Strategies for Communicating with Vaccine Hesitant Parents

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Disclosure

I have no financial disclosures







- The quality and presence of a provider's recommendation has consistent been associated with increased uptake of vaccines
- Medical providers are among the most trusted individuals in society





	Pro-vaccine	Anti-vaccine	
1	Acceptors	Hesitant	Rejectors
	Agree with or do not question vaccines	Are unsure about, delay, or choose only some vaccines	Completely reject vaccines
	Children fully immunized	Children under-immunized	Children un- immunized
	High trust in provider	Desire a trustworthy provider	Low trust in provider
	Interest in vaccine information from child's provider	Interest in vaccine information from child's provider	No interest in vaccine information
	70%	30%	<1%

Vaccine Acceptance Continuum

Cochrane Reviews: Face to Face Communication

2013: "The limited evidence available is low quality and suggests that face to face interventions to inform or educate parents about childhood vaccination have little to no impact on immunisation status, or knowledge or understanding of vaccination."

2018: "There is low- to moderate-certainty evidence suggesting that face-to-face information or education may improve or slightly improve children's vaccination status, parents' knowledge, and parents' intention to vaccinate."



The What and the How

- The What necessary, but often not sufficient
 - Safety surveillance mechanisms, ingredients, VPDs, immunology of vaccination, ACIP recommendations, misconceptions, etc
- The How what is the best way to convey information so that a parent or patient who is already resistant will be receptive to the information?







Landmark Study

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

Douglas J. Opel, John Heritage, James A. Taylor, Rita Mangione-Smith, Halle Showalter Salas, Victoria DeVere, Chuan Zhou and Jeffrey D. Robinson Pediatrics 2013;132;1037; originally published online November 4, 2013;

- Investigators in Seattle videotaped well visit encounters for children 1-19 months old
- Oversampled "vaccine hesitant parents"
- 111 vaccine discussions, 50% with VHPs
- Tried to figure out what predicted uptake of vaccines





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

Presumptive Format:

- -a declarative statement
- -presupposes parents will vaccinate
- -"Sara gets 3 shots today."

Participatory Format:

- -an open-ended question
- -shifts decisional control to parents
 - -"How do you feel about shots today?"

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Parent resists 83% of the time



JAMA Pediatrics | Original Investigation

Effect of a Health Care Professional Communication Training Intervention on Adolescent Human Papillomavirus Vaccination A Cluster Randomized Clinical Trial

Amanda F. Dempsey, MD, PhD, MPH; Jennifer Pyrznawoski, MSPH; Steven Lockhart, MPH; Juliana Barnard, MA; Elizabeth J. Campagna, MS; Kathleen Garrett, MA; Allison Fisher, MPH; L. Miriam Dickinson, PhD; Sean T. O'Leary, MD, MPH

- Self-efficacy for changing parents minds about HPV vaccine improved among providers
- Time spent in HPV vaccine discussions was the same or decreased from baseline at 4 months after the training in intervention clinics
- <u>9.5% increase</u> in HPV initiation in intervention versus control practices

Evidence that use of Motivational Interviewing Increases Vaccine Uptake



Open Ended Questions

helps explore and understand a parent's stance on vaccination

Affirmation

improves parent engagement in an open discussion with you by helping them feel supported, appreciated, and understood

Reflection

encourages partnerships, deepens rapport, and allows a parent to understand themselves and their motivations on a deeper level

Autonomy Support

enhances a parent's sense of control and makes them feel more at ease with the conversation

Ask Permission to Share

puts parents in a less defensive posture and makes them more receptive to the information you'd like to share

Motivational Interviewing: Example

Provider: "So you seem to have concerns about the HPV vaccine. Well, that's perfectly understandable — I've had a number of questions about this one. Would you mind sharing what your particular concerns are?"

Parent: "Well, I've heard that it's a vaccine to prevent a disease that's transmitted by having sex, and she is a looooong way from having sex."







Provider: "So I can hear that you're concerned that she's too young for the HPV vaccine because HPV is transmitted by sexual activity. Well, I completely get that — she is only 11 after all. I've thought a lot about this. Is it okay if I go over how I've come to think about this vaccine?"

Parent: "Sure..."

Provider: "I used to think of this vaccine as something to prevent a sexually transmitted disease, but realized it's really about preventing cancer. Almost everyone gets this virus, so I think it's important for everyone."

"If she were my daughter I would not hesitate to recommend this vaccine for her, and most of my patients now are getting the vaccine. Having said that, this is a decision only you can make. What do you think?"

Recent quote from a pediatrician after implementing MI in the vaccine conversation

"Asking permission to share has been a game changer. It has really changed the conversation. If there is one MI skill I try to implement each time I do MI, it's this one."





THANK YOU!



