

COVID-19 Vaccine Bulletin #16 Clinical Trials with Children & Vaccine Hesitancy

The purpose of the Vaccine Bulletin is to give you the latest information about COVID-19 vaccines. For this bulletin, the focus will be on clinical trials for children and vaccine hesitancy.

Quick Updates

- Check out <u>Wellington-Dufferin-Guelph's vaccination dashboard</u>. The total number of doses administered in Wellington-Dufferin-Guelph is 45,612.
- 82% of people who are 80 years of age and older in Wellington, Dufferin and Guelph have received at least one dose of vaccine.
- Go to <u>www.wdgpublichealth.ca/register</u> for more information about vaccine preregistration and eligible groups. There is a Vaccine Registration and Booking Helpline: 1-844-780-0202 for anyone who has issues pre-registering or booking online.
- There are five mass clinic sites operating in WDG and some primary care offices in WDG are offering AstraZeneca vaccine to clients 60 years of age and older.

Vaccine Clinical Trials with Children

Summary of Vaccine Clinical Trials with Children

Pfizer	 February – Enrolled 2,259 teens aged 12-15 in a clinical trial. Estimated to be completed in May 2021. Plans to run a second trial in children ages 5-11 years old.
	 Pfizer expects younger teens to be eligible for vaccine in the Fall and elementary school children by the end of the year.
	 December – Enrolled 3,000 teens aged 12-17 in a clinical trial. Estimated to be completed at the end of June 2021.
Moderna	 March – Began enrollment in clinical trials for children ages 6 months to less than 12 years in the U.S. and Canada. The plan is to enroll 6,750 pediatric participants in the trial.
AstraZeneca	• February – Enrolling 300 children ages 6-17 in a clinical trial (UK).
Janssen	Plans in development to run clinical trials with children.

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References

ClinicalTrials.gov. <u>A phase 3 study to evaluation the safety, tolerability, and immunogenicity of multiple</u> production lots and dose levels of BNT162b2 against COVID-19 in healthy participants.

ClinicalTrials.gov. <u>A study to evaluation the safety, reactogenicity, and effectiveness of mRNA-1273 in</u> adolescents 12 to <18 Years Old to Prevent COVID-19 (TeenCove).

Mahase, M. (2021). COVID vaccine could be rolled out to children by Autumn. BMJ doi: <u>https://doi.org/10.1136/bmj.n723</u>

Moderna Press Release (March 16, 2021). <u>Moderna Announces First Participants Dosed in Phase 2/3</u> <u>Study of COVID-19 Vaccine Candidate in Pediatric Population</u>.

University of Oxford (2021). Oxford coronavirus vaccine children's study – FAQs.

Vaccine Hesitancy

Source: BEworks' COVID-19 Vaccine Hesitancy: A Behavioural Lens on a Critical Problem.

Summary Points

- Without the right communication and behavioural strategies in place, herd immunity may not be achieved. In order to develop solutions to increase vaccination rates, it is important to understand the underlying motivations and mindsets that are leading people to vaccine hesitancy.
- <u>BEworks</u> (in collaboration with Delvinia) conducted a survey of over 3700 Canadians in December 2020. They found that
 - o 63% expressed very strong intentions to receive the COVID-19 vaccine;
 - o 28% were uncommitted to receiving the vaccine ("on-the-fence"); and
 - o 9% said they will not get vaccinated.
- They also found that there were four cognitive factors that predicted vaccination intentions:
 - 1. Belief in conspiracy theories
 - 2. Valuing personal beliefs over empirical evidence
 - 3. Lower general scientific knowledge
 - 4. Vaccine risk concerns
- Interestingly, health care workers in the study were significantly more likely to be "on the fence" than the general population and were more likely to be influenced by conspiracy beliefs.
- Also, the study showed trends of lower intentions to be vaccinated among the Black and Indigenous population than the general population.

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• The researchers propose a behavioural framework to increase vaccine uptake that is informed by the results of their study combined with the broader behavioural science literature:

Behavioural Framework for COVID-19 Vaccine Demand

BE FOUNDATIONS

- Use clear, concise, actionable messaging
- Provide visual information whenever possible
- Present concise rationales for recommendations
- Reduce friction: remove unnecessary steps to desired behaviours
- Don't solely rely on "cold-hard-facts" and large numbers; harness the power of personal stories
- Direct people to up-to-date, specific, and relevant resources

STRATEGIC RECOMMENDATIONS **PSYCHOLOGICAL MINDSET** High trust in institutions **Convert Intentions-to-Actions** SECURE High scientific knowledge High receptivity to empirical data Empower to Become **Community Leaders and** Þ Advocates for Vaccination Not convinced by traditional information and Appeal to Self-Concept as education campaigns Rational, Independent Thinkers Lower institutional trust and not as concerned ON-THE-FENCE about the risks of COVID-19 in general Reduce Susceptibility to Vulnerable to conspiracies and swayed by Mis- and Disinformation intuition over evidence, concerned over threats to autonomy Leverage Existing Social Capital · Say they are concerned about vaccine safety, but also say they "haven't had time to do MM their own research" **Reinforce the Value of** Scientific Thinking Favor intuition, personal opinion or Communicate within their OPPOSED emotionally evocative argument over Worldview and Core Values analytic thinking Entrenched conspiratorial thinking style Minimize Transmission of Self-concept as non-conformist 郓 **Mis- and Disinformation** Intolerant of people telling them how to think

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Updates on Vaccine Prioritization

COVID-19: Guidance for Prioritization of Phase 2 Populations for COVID-19 Vaccination

(Ministry of Health)

• Revisions to the Second Group of Essential Workers who cannot work from home

Information on Extension of Second Dose Interval

Extension of the Second Dose Interval (Ministry of Health)

• Provides the rationale for extended the interval between vaccine doses.

COVID-19 Vaccination: Why Extend the Interval Between Doses (Commentary in JAMMI)

Updates & Resources on the Safety of AstraZeneca

NACI Rapid response: Recommended use of AstraZeneca COVID-19 Vaccine in Younger Adults

• NACI recommends that the AstraZeneca COVID-19 vaccine should not be used in adults under 55 years of age at this time while the safety signal of Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT) is investigated further.

Statement on AstraZeneca Safety Concerns (Health Canada)

Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT) Following AstraZeneca COVID-19 Vaccination (The Science Table: COVID-19 Advisory for Ontario)

Status of Doses Administered in Ontario

COVID-19 Vaccine Uptake in Ontario: December 14, 2020 to March 20, 2021

Reliable Sources of Information on Vaccines

Public Health Agency of CanadaGovernment of OntarioPublic Health OntarioCentre for Effective Practice (CEP)World Health OrganizationCOVID-19 Studies from the World Health Organization DatabaseCentres for Disease Control and Prevention (CDC)

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