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WORKERS' VIEWS ABOUT COVID-19 VACCINATION AND WORK

A BRIEF REPORT FROM THE COVID-19 WORK AND HEALTH STUDY

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SUMMARY

Workplaces have been one of the key settings in which COVID-19 has spread through communities. Australia's vaccine rollout prioritises individuals based partly on their occupation and work environment, with workers in high risk settings able to receive vaccines first, and mandated vaccination among workers in the state-based hotel quarantine systems. Australia continues to experience community transmission, with infection spreading from hotel quarantine of international arrivals. Reports also suggest a high degree of vaccine hesitancy in the Australian population.

Amidst this backdrop, there has been discussion of mandating vaccination for some high-risk workers such as those in healthcare, and others working directly with vulnerable populations such as older people or people living with a disability.

In this preliminary study, we surveyed a group of 537 working-age Australians regarding vaccination of the workforce and the responsibilities of employers.

Our findings demonstrate:

- **Support for mandatory vaccination of some workers.** The majority of respondents support mandatory vaccination of workers in settings that are at higher risk of COVID-19 infection.
- **Support for sharing vaccination status.** The majority of respondents believed that employers should be able to ask for evidence of employees' COVID-19 vaccination and keep records of vaccination status.
- **Poor communication of employer vaccination policy.** Fewer than one out of every four workers reported that their employer has communicated a vaccination policy.
- **Mixed views on consequences for unvaccinated workers.** Stopping unvaccinated employees or even members of the public from entering workplaces was supported by around three out of ten, and opposed by four out of ten respondents.

BACKGROUND

Vaccination for COVID-19 is anticipated to change the way we live and work as the pandemic unfolds. Many countries around the world are implementing COVID-19 vaccination programs to reduce serious illness and viral transmission. In Australia, the mass vaccination program began by prioritised people working in targeted settings such as quarantine workers and frontline health workers, followed by aged and disability care residents, older age groups, and people with underlying medical condition or disability (1).

Whilst the Australian (Federal) Government had previously stated that COVID-19 vaccinations will be voluntary, universal and free (2), Australian states and territories have the capability to make vaccination mandatory for some businesses through public health orders. For example, Queensland mandated vaccination for Hospital workers with a high risk of being in contact with COVID-19-positive patients (3). In this example, unvaccinated workers remain employed but have restrictions on making direct contact with COVID-19-positive patients, and have additional reporting and COVID-19 surveillance testing requirements. Additionally, in June 2021 National Cabinet agreed on requirements for residential aged care workers to have at least their first COVID-19 vaccine by mid-September 2021.

Under Australian work health and safety laws employers have a duty to eliminate, or if that is not reasonably practicable, minimise the risk of harm in the workplace (4). This includes the risk of contracting COVID-19 infection in workplace settings.

Australia continues to experience community transmission, with infection spreading from hotel quarantine of international arrivals. Reports also suggest a high degree of vaccine hesitancy in the Australian population.

The COVID-19 Work and Health study is a prospective longitudinal study of the health impacts of Australian adults experiencing work loss during the pandemic (5). After following a cohort of working-age Australians one year into the pandemic, we asked several questions on COVID-19 vaccines how may should influence employment. We covered themes on vaccine hesitancy, occupation-based vaccination mandates, expectations of employers', and returning to the workplace.

This brief report presents the number and percentage of workers selecting different responses to survey questions. We report outcomes for the overall national sample completing a follow-up survey one year after baseline between 14 April and 27 May 2021. Please note that the sample is not representative of the national workforce, and for this report we have not adjusted estimates by demographic or other characteristics. This report provides a simple overview of study findings, and results should be treated accordingly. For more information about the study please view the full study protocol available online (6) and/or the description of the study cohort (5).

FINDINGS

COHORT

A total of 548 individuals completed a 12-month follow-up survey from a longitudinal study, of which 11 respondents were excluded for providing no response to all questions within the theme of COVID-19 vaccination. This resulted in 537 eligible respondents of working age for which outcomes are presented.

VACCINATION INTENTION

Amongst 537 respondents, 344 (64.0%) indicated that they would choose to have the COVID-19 vaccine (Table 1), and 68 (12.2%) reported that they had already received at least one dose of COVID-19 vaccination. A total of 78 (14.5%) respondents indicated that they were unsure whether they would get vaccinated, and 47 (8.8%) respondents reported that they would not choose to have the COVID-19 vaccine.

TABLE 1. VACCINATION INTENTION

Will you choose to be vaccinated for COVID-19?	Number (%) of respondents
I have already received at least one dose of COVID-19 vaccine	68 (12.2)
Definitely yes	260 (48.4)
Probably yes	84 (15.6)
I'm not sure yet	78 (14.5)
Probably not	22 (4.1)
Definitely not	25 (4.7)
Total	537 (100.0)

We also asked participants about their views on the information provided by government regarding the COVID-19 vaccination, whether they would be willing to pay for a vaccine, and if they felt that getting vaccinated would improve their ability to participate in work (Figure 1).

One in two respondents (51.2%) agreed that government information on COVID-19 vaccines is reliable and trustworthy, whereas 18.1% disagreed and a further 27.0% were undecided.

Most respondents (60.3%) reported that they would get the COVID-19 vaccine if there was a cost to them for receiving it – noting that 76.2% of this cohort stated that they would either choose to get vaccinated, or already had received at least one dose.

Almost one in two respondents (47.1%) agreed that being vaccinated would improve their ability to participate in work.

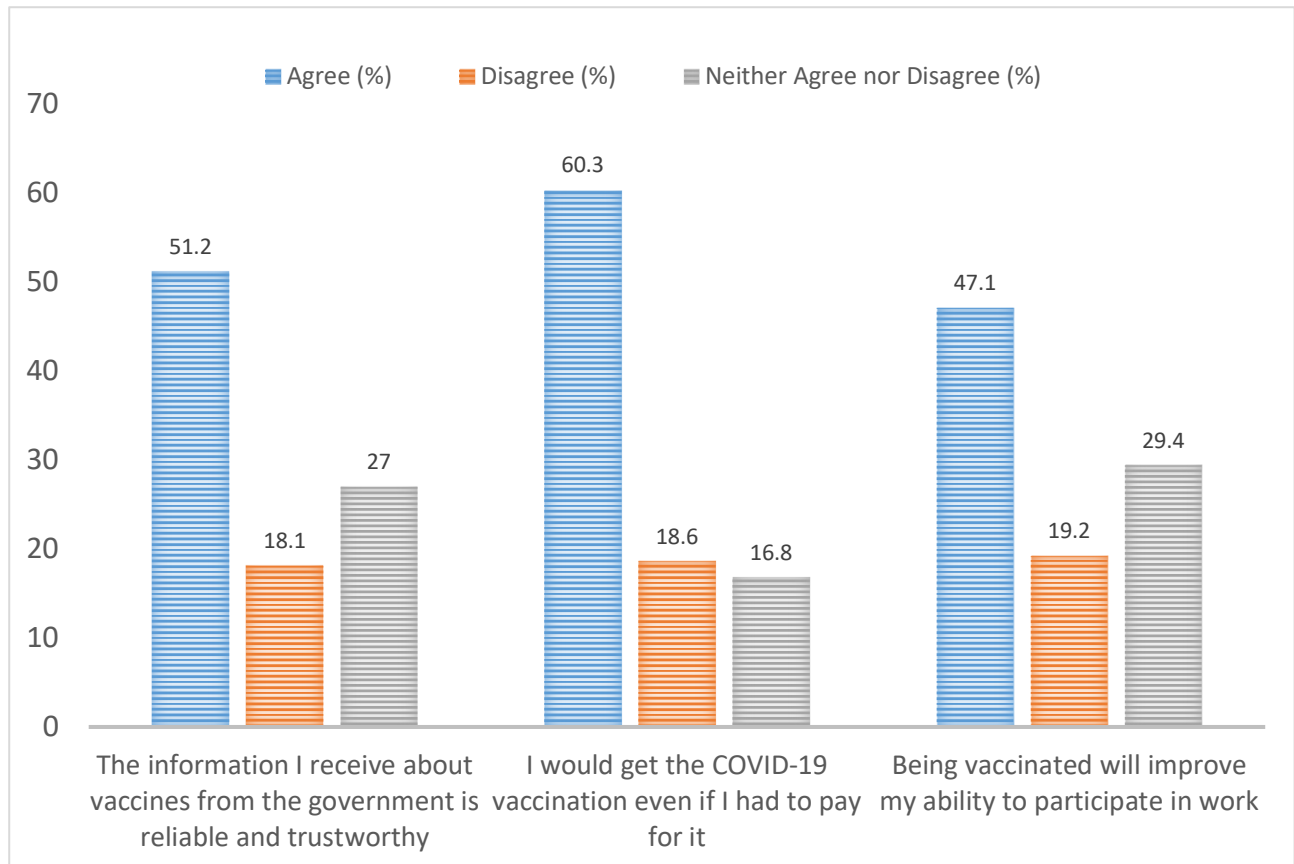


FIGURE 1. VIEWS ON VACCINATION

MANDATORY VACCINATION

We asked participants their views on mandatory vaccination of three different groups of workers, being workers in high-risk settings, workers interacting with the public, and all workers (Figure 2).

Slightly more than three quarters of the sample (76.2%) agreed that vaccination should be mandatory for high-risk groups such as health and aged care workers, with a further 9.7% undecided.

Almost two thirds of the sample (65.0%) agreed that vaccination should be mandatory for any workers who interact with the public as part of their job, with a further 15.5% undecided. Slightly less than half (47.3%) of respondents agreed that vaccination should be mandatory for all workers, and one-quarter (25.3%) disagreed with this statement.

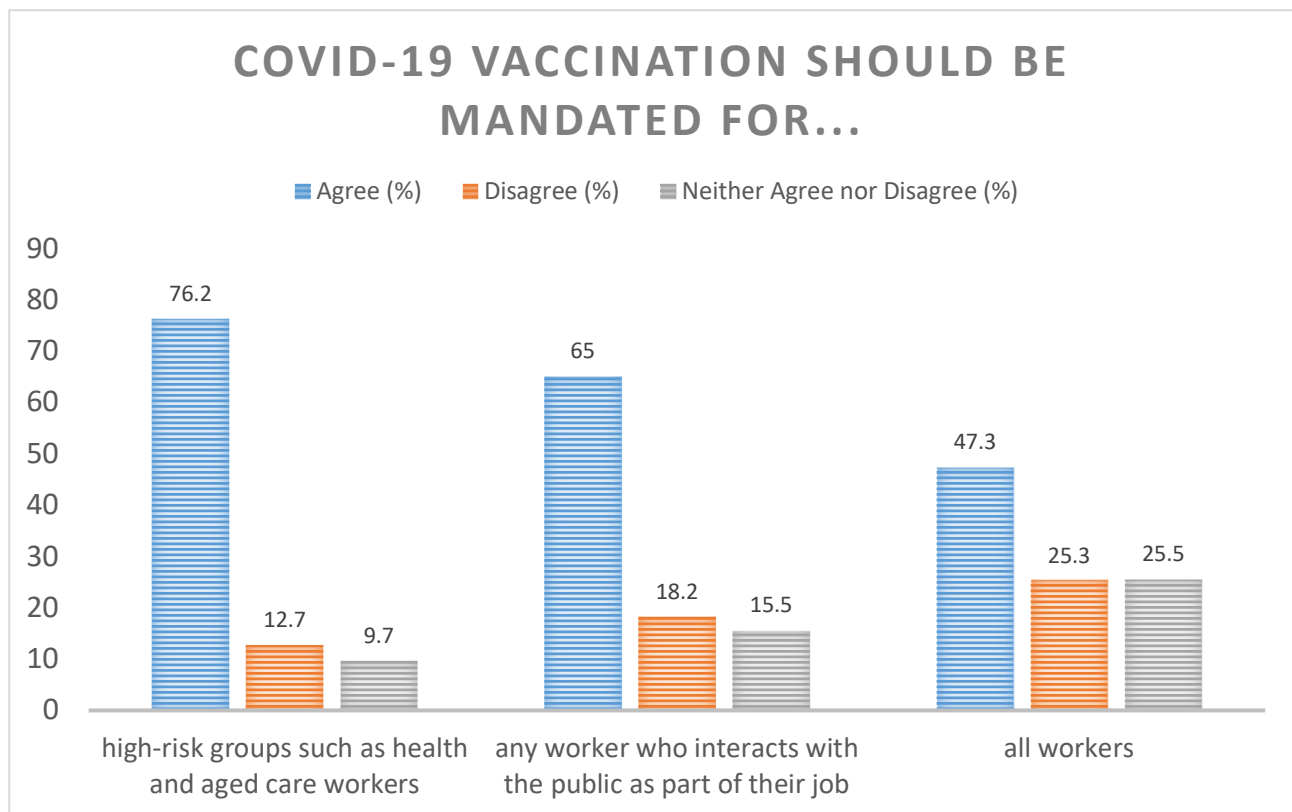


FIGURE 2. VIEWS ON MANDATORY VACCINATION

We also asked respondents questions about some consequences for workers who are unvaccinated, including whether they should be discouraged from entering the workplace, or whether their job roles should be changed to reduce the risk of infection (Figure 3). In general, there was less support for these statements, with less than 40% of respondents agreeing with these statements but also more than 30% who disagreed and over a quarter who were undecided.

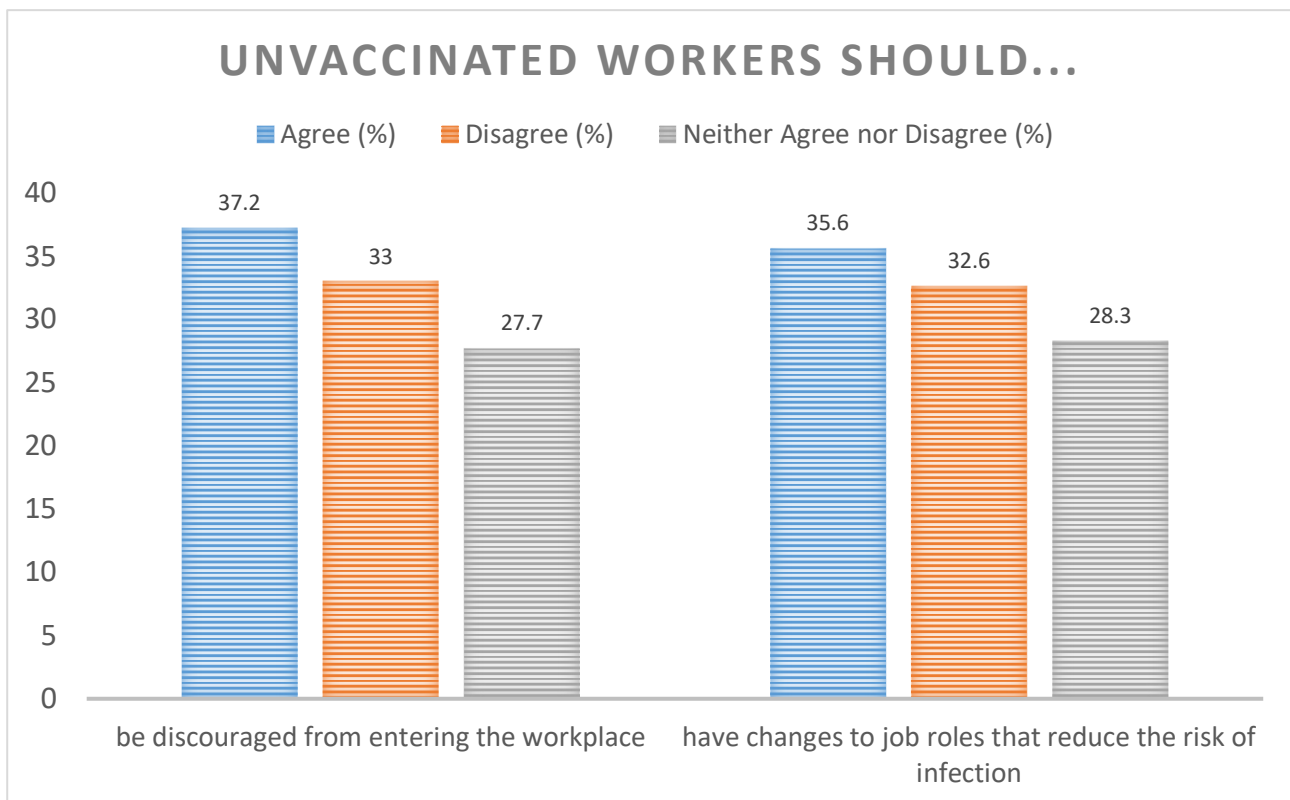


FIGURE 3. VIEWS ON UNVACCINATED WORKERS

A smaller proportion of people (21.4%) thought that people working exclusively from home should not be forced to get the COVID-19 vaccine.

EMPLOYERS RIGHTS AND RESPONSIBILITIES

Finally, we also asked respondents about the roles and responsibilities of employers with respect to vaccination (Table 2).

Overall, workers were more likely to agree than disagree with statements that employers should be able to ask for evidence of employees' COVID-19 vaccination and maintain a record of vaccination status. Respondents were more likely to agree that employers should organise employee vaccination and provide paid leave for vaccination.

In contrast, respondents were less likely to agree with statements that employers should be able to prevent unvaccinated employees or members of the public from entering workplaces.

TABLE 2. EMPLOYER RIGHTS AND RESPONSIBILITIES

Employers should...	Number (%) of respondents			
	Agree	Disagree	Neither Agree nor Disagree	Not sure / don't know
...be able to ask for evidence that their employees have been vaccinated	330 (61.5)	135 (25.1)	67 (12.5)	5 (0.9)
...be able to keep records about their employees vaccination status	326 (60.7)	151 (28.1)	53 (9.9)	7 (1.3)
...organise vaccines for their employees	343 (63.9)	91 (16.9)	100 (18.6)	3 (0.6)
...provide paid leave for vaccination	305 (56.8)	102 (19.0)	121 (22.5)	9 (1.7)
...be able to stop employees who have not been vaccinated from entering workplaces	165 (30.7)	226 (42.1)	125 (23.3)	21 (3.9)
...be able to stop members of the public who have not been vaccinated from entering workplaces	180 (33.5)	212 (39.5)	130 (24.2)	15 (2.8)

Only 22.5% of respondents stated that their employer had communicated a policy about vaccinations and work, and 38.5% of respondents indicated that their employer had not communicated a vaccination policy.

SUMMARY AND NEXT STEPS

In this preliminary study of a sample of Australian working age adults, there is strong support for mandatory COVID-19 vaccination of workers in settings where infection risk is greater. This is particularly the case for workers in 'high-risk' settings such as health and aged care, but we also observed a high degree of support for vaccination of workers with direct public facing roles. Nearly one-half of our respondents also indicated support for mandatory vaccination of all workers.

Our data demonstrates that views differ on consequences for unvaccinated workers with approximately equal levels of support and opposition to imposing changes to job roles, and discouragement from entering the workplace. Further work is required to identify whether views on unvaccinated workers differ by the nature of work such as in quarantine or healthcare settings.

There was strong support for employers to be involved in COVID-19 vaccination such as organising vaccination and maintaining a record the vaccination status of employees. This may assist employers with their occupational health and safety efforts to reduce COVID-19 infection in the workplaces. However, our results suggest that employers' policies on vaccination are currently not being clearly communicated to workers.

This preliminary study demonstrates that workers have divergent views regarding the intersection of COVID-19 vaccination and work. As Australia's vaccination program expands, it will be important to understand these views to inform workplace policy and practice. Further research is required to unpack some of the complexities in this area, for example developing more detailed understanding of views on mandatory vaccination in specific jobs, and understanding employers' attitudes to vaccination and job role modification.

A study by the Arizona State University has shown that, internationally, employers have a strong support for COVID-19 vaccination, with 88% of employers planning to either require or encourage vaccination of employees, and with 60% of employers requiring employees to demonstrate proof of vaccination against (7). Additionally, we have seen businesses and venues begin to require members of the public to demonstrate vaccination status, such as the Excelsior Pass in New York, Green Pass in Israel, along with several others

internationally (8). In Australia, infection risk has been relatively low in the community with the overwhelming majority of COVID-19-positive cases being overseas travellers in quarantine facilities. As a result, the vaccination views of workers in Australia may differ to other countries where the risk of infection differs.

Our findings from a group of working-age Australians demonstrate that employers can play an important role during the vaccination of the workforce, and to keep workers and workplaces safe. The views of workers may change over time as the pandemic unfolds, including changes in perceived infection risk such as higher levels of vaccination nationally, future outbreaks, international borders opening to more travellers and re-vaccination. Further research is necessary to understand shape the future relationship between employers and COVID-19 vaccination of workers.

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SUMMARY DATA TABLES

TABLE 3. SUMMARY OF SURVEY RESPONSE DATA ON COVID-19 VACCINATION AND WORK

Statement	Number (%) of respondents			
	Agree	Disagree	Neither agree nor disagree	Refused / Missing / Don't know
Vaccine views				
The information I receive about vaccines from the government is reliable and trustworthy	275 (51.2)	97 (18.1)	145 (27.0)	20 (3.7)
I would get the COVID-19 vaccination even if I had to pay for it	324 (60.3)	100 (18.6)	90 (16.8)	23 (4.3)
Being vaccinated will improve my ability to participate in work	253 (47.1)	103 (19.2)	158 (29.4)	23 (4.3)
Occupational vaccine mandates and recommendations				
COVID-19 vaccination should be mandatory for:				
...high-risk groups such as health and aged care workers	409 (76.2)	68 (12.7)	52 (9.7)	8 (1.5)
...worker who interacts with the public as part of their job	349 (65.0)	98 (18.2)	83 (15.5)	7 (1.3)
...all workers	254 (47.3)	136 (25.3)	137 (25.5)	10 (1.9)
Unvaccinated workers should:				
...be discouraged from entering the workplace	200 (37.2)	177 (33.0)	149 (27.7)	11 (2.0)
...have changes to job roles that reduce their risk of infection	191 (35.6)	175 (32.6)	152 (28.3)	19 (3.5)
People who only work from home should not be forced to get the COVID-19 vaccine	115 (21.4)	256 (47.7)	154 (28.7)	12 (2.2)
Employers' roles and responsibilities				
Employers should:				
...be able to ask for evidence that their employees have been vaccinated	330 (61.5)	135 (25.1)	67 (12.5)	5 (0.9)
...be able to keep records about their employees vaccination status	326 (60.7)	151 (28.1)	53 (9.9)	7 (1.3)
...vaccines for their employees	343 (63.9)	91 (16.9)	100 (18.6)	3 (0.6)
...provide paid leave for vaccination	305 (56.8)	102 (19.0)	121 (22.5)	9 (1.7)
...be able to stop employees who have not been vaccinated from entering workplaces	165 (30.7)	226 (42.1)	125 (23.3)	21 (3.9)
...be able to stop members of the public who have not been vaccinated from entering workplaces	180 (33.5)	212 (39.5)	130 (24.2)	15 (2.8)
My employer has communicated a policy about vaccinations and work	121 (22.5)	207 (38.5)	100 (18.6)	109 (20.3)

TABLE 4. SUMMARY OF RESPONDENTS (DATA COLLECTED AT BASELINE)

Demographics	Number (%) of respondents
Gender	
Female	383 (71.3)
Male	152 (28.3)
Non-binary or gender diverse	1 (0.2)
No gender	1 (0.2)
Age Group	
18 to 24 years	20 (3.7)
25 to 34 years	53 (9.9)
35 to 44 years	66 (12.3)
45 to 54 years	165 (30.7)
55 to 64 years	194 (36.1)
65 years or older	39 (7.3)
State or Territory	
NSW	120 (22.3)
QLD	104 (19.4)
SA	40 (7.4)
TAS	26 (4.8)
VIC	196 (36.5)
WA	41 (7.6)
ACT / NT	10 (1.9)