COVID-19

US Vaccine Sentiment Snapshot #2: The Hurdles Ahead

March 12, 2021
Our previous vaccine sentiment snapshot explored the levels of vaccine hesitancy across US population segments. We are now three months into COVID-19 vaccine distribution — and while many hurdles still lie ahead, we are beginning to look forward to a time when supply will not be the primary constraint limiting vaccination of the US population.

In response, from February 17 to February 22, BCG conducted a second US COVID-19 Vaccine Sentiment Survey to explore the factors preventing or discouraging individuals who are currently eligible and want to get vaccinated from doing so. The results offer some insights into the next steps of the journey to getting a vaccine.

Please follow BCG’s COVID-19 US Vaccine Sentiment Series on BCG.com.
ELIGIBILITY AWARENESS AND APPOINTMENT AVAILABILITY REMAIN THE BIGGEST HURDLES

Although patients may face some of the hurdles to vaccination simultaneously, we wanted to understand the most significant roadblocks along the way to obtaining a COVID-19 vaccination appointment. So we asked respondents about the vaccination process from end to end, starting with wanting to get the vaccine, continuing through correctly determining eligibility for it, and ending with finding and successfully scheduling a workable appointment.

Understanding eligibility and finding available and usable appointments were the two most significant hurdles that survey respondents identified. Levels of vaccine hesitancy have changed little since our first survey: the slight uptick in hesitancy percentage (from approximately 40% to approximately 45%) mainly reflects the fact that as more adults receive vaccinations, the size of the hesitant population increases as a proportion of the remaining pool. Nevertheless, about 50% of individuals in our survey who said that they want the vaccine were either unsure or misinformed about their current eligibility. (See Exhibit 1.)
Exhibit 1 | Limited Eligibility Awareness and Restricted Supply Availability Are Key Obstacles to Making an Appointment

<table>
<thead>
<tr>
<th>HESITANCY</th>
<th>ELIGIBILITY</th>
<th>URGENCY</th>
<th>AVAILABILITY</th>
<th>ACCESSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are they willing to get vaccinated?</td>
<td>Do they know that they are eligible?</td>
<td>Did they try to make an appointment?</td>
<td>Were they able to find/register for appointments?</td>
<td>Are appointments available at times and places that work?</td>
</tr>
<tr>
<td>100% Are eligible but not yet vaccinated</td>
<td>50% Want the vaccine¹</td>
<td>50% Know they are eligible²</td>
<td>90% Tried to make an appointment</td>
<td>25% Found appointments</td>
</tr>
<tr>
<td>50% Of those eligible and not vaccinated are hesitant to get the vaccine¹</td>
<td>50% Of those who want the vaccine do not know they are eligible²</td>
<td>10% Of those who know they are eligible have not tried to make an appointment</td>
<td>0% Made an appointment</td>
<td></td>
</tr>
<tr>
<td>50%</td>
<td>25%</td>
<td>75%</td>
<td>45%</td>
<td>55%</td>
</tr>
</tbody>
</table>

Percentage of the total from the previous step in the funnel

<table>
<thead>
<tr>
<th>Percentage of those stalled from the previous step in the funnel</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% Are eligible but not yet vaccinated</td>
</tr>
<tr>
<td>50% Of those eligible and not vaccinated are hesitant to get the vaccine¹</td>
</tr>
<tr>
<td>50%</td>
</tr>
</tbody>
</table>


¹Respondents classified as hesitant to get the vaccine are those who answered “maybe,” “unlikely,” or “definitely not” when asked whether they were going to get the vaccine.

²Respondents who qualified as “Know they are eligible” both self-reported as eligible and fit the criteria for eligibility within their state at the time of the survey.
CONFUSION ABOUT ELIGIBILITY IS HAMPERING THE VACCINATION PROCESS

Over the coming weeks and months, improving public messaging and clarifying eligibility criteria will be increasingly important to achieving a more robust and successful vaccination campaign.

Our survey results indicate that roughly half of the US’s adult population currently misunderstand their individual eligibility status for the COVID-19 vaccine—either expressing uncertainty about their status (33% of unvaccinated respondents) or wrongly self-identifying as eligible (7%) or ineligible (13), as determined on the basis of their demographic data matched against published state eligibility criteria. (See Exhibit 2.)

Although eligibility was the step at which the largest absolute number of people dropped out of the vaccination process, ability to get an appointment was the most limiting step on a percentage basis: 75% of eligible people who tried to make an appointment could not find one.
Exhibit 2 | Nearly 50% of Respondents Were Unsure or Incorrect About Their Eligibility

~50% of respondents were either unsure or mistaken about their local eligibility status…

<table>
<thead>
<tr>
<th>Eligibility Status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible and aware</td>
<td>13</td>
</tr>
<tr>
<td>Eligible but mistaken</td>
<td>7</td>
</tr>
<tr>
<td>Eligible but unsure</td>
<td>7</td>
</tr>
<tr>
<td>Not eligible but unsure</td>
<td>26</td>
</tr>
<tr>
<td>Not eligible but mistaken</td>
<td>13</td>
</tr>
<tr>
<td>Not eligible and aware</td>
<td>34</td>
</tr>
</tbody>
</table>

…and such respondents were twice as likely to be unemployed or a homemaker and/or to have at most a high school education.

<table>
<thead>
<tr>
<th>Status</th>
<th>Multiplication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unemployed or a homemaker</td>
<td>2x</td>
</tr>
<tr>
<td>High school education</td>
<td>2x</td>
</tr>
</tbody>
</table>

In comparison to the broader populace, members of the unsure and mistaken population tend to be twice as likely to be unemployed or to identify as a homemaker and twice as likely to have at most a high school education.

The concentration of poorly informed individuals in these discrete categories poses a major hurdle that local and state governments must clear if they are to maximize the vaccination rates of priority groups (such as the sick or elderly) before opening appointments to the rest of the public. Clear, frequent, and carefully targeted communication will be critical until plenty of vaccine is available on demand to anyone who wants it.
SUPPLY CHALLENGES TO BE RESOLVED SHORTLY
Despite the current bottleneck in vaccine appointment scheduling, we are nearing a point when supply will exceed demand. In the intervening weeks and months, public health organizations and governments must continue matching the currently limited supply to those who have the greatest need for immunization, while at the same time making access to the vaccine simpler as the supply increases.

The FDA’s recent Emergency Use Authorization of the single-shot Johnson & Johnson vaccine adds yet another tool to the nation’s arsenal for combating COVID-19 hospitalizations and deaths. Equally important, both Pfizer and Moderna have promised to dramatically increase supplies of their two-shot vaccines to the US over the next few months, committing to provide a total of 220 million doses by the end of March and 600 million doses by July. (See Exhibit 3.)
Exhibit 3 | The US Has Purchased Enough Doses to Vaccinate All Adults by June 1

Based on current manufacturer commitments, the US will have enough vaccines available for:

- 200 million people in the CDC’s prioritized groups by early May¹
- All 250 million US adults by end of May²

Sources: CDC COVID Data Tracker; New York Times; Bloomberg; NPR; Pfizer, Moderna, and Johnson & Johnson press releases.

¹Approximately 200 million in prioritized groups, including health-care workers, people over age 65, health-vulnerable people, and essential workers, based on CDC ACIP guidelines published on December 20, 2020.
²Approximately 250 million over age 18 in the US.
Assuming that this trio of companies can deliver a steady supply of their novel vaccines, we expect that enough doses will be available by the end of May to vaccinate all US adults.

If the current array of hospital/provider systems, mass vaccination sites, and retail pharmacies can continue to deliver vaccines into people’s arms at a rate similar to the one they are managing now, appointment availability issues should soon cease to be a limiting factor in people’s efforts to get vaccinated in the US.
WHAT’S NEXT FOR THE US VACCINATION CAMPAIGN?
As the US quickly ramps up its vaccine supply in the coming months, we expect appointment availability to increase and confusion on eligibility to decrease. As a result, one of the next big challenges will be to ensure that demand keeps pace with the growing supply.

First, we must continue to improve the registration and scheduling infrastructure across the country. States have begun consolidating their registration portals and leveraging the CDC’s new VaccineFinder website, a concerted effort to reduce the time and effort required to get a shot will be essential to avoid frustration among prospective recipients of the vaccine. As the vaccination program shifts toward individuals who are at lower health risk from COVID-19 and have less motivation to seek immunization, maximizing the nation’s vaccination rates will depend on reducing barriers to inoculation.
The US will have enough supply to vaccinate all adults in the population by the end of May.

But vaccination rates across the nation will slow down long before that if the government does not address the remaining 45% of hesitant individuals. Converting this hesitant population to a positive sentiment toward COVID-19 vaccination will be the next major hurdle for US communities and leadership.
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BCG’s COVID-19 Vaccine Sentiment series is based on data drawn from an online survey of consumers that is conducted every few weeks across a representative sample of the United States. The survey is produced by the authors in partnership with coding and sampling provider Dynata, the world’s largest first-party data and insights platform. The goal of the research is to provide our clients and businesses around the world with periodic barometer readings of COVID-19-related vaccine sentiment to inform rebound planning, vaccine rollout operations, and decision making. A team composed of BCG consultants and experts from BCG’s Center for Customer Insight completes the survey analytics.
We would like to thank key contributors to this article:

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**BCG Center for Customer Insight:**
Greg McRoskey and the rest of the global team
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