

COVID-19 Vaccination Hesitancy Among Marginalized Communities: Oncology Nurse Clinicians' Role in Fostering Community Engagement

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In the United States, historically marginalized groups carry higher burdens of chronic disease like cancer and shoulder disproportionate mortality and morbidity from COVID-19. COVID-19 vaccination is associated with fewer COVID-19 cases, deaths, and complications; however, uptake is low among marginalized groups. Oncology nurses are well positioned to form close connections with marginalized communities to improve vaccination uptake, particularly for those affected by cancer. This article offers recommendations to promote engagement among these groups to improve COVID-19 vaccination uptake.

AT A GLANCE

- People with cancer have an increased risk of infection from the COVID-19 virus.
- Historically marginalized communities experience higher burden of infections and complications from COVID-19 and are less likely to receive COVID-19 vaccination.
- Oncology nurses are well positioned to foster trust and authentic partnerships to reduce vaccination hesitancy in marginalized communities.

KEYWORDS

COVID-19; vaccination; racial and ethnic minority groups; marginalized groups

DIGITAL OBJECT IDENTIFIER

10.1188/24.CJON.107-111

The COVID-19 pandemic led to life-threatening complications and strained healthcare systems to the point that basic healthcare services were disrupted locally and worldwide (Jazieh et al., 2020). Patients with cancer have an increased likelihood of contracting severe infection with the COVID-19 virus (Abuhelwa et al., 2022; Nadkarni et al., 2021). Severe COVID-19 is associated with death, respiratory complications, and other infections (Lai, Ko, et al., 2020; Lai, Shih, et al., 2020; Lai & Yu, 2021; Zhao et al., 2020). COVID-19 mortality rates may be as high as 21.2% in patients with cancer compared with 8.7% in patients without cancer (Erdal et al., 2021).

Prior pandemics have demonstrated the importance of vaccination (Rauch et al., 2018); it is critical in ameliorating infections. For patients with cancer, particularly those undergoing hematopoietic stem cell transplantation, there are concerns about whether they can mount appropriate immune responses after receiving the COVID-19 vaccine (Cazeau et al., 2022; Elkrief et al., 2022). Nevertheless, the general recommendation is that patients with cancer should be vaccinated against COVID-19, with different vaccination schedule recommendations depending on whether a person's immune system is weakened; patients are recommended to discuss with their healthcare provider to determine the appropriate set of recommendations for them (American Cancer Society, 2023). Unvaccinated individuals are more likely to have recurrent infections than fully vaccinated individuals after initially contracting the COVID-19 virus (Cavanaugh et al., 2021).

Historically marginalized groups, such as underserved racial and ethnic groups including Black and Hispanic individuals, have at points during the COVID-19 vaccination rollout been less likely than White individuals to receive vaccination; over time, these gaps have narrowed and even reversed for Hispanic individuals (Ndugga et al., 2022). As of May 2023, about 51% of non-Hispanic Black individuals had received at least one dose of the COVID-19 vaccine compared to about 67% of Hispanic/Latino individuals and about 57% of non-Hispanic White individuals. However, disparities remain for updated COVID-19 booster doses among adults with a completed primary