



Addressing Childhood Vaccination Hesitancy



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Abstract

A literature review was done between the time of September 2019 to November 2019 to identify interventions healthcare providers can use to acknowledge and address parents who are vaccine-hesitant. Ten articles were selected by researchers for review focusing on parents with children who are younger than two years old. Methods were developed to address education for vaccine-hesitant parents by healthcare providers, specifically for Promise Community Health Center in Sioux Center, Iowa. Outcomes of this study placed the importance of trust in the healthcare provider, focusing on the dangers of not vaccinating, and the use of visual aids in education. Literature showed that by using these methods to address hesitancy, vaccination intent would increase.

Keywords: vaccine hesitancy, vaccination education, immunization hesitancy, communication methods with vaccine hesitant parents, methods to counter

Clinical Question

What is the best practice for nurses to provide education to parents on why they should vaccinate their children under the age of two?

Research Framework

The Johns Hopkins Appraisal tool was utilized to evaluate and rate the ten articles chosen. Five articles were used from PubMed, four from CINAHL, and one from ScienceDirect. One limitation to the research is that two articles did studies outside of the United States, thus the findings in the results of these studies may not be applicable to the target population. Another limitation is that one article was published in 2006. The findings in this article may be irrelevant to current parental attitudes towards vaccines.

Nursing Theorist

Jean Watson's Theory of Transpersonal Nursing guided this research. This theory focuses on promoting health, preventing illness, restoring health, and argues that caring is a strong tool nurses use in practice. This theory goes hand in hand with this research topic because by promoting the use of vaccines, it helps to provide primary prevention of illness. Additionally, through the use of caring, it helps to form a trusting relationship between the patient and healthcare provider.

Definitions

- *Vaccination hesitancy*: Delay in acceptance or refusal of vaccination despite availability of vaccination services (Vaccine hesitancy, n.d.).
- *Herd Immunity*: The resistance of the spread of contagious disease that occurs if a high proportion of individuals are immune to the disease, mostly through vaccination ([Dictionary.com]. (n.d.)).
- *Vaccine-related confidence*: The trust that parents or healthcare providers have in recommended vaccines, in the provider(s) who administer them, and in the process that leads to vaccine licensure and recommendations (Alstyne, Nowak, Aikin, 2018, p. 6465).
- *Anti-vaccine sentiment*: Concern that vaccines violate civil liberties or reduces public trust in vaccination or suspicion of the pharmaceutical companies profiting from vaccines (Nour, 2019, p. 2).
- *VPDs (vaccine-preventable diseases)*: A disease which has a developed, preventative vaccine (Kestenbaum & Feemster, 2015, p. 2).

Findings

- Focus on the dangers of not vaccinating
- Discussing vaccine-preventable diseases can be a substantial motivating factor for parents considering vaccination
- Use of visual aids to illustrate the consequences of not vaccinating were proven helpful
- Healthcare professions can show their own belief of these dangers by discussing how they are fully vaccinated, along with their children or grandchildren if applicable
- When a study evaluated the use of educating about dangers and correcting myths about vaccination, it was found that by correcting myths such as the flu vaccine causes the flu, parents were less likely to vaccinate their children
- The importance of trust between the patient and healthcare provider
 - Begin visit by addressing questions and concerns and do not assume parents have chosen to vaccinate
 - Ways in which healthcare providers can become this trusted source include:
 - Spending a long period of time with them, discussing the subject of vaccines with a passionate manner, having a large amount of scientific information, using a "whole-person" approach, behaving in a manner that was not patronizing, and treating mothers/infants as individuals with individual needs. (Benin, Wisley-Scher, Colson, & Holmboe, 2006, p.1538)
- Using visual aids while educating parents
 - "Increasing Immunization Adherence Among Infants of Low-income Parents: The Effects of Visually Enhanced Education," (Papachrisanthou, Lorenz, Loman, 2016)
 - Control group: received verbal education from the nurse combined with a vaccine information sheet.
 - Intervention group: received pictures of children with VPDs while the provider implemented verbal education.
 - Results: 68% of the infants in the intervention group were fully immunized for all three sets of childhood vaccinations while only 33% in the control group completed the immunization schedule

Outcomes

The short term, the healthcare staff will review the materials given to them at the nurse's desk and show increased knowledge about vaccine education. These healthcare providers will then implement this information gained to help increase parent awareness of vaccination. With the implementation of this information, it is anticipated that a trusting relationship between health care providers and patients will be initiated. One long term goal is that the vaccination rate will increase related to decreased vaccination hesitancy. Secondly, the patients will have formed a trusting relationship with healthcare providers as a result of implementation of the CASE method and addressing the various factors addressed in this review.

Interventions

- CASE tool:
 - C: corroborate
 - Acknowledging concerns that parents may have, finding a point in which you can agree on
 - A: about me
 - The healthcare provider informs the parents on how he/she has done to build their knowledge and expertise on the subject matter
 - S: science
 - The healthcare provider will describe the science on why vaccines are beneficial
 - E: explain/advise
 - The healthcare provider gives advice to parents, encompassing individual needs as well as scientific knowledge behind the matter
- Visual Aids:
 - Educational videos made by the CDC on what to expect when your child is vaccinated.
 - Pictures of infants affected by vaccine-preventable diseases.
- Information Packet:
 - Includes dangers of a child not getting vaccinated; placed by the nurses' station for easy review

Conclusion

In summary, addressing parents that are vaccine hesitant effectively comes down to taking the time to build up a trusting relationship, as well as ensuring the healthcare provider gives them up-to-date, accurate information regarding vaccinations. This trusting relationship can be built by the healthcare providing speaking passionately about vaccinations, and by being non-judgmental towards the parents. It also occurs by addressing the parents' concerns and questions. It is important to address the adverse effects of not receiving the immunization rather than addressing the myths of vaccines. The use of educational tools such as visual aids (pictures, videos, brochures, etc.) is a great method to inform parents about vaccinations. After this implementation has taken place, patients will place more trust in their providers and the information given in order to make educated decisions about vaccination.

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