Translating Research into Practice in the Development of CDC’s Childhood Immunization Campaign

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VACCINATION COVERAGE IN THE UNITED STATES

* The Healthy People 2020 target for coverage is 90% for all vaccines with the exception of rotavirus (80%) and HepA (85%).
† DTP (3+) is not a Healthy People 2020 objective. DTaP (4+) is used to assess Healthy People 2020 objectives.
§ Reflects 3+ doses through 2008, and Full Series (3 or 4 doses depending on type of vaccine received) 2009 and later.
Very few US toddlers have received no vaccines at all

Source: National Immunization Survey
WA State Kindergarten Immunization Exemption Rates by County
School Year 2013-2014

Data Source: The average percentage of Kindergarteners who have one or more exemptions to school-entry required vaccines as reported by public and private schools in each county. WA State Department of Health Office of Immunization Child Profile, Created with ArcMap 10.0

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).

Source: www.doh.wa.gov/DataandStatisticalReports/SchoolImmunization/DataReports
COMMUNICATION CONTEXT
Used to look a lot like this...
...but recently, we have seen some shifting
Immunization – A Complex Communication Environment

- Low disease awareness = increased focus on vaccine risks
- Low tolerance for vaccine risks
- Full and complicated immunization schedule
- Time is often limited
- Many places to find and get information
AUDIENCE RESEARCH
Research with Health Care Professionals

- Completed
  - 2008 in-depth interviews with pediatricians and family physicians
  - 2009 survey of pediatricians and family physicians (partnership with U of Colorado)
  - 2010 pilot evaluation of educational materials with WA state health care professionals
  - 2010 in-depth interviews (IDIs) to discuss provider resources
Research with Healthcare Professionals

- **Guiding Principles and Lessons Learned**
  - Strong support among healthcare professionals for the existing immunization schedule
  - Bottom line is that kids are getting immunized but discussion and education are taking longer than in the past
  - Healthcare professionals are still the most trusted source of vaccine information and advice for most parents
  - Educational materials should supplement—not replace—conversations between healthcare professionals and parents
Research with Parents

- Completed
  - 2008, 2009, 2010 HealthStyles mail surveys
  - 2008 and 2009 focus group research with moms
  - 2008 online testing of draft educational materials with moms
  - 2010, 2012, and 2014 national polls of vaccine attitudes and behaviors
  - 2010 cognitive interviews and focus groups with moms to test readability of Vaccine Information Statements
  - 2011 focus groups and intercept interviews with parents to discuss vaccination barriers and facilitators, and to test message concepts
Guiding principles and lessons learned

Most parents nationally are confident in vaccine safety, and either have already vaccinated or plan to fully vaccinate their child.

Many parents have at least some questions or concerns about infant immunization (pain, side effects, number, and timing are consistently the most common).

A child’s healthcare provider is generally the most important source of vaccine information; however, moms want to hear consistent things from multiple sources they deem credible.

Educational materials with personal stories and information about vaccine preventable diseases are well-received.
Quantitative and Qualitative Research Show

- Most parents are generally confident in:
  - The safety of vaccines
  - The effectiveness of vaccines
  - The benefits of vaccines
  - The number of vaccines their child gets in the first 2 years of life

- But, they may still be anxious about shot visits
  - About 25% of parents report having at least a little anxiety

- And, they may still have questions
  - Questions may not be the same as concerns
  - Questions and concerns may vary by disease and vaccine
Thinking about your youngest child, in general, how much vaccine information did you try to find before his or her vaccination visits?

- A lot (25.3%)
- Some (31.5%)
- A little (17.3%)
- None (25.9%)

Source: 2015 Consumerstyles Survey
Key Drivers to Communication Planning

- There is a spectrum of parental attitudes, beliefs, and behaviors requiring some tailoring and layering of communication practices and materials.
  - Questions and concerns do not always equal lack of confidence.

- Reinforcing the social norm around vaccination is important.

- Recommendations from providers are persuasive, but we can’t ignore other social influences.
  - The facts don’t speak for themselves. Personal accounts from peers or health care professionals are persuasive and memorable.
  - Vaccine safety issues are a concern for many parents. Risk communication approach is needed to maintain trust.

- There is no quick fix message
TARGET AUDIENCE: PARENTS
Goals of Parent Campaign

• Reinforce the social norm to vaccinate
• Increase awareness of vaccine-preventable diseases
• Increase awareness of disease protection benefits of vaccines
• Empower parents to make the choice to immunize their children
English Campaign: *Immunization. Power to Protect.*

Spanish Campaign: *Con salud, todo es posible. Vacune a sus hijos.*

[Image Link: www.cdc.gov/vaccines/parents/resources]
Parents Use Digital Information

• Digital Channels
• Social Media
• Mobile Access
Digital Communication Activities to Reach Parents

• Amplify messaging in digital space

• Partnerships to reach parents

• Digital tools and conversations
Vaccine Website for Parents

For Parents: Vaccines for Your Children

Vaccination is one of the best ways parents can protect infants, children and teens from 16 potentially harmful diseases. Vaccine-preventable diseases can be very serious, may require hospitalization, or even be deadly - especially in infants and young children.

PROTECT YOUR CHILD AT EVERY AGE.
Find age-specific vaccine information for your child from birth through 18 years.

MAKING THE VACCINE DECISION
Learn about how vaccines work, vaccine safety and risks, and answers to common questions.

YOUR CHILD'S VACCINE VISIT
Find out what to do before, during and after your child's vaccine visit.

DISEASES THAT VACCINES PREVENT
Review the 16 diseases prevented by vaccines recommended for children and teens.

RECORDS & REQUIREMENTS
Learn about immunization records and state vaccine requirements for child care and school.

IMMUNIZATION COVERAGE IN THE U.S.
Review estimates of the number of babies and teens who have received recommended vaccines.

TRAVEL AND VACCINES
Find out which vaccines your family needs if you are traveling to another country.

VACCINE RESOURCES FOR PARENTS
Find fact sheets, links to videos, and additional educational resources.

www.cdc.gov/vaccines/parents
Parent Friendly Resources

www.cdc.gov/vaccines/parents/resources
Parent Friendly Resources

How to Hold Your Child during Vaccinations

Parents and caregivers play an important role in ensuring that children receive vaccines. They can soothe and comfort their children, making them feel safe and secure. Parents also can help with the safe delivery of vaccines by vaccinating children when shots are given.

A parent’s embrace during vaccination offers several benefits. A combination hold:

- Safety promotes
- Provides comfort
- Encourages the child
- Allows the health care provider to hold the child

Information for Parents

Combination Vaccines

Combination vaccines save time, money, and reduce the number of shots your child receives.

Different holds are used to support your child’s safety.

Less Shots – Less Pain

Combination vaccines save time, money, and reduce the number of shots your child receives.

Fewer Shots = Same Protection

Combination vaccines save time, money, and reduce the number of shots your child receives.

Vaccines When Your Child Is Sick

A mild illness is usually not a reason to reschedule vaccinations. Your doctor can help you decide which vaccines your child can still receive safely.

Children with mild illness may still get vaccines:

- Even if they have a fever
- It’s tempting to cancel or reschedule a doctor’s appointment for vaccines when your child is sick, but don’t do it.

A mild illness is usually not a reason to reschedule vaccinations. Your doctor can help you decide which vaccines your child can still receive safely.

Vaccines do not make a mild illness worse:

A child’s immune system is able to respond to minimize resistance to the illness. Your child’s immune system can handle getting vaccines as he or she recovers.

Immunizations and Developmental Milestones

Birth

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus
- Pneumococcal conjugate vaccine
- Rotavirus
- Varicella

6 weeks

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus
- Pneumococcal conjugate vaccine
- Rotavirus
- Varicella

2 months

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus
- Pneumococcal conjugate vaccine
- Varicella

4 months

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus
- Varicella

6 months

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus

12 months

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus

2 years

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus

4 years

- Mumps
- Measles
- Rubella
- Varicella

5 years

- Diphtheria, tetanus, and pertussis
- Hepatitis B
- Haemophilus influenza type B
- Poliovirus

8 years

- Diphtheria, tetanus, and pertussis
- Haemophilus influenza type B
- Poliovirus

16 years

- Diphtheria, tetanus, and pertussis
- Haemophilus influenza type B
- Poliovirus

Other vaccines may be given as part of a series at other ages or at different ages in some cases. Check with your child’s doctor or local health department. Your child’s pediatrician can help determine the vaccines your child can safely get at each visit.

www.cdc.gov/vaccines/parents/resources
Need sample tweets and posts?

Does your baby have all recommended shots? Use CDC’s online tool to check.

http://1.usa.gov/WukBI6

Spending a lot of time talking to parents about vaccines? CDC, AAP, and AAFP have resources to help with your vaccine conversations with parents:

www.cdc.gov/vaccines/hcp/conversations

http://www.cdc.gov/vaccines/events/niiw/
TARGET AUDIENCE: HEALTHCARE PROFESSIONALS
Provider Resources for Vaccine Conversations with Parents

• Developed with partners AAP and AAFP
• Targets healthcare professionals
• Based on formative research
• Uses risk communication principles
• Reviewed annually by subject matter experts

www.cdc.gov/vaccines/conversations
Materials: Provider Resources

- Understanding Vaccines and Vaccine Safety
  - How Vaccines Work
  - The Recommended Childhood Immunization Schedule
  - Ensuring the Safety of U.S. Vaccines
  - Understanding the Vaccine Adverse Reaction Reporting System
  - Understanding MMR Vaccine Safety
  - Understanding Thimerosal, Mercury, and Vaccine Safety
  - The Advisory Committee on Immunization Practices

- Diseases and the Vaccines that Prevent Them
  - 14 vaccine-preventable disease sheets, each with 2 versions (one for high-information seeking parents and the other with basic information); Basic sheets are also available in Spanish

- If You Choose Not to Vaccinate, Understand the Risk and Your Responsibilities
**Provider-Targeted Materials**

**Understanding MMR Vaccine Safety**

**Topics of concern/interest to providers and parents**

1. **Summary of key points**
   - The science

2. **Q&A format**
   - How effective is MMR vaccine?
   - The vaccine is effective in the U.S. which is published in 2000. If one mother Rio got two doses of MMR vaccine that is stopped spreading here. But, measles is still common.

3. **Co-branded with AAFP and AAP**

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**Date**
Parent-Targeted Materials

Current stories from families affected by VPDs

**Vaccine risks and benefits**

Measles Symptoms

Measles begins with symptoms of a common cold, including fever, runny nose, cough, and red eyes or conjunctivitis. The rash usually starts on the head and then spreads to the extremities. The rash can also be felt behind the ears and in the neck.

Measles is Serious

Pneumonia is the single most common complication of measles. Scarring of the lungs and other respiratory organs can result in infantile pneumonia, with a mortality rate of over 50%.

People Exposed to Measles Who Have Not Been Vaccinated

Almost Always Get Measles

If the child has been exposed to the measles virus, even if they have never been vaccinated, they can contract the disease. The vaccine provides immunity against the virus.

Vaccine Has Made Measles Rare in the U.S., But Not Worldwide

Thanks to vaccination, the number of measles cases in the U.S. reached an all-time low of 377 in 2016. The worldwide mortality rate from measles also fell by 79% between 2000 and 2016.

Diseases and the VPD vaccine


text

References

For more information on vaccines, ask your child’s healthcare provider or call 800-CDC-INF (800-232-4636).

www.cdc.gov/vaccines
Parent-Targeted Materials

- Healthcare professionals requested more plain-language pieces for parents
- More basic overview of disease and vaccine
- Most have no story (or an abbreviated version)
- Clearly shows benefits and risks
- Available in Spanish and English
TAKE AWAY MESSAGES
Take Away Messages

• Parents fall along a spectrum; this is not usually an “either/or” decision
• Questions and concerns do not always equal lack of confidence; vaccinating is still the norm
• Doctors and nurses are the most important source of information, but we can’t ignore other social influences
  • Reach parents where they are spending time – including online.
  • Grassroots education and partnerships are key
• There is no quick fix message
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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.