Strengthening Vaccine Confidence: Refreshing our Conversations about Child and Adolescent Vaccinations

May 4, 2023
For calendar year 2021, indicate how challenging it was to address the following tasks/situations related to the COVID-19 pandemic:

<table>
<thead>
<tr>
<th>Tasks/Situations</th>
<th>Slight Challenge</th>
<th>Moderate Challenge</th>
<th>Substantial Challenge</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managing staff burnout and/or turnover</td>
<td>4</td>
<td>15</td>
<td>7</td>
<td>11</td>
</tr>
<tr>
<td>Addressing misinformation</td>
<td>1</td>
<td>14</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Maintaining routine operations</td>
<td>4</td>
<td>21</td>
<td>13</td>
<td>5</td>
</tr>
<tr>
<td>Hiring new qualified staff</td>
<td>5</td>
<td>17</td>
<td>11</td>
<td>17</td>
</tr>
<tr>
<td>Updating/modifying IIS</td>
<td>12</td>
<td>1</td>
<td>15</td>
<td>21</td>
</tr>
<tr>
<td>Knowing how to appropriately manage the political/policy landscape</td>
<td>11</td>
<td>10</td>
<td>16</td>
<td>12</td>
</tr>
<tr>
<td>Communicating policy changes to the public</td>
<td>10</td>
<td>22</td>
<td>16</td>
<td>2</td>
</tr>
<tr>
<td>Getting state/local approval to add funded positions</td>
<td>18</td>
<td>4</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>On-boarding new providers to IIS</td>
<td>16</td>
<td>1</td>
<td>19</td>
<td>8</td>
</tr>
<tr>
<td>Addressing COVID-19-related legislation</td>
<td>12</td>
<td>15</td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>Ordering and distributing COVID-19 vaccine</td>
<td>18</td>
<td>1</td>
<td>19</td>
<td>2</td>
</tr>
<tr>
<td>Writing grants to apply for new funding opportunities</td>
<td>16</td>
<td>1</td>
<td>19</td>
<td>2</td>
</tr>
<tr>
<td>Enrolling COVID-19 providers</td>
<td>16</td>
<td>22</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Identifying vulnerable populations</td>
<td>15</td>
<td>24</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Training and developing staff</td>
<td>15</td>
<td>24</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Collaborating with other departments/programs/agencies within my state/county/territory</td>
<td>10</td>
<td>1</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>Working with pharmacies</td>
<td>20</td>
<td>27</td>
<td>15</td>
<td>2</td>
</tr>
</tbody>
</table>

Number of IPs: n = 53
8 Vaccine Hesitancy / Confidence

In calendar year 2021, how much of a burden was it to your IP to address issues related to vaccine hesitancy/confidence?

Perceive burden by IPs to address issues related to vaccine hesitancy/confidence, CY 2021

- Not a burden
- Slight burden
- Substantial burden

Number of IPs

COVID vaccinations
- 4
- 17
- 30

Routine vaccinations
- 10
- 12
- 30
Indicate how you rank your greatest fears/concerns once the pandemic is over:

**Ranked IPs greatest fears/concerns once pandemic is over (n= 52)**

1. Sustainment of funding to support IIS
2. Staff turnover and/or ability to find qualified staff to fill open positions
3. Addressing vaccine hesitancy
4. Ongoing politicization of vaccinations
5. Catch-up vaccinations for children who’ve missed out on routine immunizations
6. Sustainment of funding to support staff
7. Continued/increased scrutiny on program activities from leaders/lawmakers
8. Outbreaks of VPDs
9. Incorporating COVID vaccination activities into ongoing routine vaccination activities
10. Limits in authority of public health
11. Continuation of community-based strategies
12. Future pandemics

Number of IPs

- Not a concern/fear
- Slight concern/fear
- Moderate concern/fear
- High concern/fear
- Extreme concern/fear
Agenda

• Welcome & Introductions
• Speaker presentations
• Q&A (~15 min)
• Closing (~5 min)
Julie Sweetland, Ph.D.
Senior Advisor, FrameWorks Institute
New conversations on childhood immunizations

Julie Sweetland, PhD, Senior Advisor

May 4, 2023
Prepared for Association of Immunization Managers
Today I’m sharing the work of a team conducted in partnership with the American Academy of Pediatrics.

Patrick O’Shea, PhD
Mia Assar
Nana Baffoe
Luis Hestres, PhD
Jennifer John, PhD, MSW
Abby Rochman
Kirsten Vierra

Conducted in partnership with the American Academy of Pediatrics.
FrameWorks is on a mission...

to advance the nonprofit sector's capacity
to frame the public discourse on social and scientific issues
Limiting vaccine requirements for children the aim of proposed legislation

Bill advances to let California teens get vaccinated without parental consent

Defense bill rolls back Pentagon’s Covid vaccine mandate
If enacted, the military will no longer kick out troops for refusing the shot.

Idaho lawmakers introduce bill to make it a misdemeanor to administer mRNA vaccines
Today I’m sharing the work of a team

Patrick O'Shea, PhD
Mia Assar
Nana Baffoe
Luis Hestres, PhD
Jennifer John, PhD, MSW
Abby Rochman
Kirsten Vierra

Conducted in partnership with AAP
how people think now

descriptive research

how to spark new thinking

reframing research
Our multi-method approach queried over 9500 ordinary Americans

**descriptive research**

- Expert Interviews
- Literature Review
- In-Depth Interviews with Public

**reframing research**

- Tool Design
- Peer Discourse Sessions
- On-the-Street Interviews
- Controlled Survey Experiments
Examples of communications outcomes we tested for

knowledge

A vaccine is effective if it prevents a vaccinated person from getting seriously ill with the disease.

attitudes

We, as a society, are responsible for making sure that all children get vaccinated.

policy preferences

We should set up federally funded vaccination centers that operate year-round in every community in the U.S.
our project is about changing the cultural surround sound
Say less of this

- benefits outweighing risks
- low rates of uptake
- protection from disease
- how vaccines fight disease

More of this!

- benefits to the common good
- our responsibility for access
- preparation for healthy childhood
- how immune systems prepare themselves
Policy is changed either via a change in a policymaker’s mindset, or when public mindsets create pressure on a policymaker to make a different decision.
our project is about changing the cultural surround sound
Less of this

- benefits outweighing risks
- low rates of uptake
- protection from disease
- how vaccines fight disease

More of this!

- benefits to the common good
- our responsibility for access
- preparation for healthy childhood
- how immune systems prepare themselves
Key recommendation

Talk about the benefits of vaccination for the common good.
people think about health in highly individualistic ways
to make the case for a public response, we need to talk in terms of public health
Vaccines are not only safe, they are highly effective, protecting your children from dangerous, disabling, and even deadly diseases. To keep ourselves, our children, and our loved ones safe, we need all families to vaccinate their kids. Talk to your doctor if you have questions.

In {state name} we have a proud tradition of looking out for each other. We take seriously our responsibility to the common good. It’s important we translate that into making sure that everyone — especially children — has full access to vaccination services.
Key recommendation

Talk about improving vaccination access as a preventive public health measure.
people don’t see the practical barriers to getting kids vaccinated
It matters how we talk about what “we” should do

We are failing to provide access

We have a responsibility to provide access
We are failing to provide access

We have a responsibility to provide access

Emphasizing collective responsibility for access built greater support

Selected results from 2022 national survey experiment on framing childhood vaccines

\[ + = p = .05 \text{ to } .10 \]

\[ * = p < .05 \]

Are vaccines beneficial for children?

Would increasing vaccine access have collective benefits?

Do you support structural changes to increase vaccine access & uptake?
Across the nation, health care providers are getting more and more questions from families about whether vaccinations are safe for their children. Doctors, nurses, and researchers agree: the answer is yes, in general, vaccinations are safe and effective. (Some children have severe allergies or immune system conditions that make them the rare exception to the rule.)

Across the nation, health care providers are hearing more and more stories from families about practical difficulties in keeping up or catching up on routine immunizations. Issues range from insurance coverage to the ability to attend multiple appointments. We have a responsibility to make vaccinations for children affordable and accessible.
Key recommendation

Talk more about the long-term child wellbeing that vaccines promote.
people think about vaccines in terms of risk - reward
right now, the ‘rewards’ are intangible for the public
Framed with ‘protection from disease’

On-time vaccination throughout childhood is essential because it helps provide immunity before children are exposed to potentially life-threatening diseases.

Reframed with ‘preparation for development’

Vaccinations prepare children’s immune systems to recognize and resist contagious diseases, keeping them healthy so they can keep growing, learning, and thriving.
Key recommendation

Shift the focus from vaccines fighting disease to the immune system preparing itself.
When we rely on **military language**, people conclude that any transmission of disease indicates a failure of the vaccine.
When we compare childhood vaccines to **medicine**, we heighten people's concerns about side effects.
When we **compare vaccinations to computer updates**, we call up productive associations like prevention, ongoing maintenance, and protection against “network” threats.
that same love and attention.
When we **compare gaining immunity to gaining literacy**, we tap into beliefs that the ability to read benefits both individuals and society, and that it’s best to gain literacy in childhood.
After exposure to the Literacy metaphor
Less of this

- benefits outweighing risks
- low rates of uptake
- protection from disease
- how vaccines fight disease

More of this!

- benefits to the common good
- our responsibility for access
- preparation for healthy childhood
- how immune systems prepare themselves
What’s ahead

Full report available now

Motivational interviewing toolkit available now

Advocacy & outreach toolkit in the works

Outreach to AAP chapters, other peer organizations

...and more!
Thank you!
Let’s continue the conversation.

jsweetland@frameworksinstitute.org

@jsw33ts
Promoting trust in vaccines. Protecting Communities.

Vaccine Confidence Toolkit

Webinar Series

Immunizationmanagers.org/resources-toolkits/vaccine-confidence-toolkit/
Thursday, June 8 | 12-1 PM ET

Using Qualitative Research to Increase Vaccination Access and Uptake in Under-Immunized Communities

• Learn about rapid evidence-based qualitative research methods that can provide insight on how to build confidence in routine vaccinations among under-immunized communities.

• Dr. Brett Craig and Siff Malue Nielson, from the World Health Organization Regional Office for Europe, will share how to:
  o Design and conduct rapid qualitative research with different under-immunized communities.
  o Better understand communities’ routine vaccination drivers and barriers.
  o Use qualitative research results and strategies to develop community-tailored interventions that increase vaccine confidence, access, and routine vaccination uptake.

REGISTER HERE
REACHing for Vaccine Equity Podcast

- New, limited series podcast (8 total) featuring the work of iREACH recipients!

- **Episode 3** – highlights the work of Presbyterian Community Health

- Subscribe to the podcast on Apple Podcasts or Spotify or listen on the AIM website.
Thank you!

Questions?
Reach us at info@immunizationmanagers.org