

**GE + VACCINATED: Honoring God's Command of "Others Before Self"  
by Embracing COVID-19 Vaccination**

By: Nikki Gigi A. Legaspi-Pelayo  
s2006951

*"Greater love has no one than this: to lay down one's life for one's friends."  
John 15:13*

With the advent of numerous vaccine development and production against SARS-CoV-2 virus, the optimism of real progress in emerging from the COVID-19 crisis becomes clearer in sight. The swift and collaborative work that was apportioned in the process is considered by many as nothing short of a miracle. Unfortunately, these vaccines have also uncovered prevailing challenges surrounding vaccine distribution and allocation. One major challenge that is particularly lingering in the Philippines is the high rate of vaccine hesitancy.

According to the Department of Health (1), vaccine confidence among Filipino parents have waned over the recent years especially after the Dengvaxia controversy in 2017 (figure 1). When the department rolled out a nationwide Supplemental Immunization Program in April (Phase 1 encompassing NCR and Mindanao areas) and September 2018 (Phase 2 in Visayas region), the campaign achieved a meagre vaccine uptake of 69% and 29%, respectively.

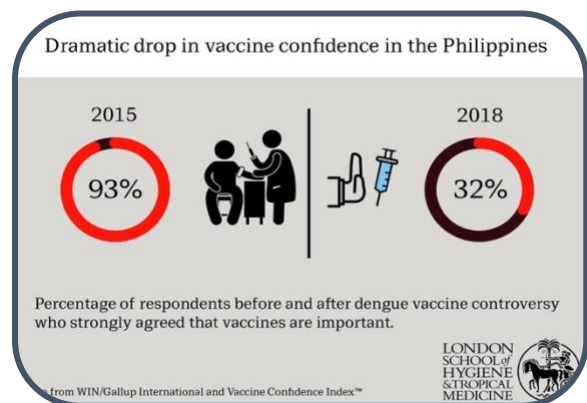


Figure 1. Results of the vaccine confidence project by London School of Hygiene and Tropical Medicine which revealed a shocking 61% reduction of public trust and confidence among Filipino parents post-Dengvaxia controversy. **Source:** [www.doh.gov.ph](http://www.doh.gov.ph)

Consequently, the Department of Health (DOH) announced measles and diphtheria outbreaks in several regions of the country with an alarming 8-fold increase of measles incidence back in 2019 (1). In a recent survey done last January 2021 asking 24,000 Filipino adults, almost half (47%) said that they are not willing to be immunized even if several COVID-19 vaccine choices are available (2).

## Why do Filipino parents hesitate on availing vaccinations?

Vaccine hesitancy refers to the rejection of vaccines despite its opportune accessibility and availability. In order to grasp the causes of vaccine refusal among Filipino parents, we contextualize them using a triad of determinants from the SAGE Model that influences vaccine decision-making (3):

### 1. Individual and Social Group Influences

Individual and shared differences on the perceived risk for disease susceptibility as well as apparent lack of perceived benefits from getting a vaccine can affect vaccine confidence and acceptance (4). These differences vary greatly among Filipinos living in urban areas compared to those in the rural communities (5). For one, vaccines are branded dangerous in the latter because they believe vaccines disrupt children's behavior, cognition and their sleeping cycles (5). Shared common experiences from peers and neighbors can also have a huge impact on an individual's decision to be immunized-- those who relatively experience milder symptoms of vaccine-preventable diseases are less likely to promote vaccination to their friends and loved ones (5).

Juxtaposing with the poor mindset, misinformed shared beliefs and vaccine indifference is the serious shortage of health care

professionals that are vital in rectifying vaccine misconceptions and spreading awareness especially in the remote, far-flung areas of the country (3). Low risk perception on disease as well as indifference to immunization have been strongly correlated to low vaccine coverage in the Philippines (3).

### 2. Vaccine/Vaccination-Specific Factors

Perceptions toward vaccine efficacy and safety are vital determinants in vaccine decision-making (4). In the context of COVID-19 pandemic, there is a significant concern from the public regarding the government's decision on the country's primary COVID-19 vaccine supply (6). Out of the seven vaccine options, DOH purchased a Chinese-made vaccine with a relative efficacy of 50%-- a pale comparison to other vaccines made in the USA and Europe (6). The efficacy rate (50%) was not really the main conundrum; in fact, it is considered satisfactory according to WHO guidelines. However, the decision to purchase such vaccines was stained with political backlashes as it was rendered without sufficient scientific evidence and unpublished Phase III trial results (7). Moreover, vaccine confidence plummeted further when news broke out that the country's lead health official failed to deliver the necessary documents in step of negotiations with Pfizer-BioNTech pharmaceutical company (7). It led to forgoing of at least 10 million doses of Pfizer vaccines back in January.

Negative media information circulating on newspapers, television and the internet regarding vaccine safety also augmented the vaccine distrust among Filipinos;

### 3. Contextual Issues

Social media plays an integral role on promoting vaccine uptake and upscaling vaccination endeavors (3). As a matter of fact, the primary reason for vaccine refusal in the Philippines is greatly influenced by the negative social media reports that are circulating in various social media platforms (5). Exaggerated descriptions on the adverse effects of COVID-19 vaccines and overreporting on the fatalities have all contributed to the distrust and refusal of families to the nation's COVID-19 immunization program (8).

Other social factors such as level of education, religion, socioeconomic status, and political/religious influences have all been correlated to vaccine hesitancy as well. Analogous to other findings, parents with limited educational background are more likely to not vaccinate their children (4). Those with high religiosity and low socioeconomic status are also more likely to become vaccine-hesitant individuals (4). Politicians who lobby anti-vaccination as well as religious leaders who view vaccines as morally unethical have negative implications to vaccine confidence among their constituents in the local setting (5).

this is particularly evident on issues surrounding exaggerated reports and controversies on adverse reactions of vaccines and vaccination (5).

#### **How can religious leaders empower Filipino parents towards vaccine acceptance?**

We pride ourselves as the only Christian nation in Asia. In fact, more than 86% of Filipinos are Catholics (9). As God's anointed stewards of His Scriptures, Christian religious leaders are held with high trust and regard. Furthermore, God mandates us to honor and respect our political and religious authorities as these can only be established through His grace and blessing (10).

A *dialogue-based intervention approach* (4) comprising a team of health care workers (HCWs) and religious leaders can be employed to facilitate open dialogue and encourage engagement especially among vaccine-hesitant parents. Integration of religious activities into vaccine undertakings can also be done to empower our Christian brothers and sisters with regards to COVID-19 vaccination. This strategy has been adopted in areas of Turkey, South Africa, and Pakistan (4) and have shown substantial increases of vaccine uptake in those countries.

*“Consequently, whoever rebels against the authority is rebelling against what God has instituted, and those who do so will bring judgment on themselves.”*  
**Romans 13:2**

This approach can be incorporated into the three phases of COVID-19 vaccine roll-out by the Philippine government:

**Phase I (Pre-roll out):** In this initial phase, creation of “immunization camps” within all Catholic churches across the country can be done. These camps can serve as engagement centers for HCWs, priests and doubtful parents to discuss, clarify and get insights on the effectivity and safety of the vaccines. These can also be used to cater those who need spiritual guidance

**Phase II (Deployment):** Priests and pastors can lead in giving Holy water blessings to all HCWs, vaccines, equipments to be used, and individuals who will be vaccinated (*Figure 2*). In Nigeria (4), trained priests and ministers volunteer as vaccinators in the immunization program of children. This act was credited for an increase in public trust and confidence. This method can also be applied for the ongoing COVID-19 vaccination program.

**Phase III (Post-deployment):** This phase entails active updates and continuous surveillance of vaccine side-effects and ensuring health protocols to be maintained. Religious leaders can continue to preach pro-vaccine declarations from the Bible and utilize digital platforms and virtual mass gatherings as communication

channels. Continuous engagement with the stakeholders can also be done with the virtual platforms to straighten out evolving misconceptions and false media reports spreading on the internet.



*Figure 2.* A Filipino priest blesses the HCWs and COVID-19 vaccines at a hospital in Manila, Philippines as part of the government’s community engagement strategies to increase vaccine uptake.

**Source:** Philstar.com

*In conclusion,* vaccine hesitancy is a serious matter that needs to be addressed especially during this unprecedented crisis. It undermines the ultimate goal of achieving herd immunity. A plethora of factors have been ascertained to contribute to vaccine hesitancy; these can be grouped into individual and social group influences, vaccine- and vaccination-specific factors, and contextual influences. Adequate and guided communication and engagement through open dialogue is the key to appropriately address vaccine misconceptions and distrust among vaccine-hesitant individuals. Involvement of religious leaders into the immunization program can enhance and produce significant

improvements on vaccine acceptance in the Philippines. As a Catholic-predominant nation, we uphold Christian leaders with high regard, trust and honour. Together with the healthcare workers, our Christian leaders can influence, facilitate open dialogue and integrate religious activities into pro-vaccine undertakings to empower

our brothers and sisters of Christ. With this in mind, I hope that each of us bear our own crosses and willingly submit all worries and fears towards vaccines to the Lord. We know that He will never put us in harm's way and wants us to always love our neighbours as we love Him above all.

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