

# Supporting Providers in Promoting Vaccine Confidence

Vermont EPI/IZ Conference

May 21, 2025



Larner College of Medicine

Vermont Immunization & Infectious Disease Conference  
Hotel Champlain, Burlington, VT  
May 21, 2025

Session II – Vaccine Confidence

**Speakers: Benjamin Lee, MD, Sarah Nowak, PhD, Becca Bell, MD, and Heidi Schumacher, MD**



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# Vermont Immunization & Infectious Disease Conference

## Hotel Champlain, Burlington, VT

### May 21, 2025



In support of improving patient care, this activity has been planned and implemented by The Robert Larner College of Medicine at the University of Vermont is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME) and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

The University of Vermont designates this live activity for a maximum of 5.0 *AMA PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

This program has been reviewed and is acceptable for up to 5.0 Nursing Contact Hours.

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This activity was planned by and for the healthcare team, and learners will receive 5.0 Interprofessional Continuing Education (IPCE) credit for learning and change.

**Our goal is to develop and conduct trainings to help child-serving providers promote vaccine confidence in their patients and families**

- *Our focus here is you, the provider (not patients, families, or public health-oriented approaches)*
- *Currently in pilot/development phase*
- *Training sessions: target summer 2025- summer 2026*

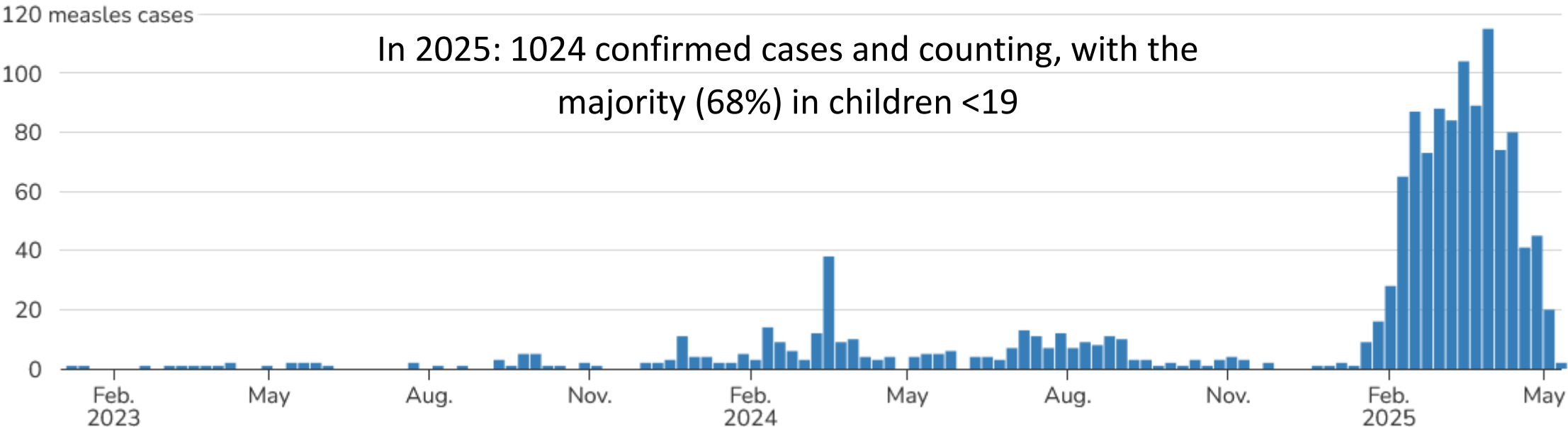
# Goals for today

- Review background and framework
- In small groups: identify needs and solicit input for optimal approaches

# Diminishing vaccine confidence is a public health crisis

## Weekly measles cases by rash onset date

2023–2025\* (as of May 15, 2025)



<https://www.cdc.gov/measles/data-research/index.html>. Accessed online May 19, 2025.

# Definitions

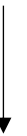
**Vaccine confidence:** the belief that vaccines are safe, effective, and part of a trustworthy medical system (attitude)

**Vaccine hesitancy:** a motivational state of being conflicted about, or opposed to, getting vaccinated (intention)

**Vaccine uptake:** receipt of a vaccine (behavior)

O'Leary ST, Opel DJ, Cataldi JR, et al. Strategies for Improving Vaccine Communication and Uptake. Pediatrics. 2024 Mar 1;153(3):e2023065483. PMID: 38404211.

# Vaccine Hesitancy and Acceptance Are Best Thought Of As a Spectrum



Refuse  
All

Refuse  
But Unsure

Delay or Refuse  
Some

Accept  
But Unsure

Accept  
All

# What is the current evidence?

Improving vaccine confidence requires a comprehensive, multi-scale approach, of which direct provider interactions are one component

# What is the current evidence?

Most families are accepting of vaccines; vaccine hesitant families are in the minority

Nguyen KH, Srivastav A, Lindley MC, et al. Parental vaccine hesitancy and association with childhood diphtheria, tetanus toxoid, and acellular pertussis; measles, mumps, and rubella; rotavirus; and combined 7-series vaccination. American Journal of Preventive Medicine. 2022 Mar 1;62(3):367-76. PMID 35190101.

# What is the current evidence?

Health care workers remain the most trusted source of vaccine information for parents

Nowak SA, Gidengil CA, Parker AM, Matthews LJ. Association among trust in health care providers, friends, and family, and vaccine hesitancy. *Vaccine*. 2021 Sep 24;39(40):5737-40. PMID 34456072.

# What is the current evidence?

The strength and quality of the provider recommendation is  
important

Dempsey AF, Pyrzanowski J, Lockhart S, et al. Parents' perceptions of provider communication regarding adolescent vaccines. Hum Vaccin Immunother. 2016 Jun 2;12(6):1469-75. PMID: 27078515.

# What is the current evidence?

The PRESUMPTIVE approach to vaccine recommendation is more effective than a conversational approach

Opel DJ, Mangione-Smith R, Robinson JD, et al. The Influence of Provider Communication Behaviors on Parental Vaccine Acceptance and Visit Experience. Am J Public Health. 2015 Oct;105(10):1998-2004. PMID: 25790386.

Brewer NT, Hall ME, Malo TL, et al. Announcements Versus Conversations to Improve HPV Vaccination Coverage: A Randomized Trial. Pediatrics. 2017 Jan;139(1):e20161764. PMID: 27940512.



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# What is the current evidence?

Non-tailored, fact-based arguments have been shown to be ineffective and may reduce intention to vaccinate in hesitant families

Nyhan B, Reifler J, Richey S, Freed GL. Effective messages in vaccine promotion: a randomized trial. *Pediatrics*. 2014 Apr 1;133(4):e835-42. PMID 24590751.

# What is the current evidence?

However, tailored and empathetic refutation of vaccine misconceptions is an effective motivational interviewing technique

Holford D, Schmid P, Fasce A, Lewandowsky S. The empathetic refutational interview to tackle vaccine misconceptions: Four randomized experiments. Health Psychology. 2024 Jun;43(6):426. PMID 38436659.

# What is the current evidence?

Motivational interviewing techniques have been shown to improve HPV vaccine uptake; randomized controlled trials for infant vaccine uptake are currently in progress

O'Leary ST, Spina CI, Spielvogle H, et al. Development of PIVOT with MI: A motivational Interviewing-Based vaccine communication training for pediatric clinicians. *Vaccine*. 2023 Mar 3;41(10):1760-1767. PMID: 36775776.



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# AAP/FrameWorks Approach

## Recommendations:

1. Talk about the benefits of vaccination for the wider community.
2. Talk about improving vaccination access as a preventive public health measure.
3. Focus on how vaccines are beneficial to children's and adolescents' long-term health and wellbeing.
4. Use a computer updates metaphor to explain how the immune system improves its performance through vaccination.
5. Use a literacy metaphor to explain how the immune system learns how to respond to viruses through vaccination.

# Discussion

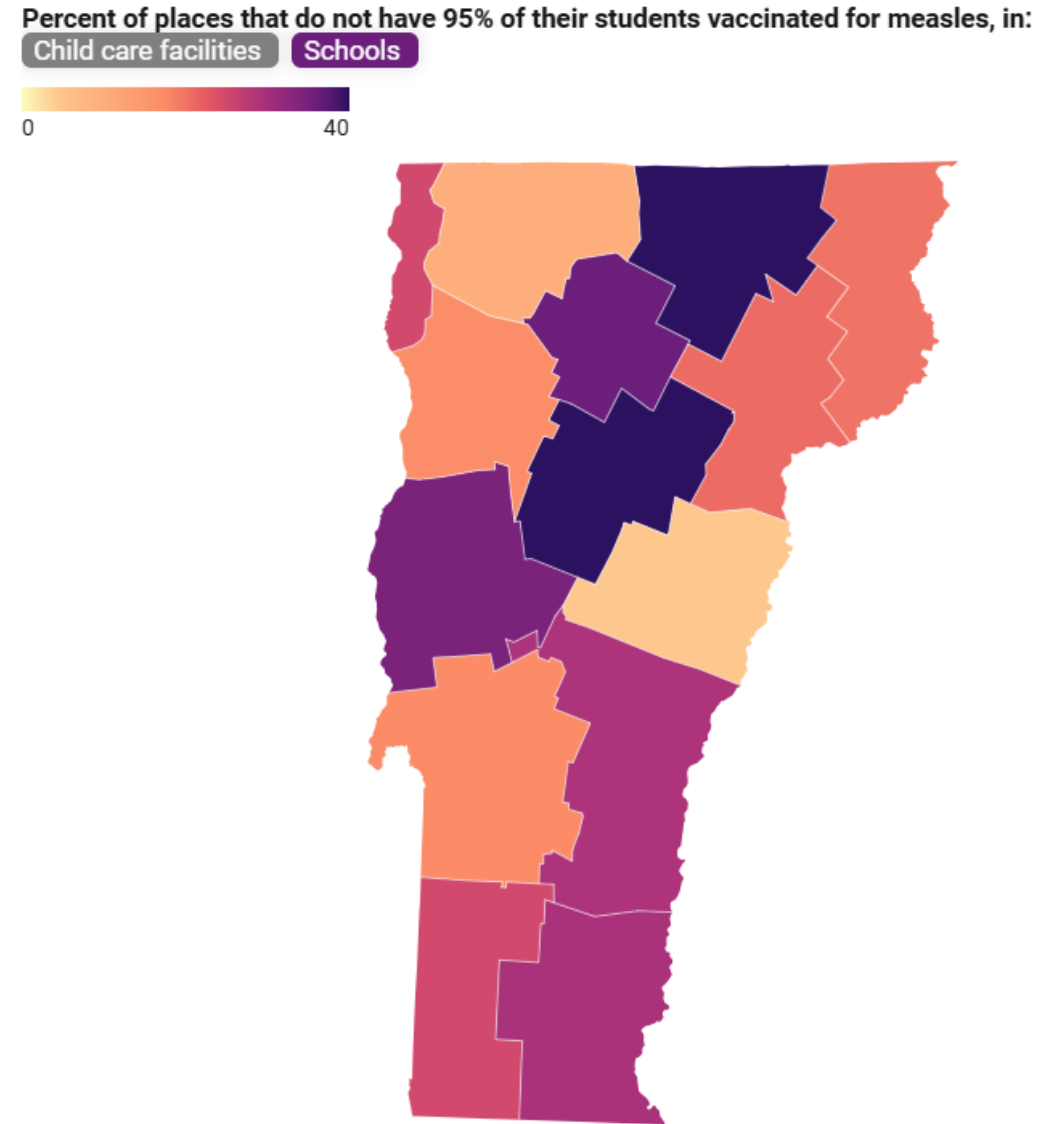
# Case Presentation

HEALTH

# Hundreds of Vermont schools and child care facilities do not meet herd immunity threshold for measles

Amid the worst U.S. measles outbreak in years, Vermont health officials have raised concerns about the state's not-quite-high enough childhood vaccination rate.

By Erin Petenko  
April 2, 2025, 2:29 pm



# Small Group Discussion: Case

- Do you – and do you think your community – sees your MMR vaccination rates as a problem? How do you think geography, culture or demographics impact that perception?
- What have you found has motivated people to be vaccinated?
- How have you seen vaccine hesitancy/confidence addressed in your community? Has it worked?

# Small Group Discussion: Feedback

- What would be most helpful to you to help you when discussing/promoting vaccine confidence with families in your care?
- What additional resources do you need?
- What format would you prefer for training/learning sessions on this topic?
  1. Small-group sessions
  2. Active learning/simulations
  3. Didactic presentations
  4. Others?
- What topics/themes should we highlight?
- What topics/themes do you think we should avoid?
- How do you feel about the approaches recommended by Frameworks Institute on behalf of AAP?

# Share Out



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# Closing and Thank You!

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