

Vaccine Acceptance:

How to talk so parents will listen and listen so parents will talk

Barbara Pahud MD, MPH



Disclosures

- Pfizer Grants for Independent Learning and Change - CoVER
- Pfizer and Sanofi: non-branded advocate
- Sequirus, Pfizer & Sanofi: advisory board
- GSK, Alere: Clinical trials
- CDC, NIH grants: Contracts, clinical trials

Objectives

- The Vaccine Hesitancy Spectrum
 - Recognize the range of parental attitudes on immunization
- Approaches to Discuss Immunizations
 - Evidence based provider conversation techniques
 - Ideas and strategies to increase vaccine acceptance

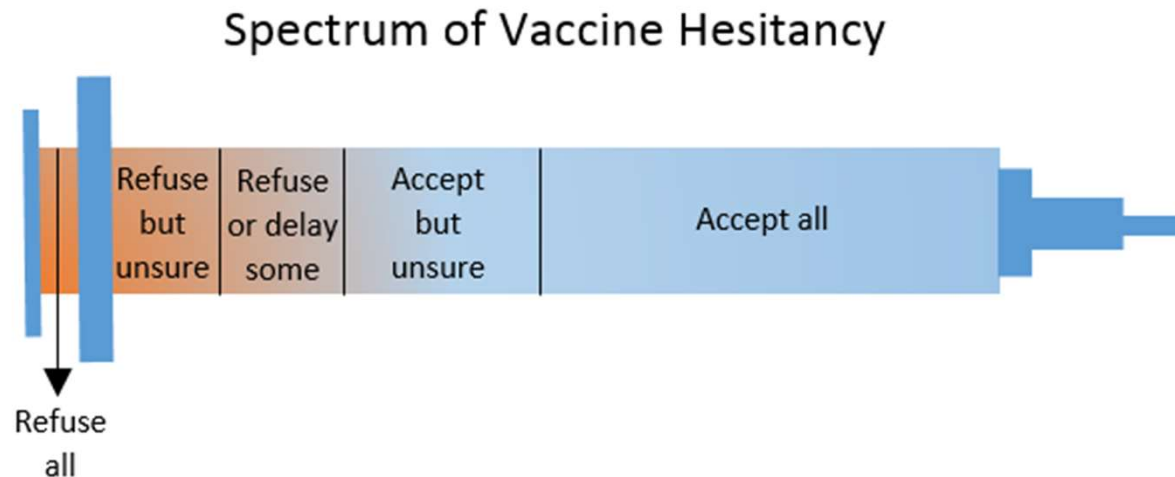
Vaccine Hesitancy



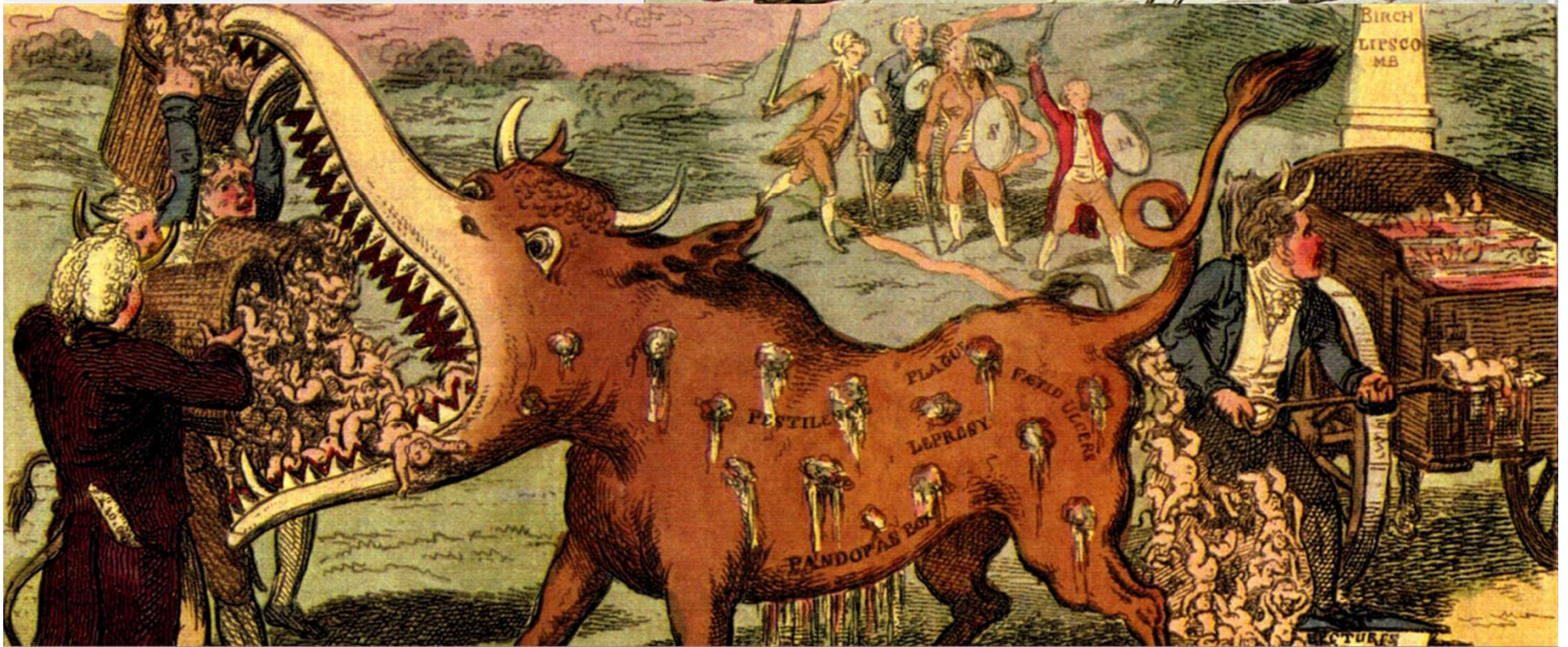
Vaccine Hesitancy

The term “vaccine hesitancy” has emerged to:

- depolarize the “pro” versus “anti” vaccination alignment
- express the spectrum of attitudes toward vaccines



Historical Perspective



How much of a problem is vaccine hesitancy now?

- Percentage refusing all vaccines remains small (1-3%)
- Prevalence of under-vaccination ≤ 2 years on the rise: 42% (2004) \rightarrow 54% (2008)
- Increasing frequency of requests to “spread-out” the series or refusal of specific vaccines

Americans Don't Trust Vaccines Like They Used To



By **NATASHA BACH** May 22, 2018

Fewer Americans are putting their trust in vaccines—and the repercussions could be felt by society at large.

According to a new survey released Monday by the American Society for Microbiology and [Research America](#), the percentage of American adults who support vaccination has fallen.

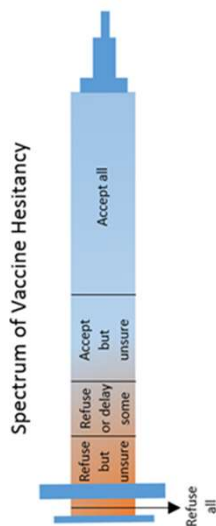
Only 71% of those surveyed said it was “very important” to have their children vaccinated, down from 82% in 2008. The survey also saw a drop in the percentage of those who were confident in the system’s evaluation of the safety of vaccines, down to 77% from 85% 10 years ago.

The number who "strongly" believed they had derived personal benefit from vaccine development over the past 50 years dropped by 16 percentage points from 70% to 59%.

<http://fortune.com/2018/05/22/american-attitudes-vaccines-survey/>

Hesitancy

Overall, how hesitant about childhood vaccines would you consider yourself to be?



a. Not at all hesitant (86%)

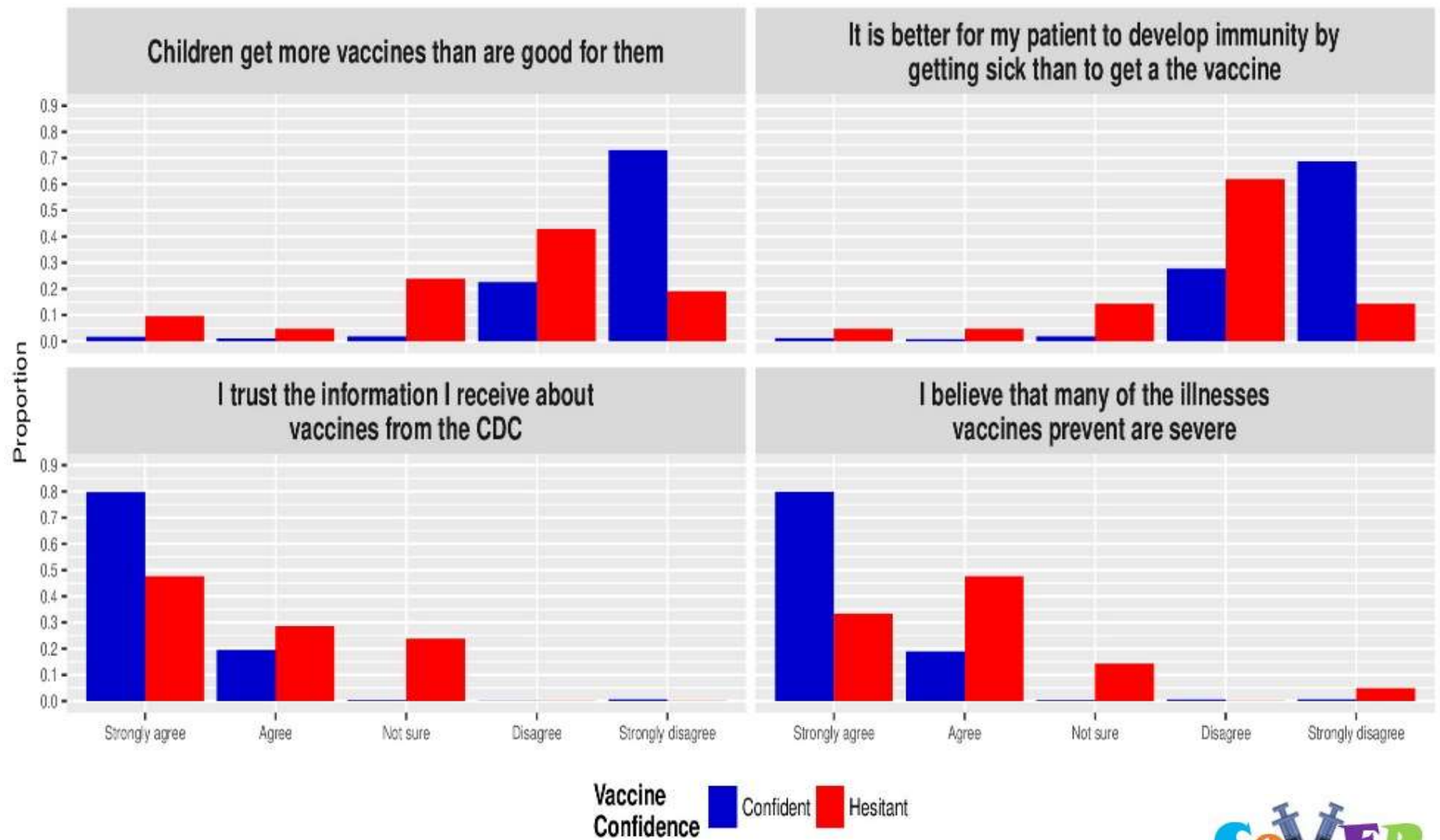
b. Not too hesitant (11%)

c. Not sure (0.1%)

d. Somewhat hesitant (1.9%)

e. Very hesitant

Hesitancy Impacts Attitudes/Beliefs



Physician Response to Parental Requests to Spread Out the Recommended Vaccine Schedule

Allison Kempe, Sean T. O'Leary, Allison Kennedy, Lori A. Crane, Mandy A. Allison, Brenda L. Beaty, Laura P. Hurley, Michaela Brtnikova, Andrea Jimenez-Zambrano, Shannon Stokley

- 46% agreed that their job was less satisfying because of the need to discuss vaccines with vaccine hesitant parents
- 60% reported spending more than 10 minutes discussing vaccines in visits with vaccine hesitant parents

What do parents know?

- Parents believe:
 - vitamin K is a vaccine
 - their 3-6 month old infant has received smallpox, MMR or VZV Vaccine
 - *they* got VZV Vaccine (licensed 1995)
 - their infant can get HIV from vaccines
 - infants develop influenza from the vaccine



Know Your Audience

- 34% of parents with up-to-date children had major concerns regarding vaccines
- Tailor your dialogue to match the needs of your patient/parent

Spend Your Valuable Time Wisely!

These are the parents you need to spend your time with answering questions and reassuring.



Immunization Advocate

- Patients and/or parents agree that vaccines are necessary and safe.
- Patients and/or parents tend to have a strong relationship with their provider.



Go Along to Get Along

- Patients and/or parents would like to vaccinate their children but may lack detailed knowledge of vaccines and/or have a few questions.



Cautious Acceptor

- Patients and/or parents may have minor concerns about vaccines but ultimately vaccinate their children after a strong provider recommendation and reassurance.



Fence-Sitter

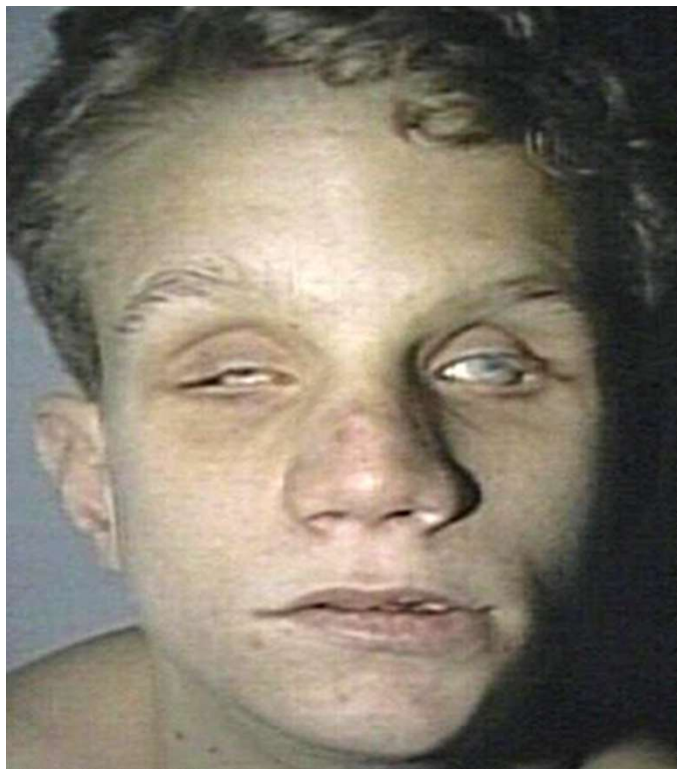
- Patients and/or parents have significant concerns about vaccines.
- Patients and/or parents may refuse or delay vaccines and might have a neutral or distrustful relationship with their provider.



Absolute Refuser

- Patients and/or parents refuse all vaccines.
- Reasons for refusal may vary and may include distrust in the medical system, safety concerns, or religious beliefs.





VACCINES ARE A HOLOCAUST



NOW

SAYS JFK NEPHEW

FLU VACCINES
ARE TOXIC



Autism ADHD Asthma Allergies Eczema

THE GREATEST LIE EVER TOLD



**...THAT VACCINES ARE
SAFE AND EFFECTIVE**

Seizures Obesity Auto-Immune Diabetes

Diphtheria and Tetanus
Toxoids and Acellular
Pertussis Vaccine Adsorbed

HIDDEN DANGER

Adverse events reported during post-approval use of Tripedia vaccine include idiopathic thrombocytopenic purpura, SIDS, anaphylactic reaction, cellulitis, **AUTISM**, convulsion/grand mal convulsion, encephalopathy, hypotonia, neuropathy, somnolence and apnea



Donald J. Trump ✓
@realDonaldTrump



Follow

Healthy young child goes to doctor, gets pumped with massive shot of many vaccines, doesn't feel good and changes - AUTISM. Many such cases!

RETWEETS
10,158

8:35 AM - 28



Donald J. Trump ✓
@realDonaldTrump



Following

No more massive injections. Tiny children are not horses — one vaccine at a time, over time.

RETWEETS
655

LIKES
632



9:29 AM - 3 Sep 2014

← 198

↻ 655



632



TWEET!





What is a
parent to do?



Love them. Protect them.

Never inject them.

There are NO safe vaccines!

Chronic Ear Infections

ADD

Allergies

Asthma

Autism

Death

Diabetes

Meningitis

Polio

Seizures

SBS

and SIDS are caused by adverse reactions to vaccine poisons.



VaccineTruth.com

1-888-249-1421



Thus...



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Make a “CASE” for Vaccines

- Corroborate
 - Set the tone for a respectful conversation
 - Acknowledge the parent’s concern
 - Find some point of agreement between you and the parent
- About me
- Science
- Explain and advise
 - Offer your recommendation, based on the science
 - Include a personal recommendation/story

The Architecture of Provider-Parent Vaccine Discussions at Health Supervision Visits

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KEY WORDS

immunization, health communication, preventive health services

ABBREVIATIONS

CA—conversation analysis

NVHP—non-vaccine-hesitant parent

PACV—Parent Attitudes about Childhood Vaccine

WHAT'S KNOWN ON THIS SUBJECT: An increasing number of parents have concerns about childhood vaccines. Parents consistently cite their child's provider as influential in their vaccine decision-making. Little is known about how providers communicate with parents about vaccines and which communication strategies are important.

WHAT THIS STUDY ADDS: How providers initiate the vaccine recommendation at health supervision visits appears to be an important determinant of parent resistance. Also, when providers pursue their original vaccine recommendations in the face of parental resistance, many parents subsequently agree to vaccination.

What predicts uptake of vaccines?

- 111 well visit encounters for children 1-19 months old were videotaped
- Oversampled vaccine hesitant parents (50%)

How you start the conversation matters

- The best predictor of vaccination uptake in the videotaped encounters, for *both* hesitant and non-hesitant parents, was how the provider started the conversation

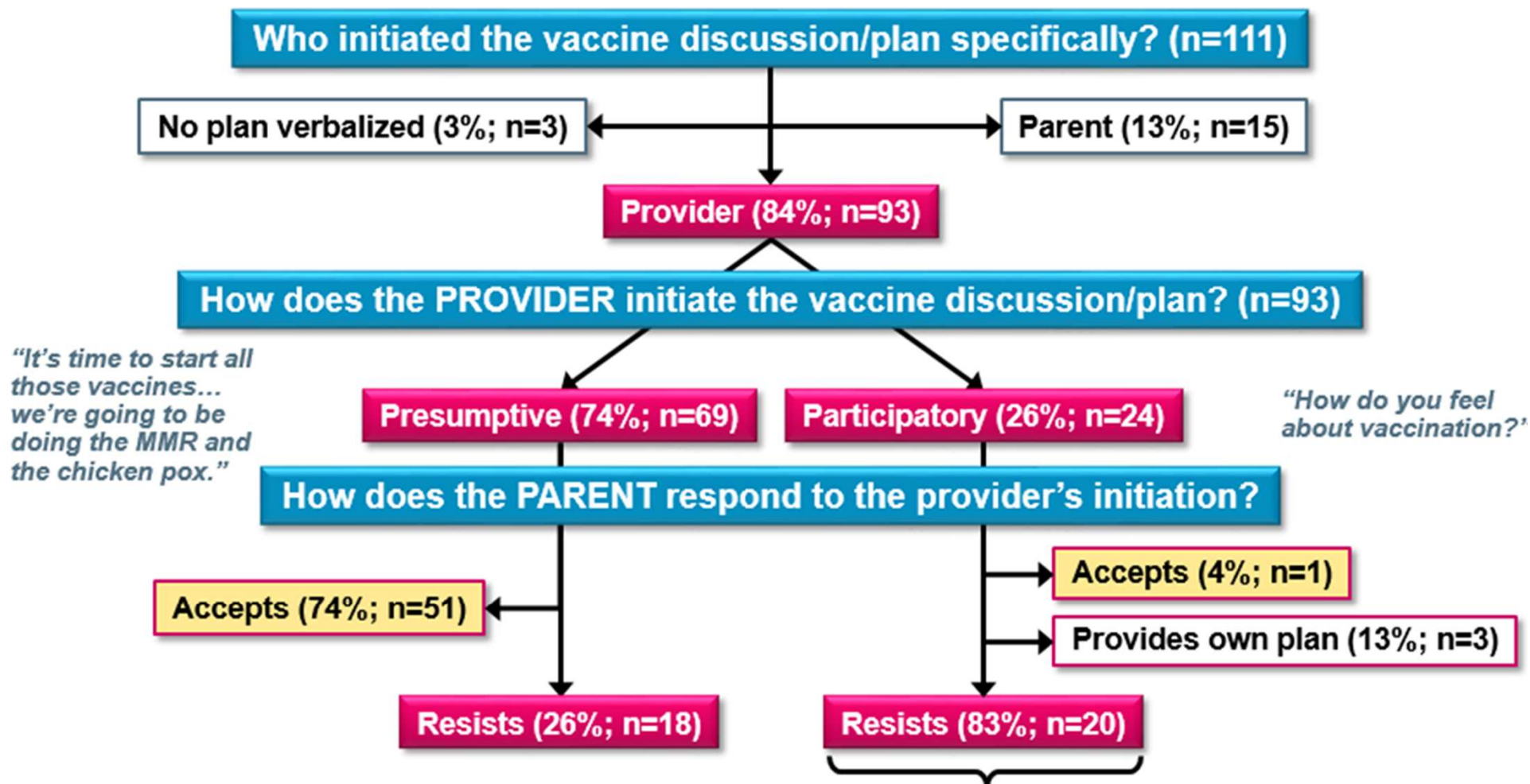


“Participatory versus Presumptive”

- Participatory: provides parents with more decision making latitude: “Have you thought about what shots you’d like to get today?”
 - Would you like vegetables today?
- Presumptive: presupposes that parents will get shots: “We have some shots to do today”
 - Do you want carrots or spinach?

Participatory versus Presumptive

- A larger proportion of parents resisted vaccine recommendations when providers used a participatory format (83% vs 26%; $P < .001$).
 - Would you like vegetables today?
- This finding remained true among vaccine hesitant parents (89% vs 30%; $P < .001$).



^a Reproduced with permission from *Pediatrics*, Vol. 132, Pages 1037-1046, Copyright © 2013 by the American Academy of Pediatrics.

**P<.001;
Adjusted OR
(95% CI):
17.5 (1.2, 253.5)**

Human behavior is influenced by deep-seated biases and heuristics resistant to rational influence



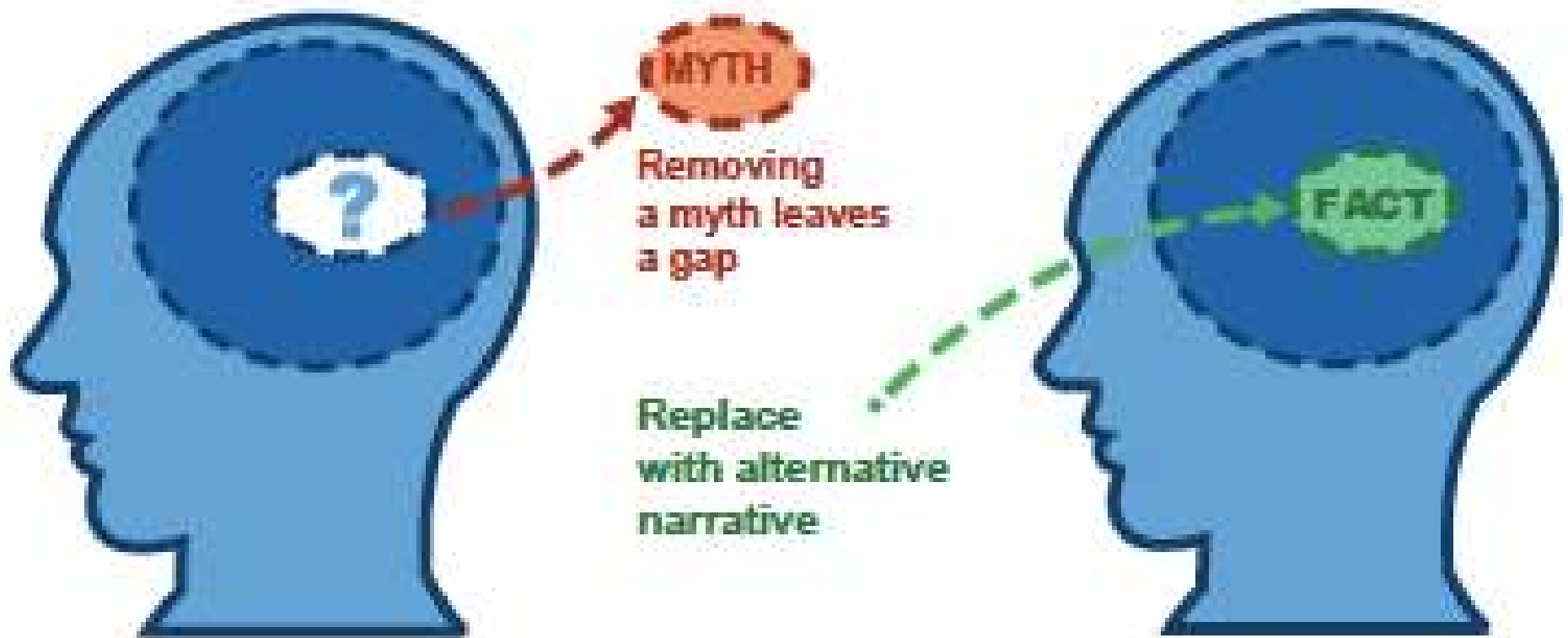


The Familiarity Backfire Effect

- Once people hear a myth/misinformation, it's very difficult to remove that from their minds
- Debunking a myth **can actually strengthen it**
 - making myths more familiar
 - providing too many arguments
 - providing arguments that threaten one's worldview

Replace Myths with a Compelling Alternative

Rather than refuting incorrect elements of parents' beliefs, replace those elements with new information



A simple myth is more cognitively attractive than an overcomplicated correction

**Data
dump**

MYTH
FACT FACT FACT
FACT FACT FACT
FACT FACT FACT
FACT FACT FACT



**Keep
it
simple**

MYTH
FACT
FACT
FACT



Motivational Interviewing

- **R**esist the righting reflex
 - Otherwise you run the risk of increasing a vaccine-hesitant parent's commitment to the status quo
- **U**nderstand motivations
 - Ask questions that elicit values and concerns
- **L**isten
 - Realize that simply providing the vaccine-hesitant parent with information doesn't automatically bring about change
- **E**mpower
 - Remember: you are guiding the parent through the process of thinking aloud and deciding whether to change

Listen



Two ears
One mouth



Brené Brown on Empathy

<https://www.youtube.com/watch?v=1Evwgu369Jw>

Association of moral values with vaccine hesitancy

- Individuals who are hesitant with vaccination may become more entrenched in their beliefs when they are confronted with these types of arguments:

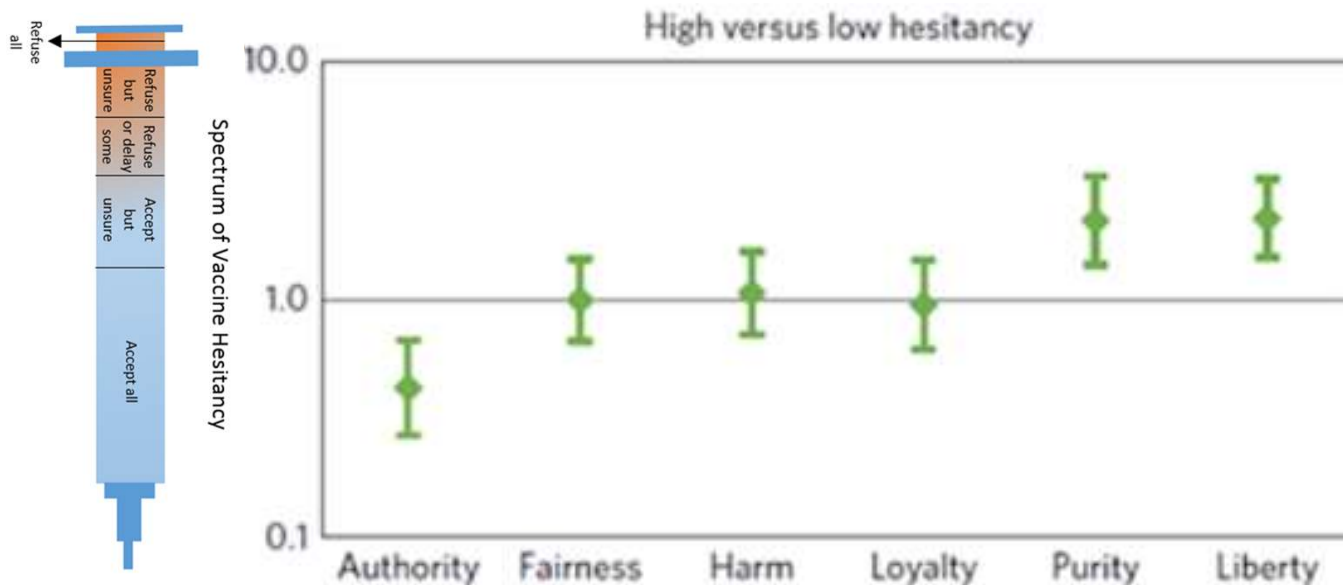
“vaccines protect your children from harm”

"vaccines protect society"

https://www.medpagetoday.com/blogs/themethodsman/69649?xid=nl_mpt_weeklyvideo_2017-12-09&eun=g967364d0r#



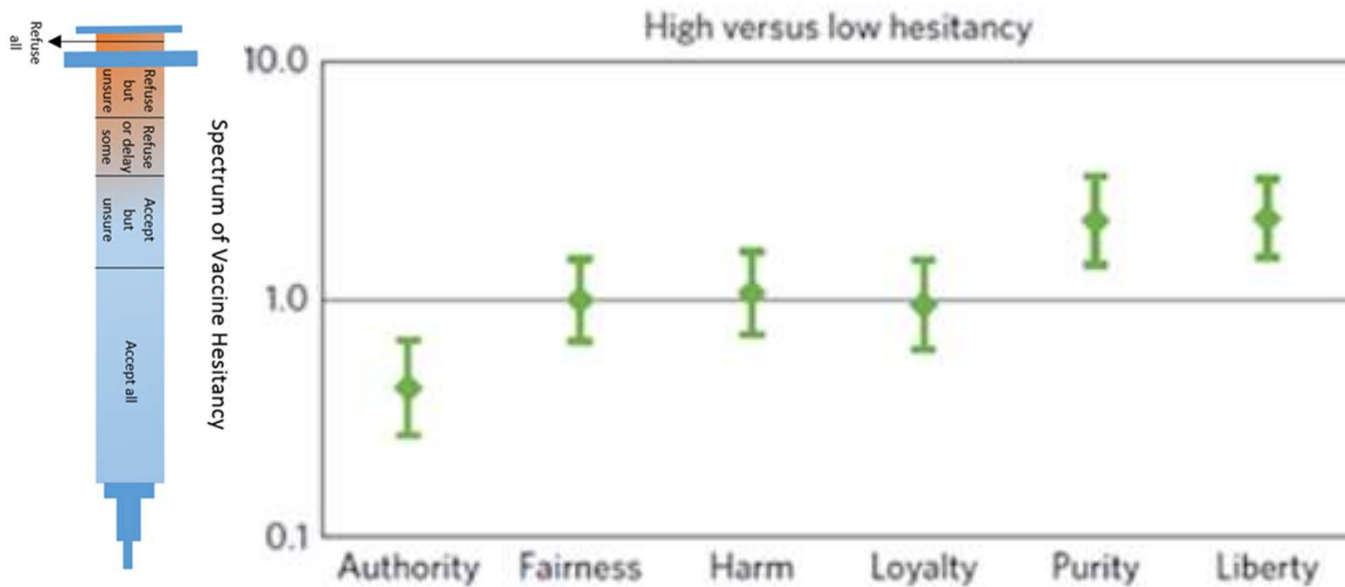
Hesitant parents put high value on the concept of purity – they don't like the idea of putting something "unnatural" into their children.



They value liberty – they want the choice of what goes into their kids.

Appeals to authority (i.e., doctors) are not going to be very effective.

Appeal to concepts like purity and liberty

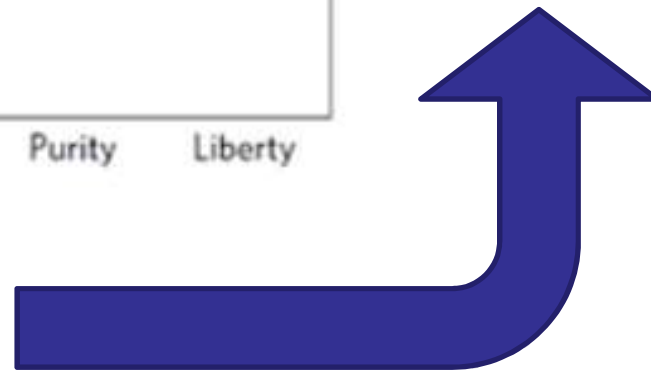


Say






"Keep *your* child
pure of unhealthy
infections"

Instead of saying

"Vaccines protect your children"



**“The risk I took was calculated,
but man, am I bad at math!”**

What we ARE afraid of	What we SHOULD be afraid of
 <p>28 attacks avg./year</p>	 <p>4,500,000 bites avg./year</p>
 <p>50 deaths by peanut allergy avg./year</p>	 <p>27,531 deaths by poisoning avg./year</p>
 <p>321 deaths by plane crash avg./year</p>	 <p>34,017 deaths by car crash avg./year</p>

A Touch of Humor



TABLE 2. Number of Immunogenic Proteins and Polysaccharides Contained in Vaccines Over the Past 100 Years

1900		1960		1980		2000	
Vaccine	Proteins	Vaccine	Proteins	Vaccine	Proteins	Vaccine	Proteins/ Polysaccharides
<u>Smallpox*</u>	<u>~200</u>	Smallpox	~200	Diphtheria	1	Diphtheria	1
<u>Total</u>	<u>~200</u>	Diphtheriat†	1	Tetanus	1	Tetanus	1
		Tetanus‡	1	WC-Pertussis	~3000	AC-Pertussis¶¶	2–5
		WC-Pertussis§	~3000	Polio	15	Polio	15
		<u>Polio </u>	<u>15</u>	Measles¶	10	Measles	10
		<u>Total</u>	<u>~3217</u>	Mumps#	9	Mumps	9
				<u>Rubella**</u>	<u>5</u>	Rubella	5
				<u>Total</u>	<u>~3041</u>	Hib††	2
						Varicella‡‡	69
						Pneumococcus§§	8
						<u>Hepatitis B </u>	<u>1</u>
						<u>Total</u>	<u>123–126</u>

Offit PA et al, *Pediatrics* (2002) 109:124-9

Beware of Bad Links (that look like good links!)

www.vaccines.net

www.nvic.org (National Vaccine Information Center)

www.vaccinationnews.com

Brené Brown on Empathy

<https://www.youtube.com/watch?v=1Evwgu369Jw>

Take Home Points

- ✓ Listen, welcome questions/concerns from parents
- ✓ Replace myths with concise short facts
- ✓ Use presumptive communication and give a **STRONG** recommendation
- ✓ Beware of social media and the internet

