STOP COVID CA-SF Practice and Policy Brief #4

Understanding Why More Black, Latinx, and Samoan Young Adults Aren't Getting Vaccinated

COVID-19 vaccination rates in the US are lower among people ages 18-39 than among people age 40 and older. Following focus groups with older adults we conducted in early 2021, we held similar focus groups and interviews in July and August 2021 with young adults from the Black, Latinx, and Samoan community in the San Francisco area to hear their views on COVID vaccination. Although many themes were consistent across younger and older age groups, they were often articulated differently. Our focus groups also included a few Asian and Pacific Islander young adults from ethnic groups other than Samoan, whose comments were largely consistent with findings reported in our previous briefs. Here are key things we learned from young adults ages 18-30, many of whom were not vaccinated at the time we spoke with them:

1. Skepticism about the trustworthiness of health and science institutions is anchored in a broader critical appraisal of society's failure to dismantle structural racism and promote a just world.

Mistrust is rooted in a generational anti-establishment orientation informed by historical exclusion and shared experiences of trauma and oppression, including violence perpetrated by law enforcement, hostility to immigrants, profit-oriented health care, and government failure to redress inequity.

"They're putting all this money towards this COVID shot, but they're not putting money towards things that are really useful like stopping poverty or feeding people. Like you're putting all this money towards this shot that can harm us, but you're not going to put it towards things that can help us. Kind of sketchy."

"I think the incentives definitely make me more hesitant to want to get the vaccine. Something that I've seen other people bring up is, okay, well, people have cancer. They have asthma. They have all these other conditions. You don't see them giving out free treatment for that or begging you to get treatment for that stuff, so I think it is a little suspicious that they're pushing it so hard."

2. Social media, the dominant source of information for most young adults, is filled with disinformation about COVID vaccines.

Young adults are inundated with a range of ever-changing content reaching them through their Instagram, TikTok, Facebook, and other social media feeds. Though young adults recognize that some influencers lack veracity, the sheer volume of misinformation not only contributes to suspicion about the safety and efficacy of vaccines but poses challenges to filtering the disinformation to find accurate content.

"I see a lot on social media; I don't really go out of my way to look it up. But I feel like when you look it up it just scares you. They try to scare you into getting the vaccine, and then social media scares you into not getting it, so yeah, it's confusing."

3. For many young adults, non-health, social benefits are the primary motivators for getting vaccinated.

Few young adults dismissed the gravity of COVID-19 in their communities; many had family members who had been very ill or died. But many believe that mask wearing, social distancing, sanitizing, and testing are safer alternatives to vaccination, especially for younger people. When asked about the potential advantages of vaccination, these individuals often cited benefit for their ability to travel, work, and socialize, especially when faced with widening vaccine mandates.

"The only benefit to it is that the world is opening back up again because everybody is getting [vaccinated]. And I want to live my life outside of the house and so they're claiming that the more people get vaccinated the more things is going to open."

4. Self-agency is extremely important to young adults.

Affirming autonomy and self-agency is part of the life course transition from adolescence to adulthood. Young adults consistently spoke of their right to self-determination, including in vaccine decision-making. Their views of autonomy were framed less in the political language of libertarianism (i.e., limit the role of government) than in a more personal notion of self-agency (i.e., I need to make my own decisions).

"For me personally, I've never tried to convince anybody to get the vaccination, that's honestly a personal preference that you feel, and that you need to make your own personal self, to not anything I want to force on anybody else"



Our Recommendations



1. When talking to young adults about COVID-19 vaccines, be prepared to talk about what you and your organizations are doing more broadly to achieve health equity.

Offering financial incentives for vaccination may backfire. Many young adults want institutions to demonstrate the systemic action and social investment they believe is overdue to rectify social injustice.

2. Emphasize the personal, non-health social benefits of vaccination.

Messages should highlight the value of vaccination for employment, education, and recreation.

3. Sponsor and amplify pro-vaccination social media influencers who are generationally relevant.

Leverage celebrities and other influencers on social media who have salience for many young adult audiences, rather than overly relying on "trust the science" messages from scientists and doctors.

4. Center young adults from communities of color in creating and disseminating vaccination messaging.

Young adults are best positioned to know how to reach and influence their peers. Public health campaigns should engage with and invest in leaders from this generation. Their role in shaping messaging will be particularly important for navigating the tension between self-agency and vaccine mandates, given that mandates are likely necessary for achieving public health vaccination goals.













