and their communities, and they really want to understand vaccine safety, vaccine efficacy, and learn it from the people who they trust.

It is those people, locally. It may be in their faith-based organizations. It may be in their communities. It may be in their pharmacies. It may be their loved ones.

It is those people who really have to extend the confidence and the message that vaccines are effective. They will prevent disease and vaccines are safe.

To meet people where they are we need to convey the science. We need to communicate it. We need to bring it to the people at the level that they want to hear it, that they want to understand it.

This is going to happen one person at a time. We need to make sure that people get the answers to their specific questions and they get the answers to those questions in the context of where they have trusted messengers.

Some people get that information from their pharmacist. Some people don't have a trusted pharmacist. Some people might go to their minister and want to get it from their faith-based organization.

And so we're really trying to spread all over local communities to make sure that they get those trusted messages from those trusted messengers. And in fact, that it's science-based and they have all of the toolkits that they need to convey that information based on that science.

Robin Roberts: The CDC recognizes the importance of trusted figures like health care navigators to spread the facts about the COVID-19 vaccines. That's why they're devoting resources to encouraging more people to take on the role in developing the skills of people who already have.

Dr. Walensky: We have devoted \$332 million to our community health worker initiative. We know as part of getting people excited and motivated to take the vaccine, that we really need to meet people where they are.

> It is those community workers who understand the people in their community, who understand where or why they might be hesitant, who know how to find them, who understand what their reluctancy may be.

> I think when we talk about vaccine confidence, we really need to understand that some people are worried because it's not convenient. Some people are worried that the side effects might keep them out of work the next day. Some people are worried about their safety or whether they really work, or maybe some people aren't concerned that they would get COVID at all.

> It is these trusted community workers who live in the community, who can come with informed discussions where people can really ask the questions of the people in their community and get the answers to the questions that they perceive as the reason that they don't want to get the vaccine.

The money and resources that the CDC is putting forward towards this community worker program is going to help with community worker education, and is going to help with evaluation and technical assistance so that we can really inform these community workers and they can bring that message out to the members of their community.

Robin Roberts: Dr. Walensky said that community health care navigators should focus on sharing the overwhelming scientific evidence that vaccines are safe and effective.

Dr. Walensky: I think it's really important to recognize that now hundreds of millions of Americans have rolled up their sleeves and gotten the vaccine.

> We are starting to see the data that demonstrates that that vaccine is leading to decreased hospitalizations, decreased disease, in the communities that have been vaccinated.

I think it's really important to understand that the safety of this vaccine has been demonstrated not only in clinical trials of a hundred thousand people, but now through the experience of a hundred million people.

I think it's really important that people understand that it is so critical for people to roll up their sleeves and get vaccinated. It will help with curbing disease and it is safe to do.

Health care systems and clinical providers have been at the front lines. working with patients and are working now to ensure consistent communication, trusted communication, and accountability for the work that they're doing.

I'm really enthusiastic that over this next 10 years we're building up vaccine trust that they will be there leading with science to lead that trusted message.

Robin Roberts: All of you at home can become health care navigators, too -- by talking to the hesitant people in your lives about why it's important to get a COVID-19 vaccine. The very first step is leading by example.

Dr. Walensky: The first thing you can do is roll up your own sleeve and get vaccinated. And the next thing that you can do locally is just look around you and be the messenger for someone else.

> There are a lot of resources on the cdc.gov website. There are a lot of resources on the WeCanDoThis.gov website and those resources can be used as toolkits to engage in your community, to spread the word out.

When the mailman comes, I might ask, "have you been vaccinated?" People really just want to hear about it in their community.

So send the message to the people around you, to your community, to your loved ones, and really understand what it is that is causing them to not necessarily roll up their sleeves.

If it's the ride, you can be there to provide it for them. If it's the appointment, you can be there to help access it. We are going to do this one person at a time.

When I say meet people where they're at, I mean it both figuratively and literally. So, if the mailman comes, if you're in the pharmacy, if you're having a casual discussion, talk to people about whether they've gotten the vaccine, wear a sticker or wear a bracelet that says you've gotten the vaccine and be the walking advertisement.

When you have this conversation -- not only are you literally meeting them and finding them wherever it is that they go every day -- but then you're having a conversation with them about "Why, if you haven't gotten the vaccine, why not?" "What is it about the vaccine that either, has you concerned? Was it not convenient? Could you not find it? Did you not have the time? Did you not have the time off? Or "were you worried about its side effects?" "Were you worried about its safety profile?"

Because if you're empowered with all the information to answer those questions, then you will be the one to motivate their decision-making as they roll up their sleeves and get the vaccine themselves.

I spent a year on the front lines during this pandemic, so I have so many stories. What I can tell you is when it comes to reaching communities, there are people who might be reluctant.

There are people who don't really understand the impact of this disease. So often early on, we said, you need to stay home. You need to quarantine, you need to isolate.

Quarantine, as I've found in so many of these communities, is actually a privilege that many people don't have the opportunity to quarantine.

It is those community health workers who live in these communities who find people who can convey to those people that there are health care workers out there who care, who want them to come in, who want to see them, who want to see them before they're super sick, so we can intervene early, and to really want to make sure that they can get vaccinated so that they are not at risk to themselves or to their families.

(MUSIC SWELLS THEN FADES)

Robin Roberts: So, each of us can also help bridge the gap of trust between our communities and the health care systems that serve us.

> In fact, we encourage you to join the COVID-19 Community Corp, to receive information on how you can help build vaccine confidence in your community.

> You know, it's understandable for people to ask questions about the COVID-19 vaccines. Decisions about our health are some of the most important decisions we will ever make -- and if we're responsible for making health care decisions for a child or relative, the pressure to do things right can be overwhelming.

But each of us can listen to those concerns with empathy and patience, and then help hesitant folks understand the solid science behind the COVID-19 vaccines.

Both Heather Simpson and Dr. Rochelle Walensky stressed how important it is for health care navigators to use a combination of empathy and science to change minds. And, more importantly, to listen to the questions and fears people have.

Lead by example and book your vaccine appointment today.

(MUSIC SWELLS, THEN FADES)

To get vaccinated, go to vaccines.gov and click "Find COVID-19 vaccines." The site will help you determine where you can get the vaccine and how to get an appointment.

You don't have to worry about paying for your vaccine. Your taxpayer dollars are funding the rollout. So there's no individual cost to you.

So if someone asks you to provide your insurance information, that's only so your vaccination provider can bill your insurance for the administrative cost.

But you will not be personally responsible for any expenses.

I'd like to thank our guests, Heather Simpson and Dr. Rochelle Walensky for sharing their thoughts and their expertise with us today.

Tune in again for episode 6, where we'll address how the COVID-19 pandemic has impacted the Hispanic community. (MUSIC SWELLS, THEN FADES)

COVID-19 Immunity in Our Community was developed and paid for by the U.S. Department of Health and Human Services, part of a public education campaign to increase public confidence in COVID-19 vaccines while reinforcing basic prevention measures: *We Can Do This*.

Presented by iHeartRadio and ABC News, this podcast is hosted by me, Robin Roberts. The episode was executive produced—mm-mm-mmm Ethan Fixell, with production by Wonder Media Network.

It was written, engineered, and edited by Edie Allard, a triple threat! With research assistance from Alesandra Tejada.

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Until next week, I am Robin Roberts, and this is COVID-19 Immunity in Our Community. We can do this! Thank you for listening. (MUSIC SWELLS, THEN FADES)