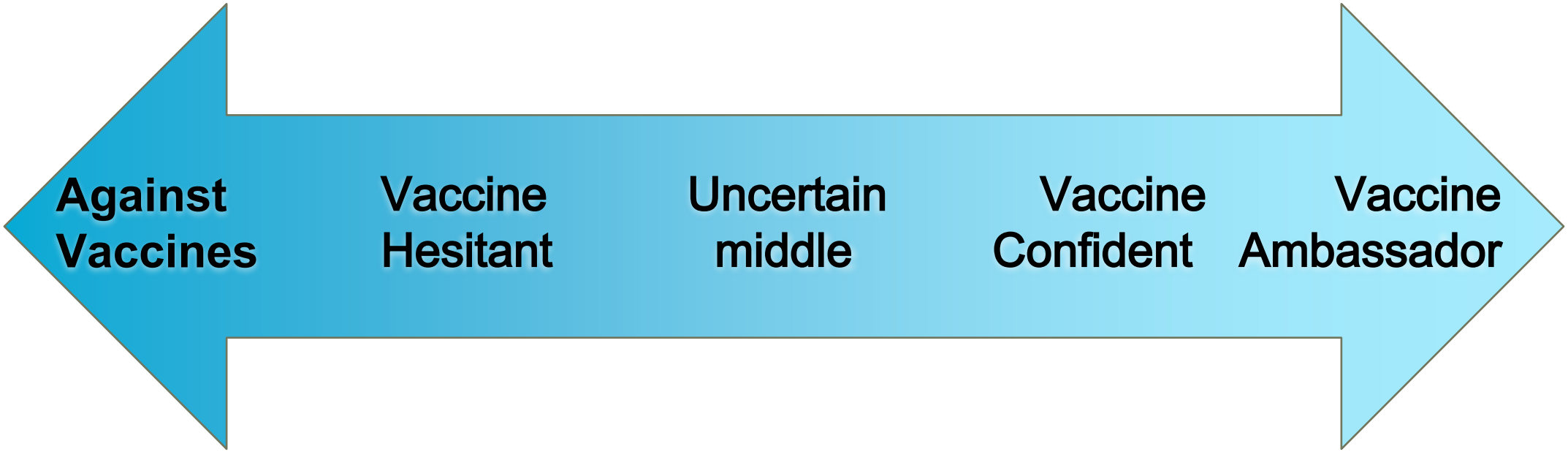
Voices for vaccines

Empowering Action:

Strategies to Combat Vaccine Hesitancy

Vaccine hesitancy is a spectrum



The Flow of Misinformation

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Anyone could be hesitant

How misinformation uses our experience and identity to get to us

Top reasons for hesitancy

- Negative healthcare experiences
- Media or social media bubble
- Peer group influences
- Historical or cultural background

I don’t trust providers

Negative healthcare experiences

A negative healthcare experience does not have to be a provider’s fault:

- Disappointing/traumatic childbirth
- Insurance access issues
- Reactions to any medication

What's the norm?

Peer group influences

One study found that

- quality of a relationship
- frequency of communication

Outweighed

- expertise
- authority
- knowledge

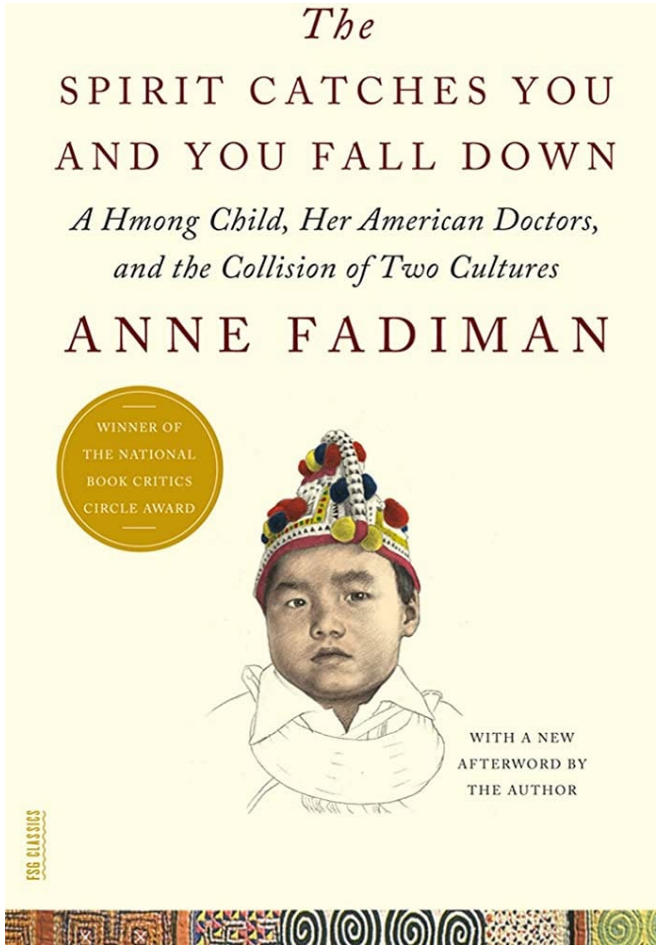
Your favorite cable news channel

A CEPR analysis found significant decreases in intention to get COVID vaccine among <65 year old people who watched FOX News.

This effect was not found with seasonal flu vaccines.

Media or social media bubble

Cultural Competency



Not all cultural reasons for refusing vaccination will be obvious

Historical or cultural reasons

Our brains make us weak

We are really terrible at assessing risk rationally

How we assess risk

Emotions

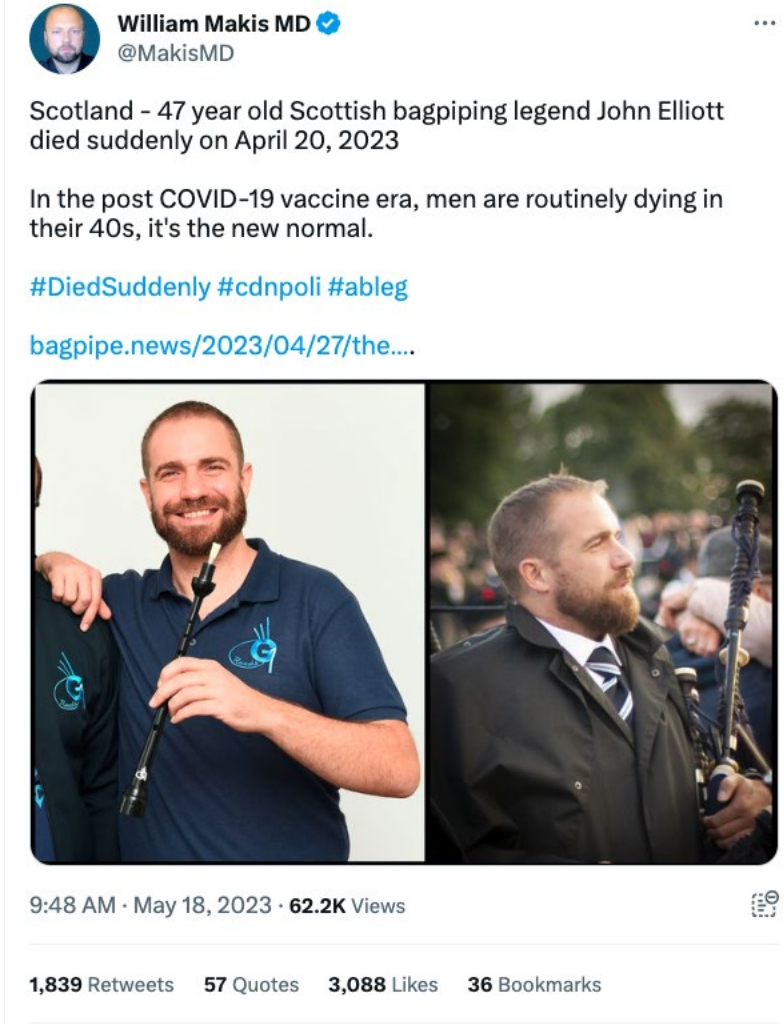
Predictions

The YUCK factor

Rational thinking

Emotions

Stories about harm and death coming to people after vaccination set off emotions, even when people approach them skeptically



Yuck factor

Scaring people away from vaccines by making disgusting claims is effective as it is difficult to stop our impulse to be grossed out

Dr. Dawn Michael
@DawnsMission

When I was hospitalized I told them that I was vaccinated for fear that they were going to give me the Covid injection.

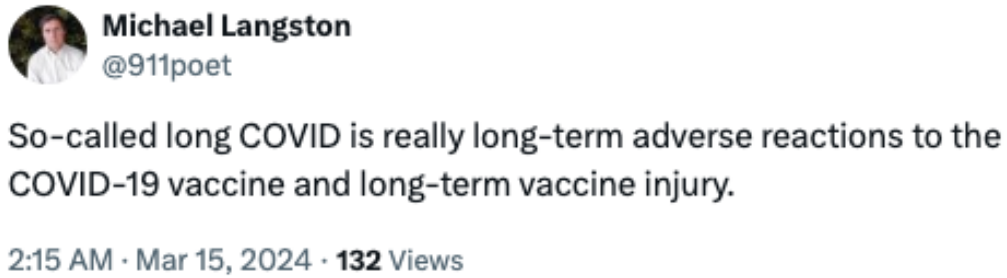
One disturbing incident that took place is the comment about my blood, they assumed that it would look like those who got the mRNA injections, but mine was not clotting and they kept questing me about when I got the #Covid19 shot.

They could tell by my blood that I had not taken it.

10:53 AM · Mar 9, 2024 · **1.8M** Views

Predictions

People who are looking for a perfect outcome may be stymied into inaction when they are unable to predict what vaccination could do to them, and misinformation target them there.



We need you!

To prevent the spread of vaccine myths

Access to providers matters

People who do not have access to providers are less likely to get vaccinated

The result is health inequity:

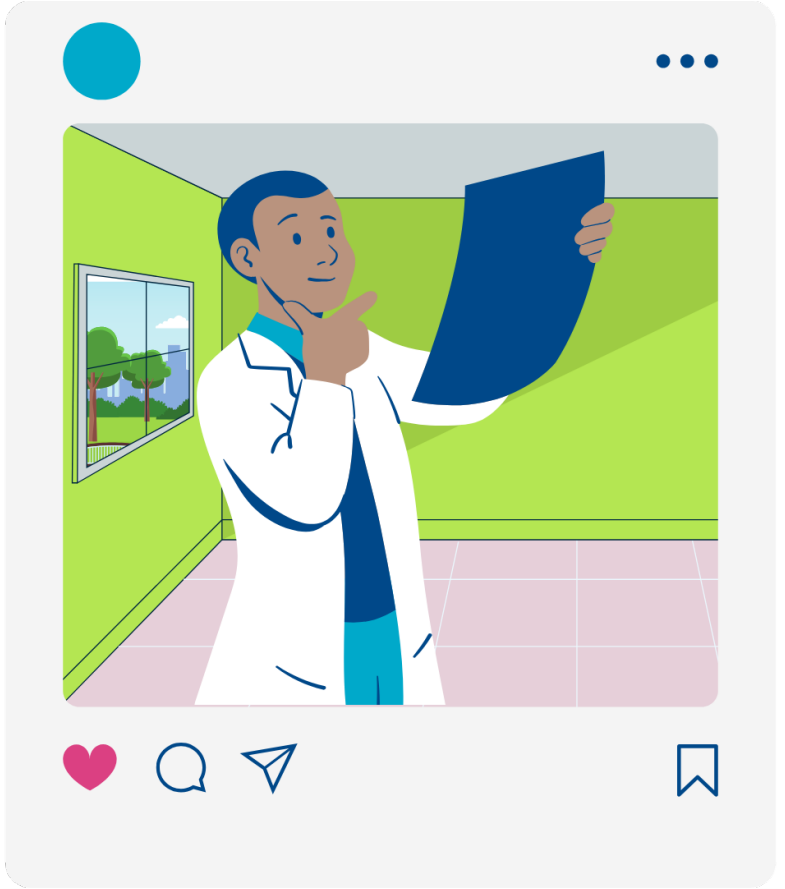
- Latino/Hispanic people are 15% less likely to get vaccinated
- African American/Black people are 25% less likely.

Social and structural determinants of COVID-19 vaccine uptake among racial and ethnic groups

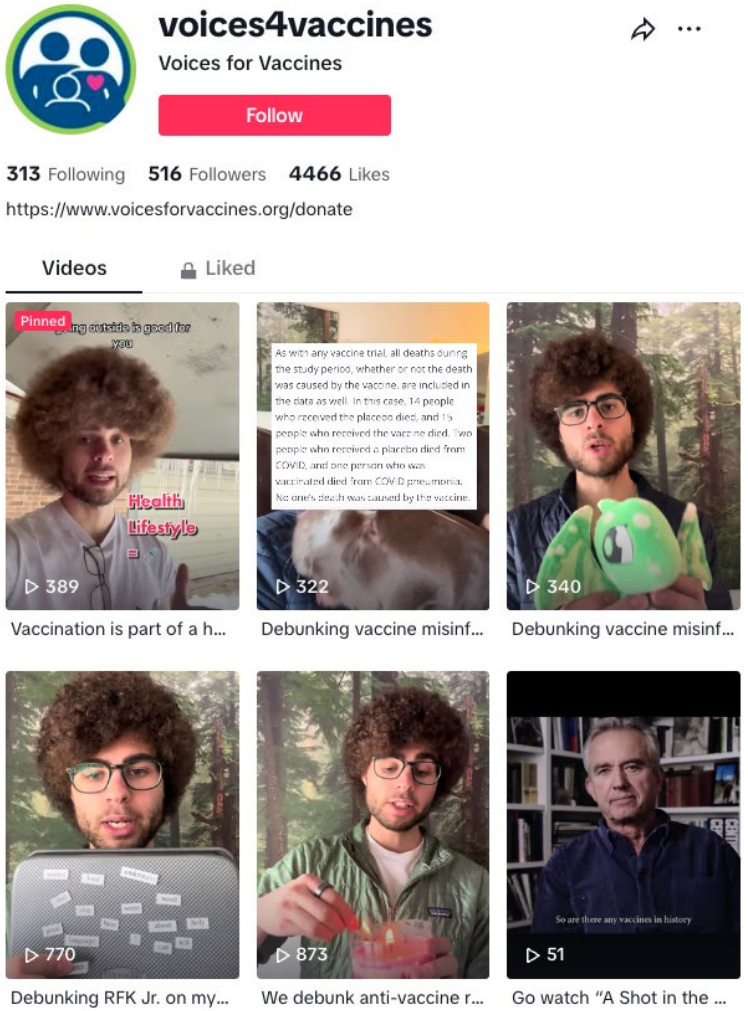
Access to information

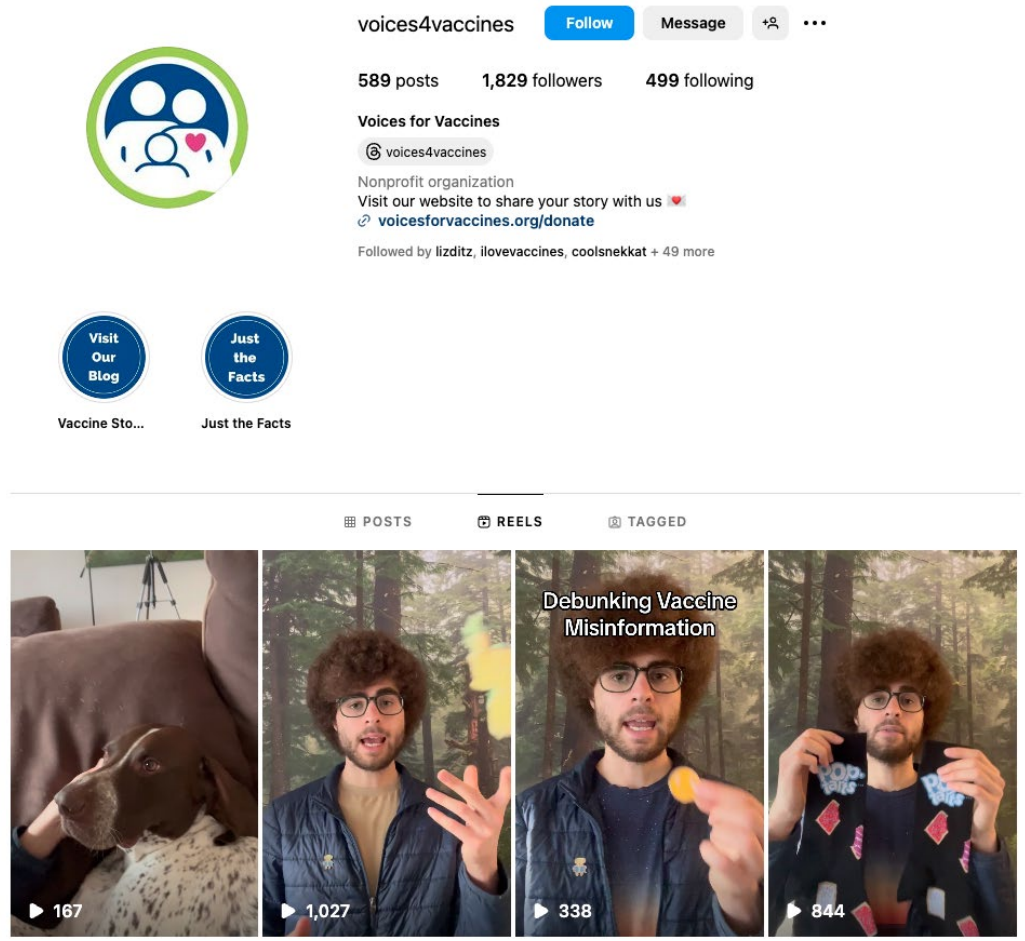
Access to vaccine information cannot depend on access to a medical home

- We need healthcare experts speaking out in public spaces
  - Social media
  - News media
  - Town halls
  - Back-to-school events



Social Media Videos





Blima Marcus

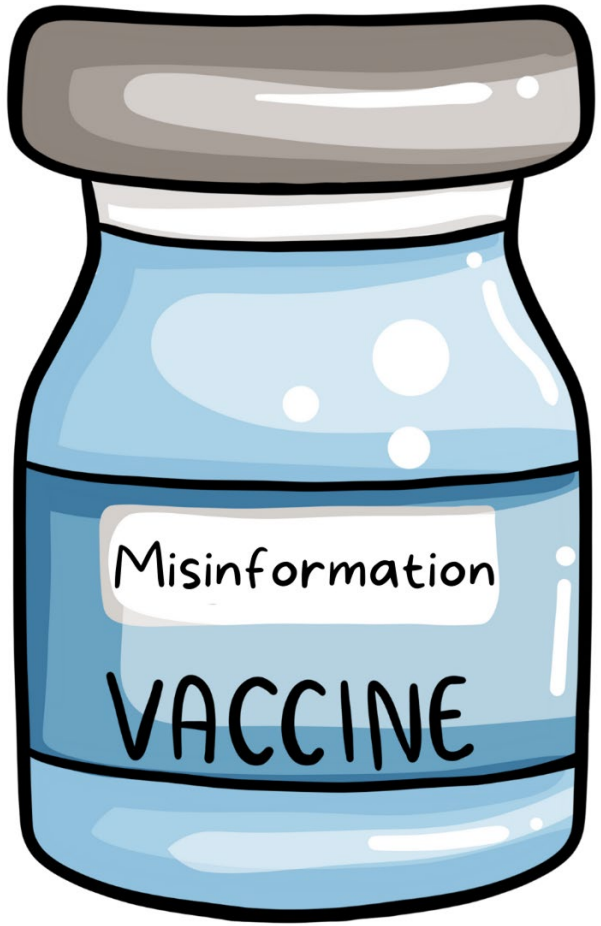
Prebunking

Inoculating others against misinformation

Inoculate against myths

Prebunking

It’s easier to tell people how and why myths are wrong before they hear them from a source they trust

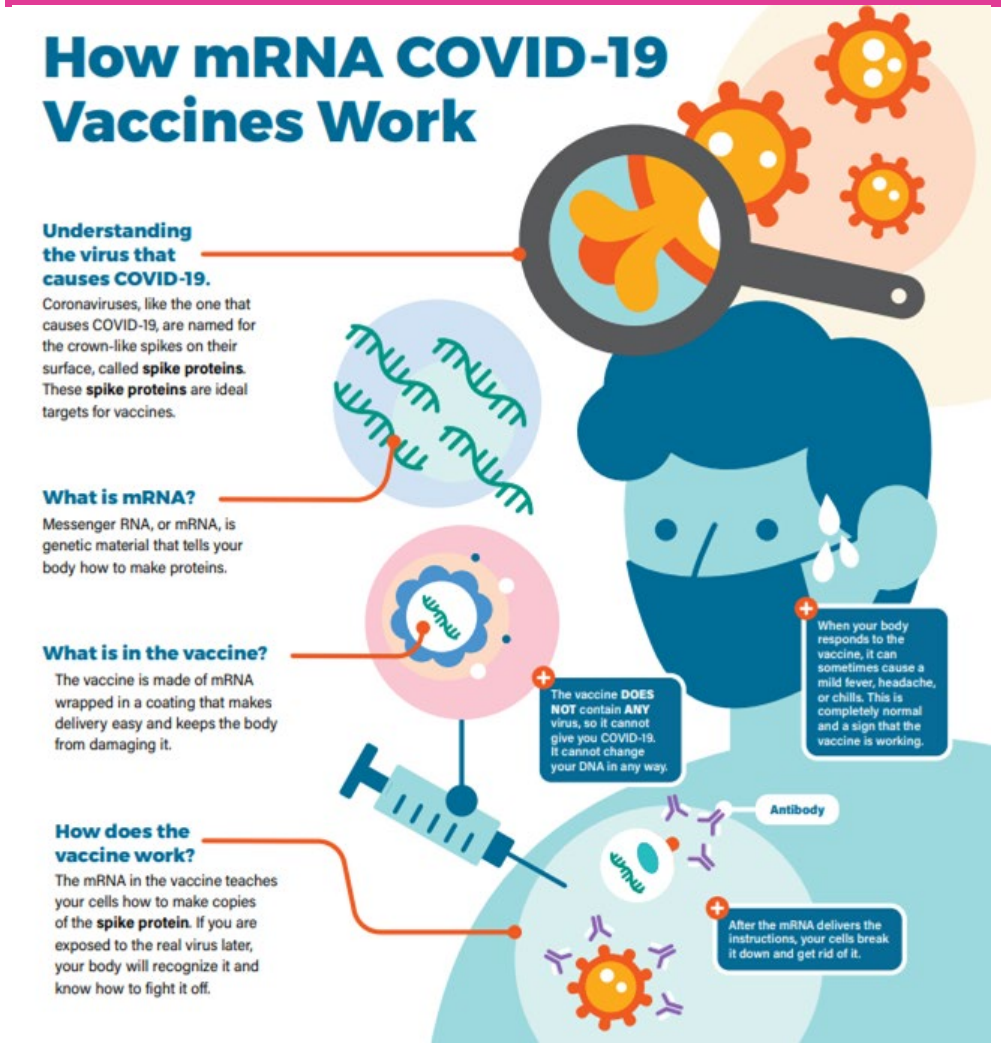


Prebunking works!

Help people **anticipate** the kinds of myths they will be exposed to

- Sign up for our newsletter to learn what is trending now
- Make sure trusted experts in your community are given a big platform
- Flood the field! People believe myths because they are far more prevalent online than the truth is

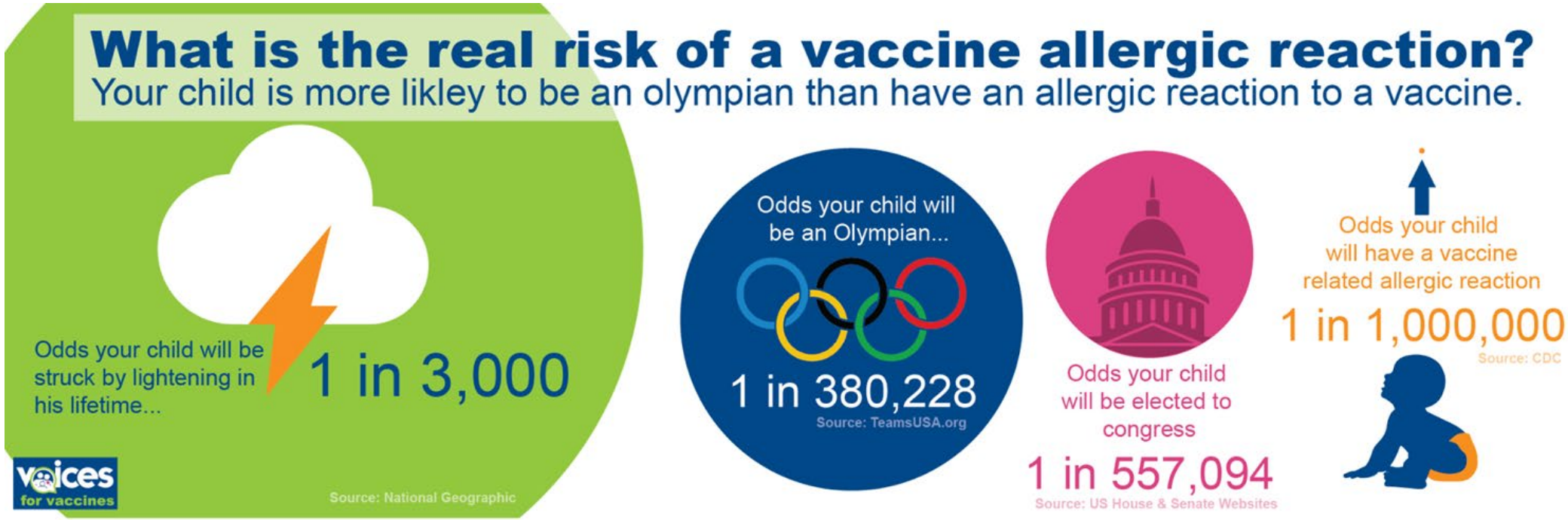
Give people a framework



When people have a framework of understanding how vaccines work, their first response may be checking a story against that framework.

Social Math

Social math tells a story with data by showing large numbers in terms of time or place or making comparisons with familiar things



Debunking

How to handle misinformation that is already circulating

Teach others what's legitimate

- Assess the source and think critically
- Go beyond the headlines
  - Headlines are usually not written by authors
- Identify the author
  - Are they an expert in the field? If not, do they have a fact checker or an editor?
- Check the date
  - Is this debunked because it has been addressed?
- Analyze any supporting evidence
  - And if you don't know how, ask an expert, like your doctor!

Addressing misinformation

In the clinic

- Use a presumptive recommendation
- Provide opportunities for families to learn how vaccines work, how they are made, and how they are tested BEFORE they need to make the choice
- If hesitancy appears, use motivational interviewing
- All staff in the clinic should be on the same page

Addressing misinformation

Among colleagues

- **Listen**
  - Listen to learn what led them to this misinformation
- **Be empathetic**
  - Emphasize that it's important to ask questions to get them addressed
- **Connect them with credible and trusted sources**
  - "Would it be okay with you if I looked this up using a source I might trust?"
  - "Should we ask an expert we both trust about this?"

Addressing misinformation

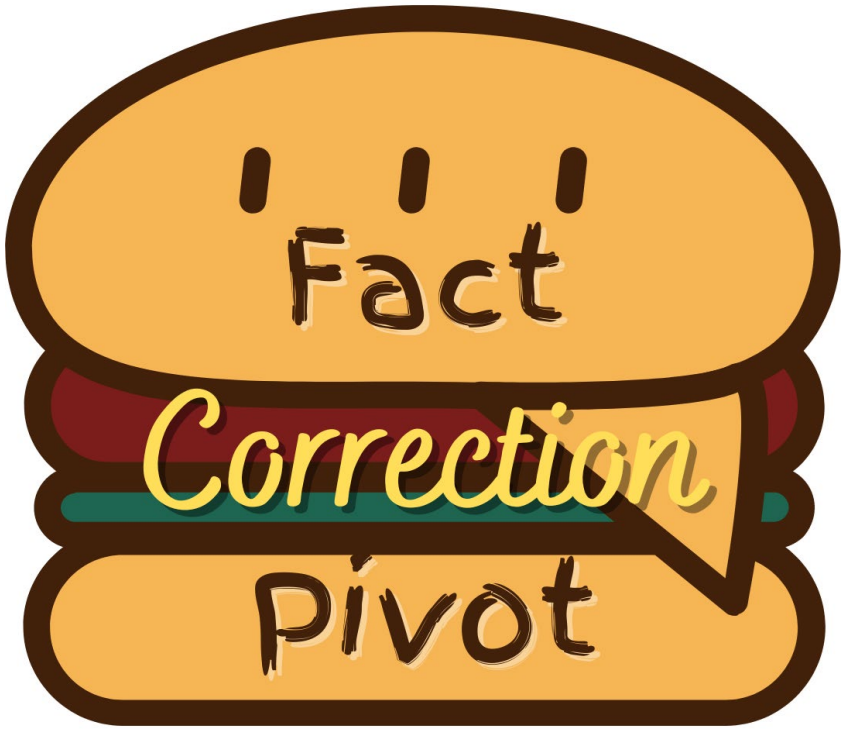
On social media

- Avoid repeating the misinformation
  - “Some people have concerns about this vaccine, but science has shown us that it is well-tested and effective” with specific details if possible.
- Use a truth sandwich
  - A fact
  - Explain how the statement was incorrect
  - End with a fact

Addressing misinformation

In public (addressing something in front of a group or audience)

- Emphasize that addressing questions is important
- Use the truth sandwich again!
  - With one twist…
- Pivot to an important point you want to make about the main topic you are there to address



Vaccine hesitancy

How to talk to someone who is unsure about vaccines

What the public hears

From them:

- Who are you going to trust?
- Scary things are happening
- It’s safer to do nothing

From us:

- That’s a conspiracy theory
- Those stories are lies
- Doing nothing is dangerous

What they should hear instead

We need to earn our way to becoming trusted messengers who:

- Work toward respect
- Have compassion for their concerns
- Have respect for their autonomy
- See them as competent

The VFV method

ASK → “What is your main concern?”Encourage the patient to be specific and name their hesitancy.“What is the one thing that concerns you most? Can you tell me more about it?”

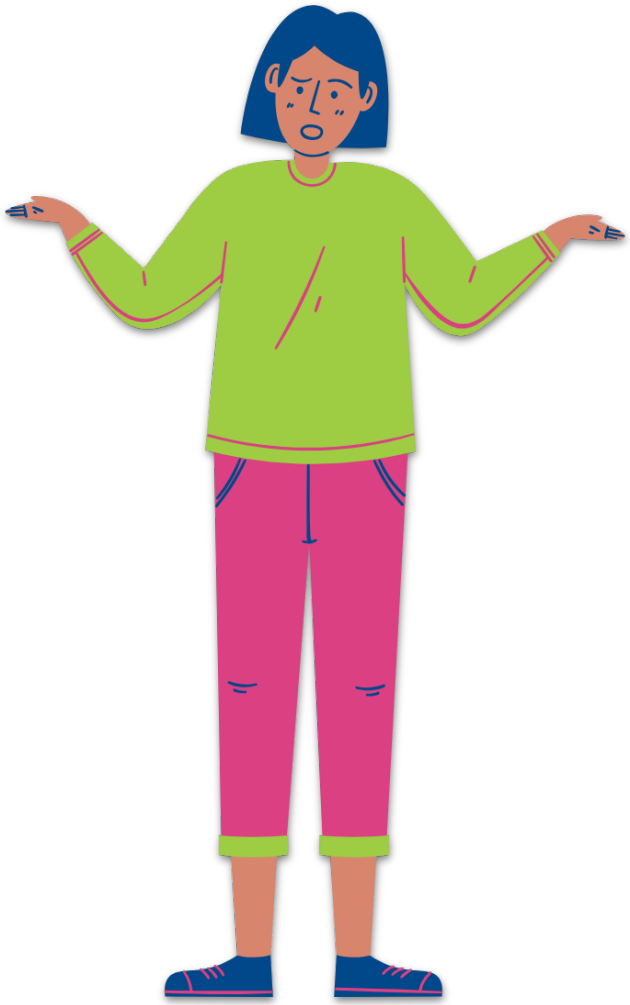
ACKNOWLEDGE → Recognize that the person you’re talking to already has knowledge. “It’s clear you’ve really looked into this.”

AFFIRM → That it’s ok to have questions. “That’s a great question, I heard that too so I looked into it.”

ANSWER → Get permission to share some facts. “Can I share with you the facts…” OR “Can I get you some credible sources so your research helps you make an informed decision.

What it looks like

“My son is a young man, and I am concerned that if he gets the vaccine, he is at risk for cardiac death.”



Ask

Probe deeper to build trust and learn more about the concern:

- Is the concern about cardiac problems your only concern?
- Can you tell me more about why you are worried about cardiac problems?
- If you felt reassured that there would be no problem, would you get this vaccine for him?
- Can you tell me what you understand about cardiac symptoms and this vaccine?

Acknowledge

Build on common agreement and purpose:

- It’s really good you brought up this concern
- I’m glad you are so engaged in your son’s health
- You are correct that there is a slightly elevated risk of myocarditis and pericarditis, or swelling in or around the heart
- Your son is in the group of people who have this slightly elevated risk

Affirm

Affirm their journey to get answers and their ability to find a good reason to vaccinate:

- A lot of people had this concern because it has made news
- When the data first came out, a number of scientists were concerned about the risk and looked into the issue
- It’s completely normal to hear these stories and worry that your son could have a cardiac issue from the vaccine

Pause for permission

This is sometimes referred to as ask-**offer**-ask, but it is the most important part of answering a concern:

- Would it be okay for me to share some perspective about the risk of your son having myocarditis after the vaccine
- Would you like to discuss some of the scientific rationale for offering this vaccine to young men despite myocarditis being a risk?
- Can I tell you what I learned when I looked into the science surrounding this issue?

Answer

Presume that the parent has some working knowledge on the issue, but incomplete information about it:

- The mRNA vaccines do carry a small risk of myocarditis, but it often resolves on its own relatively quickly. Studies show that the risks of myocarditis from COVID far outweigh the risks of myocarditis from COVID vaccines.
- We've found now that in a very small percentage of young men, the vaccine can spur an immune reaction that causes this inflammation. The virus is much more efficient at causing this reaction.

Possible follow-up

Re-engage the patient to elicit their opinions:

- What do you think about the risk of myocarditis in the vaccine versus the virus?
- Do you have any thoughts about the vaccine with this information?
- Do you have more questions?

Handling Hostility

People who are trying to protect their children can feel vulnerable.

- Do more listening than talking
- Reflect back to them what you are hearing
- Express empathy or curiosity
- See following vaccine requirements as a shared journey

Addressing disinformation

Sometimes, disinformation requires specific interventions:

- Report it online
- Expose what disinformers gain
- Support expertise whenever possible
  - Explain what makes someone an expert
  - Elevate the voices of trusted experts from within the community

Debunk to your heart's content

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