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**HOW THE MALAYSIAN
GOVERNMENT CAN
ADDRESS VACCINE
HESITANCY**

CURRENT STATISTICS

As of 6th September 2021, **8.7%*** of the eligible population has not registered to be vaccinated. On top of this, **52,771 people** reportedly **missed their vaccination appointment.****

While the reasons are multi-faceted, let's start with exploring the challenges of vaccine hesitancy:

Here's a quick snapshot in Malaysia:

- 40% low income families unwilling to be vaccinated
- 37% over 60 years of age
- Those with health complications such as diabetes and heart problems also show reluctance

* % may be an underestimation as official population figures are outdated (a full census was not conducted in 2020)

** Note that this is not necessarily indicative of vaccine hesitancy

CHALLENGES



According to WHO, there are 3Cs which contribute to vaccine hesitancy:

1. Complacency

Perceived risks of vaccine-preventable diseases are low; vaccination is not deemed a necessary preventative action. Other life/health responsibilities seen as more important at that point in time.

2. Convenience

The extent to which physical availability, affordability, willingness-to-pay, geographical accessibility, ability to understand (language and health literacy) and appeal of immunisation services affects uptake.

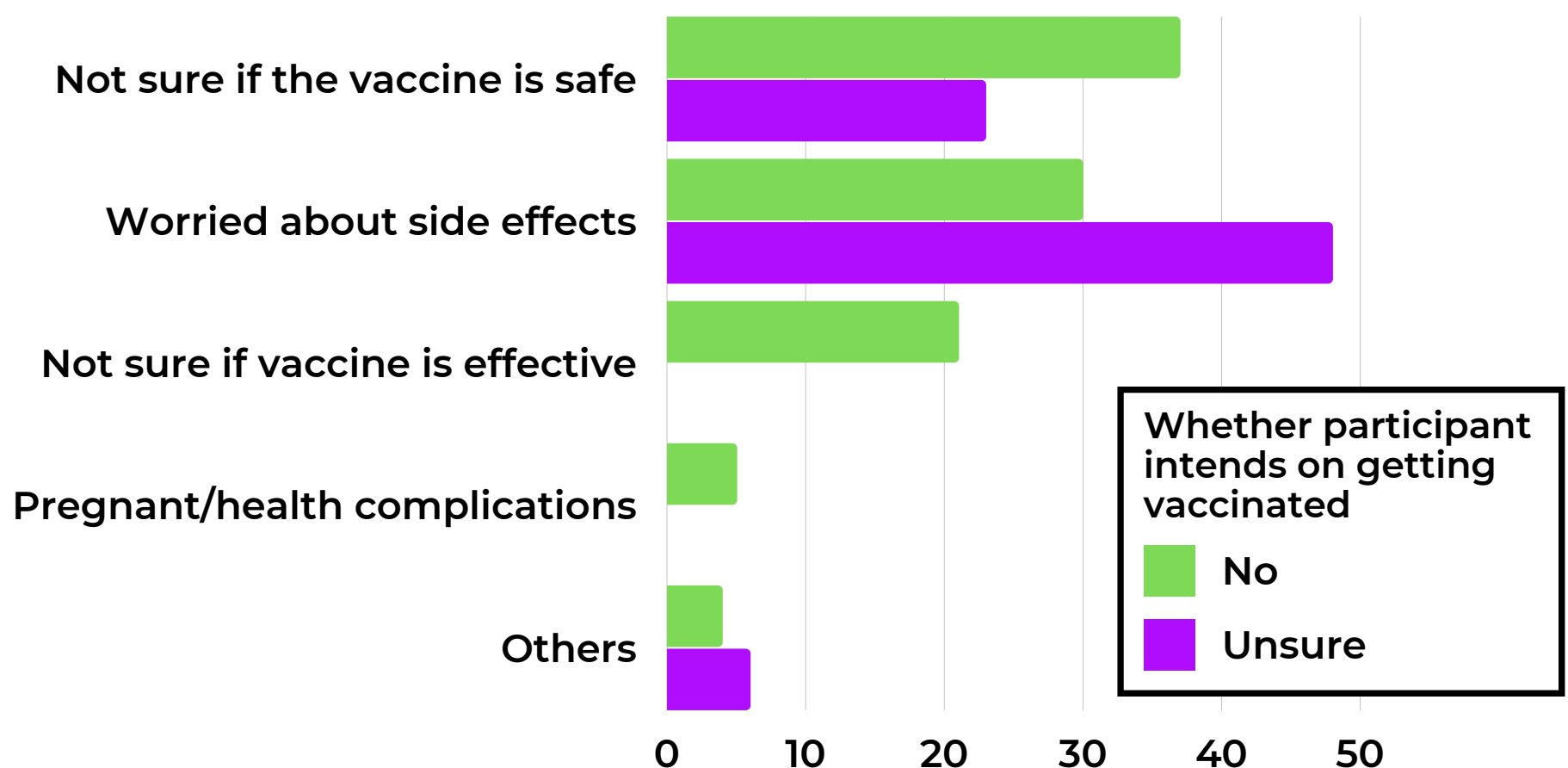
3. Confidence

Trust in vaccine, in the system that delivers them, and in the policy makers who decide which vaccines are needed and when.

MAIN CONCERNS

- **Lack of information**

- Graph by UNICEF showcases concerns from low income families



- **Lack of trust in government**

- A perceived sense of poor coordination of the vaccine rollout, causing a lack of faith in the government
- Lack of faith is exacerbated by the crackdown of undocumented foreign workers during lockdown

HOW CAN THE GOVERNMENT ADDRESS VACCINE HESITANCY?

Here's a checklist:

- Tackle misinformation and disinformation head on!**
 - Provide transparent science and data-based information on official websites and platforms such as vaksin covid.gov.my, sebenarnya.my and WHO
- Instil public confidence through data transparency**
 - Regularly update and announce vaccine efficacy rates and side effects to the public, as recommended by IMF and WHO
- Target public health messaging to demographic-specific concerns**
 - Address low income families' concerns (see previous slide) as recommended by UNICEF
 - Address health concerns raised by those with specific illnesses, such as diabetes and heart problems

REFERENCES



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