

Vaccine Hesitancy in Pediatrics

Mersine Bryan, MD, MPH

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Acknowledgements: Dr. Douglas Opel and Dr. Annika Hofstetter



Speaker Disclosure Template

I have no actual or potential conflict of interest in relation to this program/presentation.



Objectives

- Review the current state of vaccine hesitancy in pediatrics
- Increase familiarity with effective communication strategies to increase vaccine acceptance
- Discuss common concerns for vaccine hesitant parents and families



Vaccines: Reach, Scope, and Impact

- Affect nearly all children and relevant to nearly all providers who care for children
- **Vaccines work:** $\geq 95\%$ reduction in mortality from vaccine-preventable diseases
- **Cost effective:** ~\$10 saved for every \$1 invested in childhood vaccination
- **Vaccines are safe:** IOM concluded that few health problems are caused by/associated with vaccines
- One of 10 greatest public health achievements of 20th century and again between 2000-2010

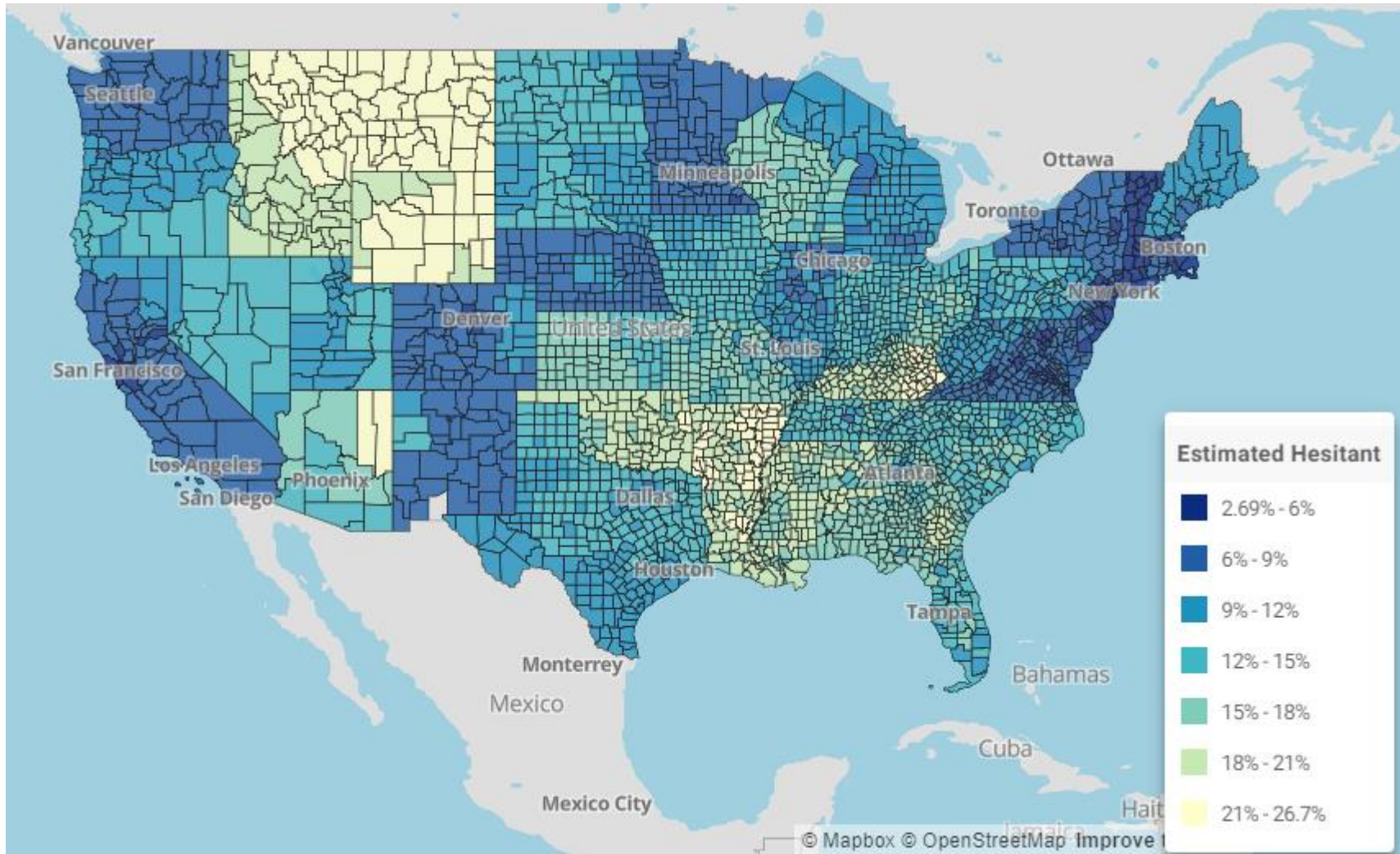
MMWR, 1999; MMWR, 2011;
Zhou 2014; IOM, 2011

What is vaccine hesitancy?

WHO Definition: The reluctance or refusal to vaccinate despite the availability of vaccines

- 6% of parents are hesitant about routine childhood vaccines
- 26% hesitant about influenza vaccines
- 23% of parents of adolescents were hesitant about HPV vaccines
- 29% hesitant about COVID vaccines

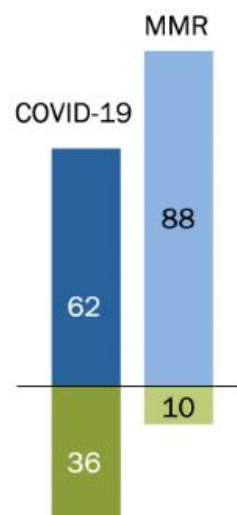




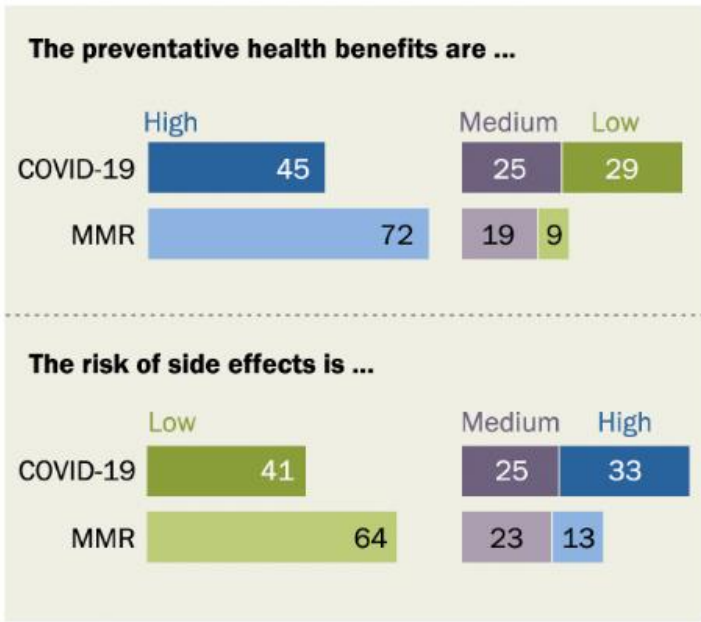
Americans much more skeptical of COVID-19 vaccines than childhood vaccines for MMR

% of U.S. adults who say ___ about vaccines for COVID-19, and about childhood vaccines for measles, mumps and rubella (MMR)

The benefits outweigh the risks



The risks outweigh the benefits



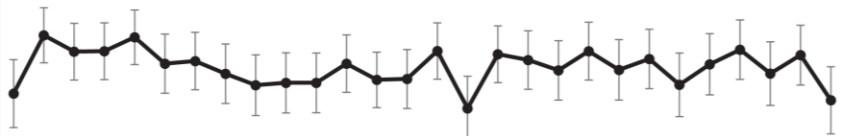
Note: Respondents who did not give an answer are not shown.
 Source: Survey conducted March 13-19, 2023.
 "Americans' Largely Positive Views of Childhood Vaccines Hold Steady"



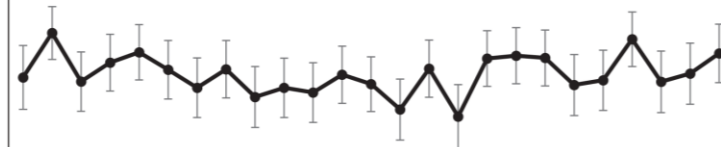
Is vaccine hesitancy changing?



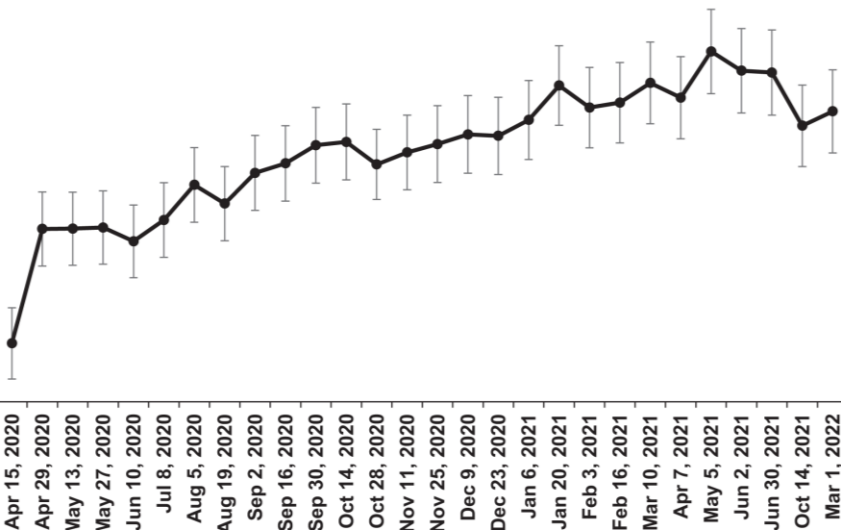
Childhood vaccines provide important benefits to society



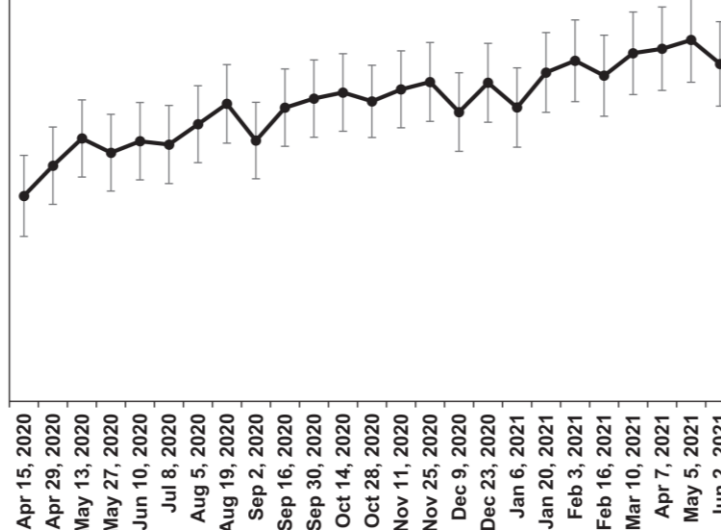
Childhood vaccines are useful and effective



Childhood vaccines may lead to illness or death

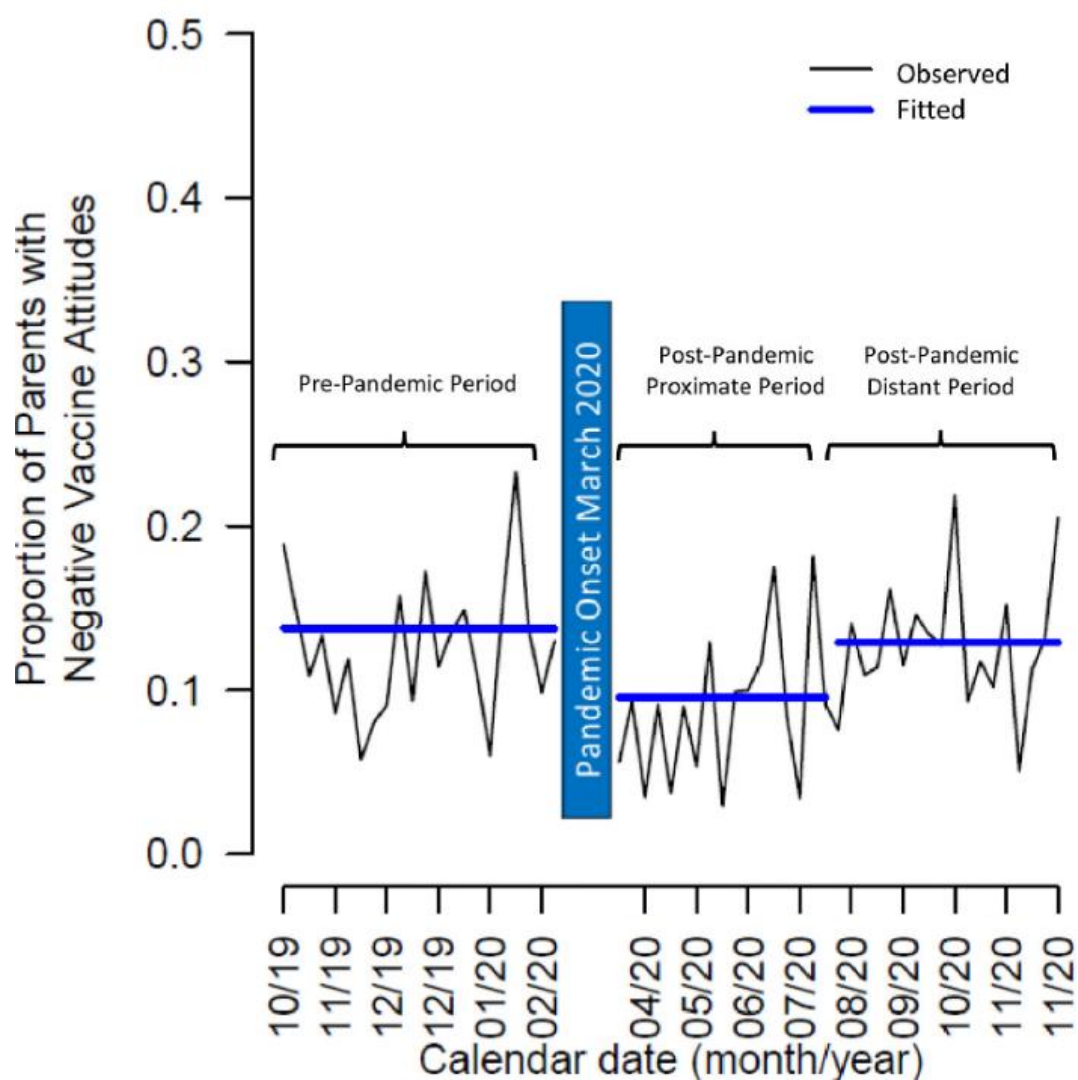


Childhood vaccines have many known harmful side effects



Survey wave. mid-point date

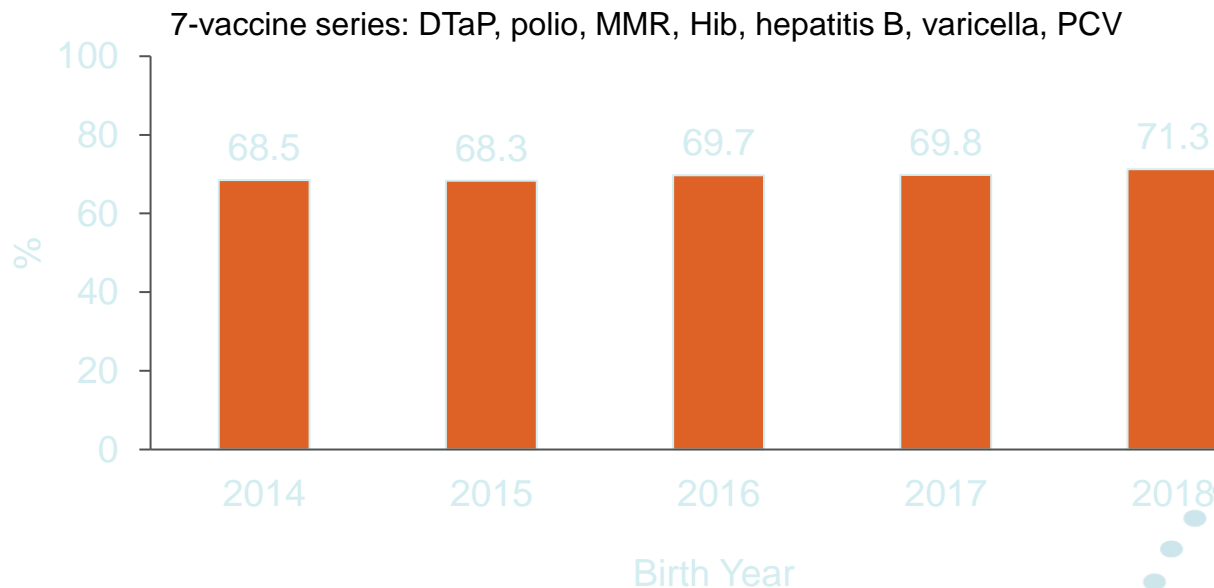
Shah et al,
2022



How does it impact our vaccination rates?

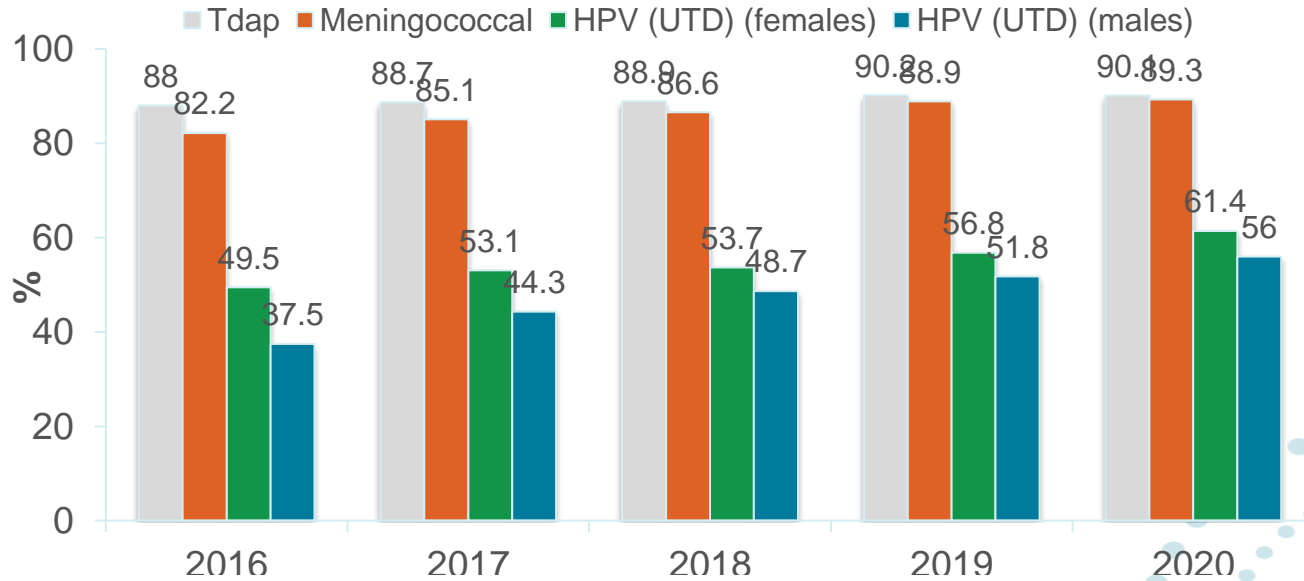


Childhood Vaccination Coverage (24 Months)



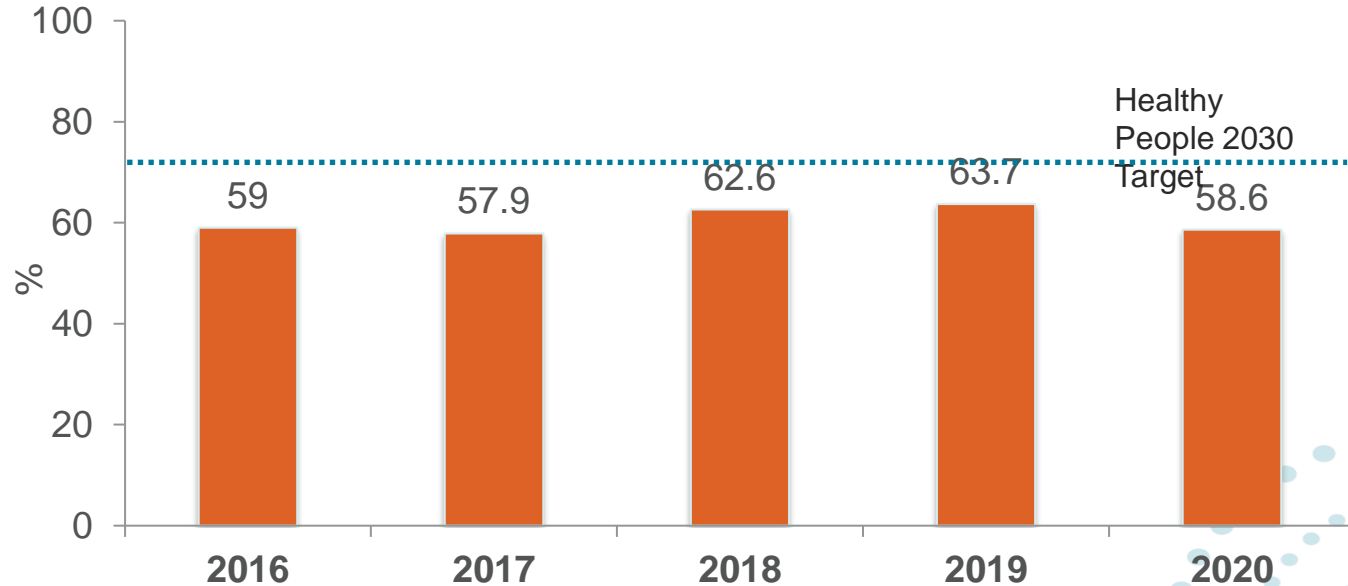
National Immunization Survey (NIS-CHILD), CDC

Adolescent Vaccination Coverage (13-17 years)



National Immunization Survey (NIS-Teen),
CDC

Influenza Vaccination Coverage (6 months-17 years)



National Immunization Survey (NIS-Flu), CDC

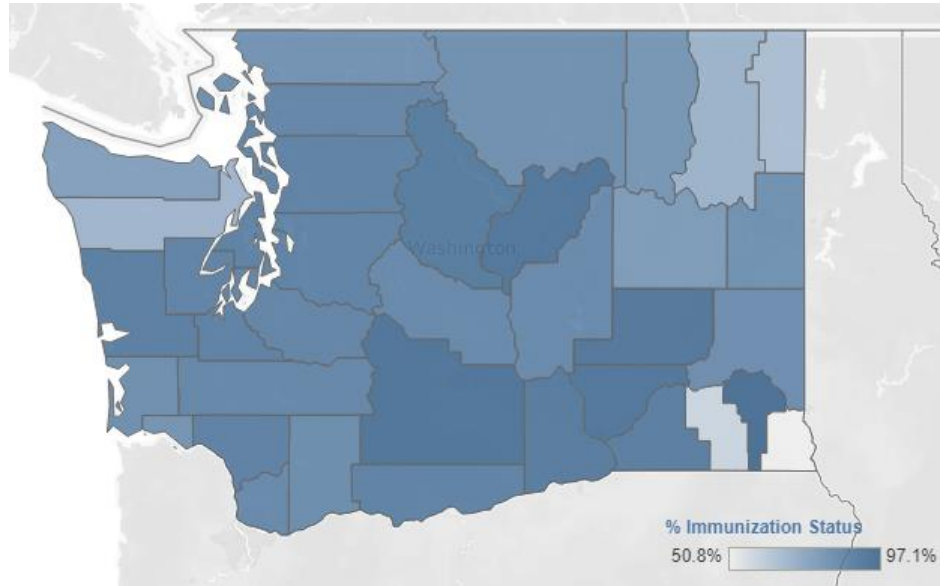
National Immunization Survey (NIS-Flu), CDC

Vaccination Coverage: Washington State

Required Vaccines:

- Hepatitis B
- DTaP/DT/Td/Tdap
- Polio
- MMR
- Varicella

Map is the proportion
of Kindergarten
students
who are UTD for the
2022-2023 school year



So now what?

Increase familiarity with effective communication strategies to increase vaccine acceptance

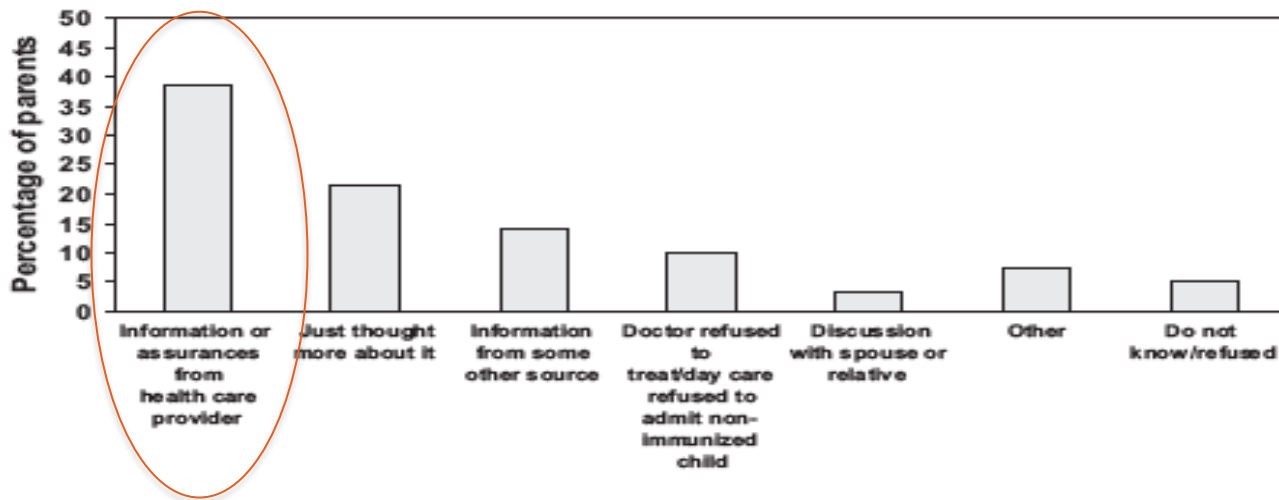


Providers: Key Role in Vaccination

- Preferred source of vaccine information
- Most trusted source of vaccine information
- Positively impact vaccine intentions
- Positively impact vaccine uptake



Providers: Key Role in Vaccination



Gust et al, 2008

****Change minds of parents delaying/declining vaccination****

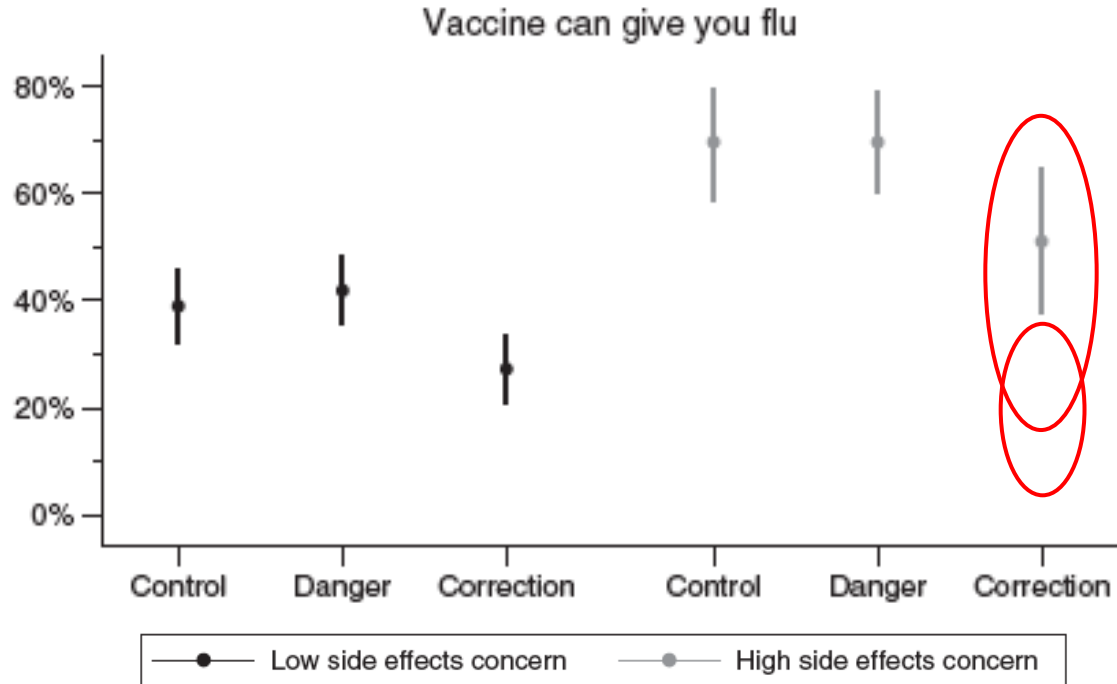
Strategies: General Communication Principles

- AAP/CDC
 - Take time to listen
 - Solicit and welcome questions
 - Don't be offended, and don't offend
 - Science vs. anecdote
 - Respect parental authority
- Additional Recommendations
 - Establish honest, balanced dialogue
 - Determine readiness to change
 - Ensure ongoing communication

Strategies: General Communication Principles

- Beware when debunking myths
 - Identify myth as myth, state that it is false
 - Focus on corrective information, state it simply

Provider Vaccine Communication: Content



Provider Vaccine Communication: Delivery

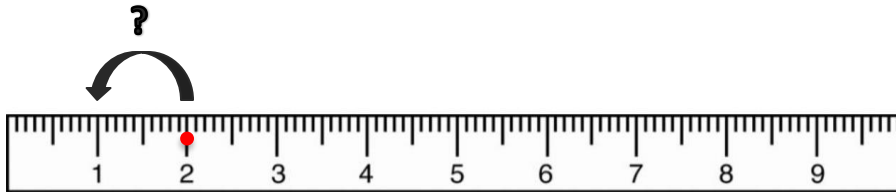
- **Step 1:** Offer an effective provider recommendation
 - Presumptive, strong, timely, universal, urgent, bundled
- **Step 2:** Pursue initial recommendation if parent resists
- **Step 3:** Address vaccine concerns (tailored to families)
- **Step 4:** Ensure ongoing conversation

Other Communication Strategies

- Motivational interviewing
 - Evokes and reinforces parent's own motivations for vaccine acceptance and their self-efficacy to do
 - Incorporates 4 main elements
 - Empathy, collaboration, evocation, support for autonomy

Motivational Interviewing: Brief Strategies

- Importance and confidence ruler
 - *Ex: “On a scale of 1-10, how important is it for you to vaccinate your child?”*
 - *Ex: “Why this # and not a lower #?”*
 - Parent essentially stating their own reasons for vaccination



Motivational Interviewing: Brief Strategies

- Elicit, provide, elicit (EPE)
 1. Elicit what parent knows or understands
 - *Ex: “It sounds like you may have some particular questions or concerns about Emma getting her vaccines today. Would you mind sharing those with me?”*
 - 2. Seek permission to provide new information or advice**
 - *Ex: “I’ve looked into this a great deal. Can I share information that I’ve found and why I think these vaccines are so important?”*
 - Give information in neutral and nonjudgmental way
 3. Elicit parent response to that information or advice
 - *Ex: “I’d love to know what you think about this information. Has it helped to alleviate some of your concerns...?” What else would you like to know?”*

Resources

- Vaccine Education Center, Children's Hospital of PA
 - www.chop.edu/centers-programs/vaccine-education-center
- Communicating with Families, American Academy of Pediatrics
 - www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/immunization/Pages/communicating-parents.aspx
- Provider Resources for Vaccine Conversations With Parents, Centers for Disease Control and Prevention
 - www.cdc.gov/vaccines/conversations

Common Concerns for Parents

Case-based approach



Questions?

Thank you!





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