

# COVID LGBTQ+ Survey Results

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The following survey was designed to support BCPH, CDPHE and Out Boulder County (OBC) efforts to better understand the perspectives and needs of the LGBTQ+ community with respect to the COVID vaccine. The survey was written in both English and Spanish and consisted of the following questions:

## Demographic Questions & Response options:

- 1. Do you identify as LGBTQ?**
  - Yes
  - No
  - Prefer not to answer
- 2. What SEX were you assigned at birth?**
  - Female
  - Male
  - Intersex
  - Prefer not to answer
- 3. What is your GENDER?**
  - Cisgender
  - Transgender
  - Prefer not to answer
- 4. What is your RACE/ETHNICITY?**
  - Black/African American
  - Asian/Pacific Islander
  - White/Caucasian
  - Hispanic/Latino/a/x
  - Native American/Alaska Native
  - Multiracial
  - Unknown
  - Prefer not to answer
- 5. What is your AGE range?**
  - Age 65 or older
  - 55-64 years
  - 45-54 years
  - 35-44 years
  - 25-34 years
  - 18-24 years
  - Under 18 years
  - Prefer not to answer

## Vaccine-related Questions & Response options:

- 1. If the COVID vaccine were available for you to receive today, would you get it?**
  - Yes
  - No
  - Unsure
- 2. If you answered "No" or "Unsure" to #1, what might keep you from getting the vaccine?**
  - Concerns about safety
  - Concerns about effectiveness
  - Cost
  - Need more information first
  - I had a confirmed/probable case of COVID already
  - I don't trust the government
  - Other
- 3. What more would you like to know about the COVID vaccine?**
  - When will it be my turn & how will I be notified?
  - Where will I go to get the vaccine doses?
  - What if I don't get the 2<sup>nd</sup> dose or get it late?
  - What will be the cost with or without health insurance?
  - Will there be low or no cost vaccines available?
  - I would like more information on safety
  - I would like more information on side effects
  - Other
- 4. What can county and state public health do to support people, particularly the most vulnerable, getting the COVID vaccine once it becomes available? (short answer)**
- 5. Do you get an annual flu vaccine?**
  - Yes, every year
  - Yes, most years
  - Some years but not every year
  - No, never
- 6. If you answered "No" or "Some years" to #4, why don't you get the flu vaccine annually?**
  - Concerns about effectiveness
  - Concerns about effectiveness
  - Cost
  - I'm healthy & don't worry about getting the flu
  - It's not a priority for me
  - Other

## Survey Dissemination

The survey was advertised in OBC's e-newsletter and social media from December 17<sup>th</sup> through January 7<sup>th</sup> when the survey response window closed. The survey also was highlighted in articles published on the front page in Boulder and Longmont newspapers on December 31, 2020 about the importance of including sexual orientation and gender identity questions in public health data collection. Several additional nonprofit organizations then included the survey link in their communications.

## Survey Respondents

The total number of respondents who completed all or some of the survey questions was 272. Although the survey was targeted to the LGBTQ+ population in Boulder County, 21% of respondents who answered the LGBTQ+ question indicated non-LGBTQ+ identity, which allowed for LGBTQ+ and non-LGBTQ+ comparisons in the analyses. With respect to sex assigned at birth, the response sample breakdown was 68% assigned female, 32% assigned male and 0% Intersex. Transgender individuals (those who identify with a gender other than that which they were assigned at birth) comprised 24% of the sample and Cisgender (those who identify with the gender they were assigned at birth) the remaining 76% of those who answered the question. (Of the 61 individuals who identified as Transgender in the sample, 14 (23%) did not answer the question asking the sex they were assigned at birth.) In terms of Race/Ethnicity, the sample was 89% White/Caucasian, 6% Hispanic/Latinx, 3% Multiracial, 1% Asian and .5% African American. For analyses, comparisons were made between total People of Color (POC) (11%) and White/Caucasian (89%). Finally, the Age Range of respondents spanned under 18 years to 65 or older. The most represented age range was 35-44 years (24%) with lowest representation in 18-24 (5%) and under 18 (1%) age ranges.

See Table 1 for complete data for all demographic questions and also for LGBTQ+, Non-LGBTQ+, Transgender and POC subsamples.

## Data Analyses

Categorical survey data were analyzed for the entire sample and subgroups where numbers of respondents in comparison groups were sufficient. Key findings have been reported when there was a percentage difference greater than 8% for a given comparison. Responses to the short answer question and to "Other" options in questions have been content coded and presented as written. These comments have been organized by content theme and then stratified by COVID vaccine perceptions or flu shot behavior depending on the question.

**Table 1. Demographic Information**

		ALL (N=272)		LGBTQ (n=210)		Non-LGBTQ (n=56)		TRANS (n=61)		POC (n=29)	
		#	%	#	%	#	%	#	%	#	%
<b>LGBTQ</b>											
Yes	210	78.9%								22	78.6%
No	56	21.1%								6	21.4%
Prefer Not to Answer*	6	2.2%									
<b>SEX assigned at birth</b>											
Female	171	68.4%	121	62.4%	49	89.1%	35	57.4%	14	51.9%	
Male	79	31.6%	73	37.6%	6	10.9%	26	42.6%	13	48.1%	
Intersex	0	0%									
Prefer Not to Answer*	22	8.1%	16	7.6%	1	1.8%			2	6.9%	
<b>GENDER</b>											
Cisgender	197	76.4%	143	70.1%	52	100%			22	84.6%	
Transgender	61	23.6%	61	29.9%					4	15.4%	
Prefer Not to Answer*	14	5.1%	6	2.9%	4	7.1%			3	10.3%	
<b>RACE/ETHNICITY</b>											
Black/African American	1	0.4%									
Asian/Pacific Islander	2	0.8%	1	0.5%	1	1.8%					
White/Caucasian	237	89.1%	186	89.4%	50	89.3%	57	93.4%			
Hispanic/Latino/a/x	17	6.4%	13	6.3%	4	7.1%	2	3.3%			
Native Am/Alaska Native	0	0.0%									
Multiracial	9	3.4%	8	3.8%	1	1.8%	2	3.3%			
Unknown	0	0.0%									
Prefer Not to Answer*	6	2.2%	2	1.0%							
<b>People of Color (POC)</b>											
Hispanic/Latino/a/x	17	58.6%	13	59.1%							
Multiracial	9	31.0%	8	36.4%							
Asian or African American	3	10.3%	1	4.5%							
<b>POC Total</b>	29	10.9%	22	10.6%	6	10.7%	4	6.6%			
White/Caucasian	237	89.1%	186	89.4%	50	89.3%	57	93.4%			
<b>AGE RANGE</b>											
65 or older	41	15.2%	27	12.9%	14	25.0%	2	3.3%	2	6.9%	
55-64	44	16.4%	30	14.4%	13	23.2%	5	8.2%	2	6.9%	
45-54	50	18.6%	40	19.1%	8	14.3%	10	16.4%	4	13.8%	
35-44	65	24.2%	53	25.4%	12	21.4%	13	21.3%	9	31.0%	
25-34	53	19.7%	43	20.6%	9	16.1%	20	32.8%	10	34.5%	
18-24	14	5.2%	14	6.7%	0	0%	10	16.4%	1	3.4%	
Under 18	2	0.7%	2	1.0%	0	0%	1	1.6%	1	3.4%	
Prefer Not to Answer*	3	1.1%	1	0.5%							

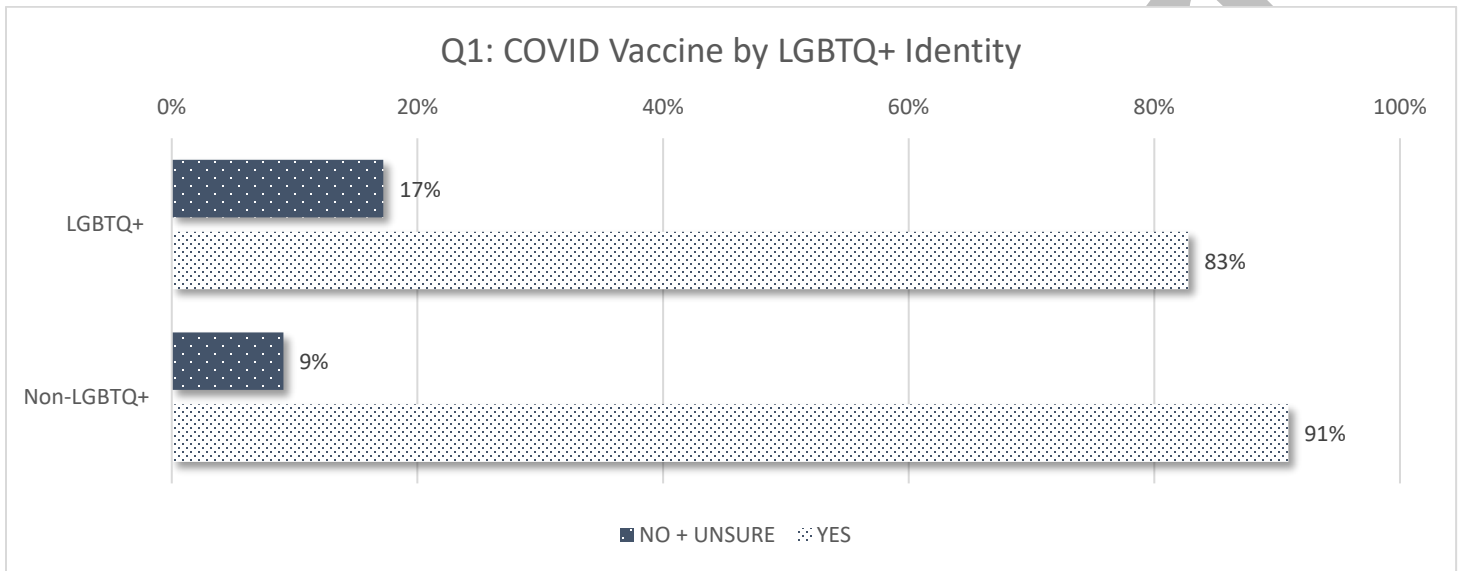
\* Prefer Not to Answer % is of entire sample or subgroup total. Answered % is of answered total in each category.

**Q1: If the COVID vaccine were available for you to receive today, would you get it?**

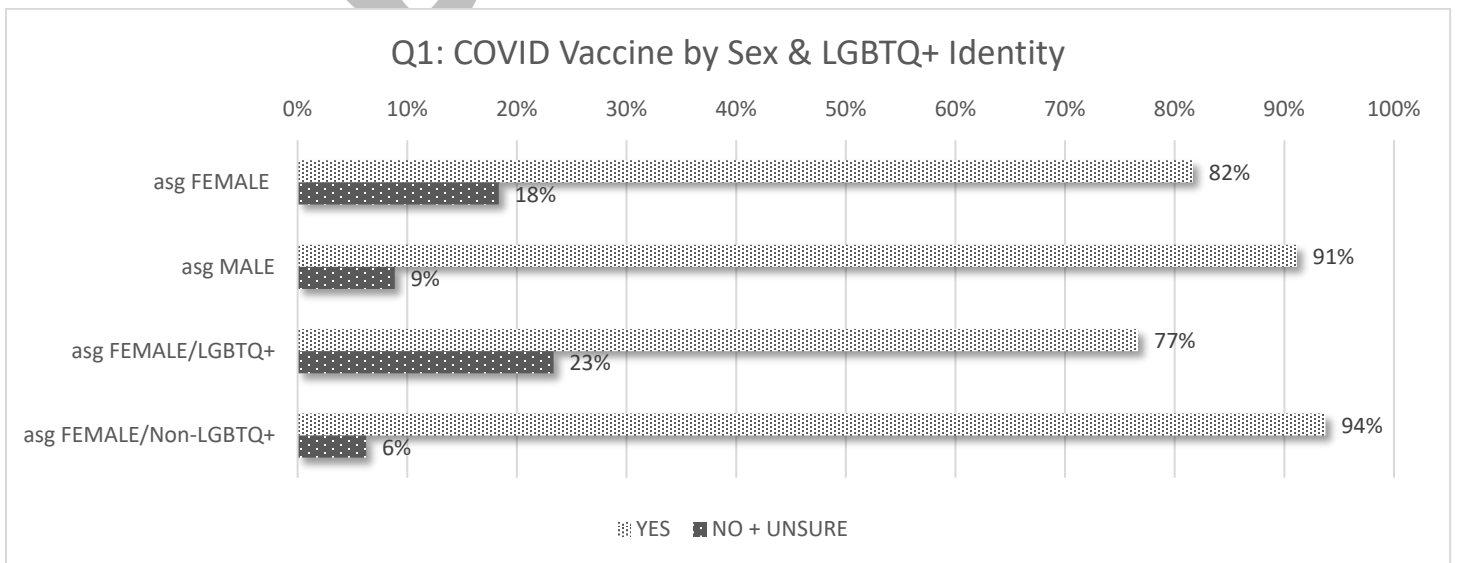
A total of 84% of survey respondents answered Yes to receiving the COVID vaccine if it were available today. Respondents who answered No comprised 9% of the sample and those answering Unsure comprised 7%. For ongoing analyses, the No and Unsure responses were combined for a total of 16% of the sample. See Table 2 for the complete results for Q1.

**Key Findings**

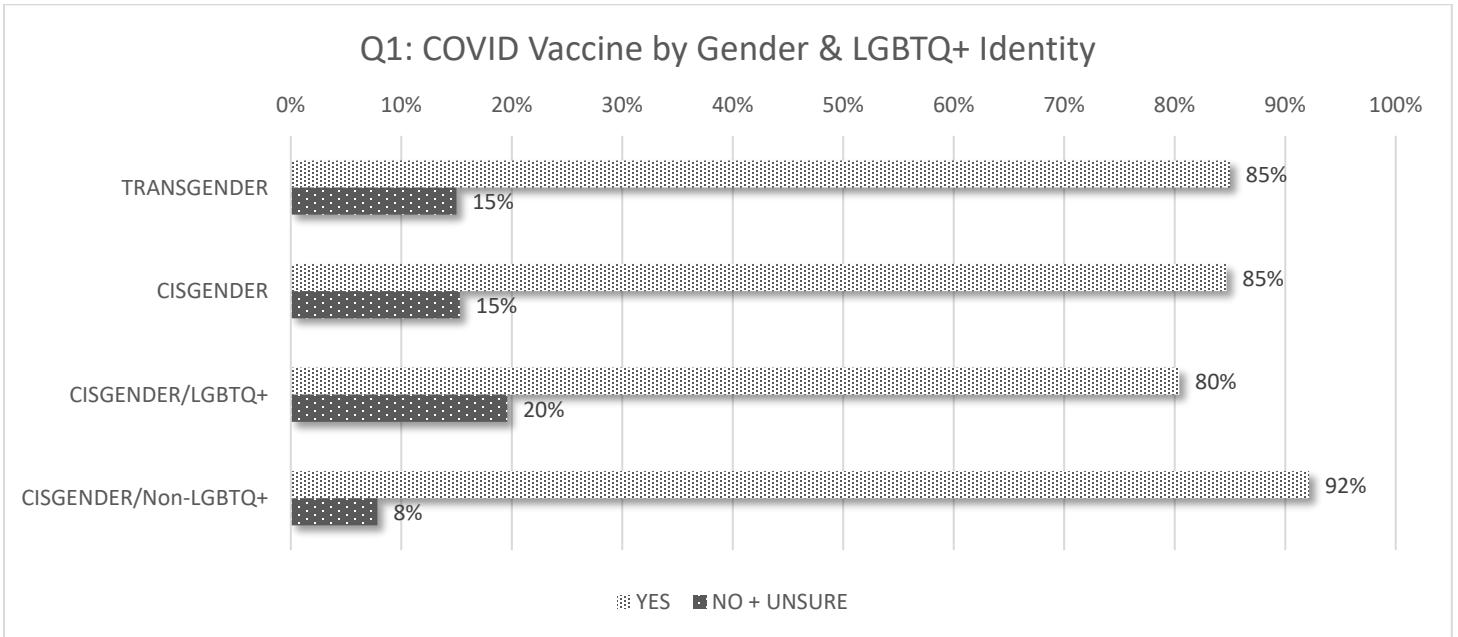
1. LGBTQ+ respondents were more likely to respond No or Unsure to COVID vaccine than Non-LGBTQ+ respondents (17% vs 9%).



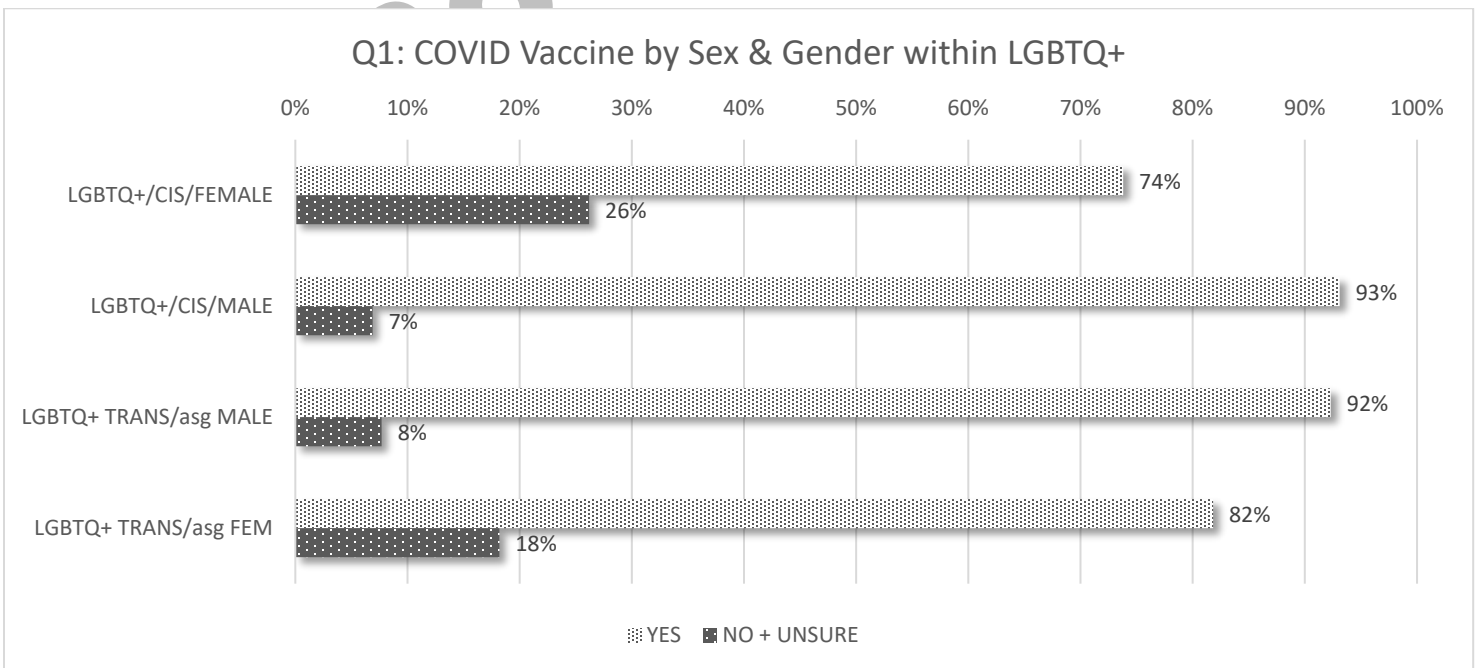
2. Comparing Sex assigned at birth, the assigned Female group overall answered No or Unsure to the COVID vaccine to a higher degree than the assigned Male group (18% vs. 9%). Within the assigned Female subgroups, it was the LGBTQ+ assigned Female group that had the highest degree of No or Unsure responses compared to the assigned Female Non-LGBTQ+ group (23% vs. 6%).



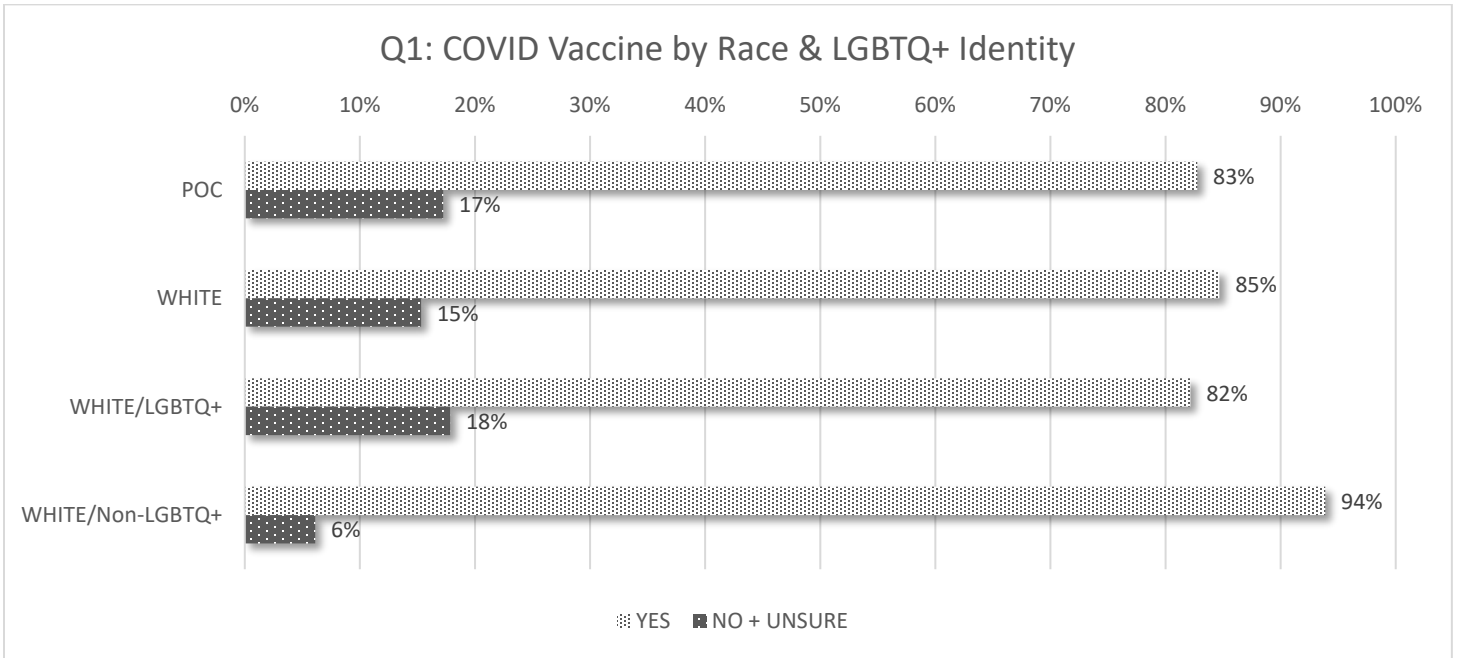
3. With respect to Gender, there was no difference between Transgender and Cisgender groups; however, when Cisgender responses were broken into LGBTQ+ and Non-LGBTQ+ groups, Cisgender LGBTQ+ respondents answered No or Unsure to the COVID vaccine to a higher degree than Non-LGBTQ+ respondents (20% vs. 8%).



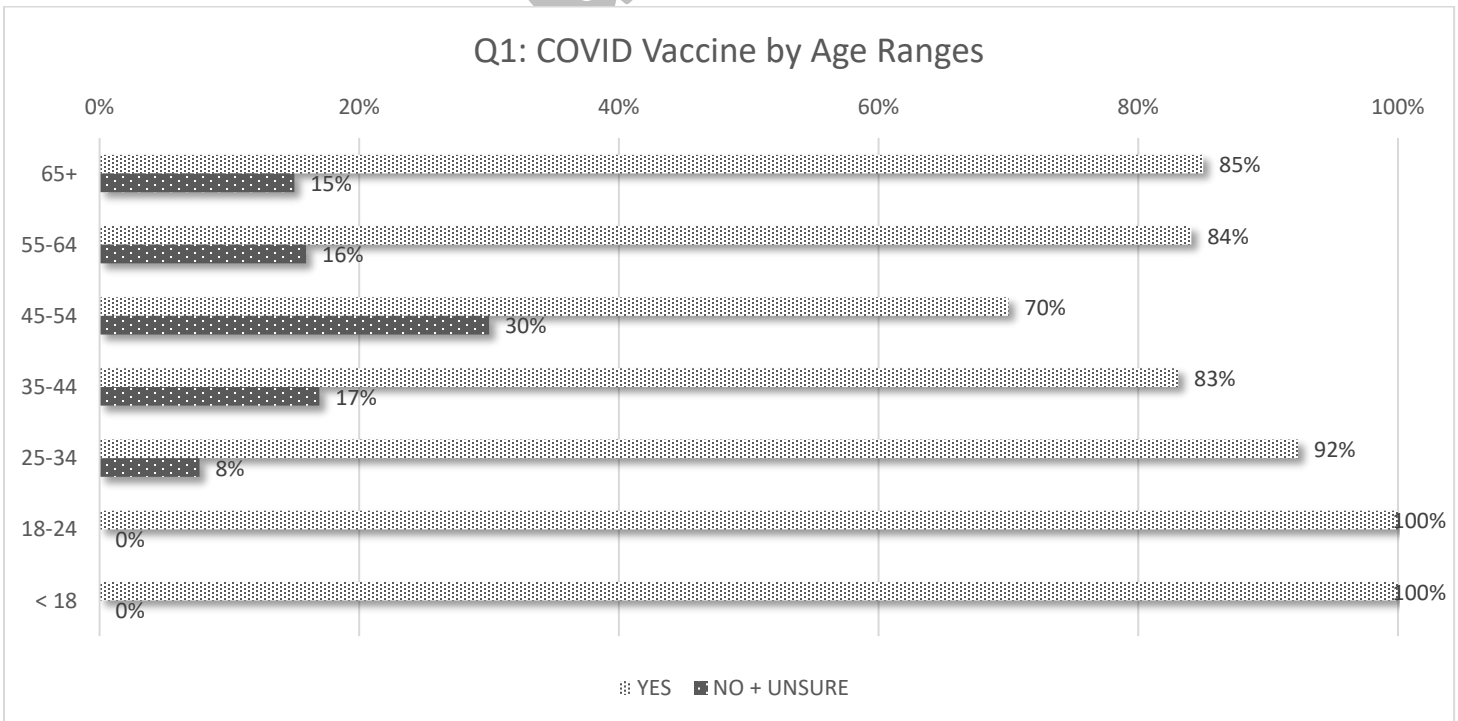
4. Because differences were found in both sex at birth and gender based on LGBTQ+ identity, comparisons were made within sex at birth and gender subgroups. The transgender subgroup of a given sex at birth would be comprised of individuals who currently identify for the most part as either the opposite sex assigned at birth or as nonbinary. Results showed that the highest percentage of those who answered No or Unsure to the COVID vaccine were LGBTQ+ Cisgender Females (26%) followed by the Transgender assigned Female at birth group (18%) as compared to their Transgender assigned Male at birth (8%) and LGBTQ+ Cisgender Male (7%) counterparts.



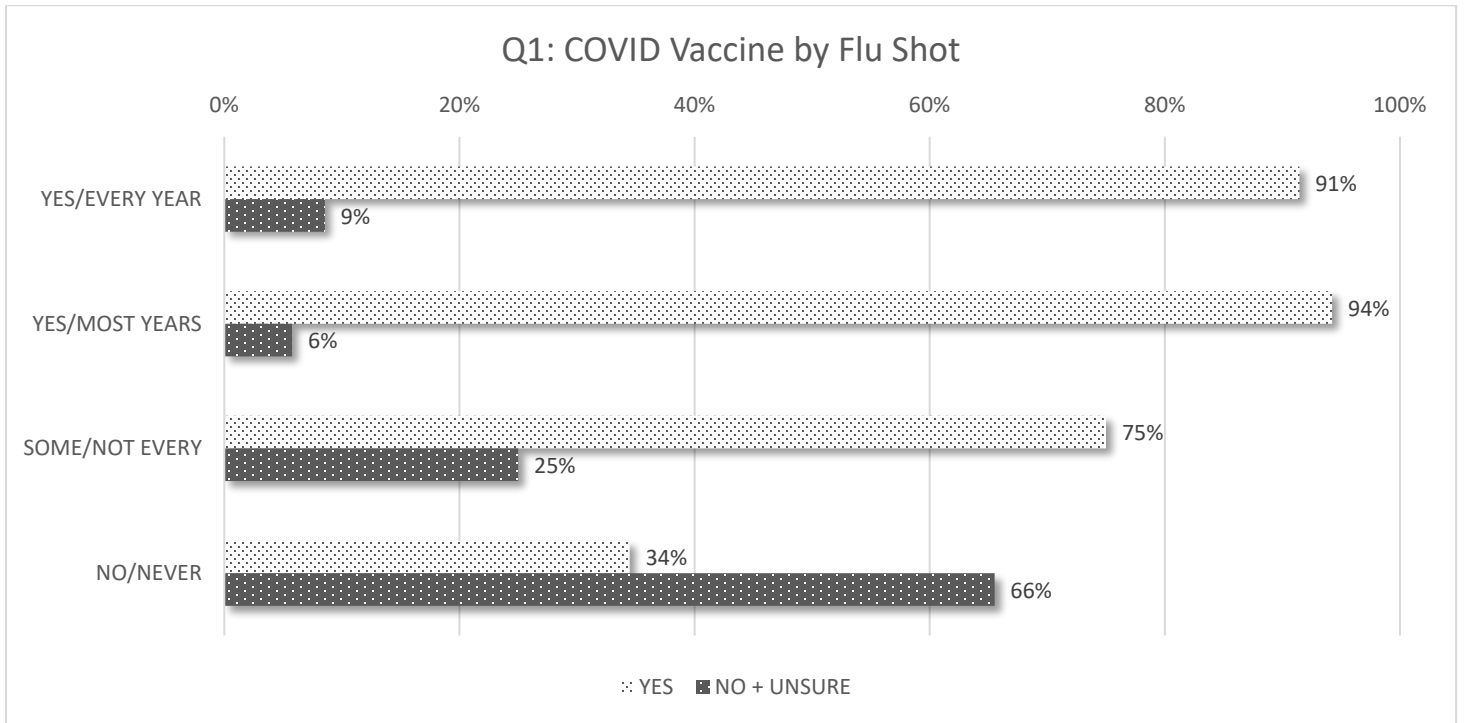
- 5. Comparing COVID vaccine answers by Race/Ethnicity, there were no significant differences between POC and White respondents overall; however, results indicated that White Non-LGBTQ+ respondents were the least likely to answer No or Unsure to the vaccine compared to White LGBTQ+ and POC groups (6% vs. 18% & 17%).



- 6. Age range comparison results showed that the 45-54 age group had the highest percentage of No or Unsure COVID vaccine answers (30%) while lowest percentages were found within the 25-34 age range (8%) and 18-24 and Under 18 (0%) age ranges. [Note small sample sizes for Under 18 (n=2) and 18-24 (n=14) age ranges.]



7. Examining the relationship between COVID vaccine perceptions and flu shot behavior, results showed that 66% of respondents who never have gotten a flu shot answered No or Unsure to the COVID vaccine compared to only 9% of those who get a flu shot every year.



Out Boulder

**Table 2. Q1 COVID Vaccine Results**

	<b>ALL (N=272)</b>		<b>LGBTQ</b>		<b>Non-LGBTQ</b>							
<b>COVID Vaccine?</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>						
<b>YES</b>	226	83.7%	173	82.8%	50	90.9%						
<b>NO + UNSURE</b>	44	16.3%	36	17.2%	5	9.1%						
<i>Total Answered</i>	270		209		55							

	<b>FEM</b>		<b>MALE</b>		<b>FEM/LGBTQ</b>		<b>FEM/Non-LGBTQ</b>		<b>MALE/LGBTQ</b>		<b>MALE/Non-LGBTQ</b>	
<b>COVID Vaccine?</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
<b>YES</b>	138	81.7%	72	91.1%	92	76.7%	45	93.8%	72	98.6%	0	0%
<b>NO + UNSURE</b>	31	18.3%	7	8.9%	28	23.3%	3	6.3%	1	1.4%	6	100%
<i>Total Answered</i>	169		79		120		48	1	73		6	

	<b>TRANS</b>		<b>CIS</b>		<b>CIS/LGBTQ</b>		<b>CIS/Non-LGBTQ</b>		<b>TRANS/POC</b>		<b>TRANS/WHITE</b>	
<b>COVID Vaccine?</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
<b>YES</b>	51	85.0%	166	84.7%	115	80.4%	47	92.2%	2	50.0%	48	85.7%
<b>NO + UNSURE</b>	9	15.0%	30	15.3%	28	19.6%	4	7.8%	2	50.0%	8	14.3%
<i>Total Answered</i>	60		196		143		51		4		56	

	<b>POC</b>		<b>WHITE</b>		<b>POC/LGBTQ</b>		<b>POC/Non-LGBTQ</b>		<b>WHITE/LGBTQ</b>		<b>WH/Non-LGBTQ</b>	
<b>COVID Vaccine?</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
<b>YES</b>	24	82.8%	199	84.7%	18	81.8%	6	85.7%	152	82.2%	46	93.9%
<b>NO + UNSURE</b>	5	17.2%	36	15.3%	4	18.2%	1	14.3%	33	17.8%	3	6.1%
<i>Total Answered</i>	29		235		22	1	7		185	1	49	

	<b>65+</b>		<b>55-64</b>		<b>45-54</b>		<b>35-44</b>		<b>25-34</b>		<b>18-24 + &lt; 18</b>	
<b>COVID Vaccine?</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
<b>YES</b>	34	85.0%	37	84.1%	35	70%	54	83.1%	48	92.3%	16	100%
<b>NO + UNSURE</b>	6	15.0%	7	15.9%	15	30%	11	16.9%	4	7.7%	0	0%
<i>Total Answered</i>	40		44		50		65		52		16	

	<b>YES/EVERY</b>		<b>YES/MOST</b>		<b>SOME/NOT EVERY</b>		<b>NO/NEVER</b>		<b>YES/EVERY + MOST</b>		<b>SOME + NEVER</b>	
<b>COVID Vaccine?</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
<b>YES</b>	139	91.4%	49	94.2%	27	75.0%	10	34.5%	188	92.2%	37	56.9%
<b>NO + UNSURE</b>	13	8.6%	3	5.8%	9	25.0%	19	65.5%	16	7.8%	28	43.1%
<i>Total Answered</i>	152		52		36		29		204		65	



**Q2: If you answered “No” or “Unsure” to #1, what might keep you from getting the vaccine?**

**Key Findings**

1. The top four barriers identified by the 24 respondents who answered No to the COVID vaccine were safety concerns (79%), needing more information first (50%), distrust of the government (37.5%) and concerns about effectiveness (29%).

**COVID VACCINE: NO**

Total respondents = 24

Q2 Barriers to Vaccine*	#	%
Concerns about SAFETY	19	79.2%
Need more INFO first	12	50.0%
Don't trust GOVT	9	37.5%
Concerns about EFFECTIVENESS	7	29.2%
OTHER	3	12.5%
Had COVID already	2	8.3%
COST	1	4.2%

\* Could choose more than 1 reason

2. The top four barriers identified by the 20 respondents who answered Unsure about the COVID vaccine differed slightly in ranking compared to the No vaccine group, although safety concerns were ranked first by both groups by far: Safety concerns (70%), effectiveness concerns (35%), additional information needed (25%) and distrust of government (20%).

**COVID VACCINE: UNSURE**

Total respondents = 20

Q2 Barriers to Vaccine*	#	%
Concerns about SAFETY	14	70.0%
Concerns about EFFECTIVENESS	7	35.0%
Need more INFO first	5	25.0%
Don't trust GOVT	4	20.0%
COST	3	15.0%
OTHER	3	15.0%
Had COVID already	0	0.0%

\* Could choose more than 1 reason

3. Analyzing single vs. multiple identified barriers, 50% of respondents selected one single barrier to explain answering No or Unsure to the COVID vaccine question. Concerns about safety was the most often cited single barrier (59%). The other 50% of the sample selected more than one barrier. Eight of the 9 respondents (89%) who indicated they do not trust the government selected between 1-4 additional barriers.

## 4. Q2 OTHER: Content coding of verbatim answers by COVID vaccine response

<b>VACCINE?</b>	<b><i>Safety related Concerns</i></b>
NO	past allergic reaction
NO	A lot of my friends died from the AZT not AIDS
NO	Unknown long-term effects

<b>VACCINE?</b>	<b><i>Wait for Turn</i></b>
UNSURE	There are plenty of people more vulnerable than I am. I want to be sure I'm not "cutting the line"
UNSURE	I'm lower priority than other recipients

<b>VACCINE?</b>	<b><i>Vaccine Manufacturer Preference</i></b>
UNSURE	I'd wait for Moderna vaccine

Out Boulder County

### Q3: What more would you like to know about the COVID vaccine?

#### Key Findings

- Results showed that 80% of respondents would like to know when their turn will be for the vaccine and how they will be notified. The second most frequent question cited was “Where will I go to get the vaccine?” (55%).

Rank	Q3 More Information*	#	%
1	When will it be my turn & how will I be notified?	208	80%
2	Where will I go to get the vaccine doses?	143	55%
3	More info on side effects	103	40%
4	What will be the cost with or without health insurance?	89	34%
5	More info on safety	79	30%
6	What if I don't get the second dose or get it late?	50	19%
7	With there be low or no cost vaccines available?	44	17%
8	OTHER	19	7%

\* Could choose more than 1 reason

- Q3 OTHER: Content coding of verbatim answers by COVID vaccine response

#### OTHER INFORMATION REQUESTED (15)

##### Q1 VACCINE: YES (8)

Will it prevent people from getting COVID or giving COVID?
Have heard that the Pfizer vaccine can hurt people with major food allergies but don't know how bad or which foods (some kind of protein or something?)
What forms of social interaction are safe for people who are vaccinated? With others who are vaccinated, and with those who are unvaccinated?
Will it be important for everyone to get or is it ok for low-risk, health folks not to get it bc of herd immunity?
When are elderly vaccinated first?
How long am I protected with the vaccine?
Will this be an annual shot like the flu shot? Will this protect me?
Will I be able to choose the manufacturer of the vaccine I receive?

##### Q1 VACCINE: NO (4)

More info on allergic reactions
Is it going to have long-term effects or even cause death?
Understanding of whether or not the vaccine actually works or just suppresses the symptoms
Ingredients in the vaccine

**Q1 VACCINE: UNSURE (3)**

I'd like to know how this vaccine may impact people with autoimmune disorders
True effectiveness understanding
Is it available for free to undocumented people? How will that be messaged if so?

**HAVE ENOUGH INFORMATION (2)**

**Q1 VACCINE: YES (2)**

I feel comfortable that I know these answers
CU Boulder has kept me well informed of these things.

**MISC (2)**

**Q1 VACCINE: YES (1)**

I would like to thank Trump for all he has done to get this vaccine out
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**Q1 VACCINE: UNSURE (1)**

I will continue to monitor side effects and if a low % then I will probably get it.
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Out Boulder County

**Q4: What can county and state public health do to support people, particularly the most vulnerable, getting the COVID vaccine once it becomes available?**

**Key Findings**

- The 160 short answer responses to this question were content coded into 6 categories. The top 3 suggestions to public health were outreach via communication, information & education (49%), making the COVID vaccine accessible, convenient & safe (33%) and making the vaccine free or low-cost (17%). If answers related to more than one content category, they were placed in all pertinent categories.

Rank	Q4 What can County & State Public Health do to support COVID Vaccine?	#	%
1	OUTREACH: COMMUNICATE/INFORM/EDUCATE	78	49%
2	ACCESSIBLE/CONVENIENT/SAFE	53	33%
3	FREE OR LOW-COST	27	17%
4	PRIORITIZE VULNERABLE/MARGINALIZED	14	9%
5	OUTREACH: PARTNER	6	4%
	MISC	11	7%

Total Respondents

160

Total Answers to Q4 (some answers coded into 2 or 3 categories)

189

- Q4 Public Health Support: Content coding of verbatim answers by COVID vaccine response

***OUTREACH: COMMUNICATE/INFORM/EDUCATE (N=78)***

**Q1 VACCINE: YES (63)**

Note\*

Provide factual non-partisan information that is clear and consistent about the vaccine.	
Lots of public information	
Let us know when and how to get it.	
Make sure they are notified about when and where they can get it.	
Give them more PPE and education on the vaccine and when and where they will get it.	
Let people know where the best information can be found. i.e., websites, news outlets.	
Public Information	
Make low-cost vaccines available and implement reminders for second doses.	1+
Education to the unhoused community about the safety. There is rampant misinformation going around that population.	1+
Make incredibly clear and strict guidelines about continuing social distancing when necessary, and also just being clear and concise in keeping the public updated on things.	
Vaccination campaigns and visiting door to door placing the vaccine and giving information	
easy to understand science explanations, show trusted community members getting it (sports teams, teachers, religious leaders)	
Make it free. Set up accessible drive or walk-up spots like the testing sites, ensure there are reminders for the second does if relevant and follow up.	1+
Bi-lingual Education is critical and it can't start soon enough.	1+
Clear communication, good planning, lead by example	

Provide clear facts	
Frequent and clear communication through a variety of media	
Information sharing. Especially about where and what to do based on your insurance or lack thereof	
Send or contact representatives to reach out to those groups specifically so they have the ability to ask questions from a single source, and have that individual be the point of contact for all information and concerns.	
Announce who's eligible and should get it over as many mediums as possible.	
Clear information regarding timelines, possible side effects, etc.	
Clear distribution channels	
Clear communication, organization	
Provide up to date information about availability and where it's accessible.	
Get the real information out there, the disinformation has dominated conversation in most circles.	
Inform people of color about the safety of the vaccine.	1+*
Let them know exactly who to contact about getting an appointment	
Outreach via email, phone calls, mailings about the process and the locations to get vaccinated	
Let them know exactly who to contact about getting an appointment	X 2
More communication about who is eligible and when	
Clear, concise information on where and when the vaccine will be made available.	
Public outreach re: safety of vaccine; ensure safe place to go to get it; minimize difference of procedures required for marginalized folks; minimize travel required to get it; encourage groups of friends/families to get it together; find a way to get folks to have the time off from work necessary to obtain vaccination if employers don't provide it.	1+
Notify personally - I assume the County Health Dept. has knowledge of who is >70???	
Explain subgroups. How people will be contacted. Where shots will be given	
Distribute the vaccine widely. Make sure it is clear who is eligible in each phase.	
Clear information	
Post flyers in places the most vulnerable frequent: gas stations, grocery stores, etc.	
Provide thorough information and walkthrough guide.	
People directly taking care of Vulnerable people at home need to know how to access	
Let us know clearly when it will be our turn.	
More transparency and information about when and where and how much the vaccine will cost	
Outreach both for educational purposes and also to let people know WHEN and WHERE they can get the vaccine.	
Outreach and education through community leaders.	1+
Communicate how to get the vaccine and find some way to pay for it	1+
Communicate proactively so people know when they are eligible and where to go.	
answer any questions we have	
Mass alert and follow up for second dosing. Online self scheduling	X 6
Keep us updated on the science	
Let people sign up or have some organized way to notify them that they can go get vaccinated. People don't know how, when or where they will get the vaccine.	
Hopefully you are prepared to contact those eligible and prepared to administer to the masses efficiently.	
Good communication; subsidies; transportation	1+
Meet the people where they are, how can we get into where these communities reside?	
Information, support, safe travel to vaccine sites	1+
Clear communication on when it's one's turn and where to go at that time. Or possibly setting up a sign-up/call-back system.	

Push notifications via text, with location and appointment scheduling info.
Normalize it!! It's scary for it to be so new
Get locations and dates out with appointment sign ups by email

### Q1 VACCINE: NO (5)

Give more information and do better research as to it safety and effectiveness along with long term complications.
More transparency
(Translation) Inform, although in Mexico we have been very informed
Share information about how the vaccine works in detail, talk about the side effects more and how the vaccine might react to bodies that have a tendency to be sensitive
Provide all information possible

### Q1 VACCINE UNSURE (10)

Provide no/low cost vaccination for the most vulnerable. Start pushing vaccine safety through trusted sources now.	1+*
Consistent, clear, frequent communication via all channels	
Willingness to answer questions	
To let the Drs know about after effects or long term failures. If my Dr says ok let's do it it	
Limit the amount of personal information required to receive the vaccine. Hold public town halls with doctors and nurses in English and Spanish (virtually)	1+
Pushing out more information not through politicians	
Do not mix the vaccine message with any other topic.	
More education and outreach	
Publish information on vaccine side effects	
Explain why the vaccines are safe, considering we have no long-term studies	

\* Notation of 1+ indicates comment was sorted in at least two categories; Notation of X followed by a # indicates the number of identically worded comments

### ACCESSIBLE/CONVENIENT/SAFE (N=53)

### Q1 VACCINE: YES (40)

Make it as accessible as possible- take it to community centers, make sure vax clinics are open evenings and weekends, incentivize communities who might be less likely/less comfortable showing up to be vaccinated.
Make it as free and convenient as possible, without having to drive long distances (like testing).
bring the vaccine to them
Make it free and vaccine locations easily accessible without a car
Lots of information campaigns to every non-profit/church/employer in county, make it free for the poor.
Create centers or times where groups of people (like trans folks) can go together to get vaccine
Mobile vaccine units to deliver vaccine to vulnerable populations at their homes instead of having to go out.
Offer vaccines in creative ways to reduce virus exposure risks.
Easy to get to places, maybe home delivery for elderly.
Make it affordable and easy to access - no red tape
Drive them if needed.
Go to the places where the people are - rather than have them go to you
Make it as easy as possible to get

Take it to the most needy vs. expecting them to show up somewhere (not so convenient for them)	
Make it as free and easy to get ahold of as possible. And as safe and separated as possible too (distance, appointments and the whole shebang) that should prevent confusion or "running out of it with angry humans in the lobby waiting"	
Make it free. set up accessible drive or walk-up spots like the testing sites, ensure there are reminders for the second dose if relevant and follow up.	
Provide multiple sites to receive the vaccine.	
Offer it free of charge, without an appointment at Walmart, Target, King Soopers, etc.	
Make information widely available as well as easily understood. Also provide free or very inexpensive vaccinations	
Make sure available in multiple locations...mountain communities	
Is there a mobile option, where they can make a home visit to administer the vaccine?	
Have it accessible at most pharmacies just like the flu shot	
Make it easily accessible: free or low cost, multiple locations, well-advertised.	
Public outreach re: safety of vaccine; ensure safe place to go to get it; minimize difference of procedures required for marginalized folks; minimize travel required to get it; encourage groups of friends/families to get it together; find a way to get folks to have the time off from work necessary to obtain vaccination if employers don't provide it.	1+*
Support those of us without vehicles in a meaningful way. (For example, bring the vaccine to us, have many vaccine centers and keep public transit routes in mind when choosing those locations, reimburse the cost of transportation to be vaccinated, et cetera)	
Helping coordinate and covering the cost of transit to vaccine locations, such as making sure they're on bus routes, and covering the bus or rideshare fare, and making sure information is widely dispersed.	
Home visitations	
Have multiple locations to get the vaccine so it's convenient	
Easy to schedule clinics with many locations	
Have an orderly safe way of getting it	
Make the vaccine available at places that are easy to access	
MAKE IT EASY FOR THEM TO ACCESS	
Ensure people do not have to wait in long lines or any for that matter	
Good communication; subsidies; transportation	1+
Meet the people where they are, how can we get into where these communities reside?	
Information, support, safe travel to vaccine sites	1+
Have extended hours for vaccine administration, so people don't have to go through their PCP	
Bringing it to them	
Drive up vaccine clinics	
Making it easy for many people to have access to the vaccine i.e., where they can get it, how much it is, how easily it will be to get the second dose.	

### Q1 VACCINE: NO (7)

Availability where people live & work, time off to get it	
Nursing homes, hospitals, family docs - shouldn't the health department know best how to administer??	
Make it free and widely available at convenient locations everywhere. Use our chosen names and genders. Work 24/7 to show us you do care.	1+/ X 2
Take their word for it and make it easy to get. In other words, don't require medical records, etc.	
Make the environment where you get the vaccine as safe as possible. Personally, I would prefer to receive the vaccine in my home. I have been in self quarantine for months and months and really don't want to go out to get a vaccine.	
Email and schedule appts for those who are at risk and want the vaccine	



**Q1 VACCINE: UNSURE (6)**

Get to the jails and the homeless shelters, get to CPWD. Ensure all materials are in multiple languages	
Make the vaccine free, state run vaccination clinics, for those home bound/unable to get to a center availability to come to those individuals to provide the vaccine	
Offer many locations to access the vaccine	
Limit the amount of personal information required to receive the vaccine. Hold public town halls with doctors and nurses in English and Spanish (virtually)	1+*
Offer free vaccines no questions asked. More info offered. Easy safe way for undocumented to receive. Convenient quick neighborhood	
Make it free or affordable, and easy to access.	1+

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**FREE OR LOW COST (N= 27)**

**Q1 VACCINE: YES (18)**

Make it as free and convenient as possible, without having to drive long distances (like testing).	1+
Make it free and vaccine locations easily accessible without a car	1+
Lots of information campaigns to every non-profit/church/employer in county, make it free for the poor.	1+
Make low-cost vaccines available and implement reminders for second doses.	1+
Make it affordable and easy to access - no red tape	1+
Make it as free and easy to get ahold of as possible. And as safe and separated as possible too (distance, appointments and the whole shebang) that should prevent confusion or "running out of it with angry humans in the lobby waiting"	1+
Free/ low-cost clinics, and ask them how they want help	
Make it free. set up accessible drive or walk-up spots like the testing sites, ensure there are reminders for the second does if relevant and follow up.	1+
Make it low cost, preferably free	
Make the vaccine free for those on Medicaid and Medicare.	
Offer it for free	
Offer it free of charge, without an appointment at Walmart, Target, King Soopers, etc.	1+
Make information widely available as well as easily understood. Also provide free or very inexpensive vaccinations	1+
Make it easily accessible: free or low cost, multiple locations, well-advertised.	1+
Make it free to those who need and appoint staff to follow-up on scheduling for the unhoused and those without phones. Possibly provide transportation?	1+/ X 2
Communicate how to get the vaccine and find some way to pay for it	1+
Good communication; subsidies; transportation	1+

**Q1 VACCINE: NO (5)**

It should be free!	
Freaking cover the costs of side effects coming from a vaccine that was prematurely pushed out the door	
Make it free and widely available at convenient locations everywhere. Use our chosen names and genders. Work 24/7 to show us you do care.	1+/ X 2
Provide free/reduced price clinic for working class and uninsured people.	

**Q1 VACCINE: UNSURE (4)**

Provide no/low-cost vaccination for the most vulnerable. Start pushing vaccine safety through trusted sources now.	1+*
Make the vaccine free, state run vaccination clinics, for those home bound/unable to get to a center availability to come to those individuals to provide the vaccine	1+
Offer free vaccines no questions asked. More info offered. Easy safe way for undocumented to receive. Convenient quick neighborhood	1+
Make it free or affordable, and easy to access.	1+

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**PRIORITIZE VULNERABLE/MARGINALIZED (N=14)****Q1 VACCINE: YES (12)**

Education to the unhoused community about the safety. There is rampant misinformation going around that population.	1+
Make sure that there is not an oversight of LGBTQ and POC and we are left behind to get the vaccine.	
Bi-lingual Education is critical and it can't start soon enough.	1+
Prioritize communities of color especially Latino communities in Boulder County	
I work at a homeless shelter and currently the state has not included our guests (folks experiencing homelessness), or us as staff in the plan. So, the state (focusing on the state because while I live in Boulder, I work in Denver) can do is include us in the plan. Many people are forced to live collectively due to economic situations and should be prioritized! The fact that folks experiencing homelessness (in and out of shelters) are not included in this plan indicates a serious overlook and disregard for this community, as well as for the workers like myself.	
Administer vaccine to the most vulnerable	
Inform people of color about the safety of the vaccine.	1+
Focus on the elderly and health care workers	
Make it free to those who need and appoint staff to follow-up on scheduling for the unhoused and those without phones. Possibly provide transportation?	1+/ X 2
The distribution needs to be in the communities most at risk, rather than in hospitals.	
The vaccine absolutely must be given to those who are currently incarcerated. Penitentiaries are currently hotbeds for COVID transmission and this deeply vulnerable population is being left to suffer with no recourse.	

**Q1 VACCINE: UNSURE (2)**

Allow doses to go to the vulnerable first	
Consider early vaccination availability for family of those who cannot get vaccine due to health (every pregnancy)	

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**OUTREACH: PARTNER (N=6)****Q1 VACCINE: YES (5)**

Outreach to our community. Partnering with community groups to reach as many as possible.	
Use community resources such as OBC to get the word out.	
Outreach and education through community leaders.	1+
Reach out to nonprofits serving vulnerable populations to ask for their help in getting the word out	
Work with leaders from those communities so they can effectively communicate with their people	

**Q1 VACCINE: DIDN'T ANSWER (1)**

Reach out to organizations that support vulnerable communities!
---

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**MISC (N=10)****Q1 VACCINE: YES (9)**

I am not sure there is anything more that can be done at this point.
--

Respect various gender and gender pronouns, including on any and all documentation.
---

The state is already doing what I believe is best for everyone
--

Look to the past to see how these massive vaccinations occurred. They seem to have been able to do it much quicker.
---

Open up businesses. Stop being racist against whites
--

We need a state-wide comprehensive plan. This should in all reality from the Federal Government, but well let's just say they are totally incompetent. I have heard absolutely nothing about Colorado and by counties. I know it looks like non front-line workers won't see anything till spring 21 at best. Unacceptable
--

Vaccinate as many people as possible
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Distribute!
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Get me appointment to get vaccine
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**Q1 VACCINE: NO (2)**

Remove barriers
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Back off. Stop pushing all the hate.
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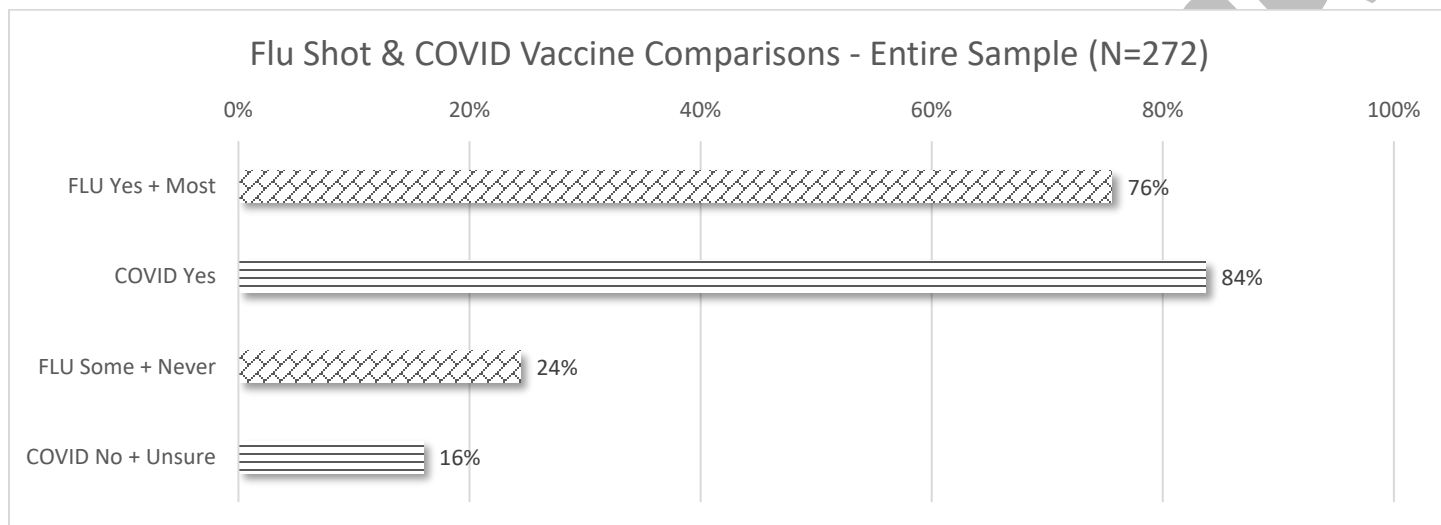
*\* Notation of 1+ indicates comment was sorted in at least two categories; Notation of X followed by a # indicates the number of identically worded comments*

Out Boulder County

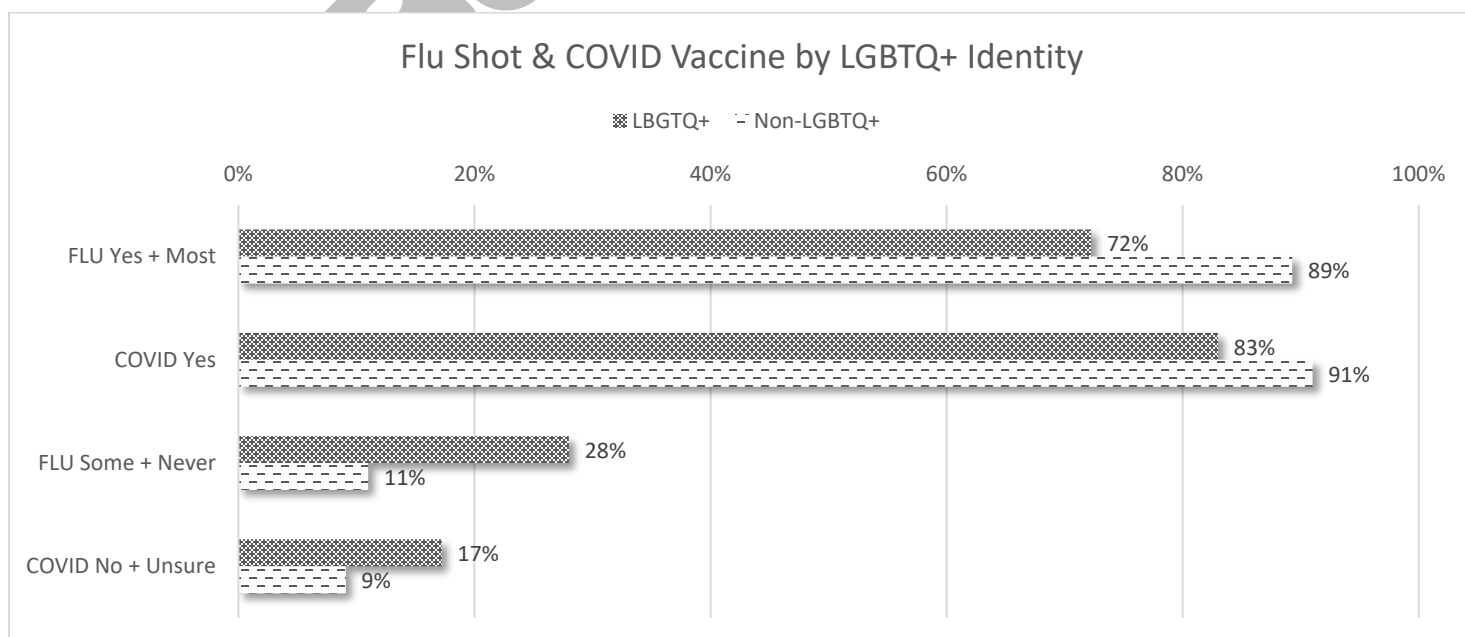
## Q5: Do you get an annual flu vaccine?

### Key Findings

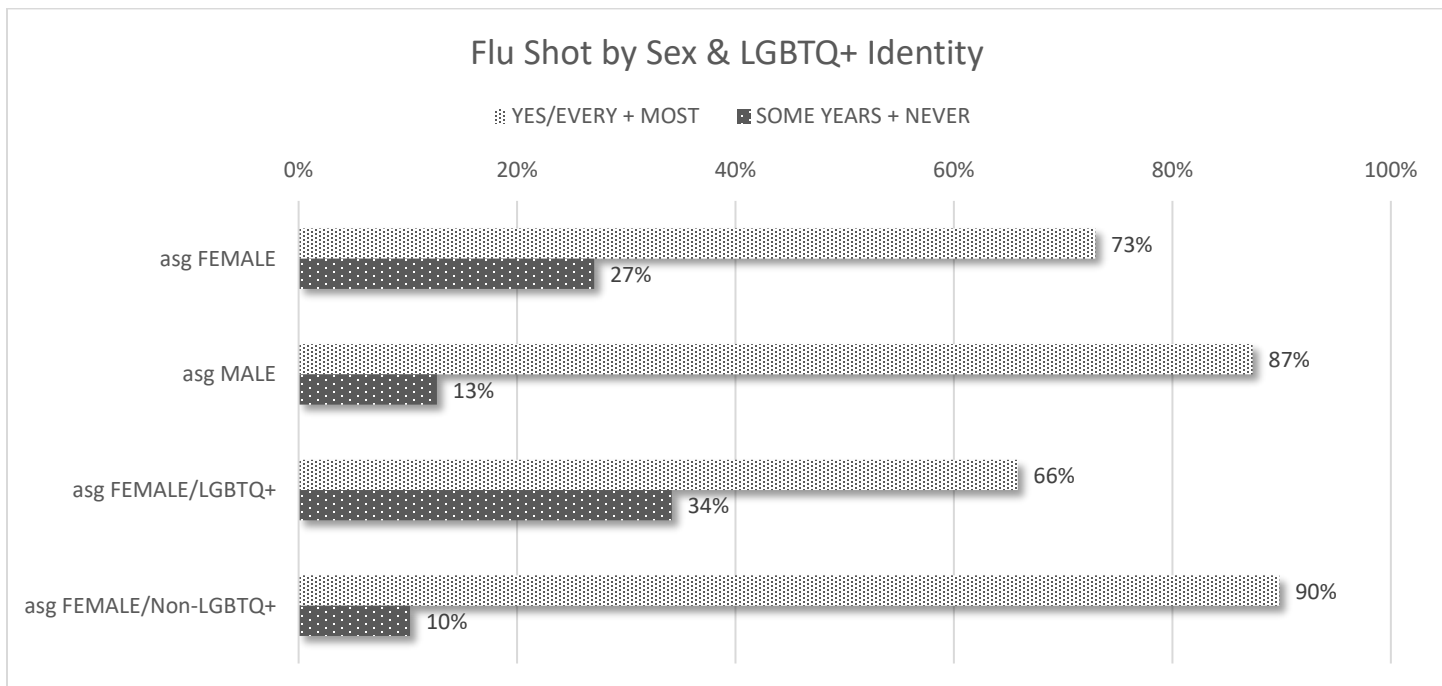
1. Asked if they get the flu shot annually, 76% of all respondents indicated they get the flu shot every year or most years while 24% get it some years or never. Comparing behaviors regarding annual flu shots and perceived likelihood of receiving COVID vaccine, results across the entire sample showed that more respondents say they will receive the COVID vaccine than get the flu shot every year or most years (84% vs. 76%). Fewer respondents answered No or Unsure to the COVID vaccine than those who never get the flu vaccine or only get it some years (16% vs. 24%).



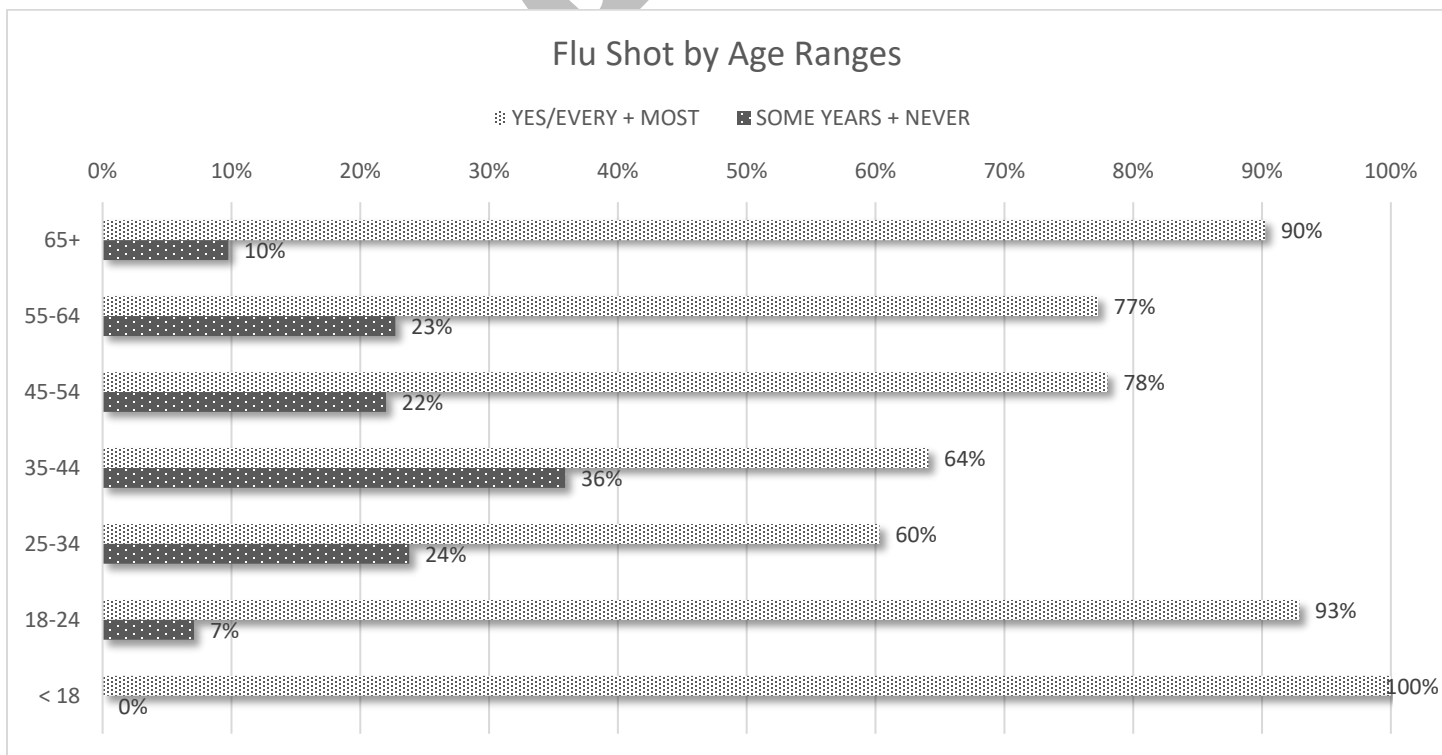
2. Examining flu shot behavior and COVID vaccine perceptions between LGBTQ+ and non-LGBTQ+ subgroups revealed greater percentages of LGBTQ+ respondents who either never receive annual flu shots or only get them in some years compared to non-LGBTQ+ respondents (28% vs. 11%), the same pattern as LGBTQ+ respondents who answered No or Unsure to the COVID vaccine vs. non-LGBTQ+ (17% vs. 9%) as noted in Q1 results.



- Also similar to the Q1 COVID vaccine results, when analyzing results by sex assigned at birth, a higher percentage of the assigned Female group than the assigned Male group indicated they never get flu shots or only get them in some years (27% vs. 13%). This finding again was accounted for by the higher percentage of the LGBTQ+ assigned Female group answering Never or Some Years to the flu shot question than the non-LGBTQ+ assigned Female group (34% vs. 10%).



- Regarding age ranges, the group that was highest in answering Never or Some Years to the flu shot was the 35-44 range (36%). The groups that answered Yes or Most years to annual flu shots to the highest degree were the Under 18 and 18-24 age ranges (100%, 93%) although these samples were small.



**Q6: If you answered “No” or “Some years” to #4, why don’t you get the flu vaccine annually?**

**Key Findings**

- When asked why they don’t get annual flu, respondents wrote in OTHER answers most often (47.5%) followed by “I’m healthy & don’t worry about getting the flu” (32.5%) and “Concerns about effectiveness” (22.5%).

Rank	Q6 Barriers to Flu Shot*	#	%
1	OTHER	38	47.5%
2	HEALTHY	26	32.5%
3	Concerns about EFFECTIVENESS	18	22.5%
4	Concerns about SAFETY	14	17.5%
4	Not a PRIORITY	14	17.5%
6	COST	11	13.8%

\* Could choose more than 1 reason

Total Respondents 80  
Total Answers to Q6 (some answers coded into 2 or 3 categories): 121

- Q6 Barriers to annual flu shot: Content coding of verbatim answers by Flu Shot response category

**FLU SHOT: NO, NEVER**

**Note\***

**Forget/not a habit**

Executive Dysfunction

**Bad Reactions/Side Effects**

Side effects

**Ineffectiveness**

The only time I've had flu like symptoms is when i got the flu shot.

It's a crap shoot, random mix of possible options in comparison to what might come out for the year.

Flu vaccine is generally ineffective & every year I received it I also got bronchitis. I no longer get flu shots and I have not been sick or had bronchitis since stopping flu vaccines.

Building our body's immunities is important, if I allow myself to get the flu, I am more able to keep those antibodies in my body to help fight off the next flu.

**Fear/Discomfort**

Fear of needles

(Translation) I don't like vaccines getting into my body but in the case of COVID, I would.

My mom is an anti-vaxer and even though I am pro vaccines I also have a deep discomfort of getting them.

**Don't Trust Government**

Don't trust the government
----------------------------

X 2\*

**Misc.**

I have an autoimmune disorder that prevents me getting this vaccine
---

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**FLU SHOT: SOME YEARS, NOT EVERY****Forget/not a habit**

I forget to schedule it
-------------------------

I forget. I have my annual wellness exam in April, which is not flu vaccine season so it requires a second visit to get the vaccine.
--

I didn't used to get the flu vaccine, but starting this year, I will every year.
--

I hadn't learned to do so til 2 years ago. This year is my second of many more.
---

I'm a dumbass and I forget
----------------------------

I have only gotten flu vaccine THIS year, also shingles
---

I haven't worked with folks who were at risk until the past few years, so now I prioritize getting it because I want to make sure I am not putting others at risk.
--

**Bad Reactions/Side Effects**

Bad reaction in the past
--------------------------

I pass out with shots and blood work but got my first one ever this year. Got the flu a few years ago but did not get very sick and went to a doctor for the flu meds which probably helped.
--

I get really sick for two weeks afterwards.
---

When I got the vaccine, I came down with other bacterial illnesses
--

**Ineffectiveness**

Each time I get the vaccine I'm sick for over a week compared to no sickness when I don't get it.
---

I've only ever gotten sick when I've gotten the flu vaccine
---

I got it annually until I was 18 and got the flu every year, then I stopped and I haven't had the flu since. However, the pandemic has taught me the importance of being vaccinated for other people and I will be getting it annually from now on.
---

**Fear/Discomfort**

Anxiety about doctors' offices
--------------------------------

**Misc.**

I have a partial immunity to flu stains and in years when vaccine supply is low, I don't get one because of that.
---

I was ignorant to the effects of the flu or sicknesses like it.
---

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**FLU SHOT: YES, MOST YEARS****Forget/not a habit**

I just forget
Some years I forget to get it or I get it later in the year/flu season
Forget/too busy

X 5\*

**Fear/Discomfort**

Some years, I forgot. Other years it seemed that there was no place that I felt comfortable going to get it.
--

**Access**

Difficulty getting to somewhere to receive the vaccine because I'm not able to drive.
---

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**Contact Information**

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Out Boulder County