

# Building Vaccine Confidence

## Job Aid\*



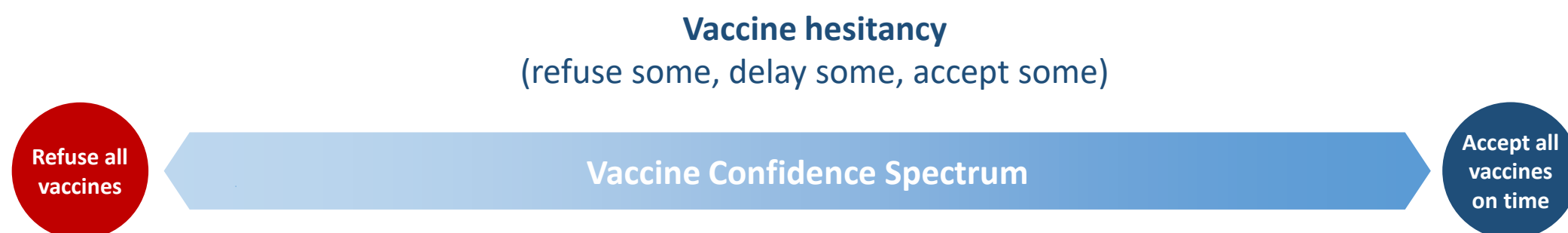
### What is vaccine confidence?

**1** Vaccine confidence refers to the trust that parents, patients, or health care providers have in:

- Recommended vaccinations
- Providers who administer vaccines
- Processes that lead to vaccine licensure, and the recommended vaccination schedule

Vaccine confidence is an important factor for achieving and maintaining the high vaccination rates needed to sustain community-level protection against vaccine-preventable diseases.

Hesitancy to accept a vaccine varies across time, place, and the vaccine, and is influenced by factors such as complacency, convenience, and confidence.



### What factors determine vaccine confidence?

**2** Notable factors that influence confidence in, and acceptance of, vaccines include:

- **Trust** – willingness to rely on someone else's expertise and advice
- **Attitudes and beliefs** – previously held views on vaccine-preventable diseases, and the safety, effectiveness, and benefits of vaccines
- **Healthcare provider confidence** – the confidence the provider has in the vaccine, and their ability to communicate effectively about the vaccine
- **Information environment** – the role that news, social networks, and entertainment media plays in influencing vaccine knowledge, beliefs, and behaviors

### What can lead to vaccine hesitancy?

**3** Vaccine hesitancy is present in all age groups. It involves many factors, including:

- Complacency, convenience, and confidence
- Access, affordability, awareness, acceptance, and activation

Vaccine hesitancy can come as a result of misinformation about vaccines (i.e., they cause autism, they are full of toxins, it is better to develop immunity by getting the disease than by taking the vaccination). Studies have also shown that African American adults have lower confidence in vaccines and the government's role in vaccination than white adults, and that cost was a greater barrier to vaccination update in African American communities.

The key challenges to vaccine hesitancy are:

- Diminished prioritization of vaccine
- Lack of confidence in vaccine's safety and efficacy
- Lack of uniform state policies on vaccination
- Apprehension over following vaccine schedules

### Are there innate intuitions that influence people's vaccine hesitancy?

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These six foundations have been shown to influence vaccine hesitancy:

1. Care/harm – concern about the harm that might result from the vaccine
2. Authority/subversion – distrust of scientists and government officials promoting the vaccine
3. Liberty/oppression – belief that mandatory vaccination policies violate civil liberties
4. Purity/degradation – belief that vaccines are unnatural; prefer people gain immunity by contracting the disease
5. Fairness/cheating – perception that pharmaceutical companies motivated by profit have an unfair voice in setting vaccine policy
6. Loyalty/betrayal – in-group loyalty, patriotism, and sacrificing oneself for the group

### What can healthcare providers do to boost vaccine confidence and reduce vaccine hesitancy?

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Healthcare providers are the most trusted influencers of vaccination decisions, and their own vaccine hesitancy impacts their recommendations to patients. Providers should educate themselves about vaccines and vaccine preventable diseases.

Providers must also take action to boost vaccine confidence and help reduce vaccine hesitancy in order to increase vaccination rates to levels that will protect the entire population.

Some possible action items providers can take include:

- **Reminding patients that vaccinations protect them and those around them** – Achieving and sustaining high vaccination rates in the community is the key to protecting those vulnerable to the disease, including children and those with underlying medical conditions.
- **Remembering that words matter in vaccine advocacy and communication** – Avoid using language that can be easily misinterpreted or put people into categories. Focus on addressing specific vaccine concerns and speaking positively about the vaccine.
- **Educating patients about the risks and benefits of vaccines** – Correct vaccine misinformation (being careful not to reinforce the incorrect information), deliver a strong recommendation for the vaccine, and follow up with motivational interviewing (if needed).
- **Deliver a strong recommendation** – Using presumptive language that presupposes a patient/parent will vaccinate has been shown to be an effective way to increase vaccination uptake.

### What is motivational interviewing?

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Motivational interviewing is a guiding style of communication that may assist with conversations with vaccine hesitant patients or parents.

It is built around 3 components:

1. Collaboration – using a comfortable, non-confrontational tone and language
2. Evocation – leading patients to draw their own conclusions
3. Honoring patient's autonomy – supporting patients in making their own decisions

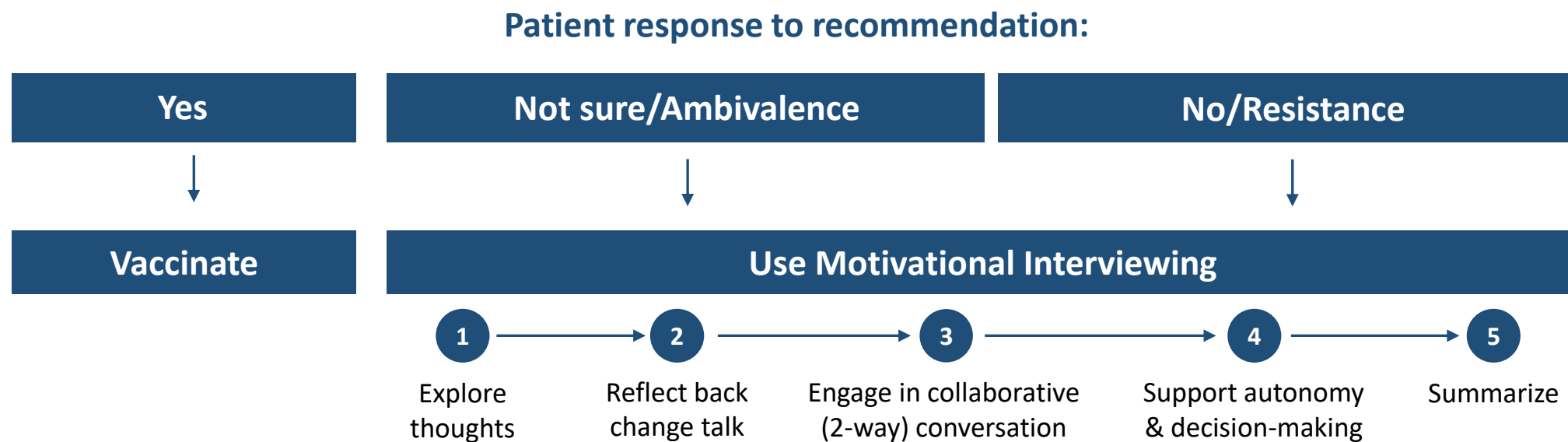
Motivational interviewing uses the following core communication skills, referred to as OARS:

- **O**pen-ended questions – “What concerns do you have about vaccines?”
- **A**ffirmations – “You have thought a lot about this.”
- **R**eflective listening – “I hear you saying that...”
- **S**ummarization – “Let me summarize...”

**How can I use the motivational interviewing framework to start a conversation with a patient/parent?**

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Follow the patient/parent’s response to your strong recommendation for vaccination in the flowchart below to determine if motivational interviewing is necessary:



Use the Elicit-Provide-Elicit script to exchange information with a patient or parent.



Elicit –

- Ask what they already know, or would like to know more about
- Ask them permission to offer information
  - “What do you know about...?”, “What would you like to know about...?”
  - “May I give you information on...?”

Provide –

- Give information in a neutral, non-judgmental way (avoid “I” and “you”)
- Be clear, avoid jargon, and offer information in small amounts with time to reflect
  - “Research suggests...”, “Studies have shown...”, “We know that...”

Elicit –

- Gather understanding from the patient/parent of the information provided
- Ask open questions and reflect on the patient/parent’s reactions
  - “What do you make of that?”, “What else would you like to know?”
  - “What do you think is the next step?”

**What is the readiness ruler?**

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The readiness ruler is a tool providers can use to gauge a patient/parent’s position on an issue, understand what leads them to their position, and offer an opportunity for further dialogue.

Start by asking, “On a scale from 0 to 10, where 0 means not at all important and 10 means the most important thing, how important would you say vaccination is to you?” Then, follow up with questions like, “And, why are you at that number versus another higher/lower number?”

This can help you understand the patient/parent’s motivations, and assist you in effectively guiding the conversation toward promoting vaccination.

