



Let's talk vaccines

Developing a Communications Toolkit to Support Effective Provider-Parent Conversations



¹Jessica Ridpath, BA; ¹Michelle Kindall, BFA; ¹Nora Henrikson, PhD; ²Edgar K. Marcuse, MD, MPH; ³Ginny Heller, MSW; ³Todd Faubion, PhD; ¹John Dunn, MD; ²Douglas Opel, MD, MPH; ⁴Michele Roberts MPH, MCHES; ¹David Grossman, MD, MPH
¹ Group Health Research Institute, ² Seattle Children's Hospital, ³ Within Reach, ⁴ Washington State Department of Health

Background

Parental concerns about the benefits of timely childhood immunization are increasing. Evidence suggests that child health providers are the most important influence on parental immunization decision-making. Effective resources are needed to improve provider-parent communication about vaccines.

Program background

Based on several years of pilot work using a social marketing approach, Vax Northwest, a public-private partnership in Washington State, developed an intervention designed to help child health providers address parental vaccine concerns. One component of this intervention is a toolkit that illustrates how to address parents' concerns using clear, empathetic language within the time constraints of a health supervision visit. The toolkit is paired with giveaway items to help spark conversation between parents and providers.

The communication strategies we used to enhance the toolkit include: 1) packaging the tools for ease of use by providers, 2) making parent information more meaningful and easier to understand, and 3) developing an overall messaging brand to help initiate open discussion between providers and parents.

- We developed a full-color, two-page guide for providers that includes an illustration of the intervention model and answers to parents' common questions in plain, conversational language with cues for empathetic statements.
- The guide is branded with the logo-tagline "Let's Talk Vaccines" to prompt conversation in an open, unbiased way. The logo-tagline is paired with illustrations of birds "chatting" to portray respectful, two-way dialogue.
- We developed several branded giveaway items (a mug, button, clipboard, and notepad) to help providers invite questions from parents.
- A branded, plain-language handout for parents lists reliable sources of vaccine information, with links to blogs and social media and a QR code for downloading the information on a mobile device.



Evaluation methods & results

The toolkit and giveaway items were distributed to providers in 30 clinics using a physician-led, CME-style training format.

- 278 attendees completed evaluation forms at the training.
- On a scale of 1 ("poor") to 7 ("excellent"), 96 % of providers rated the quality of the toolkit at 6 or 7.
- Among 196 providers who shared open-ended comments on what was most useful about the training, 57 % singled out the toolkit—often commenting that it provided clear, specific language and would be useful at the point of care. Many also commented that the giveaway items would be useful.



People are saying—

"The buttons are great conversation starters."

"The examples of phrases to use are most helpful. Provides concrete ways to have the conversation. Love the handouts/pins/clipboards/etc."

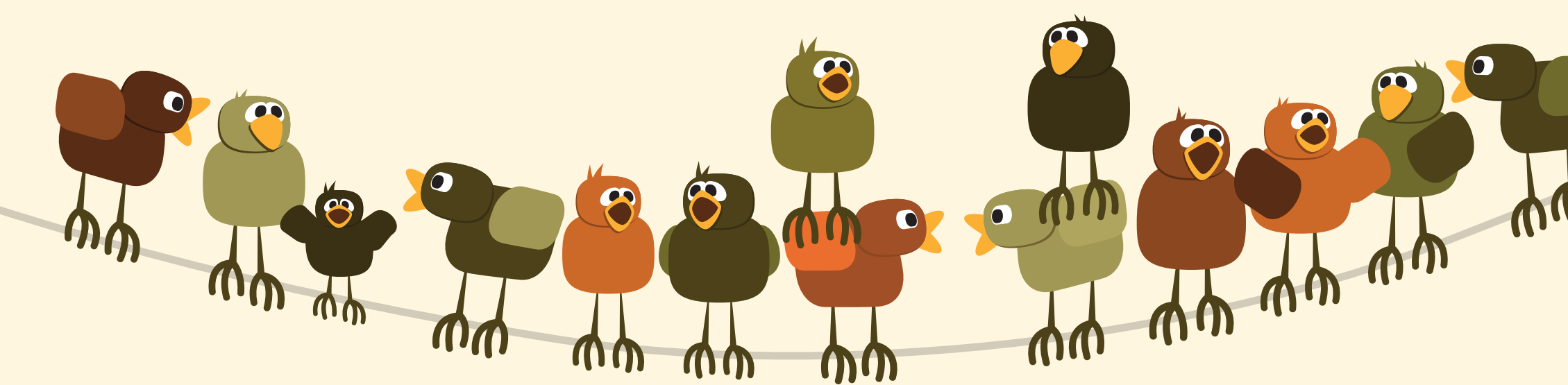
"Great handouts. Clear ideas and reminders. Good ideas for talking points. Love the logo."

"Practical, easy-to-use materials."

"The FAQs and talking points are very useful for point of care."

Conclusions & implications for research & practice

Providers gave very positive initial reactions to the "Let's Talk Vaccines" toolkit and brand. Using plain, conversational language and simple, inviting imagery, the "Let's Talk Vaccines" toolkit gives providers a well-received and replicable playbook for confidently and empathetically engaging in a dialogue with vaccine-hesitant parents. Collaborating with communications experts is a promising strategy for researchers, providers, and public health professionals developing resources to support provider-parent conversations about vaccines. Analyses of primary outcomes—parental vaccine hesitancy and provider self-efficacy in addressing hesitancy—are being evaluated with an ongoing randomized controlled trial.



This study is funded by the Bill & Melinda Gates Foundation and the Group Health Foundation.

