

NCIRD

National Center for Immunization
and Respiratory Diseases

**RESULTS FROM OMNIBUS SURVEYS ON
VACCINATION RECEIPT, INTENT, AND
KNOWLEDGE, ATTITUDES, BELIEFS, AND
BEHAVIORS**

OCTOBER 2023



Introduction and Methods:

Data for this analysis were collected through the Ipsos KnowledgePanel and NORC AmeriSpeak Omnibus Surveys. CDC uses these surveys for rapid data collection on receipt, intent, knowledge, attitudes, beliefs, and behaviors (KABB) related to COVID-19, influenza (flu), and other routine vaccinations. While coverage is typically assessed by larger surveys such as the National Immunization Survey (NIS) or the Behavioral Risk Factor Surveillance System (BRFSS), they do not have the ability to quickly add new questions and collect in-depth information on current topics of interest to guide the development of strategies and communications to increase vaccination overall and in key priority groups. The two vendors (Ipsos and NORC) use probability-based panels to survey a nationally representative sample of U.S. adults ages 18 years and older. Panel members complete the surveys online. Samples are drawn using an address-based sampling methodology, and data are weighted to represent the non-institutionalized U.S. population and mitigate possible non-response bias. Each month, CDC funds twenty questions, in addition to demographic variables, to be fielded on two survey waves for each panel, for a total of four survey waves. For surveys fielded October 5-26, 2023, there were 4,130 total respondents across the four waves. Throughout this report, differences among groups were assessed using t-tests with p-values <0.05 considered statistically significant.

For additional information about Ipsos KnowledgePanel panel methodology, visit <https://www.ipsos.com/sites/default/files/ipsosknowledgepanelmethodology.pdf>.

For additional information about NORC AmeriSpeak panel methodology, visit <https://amerispeak.norc.org/content/dam/amerispeak/research/pdf/AmeriSpeak%20Technical%20Overview%202019%2002%2018.pdf>.

How to use this report:

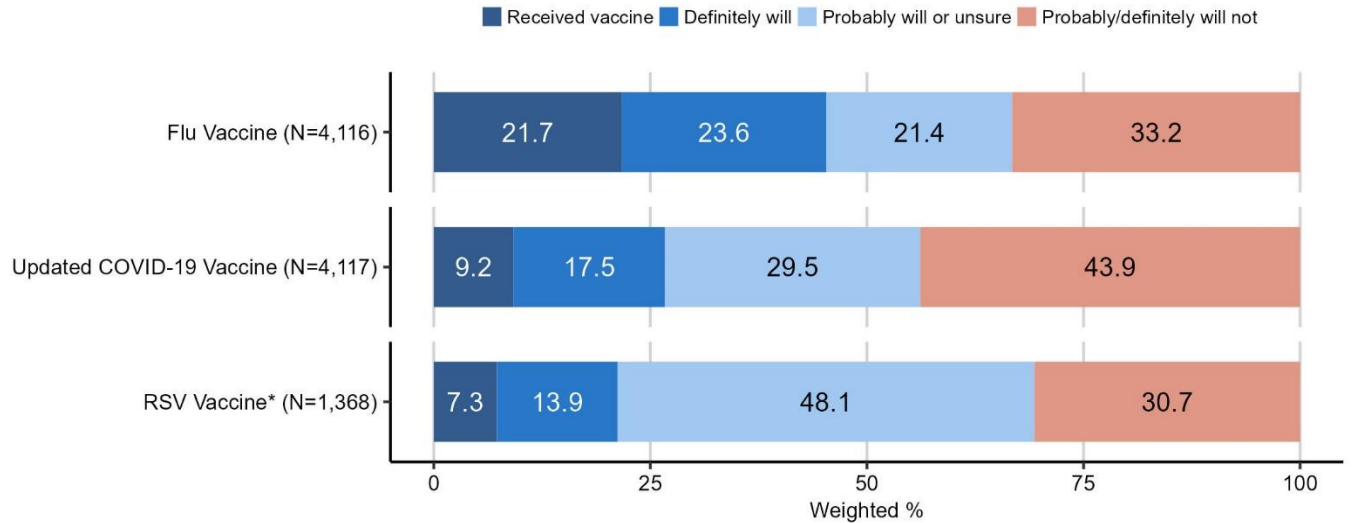
Each figure or table showing overall results contains a link or links to appendix figures that show more detailed results. Click the link to view the related detailed table. You can then hit ALT + ← to return to the page you were on.

Abbreviations:

BRFSS: Behavioral Risk Factor Surveillance System
CDC: Centers for Disease Control and Prevention
IHS: Indian Health Service
KABB: knowledge, attitudes, beliefs, and behaviors
NIS: National Immunization Survey
NORC: National Opinion Research Center
RSV: Respiratory syncytial virus

Overview of Results

Receipt and intent to get fall respiratory virus vaccines among adults 18 years and older*, October 2023

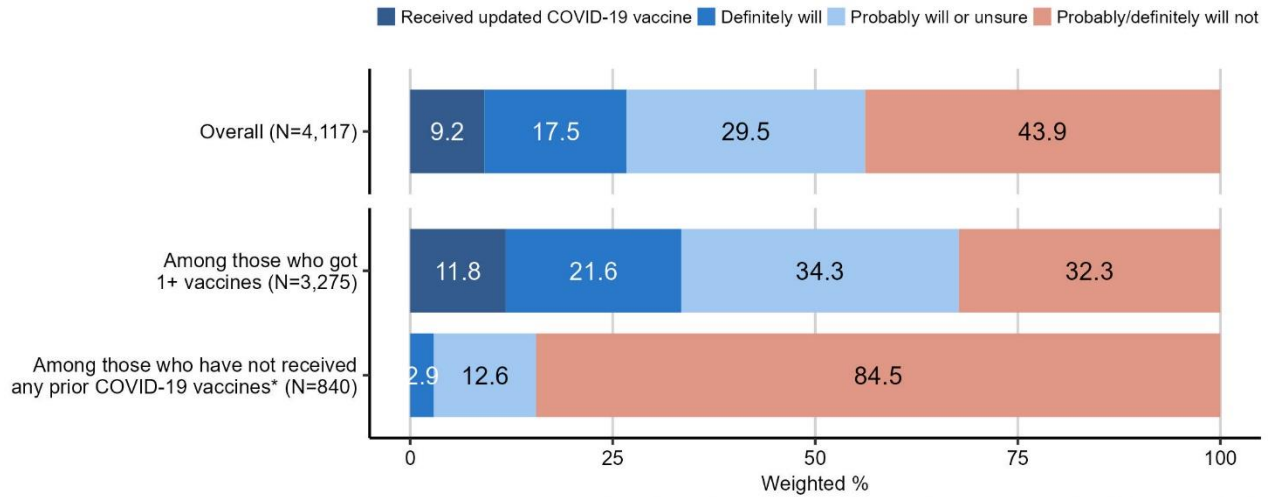


- The percent who definitely or probably will get a vaccine is significantly higher for flu compared to the updated COVID-19 vaccine.

Selected demographic differences in percent who will definitely or probably get a vaccine (see full figures for [flu](#), [RSV](#), and the [updated COVID-19 vaccine](#)):

- For flu and the updated COVID-19 vaccines, adults who were older, with higher incomes, with insurance, and with more education were more likely to be vaccinated or definitely intend to get vaccinated. Those living in rural areas were least likely to be vaccinated or definitely intend to get vaccinated, compared to those living in suburban or urban areas.
- For the updated COVID-19 vaccine, intent is lowest among those who are not confident in the safety of COVID-19 vaccines and those who are not concerned about COVID-19.
- For RSV vaccine, adults 65 years and older were more likely than those ages 60-64 years to be vaccinated or definitely intend to get vaccinated. Those with more education were also more likely to be vaccinated or definitely intend to be vaccinated. Adults living in rural areas were less likely to be vaccinated or definitely intend to get vaccinated, compared to those living in urban areas.

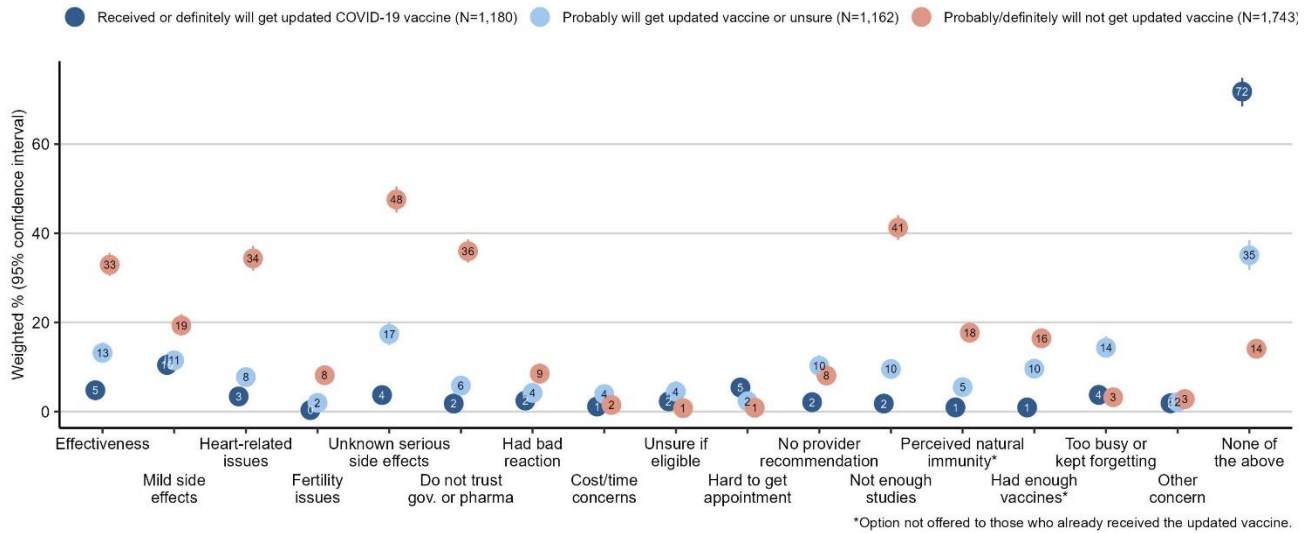
Receipt and intent to get updated COVID-19 vaccine among adults 18 years and older, by prior vaccination status, October 2023



*Includes those who said they were not sure if they received a COVID-19 vaccine (N=4).

- Coverage with the updated COVID-19 vaccine was low even among those who received a previous COVID-19 vaccine (11.8%), and approximately 1 in 3 adults who previously got a COVID-19 vaccine are unlikely to get the new vaccine.

Concerns and issues about the updated COVID-19 vaccine among adults 18 years and older, by vaccination status and intent, October 2023



- Among those who probably will or are unsure if they will get an updated COVID-19 vaccine, the top concerns or issues were unknown serious side effects, effectiveness, and ‘too busy or kept forgetting.’
- Among those who probably or definitely will not get an updated COVID-19 vaccine, more than 1 in 3 were concerned about effectiveness, heart-related issues, unknown serious side effects, ‘not enough studies,’ or do not trust the government or pharmaceutical companies.

Selected demographic differences:

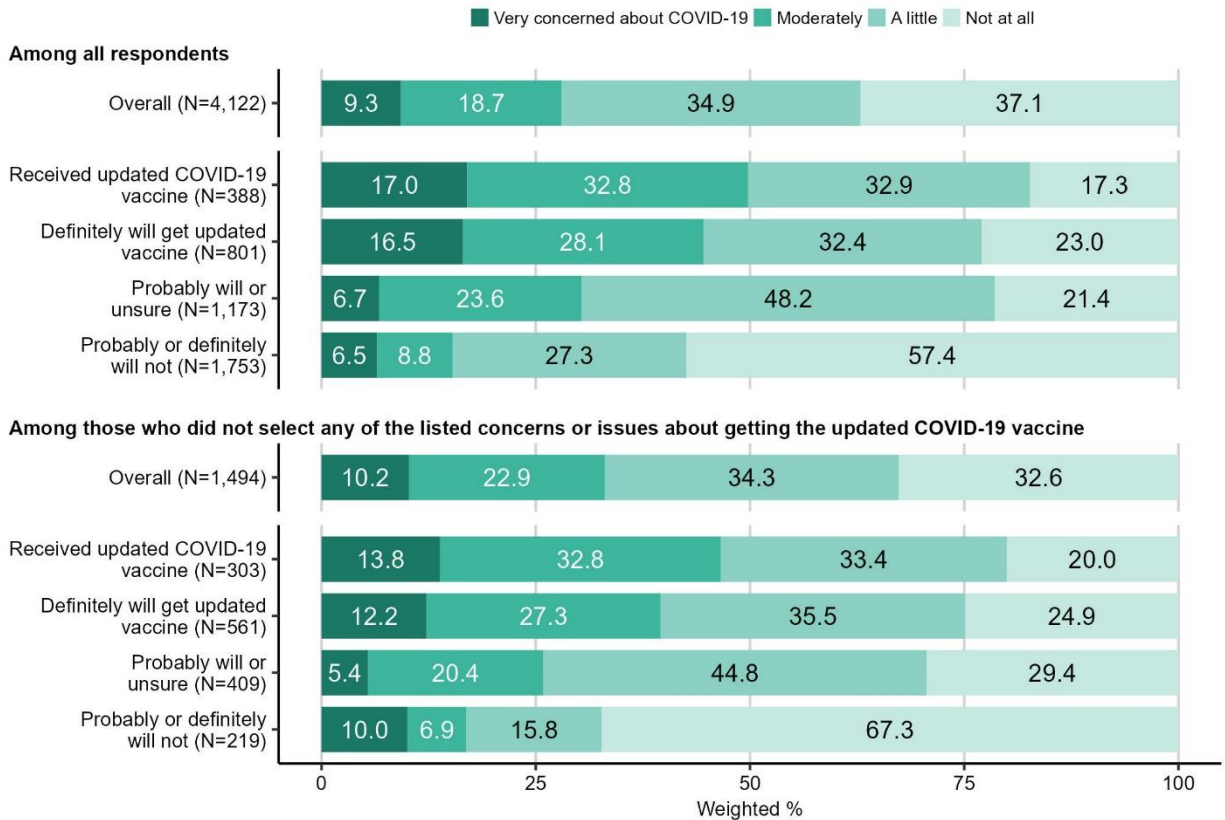
Age: Adults ages 65 years and older are more likely to be concerned about mild side effects than adults ages 18-64 years.

Insurance status: Uninsured adults are more likely to be concerned about cost or time issues and fertility, and also more likely to report being too busy than insured adults.

Urbanicity: Adults living in rural areas are most likely to be concerned about effectiveness, heart-related issues, unknown serious side effects, ‘not enough studies,’ and not trust the government or pharmaceutical companies.

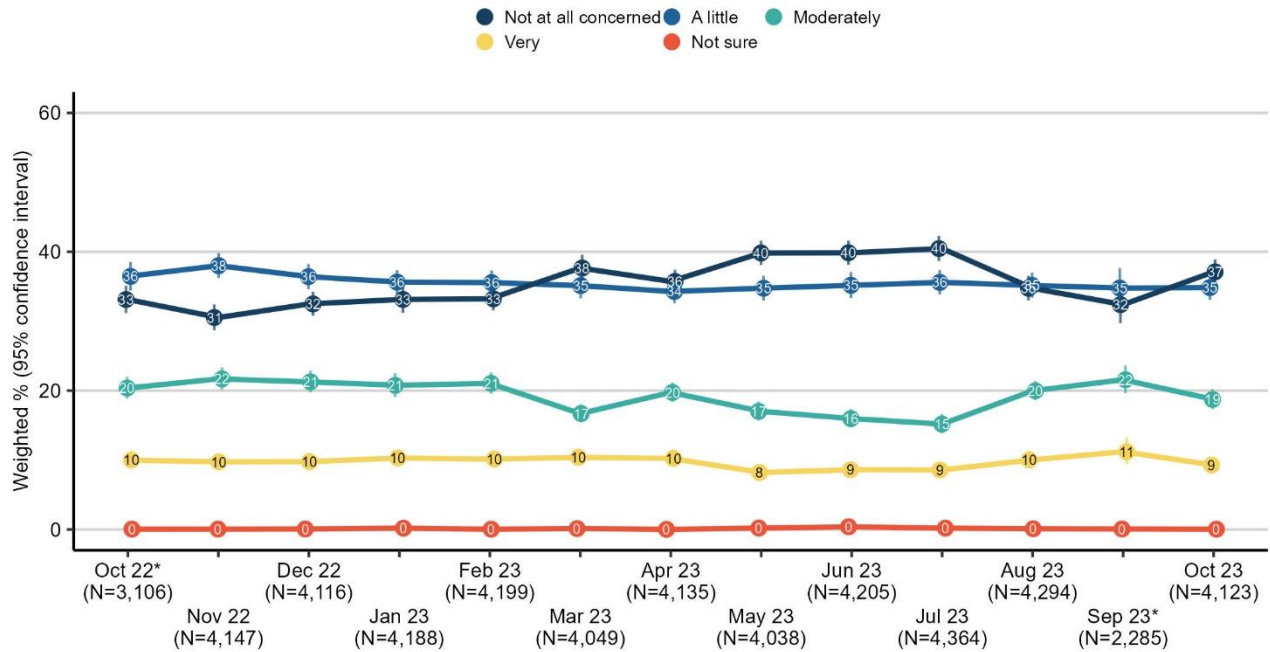
Race and ethnicity: White non-Hispanic adults are most likely to be concerned about effectiveness, heart-related issues, unknown serious side effects, ‘not enough studies,’ and not trust the government or pharmaceutical companies.

Concern about getting COVID-19 among adults 18 years and older, October 2023



- Overall, 72% of adults 18 years and older are only a little concerned or not at all concerned about getting COVID-19.
- Those who probably or definitely will not get vaccinated were most likely to report being not at all concerned about getting COVID-19, while those who will probably get vaccinated or are unsure were most likely to report being a little concerned about getting COVID-19. Patterns were similar when restricted to those who did not select any of the listed concerns or issues about the updated COVID-19 vaccine.

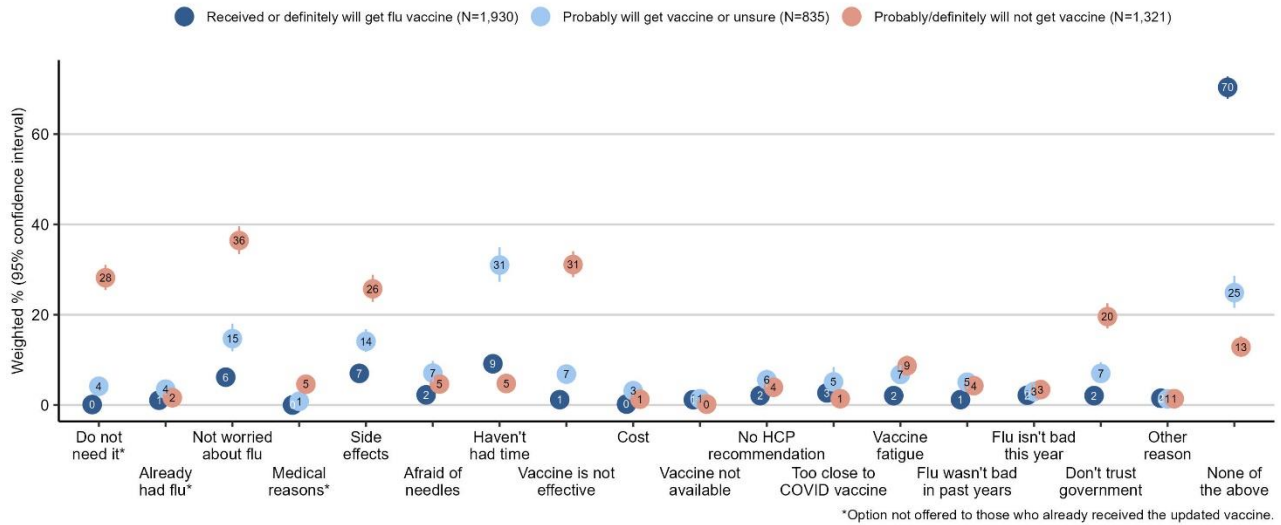
Trend in concern about getting COVID-19 among adults 18 years and older, October 2022 – October 2023



*October 2022 data are based on three survey waves (two by Ipsos and one by NORC) and September 2023 data are based on two survey waves by NORC, whereas all other months are based on four waves (two by each Ipsos and NORC).

- Concern about getting COVID-19 decreased over early summer and increased in July-Sept. 2023.

Concerns and issues about flu vaccine among adults 18 years and older, by vaccination status and intent, October 2023



- Among those who probably will or are unsure if they will get a flu vaccine, the majority reported lack of time or none of the listed concerns.
- Among those who probably or definitely will not get a flu vaccine, over a quarter were concerned about effectiveness and side effects, are not worried about flu, or do not believe they need a flu vaccine.
- 7% of those who probably will get the vaccine or are unsure cited effectiveness as a concern for flu vaccine, compared to 13% of this group for COVID-19 vaccine.

Selected demographic differences:

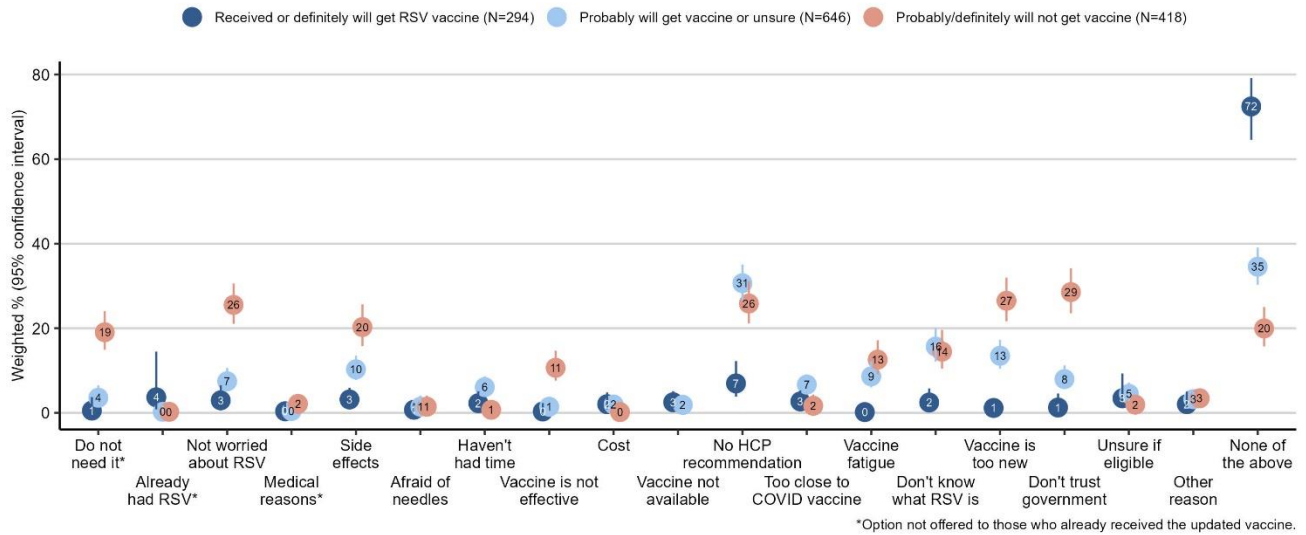
Age: Younger age groups are more likely to say they do not need a flu vaccine, and those ages 18-49 years are most likely to say they haven't had time. Adults 65 years and older are least likely to say they are not worried about flu and least likely to be concerned about effectiveness. Adults 65 years and older are also less likely to be concerned about side effects than those ages 18-49 years.

Insurance status: Uninsured adults are more likely to be concerned about cost issues, though cost issues were reported by only 8% of uninsured adults, and more likely to say they do not need it or don't trust the government.

Urbanicity: Adults living in rural areas are most likely to be concerned about effectiveness, and most likely to say they do not need it or don't trust the government. Adults living in rural or suburban areas are more likely to say they are not worried about flu compared to those living in urban areas.

Race and ethnicity: White non-Hispanic and Hispanic adults are more likely than other groups to say they are not worried about flu.

Concerns and issues about RSV vaccine among adults 60 years and older, by vaccination status and intent, October 2023



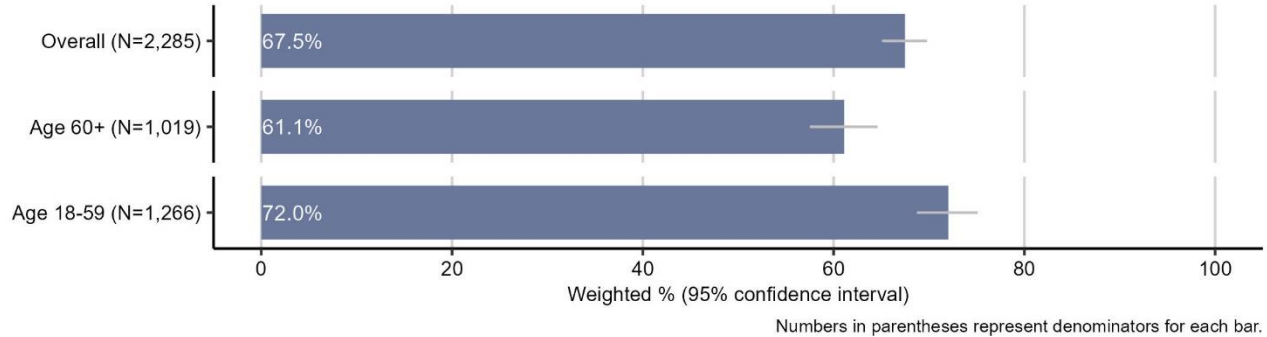
- Among those who probably will or are unsure if they will get an RSV vaccine, the top concern or issue was lack of provider recommendation.
- In addition to lack of provider recommendation, those who probably or definitely will not get an RSV vaccine reported ‘not worried about RSV,’ ‘vaccine is too new,’ and ‘don’t trust the government’ as top concerns or issues about the RSV vaccine.

Selected demographic differences:

Urbanicity: Adults living in rural areas are more likely to say they don’t trust the government than those in urban areas. Adults living in rural or suburban areas are more likely to say the vaccine is too new compared to those living in urban areas.

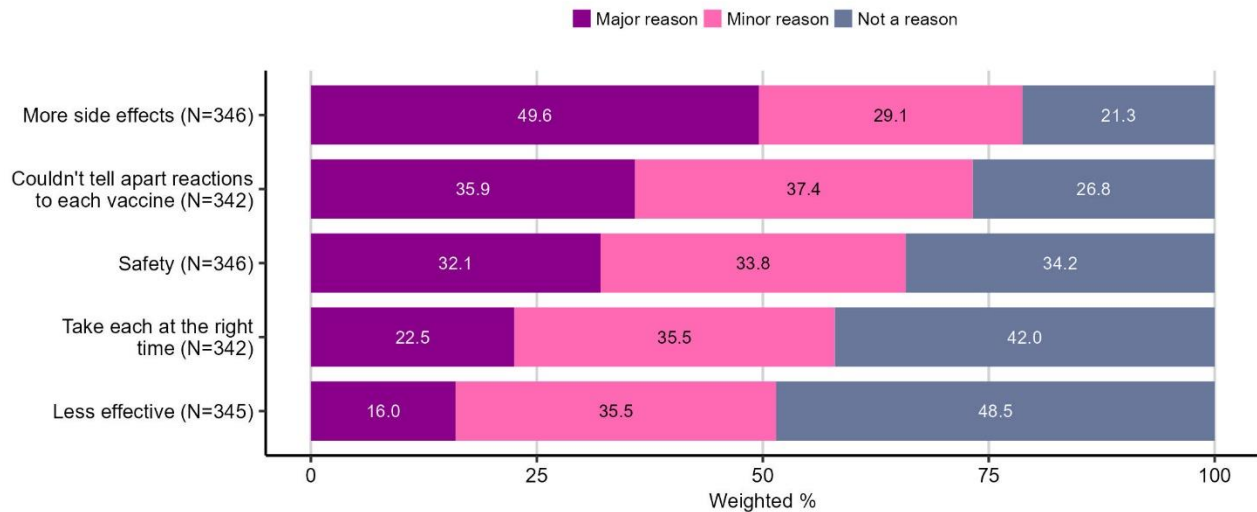
Race and ethnicity: White non-Hispanic are more likely than other groups to say the vaccine is too new.

Acceptability of getting multiple vaccines during the same visit among adults 18 years and older who already received or said they definitely will, probably will, or are not sure if they will get at least two vaccines (COVID-19, flu, RSV), October 2023

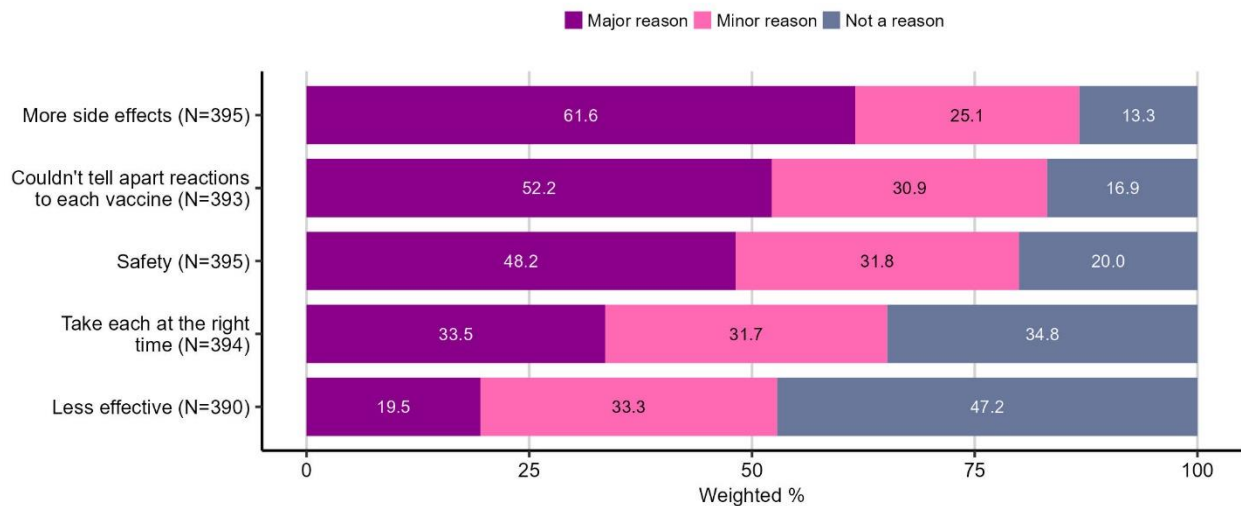


- For adults ages 18-59 years, the denominator for this question includes those who responded they already got, definitely will get, probably will get, or are not sure if they will get both an updated COVID-19 vaccine and flu vaccine. For adults 60 years and older, the denominator includes those who responded they already got, definitely will get, probably will get, or are not sure if they will get at least two respiratory virus vaccines (updated COVID-19 vaccine, flu vaccine, RSV vaccine).
- Overall, 2 in 3 adults who already received, definitely will get, probably will get, or are not sure if they will get at least two of the individual respiratory virus vaccines would be open to getting more than one vaccine during the same visit if offered.
- 72% of adults ages 18-59 years who already received, definitely will get, probably will get, or are not sure if they will get flu and COVID-19 vaccines would be open to getting an updated COVID-19 and flu vaccine during the same visit.
- Older adults are less likely to be open to coadministration – 61.1% of adults 60 years and older who already received, definitely will get, probably will get, or are not sure if they will get at least two of the individual vaccines would be open to getting some combination of COVID-19, flu, and RSV vaccines during the same visit.

Reasons against getting multiple vaccines in the same visit among adults ages 18-59 years who would not get, or are not sure if they would get, COVID-19 and flu vaccines during the same visit, October 2023



Reasons against getting multiple vaccines in the same visit among adults 60 years and older who would not get, or are not sure if they would get, multiple vaccines during the same visit, October 2023

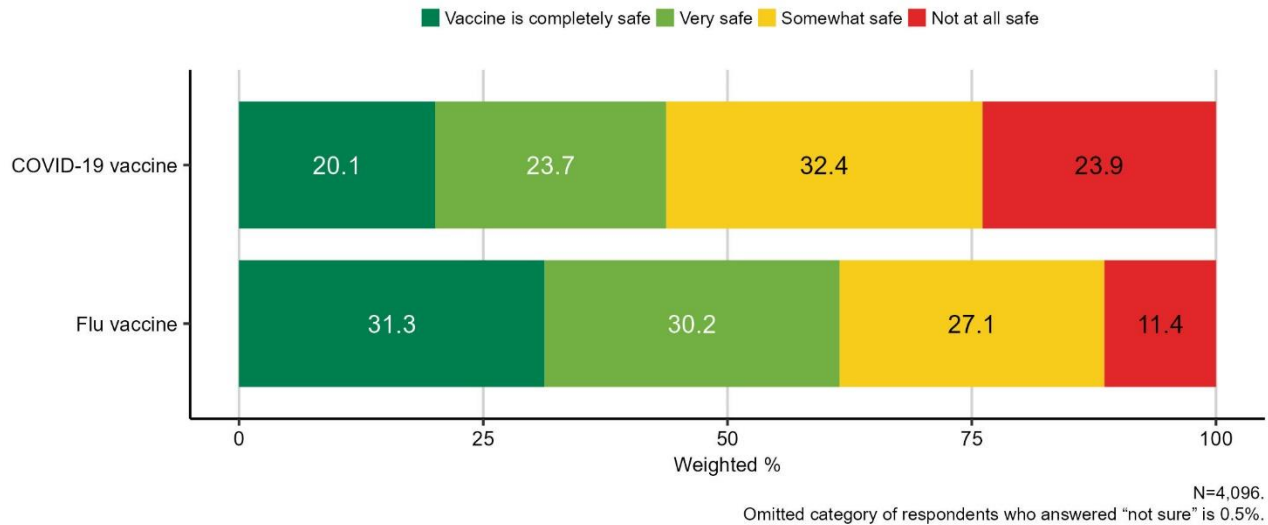


- For adults ages 18-59 years, the denominator for this question includes those who responded they already got, definitely will get, probably will get, or are not sure if they will get both an updated COVID-19 vaccine and flu vaccine, but would not get them in the same visit. For adults 60 years and older, the denominator includes those who responded they already got, definitely will get, probably will get, or are not sure if they will get at least two respiratory virus vaccines (updated COVID-19 vaccine, flu vaccine, RSV vaccine) but would not get them in the same visit.
- The top reason among all adult age groups against getting multiple vaccines during the same visit is the potential for having more side effects.
- Adults 60 years and older are more likely than adults ages 18-59 years to be concerned about safety and not being able to tell apart reactions to each vaccine.

October 2023 Omnibus Surveys on Vaccination Receipt, Intent, Knowledge, and KABB – Overview

- The percent of adults 60 years and older who indicated side effects or safety concerns as a major reason against getting multiple vaccines during the same visit increased significantly since August (surveys fielded August 10-28, 2023), from 51.8% to 61.6% and 40% to 48.2%, respectively.
- There were no significant differences in reasons against getting 2 or more vaccines during the same visit by age group, race and ethnicity, insurance status, or urbanicity.

How safe do you think a [flu, COVID-19] vaccine is for you? October 2023 results among adults 18 years and older.

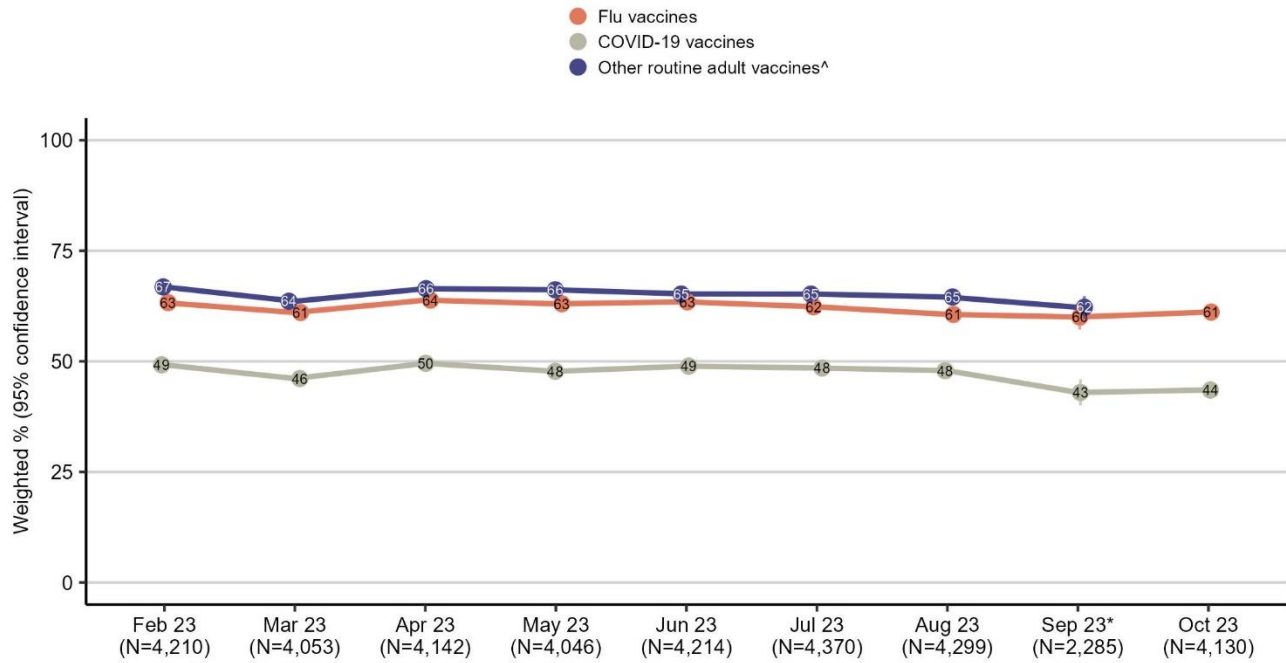


- Analysis was limited to those who responded to vaccine confidence questions about both COVID-19 and flu vaccines.
- Confidence in vaccine safety is higher for flu than for COVID-19 vaccine.

Selected demographic differences in percent responding a vaccine is completely/very safe (see full figures for [COVID-19](#) and [flu](#)):

- Adults 65 years and older are more confident in vaccine safety than other groups for both vaccines.
- Confidence in vaccine safety increased with education and income.
- Black non-Hispanic and Hispanic adults are less confident in the safety of flu vaccines compared to White and other non-Hispanic adults. Other non-Hispanic adults are most confident in COVID-19 vaccine safety.
- Those living in rural areas are less confident in the safety of flu and COVID-19 vaccines than those living in urban and suburban areas.
- Those living in the South were less confident in safety of both vaccines than those living in the Northeast and West.
- Uninsured respondents were less confident in safety of both vaccines than those with insurance.

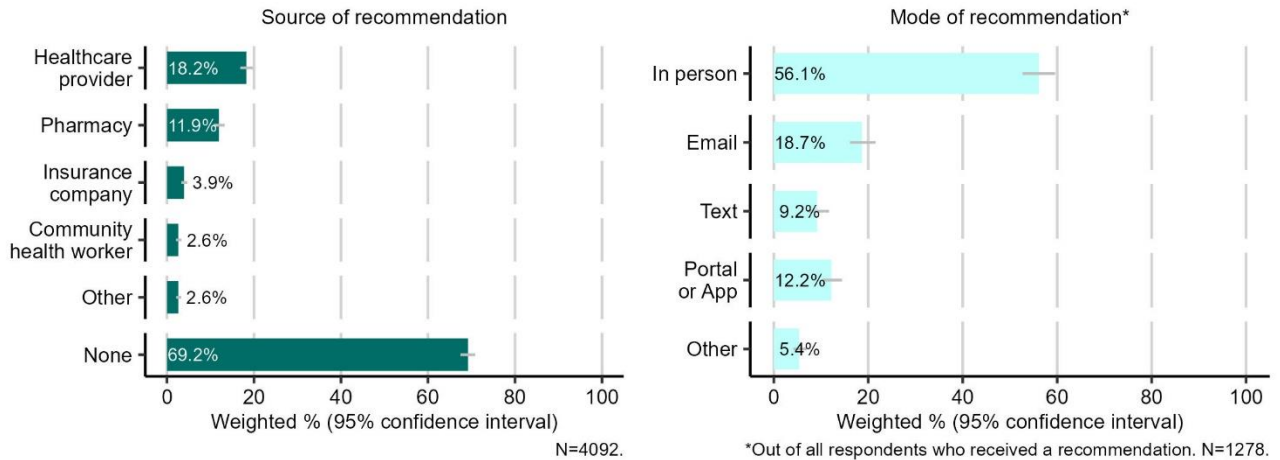
Percent of respondents who answered vaccine is completely safe or very safe among adults 18 years and older, February-October 2023



^Estimates not available for October 2023. *September 2023 data are based on two survey waves by NORC, whereas all other months are based on four waves (two by each Ipsos and NORC).

- Confidence in safety of COVID-19 vaccines has decreased slightly since August 2023.

Receipt of recommendation for updated COVID-19 vaccine among adults 18 years and older, October 2023



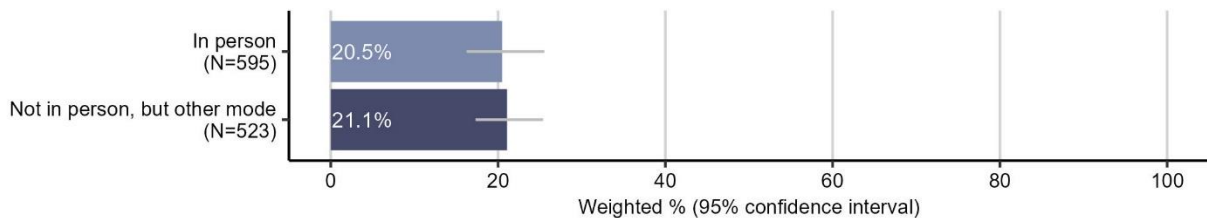
- The denominator for ‘Source of recommendation’ is all respondents who answered the question. The denominator for ‘Mode of recommendation’ is all respondents who reported receiving a recommendation (and answered the mode question).
- About 30% of adults 18 years and older received a recommendation for the updated COVID-19 vaccine.
- 18.2% reported they received a recommendation from a healthcare provider or provider office, and 11.9% reported receiving one from a pharmacist or pharmacy.
- Over half of those who reported receiving a recommendation got one in person.

Vaccination status by receipt and mode of recommendation for updated COVID-19 vaccine among adults 18 years and older, October 2023

Percent vaccinated among all adults 18 years and older, by receipt of recommendation



Percent vaccinated among those who received a recommendation, by mode of recommendation

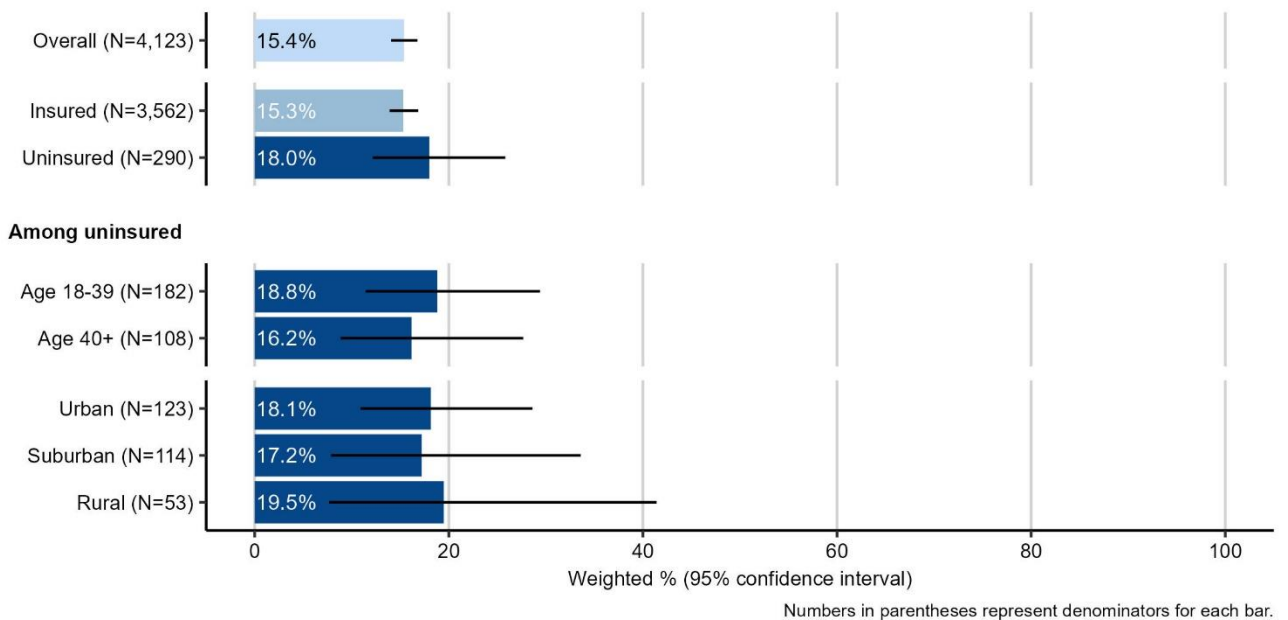


- Adults 18 years and older who received a recommendation were more likely to report receipt of the updated COVID-19 vaccine.
- Of those who received a recommendation, whether or not it was in person does not seem to have an effect on vaccination uptake.
- Only 1 in 5 adults who received a recommendation reported receiving the vaccine.

Bridge Access Program

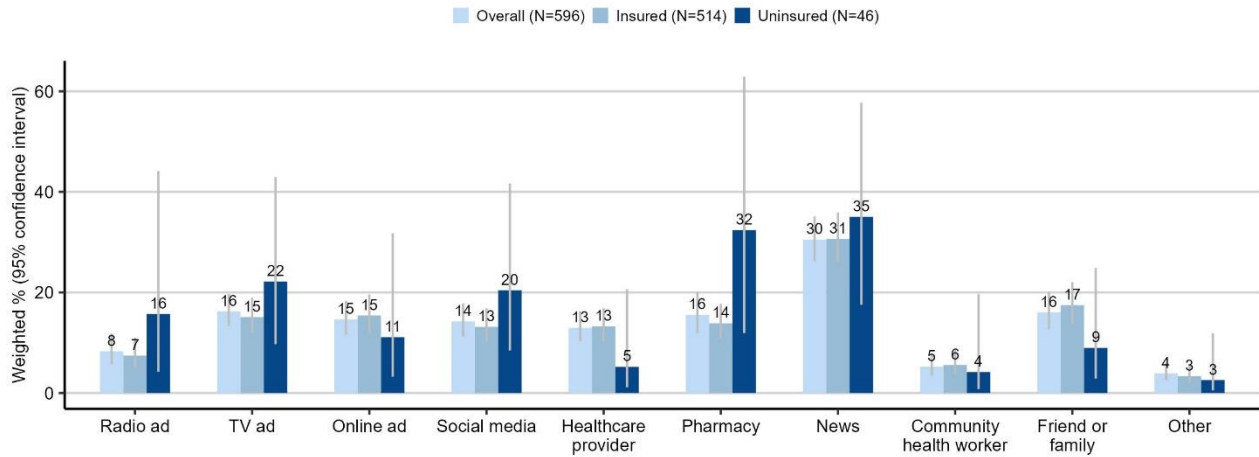
CDC’s Bridge Access Program provides free COVID-19 vaccines to adults without health insurance and adults whose insurance does not cover all COVID-19 vaccine costs. We included three questions on the October 2023 survey to assess awareness of the program and how to get a free COVID-19 vaccine.

Question: Have you heard about the COVID-19 Bridge Access Program? This program provides free updated COVID-19 vaccines to adults without health insurance and adults whose insurance does not cover all COVID-19 vaccine costs. October 2023 results among adults 18 years and older, by insurance status, age group, and urbanicity.



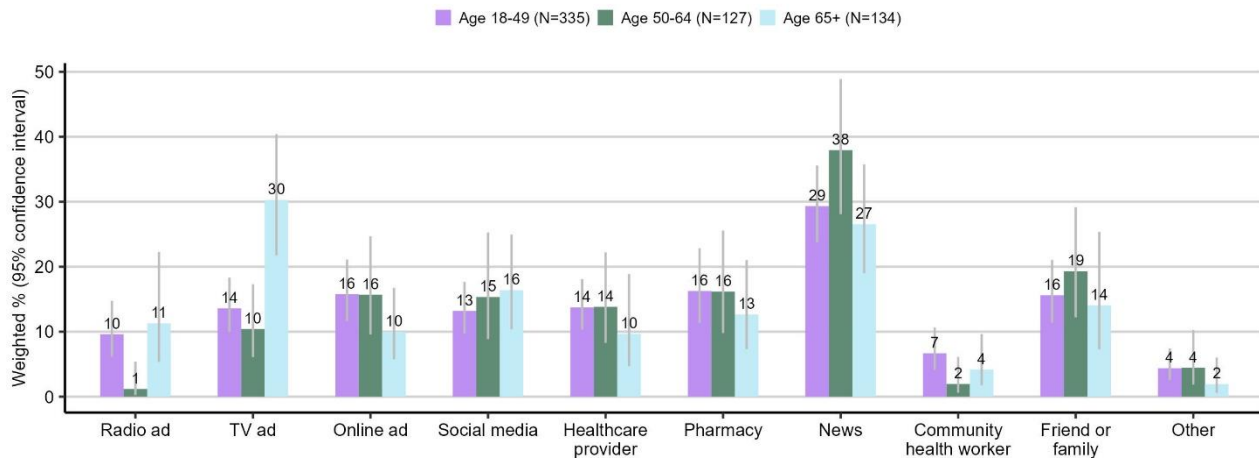
- 15.4% of all adults 18 years and older, and 18% of uninsured adults, have heard of the Bridge Access Program.

Question: How did you hear about the COVID-19 Bridge Access program? Please select ALL that apply. October 2023 results among adults 18 years and older who reported that they had heard of the program, by insurance status.



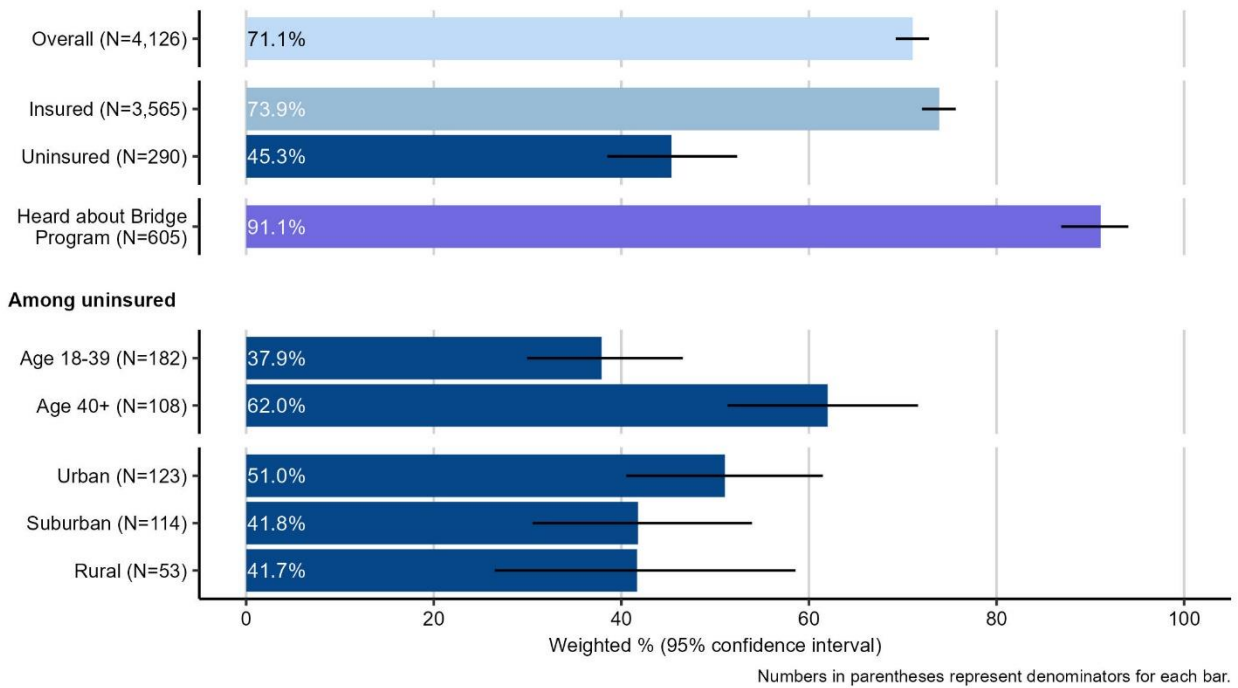
- About 1 in 3 adults 18 years and older who had heard about the Bridge Access Program heard about it from the news (the most common source).
- Uninsured adults may be more likely than insured adults to hear about the Bridge Access Program from a pharmacy, but sample size is too small to be a statistically significant difference.

Question: How did you hear about the COVID-19 Bridge Access program? Please select ALL that apply. October 2023 results among adults 18 year and older who heard of the program, by age group.



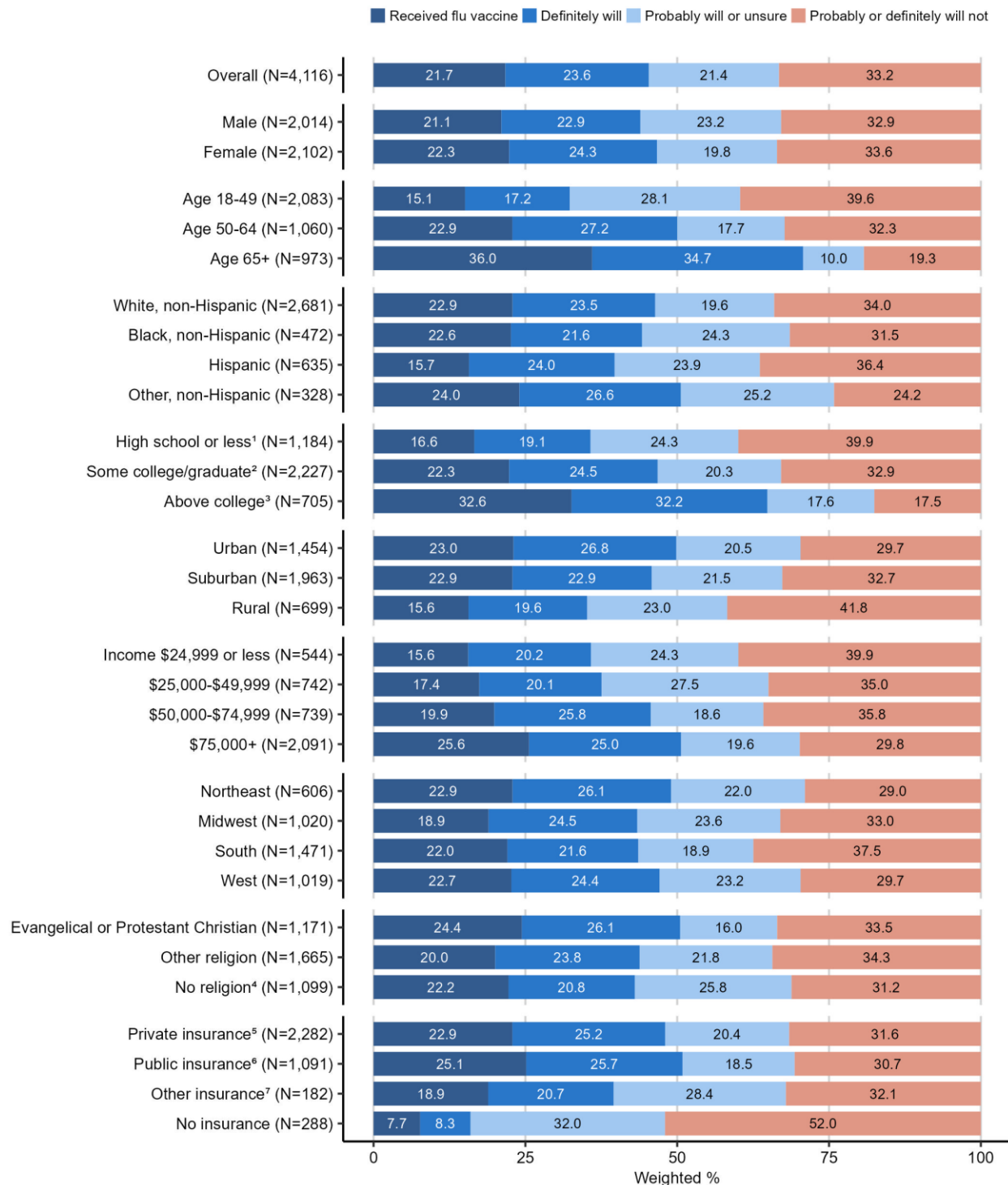
- Adults 65 years and older were more likely than younger adults to report hearing about the program from a TV ad.

Question: Do you know how to get an updated COVID-19 vaccine for free? October 2023 results among adults 18 years and older, by insurance status, age group, and urbanicity.



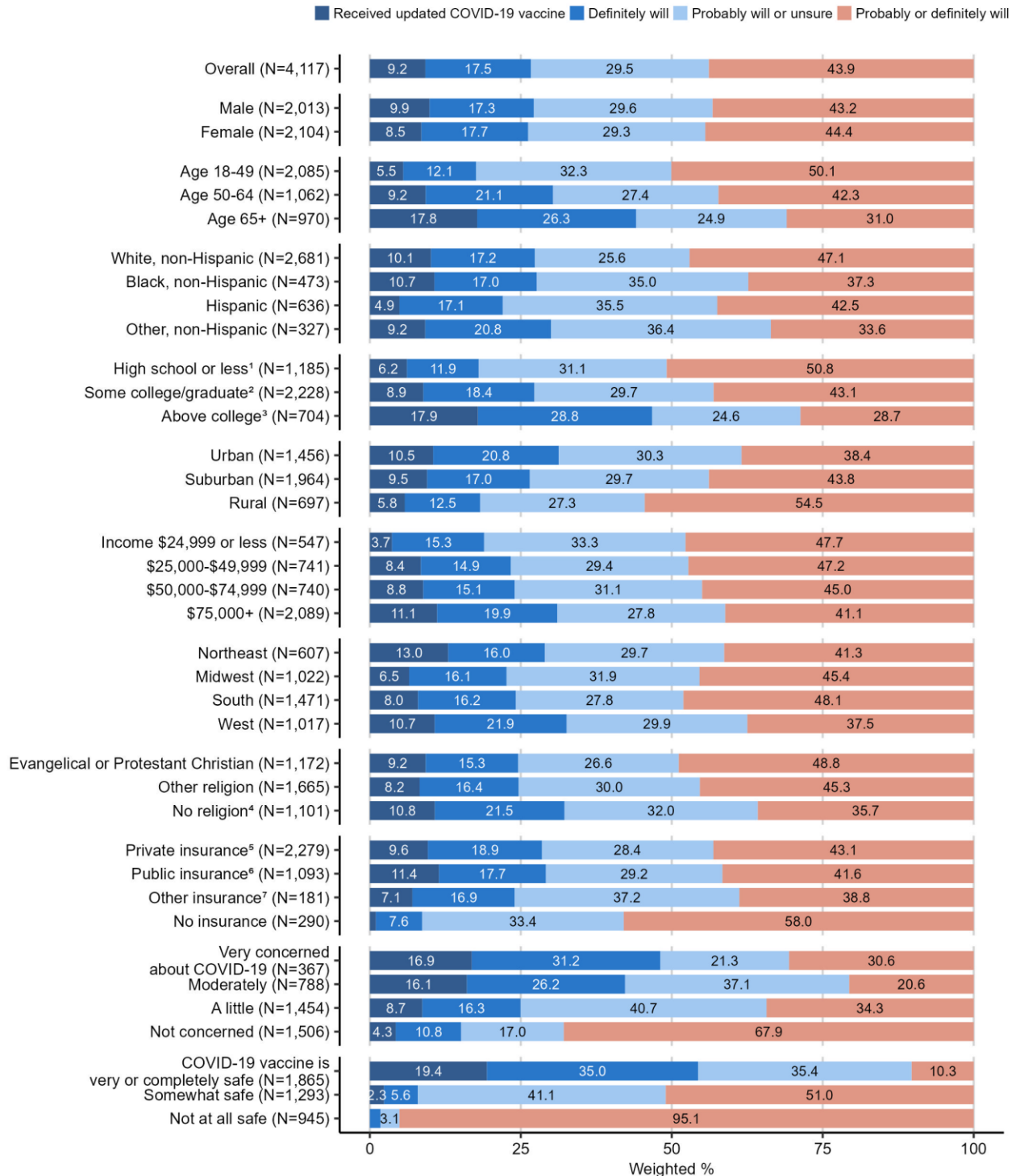
- 71.1% of all adults 18 years and older said they know how to get a free COVID-19 vaccine.
- Less than half of uninsured adults said they know how to get a free COVID-19 vaccine, compared to almost 3 in 4 insured adults.
- Among uninsured adults, those 40 years and older were more likely to know how to get a free COVID-19 vaccine than those ages 18-39 years.
- Among all adults who had heard about the Bridge Access Program, 91.1% said they know how to get a free vaccine.

Flu vaccine receipt and intent among adults 18 years and older, by demographics, October 2023



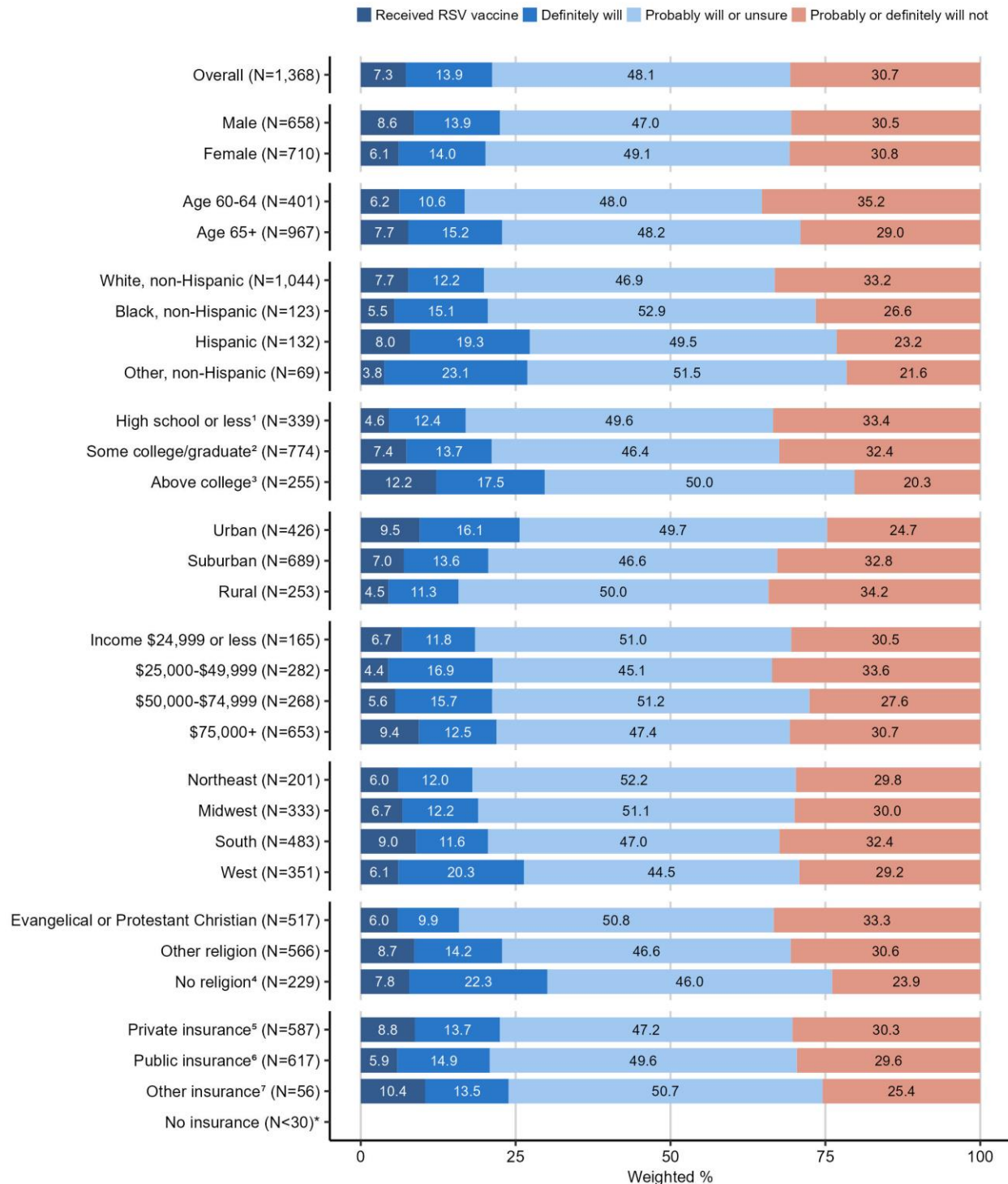
¹High school graduate or less, ²Some college, associate's degree, or bachelor's degree, ³Post graduate study or professional degree.
⁴Includes respondents who answered they believed in nothing in particular. ⁵Includes plans purchased through employer, insurance companies, marketplaces, and military insurance. ⁶Includes Medicare and Medicaid. ⁷Includes VA, IHS, and "other." NORC and Ipsos base urbanicity on different, but comparable measures. NORC uses Census tract-based RUCA (Rural-Urban-Commuting Area) codes, whereas Ipsos uses Office of Management and Budget's CBSA (Core Based Statistical Area) classification.

Updated COVID-19 vaccine receipt and intent among adults 18 years and older, by demographics, October 2023



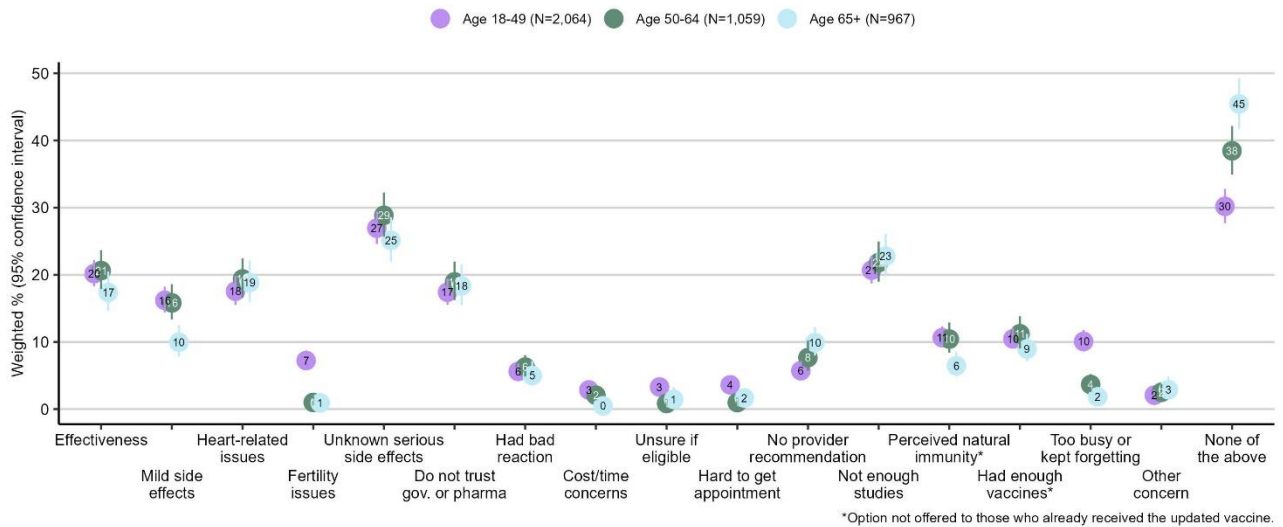
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RSV vaccine receipt and intent among adults 60 year and older, by demographics, October 2023

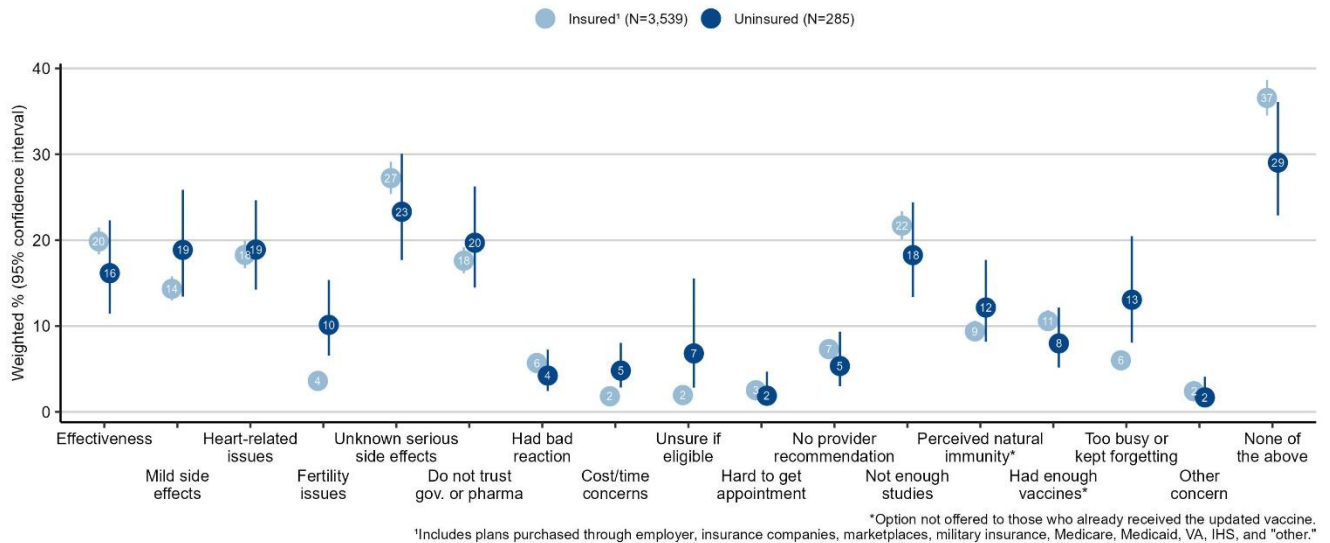


¹High school graduate or less, ²Some college, associate's degree, or bachelor's degree, ³Post graduate study or professional degree. ⁴Includes respondents who answered they believed in nothing in particular. ⁵Includes plans purchased through employer, insurance companies, marketplaces, and military insurance. ⁶Includes Medicare and Medicaid. ⁷Includes VA, IHS, and "other." NORC and Ipsos base urbanicity on different, but comparable measures. NORC uses Census tract-based RUCA (Rural-Urban-Commuting Area) codes, whereas Ipsos uses Office of Management and Budget's CBSA (Core Based Statistical Area) classification.

Concerns and issues about the updated COVID-19 vaccine among adults 18 years and older, by age group, October 2023

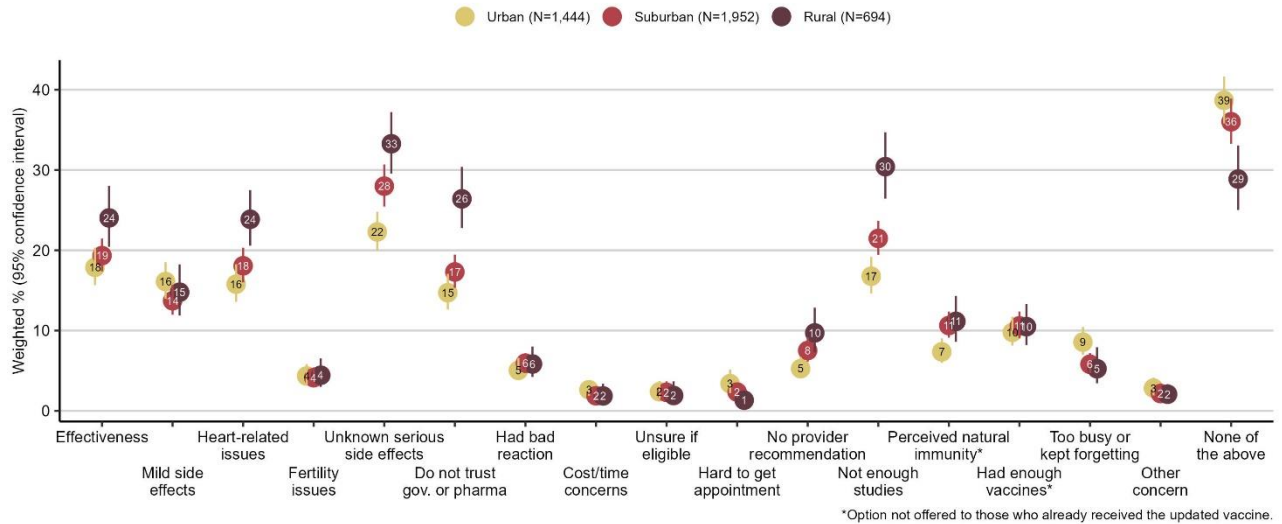


Concerns and issues about the updated COVID-19 vaccine among adults 18 years and older, by insurance status, October 2023

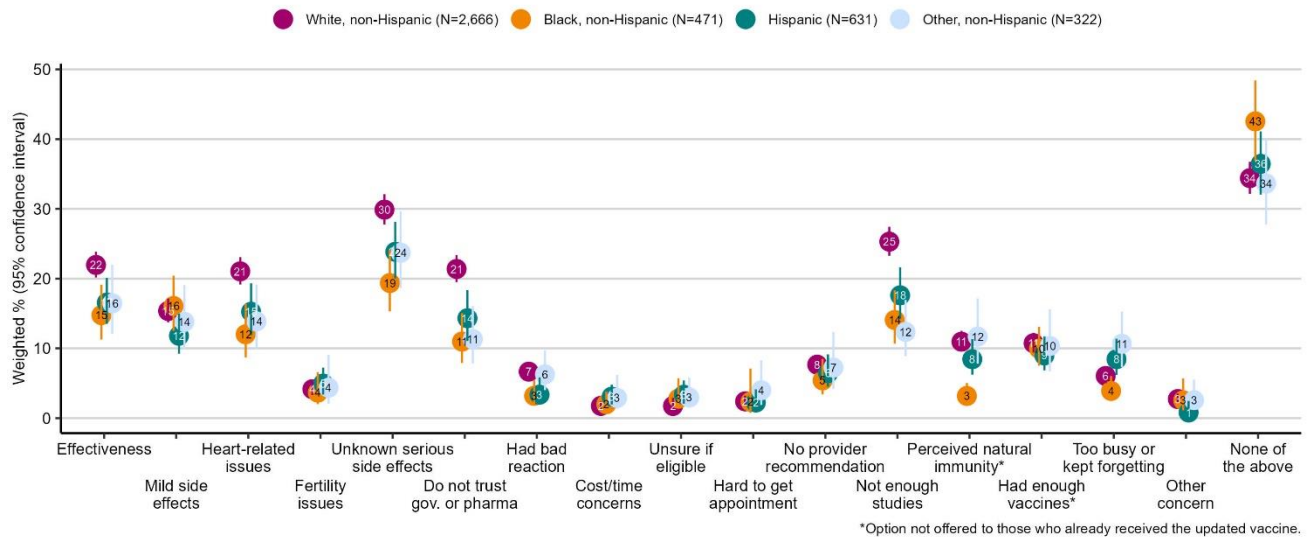


October 2023 Omnibus Surveys on Vaccination Receipt, Intent, Knowledge, and KABB – Detailed Figures

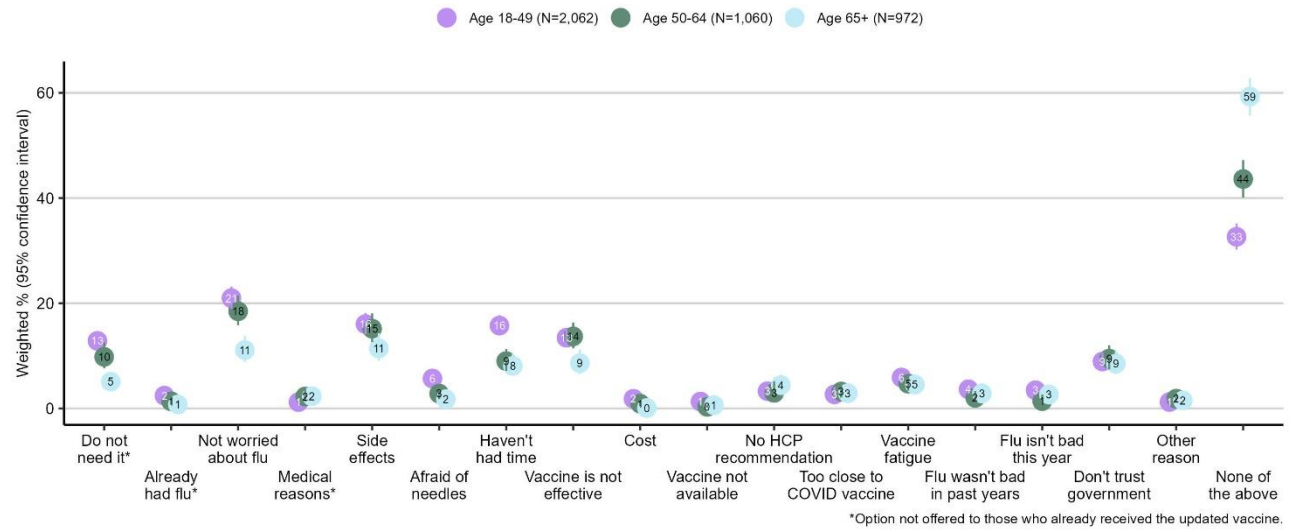
Concerns and issues about the updated COVID-19 vaccine among adults 18 years and older, by urbanicity, October 2023



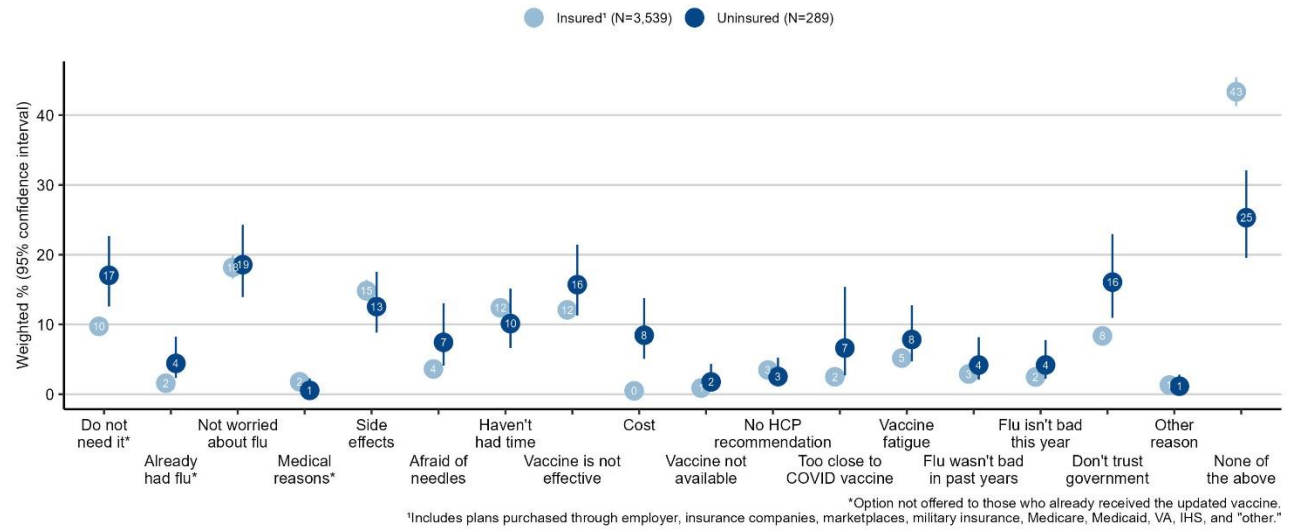
Concerns and issues about the updated COVID-19 vaccine among adults 18 years and older, by race and ethnicity, October 2023



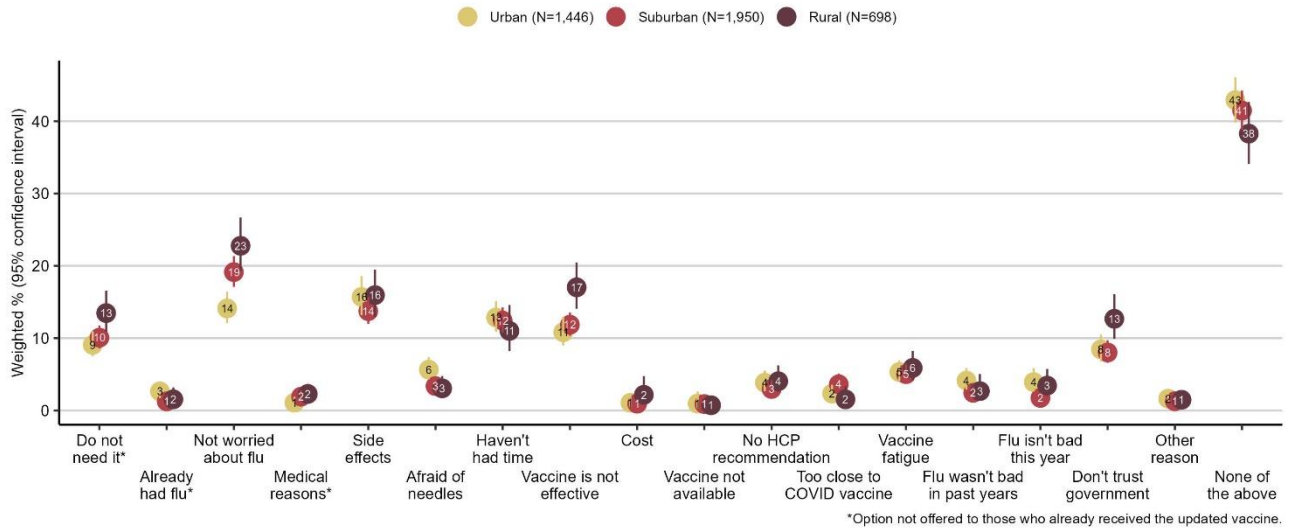
Concerns and issues about the flu vaccine among adults 18 years and older, by age group, October 2023



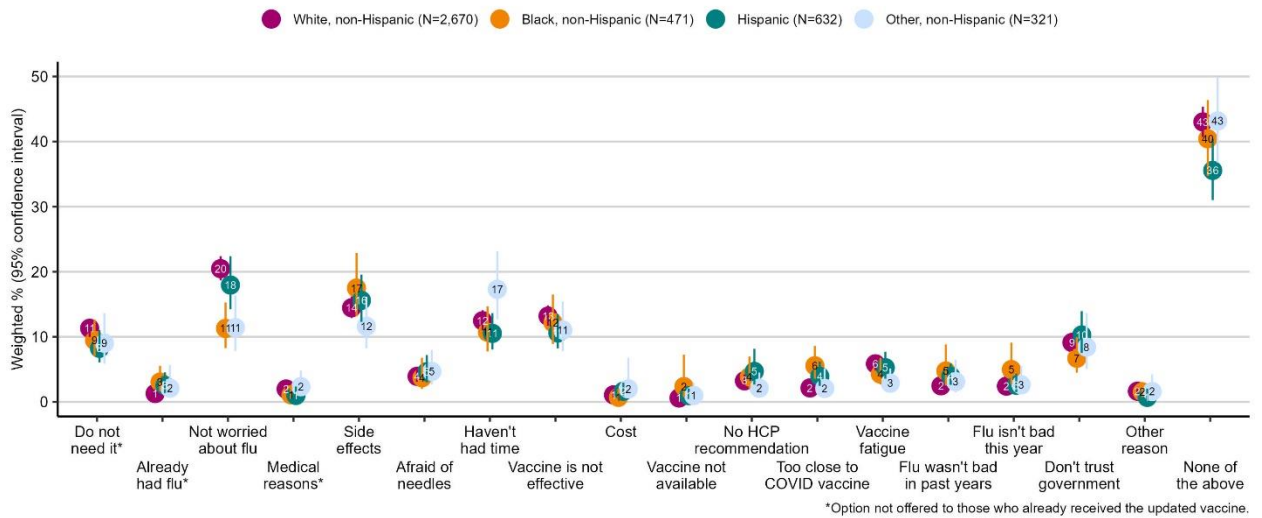
Concerns and issues about the flu vaccine among adults 18 years and older, by insurance status, October 2023



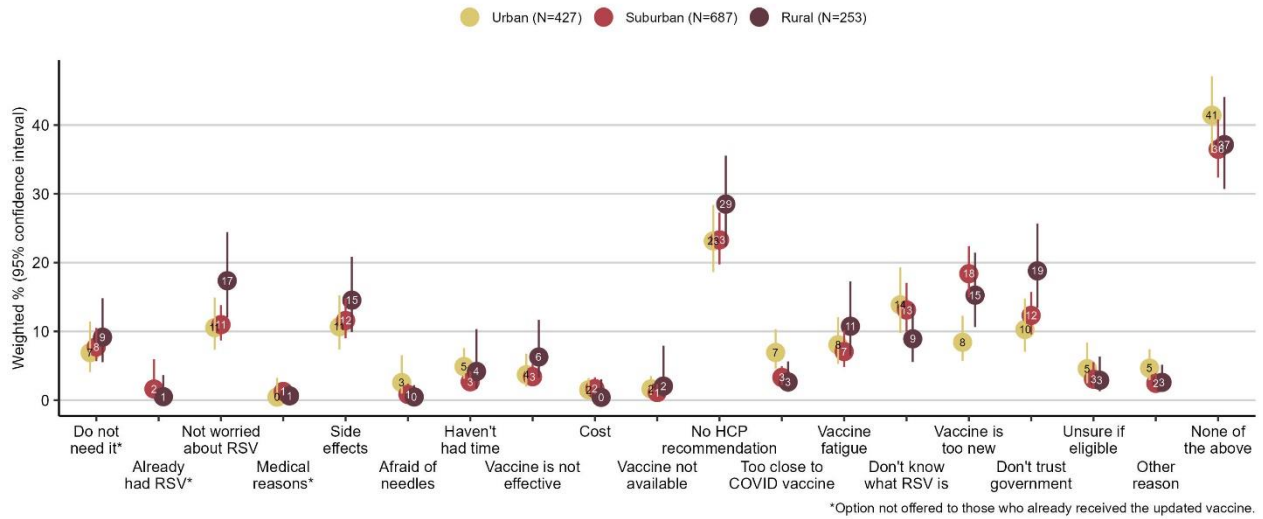
Concerns and issues about the flu vaccine among adults 18 years and older, by urbanicity, October 2023



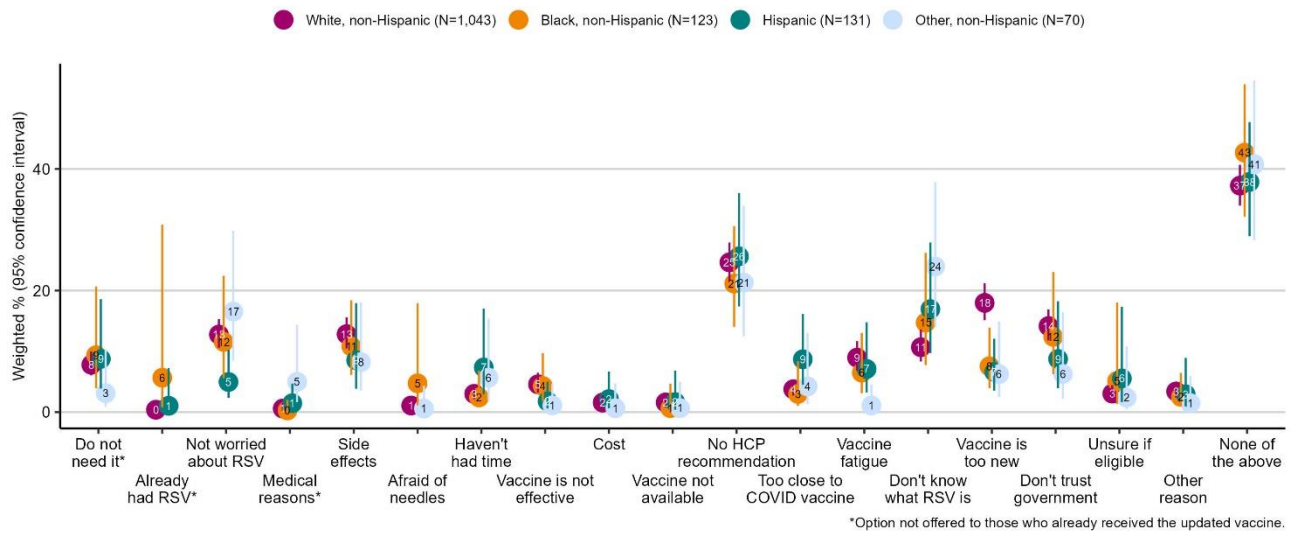
Concerns and issues about the flu vaccine among adults 18 years and older, by race and ethnicity, October 2023



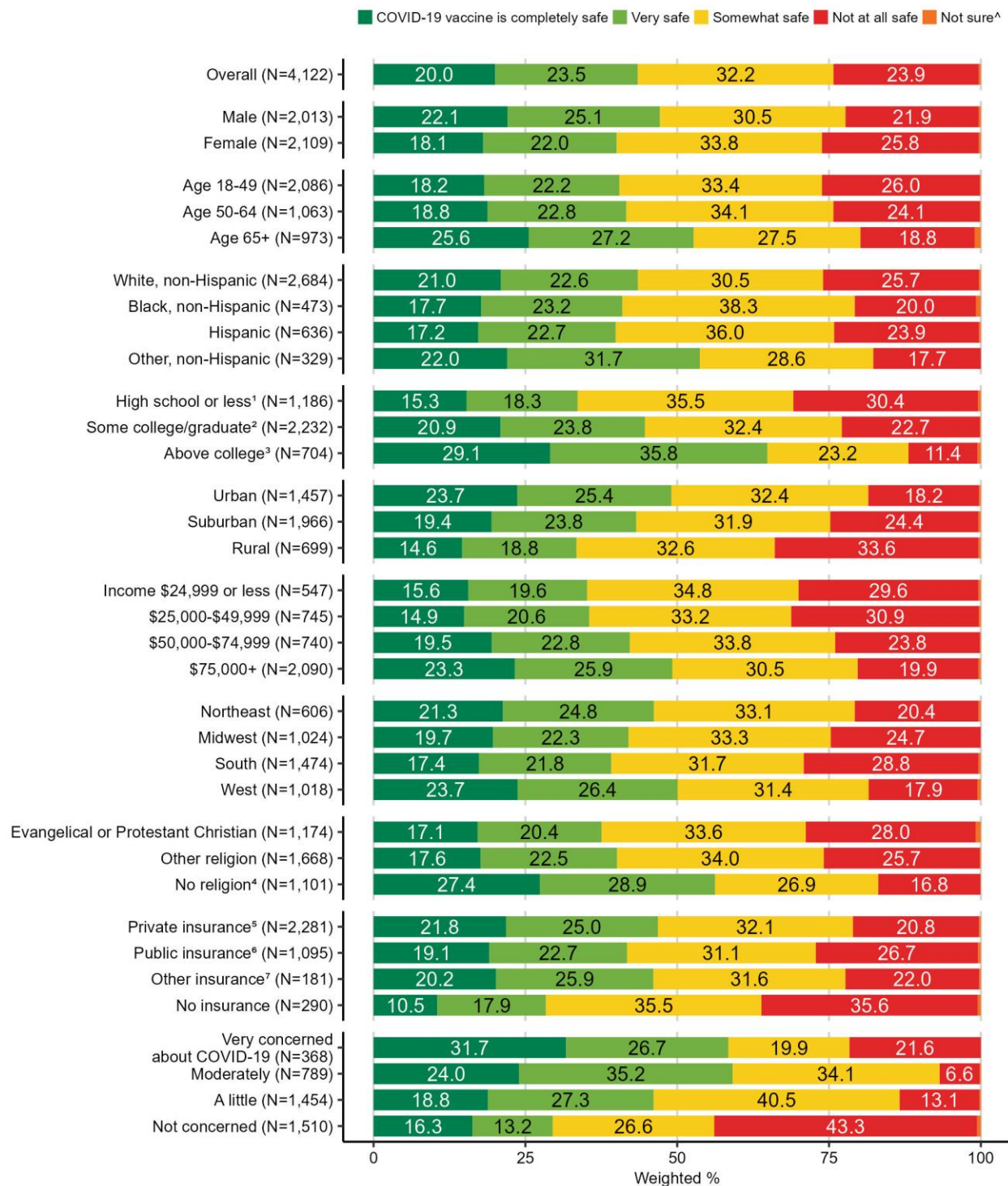
Concerns and issues about the RSV vaccine among adults 60 years and older, by urbanicity, October 2023



Concerns and issues about the RSV vaccine among adults 60 years and older, by race and ethnicity, October 2023

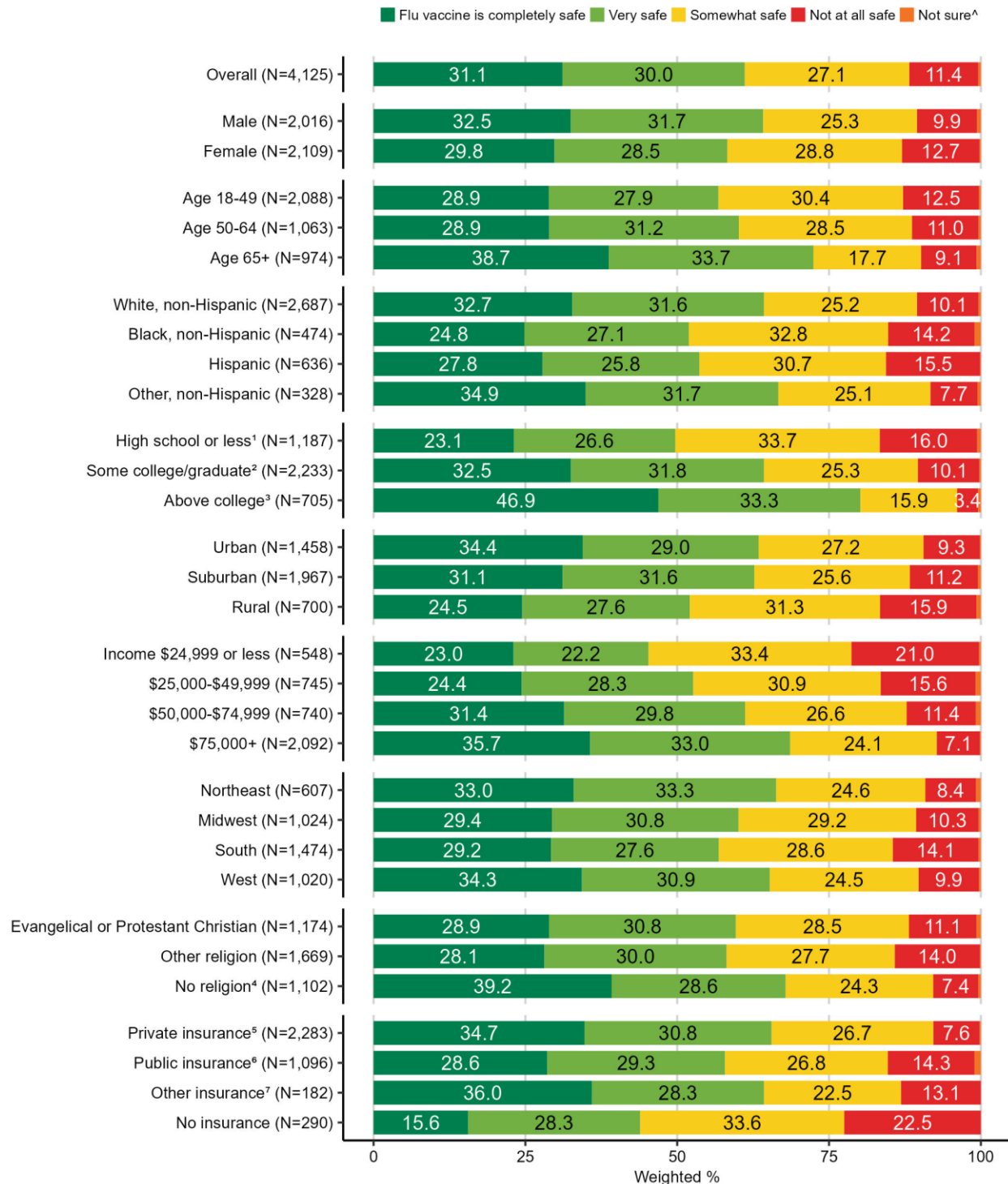


How safe do you think a COVID-19 vaccine is for you? October 2023 results among adults 18 years and older, by demographics



¹High school graduate or less, ²Some college, associate's degree, or bachelor's degree, ³Post graduate study or professional degree. ⁴Includes respondents who answered they believed in nothing in particular. ⁵Includes plans purchased through employer, insurance companies, marketplaces, and military insurance. ⁶Includes Medicare and Medicaid. ⁷Includes VA, IHS, and "other." NORC and Ipsos base urbanicity on different, but comparable measures. NORC uses Census tract-based RUCA (Rural-Urban-Commuting Area) codes, whereas Ipsos uses Office of Management and Budget's CBSA (Core Based Statistical Area) classification.

How safe do you think a flu vaccine is for you? October 2023 results among adults 18 years and older, by demographics



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