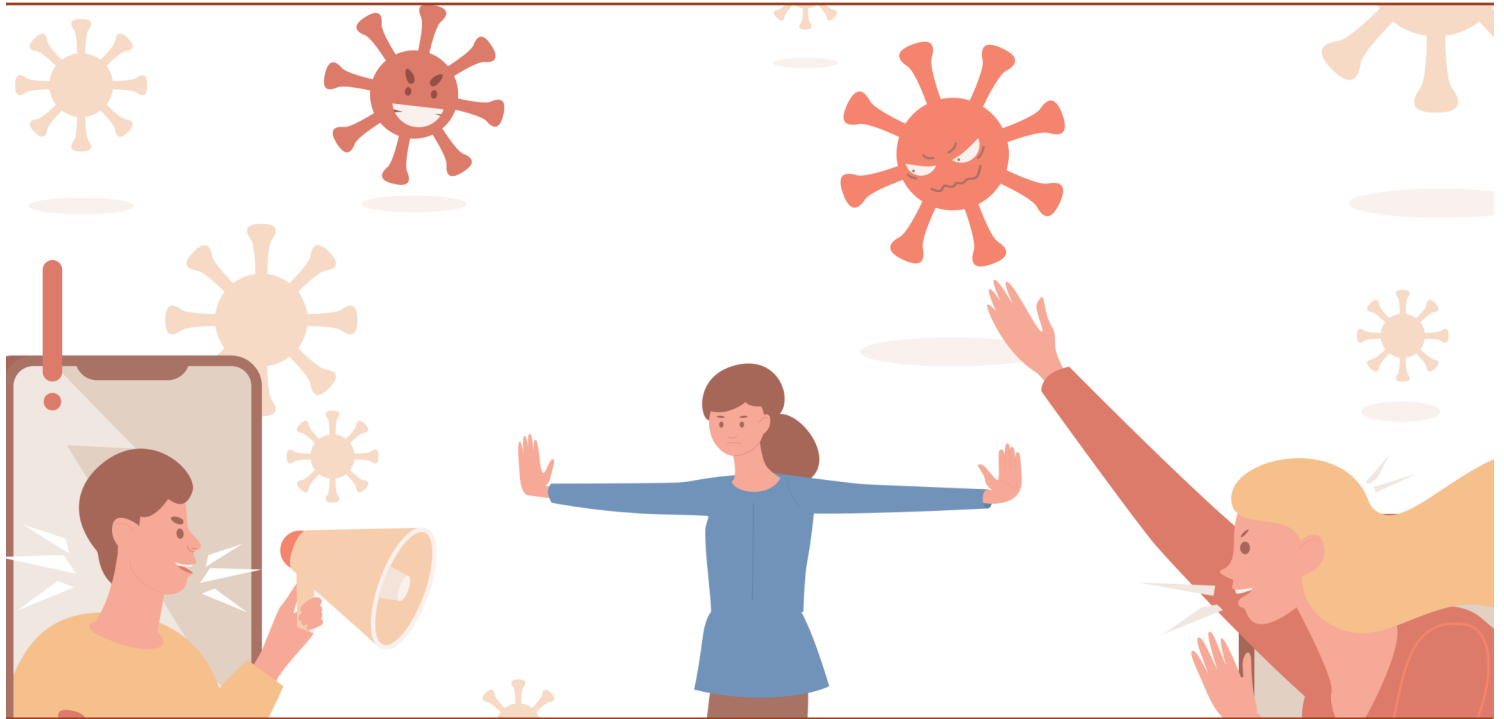


Coping with COVID

Distinguishing between vaccine fact and fiction



The COVID-19 crisis has been challenging for everyone, and devastating for many. The single most promising route back to normal life is the COVID-19 vaccine. While many millions of Americans have been safely vaccinated, millions of others have not, with many basing their decision not to get the vaccine on inaccurate or misleading information.

This guide is designed to help you:

- Overcome objections to getting vaccinated
- Explain why someone should get vaccinated
- Recognize and stem vaccine misinformation/disinformation
- Get a vaccination

Overcoming objections

The internet and social media help information—even if it’s inaccurate or misleading—spread very quickly. The prominence of rumors and unsubstantiated claims in Facebook feeds, on Twitter, and in biased or sensationalist media makes

it more difficult to distinguish fact from fiction.

These are a few examples of common COVID-19 vaccine misconceptions:

I’ve already had COVID, so I don’t need the vaccine.

Even those who have already had the coronavirus should get vaccinated. First, the immune response after having the disease isn’t as strong as the defensive response that comes from vaccination. Also, the higher antibody levels resulting from vaccination are usually associated with longer-lasting protection and will provide a greater cushion of protection against some of the variants that are spreading (<https://www.healthline.com/health-news/why-you-need-to-get-vaccinated-even-if-youve-already-had-covid-19#Experts-react-to-Pauls-statement>).

The vaccine will give me coronavirus.

None of the authorized vaccines in the U.S. contain the live virus that causes COVID-19. This means that a COVID-19 vaccine *cannot* make

you sick with COVID-19 (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html>). Minor symptoms following vaccination, such as a fever, are normal signs that the body is building protection against the virus that causes COVID-19. Because it typically takes two weeks for the body to build immunity after the final vaccination, it is possible that a person could be infected with the coronavirus just before or just after vaccination and still get sick.

The vaccine was developed so quickly, it can't possibly be safe.

While it's true that the vaccine was fast-tracked in response to a global health crisis, scientists weren't starting from scratch; the research behind the vaccines had been conducted over the previous decades. Money (\$12.4 billion from the federal government by December 2020), focused work, and the support and resources of the National Institutes of Health enabled the development of COVID-19 vaccines that are safe and effective (<https://khn.org/news/article/ask-khn-politifact-how-can-covid-vaccines-be-safe-when-they-were-developed-so-fast/>).

I could have a life-threatening reaction to the vaccine.

A life-threatening reaction is very unlikely. Nearly 200 million people in the United States have safely received at least one vaccine dose (as of early July 2021) (<https://covid.cdc.gov/covid-data-tracker/#vaccinations>). The U.S. Centers for Disease Control (CDC) estimates that anaphylaxis, a potentially life-threatening allergic reaction, occurs in up to 11 cases per million doses. Since it usually occurs soon after vaccination, those who get vaccinated are observed for at least 15 minutes, during which an allergic reaction can be treated with epinephrine (an EpiPen) (<https://www.health.harvard.edu/blog/covid-19-vaccines-safety-side-effects-and-coincidence-2021020821906>).

The COVID vaccine will alter my DNA.

Both mRNA (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/mrna.html>) and viral vector (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/viralvector.html>) COVID-19 vaccines deliver instructions (genetic material) to our cells to start build-

ing protection against the virus that causes COVID-19. However, the material never enters the nucleus of the cell, which is where our DNA is kept. That means the genetic material in the vaccines cannot affect or interact with our DNA in any way.

COVID-19 is no worse than the seasonal flu, and since I don't get the annual flu vaccine, I don't need to get this one.

While it's true that some people who contract COVID-19 are fortunate to experience only mild symptoms, it is not true that the coronavirus is no worse than the flu. The CDC (<https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm>) has found that the coronavirus spreads more easily than the flu, can cause more serious illnesses in people, can take longer before symptoms appear, can be contagious for longer, and can result in long-term symptoms. A study of U.S. Department of Veterans Affairs data found that those with COVID-19 were nearly five times more likely to die than flu patients, were four times more likely to require breathing machines, were nearly 2.5 times more likely to be admitted to intensive care, and stayed in the hospital an average of three days longer than flu patients (<https://www.webmd.com/lung/news/20201218/covid-19-is-far-more-lethal-damaging-than-flu-data-shows#1>).

I don't have insurance, and I'm afraid I might get charged for the vaccination, even if they say it's free.

The federal government is providing the COVID-19 vaccine free of charge to everyone who wants one, regardless of immigration or health insurance status, at least through 2021. This is true whether you get the vaccine at a pharmacy, a community health center or a mass vaccination site. Unless you receive other services from a healthcare provider at the time of your vaccination (such as an examination, or advice for a medical issue), you will not be charged. If you do get a bill for a COVID-19 vaccine, and you did not request or receive additional services, don't pay it while you work out the error with your provider or insurer. (Depending on where you

got your COVID-19 vaccine, you might receive an “Explanation of Benefits”—a health insurance statement showing all services provided—but it may not be a bill.) If you think your doctor billed you inappropriately for a COVID-19 vaccine, ask for a refund, or contact the U.S. Department of Health and Human Services’ inspector general by calling 800-HHS-TIPS or visiting <https://oig.hhs.gov/fraud/report-fraud/>. Learn more at GoodRx.com (<https://www.goodrx.com/covid-19/how-much-will-the-coronavirus-covid-19-vaccine-cost>).

When faced with vaccine hesitancy, experts’ tips include focusing on vaccine acceptance and the benefits of vaccination, dispelling misinformation with facts, putting potential side effects in context (<https://www.jsi.com/5-effective-messaging-strategies-to-encourage-covid-19-vaccination/>), and avoiding shaming or arguing (<https://bit.ly/3woLGUS>) and politics and partisanship (https://debeaumont.org/wp-content/uploads/2020/11/Poll-Toolkit_1pger.pdf).

Why get vaccinated?

The sooner the U.S. achieves herd immunity—widespread resistance to the virus—the sooner the country can get back to normal, pre-pandemic life. One of the two ways to achieve herd immunity is through vaccination. (The other is in-

fection, which, unlike vaccination, carries the risk of serious illness or death.) Once a large enough portion of the community (the herd) is immune, the entire community is protected—even those who *can’t* get the vaccine, such as infants. Over the decades, herd immunity achieved through vaccination has slowed or stopped the spread of all sorts of contagious diseases, including smallpox, polio, diphtheria and rubella.

Without herd immunity, COVID-19 will continue to be a threat, and family members, friends and neighbors—particularly those who are elderly or have compromised immune systems—will be left at greater risk of sickness and death. Our communities, including struggling businesses, would be unable to recover from the crisis.

In addition to protecting others, getting vaccinated is the best way to protect yourself, even if you have already had the coronavirus. New strains of the virus—variants—may render the natural defenses resulting from earlier infection ineffective, while the vaccines are believed to still provide a good amount of protection. And if you do contract the virus, you’re less likely to experience serious illness or die. As of June 2021, those dying from COVID-19 in the U.S. were “overwhelmingly” unvaccinated, according



to National Institute of Allergy and Infectious Diseases Director Dr. Anthony Fauci (<https://www.cnn.com/2021/06/23/health/us-coronavirus-wednesday/index.html>).

Once you're fully vaccinated, you can resume many of the activities you did before the pandemic. And there are other benefits, such as not having to get tested or self-quarantine before or after travel within the U.S. (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>).

While getting the vaccine is a personal choice, choosing *not* to get it is a personal choice that has far-reaching consequences. Every person who gets vaccinated plays a vital role in moving the country forward and helping to build herd immunity.

Recognizing and stemming misinformation/disinformation

Misinformation (inaccurate) and disinformation (intentionally misleading) has become more rampant. Here are some tips for vetting the information you hear and read.

Consider the source. Remember that anyone can post anything on the internet. Before trusting information you find online, check that it comes from a credible source. In the case of vaccines, trusted sources include government health agencies (the U.S. Centers for Disease Control, the World Health Organization and the National Institutes of Health, for example); unbiased news outlets (NPR, the *New York Times*, the *Washington Post* and CNN, for example); and respected independent medical organizations (Kaiser Permanente/Kaiser Family Foundation, Johns Hopkins and the Mayo Clinic, for example). UCSF offers some tips for "Evaluating Health Information" (<https://www.ucsfhealth.org/education/evaluating-health-information>). Media Bias/Fact Check (<https://mediabiasfactcheck.com>) ranks media sources on how biased they are.

Look for confirmation. Check if mainstream media, like major newspapers and television channels, have covered the information (<https://news.psu.edu/story/650429/2021/03/09/how-spot-covid-19-vaccine-misinformation>). If no mainstream news outlets are covering the story, odds are good that the claims are false or unproven. Also check the author and any sources cited (claims of the vaccine

being dangerous often come from known anti-vaxxers who believe that there is no good vaccine). Doing an online search for a particular claim (for example, asking "Is it true that [insert vaccine-related claim]?") will produce results from many sources, which will allow you to make a more informed judgment about the accuracy of the information. Online fact-checking resources such as Snopes.com (<https://www.snopes.com/>) and FactCheck.org (<https://www.factcheck.org/>) can usually confirm whether a story or quote is legitimate or not.

Don't trust social media for health information. Social media is the source of much of the disinformation being spread about vaccines (including that they can magnetize you or alter your DNA [<https://www.njspotlight.com/video/covid-19-vaccines-dont-magnetize-you-fighting-misinformation-on-social-media/>]). The Center for Countering Digital Hate identified 12 people—the "Disinformation Dozen"—who are responsible for the bulk of the misleading claims and outright lies about COVID-19 vaccines that proliferate on Facebook, Instagram and Twitter (<https://www.npr.org/2021/05/13/996570855/disinformation-dozen-test-facebooks-twitters-ability-to-curb-vaccine-hoaxes>).

Broaden your "feed." In addition to enabling anyone to spread unverified health claims with the click of the "share" or "retweet" button, social media platforms make it easy to limit yourself to information sources that closely align with your beliefs and viewpoints, making it more difficult to recognize misinformation/disinformation when you see or hear it (<https://www.wired.com/story/facebook-twitter-echo-chamber-confirmation-bias/>). Ask yourself if the company you keep is influencing you to believe false claims.

Question whether you're getting the whole story. There is often a kernel of truth even in predominantly false claims. For example, anti-vaxxers latched on to the World Health Organization's recommendation not to vaccinate children under 12 for COVID-19 (<https://www.wfla.com/community/health/coronavirus/who-children-shouldnt-be-vaccinated-for-covid-19-right-now/>), spinning it as an admission that the vaccine is dangerous to children. What they left out was the part of WHO's statement that said that more testing needed to be done on COVID-19 vaccines in younger children and that, because children tend to experience mild dis-

ease symptoms compared to adults, vaccines should be prioritized to those with conditions, healthcare workers, and older individuals. Be aware that biased sources often “cherry-pick” the data that supports their false claims, presenting information out of context or with crucial omissions.

For a list of vaccine messaging tools and information, read Consumer Action’s **Coping with COVID: Coronavirus vaccination outreach resources for community-based organizations** (<https://www.consumer-action.org/english/articles/Countering-Vaccine-Lies>). The information is useful to community educators and anyone trying to overcome vaccine hesitancy.

Getting vaccinated

The vaccine is widely available. Anyone 12 or older, in any state, is eligible to be vaccinated. To find a COVID-19 vaccination location near you, use the Vaccines.gov search tool (<https://www.vaccines.gov/search/>), text your ZIP code to 438829, or call 800-232-0233 (TTY: 888-720-7489). You’ll learn the vaccination location’s web address, phone number and hours of operation; the types of COVID-19 vaccines available there; and the next step to take to get vaccinated. (If you speak a language other than English or Spanish and need help finding a vaccine

provider near you, or you have general questions about the COVID-19 vaccine, call 800-232-0233.)

You can also check vaccination availability through your state health department (<https://www.cdc.gov/publichealthgateway/healthdirectories/healthdepartments.html>) or a participating pharmacy (<https://www.cdc.gov/vaccines/covid-19/retail-pharmacy-program/participating-pharmacies.html>).

Learn more at Vaccines.gov (<https://www.vaccines.gov>). The site also lists transportation and childcare support available to make it easier for you get vaccinated, as well as programs that reward people for getting vaccinated (<https://www.vaccines.gov/incentives.html>).

About Consumer Action

www.consumer-action.org

Through education and advocacy, Consumer Action fights for strong consumer rights and policies that promote fairness and financial prosperity for underrepresented consumers nationwide.

Consumer advice and assistance: Submit consumer complaints to: <https://complaints.consumer-action.org/forms/english-form> or 415-777-9635.

(Spanish-language complaints can be submitted to: <https://complaints.consumer-action.org/forms/spanish-form/>.)

Our hotline accepts calls in Chinese, English and Spanish.

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