



Title	Analysis of COVID-19 Vaccine Communication Among Transnational Filipino Families Using Family Systems Theory
Author(s)	FACUN, Maria Adelina Marzan
Issue Date	2024-03-30
Doc URL	http://hdl.handle.net/2115/91558
Type	other
Note	修士論文のうち要旨と目次のみを公開するもの; 科学技術コミュニケーション研究室 修士論文コレクション 5
Additional Information	There are other files related to this item in HUSCAP. Check the above URL.
File Information	SC_ssnLab-Master5_Madel.pdf



[Instructions for use](#)

北海道大学
大学院理学院自然史科学専攻
科学コミュニケーション講座
科学技術コミュニケーション研究室
川本グループ

修士論文コレクション

5



2024年3月30日

本ファイルは修士論文のうち、要旨と目次のみを公開するものです。
全文を閲覧したい場合は、以下のいずれかにご連絡ください。
当研究室 <https://ssn.cambria.ac/contact>
物理図書室 <https://phys.sci.hokudai.ac.jp/jp/about/library.html>

2024 Master's Thesis

Analysis of COVID-19 Vaccine Communication Among Transnational Filipino Families Using
Family Systems Theory

Division of Science Communication, Department of Natural History and Science
Graduate School of Science, Hokkaido University
Science and Technology Communication Laboratory
20223121 FACUN Maria Adelina Marzan

Table of Contents

Title Page	1
Abstract	4
Chapter 1 Introduction: COVID-19 and vaccine hesitancy	6
1.1. A brief history of vaccines	7
1.1.1. Vaccination as a public health tool	7
1.1.2. Vaccine controversies	8
1.2. Vaccine hesitancy	10
1.3. Addressing vaccine hesitancy from a science communication perspective	12
1.4. COVID-19 vaccination in the Philippines	13
1.5. Summary of Problem	15
Chapter 2 Frameworks for analyzing transnational family communication	17
2.1. Family communication	17
2.2. Transnational families and communication	18
2.2.1. Transnational caregiving and family communication	18
2.2.2. Previous studies on transnational family communication	19
2.3. Family Systems Theory	20
2.3.1. Previous studies on family communication about health.....	22
Chapter 3 Methodology and description of the 7 transnational family cases	24
3.1. Transnational Filipino families	24
3.1.1. Filipinos in Japan.....	24
3.2. Sampling and Interview Methods	25
3.2.1 Sampling	25
3.2.2. Interview.....	26
3.2.3. Ethical considerations	26
3.3. Qualitative description of data.....	27
3.3.1. Qualitative content analysis.....	27
3.4. The 7 transnational adult children in Japan	28
Case 1: Ana and vaccine rejection in the family	30
Case 2: Ben and a persisting hesitancy in the family	31
Case 3: Kay and hesitancy in the family.....	32

Case 4: Dan and his influential father and family	33
Case 5: Ella and her scientist family	34
Case 6: Gin and long-time long-distance family	35
Case 7: Henry and two siblings.....	36
3.5. Vaccination decisions of the 7 family cases	36
Chapter 4 Factors influencing vaccine decisions and types of vaccine communication....	38
4.1. Details of vaccine communication in transnational Filipino families	38
Case 1 Family: Vaccine rejection	38
Case 2 Family: Changing and conflicting opinions.....	39
Case 3 Family: One scientist.....	42
4.2. Factors affecting vaccine decisions	43
4.2.1. Factors affecting vaccine acceptance	43
4.2.2. Factors affecting vaccine hesitancy and rejection	45
4.2.3. Other factors affecting vaccine decisions	49
4.3. Types of transnational family communication of vaccines.....	50
4.3.1. Influence strategies to promote vaccination	51
4.3.2. Influence to delay vaccination	54
4.3.3. Relaying information.....	55
4.3.4. Responding to concerns and questions	55
4.3.5. Non-influence	56
Chapter 5 Transnational family communication of vaccines from a systems perspective .	57
5.1. Family communication of vaccines among transnational Filipino families	57
5.2. Towards a more effective family communication of vaccines	61
5.2.1. Construction of causal loop diagram	61
5.2.2. Interpretation of the causal loop diagram	62
5.3. Summary and research implications	65
Acknowledgements	67
References.....	68
Appendix	74

Abstract

The millions of deaths, economic losses, and social disruptions caused by the COVID-19 pandemic led to clamor and eagerness for COVID-19 vaccines at the early stage of the pandemic. However, when COVID-19 vaccines became available, vaccine hesitancy or the delay or refusal to vaccinate despite availability of supply was prevalent. Vaccine hesitancy is not a new phenomenon and has existed even before the pandemic. It was declared a global health threat by the World Health Organization in 2019. Vaccine hesitancy is a decision-making process influenced by several contextual factors. It is critically important to understand these factors as well as analyze vaccine communication processes in order to improve public health.

This research aims to analyze factors influencing vaccine decisions that result in acceptance, hesitancy and rejection. Specifically, I examined the influence of transnational Filipino family communication in vaccine decisions of individual family members.

In Chapter 1, I introduced the COVID-19 global pandemic and the view that vaccines are needed in order to end it. I also summarized the historical context of vaccine success stories and controversies in the world and in the Philippines, followed by previous studies on vaccine hesitancy. These studies have shown that regular approaches to address vaccine hesitancy are lacking and do not target hesitancy itself. These approaches are usually based on knowledge-deficit models that focus on increasing information and awareness and these need to be revised.

In Chapter 2, I summarized frameworks for studying family communication (Galvin, 2016) and transnational caregiving (Baldassar, 2007) as well as the Family Systems Theory. I argued that transnational caregiving is also a form of family communication that is done transnationally. Hence, the transnational communication of vaccines is a form of caregiving from transnational family members and can be analyzed using family communication theories such as the Family Systems Theory. In light of increasing numbers of transnational families and the importance of families as a readily available source of health information, it has become paramount to focus on communication processes of families separated by borders.

In Chapter 3, I described how I recruited and interviewed participants in this study, along with ethical considerations. I interviewed 7 transnational Filipinos living in Japan and 3 non-transnational family members in the Philippines resulting in a total of 7 family cases. Four of the 7 cases were selected from 22 respondents to a questionnaire survey and 3 were referred

by acquaintances. Lastly, in this chapter, the seven families including their members were described with their basic information, their relationships, and their vaccination status.

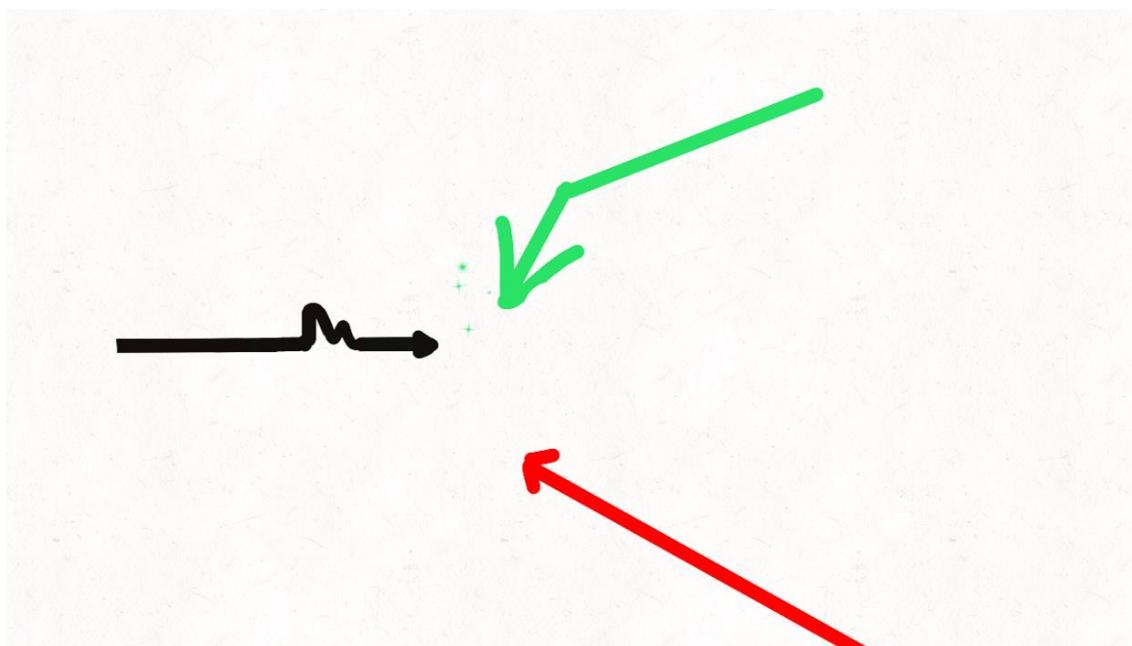
In Chapter 4, 15 factors affecting vaccine decisions were identified. These factors were almost the same as those in previous research. Among these is types of family communication. I analyzed family communication of vaccines and identified 5 types: (1) influence strategies to promote vaccination, (2) non-influence, (3) relaying information, (4) giving caution, and (5) answering questions. An important sub-type of influence strategies is the non-communication of hesitancy, which is used by transnational family members who prefer that their families be vaccinated despite their own hesitancy. They hide their vaccine status through self-censorship and geographic distance, and continue explicitly persuading their family members to get vaccinated. Similarly, non-influence involved the non-communication of negative vaccine sentiments of vaccine rejecters, who refused the vaccine for themselves, but allowed their families to make their own decisions without exerting influence.

In chapter 5, using Family Systems Theory as a theoretical framework, I discussed factors that affected transnational communication of vaccines and summarized how vaccine communication affected vaccine decisions of family members by using a causal loop diagram. Overall, vaccine communication was shown to reinforce existing vaccine beliefs of individuals. Hence, those who had positive vaccine beliefs are more likely to accept the vaccine when a vaccine acceptor gives them influence. Conversely, those who had negative beliefs are more likely to reject them. However, they could be convinced to accept the vaccine through social pressure in stressful situations. Family communication can also serve as a venue of discussion when members openly relay their concerns and allow others to clarify them and give reassurances.

In conclusion, this research generated important and in-depth case studies that provided a better understanding of how family communication can influence vaccine decisions of individual family members. The non-communication of hesitancy and anti-vaccine sentiments within families in this study also contributed to existing literature in transnational family communication about vaccines. This study was limited by the sampling method used; hence it is recommended to conduct further research that widens the scope of the subjects and increases the number of cases.

Key words: COVID-19, vaccine hesitancy, transnational family communication, vaccine communication, Family Systems Theory

Alternative Inscription of Research



Changing minds

(GIF animation)

Making a decision or making up one's mind is a difficult and complex process. Along the way, people may come and try to influence others through communication. Sometimes, those who influence are important and powerful people who are considered experts. Some can be enticed and immediately follow. Some may pick up ideas from this process of communication, but do not necessarily become fully convinced. Others may just pretend to listen, ignore, or even be silenced by strong and dominating ideas.

This research is about the process of vaccine communication which became an important occurrence during the COVID-19 pandemic. In this research, its complexities along with the intricacies of changing people's minds were examined.

Alternative Inscription of Research (AIR: 研究の代替的銘刻)とは、科学技術コミュニケーション研究の科学技術コミュニケーションとして自らの研究を論文以外の形式で記録・表現したものです。