

Kate C. Prickett and Simon Chapple

# Trust in Government and Covid-19 Vaccine Hesitancy

The long-term success of New Zealand's Covid-19 elimination plan and the re-opening of fortress New Zealand rests on high population uptake of the Covid-19 vaccine. Understanding factors that contribute to vaccine hesitancy – and potential inequities in access and uptake – are consequently essential for the efficacy of the national immunisation programme which began rolling out to the general population in July 2021. Prior research on the New Zealand context has documented socio-demographic disparities in Covid-19 vaccine hesitancy (Horizon Research, 2020; Prickett, Habibi and Atatoa Carr, 2021; Thaker, 2021). However, little research has been undertaken to examine how psychosocial elements – such as people's trust in institutions – might be associated with people's vaccine intent and cast some light on the reasons underpinning their intent.

Trust in government may be a particularly salient factor influencing people's vaccine intention. New Zealand's Covid-19 policy response has been hailed as one of the most successful in the world (Lowy

Institute, 2021). Combined with this, New Zealanders' existing and increasingly high levels of trust in the government, including during the Covid-19 crisis (Chapple and Prickett, 2019), suggest that the population

at large should be fairly amenable to information and guidance from the government about the vaccine. Despite this context, misinformation and conspiracy theories around the vaccine are significant features of the landscape (Menon and Thaker, 2020; Sharpe, 2021). This research note asks whether New Zealanders' trust in government is associated with Covid-19 vaccine acceptance or hesitancy, and whether this trust has an impact on the reasons for New Zealanders' vaccine intentions.

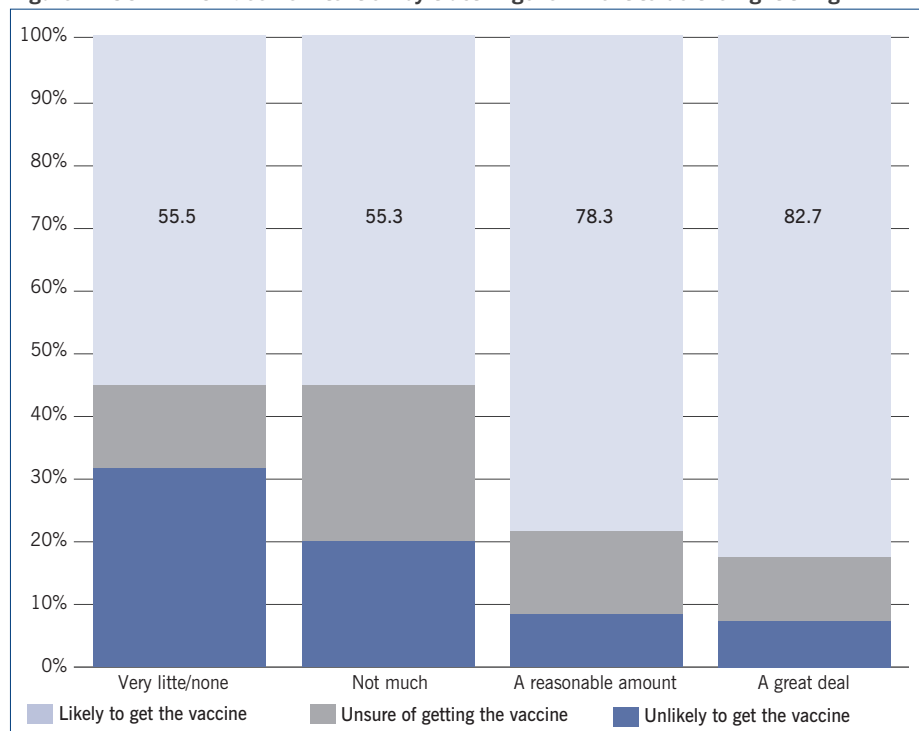
## Analysis

We use unique data collected in mid-March 2021 – the third wave of the *Life in Lockdown* survey (Prickett et al., 2020). The *Life in Lockdown* survey was first conducted in April 2020. It aimed to understand the economic and social impact of the alert level 4 nationwide lockdown on New Zealanders. Respondents were surveyed again in July 2020 when New Zealand was in alert level 1, and in March 2021. They were asked, among a range of other things, about their willingness to get the Covid-19 vaccine. Respondents reflect a diverse cohort of New Zealanders, who were reached through a large, pre-existing social marketing research sampling frame. The analytical sample for this research note's analysis included 1,284 people

---

Kate Prickett is director of the Roy McKenzie Centre for the Study of Families and Children at Victoria University of Wellington. Simon Chapple is director of the Institute for Governance and Policy Studies at Victoria University of Wellington.

Figure 1: COVID-19 vaccine intention by trust in government to do the right thing



Note: Predicted estimates from multinomial regression controlling for respondent age, gender, ethnicity, nativity, household income, educational attainment, family structure, work status, and region.

who had not exited the study by the third wave (losing 692 respondents) and who answered questions on vaccine intentions (losing 26 respondents).

At the time of survey, the nationwide roll-out of the Covid-19 immunisation programme was not yet underway. No survey respondents reported having received the vaccine. To gauge vaccine hesitancy, respondents were asked, ‘How likely are you to get vaccinated for the coronavirus (Covid-19) once the vaccine is available to you?’, with response options on a five-point scale ranging from ‘very unlikely’ through to ‘very likely’. Those reporting that they were unlikely to or unsure if they would get the vaccine were asked a follow-up question on the reasons why, from a predetermined list of response options. Those reporting they were likely to get the vaccine were asked in a follow-up question the reasons why, again from a predetermined list of response options.<sup>1</sup> Along with an array of socio-demographic variables, respondents were asked how much trust did they have in the government to do what is right for New Zealand, with response options on a four-point scale which included ‘very little/none’ (population weighted 6.1% of the analytical sample), ‘not much’ (15.9%), ‘a reasonable amount’ (57.3%) and ‘a great deal’ (20.8%).

Multinomial logistic regressions were used to estimate the association between trust in government and vaccine hesitancy, controlling for other factors that might be associated with both trust and vaccine hesitancy, such as gender, age, ethnicity, income and educational attainment. These models were used to construct predicted estimates of vaccine hesitancy at each level of government trust. These predicted estimates are presented in Figure 1.

*Trust in government is associated with greater vaccine acceptance*

Overall, 71% of the sample said they were somewhat or very likely to get the Covid-19 vaccine once it became available to them. While this figure is in line with other reports using data collected around this time, more recent studies have shown that the proportion willing to be (or who already have been) vaccinated is somewhat higher, at 77% (Ministry of Health, 2021).

In terms of trust in government, it was strongly inversely correlated with vaccine hesitancy (at  $p < .001$ ). More trust in government meant less vaccine hesitancy. For example, among those who said they had very little or no trust in government, 31% said they were somewhat or very unlikely to get the vaccine, 13% said they were unsure, and 56% said they were

somewhat or very likely to get the vaccine (Figure 1). Among those with the highest levels of trust – ‘a great deal’ – only 7% said they were unlikely to get the vaccine, 10% were unsure, and 83% said they were likely to get the vaccine once it became available to them.

*Among the vaccine hesitant, those less trusting of the government were more likely to say they were unlikely to get seriously sick from Covid-19 and that the pandemic is being exaggerated*

Among those who said they were unlikely to get the vaccine or unsure, the main reasons for being unlikely – worry about unknown future effects of the vaccine and about side effects – were cited at similar rates across the high and low trust groups. One prominent difference between high and low trust in government groups, however, was that low trust groups were far more likely to cite that the chances of them becoming seriously unwell from Covid-19 were low (22% vs 13% among those with high trust) and that they felt the impact of Covid-19 was being greatly exaggerated (18% vs 5%). Similar rates of the high and low trust groups cited that they did not trust vaccines generally (12–13%), suggesting that reasons for not getting the Covid-19 vaccine among those with high versus low trust in government were less about vaccination and more about potential misinformation about the Covid-19 pandemic specifically.

*Among those likely to get vaccinated, those more trusting of government were more likely to give prosocial reasons for getting the vaccine*

Among those who said they were likely to get vaccinated, high and low government trust groups both reported as the most popular reason for getting the vaccine was stopping themselves from catching Covid-19 or getting very sick from it (73% vs 71%, respectively). The high and low trust groups differed most, however, on reasons to do with protecting the community, with helping to allow their community to get back to normal cited as a reason by 58% of those with high trust in government and 44% of those with low trust, and helping to protect other people from catching Covid-19 cited by 69% of

the high trust group, but just 51% of those with low trust.

### Conclusion

Given robust association between trust in government and vaccine hesitancy, even after accounting for differences in the socio-demographic characteristics across high and low trust groups, it is

likely that trust in the government will continue to play a role in supporting New Zealanders' confidence in getting the vaccine, particularly among those most hesitant. On the other hand, it points to a substantial group of people for whom receiving information about the vaccine from the government directly may not be persuasive. Instead, finding other trusted

people or institutions, such as friends, whānau and their health practitioners, to engage with and address their vaccine-related concerns may provide more traction.

---

<sup>1</sup> Vaccine-related questions came from the UK Office for the National Statistics' Opinions and Lifestyle Survey.

### References

- Chapple, S. and K.C. Prickett (2019) *Who Do We Trust in New Zealand? 2016 to 2019*, Wellington: Institute for Government and Policy Studies, <http://researcharchive.vuw.ac.nz/bitstream/handle/10063/8255/trust-publication-2019.pdf?sequence=1>
- Horizon Research (2020) *Covid-19 Vaccine*, Wellington: Horizon Research for the Ministry of Health, [https://www.health.govt.nz/system/files/documents/pages/horizon\\_research\\_covid-19\\_vaccine\\_report\\_december\\_2020\\_final.pdf](https://www.health.govt.nz/system/files/documents/pages/horizon_research_covid-19_vaccine_report_december_2020_final.pdf)
- Lowy Institute (2021) 'Covid performance index', <https://interactives.lowyinstitute.org/features/covid-performance/>
- Lowy Institute (2021), 'Covid performance index', <https://interactives.lowyinstitute.org/features/covid-performance/>
- Menon, V. and J. Thaker (2020) *Aotearoa New Zealand Public Attitudes to COVID-19 Vaccine*, Wellington: Massey University, <https://mro.massey.ac.nz/bitstream/handle/10179/15567/Aotearoa%20New%20Zealand%20Public%20Attitudes%20to%20Covid-19%20Vaccine.pdf?sequence=1&isAllowed=y>
- Ministry of Health (2021) 'Covid-19 vaccine research insights: at a glance – June 2021', <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-vaccines/covid-19-vaccine-strategy-planning-insights/covid-19-vaccine-research-insights>
- Prickett, K.C., M. Fletcher, S. Chapple, D. Nguyen and C. Smith (2020) *Life in Lockdown: the economic and social effect of lockdown during Alert Level 4 in New Zealand*, working paper 20/03, Wellington: Institute for Governance and Policy Studies
- Prickett, K.C., H. Habibi and P. Atatoa Carr (2021) 'Covid-19 vaccine hesitancy and acceptance in a cohort of diverse New Zealanders', *Lancet Regional Health – Western Pacific*, 14, pp.1–23
- Sharpe, M. (2021) 'Covid-19 vaccines: DHB criticised Ministry of Health for rollout delays, warns of flourishing conspiracy theories', *Stuff*, 29 March, <https://www.stuff.co.nz/national/health/coronavirus/124684983/covid19-vaccines-dhb-criticised-ministry-of-health-for-rollout-delays-warns-of-flourishing-conspiracy-theories>
- Thaker, J. (2021) 'The persistence of vaccine hesitancy: Covid-19 vaccination intention in New Zealand', *Journal of Health Communication*, 26, pp.104–11