

Perspective/Opinion

The COVID-19 Vaccine, #WhatsYourWhy?

by James F. Wu (he/him/his) – MCW-Milwaukee medical student, class of 2021

Over this past year, I witnessed the politicization of medicine and COVID-19. I watched in horror as news outlets and national leaders promoted COVID-19 misinformation. I learned about centuries of systematic racism including racism in healthcare and the resulting well-founded and deep-rooted mistrust in the medical establishment by communities of color, especially Black communities. I saw the glaring data of inequities in vaccine distribution for our BIPOC communities. After reading the #WhatsYourWhy COVID-19 vaccine stories shared by Dr. Kimberly Manning (@gradydoctor on Twitter), I felt inspired and determined to incorporate vaccine conversations into my life. All of this and more led me to jump at the chance to help combat the inequities in the Milwaukee community that I have come to love and call home.

A lot of public discourse and media coverage of lower vaccination rates in Black communities has focused on "vaccine hesitancy." However, many Black physician leaders and scholars have highlighted the need to stop using "hesitancy" as an excuse for lack of equitable distribution. Yes, there is hesitancy, but it is an expected response to centuries of oppressive systematic racism. Furthermore, according to a recent NPR/PBS NewsHour/Marist survey, there is little difference between white and Black Americans in terms of vaccine hesitancy. In fact, the most likely group to say "no" to a vaccine, if offered, is Republicans males (see page 23 of the survey). Black people and other people of color are not a monolith; we need to celebrate the individual by recognizing the humanity of each person.

With all of this in mind, I prepared myself for my first COVID-19 vaccine outreach call session. I tried to memorize all the COVID-19 disease and vaccine

facts. I had scripts ready to go on my dual monitor. I was prepared for an uphill battle. If someone who I had never met before called me out of the blue, would I trust them, especially in light of mistrust due to lack of institutional trustworthiness? How could I possibly hope to build rapport with someone without a face-to-face interaction?

I quickly realized that while knowledge of the scientific information was helpful in answering questions or responding to misconceptions, it was more important that the conversations were centered around meeting people where they were. I tried to refrain from interrupting and just listen – listen to their story, listen to their fears, listen to their reasons. I tried to put myself in their shoes and come from a place of love and empathy. Many of the people I talked to either signed up for vaccination right away or after some discussion, education, and shared decision making. Of course, there were those that refused. But even the people who were adamantly against the vaccine were willing to hear me out because I gave them the space to talk about their concerns and responded in a humble, respectful, and non-dismissive manner.

My favorite parts of medicine are the relationships that we develop with our patients and having the privilege to be a part of their story. This is true for my experience with COVID-19 vaccine outreach. Whether our conversation resulted in the scheduling of vaccination or not, it was a privilege to be able to listen to their stories, answer their questions, and provide some education.

These conversations have served as a great reminder that we all have our lived experiences and our own reasons. I challenge you all to really listen to your patients and ask them, as Dr. Manning would say, #WhatsYourWhy?

For further reading:

NPR/PBS NewsHour/Marist Poll Results: the Biden Administration & COVID-19
http://maristpoll.marist.edu/npr-pbs-newshour-marist-poll-results-the-biden-administration-covid-19/#sthash.SE056jnN.vXH9nAwI.dpbs

Episode 162: Antiracism in Medicine Series – Episode 6 – Racism, Trustworthiness, and the COVID-19 Vaccine:
https://clinicalproblemsolving.com/2021/02/25/episode-162-antiracism-in-medicine-series-episode-6-racism-trustworthiness-and-the-covid-19-vaccine/

Pandemic's Racial Disparities Persist in Vaccine Rollout (Interactive Graphs)
https://www.nytimes.com/interactive/2021/03/05/us/vaccine-racial-disparities.html?smid=tw-share

Black People Need Better Vaccine Access, Not Better Vaccine Attitudes
https://www.nytimes.com/2021/03/05/opinion/us-covid-black-people.html?smtyp=cur&smid=tw-nytopinion

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