


Prevent [Childhood Influenza.org](http://ChildhoodInfluenza.org)

It Takes a Community to Vaccinate a Child


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National Influenza Vaccine Summit, May 19th




Childhood Influenza
Immunization Coalition
The Power of One Strong Voice



National
Foundation for
Infectious
Diseases


Protecting More Children than Ever Before

Situation	How do we...
<ul style="list-style-type: none"> ▪ Common goal: making childhood influenza immunization a national health priority <ul style="list-style-type: none"> ▪ Expanded recommendations within 6 year timeframe: 6 - 23 months to 5 - 18 years old ▪ Reduce burden on children ▪ Vaccinating all children no easy undertaking <ul style="list-style-type: none"> ▪ Now need to ensure some 72 million children vaccinated ▪ Working together to provide opportunities beyond medical home <ul style="list-style-type: none"> ▪ School-placed programs growing option...more options, the better 	<ul style="list-style-type: none"> ▪ Leverage headway made in childhood influenza immunization? ▪ Convince HCPs, parents, community partners of ongoing need – not just in a pandemic year, but every year? ▪ Reach parents with messages that resonate? ▪ Build on the positives, within and beyond school-placed programs, increase pediatric immunization rates?



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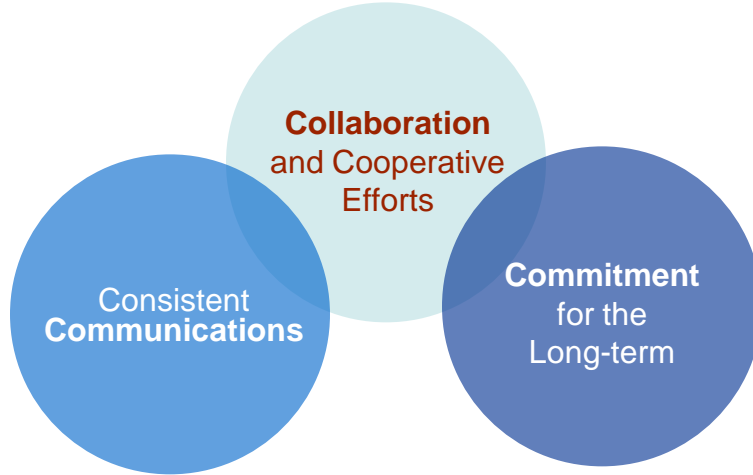
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Three C's of Community



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Childhood Influenza Immunization Coalition: Collaboration and Cooperative Efforts

It Takes a Community...
Strong partnerships critical to sustain success

A collage of logos for various partner organizations. The logos include: AMA (American Medical Association), APHA (American Public Health Association), HIDA (Health Industry Distributors Association), AAP (American Academy of Pediatrics), American Lung Association, The Children's Hospital of Philadelphia, naeyc (National Association of Early Childhood Yields Council), Immunization Action Coalition, PKIDS, astho (American Society of Health-System Executives), National Medical Association, American Pharmacists Association, Pediatric Nurses, NIMA (National Immunization Medical Association), National Association of Community Health Centers, NASN (National Association of State Nurses), CDC (Centers for Disease Control and Prevention), Kaiser Permanente, NACCHO (National Association of County and City Health Officials), ACOG (American College of Obstetricians and Gynecologists), EVERY CHILD BY TWO, Canyon Ranch Institute, SAM (The Society for Adolescent Medicine), and the Childhood Influenza Immunization Coalition logo.



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Consistent Communications: Core of All Efforts

It Takes a Community...

- Understanding parent resistance and motivating behavioral change
 - C/I/C conducted pediatrician interviews, parent focus groups, national survey
 - Aimed for consistency, optimal messaging based on research
 - Ensured messages in line with rapidly changing information and needs of parents

- Research findings inform outreach efforts
 - Motivators
 - Perceived severity of influenza; more serious than common cold, but not as serious as other vaccine-preventable diseases
 - Packs punch on family functionality; family health threat
 - Barriers
 - Rely on “magical or wishful” thinking
 - Believe vaccination not necessary for healthy children; other ways to avoid it
 - Concerns about vaccine
 - Pediatrician did not push it



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Top Messages Resonate among All Mothers Despite Vaccination Habits

Message Rank (highest to lowest influence)

	Mothers who don't regularly have their children vaccinated n = 350	Mothers who regularly have their children vaccinated n = 150
Healthy kids die from the flu	1	1
Vaccinate early to protect against two deadly diseases; seasonal/H1N1	2	6
A pediatric death from flu is as tragic as from any other cause	3	2
Now you know- flu can kill; vaccinate to protect your kids	4	9
Know your flu facts. Do all you can to protect your children	5	5
Flu is hard on body and disruptive to families; vaccination is easy	6	4
The choice is yours	7	14
Vaccination is an opportunity to protect your kids; make a wise choice	8	11
Children are great spreaders of flu; protect yours with vaccination	9	7
Seasonal vaccine is time tested - 100 million Americans get it annually	10	3

Multi-pronged Messaging Approach

- Focus on mothers who don't regularly have their children vaccinated
- Use multiple messages aimed at breaking down vaccination barriers
 - Same messages will likely resonate with mothers who regularly have their children vaccinated
- Focus on messaging "hot buttons" to increase perception that vaccination is necessary – not optional
 - Emphasize impact on family, discomfort and vulnerability of children
 - "Flu is hard on the body and disruptive to families; vaccination is easy."
 - Continue to elevate disease severity, link with death; dispel "magical thinking"
 - "Healthy kids die from the flu."
 - Emphasize knowledge acquisition/"flu facts" to convey safety, efficacy and good health
 - "Know your flu facts." "Flu can be serious." "Do all you can to protect your children."
 - "Influenza vaccine is safe, effective, and time-tested -- 100 million Americans are vaccinated every year."
- Consider segmenting communications
 - Key regions/sub groups where vaccine "friendliness" may be lower; mothers of older children



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Influential Communications: Stronger Voice from HCPs

- Implications of H1N1
 - Perceptions of parents/HCPs
 - Change in attitudes/beliefs
 - Disease severity
 - Contagion
 - Impact on family and entire community
- Sustaining vaccination interest
 - Media receptivity
 - Public demand
 - Physician advocates



The New York Times

Fearing a Flu Vaccine, and Wanting More of It (18 and Under)

"...So we give the H1N1 vaccine to children whose parents are almost tearfully afraid of the virus, and we try to win over those parents who are just as tearfully afraid of the vaccine. To them, we explain over and over that in fact this is not a brand-new vaccine — it is made with the same techniques as the seasonal influenza vaccine. Yes, it has been tested. Yes, it's safe. Yes, it's effective..." Perri Klass



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Commitment for the Long Term

It Takes a Community...

"School-based programs were powerful...but how do we **keep everyone engaged even when there is no funding or perceived public health emergency?**"
Paul Etkind, DrPH, MPH, Senior Policy Analyst, Immunizations / Community Health, NACCHO

"This season school nurses collaborated with educators, public health officials, and providers to protect children against influenza. **We need to do this each and every year.**" Nichole Bobo, RN, MSN, Nursing Education Director, NASN

"This is the time to shore up our infrastructure...**make no mistake, even with the infrastructure in place, public health needs support of all providers.**" Anna Buchanan, MPH, Senior Director, Immunization and Infectious Disease, ASTHO

"We saw what was possible. States with infrastructures in place were ready to move. We need more states to get engaged, more resources, and **need to use each and every opportunity to vaccinate children.**" Litjen (L.J) Tan, PhD, Director of Infectious Diseases, AMA

"H1N1 underscored the importance...Pediatric cardiologists and **all physicians treating children must send the same message about the need for vaccination.**" Stephanie Mitchell, Director, Member Strategy, ACC

"**What is lacking is the 'why'?** Communications from providers is critical to answer that question for parents." Laura Scott, Executive Director, Families Fighting Flu

"Consistent communication is critical. **It will make a huge difference, in terms of messaging, if we are all rowing in the same direction.**" Henry Bernstein, DO, Member of the Committee on Infectious Diseases, AAP



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Shared Strategies and Solutions

"The pandemic moved people...We pushed rather than pulled and urged parents to use every opportunity to get vaccinated – in medical homes, shopping malls, airports, civic meetings or social service agencies." Paul Etkind, NACCHO

"Making influenza vaccine readily available throughout each community is key. Extending opportunities within (and beyond) the medical home will help reach even more children and families." Henry Bernstein, AAP

- Look within and beyond medical home for opportunities and options
- Access to registries
 - Linking health departments and medical homes
- Reach traditionally underserved populations
 - Address socioeconomic disparities
 - Tailor messaging



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Shared Strategies and Solutions

"Now that we have a universal recommendation, family oriented immunizations may help to engage more providers to vaccinate all in the family." L.J Tan, AMA

- Extend school-placed programs to entire family
- Involve teens in decision making
- Share personal stories



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Shared Strategies and Solutions

"All health care personnel are role models. The medical community must provide leadership at both local and national levels." Henry Bernstein, AAP

- Support from national medical societies
 - Make commitment loud and clear to HCPs (e.g., pediatricians, family doctors, cardiologists, OB/GYNs, physician assistants, nurses)
 - Directed communications toward local/member level (e.g., letter)
- HCP as strong advocate; active local involvement
 - Make commitment loud and clear to parents
 - Donate time to staff clinics (e.g., provide guidance, answer questions)
 - Feature articles on school websites, e.g., Ask the Expert; community blogs, radio/TV
 - Create flu page/section on practice website
 - Place posters in waiting rooms; scripts for front desk personnel/office managers



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Discussion

- 3 Key Questions
 - How can we build on the positives from this year with school-placed programs and beyond?
 - How can we work together?
 - How can we enhance communications?



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