00:00:03 Speaker 1

OK. Do you work for our healthcare system?

00:00:07 Speaker 2

Yes, I work for the Department of Health.

00:00:15 Speaker 1

Yeah.

00:00:18 Speaker 1

Can you please introduce yourself a little and tell me about your age, occupation, educational background and how long have you lived in this city?

00:00:30 Speaker 2

Yeah. So I'm Alex Guzman, 31. I live in Anchorage, AK, and I've lived here for a year. I'm the public information officer for the Alaska Department of Health, which means I manage all of our social media, press releases, external communications.

00:00:49 Speaker 1

And you how? How long have you lived in this city?

00:00:54 Speaker 2

A year?

00:00:55 Speaker 1

Uh. A year, OK.

00:00:55 Speaker

Aye.

00:00:59 Speaker 1

How do you think about vaccines generally? I mean, all kind of vaccines, including COVID, or is it different for you or not?

00:01:10 Speaker 2

For me it's not different so long. I mean, I trust in all vaccines as long as they're backed by the FDA and doctor recommendations.

00:01:18 Speaker 1

Mm-hmm.

00:01:21 Speaker 1

What about people around you? I mean, your colleague, your family, your community around you. How do they think about vaccines? And have you ever seen any body around you that hesitate? Vaccines.

00:01:38 Speaker 2

So like in my close circle, I would say everyone's in support of vaccines.

00:01:45 Speaker 2

Especially working for the Department of Health, it tends to skew more towards people who bless them and know about them. But I so for my job I do travel to rural Alaska a lot and rural Alaska has they have healthcare systems, but in some places they're incredibly new.

00:02:03 Speaker 2

They don't trust or understand Western health care in the same way. So for them there's a little bit more hesitancy not because they don't, it's not intrinsically like vaccines. They don't trust. It's that it's it's so new to them. So like, they're like, well, we've been doing it this way forever.

00:02:18 Speaker 2

Why do we need this new thing?

00:02:21 Speaker 1

And because, especially for your job, it was COVID vaccine was somehow obligatory. Did you see anybody around you, any of your colleagues that because they didn't want to get vaccine, they leave their they left their jobs?

00:02:38 Speaker 2

So our department did not have a requirement, as far as I'm aware, so no one had to leave jobs. I do know I I don't think anyone in the department didn't get vaccinated.

00:02:53 Speaker 2

I do know some people had really bad reactions to the first ones, like allergic reactions and things like that, so they didn't get follow-ups. But that then becomes like, that's a medical exception versus actual choice.

00:03:05 Speaker 1

I see.

00:03:07 Speaker 1

And what about about social media? Do you think people in Alaska will be like under the influence of misinformation from social media, or do you think they believe the information from social media?

00:03:27 Speaker 1

In such as serious topic like COVID vaccination, disease, they do, they believe it.

00:03:36 Speaker 2

I think those who don't believe it are very hard, but non believers and those who do believe it do try their best to try to educate people. I don't think we have a very large like on the fence population. I think people will kind of are more towards you know a majority of the state and our population is vaccinated.

00:03:57 Speaker 2

And has boosters and all that jazz, but there is a very large echo Chamber of negativity around vaccine posts, and it can seem on social media that there's so much negativity around it, but in reality it's just.

00:04:12 Speaker 2

On social media, the negative people outweigh the positives.

00:04:16 Speaker 2

So you know, for me and my job, I try to do my best to play, but I see people who are, like blatantly saying incorrect medical information. We will correct that if they're sitting in their opinion.

00:04:27 Speaker 2

I will leave.

00:04:29 Speaker 1

Do you think social media is a good way?

00:04:32 Speaker 1

To convince people to get vaccine, I mean, if like government or healthcare policy makers want to put some budgets on it, do you think it's a good idea to put some budget and like producing some content or something?

00:04:53 Speaker 1

To convince people via social media.

00:04:58 Speaker 2

I think so because.

00:05:00 Speaker 2

So many people are on social media nowadays, and if you really put time and effort into it, you'll you'll be able to reach target audiences better simply saying.

00:05:10 Speaker 2

Here's a COVID.

00:05:10 Speaker 2

Vaccine. Go get it. You're instantly going to have people who are saying, I don't. I don't understand why and the government is just telling me to do this thing I don't and they're scared. It's not so much that they.

00:05:20 Speaker 2

Don't think it's medically necessary. They have to. Just don't understand. So if you take, if you spend some money to take the time to figure out how to target audiences, you can do a lot more on social. Maybe you do a lot better. And I think that's the main thing is.

00:05:34 Speaker 2

That especially with.

00:05:36 Speaker 2

COVID the rollout was so it seems so quick to people.

00:05:40 Speaker 2

But there is no communication of like it actually isn't. It's been in, you know, the works for so long, but it seems much faster. This is the first time we've had, like, new vaccines in our lifetime kind of thing. But we've started doing that a year and a half after. So we had kind of lost people already.

00:06:00 Speaker 2

So really planning that out ahead of time and thinking you know what?

00:06:05 Speaker 2

What? Why people are so.

00:06:06 Speaker 2

Scared. Everything is changing. What can I do to make you feel more comfortable?

00:06:10 Speaker 1

I see and because because of your job and you may see lots of people and you may talk to lots of people about vaccines. Have you ever heard these comments like, because we are living in a remote area, government is.

00:06:30 Speaker 1

Tasting vaccine this vaccine on us.

00:06:34 Speaker 1

For example, government is less worried for us than other people from other states. Have you ever heard these kind of comments?

00:06:45 Speaker 2

For sure in various forms. You know if you're living in remote Alaska, it is very different than living anywhere. I mean, living in Alaska is very different than living in the lower 48. And then if you're living in remote Alaska, it's very different than living in Anchorage. And there is a lot of distrust in the government in rural Alaska.

00:07:04 Speaker 2

As in generations past, they have used indigenous peoples as testing grounds for medical things, so there's a lot of distrust because they're like, OK, what you doing now? And so there's a lot of recovery still happening from that. It's definitely I don't want to say going away, it's becoming less and less.

00:07:25 Speaker 2

Because we are trying so hard to show that we we care and that we are trying to atone from mistakes that have happened in the past.

00:07:32 Speaker 2

And we do. And you know, we understand that we, as the Alaska Department of Health are not the ones that people are going to trust. But in Alaska, we have tribal health systems that are run by the individual tribal units. They'll ask them and they will. And so people in rural areas are more likely to trust.

00:07:50 Speaker 2

Medical information coming from their.

00:07:52 Speaker 2

Cool.

00:07:53 Speaker 2

Healthcare systems, so we work with our tribes to say, OK, this is this is what's happening.

00:07:58 Speaker 2

Can you give this information out to your people in a way that they will understand they will trust and they will, you know, hopefully do so. It's less of, you know, our marketing with our logo on it and us giving the information to the tribes to give out and the tribes.

00:08:14 Speaker 2

Do that and that is way more successful for us than us coming in as the Alaska Department of Health and come saying do this thing.

00:08:22 Speaker 1

You mentioned something about testing some vaccines or some medical things and people maybe long years ago.

00:08:35 Speaker 1

Do you have any information of it or is there anything that I can read about it?

00:08:40 Speaker 2

I don't know it super well because I'm still fairly new to the state so I don't.

00:08:45 Speaker 2

Have anything specific?

00:08:46 Speaker 2

For you, I do know that Alaska, we still have tuberculosis as an epidemic in in rural parts of Alaska. And for parts of that time. And, you know, previous generations.

00:09:00 Speaker 2

Yeah, it was kind of just like, man, it's fine. You don't really need to focus on it, but people were dying from tuberculosis way after people were dying from tuberculosis in the lower 48.

00:09:12 Speaker 2

And so now, like for one of these states, it has like massive tuberculosis program still because we still deal with tuberculosis every day, OK.

00:09:20 Speaker 1

See.

00:09:23 Speaker 1

Uh, so uh.

00:09:25 Speaker 1

Let me ask another question about somehow policy making question.

00:09:32 Speaker 1

Is there any NGO or any kind of non governmental group that work in health topics in Alaska? I mean some some NGO's who are very active like working about vaccination, working on vaccine hesitancy or something like that.

00:09:53 Speaker 2

I'm sure there are. I don't know them as well.

00:09:59 Speaker 2

A lot of our like for the Alaska Department of Health, we do our messaging and we partner with tribes and trying to think of if we partner with anyone else, oftentimes we partner with like boys and girls clubs and things like that for vaccine clinics for youth and that's honestly just for COVID. But just like, you know, kids every year.

00:10:19 Speaker 2

Do for all these different vaccines. So we'll do like host vaccine clinics with like boys and girls clubs, other after school organizations, especially organizations that work work with.

00:10:31 Speaker 2

Lower income families you may not have the ability to just go to a primary care to get these vaccines.

00:10:37 Speaker 2

And I'm blanking on any names.

00:10:38 Speaker 2

Of them.

00:10:40 Speaker 1

OK.

00:10:42 Speaker 1

What about infrastructure and healthcare system satisfaction? Do you think people mostly are satisfied with the healthcare system in Alaska? Is it accessible? Is it affordable for most of the?

00:10:58 Speaker 1

Well.

00:11:00 Speaker 2

So that's a very difficult question because if you live somewhere like anchorage, like if you live in the city, so Anchorage has over half of the population of Alaska. And so we have a majority of the specialists in Alaska. So if you live here in Anchorage, you're, I don't want to say set, but you have a better chance of getting the care you need. But we are still.

00:11:20 Speaker 2

Short of specialists like for me personally, I need to see an endocrinologist. I cannot get an appointment with endocrinologist.

00:11:27 Speaker 2

Here so I have a primary care Doctor Who thankfully is like comfortable with dealing with I with what I have. So otherwise I would have to potentially go out of state to get an endocrinologist and that's not uncommon up here in Alaska a lot of.

00:11:47 Speaker 2

And so, since the other half of Alaskan flip outside of these main areas, they have to fly in now our rural areas and our tribal organizations have really great.

00:11:59 Speaker 2

Travel programs like they like they have entire Staffs that are deal with, like getting people on the flights, getting people, hotels, getting people. You know, we have that infrastructure built, but it's definitely a challenge and very, very different than living in the lower 48. So I think most people would probably say like.

00:12:20 Speaker 2

And in Anchorage, like the healthcare system is good, you're going to wait a while, but it's good overall because we understand it's so different, like living out for now laugh that we would not have the same accessibility living elsewhere in Alaska. It's hit or miss like I know in southeast Alaska. Like, you know, they're closer to Seattle. So they will just fly to Seattle because it's easier for them.

00:12:41 Speaker 2

Like they have some specialness.

00:12:42 Speaker 2

But you know, they're just. They're closer. It's easier than flying even to anchor.

00:12:46 Speaker 2

Which?

00:12:47 Speaker 1

I think it's not still enough, even even in Anchorage. It could be improved.

00:12:53 Speaker 1

OK, exactly.

00:12:54 Speaker 1

Yeah, imagine that you are an.

00:12:59 Speaker 1

Healthcare system policy maker and you have a single budget you want to put it in one of these sites. The first site is infrastructure and like I mean building hospitals, bringing specialists.

00:13:17 Speaker 1

These things and the other side is doing some, I mean social based or community based activities for trust making. Which one do you prefer? Which one do you think is more needed for Alaska?

00:13:38 Speaker 2

I think if you're talking from a government standpoint, I think the government would be better off spending their money on bringing people into the state, working on that infrastructure, because we do have really great nonprofits who are working.

00:13:49 Speaker 2

On that.

00:13:50 Speaker 2

Connectivity and we do have the tribal governments who work on making sure that people feel comfortable and safe in their medical environments and our government does have really good programs we have.

00:14:02 Speaker 2

Can look it up. We have a program that's made for if you come work in a rural setting and you're a certain type of, it's like all doctors and all nurses and then you'll get reimbursement like you'll get extra money that you can pay back to your student loans with for working there ex number of years kind of thing.

00:14:22 Speaker 2

And I know that program is really popular, but also working on slick recruiting people from the lower 48 of like different style like we have our public health nursing program like they travel to rural villages. So they're somewhere different every day, which is like a really unique nursing style and can bring in a lot like a lot of younger people who are like.

00:14:41 Speaker 2

I wanna see I wanna travel. I wanna do.

00:14:43 Speaker 2

More and like this.

00:14:44 Speaker 2

Is a perfect place to do it.

00:14:47 Speaker 2

So yeah, that's how I was in the like.

00:14:49 Speaker 1

OK. Thank you. Uh, when you were not in Alaska, you you were working in healthcare system too, right?

00:14:57 Speaker 1

OK.

00:14:58 Speaker 2

So I worked in Maryland and I worked for a local government. I wasn't specifically in healthcare, but I worked with the county commissioners who worked with the health department.

00:15:09 Speaker 1

Comparing with the previous place that we live in Maryland, these say much more vaccine hesitancy in Alaska or not. Do you feel something that ohh here it's different really. People are hesitant about like things.

00:15:27 Speaker 2

I think it's honestly about the same. I don't think Alaska is that much more hesitant than anywhere else. It just seems like it because there's so few people that like the the louder people who are hesitant about it. You just hear them a lot more.

00:15:42 Speaker 1

Yeah, you can see them more, yeah.

00:15:45 Speaker 2

Yeah.

00:15:46 Speaker 1

As a as a person who work in healthcare system, what do you think? How do you think about the solutions? For example, maybe it becomes from a?

00:16:00 Speaker 1

Very dictatorial idea, for example, get it obligatory and put people on force to get it or to, for example, give money to people. Give any kind of incentives to people. What kind of solutions do you think will work for Alaska?

00:16:20 Speaker 2

Alaska and Alaskans in general are for anything, whether anything you talk about, it's less government. So I think that's the biggest thing is just less government in there.

00:16:33 Speaker 2

So, you know, I pathetically, he had more money to spend on immunizations and getting people vaccinated is really working with, like, local organizations who can cater that message to the specific areas of like, this is like, Ketchikan needs to get the pertussis vaccine or.

00:16:52 Speaker 2

The COVID vaccine, or whatever it may be because everywhere is so unique. And if you say if you like, it's so funny that like if I create a social media post and I use a picture of anchorage, anyone who lives outside of Anchorage is.

00:17:07 Speaker 2

Like.

00:17:07 Speaker 2

Not for me. They aren't talking about me.

00:17:11 Speaker 2

If I use a picture of Bethel, then everyone will be like Oh well, I don't live in Bethel. I live in Nome. I live in Michigan like you're you're missing the point. I'm just trying to have a generic social media picture, so it's very individualized here. And, you know, it's very community centered.

00:17:31 Speaker 2

I think it's less.

00:17:33 Speaker 2

From the top and more from the communities of saying like This is why and I think we do see that really well, like right now last is dealing with outbreak and what's the outbreak we're dealing with a really high number of whooping cough cases and it's not me or my team being able to say anything to people that are changing their minds on getting vaccinated or like keeping their kids home from school.

00:17:55 Speaker 2

Under.

00:17:56 Speaker 2

Sick. It's the community organizations that are saying like when you were sending your sick kids to school, you were making our teacher sick. When you make our teacher sick, this happens. And when this happens like.

00:18:07 Speaker 2

Making it more community focused and I you know, in a way that the state cannot.

00:18:20 Speaker 1

Imagine you want to put someone in Alaska as a leader to, like, persuade people to get vaccines. Which one do you think will work better? University professor, celebrity or religious leader?

00:18:39 Speaker 1

Which one do you think for? Alaskan people will work better.

00:18:46 Speaker 2

In those three choices, I would probably go with the religious leader, not so much because of the religious aspect of it, but as like a community leader, someone that the people in town, you know outside of except for Anchorage, which is so big. There are other towns where like it's 10,000 people, you know.

00:19:04 Speaker 2

Everyone in town.

00:19:06 Speaker 1

Uh-huh.

00:19:07 Speaker 2

And so you want someone that people are going to know and under and like a religious leader, even if you're not that denomination, you would know like ohh. It's, it's Bob. I, you know, I trust Bob. I go fishing with Bob every summer.

00:19:21 Speaker 2

I will listen to him even if he's not my, you know, my religious leader kind of thing.

00:19:27 Speaker 1

So you think some like community leaders or community? I don't know what they call it in Alaska. Yeah, community leaders, maybe a good word can can work for like a topic like vaccine hesitancy or persuade.

00:19:46 Speaker 1

People.

00:19:49 Speaker 1

Yep, OK. And let me see if other questions are left.

00:20:03 Speaker 1

And my final question is that is there any do you know or do you have aware of any kind of programs or strategies that you know healthcare system or you know healthcare system in Alaska is making?

00:20:19 Speaker 1

To reduce vaccine hesitancy, is there any kind of plan program in Alaska that you you're aware of?

00:20:27 Speaker 2

So the Alaska Department of Health, we have our immunizations program, and then we have, like, continual social media messaging. That's just trying to normalize it like this is just every week you will see something that's on vaccines, whether it's, I mean, like, right now it's talking about flu and COVID vaccines because they're just now rolling out during the summer. It's talking about getting your kids.

00:20:48 Speaker 2

Ready for back to school?

00:20:49 Speaker 2

Making sure all their vaccines are up to date. Just trying to like kind of normalize it across everything.

00:20:57 Speaker 2

And then I know if you talk to people who work in the tribal healthcare organizations, they also do similar messaging, but I don't know if they still do it. But I know during COVID they were doing it of like in if you get your COVID vaccine, you'll get either either get something just everyone gets the same thing, or you'll get entered into like a big raffle.

00:21:18 Speaker 2

Or something. And that raffle is for things like a barrel of oil, which is what they.

00:21:23 Speaker 2

Used to heat their.

00:21:24 Speaker 2

Houses and it's incredibly.

00:21:26 Speaker 2

Expensive in rural Alaska, so it's like it's a big deal. If you were to get a barrel of oil kind of thing.

00:21:34 Speaker 2

I know, I think they did that some. Some of them did that last year. I think. Who who's who's known?

00:21:41 Speaker 2

The tribal healthcare organization, and none that I'm forgetting. Ohh Norton Sound Health Corporation. Their immunization program was doing something like that. I'm sure. I don't know if they're going to keep doing.

00:21:50 Speaker 2

It like they're going to keep doing it.

00:21:53 Speaker 2

With COVID and flu every year, or if they they like, we're using special COVID money for it.

00:21:59 Speaker 2

But yeah, at this point we're just trying to make it normal like COVID is now just part of all the respiratory diseases of the winter of, like flu and colds and.

00:22:09 Speaker 2

All that so.

00:22:10 Speaker 2

When you get your flu vaccine like you've been getting for the last two decades, just be your COVID vaccine. Like it's just that. That's what it is now.

00:22:19 Speaker 1

I see. OK. Thank you. Uh, is there anything else you want to add about your, especially your experience, especially about local people, how they feel and?

00:22:32 Speaker 1

The reasons about vaccine hesitancy and what they how they talk about it.

00:22:41 Speaker 2

The only thing I'll add is, I mean, I spend 75% of my day on social media and you know we we there was a lot of conversations about like just turning comments off during COVID and even now especially when it comes to immunizations and to me.

00:22:57 Speaker 2

All the people on there, I mean you can go look on any of our. So you'll see the same people yelling at us and saying some really crazy things. But for me, I'd say most of those people, they're.

00:23:11 Speaker 2

They're coming from a place of emotions they don't understand, and they're just being very loud about it. And so it's I try to take it as a chance of what can.

00:23:21 Speaker 2

We.

00:23:21 Speaker 2

Do to not change that person's opinion, like that's not my goal because that's such a big thing to do. But just to make them feel more comfortable.

00:23:31 Speaker 2

Of OK, if you're not going to get a COVID vaccine, wash your hands. Stay home when you're sick. This is, you know, these are the other things you can do to protect yourself.

00:23:38 Speaker 2

You know, because they're just very like to me when you're yelling at me on social media, it just means you got a lot of emotions about something. So I will deal with your emotions and any way I can.

00:23:50 Speaker 1

OK. Thank you very much for your time. Uh, can I have your uh phone number so that I can send to our, like, financial part? Yeah. Thank you.