

# COVID-19 vaccination-trust is earned when actions meet words

*“One of the key drivers of vaccination is public trust. Trust must be earned. Vaccine confidence is strongly shaped by the voices of politicians, journalists, influencers, faith leaders, family and friends, and often channelled through social media. #GlobalVaccineConfidence” – Dr. Tedros Adhanom Ghebreyesus, Director General of World Health Organization, June 2, 2021<sup>[1]</sup>*

The contemporary world witnesses an anti-authoritarian, anti-establishment, social media-driven atmosphere where people raise questions - sometimes having a rationale and otherwise none. And when the pandemic of a century struck us like a bolt from the blue, our world was not prepared for the assault.<sup>[2]</sup> Despite the less-than-perfect or optimal or even satisfactory environment around; healthcare workers, scientists, frontline workers, essential workers, and several known/unknown groups made a herculean effort to tide over the crisis. And one of the landmark events in our joint fight against the coronavirus disease 2019 (COVID-19) pandemic was the development of a vaccine.

But as ours was a divided society even before the pandemic arose, vaccine uptake got a hit and in this background, the investigators assess acceptance and adverse effects following COVID-19 vaccination among healthcare workers at a healthcare center in (one of the) most backward districts of India.<sup>[3]</sup> Now, still, when the pandemic is going on, albeit, at a slow speed, strains are emerging, to deal with them we need more such studies to have more ground-level information taking into consideration our social realities and preconceived notions of masses. Because only then we will be able to better strategize to cover the population under a safety net and be able to reduce R0 (reproduction number) below one consistently.

The authors write in the *Discussion* that as their district has a larger share of the Muslim population, the uptake of vaccines is less. However, they examined healthcare workers in the hospital for the study and not the patient population. Hence, there is some contradiction with the *Results* therein. As much information I could get on the website of the hospital,<sup>[4]</sup> there is a fair share of the majority there drawing a salary although a more detailed National Medical Commission (NMC) inspection report may have been more beneficial.

Nonetheless, what we need to probe is the actual reason for the poor uptake at the beginning of the vaccination drive - a period

that the researchers cover in the study. Besides several factors mentioned by the authors correctly, I want to add a few more reasons, which demand the attention of the scientific community around. Editors of the *Journal* expressed their views on this topic last year which merit further consideration now while inspecting this matter.<sup>[5]</sup>

The authors state in the *Discussion* that those respondents who developed some symptoms following vaccination stayed at home. To the best of my knowledge, our government does not provide sick leave for this indication and contractual workers get none.<sup>[6]</sup> But as we learn the symptoms to be there, we want authorities to pay their attention and devise some way to encourage healthcare workers to get vaccinated and get rest if few among them develop some symptoms. I believe that this way of thinking may prove to be more useful than to compel them by repeatedly preparing their list where those who decide to remain unvaccinated are marked separately.<sup>[7]</sup>

This press release related to the COVID-19 bulletin of the Government of India on July 1, 2021, has several figures, which depict the number of cases, the number of daily new cases reported, and then a figure shows the number of active cases since (during) last 49 days (then). The figures show that the number of cases started to rise around Mar 6 which we now recognize as a huge second wave.<sup>[8]</sup> And an interesting aspect of the wave is that Uttar Pradesh (UP) conducted its Panchayat election then. And when some teachers and other employees succumbed afterwards, the government refused to pay any compensation to them.

Then the matter went up to the Supreme Court of India and kith and kin of the deceased got some relief.<sup>[9]</sup> I want to emphasize that such squabbling after the death of the breadwinner of a family erodes the trust of society in the system and every possible attempt should be made not to repeat such mistakes in the future. When authorities make wrong rules to recognize what constitutes a COVID death—which are not supported by scientific evidence—those standing at the borderline to make up their minds about immunization may decide to play safe: in this case, may opt out of the game and remain unprotected. It is easy for those occupying high office to confuse someone who does not know much but aftershocks of the process may shake the system.

During year 2022 Monsoon Session of our Parliament, the Union Minister of Health and Family Welfare, Government of India was asked how many doctors died due to COVID in India. And the Minister replies that they do not have such a number.<sup>[10]</sup> Such continuing tussle between doctors' bodies and

the Government does not build confidence among onlookers who may get bewildered by the scenario.<sup>[11]</sup>

The authors mention the Covishield vaccine in Introduction and consider it to be developed by the Serum Institute (of India). I want to clarify here that when developing vaccines around the world began immediately after cases of COVID-19 were reported from China and Chinese researchers shared its genome on a public platform, vaccine developers faced several challenges during the process. When AstraZeneca company with Oxford University of the UK launched clinical trials in several countries for its vaccine candidate in 2020, cases of transverse myelitis cropped up.<sup>[12]</sup> Then the company temporarily halted the trials, got reviewed by the Data Safety and Monitoring Board, and then went ahead.

After a few weeks when the company announced its trial results, it mentioned the sites of the trial on its website.<sup>[13]</sup> Here I want to add that neither our country is mentioned in the press release nor anywhere the trial got halted nationwide. Therefore, it is wrong to believe ourselves to be developers of the product. Adar Poonawalla, CEO of Serum Institute of India made a foresighted contract to manufacture the vaccine, and credit is due to him for his endeavor.<sup>[14]</sup> Hence, there is a need to correct the factual misunderstanding.

In Table 1 (Available from: <https://journals.lww.com/jfmpc/pages/imagegallery.aspx?year=2022&issue=06000&article=00155>) of the Results, the authors illustrate barriers for not taking vaccines in non-vaccinated responders. And the list includes certain diseases and physiological conditions. To put the record straight, I want to clearly highlight that barring hypersensitivity there is virtually no such barrier.<sup>[15]</sup>

Vaccines are the best protective measures, our shield, available to mankind to save itself against the scourge of infectious illnesses. But the world we inhabit has fault lines and has certain biases, incomplete information and sometimes deliberately fed misinformation, and few authorities lack basic knowledge on how to use resources wisely, equitably and justifiably. Through discussion, deliberation, learning from each other, and mutual dialogue, we may strive towards filling the gaps, making others wiser, and expanding vaccine coverage. Such studies may prove to be useful landmarks in our shared journey.

Let us hope for a utopia where nobody dies of vaccine-preventable diseases, people have unbiased, prudent, and satisfactory information, and scientists make transparent, honest, and joyous conversations where both sides respect each other's views. I have an ambition that we will clear all the doubts for every person regardless of her social, economic, political, or religious status or views and the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) would not further exploit our division to gain a foothold.

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## References

1. Dr Tedros, on Twitter. Available from: [https://twitter.com/DrTedros/status/1400148307226284037?s=20&t=jWQ1zMB\\_xF8ajXTtLVL-ow](https://twitter.com/DrTedros/status/1400148307226284037?s=20&t=jWQ1zMB_xF8ajXTtLVL-ow). [Last accessed on 2022 Aug 01].
2. COVID-19: US. Vaccine confidence rises though sceptics remain, survey says. New York Times, Mar 30, 2021. Available from: <https://www.nytimes.com/live/2021/03/30/world/covid-vaccine-coronavirus-cases>. [Last accessed on 2022 Aug 01].
3. Sharma A, Jain M, Vigarniya M. Acceptance and adverse effects following COVID19 vaccination among the health care workers at a health care centre in the most backward district of India. *J Family Med Prim Care* 2022;11:3224-9.
4. Shaheed Hasan Khan Mewati, Government Medical College, Nalhar, Nuh. Available from: <https://www.gmcmewat.ac.in/>. [Last accessed on 2022 Aug 01].
5. Raina SK, Kumar R. Identifying role of public health and primary care as disparate entities in current health system. *J Family Med Prim Care* 2021;10:3531-4.
6. Kumar S, Gupta H, Verma SK. Dealing with Covid -19: Lessons from China. *Indian J Med Ethics* 2020;V: 169-70.
7. 'No vaccination, no salary' for government employees in UP's Firozabad. *Hindustan Times*, June 2, 2021. Available from: <https://economictimes.indiatimes.com/news/india/no-vaccination-no-salary-for-government-employees-in-up-s-firozabad/articleshow/83167566.cms>. [Last accessed on 2022 Aug 01].
8. PIB's bulletin on COVID-19, 1 July 2021. Available from: <https://pib.gov.in/PressReleasePage.aspx?PRID=1731983>. [Last accessed on 2022 Aug 01].
9. Singh K. Uttar Pradesh to compensate kin of 1071 teachers, 949 staff who died of COVID on poll duty. *Times of India* July 16, 2021. Available from: <https://timesofindia.indiatimes.com/city/bareilly/finally-up-to-compensate-kin-of-1071-teachers-949-staff-who-died-of-covid-on-poll-duty-up-from-3/articleshow/84452016.cms>. [Last accessed on 2022 Aug 01].
10. Express News Service. No data on doctors who died of COVID, says Centre; IMA claims over 1600 deaths. *Indian Express* 26 July 2022. Available from: <https://www.newindianexpress.com/nation/2022/jul/26/no-data-on-doctors-who-died-of-covid-says-centre-ima-claims-over-1600-deaths-2480916.html>. [Last accessed on 2022 Aug 01].

11. Mascarenhas A. IMA flags 800 doctor deaths in second wave. Indian Express. 1 July 2021. Available from: <https://indianexpress.com/article/india/ima-flags-800-doctor-deaths-in-second-wave-7383639/>. [Last accessed on 2022 Aug 01].
12. Wu KJ, Thomas K. Astra Zeneca pauses vaccine trial for safety review. New York Times. Sep 8, 2020. Available from: <https://www.nytimes.com/2020/09/08/health/coronavirus-astrazeneca-vaccine-safety.html>. [Last accessed on 2022 Aug 01].
13. Astra Zeneca. AZD 1222 Vaccine met primary efficacy endpoint in preventing COVID-19. 23 Nov 2020. Available from: <https://www.astrazeneca.com/media-centre/press-releases/2020/azd1222h1r.html#>. [Last accessed on 2022 Aug 01].
14. SII CEO Adar Poonawalla explains why Covishield production likely to be slashed by 50%. Mint. 8 Dec 2021. Available from: <https://www.livemint.com/companies/people/sii-ceo-adar-poonawalla-explains-why-covishield-production-likely-to-be-slashed-by-50-11638929164783.html>. [Last accessed on 2022 Aug 01].
15. Ministry of Health and Family Welfare. Frequently asked questions. last updated on 25 Mar 21. Available from: [https://www.mohfw.gov.in/covid\\_vaccination/vaccination/faqs.html](https://www.mohfw.gov.in/covid_vaccination/vaccination/faqs.html). [Last accessed on 2022 Aug 01].

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