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## Comparative Analysis between Vaccine Hesitancy and Rural vs Non-Rural Counties in the South-East Region

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Comparative Analysis between Vaccine Hesitancy and Rural vs Non-Rural Counties in the South-East Region

Throughout the United States (U.S) there is a variety of people who are hesitant to get the COVID vaccine. Research was collected by the Center of Disease Control and Prevention (CDC), at not only a state level, but also a county level for each state. Not only was it specific enough to see if an entire state was hesitant to get the COVID vaccine, but then got more specific for each county. The data depicted this by showing different levels of vaccine hesitancy: "strongly hesitant," "hesitant," and "unsure." Participants could choose between five options: "definitely get a vaccine," "probably get a vaccine," "unsure," "probably not get a vaccine," and "definitely not get a vaccine" (Centers for Disease Control and Prevention, 2021). Strongly hesitant included those who only responded they would "definitely not" get the vaccine. We decided with this information to only use the "Strongly hesitant" variable for our data. We used this data to look at the South-east region of the United States, specifically Georgia, Florida, South Carolina, Alabama, and Tennessee. Overall, the purpose of our study is to determine whether there is a difference between vaccine hesitancy and a county being rural vs. non-rural. Using the U.S Department of Agriculture definition of rural, 500 people or less is considered rural per square mile and anything more than 500 people per square mile is considered non-rural. We were then able to identify each county as rural or non-rural. Then we will identify the counties that are rural and the amount of vaccine hesitancy and the non-rural with their vaccine hesitancy. We will be using our data to make tables and pie charts to identify the different sizes of rural and non-rural areas. Using this data, we will compare both data of the vaccine hesitancy and the tables of the rural and non-rural areas to see if there is a difference between the levels of

hesitancy in rural vs. non-rural counties. In conclusion, our data showed that there is a difference in the vaccine hesitancy and of a county being defined as rural or non-rural. This study can help improve our understanding of each county and be able to identify more relationships.