Introduction

Vaccine Personas

Background

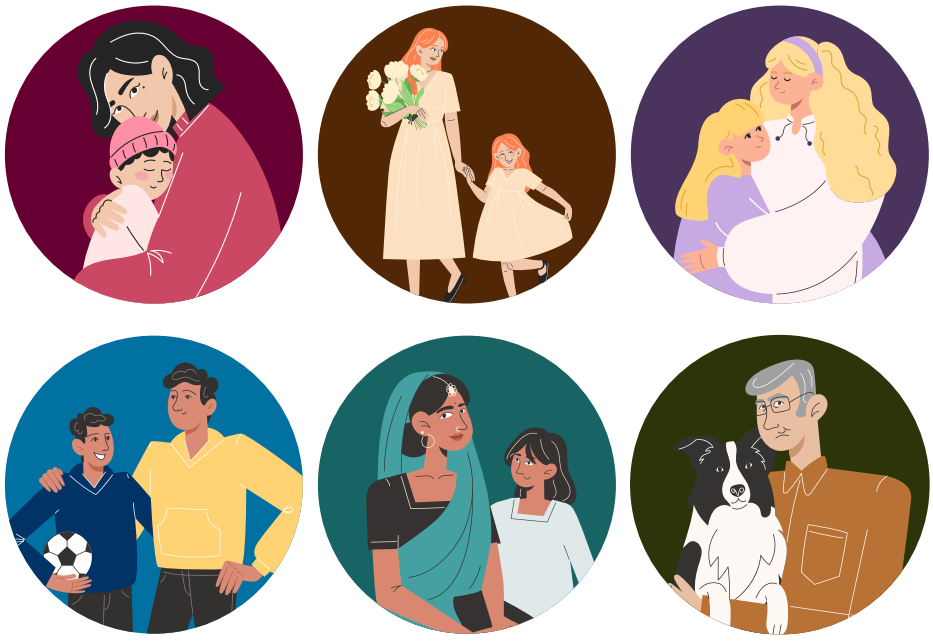
The Vermont Vaccine Coalition, Vermont Department of Health and Hark, a local marketing agency, have collaborated to better understand how different groups of Vermonters—especially parents—experience vaccine hesitancy, and how those beliefs influence decision-making.

As part of this work, we've created six vaccine personas to support more natural, relatable conversations between providers and patients. They are designed to help providers better understand where patients are coming from and respond in a clear, honest, and reassuring way.

Personas are research-informed profiles that reflect common patterns in beliefs, concerns, and behaviors related to vaccines. We recognize they are simplified representations of complex perspectives, and are most useful as a starting point—not a complete picture. Personas should always be paired with clinical judgment and individual patient context.

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First-Time Parent

"I want to be careful and make the best possible decisions for my baby."

A first-time parent overwhelmed by information and afraid of making the wrong choice. Often delays decisions while seeking reassurance about vaccine safety and timing.

Background

First child | Pregnancy or birth is a major emotional milestone

Highly engaged in parenting decisions | Actively researching and comparing information

Often making vaccine decisions beginning in the prenatal period

Common Influences

Beliefs & Identity

- Generally supportive of vaccines, but hesitant about making the wrong choice
- Sees careful research and active decision-making as part of being a good parent
- Concerns tend to be rooted in perceived safety, rather than ideological opposition

Trusted Sources

- Pediatricians and OB/GYNs (when trust is established)
- Evidence-based parenting experts
- Peer networks (e.g., friends, family, other parents)
- Prenatal providers and educators

Media Habits

- Parenting apps, blogs, podcasts, books, etc.
- Social media (Instagram, TikTok parenting content)
- Online forums (Reddit, Facebook parenting groups)
- Google searches, AI tools, and other online resources for deep dives
- Consumes mainstream sources, with some exposure to alternative perspectives

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Key Signals

Common Language

- “Can we space these out?”
- “I’m not anti-vaccine, I just want to go slower.”
- “Do they really need all of these this early?”
- “I want to do more research first.”
- “Is it safe to give multiple vaccines at once?”

Common Concerns

- Vaccines overwhelming their child’s immune system
- Side effects or adverse reactions could cause harm
- Multiple vaccines at once may not be safe
- General overwhelm as a new parent

Common Actions

- Asks about or requests alternative schedules
- Asks detailed, specific questions
- Accepts some vaccines but hesitates on others
- Continues researching between visits
- Defers vaccines due to information overload

Engagement Strategies

They Respond Well To:

- Acknowledging their intention to be careful
- Acknowledging how confusing today’s health information environment can feel
- Normalizing their questions
- Sharing a brief, personal experience when appropriate

They Don’t Respond Well To:

- Dismissing concerns or rushing the conversation
- Overloading with jargon, statistics, and technical details
- Framing the schedule as rigid or non-negotiable
- Implying they are misinformed or their sources are untrustworthy

What They Need to Move Forward

Confidence in vaccine safety **A strong recommendation from a trusted provider**

Reassurance that their questions and concerns are valid **Clear, digestible explanations**

Awareness-building and preparation in the prenatal period



Reconsidering Parent

"I've always trusted vaccines… I'm just not as sure now."

A parent who previously accepted vaccines but is now reevaluating decisions after exposure to new information, social influence, or negative experiences.

Background

- Parent of multiple children or older child
- Previously accepted vaccines but is revisiting earlier decisions
- Has had new exposure to parenting networks, media, or anecdotal experiences
- Often making decisions around boosters, later childhood vaccines, or second doses

Common Influences

Beliefs & Identity

- Values being informed, careful, and responsible
- May feel tension between past decisions and new doubts
- Wants to be consistent but also "get it right"

Trusted Sources

- Pediatricians and other healthcare providers (but trust may be slightly weakened)
- Alternative health providers
- Peer networks (i.e., friends, family, other parents)
- Online communities and social influencers

Media Habits

- Parenting apps, blogs, podcasts, books, etc.
- Social media (Instagram, TikTok parenting content)
- Online forums (Reddit, Facebook parenting groups)
- Google searches, AI tools, and other online resources for deep dives
- Consumes mainstream sources, with some exposure to alternative perspectives

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Key Signals

Common Language

- "I didn't think to ask this the first time, but now I'm wondering…"
- "Do they still need this if they already had one dose?"
- "I've been hearing more about side effects lately."
- "Is this one really necessary?"

Common Actions

- Considers delaying or skipping follow-up doses
- Questions vaccines they previously accepted
- Seeks alternative opinions or validation
- Compares past decisions with new information, stories, and sources

Common Concerns

- The benefits may no longer outweigh the risks
- Personal stories or experiences bring up concerns about vaccine safety
- Older children may not be at significant risk from vaccine-preventable diseases
- It can be difficult to know which information to trust

Engagement Strategies

They Respond Well To:

- Acknowledging that it's normal for perspectives to evolve and questions to arise
- Acknowledging how confusing today's health information environment can feel
- Curiosity about what prompted their new concerns
- Creating a safe space to discuss negative stories or experiences

They Don't Respond Well To:

- Dismissing concerns or rushing the conversation
- Overloading with jargon, statistics, and technical details
- Framing the schedule as rigid or non-negotiable
- Implying they are misinformed or their sources are untrustworthy

What They Need to Move Forward

Reaffirmed trust in vaccines | **Reassurance that their concerns are valid**

Clear, digestible explanations | **A strong recommendation from a trusted provider**



Wellness-Oriented Parent

"I try to keep things as natural as possible."

A parent who approaches health through a clean-living, low-tox or natural lens and may be hesitant about vaccines that feel unnecessary or misaligned with their worldviews.

Background

- A parent and/or making decisions for self
- Highly engaged in alternative wellness providers and natural health practices
- More likely to decline newer or perceived "optional" vaccines
- Primarily uses complementary/alternative medicine (CAM) over conventional medicine
- Curates health choices based on personal philosophy and independent research

Common Influences

Beliefs & Identity

- Values holistic medicine, natural immunity, and minimal interventions
- Sees health as something to be supported through lifestyle and diet
- Has a strong sense of personal responsibility for health outcomes
- Is skeptical of corporate or pharmaceutical influence

Media Habits

- Social media (Instagram, TikTok, X)
- Online commentators and communities that champion clean, low-tox or holistic lifestyles
- Newsletters, books, journals/articles and long-form content focused on natural health, immunity, and alternative medicine
- Tends to be skeptical of mainstream sources

Trusted Sources

- CAM providers (naturopaths, acupuncturists, chiropractors, etc.)
- Online wellness influencers
- Established providers in the natural health and wellness space
- Peers and family aligned with their views
- Midwives, doulas and providers who respect and engage their perspectives

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Key Signals

Common Language

- "I'd rather support his immune system naturally."
- "We try to avoid unnecessary chemicals or additives."
- "I'm not convinced pharmaceutical companies have our best interests in mind."
- "I'm just trying to take a more natural approach."
- "Do they really need this, or is it optional?"

Common Actions

- Fully declines vaccines or may be selective
- Prioritizes nutrition, herbal medicine, and lifestyle-based prevention
- Prioritizes alternative or complementary health advice
- Thoroughly researches vaccine ingredients, side effects, and perceived health risks

Common Concerns

- Vaccines disrupt or weaken the body's natural immune response
- Some vaccines are optional and unnecessary
- Certain vaccine ingredients are harmful
- Vaccines can cause serious, long-term health effects

Engagement Strategies

They Respond Well To:

- Commending their commitment to holistic and natural living
- Framing vaccines as helping or training the immune system, not replacing it
- Taking time to address questions in a clear, non-judgmental way
- Creating a safe space to discuss negative stories or experiences
- Sharing a brief, personal experience when appropriate

They Don't Respond Well To:

- Dismissing beliefs or creating an "either/or" dynamic between natural health and vaccines
- Overloading with jargon, statistics, and technical details
- Implying they are misinformed or their sources are untrustworthy
- Closing down or ending the conversation preemptively

What They Need to Move Forward

Acknowledgement, curiosity and respect for their preferences

Reassurance that vaccines support—not disrupt or harm—the body's immune system

Clear, digestible explanations of key topics (e.g., how vaccines work, ingredients, safety, side effects)

A strong recommendation without dismissing their worldview



New-American Parent

"I want to do what's right, but this system is new to me."

A parent who is new to the U.S. healthcare system and who may face language, access, or trust barriers when making vaccine decisions.

Background

- Parent of an infant, child, or teen
- A recent immigrant, refugee, or from a multilingual household
- May be unfamiliar with U.S. vaccine recommendations
- Navigating a new healthcare system, often with different norms and expectations
- May be balancing multiple high priorities (e.g., housing, employment, childcare, transportation)

Common Influences

Beliefs & Identity

- Strong desire to protect their child and do the right thing
- May come from a country with different vaccine schedules, availability, and norms
- Trust in healthcare may be high, if providers are seen as authority figures, or cautious/low, if past experiences involved instability, corruption, or harm
- May defer to providers or seek input from family/community networks
- Cultural norms and prior experiences shape how they proceed

Media Habits

- Cultural or language-specific media (e.g., TV, radio, print, social media)
- Messaging platforms (e.g., WhatsApp, community groups)
- Word-of-mouth within family, peers, and community networks
- Limited engagement with English-language or U.S.-based health content (varies by language proficiency)

Trusted Sources

- Healthcare providers (especially when trust and communication are established)
- Community leaders and liaisons, cultural organizations, or resettlement agencies
- Family members, both local and abroad
- Bilingual providers or interpreters
- Community health workers or navigators

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Key Signals

Common Language

- “Is this required?”
- “In my country, we did it differently.”
- “Do we need to pay for this?”
- “Is this safe?”
- “I don’t understand what this is for.”

Common Actions

- Asks logistical or clarifying questions
- May delay due to confusion, access issues, or competing priorities
- May follow provider recommendations closely, or hesitate if trust has not yet been established
- Relies heavily on interpreters or family members for communication

Common Concerns

- Vaccines may be expensive or not covered by insurance
- Questions about the safety and quality of vaccines
- Confusion about vaccine schedules and timing in the U.S.
- Language barriers may make information difficult to understand

Engagement Strategies

They Respond Well To:

- Using plain language and avoiding jargon
- Providing translated materials and interpreter support
- Offering a simple orientation to how vaccines and the U.S. healthcare system work
- Normalizing differences ("In many countries, schedules are different...")
- Offering step-by-step guidance and support

They Don’t Respond Well To:

- Dismissing concerns or rushing the conversation
- Overloading with jargon, statistics, and technical details
- Relying on written English materials without translation support
- Dismissing or glossing over prior experiences or cultural context

What They Need to Move Forward

Culturally responsive communication

Simple explanations in their preferred language

Reassurance about safety, quality, and cost

Assistance understanding and navigating the healthcare system

Trust building through consistency and respectful interactions



Faith-Motivated Parent

"We don't feel comfortable with that one."

A parent whose vaccine decisions are guided by religious beliefs, values, and moral concerns.

Background

Parent of a preteen or teen

Strong affiliation with a faith-based community

Health decisions are often shaped within the context of family, place of worship, and community expectations

Common Influences

Beliefs & Identity

- Strong emphasis on faith, religious text, and moral responsibility
- Health decisions are closely tied to religious beliefs and family values
- May view certain vaccines through a moral or ethical lens
- Belief that some vaccines conflict with values related to sexuality, purity, or the sanctity of life

Media Habits

- Faith-based media (e.g., TV, radio, podcasts, social media)
- Place of worship communications
- Word-of-mouth among family, peers, and faith communities
- Mainstream media, often filtered through a values-based lens
- Online and social media content that aligns with or reinforces their beliefs and worldviews

Trusted Sources

- Family members, faith leaders, and the greater faith community
- Culturally or religiously aligned healthcare providers
- Providers who demonstrate respect for beliefs without challenging them directly

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Key Signals

Common Language

- "That doesn't align with our beliefs."
- "We're not doing that one."
- "She's too young for that."
- "I've heard concerns about how this vaccine was developed."

Common Actions

- May accept some routine vaccines while drawing clear boundaries around others (commonly HPV or COVID)
- States decisions clearly, often without seeking further discussion
- May defer or revisit only after trust is established

Common Concerns

- Moral or ethical concerns about how vaccines were developed
- The HPV vaccine conflicts with moral teachings about sexuality
- Their child is not at risk and doesn't need the HPV vaccine
- Accepting certain vaccines (e.g., HPV) may signal approval of behaviors that conflict with their beliefs

Engagement Strategies

They Respond Well To:

- Understanding beliefs without trying to debate or change them
- Framing the HPV vaccine in terms of cancer prevention
- Revisiting the conversation at future appointments
- Sharing a brief, personal experience when appropriate

They Don't Respond Well To:

- Challenging or debating beliefs directly
- Overloading with jargon, statistics, and technical details
- Withdrawing from the conversation after refusal
- Implying they are misinformed or their sources are untrustworthy

What They Need to Move Forward

Acknowledgement, curiosity, and respect for their beliefs and values

A strong recommendation without judgment or confrontation

Clear, digestible explanations if they choose to engage in discussion

Reassurance that care and support will continue regardless of their decision



Institutional Skeptic

"Feels like you're pushing stuff I don't really need."

An adult skeptical of institutions and the transparency behind vaccine recommendations.

Background

- Adult making decisions for themselves
- May have past experiences that led them to question/lose trust in medical recommendations
- Most resistance to newer or highly visible vaccines
- May have limited/inconsistent engagement with the healthcare system
- May feel that recommendations have changed over time or have not been communicated transparently

Common Influences

Beliefs & Identity

- Strong emphasis on personal autonomy and independent decision-making
- Skepticism toward health corporations and government health entities
- Preference for making decisions based on their own research
- May believe recommendations are influenced by corporate incentives or agendas

Trusted Sources

- Personal networks (e.g., friends, family, peers)
- Firsthand experiences or anecdotal accounts
- Independent or non-institutional voices
- Providers who are perceived as transparent and willing to answer questions

Media Habits

- Consumes a mix of mainstream and alternative media (online and broadcast)
- Drawn to sources that position themselves as independent or skeptical of authority
- Engages with content that highlights inconsistencies, changing guidance, or perceived lack of transparency
- Participates in or follows online spaces (e.g., social media, forums, podcasts) where skepticism of institutions and public health recommendations is common
- More likely to trust sources that are independent, uncensored, or outside the mainstream

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Key Signals

Common Language

- "I just don't know who to trust anymore."
- "Things keep changing."
- "There's a lot they're not telling us."
- "I want to make my own decision."
- "I'm not convinced this is necessary."

Common Actions

- Selective vaccination (accepts some, declines others)
- Seeks multiple, alternative sources of information before deciding
- Delays or declines newer or highly visible vaccines (e.g., COVID)
- Questions expert or "mainstream" recommendations or guidance

Common Concerns

- Vaccine recommendations are not always transparent
- Pharmaceutical companies or government agencies may have undue influence
- Newer vaccines may not be sufficiently tested
- Pressure to vaccinate can feel coercive
- The risk of disease may not justify vaccination

Engagement Strategies

They Respond Well To:

- Being transparent about what is known and what is still being studied
- Acknowledging concerns about changing guidance or trust
- Supporting autonomy while still making a clear recommendation
- Taking time to address questions or concerns in a clear, non-judgmental way
- Building trust over time through consistency

They Don't Respond Well To:

- Dismissing concerns about institutions, transparency, or changing guidance
- Overloading with data or statistics without clear, real-world context
- Dismissing or criticizing the sources they trust
- Creating pressure or urgency that feels coercive

What They Need to Move Forward

Transparent information, honest acknowledgment of uncertainty, and respect for their autonomy

A trusted relationship with a provider who is transparent and not pressuring

A credible, non-physician healthcare voice they trust (e.g., pharmacist, home-health nurse)

Vaccine Personas

Sample Questions & Responses

These sample responses are intended to be used as conversation starters and examples of supportive vaccine communication. Providers should adapt language based on their communication style, clinical judgment, and relationship with each family. Listening first and maintaining trust are essential.

Universal Concerns

1. **"I'm feeling a little overwhelmed. Can we just wait?"**
   "I hear you. There's a lot of information and opinions out there. The reason we recommend vaccines on this schedule is because babies and young children are most vulnerable to certain illnesses early in life. My recommendation is to vaccinate today, and I'm happy to talk through any concerns you have."

2. **"I'm not prepared to make this decision today."**
   "That's understandable. There's a lot of conflicting information out there. We're recommending vaccines on this schedule because babies and young children are most at risk from these illnesses early in life. I'm happy to answer questions or talk through what's making you hesitant."

3. **"Can we wait until he's a little older in case there's a reaction?"**
   "I can see why that feels safer. The challenge is that babies and young children are actually most vulnerable to these illnesses early on, which is why vaccines are recommended so young. Serious reactions are very rare, and most side effects are mild and temporary—things like soreness or a low-grade fever."

4. **"Is it really safe to give multiple vaccines at once?"**
   "A lot of parents ask this. Vaccines are tested to make sure they're safe and effective when given together. Even though it seems like a lot, babies' immune systems are built to handle many exposures through normal activities like eating, crawling, and being around other people."

5. **"Can we spread the vaccines out or follow a delayed schedule?"**

   ***If clinic allows for delayed schedules:** "I understand wanting to slow things down. The recommended schedule is designed to protect children as early as possible, when they're most vulnerable. It's been carefully studied for safety and effectiveness. Spacing vaccines out usually means more visits, more shots overall and a longer period without full protection. That's why we recommend staying on schedule."

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Universal Concerns (Continued)

"Can we spread the vaccines out or follow a delayed schedule?"

***If clinic does not allow for delayed schedules:** "A lot of parents ask about this. Our clinic doesn't offer an alternative or delayed vaccine schedule. The recommended schedule is designed to protect children when they're most vulnerable to these illnesses, and it's supported by strong medical evidence and safety research. I'm happy to talk through any specific concerns you have."

6. **"What if my child already had the illness?"**
   "Great question. Getting sick can provide some protection, but it can vary from person to person and may decrease over time. Vaccines can help strengthen protection in a more predictable way."

7. **"Why are there so many more vaccines now than when we were kids?"**
   "As we continue to learn more about immunity, more vaccines have become available. Even though the schedule looks different than it did years ago, all vaccines go through extensive safety testing and monitoring."

8. **"Why does my child need vaccines for diseases that don't really exist anymore?"**
   "A lot of parents wonder about this. The reason we don't see many of these diseases today is actually because vaccines have worked so well over time. But some of these illnesses still exist and can spread quickly when vaccination rates drop."

9. **"My husband/wife/partner is really against vaccines."**
   "Some families come to this conversation from different perspectives. That can be really difficult. I'd be happy to answer questions for both of you together or share information you can review at home."

10. **"I don't want to talk about vaccines today."**

    Option #1: "That's okay. I want you to feel comfortable asking questions if and when you're ready. My recommendation is still to vaccinate, but we don't have to keep talking about it today."

    Option #2: "I understand. My recommendation stays the same, but we're here to support your family either way, and I'm always happy to revisit the conversation anytime."

    Option #3: "I hear you. Sometimes there's one specific concern underneath all of this. Would it be okay if I asked what's weighing on you the most?"

Online Misinformation

1. **“I’ve been hearing more stories online about vaccine injuries.”**
   “It can be so scary hearing those stories, especially as a parent. What we know from large studies and ongoing safety monitoring is that serious reactions are very rare. Most side effects are mild and temporary. As your child’s provider, I take concerns about vaccine safety extremely seriously. Do you want to talk through some of the specific concerns you have?”

2. **“I saw a video online about a child having a serious vaccine reaction.”**
   “I can see why that would be upsetting. Serious reactions can happen, but they’re extremely rare. What’s difficult online is that videos and personal stories don’t always include the full medical context or whether the vaccine was actually determined to be the cause. Do you want to talk through what you saw or any questions you have?”

3. **“How do I know if the information I see online is true?”**
   “That’s honestly a really important question right now. There’s a huge amount of health information online, and not all of it is accurate or shared with full context. I encourage families to look for information backed by large research studies and medical organizations like the American Academy of Pediatrics.”

Vaccines & Autism/Developmental Changes

1. **“I’ve heard vaccines can cause autism.”**
   “I hear this concern often and get why it feels scary. The good news is this has been studied very carefully for many years, and research has consistently shown vaccines do not cause autism. Signs of autism often become noticeable around the same age children get vaccines, which can make them feel connected.”

2. **“Isn’t autism more common now because kids get more vaccines?”**
   “We are diagnosing autism more often today than we used to, in part because screening and awareness have improved. Researchers have specifically looked at whether vaccines are connected to autism, and they haven’t found evidence that they are.”

3. **“I know parents who feel like something changed after their child’s vaccines.”**
   “I know these stories can be really hard to hear, especially as a parent. When researchers have looked carefully at stories like this across a very large group of children, they haven’t found any evidence that vaccines cause autism or other developmental conditions. But I understand why these stories stay with people.”

Natural Immunity

1. **“If my child is healthy, do they really need vaccines?”**
   “Being healthy absolutely helps in a lot of ways, but even healthy children can get seriously sick from infections. Vaccines add another layer of protection that healthy habits alone can’t always provide.”

2. **“Wouldn’t it be better for their immune system to build immunity naturally?”**
   “Our immune systems can build protection after infection naturally, but the challenge is that some illnesses can cause serious complications before the body has a chance to respond. Vaccines help provide protection in a safer way, without having to go through the disease first.”

3. **“Can vaccines weaken or overwhelm the immune system?”**
   “I hear this concern often. Vaccines don’t weaken the immune system—they help give it a head start in recognizing certain diseases before a child is exposed to them naturally. Newborn babies’ immune systems are equipped to handle multiple exposures, including vaccines.”

Vaccine Ingredients

1. **“What ingredients are actually in vaccines?”**
   “Different vaccines contain different things, but each ingredient serves a purpose—like helping the vaccine work better or keeping it stable and safe. The ingredients are used in very small amounts and are carefully studied for safety. I’m happy to walk through any specific vaccine ingredients with you.”

2. **“Do vaccines contain fetal tissue?”**
   “Important question. No, vaccines do not contain fetal or human tissue.”

3. **“Were vaccines developed using fetal tissue?”**
   “Some vaccines were originally developed using laboratory-grown cells connected to fetal tissue from the 1960s. Vaccines used today do not contain fetal tissue or human cells. Many faith leaders and religious organizations support vaccination because they view protecting children and preventing illness as aligned with their values.”

   Source: chop.edu/vaccine-education-center

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Vaccine Ingredients (Continued)

4. **“Why is there aluminum in some vaccines?”**
   “Some vaccines contain small amounts of aluminum salts, which help the immune system respond more effectively. The amount is very small and has been carefully studied for safety. In fact, babies are exposed to more aluminum naturally through food, water, breast milk, and formula than they receive from vaccines.”

   Source: chop.edu/vaccine-education-center

5. **“Why is there formaldehyde in some vaccines?”**
   “Formaldehyde can sound alarming, but our bodies naturally produce it during normal processes. It’s used during parts of the vaccine manufacturing process, and only tiny residual amounts remain in the final vaccine—far less than what’s naturally found in the body.”

   Source: chop.edu/vaccine-education-center

HPV Concerns

1. **“Is the HPV vaccine really necessary?”**
   “Great question. HPV is extremely common—in fact, most people are exposed to it at some point in their lives. While HPV can sometimes go away on its own, some strains can lead to cancers later in life. This is why we’re recommending it now—to build protection before exposure occurs.”

2. **“Why does my child need the HPV vaccine so young?”**
   “HPV vaccination is really about cancer prevention. The vaccine works best before someone is ever exposed to HPV, which is why it’s recommended earlier.”

3. **“My child isn’t sexually active, so do they really need this?”**
   “A lot of parents ask this. The vaccine works best before someone is ever exposed to HPV—and research shows most people eventually get HPV. So vaccinating now helps build strong protection before it’s ever needed.”

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Distrust of Corporations/Government

1. **"I'm not convinced pharmaceutical companies have our best interests in mind."**
   "It's easy to question the motives of pharmaceutical companies. My role isn't to sell anything—it's to help you make informed decisions about your health / child's health. What I can tell you is that vaccine recommendations are based on ongoing research, safety monitoring, and guidance from large medical and public health organizations."

2. **"It's really hard to trust anything from the government right now."**
   "I hear this a lot right now. I can't speak for every organization, but I can answer your questions honestly and talk through what we know based on the medical evidence we have. Vaccine recommendations come from large medical organizations and groups of pediatricians and health experts who regularly review vaccine safety and effectiveness data."

Additional Communication Approaches:

- Sharing personal experiences when appropriate: "As both a provider and a parent, I chose to vaccinate my own children."
- Asking open-ended questions
- Reflective listening
- Focusing on one concern at a time
- Revisiting the conversation over time

Resources to Share with Families:

HealthyChildren.org (American Academy of Pediatrics)

Evidence-based vaccine guidance for parents, including common questions, childhood illnesses, and developmental information.

https://www.healthychildren.org/

Parents PACK (Children's Hospital of Philadelphia)

Trusted, research-based vaccine education for parents, including articles, videos, and answers to frequently asked questions.

https://www.chop.edu/parents-pack

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Vaccinate Your Family – Vaccine FAQs

Answers to common questions about vaccines, safety, ingredients, schedules, side effects, and more.

https://vaccinateyourfamily.org/questions-about-vaccines/

Let's Get Real About Vaccines

Plain-language information addressing common vaccine myths and concerns.

https://www.letsgetrealaboutvaccines.org/

Voices for Vaccines

Parent-led organization offering evidence-based vaccine information and family stories.

https://www.voicesforvaccines.org/

Vermont Department of Health

Official Vermont health department providing vaccine information and public resources.

https://www.HealthVermont.gov/VaccineInfo

Parent Education Handouts:

Questions Parents Ask About Vaccinations for Babies (Immunize.org)

Printable handout addressing common questions asked by parents of infants.

https://www.immunize.org/wp-content/uploads/catg.d/p4025.pdf

Reliable Sources of Immunization Information (Immunize.org)

A curated, printable list of trusted vaccine information websites for families.

https://www.immunize.org/wp-content/uploads/catg.d/p4012.pdf

Resources for Healthcare Providers:

Immunize.org – Vaccine Confidence & Addressing Concerns

Practical guidance for discussing common vaccine questions and concerns, organized by topics such as autism, vaccine safety, alternative schedules, and religious concerns.

https://www.immunize.org/clinical/vaccine-confidence/

Immunize.org – Clinical Resources: Vaccine Confidence

A collection of evidence-based tools, handouts, and guidance for healthcare providers.

https://www.immunize.org/clinical/topic/vaccine-confidence/

Need Help Responding to Vaccine-Hesitant Parents? (PDF)

A curated list of trusted resources for addressing common vaccine questions.

https://www.immunize.org/wp-content/uploads/catg.d/p2070.pdf