

## Vaccine Hesitancy as Lived Experience among Members of a Christian Community in the Philippines

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### ABSTRACT

*Vaccine hesitancy in a Christian community like the Jesus Christ the Eternal Savior International Ministries (JESIM) remained relevant in today's efforts to rise above the COVID-19 pandemic. The study uncovered how vaccine hesitant JESIM members construe COVID-19 vaccination in Sinayawan Valencia City, Bukidnon, Philippines. It also explored how their meanings define their hesitancy towards vaccination. This study employed purposeful sampling and conducted in-depth interviews using the conversational, storytelling approach. The saturation point was attained after interviewing 11 participants. Interviews were transcribed verbatim and analyzed through initial, axial, and selective coding. Two major themes emerged in the analysis: vaccination is a threat to health and the pandemic is God's call for repentance. These COVID-19 meanings led people to seek God's will on the circumstance through prayer, a dialogic form of communication between God and the JESIM members. Their communication resulted in three response actions such as strengthened their faith, trust in God's will, and practice proper stewardship that informed their decision to refuse COVID-19 vaccination. The lived experience purports that God has responded to them with signs and wonders, including miraculous healing and divine interventions. As all of them had already contracted and survived the COVID-19 virus, they perceived that God allowed them to experience it to demonstrate that He is the greatest of all and that He is capable of healing them in hopeless situations.*

**Keywords:** *JESIM, COVID-19 pandemic, prayer warriors, belief in God*

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## 1. Introduction

In the Philippines, the Department of Health (DOH) initiated a whole-of-society approach to launch the COVID-19 vaccine deployment and vaccination program. The government spearheaded the deployment and execution of the program, forging partnerships with the private sector and organizations like the Roman Catholic Church. Communication campaigns, including the #ChecktheFAQs: A Campaign to Fight Vaccine Misinformation were launched to counter misinformation about COVID-19 vaccination using various platforms. Hence, constant surveillance of the vaccination program was implemented in the country (DOH 2021). However, in Sinayawan, Valencia City, some households remained hesitant towards COVID-19 vaccinations despite campaigns based on the report of the health center. Most households were affiliated with a Christian group called Jesus Christ the Eternal Savior International Ministries (JESIM) where one of the researchers is connected. It is a type of Pentecostal religious organization registered with the Securities and Exchange Commission. JESIM is committed to journey with people through a discipleship process where members are exposed and trained with various spiritual practices anchored on biblical teachings that aim to advance the kingdom of God. In the whole system of discipleship, select members who are willing were chosen to become a part of the primary leaders. These leaders represent the demographics of the organization. These include leaders from adult men and women, married young adult men and women, young men and women, and leaders for kids. These leaders meet once a week for fellowships and meetings, and they assist the senior pastors in decision-making. The leadership style applied in this organization is participatory. Hence, the study sought to find out the reasons by understanding vaccine hesitancy as lived experience through phenomenology.

The phenomenological tradition in communication theory posits that communication is the experience of oneself and others through dialogue. Within this tradition, the concept of dialogue is understood as a means of explicating the communicative process as it takes place within experience (Pilotta and Mickunas 1990). People share authentic information drawn from experience through an unmediated dialogue. The meaning people make depends on their subjective interpretation of

their experiences (Mumby 1989). As humans create meaning with their experiences, they engage in transactional communication where they use signs and symbols to interpret their field of experiences (Adler, Rodman and DuPré 2012).

## **2. Vaccine Hesitancy during the COVID-19 Pandemic**

The DOH targeted to administer COVID-19 vaccination in the Philippines in March 2021 to at least 70 percent of the population. However, due to the tight supply of doses then, the target was lowered to 50-60 percent (DOH 2021). Reports revealed that during the surge of the COVID-19 pandemic, people were hesitant to receive the vaccine which could be attributed to the Dengvaxia controversy (Reyes et al. 2021). The dengue vaccine, which had previously been administered to the people, purportedly caused deaths among children who received the shot. The Philippines had high vaccine confidence rates previously (Larson, Hartigan-Go, and Figueiredo 2019). Thus, this posed a greater challenge on the health workers and health organizations in the country.

The United Nations Development Program (UNDP Philippines 2021) reported a higher percentage rate on the number of people who were hesitant to receive COVID-19 vaccines. Most common barriers to vaccine acceptance included people's concern on side effects, safety, vaccine's ineffectiveness, and cost. There was also the perception that other people needed it more than they did, distrust in government, and religious reasons (UNDP Philippines 2021). Other studies recommended to focus on creating more initiatives that fostered effective strategies to reduce vaccine reluctance, boost vaccination confidence, and support uptake of COVID-19 vaccination (Brackstone et al. 2022).

## **3. Religion and COVID-19 Vaccine Hesitancy**

Despite the overwhelming breakthroughs in science, a portion of the population has remained hesitant. One of the main contributing factors is religion. Religiosity is considered an essential indicator for decision-making in healthcare and has been linked to COVID-19 vaccination intention (López-Cepero et al. 2022). Greater level of religiosity was

associated with lower levels of vaccination intents. The most common reasons for religious organizations were trust and strong religious practices (Olagoke, Olagoke, and Hughes 2021). Adherents felt that they would not get the illness if they were committed to the appropriate religious ideas and had a strong faith in God (Gopez 2021). There were also those who believed that disease resulted from sins and God wanted to demonstrate God's power to the world (Tesfaw et al. 2021).

Hence, religion plays a major role in the acceptance or rejection of the vaccine. This decision depends on the moral principles being taught or engraved in the minds and hearts of religious followers (Tan 2022). People who are pious relied more on divine help, thus, felt more unyielding to COVID-19 vaccines (DeFranza et al. 2021). Religion is even considered a significant element of human life. People decide based on their religious beliefs. Understanding religion cannot be separated from the social context where it takes place. In other words, religion relates to and influences culture and communication (Croucher et al. 2017). Spiritual leaders discourage their congregants from getting vaccinated by drawing on various factors such as traditions, myths, customs, and other related aspects.

Vaccine hesitancy driven by religious beliefs could inevitably affect vaccination coverage (Kibongani Volet et al. 2022). Religious leaders were encouraged to spread awareness of health-related concerns and moral behavior in their religious communities (Bullini, Febo, and Perdichizzi 2022). The collaboration between the government and the church can make a strong partnership in promoting vaccination uptake.

Nonetheless, there is a paucity of evidence and specific examples on effective strategies for involving local spiritual leaders in enhancing vaccination rates. Consequently, there exists a dearth of widely shared knowledge on successful approaches, as well as those that are ineffective. While conducting a literature review, the researchers identified several gaps that require attention, including the limited application of rigorous research methodologies, and insufficient investigation into the relationship between religious affiliation and immunization beyond the Muslim and Christian faiths (Melillo et al. 2021).

#### **4. Theoretical Framework**

Phenomenology is an approach to understand hidden meanings and the essences of an experience together (Mautner et al. 2017). It seeks to describe the essence of a phenomenon by exploring it from the perspective of those who have experienced it. The aim is to explain the significance of this event in terms of what was experienced as well as how it was experienced (Neubauer, Witkop, and Varpio 2019). In phenomenology, it is important to acknowledge and respect differences, to learn from others, to seek common ground, and to avoid polarization and strategic dishonesty in human relations. It opens avenues to discover immediate understanding beyond words. Phenomenology upholds that the best way to communicate is through dialogue (Craig 1999). The communicative process as it occurs in the experience is presented in the phenomenological understanding of dialogue (Pilotta and Mickūnas 1990).

This research is more inclined to hermeneutic phenomenology by Martin Heidegger. Hermeneutic phenomenology is focused on the subjective experience of individuals and groups. It is an attempt to uncover the world as experienced by the subject through their life world stories (Kafle 2011). This could unveil the participants' experiences of COVID-19 through their narratives.

#### **5. Methodology**

The research design utilized phenomenology to capture and comprehend the lived experience of the study participants. The research was conducted in Sinayawan, Valencia City, Bukidnon, where the JESIM organization is located. Sinayawan has a total population of 7,006, with 1,421 households, of which 90 percent have already been vaccinated against COVID-19. However, the remaining 10 percent of households, which includes some who identify as Pentecostal, have strongly decided against taking the vaccine. As of 2022, JESIM had 120 family members, almost half of whom refused to receive the COVID-19 vaccine. Purposeful sampling was employed to select participants based on the following criteria: 1) membership in JESIM in Sinayawan; 2) receipt of various COVID-19 vaccination communication campaigns; 3) at least 18

years of age; and 4) members who had not yet received any COVID-19 vaccine (Table 1). As one of the authors being a member of JESIM, the study objectives were clearly discussed with the participants and were requested to sign an informed consent. They were also informed that they can stop anytime if they felt not comfortable doing the interview.

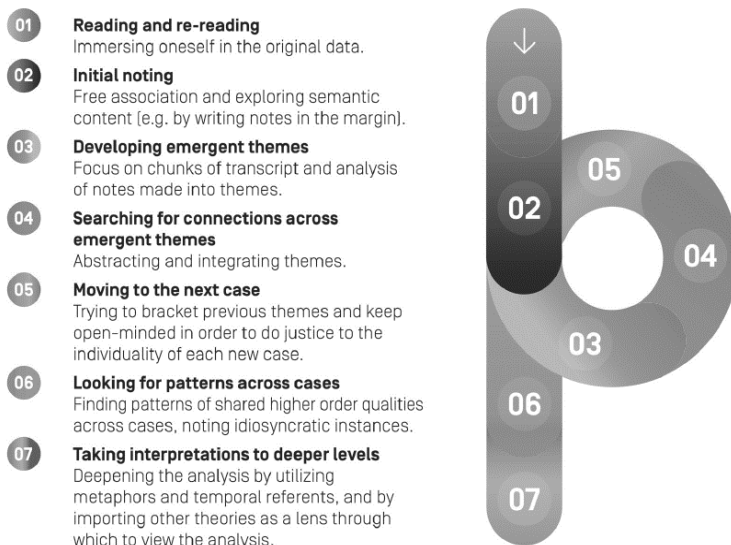
**Table 1. Description of participants**

Code Name	Age	Sex	Occupation	Role in the church	COVID-19 experience	Comorbidities
P-1	62	Male	Laborer	Member	Yes, 1 month recovery	Asthma
P-2	38	Female	Laborer	Member	Yes, 1 week recovery	None
P-3	63	Male	Farmer	Leader	Yes, 2 weeks recovery	None
P-4	31	Female	Homemaker	Member	Yes, 1 week recovery	Pregnant
P-5	40	Female	Homemaker	Member	Yes, 1 week recovery	None
P-6	67	Female	Laborer	Member	Yes, 1 week recovery	None
P-7	27	Female	Laborer	Member	Yes, 1 week recovery	None
P-8	48	Male	Business-man	Senior Pastor	Yes, 1 week recovery	Tonsilitis
P-9	56	Female	Business-woman	Senior Pastor	Yes, 1 week recovery	Asthma
P-10	82	Female	Farmer	Founder	Yes, 2 weeks recovery	Heart disease and UTI

Code Name	Age	Sex	Occupation	Role in the church	COVID-19 experience	Comorbidities
P-11	59	Female	Farmer	Member	Yes, 2 months recovery	UTI, PWD

## 6. Data Analysis

The research employed Interpretative Phenomenological Analysis (IPA). Data collected through in-depth interviews were analyzed following the IPA process (Figure 1). IPA is a flexible and dynamic method that enables the researcher to return to the interview data as needed and to focus on meanings throughout the process of analysis. It is concerned with the in-depth analysis of a person's lived experience and how that person makes sense of it (Pincombe et al. 2016). Interviews were transcribed verbatim, spent ample time reading and re-reading transcripts, and analyzed line by line for initial coding. Words or phrases were labelled based on interpretation of the participants' narratives. Codes were analyzed by looking at the connections or patterns of each code and grouped them into categories. The emerging categories were labeled to create themes.



**Figure 1. The Seven Steps of IPA Data Analysis** (Charlick, McKellar, Fielder, & Pincombe 2015 adapted from Smith et al. 2009).

## 7. Results

### **Meanings of COVID-19 vaccination as construed by JESIM members**

The analysis of the meanings of COVID-19 vaccination as constructed by JESIM members yielded two discernible themes. These themes are: 1) vaccination as a threat to health, and 2) the pandemic as a divine call for repentance.

#### **Vaccination as a threat to health**

The participants understood COVID-19 vaccination as a threat to their health primarily because of empirical observations. These observations include death casualties, severe side effects, and vaccination remorse. The sub-themes are as follows:

***Death casualties.*** The members shared several stories about people who died or who suffered severely from side effects after vaccination. They echoed that most people who died had comorbidities such as asthma or heart disease (P-5, Female, Church Member). Some JESIM members contended that even seemingly healthy individuals had died after receiving the COVID-19 vaccine. Based on their observations, the vaccine had significant adverse effects that caused gradual deterioration in people's health, ultimately leading to death. Others likened the vaccine to a toxin that impaired the immune system, leading to a gradual loss of physical strength and eventual death. These members believed that the vaccine posed a threat to their health, particularly their physical strength.

***Severe side effects.*** Members disclosed that every person they knew who got vaccinated suffered from severe side effects such as weakness or fatigue and disease complications. They also explained that many of the vaccinated people they knew in the community still acquired the COVID-19 virus. It implies that vaccination was unsafe, hence, a threat to their health. Some of these people were families and close relatives (P-10, Female, Church Founder; P2, Female, Church Member; P4, Male, Church Leader).



**Vaccination remorse.** In addition to reports of adverse effects from vaccinations, there were also accounts of vaccine regret. Members shared anecdotes of regret from individuals who had already received the vaccine, including members of their households, neighbors, friends, and co-workers. These stories of regret reinforced their belief that the vaccine posed a threat to their well-being. They claimed that vaccinated individuals expressed regret because their work performance had been negatively impacted, and they were no longer able to perform tasks as effectively as before. For individuals whose jobs required them to be exposed to sunlight, their physical strength was especially important, and they reported being less productive at work after receiving the vaccine (P-2, Female, Church Member; P-3, Male, Church Leader; P-5, Female, Church Member).

**Table 2. Members construction of COVID-19 vaccination**

Major Theme	Subthemes	Illuminating Quotes
Vaccine is a threat to health	Death casualties	<p>“Its [vaccine] main enemy is asthma and heart disease. They are weakened particularly those with asthma because they have low immune system...For me, vaccine is like a poison. They inject it to humans to kill them slowly.” (P-5, Female, Church Member)</p> <p>“For example, Auntie Linda was going around the neighborhood in the morning. When her stomach ached, she went for a check-up, but she had no vaccine yet. The case was different before because if you have no vaccine, you will be asked to get one before you will be checked by the doctor. So, she got vaccinated then she died immediately. She was healthy. In fact, she went here in the house to collect debt. She had a check-up, was injected with vaccine, that’s why she died.” (P-4, Female, Church Member)</p> <p>“They have many members who died because they forced them to get vaccinated. Many died after vaccination.” (P-9, Female, Church Senior Pastor)</p>

	Severe Side Effects	<p>“My sister-in-law was vaccinated but she got symptoms of COVID. Her health condition got complicated. Now, she is undergoing dialysis. After vaccination, her condition worsened. That’s why others would tell her that it’s better that she did not undergo vaccination.” (P-10, Female, Church Founder)</p> <p>“She said, after vaccination, it triggered her disease. I have seen many who after vaccination has become weak.” (P2, Female, Church Member)</p> <p>“It does not mean that when you get vaccinated you will no longer acquire COVID-19. I knew someone who still acquired the COVID virus after months of getting vaccinated. Useless. That’s why it is better not to be vaccinated because there is no assurance in the vaccine. It cannot protect you.” (P-4, Female, Church Member)</p>
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The group’s perception of COVID-19 vaccination as a danger to their health led to internal disagreements, including apprehension about potential vaccine side effects and concerns about being monitored by Barangay Health Workers (BHW) and the local COVID task force. Furthermore, some members developed doubts about the efficacy of the vaccine, as well as concerns about its components and the vaccination process.

***Fear of health workers.*** Other members have developed fear of the health workers, particularly the COVID-19 local task force and BHWs for their constant monitoring in the community. Consequently, when COVID-19 infected their households, they did not disclose any information to the health workers in their community. For them, it was better to die at home than to die in the hospital (P-5, Female, Church Member; P-1, Male, Church Member; P-4, Female, Church Member).

***Skepticism of vaccine’s effectiveness and composition.*** While some developed fear, others became skeptical of vaccines, questioning

their efficacy, components, and the government's incentive scheme for vaccination. Some even raised doubts about the origin of the vaccine components and the speed at which vaccines were developed, believing that more time was needed for proper study. They felt that humans were being used as experimental subjects without adequate testing on animals first. Some also believed that vaccines were not yet approved (P-1, Male, Church Member; P-4, Female, Church Member; P-5, Female, Church Member).

***Skepticism of government's vaccination strategies.*** The participants expressed skepticism about the government's vaccination strategies, including the "incentive scheme," "no vaccination, no government support" policy, and the "no vaccine card, no groceries and travel" rules. They perceived these strategies as desperate measures by the government and an indirect way of mandating vaccination. Some viewed them as forms of deception, while others saw them as opportunities for corruption and profiteering. However, many people they knew opted to get vaccinated due to fear of losing financial support or *ayuda* from the government, particularly those belonging to the poorest of the poor, or the 4Ps (Pantawid Pamilyang Pilipino Program) members and UCT (Unconditional Cash Transfer) beneficiaries.

***Skepticism due to misconception.*** Members held misconceptions about the efficacy of COVID-19 vaccines. They were told by the health department, particularly the Barangay Health Workers (BHWs), that vaccination was beneficial and would protect them from the virus, but what they observed was different from what they were told. This led to doubts about the trustworthiness of health workers and the government's support for COVID-19 vaccination. Although they claimed to respect the scientific community, they placed more trust in their observations within the community. These misconceptions heightened their skepticism of the government and contributed to their perception that the vaccine posed a threat to their health (P-4, Female, Church Member; P-11, Female, Church Member).

**Table 3. Barriers for the participants' vaccination uptake**

Major Theme	Subthemes	Illuminating Quotes
Intrapersonal conflicts	Fear of health workers	<p>“There are 18 of us here who got infected with the virus from kids to adults. But we kept silent because our neighbors got infected, too. If we die, we die as long as we are in our own houses.” (P-5, Female, Church Member)</p> <p>“During those times, the BHWs always monitors us. That’s why we kept quiet, we stayed in our house, and we never told them.” (P-1, Male, Church Member)</p> <p>That’s why we never had check-ups because we knew 100% that it was COVID. There were many who pass by here... wheeeoooo... wheeeoooo... wheeeoooo [sound of ambulance] in the road. But we kept silent even in our worse situation. Even Reggie [youth leader] went here to visit us during the time we were sick, he played guitar. After which he got sick and hospitalized diagnosed with COVID including his father and mother. We felt sorry for him because he had difficulty in breathing. When the local task force kept on roaming, we remained silent. We stayed inside our houses). (P-4, Female, Church Member)</p>

<p>Skepticism</p>	<p>Skeptical on vaccine's effectiveness and ingredients</p>	<p>"You know the vaccine is not yet approved but they injected it to people." (P-1, Male, Church Member)</p> <p>"It seems like the vaccine cannot be trusted. There seems to be no assurance yet because they are still under studies. You can't really say that it's okay... It's strange because I think it should undergo a series of studies before it's perfect. So, in our case, we have not placed ourselves in an uncertain situation because we are not sure where the ingredients of the vaccine came from." (P-4, Female, Church Member)</p> <p>"And they would not give us assurance once you get vaccinated. So, it means, we are still under experimentation? They gave it directly to humans? So, they are still experimenting to see if it's okay to people. If not, ahh, thank you with your life." (P-5, Female, Church Member)</p>
	<p>Skeptical on government's vaccination strategies</p>	<p>"But why would they impose it? It makes you doubt them. Also, they said you cannot receive any form of benefits when you are not vaccinated. But when you die, you will not also get the benefits, so it's the same." (P-4, Female, Church Member)</p> <p>"They are forcing us. We cannot receive the benefits of the government when we are not vaccinated. That's why the government is so shrewd." (P11, Female, Church Member)</p> <p>"Look at Doc Paul and the mayor, they distributed 10kls of rice in Batangan just bring one senior to be vaccinated. But they got COVID and was in critical condition." (P-5, Female, Church Member)</p> <p>"Then what you hear being reported in the radio are death cases caused by COVID-19 virus not those who died caused by the vaccine. Not good." (P-1, Male, Church Member)</p>

## 8. Pandemic as God's Call for Repentance

Aside from seeing the vaccine as a threat to their health, these members perceived the COVID-19 pandemic as a divine call for repentance. They believed that the pandemic was a consequence of people's sins, including disobedience and idolatry. They further held that people could only surmount the crisis by turning back to God and repenting. In their view, repentance was the essential means to overcoming the pandemic since God would heal the land if people humbly sought His forgiveness.

***Disobedience.*** The participants drew a connection between the current pandemic and biblical events of the past. They cited how plagues were inflicted upon people in the time of the Israelites' exodus and later during the era of prophets such as Jeremiah, as a consequence of their disobedience. According to the participants, God remains consistent in His ways, and the events unfolding today can be seen in the Bible. They maintained that people's sins indicate their disregard for God's teachings, and that God sends messages of repentance through situations such as the pandemic. The members argued that the pandemic was God's way of calling people to seek Him and to know Him better. They added that during challenging times, humans tend to call upon God's name, even if they do not fully understand who He is (P-10, Female, Church Founder; P3, Male, Church Leader; P-4, Female, Church Member).

***Idolatry.*** Members believed that God is a jealous God who desires to be worshipped alone. They observed that instead of trusting in God, people turned to other sources for knowledge and strength. Consequently, God sent plagues to make people realize and call out to Him. Members emphasized that if people would repent and call on God's name, He would answer and bring healing to the land. They explained that during the pandemic, many people were forced to seek and depend on God, especially during lockdown. They also noted that idolatry was not only about worshipping other gods, but also about being too focused on work and forgetting to seek God. Members believed that if people continued to harden their hearts, more similar cases would occur. Therefore, they stressed that repentance played a crucial role in overcoming the pandemic (P-10, Female, Church Founder; P-11, Female, Church Member; P-3, Male, Church Leader).

**Table 4. Members construction of COVID-19 vaccination**

Major Theme	Subthemes	Illuminating Quotes
Vaccine is God's call for repentance	Disobedience	<p>“That has been written already in the bible that there will come a plague because of the sins of people. But these are ways of God so that people would call on him. All things that happened are considered as God's ways so that people would learn to seek him because He is powerful. It is His way to call people to repent, turn from their wicked ways and come to Him... They disobeyed God's word and did not believe on Jeremiah but everything Jeremiah said happened to them. That's why all these things are happening because people are unconscientiously sinning and disobeying God. But it is always the nature of man to call unto God when things go wrong in their lives. Though others would call God even without knowing who God really is. (P-10, Female, Church Founder)</p> <p>“What's happening now is not new anymore. This is God's way so that man would come to their senses and to call upon His name. You know people nowadays are very sinful. Even Christians compromise to sinful acts. Look at the TV now, most shows are about adultery. That's why we do not watch TV now. Since they started airing shows related to adultery, people treat it as a normal thing. This is not good. God will not be happy with that.” (P3, Male, Church Leader)</p> <p>“God is pruning people because of too many sins. (P-4, Female, Church Member)</p>

## 9. Discussion

The participants in this study constructed meanings based on their observations of others in their community. Therefore, it can be inferred that these meanings were socially constructed. The participants' perceptions and actions towards new things, such as the COVID-19 vaccine, were greatly influenced by what they observed from those who had undergone vaccination, as well as the information they received from

them. In addition, their spiritual beliefs also played a role in how they defined situations. Members of JESIM were taught to live their lives according to biblical principles, and this included sending their children to Sunday school and engaging in discipleship programs based on biblical foundations. The organization aimed to develop individuals who would become disciples of Jesus Christ. Thus, it can be inferred that the participants' worldviews were influenced by their spiritual upbringing, and their creation and interpretation of meaning were also informed by their spiritual beliefs, shaped by their exposure to their organization's spiritual norms.

The primary spiritual norm in JESIM is prayer or communication with God. This regular communication is viewed as a dialogic interaction that fosters a personal relationship between God and JESIM members. Through their continuous communication with God, these members have developed three crucial response actions to cope with their experiences and understanding of COVID-19 vaccination. These include: 1) strengthening their faith in God; 2) having faith in God's plan; and 3) practicing proper stewardship.

***Strengthened faith in God.*** Members have reported that through their prayers, God has responded to them with signs and wonders, including miraculous healing and divine interventions. As all of them had already contracted and survived the COVID-19 virus, they perceived that God allowed them to experience it to demonstrate that He is the greatest of all and that He is capable of healing them in hopeless situations. They testified that as they called upon His name, God healed them. Some members have mentioned that their experience with the virus has strengthened their faith in God and in His protection through the immune system He has given to humankind. They argued that their protection was not due to the vaccine, but to God, as they have experienced and proved it. This experience not only healed them physically but also emotionally and mentally, relieving them of their fears and boosting their confidence to refuse vaccination (P-8, Male, Senior Pastor).

This meant that they no longer needed the vaccination (P-4, Female, Church Member; P-11, Female, Church Member). Their constant communication with God had increased their faith which helped



them overcome their COVID-19 related challenges. This meant that the members' increased faith strengthened their hesitancy towards COVID-19 vaccination. Reinforcement or affirmation of one's predicament seems to validate their action (P-4, Female, Church Member; P-5, Female, Church Member).

***Trust in God's will.*** Narratives emerged regarding members' beliefs in the God-ordained fate for each person. Their consistent prayer life made them more dependent on God. They believed that when the time intended by God had come, no one could stop it. Members associated their faith with fate, asserting that while they could make requests to God through prayer, the ultimate decision remained with God, who determined their fate. Members deemed death caused by the COVID-19 virus acceptable, provided that it was God's will. Their reliance on God's will contributed to their firm refusal of vaccines. It can be inferred that the members' dependence on God led them to believe that regardless of what happened – whether they lived or died due to COVID-19 – the decision remained in God's hands. Their faith in God's will provided them with assurance and confidence that their lives were secure in God's hands (P-6, Female, Church Member; P-11, Female, Church Member; P-3, Male, Church Leader; P-8, Male, Senior Pastor).

***Adoption of proper stewardship.*** The members believed that proper stewardship was a result of their constant communication with God, who communicated with them through His Word. They believed that God desired them to practice proper stewardship in all aspects of their lives, and that it resulted in a healthy lifestyle. They viewed taking care of their health as an act of obedience to God's will for their well-being. Their knowledge of the role of the immune system in fighting the virus and the importance of proper stewardship helped them to better understand how to overcome COVID-19 without vaccination. Consequently, some members claimed that they did not require vaccination because they were healthy, and their immune system was capable of fighting the virus. They further claimed that their immune system was more intelligent than the vaccine (P-8, Male, Senior Pastor). For them, being and keeping healthy was a result of proper stewardship. If they practiced a healthy lifestyle, they believed they would be protected from harm. The senior pastor emphasized, "Let your food be your medicine and your medicine be your food." They believed that herbal plants, such as garlic, onion, lemongrass, citrus, ginger, and other

“*dahon-dahon*” (herbal plants), were part of God’s instruments to heal their diseases. They argued that these practices had existed long before scientific medication. This means that the members were not only driven by their religious beliefs but also by their indigenous knowledge of herbal or natural medicines, which were passed down to them through oral tradition. Their narratives testified that they were healed by natural medication (P-3, Male, Church Leader; P-1, Male, Church Member; P-11, Female, Church Member; P-6, Female, Church Member).

Indigenous knowledge presents authentic and diverse contexts for science education. Moreover, it affords opportunities for contemplation of nature and science in contemporary (Western) scientific learning, thereby promoting the growth of more balanced and comprehensive worldviews, intercultural understanding, and sustainability (Zidny, Sjöström, and Eilks 2020). Some members supplemented their diets with herbal remedies, including vitamin C. They believed that part of natural medication involved consuming nutritious foods like fruits and vegetables.

**Table 5. Response actions of members as a result of their constant communication with God**

Major Theme	Subthemes	Illuminating Quotes
Strengthened faith in God	Survival from the virus	“The one who is in us is greater than the one who is in the world. We should fear the one who has the capacity to kill both the soul and the flesh than those who can kill the flesh only. I trusted God even more for the protection he has placed in us. My only protection is God. Why should we fear death? All of us will die. For me the protection is not the vaccine, but above all else, God is the only protection.” (P-3, Male, Church Leader).
	Immunity with the virus	
	Healing wonders of God	“Our foundation is our faith in God. Our God knows everything because He created us. He knows what’s best for us. So, we settled on it.” (P-10, Female, Church Founder)
	Relief from all forms of fear	“Your faith can move mountains. Now, if you feed your members with fear, they will more likely get vaccinated but if you feed them with faith, they become unshakable. Our faith is of great help to us. Your faith will stimulate your brain, it will affect your whole system because the brain is the commander of our entire body. What information you receive, your brain will process it, then it will give signal to your body.” (P-8, Male, Senior Pastor)
		“I was pregnant at that time, and it was difficult to breathe. I was just drinking water. I could not even drink medicine because I was pregnant, it was close to my delivery. What I did was drink water, eat vegetables, and pray. It should be coupled with prayer because that is our only great defense. I was healed by God’s grace.” (P-4, Female, Church Member)

Major Theme	Subthemes	Illuminating Quotes
Belief in God's will	Devotion to God	"Prayer is our armor. When it's your time, it's your time." (P-6, Female, Church Member)
	Divine intervention	"When it's not your time, it won't happen... as long as you have strong faith in God, God will never forsake you. Whether you are vaccinated or not, when your time arrived, no one can stop it. If it's not yet your time, no one can also stop it. Let us just strengthen our faith instead because it is just a test on how strong our faith is." (P-11, Female, Church Member)
	God's sovereignty	"If it's not God's will for you to die, you won't die." (P-8, Male, Senior Pastor)
Adoption of proper stewardship	Healthy lifestyle	"That's why we should take care of our immune system because it is more intelligent than the vaccine that will be introduced in your body." (P-8, Male, Senior Pastor)
	Strong immune system	"It is possible not to be dependent on the medicine or on the vaccine especially if you have good immune system. Let us just go back to the basic "Let your food be your medicine and your medicine be your food. Why? Because in ancient times, Adan, Eve, Abraham, Jacob had no vaccines but why they lived longer? Our science today happens to combat what's going on in our time because people lost the sense of taking good care of themselves and their health. They do business just to earn money not to promote good health among people. This is the reason why our organs are damaged because they placed things that are not good in our body." (P-8, Male, Senior Pastor)
	Indigenous knowledge on herbal medicines	"We inherited our knowledge on herbs from our ancestors. We used these herbs every time we got sick. It's good. We're healed." (P-3, Male, Church Leader)
	Herbal supplements and vitamin C	"It is important to have citrus and ginger. I boil lemongrass. It's good." (P-1, Male, Church Member)
		"We drank plenty of citrus and garlic during those times." (P 11, Female, Church Member)
	"I ate plenty of fruits. We're able to endure it. With our experience, we could say that our body can combat the virus. Look at aunt Ipang and uncle Dodong, they got very weak, but they recovered. They took plenty of supplements." (P-4, Female, Church Member)	

The aforementioned response actions significantly contributed to the reinforcement of vaccine hesitancy among JESIM members. Vaccine hesitancy, therefore, refers to the refusal of vaccination due to the amplified faith in God, the belief in God's will, and the adoption of proper stewardship, which are established through their spiritual practices that involve dialogic and interactive communication between God and human beings. Figure 2 illustrates a schematic diagram that was derived from this definition, showcasing vaccine hesitancy within a religious context. Communication between God and the JESIM members can be argued as dialogic and interactive. This is because constant communication between God and human beings

(JESIM members) is carried out based on the principle of faith. The effectiveness of communication and dialogue in generating enduring insights that can be applied to future problem-solving hinges on how these processes function in the meaning-making process (Innes 2007). For instance, the JESIM members' communication with God allayed their fears concerning the side effects of the vaccine, thereby bolstering their hesitancy towards vaccination.

Second, the communication between God and the JESIM members is interactive as it signifies an existing partnership between humanity and God. This partnership highlights the idea of consultation and collaboration with the highest authority, God, on the decision-making process in all aspects of the members' lives. This consultation is conducted through prayer, seeking God's will (humans to God), and the application of biblical principles (God to humans) to real-life situations and decision-making processes using the language of faith. The communication cycle, from God to humans and humans to God, is an integral part of the JESIM's spiritual norm and is challenging to modify as it is deeply ingrained in the members' core life principles. The spiritual norm's impact and evidence in their lives, such as miraculous healing and transformed life, among others, further strengthened their attachment to it.

To effectively communicate about vaccination, it is crucial to carefully explain key concepts such as herd immunity and vaccine mechanisms within the religious context to avoid misconceptions and misinformation. The model of vaccine hesitancy demonstrates how the social construction of reality based on personal experiences can override scientific information, even if this results in negative consequences in the future. It appears that faith in God cannot be superseded by scientific explanations unless they are rooted in the Bible's epistemology.

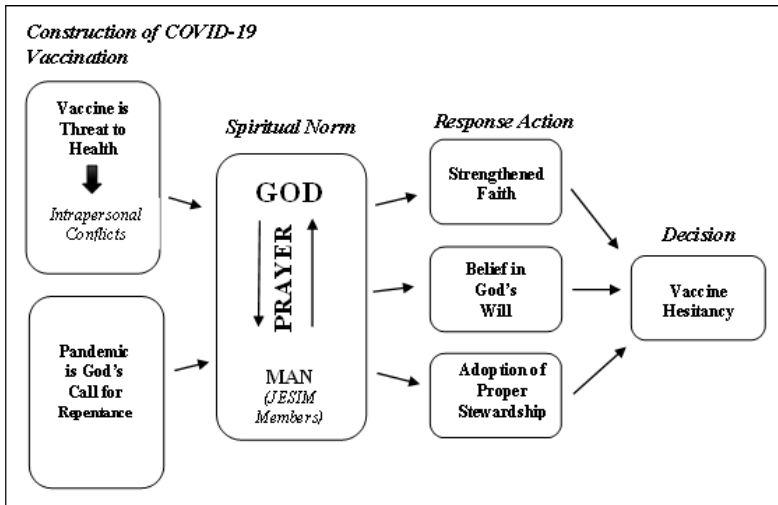


Figure 2. Vaccine hesitancy model in a Christian community

## 10. Conclusion and Recommendations

The construction of meanings is a social process shaped by lived experiences, which inform decision-making. In the case of COVID-19 vaccine hesitancy, individuals' lived experience of "otherness" have influenced their decision not to get vaccinated. The complex information surrounding the pandemic was difficult to process, particularly in light of the previous distrust created by the Dengvaxia controversy. As a result, individuals have turned to their central belief in God, seeking support and protection, rather than taking the perceived risk of the vaccine. This phenomenon may be termed as preconditioning, whereby individuals are predisposed to certain beliefs prior to encountering new information. Therefore, individuals affected by vaccine hesitancy will only follow instructions if they believe they are from God. The church plays a crucial role in helping individuals understand what is essential and needs to be done. Church leaders, as role models, can share their thoughts and ideas, but the ultimate decision-making lies with the congregation. The interplay between faith and fate appears to underlie decision-making regarding health matters.

Finally, the study recommends the need for a larger sample size to establish causality between religion and vaccine hesitancy.

The findings also suggest the importance of designing communication campaigns that effectively convey the scientific information related to vaccination. Customization of information campaigns may be more appropriate given the diversity of intended audiences.

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