

# Strengthening Communications to Enhance Vaccine Uptake

Vaccine Preventable Disease Program

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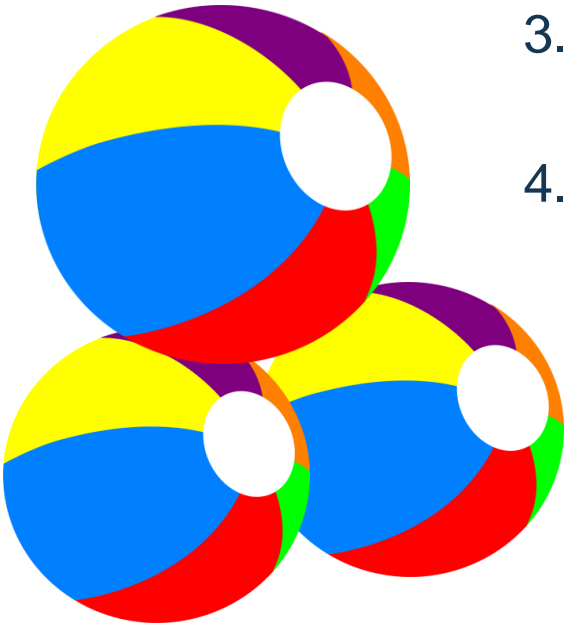
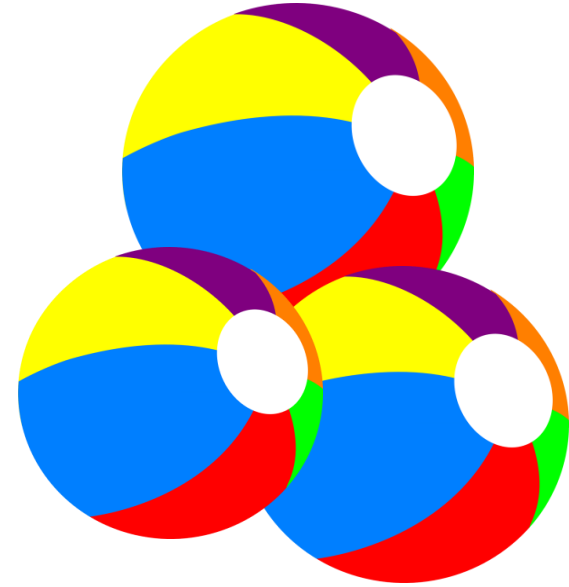
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June 10, 2025

# The Vax Voices Beach Ball Bounce

1. Catch the beach ball.
2. Read question aloud that is located under **your right thumb**.
3. Share your opinion. There are no wrong answers!
4. Toss the ball back into the audience.



# Objectives

Upon completion of this session, you will be able to:

1. Identify common barriers and possible solutions for effective provider-patient communication.
2. Demonstrate communication techniques that build trust and address concerns in a non-confrontational manner.
3. Identify the criteria and benefits of becoming a VFC provider and describe how participating in the IQIP program can improve vaccination uptake within your practice.

We have no financial or other conflicts of interest



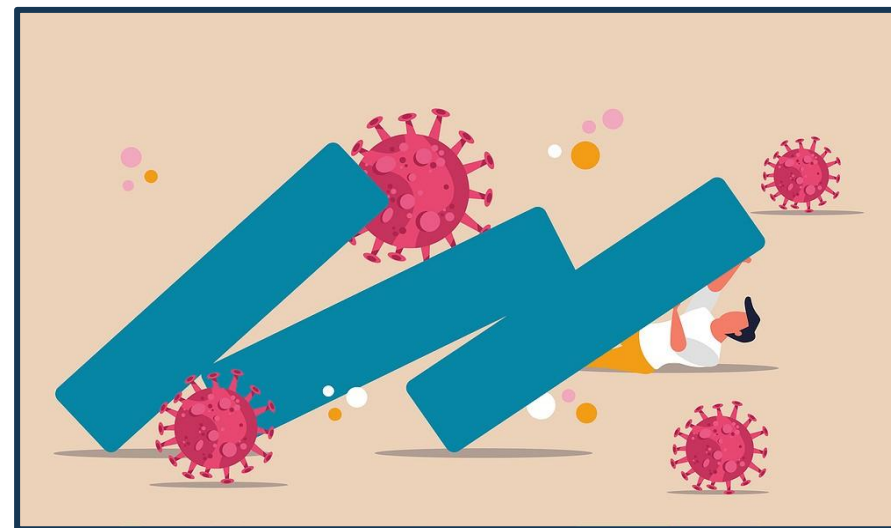
# “The Greatest Wealth is Health” -The Poet, Virgil



# What Would Edward Jenner Say about These Headlines?

**April 24, 2025-“Falling Vaccine Coverage Threatens a Surge in Preventable Diseases.”**

**April 28, 2025 “Whooping cough cases double. Measles still on the rise. Vaccines would prevent both.”**



# What About Vaccine Uptake?

## Children 6 months-17 Years

Year and Jurisdiction	COVID-19 Vaccine	Flu Vaccine
2024-2025 NJ	10.4%	61.4%
2023-2024 NJ	12.3%	67.8%
2024-2025 US	13%	49.2%
2023-2024 US	14.2%	53.4%

[.cdc.gov/covidvaxview/weekly-dashboard/child-coverage-vaccination.html](https://cdc.gov/covidvaxview/weekly-dashboard/child-coverage-vaccination.html)

[.cdc.gov/respiratory-viruses/data/vaccination-trends.html](https://cdc.gov/respiratory-viruses/data/vaccination-trends.html)

[cdc.gov/fluview/dashboard/children-vaccination-coverage.html](https://cdc.gov/fluview/dashboard/children-vaccination-coverage.html)

## Adults 18 Years & Older

Year and Jurisdiction	COVID-19 Vaccine	Flu Vaccine
2024-2025 NJ	23.1%	48.8%
2023-2024 NJ	22%	48.4%
2024-2025 US	23%	46.7%
2023-2024 US	21.6%	47.4%

[cdc.gov/fluview/dashboard/adult-coverage.html](https://cdc.gov/fluview/dashboard/adult-coverage.html)

[cdc.gov/fluview/dashboard/adult-coverage.html](https://cdc.gov/fluview/dashboard/adult-coverage.html)

**“70% of everyone six months and older will get vaccinated for the flu.”**  
The Healthy People 2030 National Goal for flu vaccination

# How is Kindergarten Coverage?

During the 2023-2024 school year, vaccination coverage decreased from 95% to 93% for all reported vaccines. (92.3% for DTaP & 92.7% MMR).

Coverage rates fell below the national target for the fourth consecutive year. (Healthy People 2030 national goal for vaccination coverage is 95%).

The exemption rate for NJ increased from 2.6% in 2020 to 3.9% during the 2023-2024 school year.



# Vaccine Hesitancy Continuum

High Demand

Low Demand

**Moveable Middle**

**Accept All**

Accept Some, Delay, Refuse Some

**Refuse All**

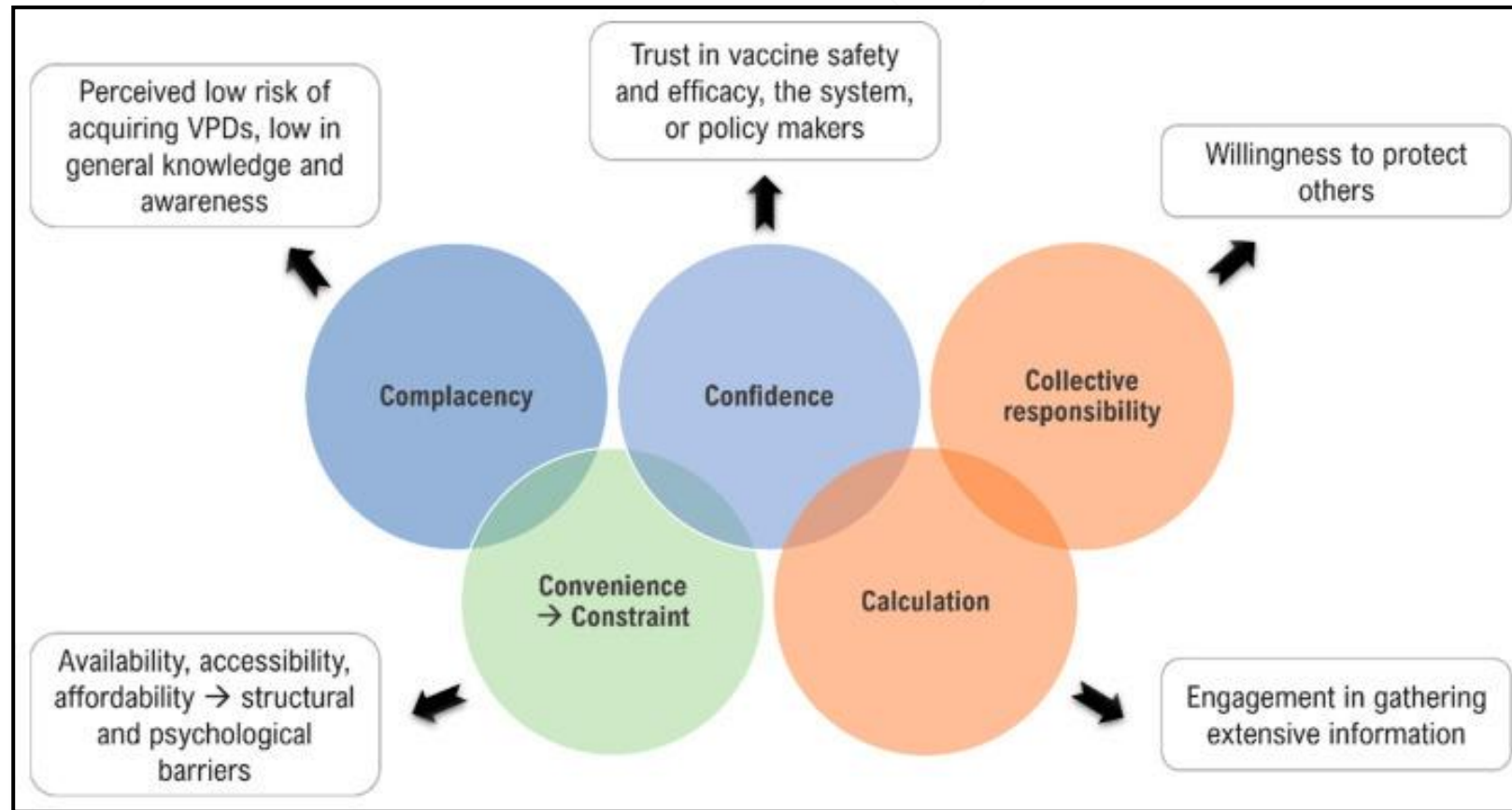
Accept but unsure



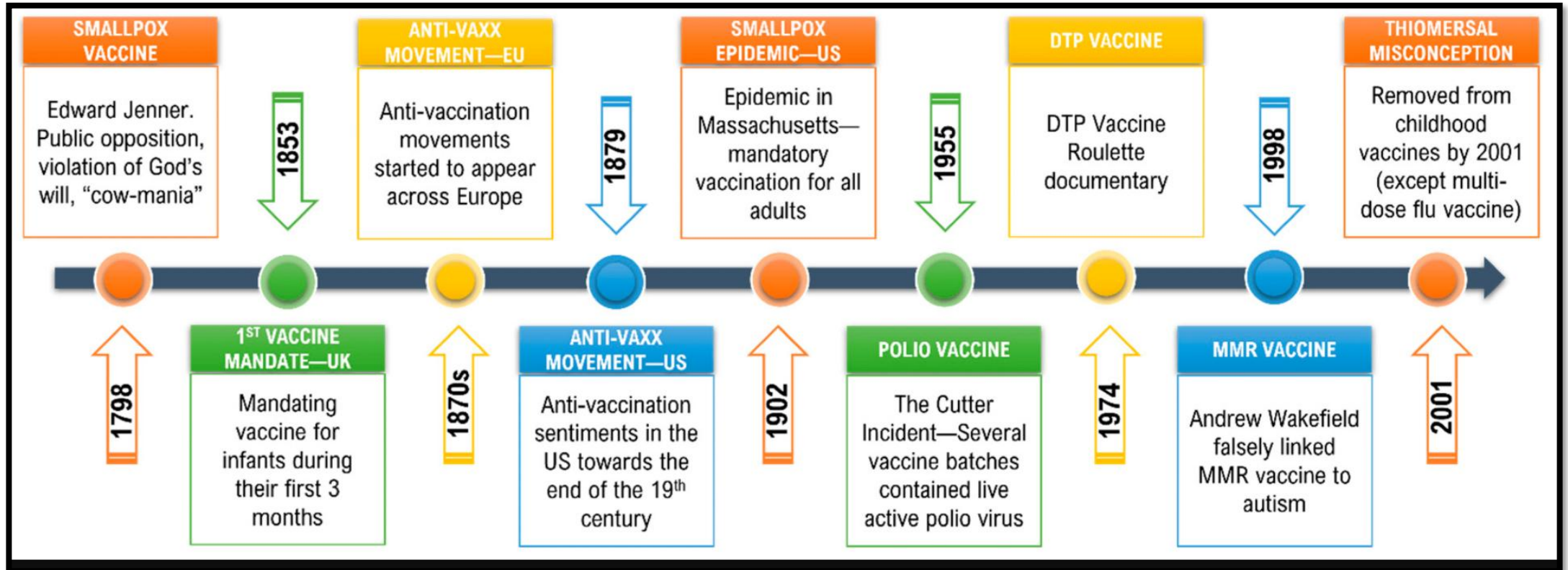
Refuse but unsure



# What May Be Driving Hesitancy: The Five Cs Model for Vaccine Hesitancy



# Early Vaccine Hesitancy: A Timeline





## Vaccine Hesitancy Low Uptake

Misinformation/Disinformation

Social Media

Communication  
Strategies

# Misinformation:

## “A Lasting Side Effect of COVID-19”

### Infodemic

- “An overabundance of information-some accurate and some inaccurate.”

### Misinformation

- “False information that’s shared by people who don’t realize it is false and don’t mean any harm, including vaccine proponents.”

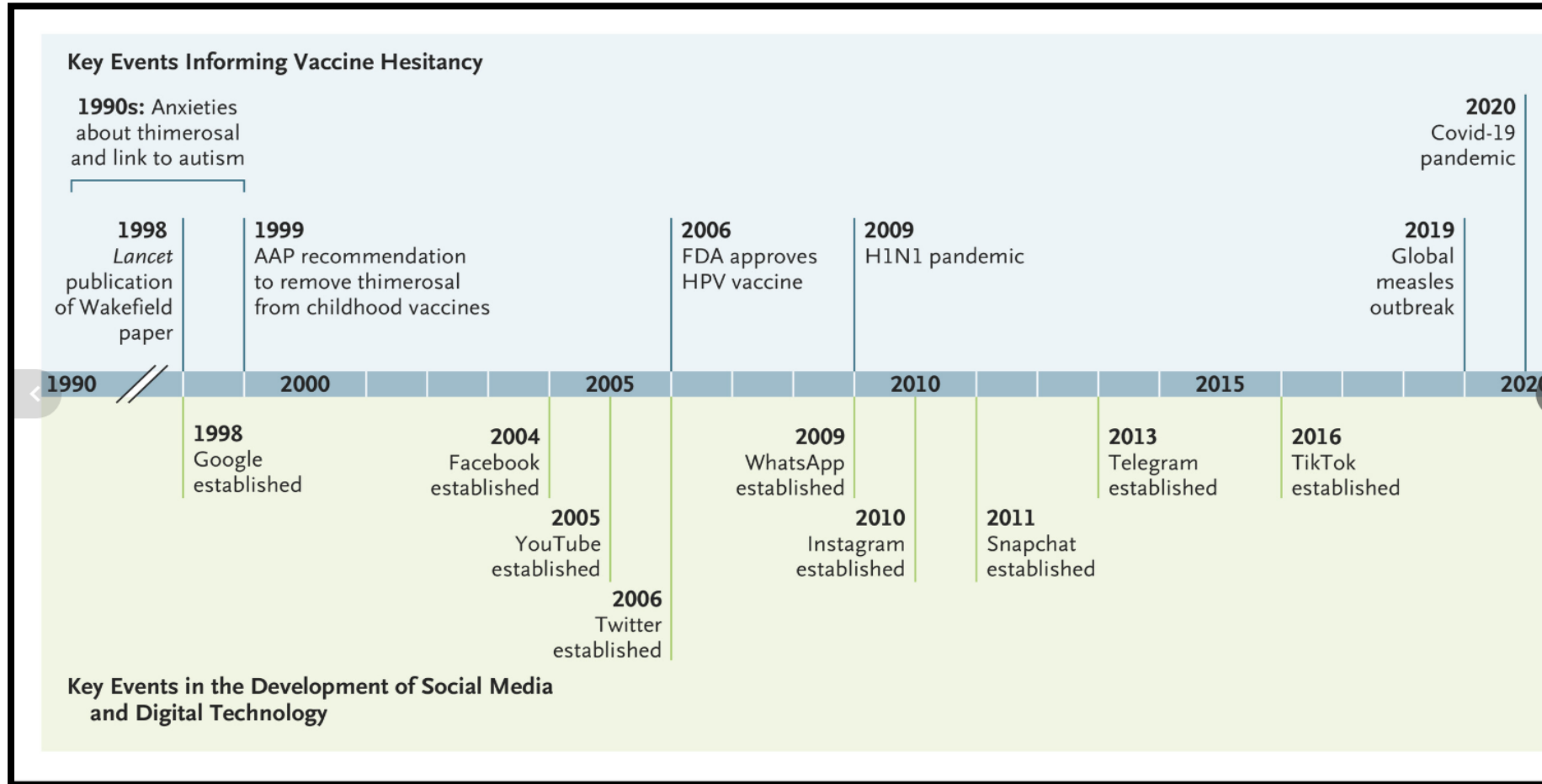
### Disinformation

- “Deliberately engineered and disseminated false information with malicious intent or to serve agendas.”

**“Today, we are seeing misinformation, false promises, faith healing and fraudulent science propagated by tik Tok influencers, on a scale larger than ever.”**

**-Dr. Miriam Tokhi**

# Key Events: Social Media and Vaccine Hesitancy



# Misinformation about Vaccines & Measles: What Does the Public Believe?

## COVID-19 Vaccine

Do you think that it is definitely true, probably true, probably false, or definitely false that more people have died from COVID-19 vaccines than have died from the COVID-19 virus?

■ Definitely true ■ Probably true ■ Probably false ■ Definitely false

Total



Source: KFF Tracking Poll on Health Information and Trust (Jan. 7-14, 2025) and KFF Health Misinformation Tracking Poll Pilot (May 23-June 12, 2023) • [Get the data](#) • [Download PNG](#)

KFF

## MMR Vaccine & Measles

Figure 5

**At Least Half of the Public are Uncertain When it Comes to False Claims About Measles, Saying Such Claims are Either Probably True or Probably False**

Do you think each of the following is:

■ Definitely true ■ Probably true ■ Probably false ■ Definitely false

### False claims about measles and vaccines

The measles, mumps, rubella vaccines, also known as the MMR vaccines have been proven to cause autism in children



Getting the measles vaccine is more dangerous than becoming infected with measles



Vitamin A can prevent measles infections



Note: See topline for full question wording.

Source: KFF Tracking Poll on Health Information and Trust (April 8-15, 2025)

KFF

# How to Counter Misinformation with Patients

Understand what patients believe, and why they believe it.

Use an empathetic, collaborative, and concise approach.

Know the Source of misinformation.

Confirm that information is fact or myth. Avoid repeating misinformation (De-bunking).

Anticipate and address misinformation (Pre-bunking).



# A Checklist For Use with Online Searches/Social Media



1

- **CONSIDER THE SOURCE**

- Who shared the claim?
- What qualifies them to speak/write about the subject?
- Do they have partisan/financial conflicts?

2

- **EVALUATE THE EVIDENCE**

- Where did the information come from and was the information reviewed by experts?
- How credible is the evidence? Are there articles, published research or other credible sources?

3

- **EVIDENCE OR OPINION**

- Consider if the social media post/ webpage, is sharing fact-based information or someone's opinion of the news.
- The facts can be slanted to benefit one side.

4

- **PAUSE! THINK BEFORE SHARING!**

- Social media posts often play to our emotions and can confirm our beliefs.
- Be skeptical. Think to yourself, does this seem accurate or possible?
- Fact check, verify with your provider, DOH or other credible source.
- **REPORT** misinformation found with the platform.

# Vaccines and Autism: The Myth Continues

## Risk Factors for Autism



## Why is Autism on the Rise?

- Changes in diagnostic criteria
- Improved screening tools and procedures
- Increased awareness
- Not due to vaccines

# Challenges for Health Care Providers



- Anti-science, anti-medicine culture/perspectives.
- COVID-19 Denialism among the public (COVID-19 Fatigue).
- Burnout/vaccine fatigue among providers.
- Insufficient time during office visits.
- Lack of information/resources to share with patients.
- Effective skills to debunk overwhelming amounts of misinformation and disinformation that patients may believe.
- Lack of communication skills to effectively convey knowledge in a participatory, non-judgmental manner while being empathetic.
- Maintaining the patient-provider relationship.

# Optimizing Vaccine Confidence through Communication



# Communication Strategies

## Use Effective Communication Approaches

- Presumptive Language
- Presumptive/Announcement Strategy

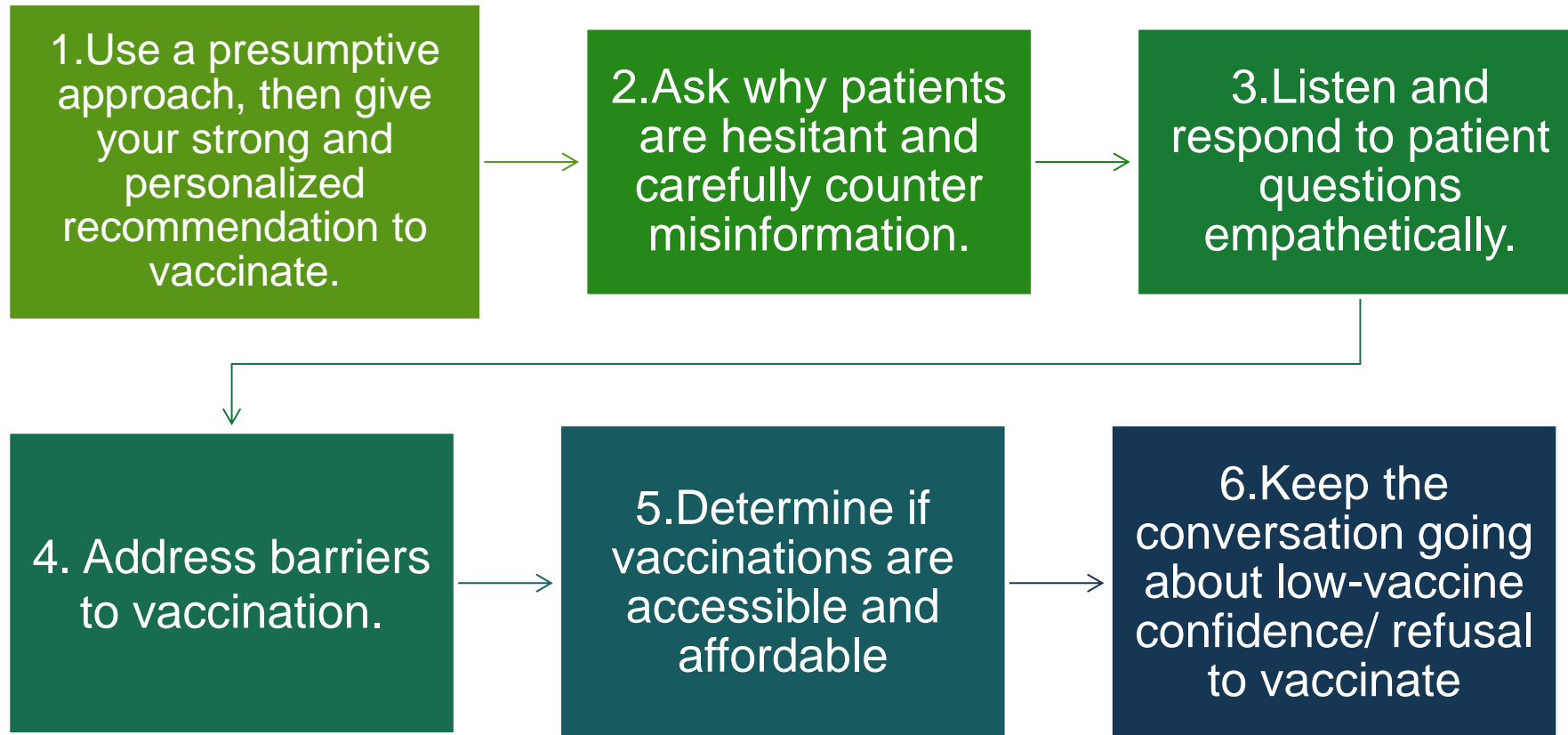
## Prevent Missed Opportunities

- Assess immunization status at every visit type
- Recommend all eligible vaccines
- Administer all vaccines during same visit
- Stay current with ACIP-Recommended and Catch-Up schedules

## Listen to Parents' Concerns and Promote Vaccine Equity

- Take the time to listen and understand parents' concerns
- Recognize historical factors that may contribute to low vaccine confidence, and address them

# More Communication Strategies



# Cultural Humility and Optimizing Vaccine Confidence



Acknowledge  
implicit biases.



Know your  
community.



Be attentive to  
office  
practices.



Confirm patient  
understanding.



Be aware of cultural  
differences/preferences  
that may affect vaccine  
confidence.



Establish a  
collaborative  
relationship with  
patients.



# Approaches to Communication



## Optional

“Would you like to go ahead and get your child vaccinated today?”

- May seem respectful of parental autonomy – but can introduce doubt or hesitation about the vaccine.
- Provides parent leeway to decline the vaccination.

\*Not considered Best Practice

## Sandwich

“I’m glad you’re here today to discuss your child’s health and well-being. Today, I recommend we give your child this vaccine because ... Let’s go ahead and do this today so we can stay on track with their health”

- Helps to acknowledge the parents concerns and builds rapport and trust.
- Creates a balanced conversation that addresses concerns while encourages action in a non-confrontational and supportive way.

## Presumptive/Announcement

“It’s time for your child to receive this vaccine, and we’ll go ahead and administer it today.”

- Considered more effective because it assumes the parent is ready and confident in proceeding.
- Can encourage vaccine acceptance by framing administration as routine.
- Shown to increase vaccination rates by 10-20% compared to the Optional Approach \*population and vaccine dependent.

# Staff Strategies for Optimizing Vaccination Appointments



- Offer Vaccination Only Appointments
- Create standing orders for nurse-only visits for vaccine administration.

- Maintain Accurate Patient Contact Information
- Track No-Shows and Cancellations
- Utilize Reminder/Recall Systems



- Communicate updates to ACIP-Recommendations with all team members
- Designate time at Staff Meetings/Trainings to review.

# Example: Facilitate Return for Vaccination, HPV dose 2

## Identify Patients

- Run Reports to locate patients who are overdue for HPV dose 2.
- Review patient records and determine if patient has a scheduled appointment.

## Create a "Call List"

- Patients without an upcoming appointment will be placed on a "call list".
- List will be provided to the front desk or outreach staff.

## Call Attempts pt. 1

- Attempt to establish contact with the parent/guardian.
- If unavailable, leave a message requesting a return call.
- Make a note on the "call list" to try again per workflow.

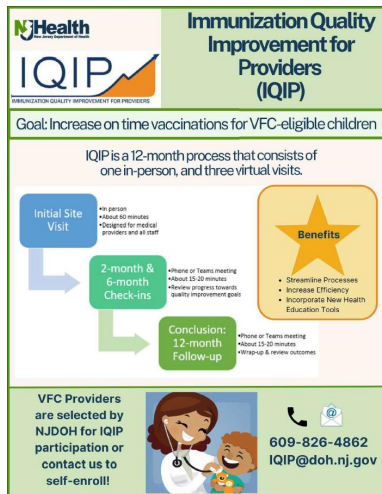
## Call Attempts pt. 2

- If parent is available, explain the patient can come in for a quick, nurse-only appointment at their earliest convenience.
- If parent is hesitant or resistant, employ motivational interviewing or offer to schedule a provider appointment to discuss hesitancy in greater detail.



# The Vaccines for Children Program (VFC)

## Immunization Quality Improvement for Providers (IQIUP)



## What is the VFC?

- The Vaccine for Children (VFC) Program provides free vaccines to eligible children through participating healthcare providers

## VFC Provider Eligibility Criteria

- Who can be a VFC Provider?
  - Licensed medical providers who are authorized to prescribe vaccines (Medical Director must be an MD or DO).
  - Provider must be willing to adhere to VFC program guidelines: follow proper vaccine storage and handling procedures and vaccine accountability.

## VFC Child Eligibility Criteria

- Medicaid-eligible: Children covered under Medicaid or NJ FamilyCare Plan A
- Uninsured: Children without any health insurance
- Underinsured: Children whose insurance does not cover all ACIP-recommended vaccines
- American Indian or Alaska Native

# VFC Program Benefits

Reduces providers' out of pocket costs

Allows providers to charge an administrative fee to offset the costs of vaccine delivery

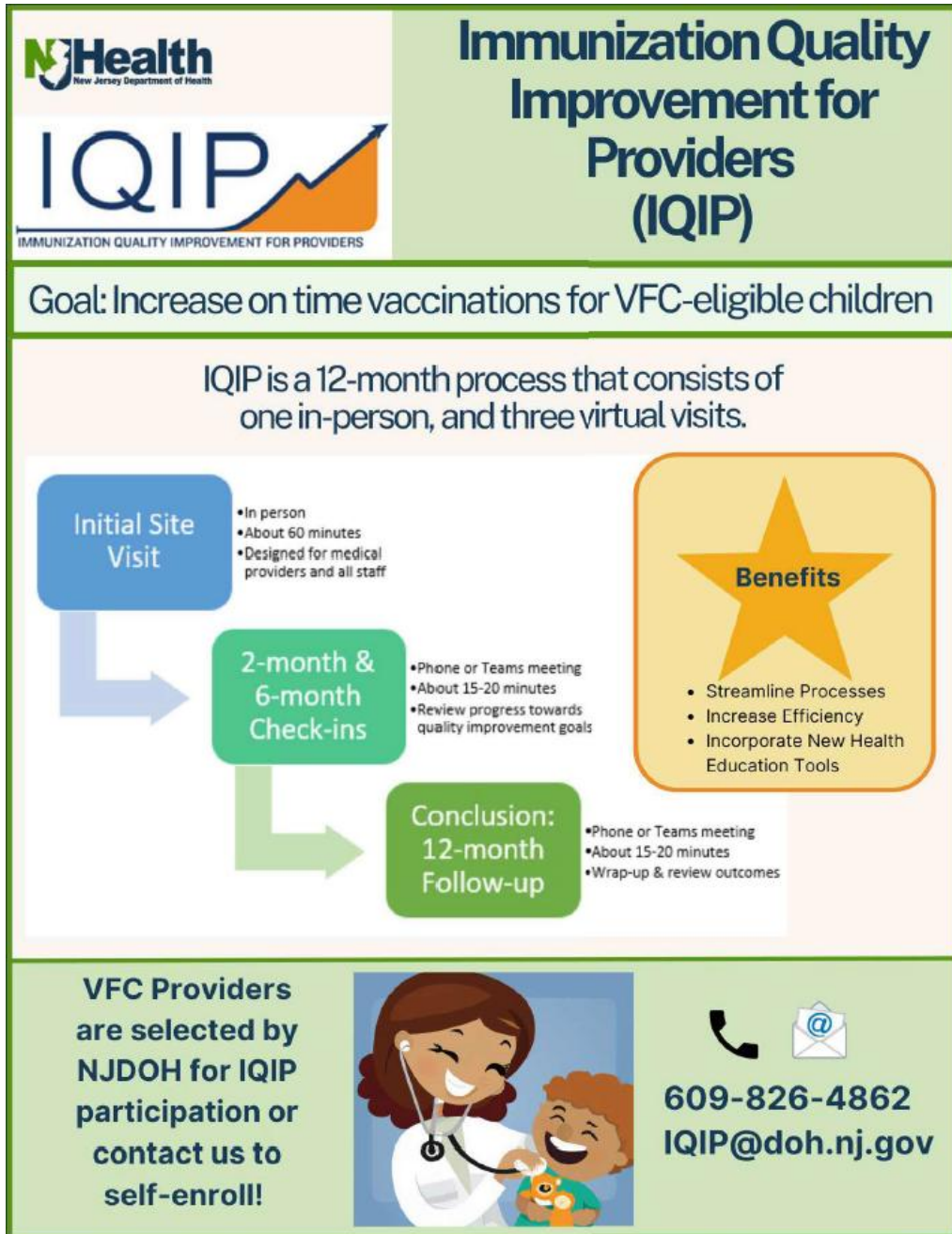
Keeps patients in medical home for comprehensive health care

Provides ACIP-recommended vaccines

Helps providers avoid missed opportunities for immunizations

Additional support and education i.e. Educational Visits and IQIP Program Participation





# What is IQIP?

## Immunization Quality Improvement for Providers

- A helpful and interactive quality improvement program designed to support your office needs by listening to specific obstacles being experienced and brainstorming solutions together.
- Aim is to implement small, achievable changes to current immunization related workflows to help increase vaccination rates.
- Offer technical support throughout the IQIP process.



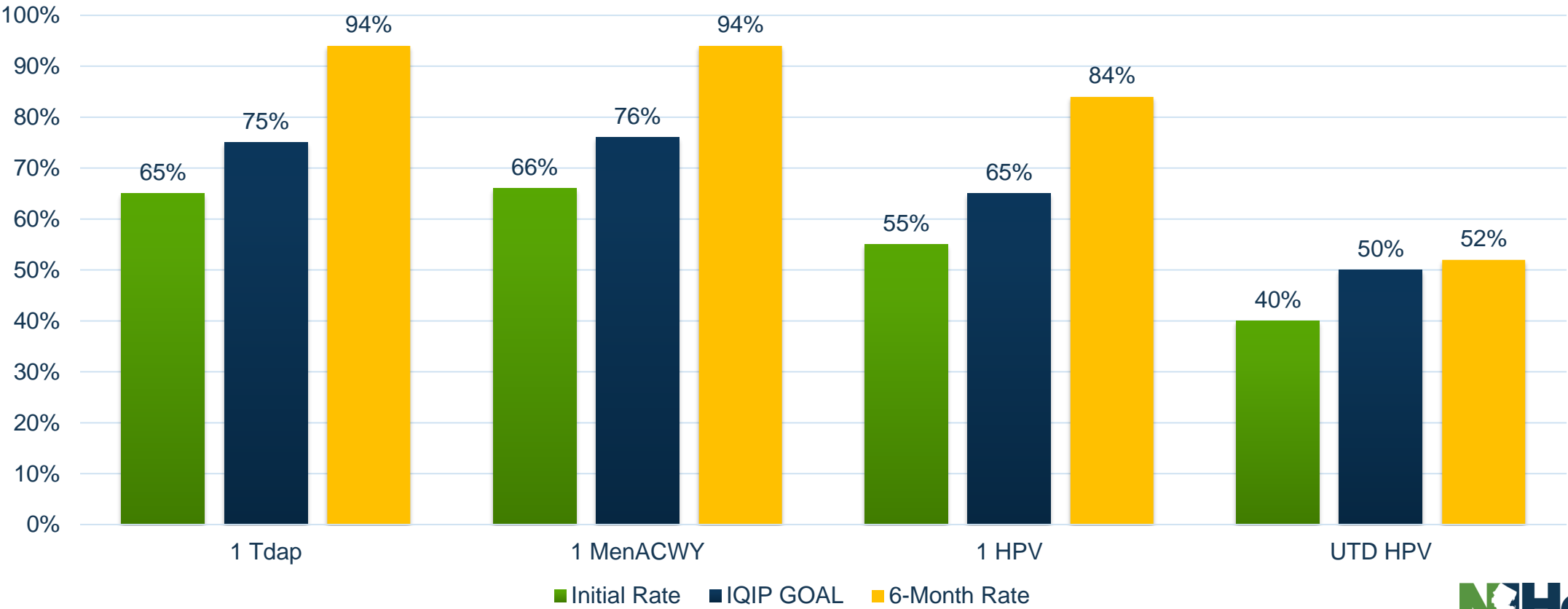
# How is IQIP Beneficial?

The process of implementing evidence-based quality improvement strategies to improve vaccination rates and address barriers to immunization.

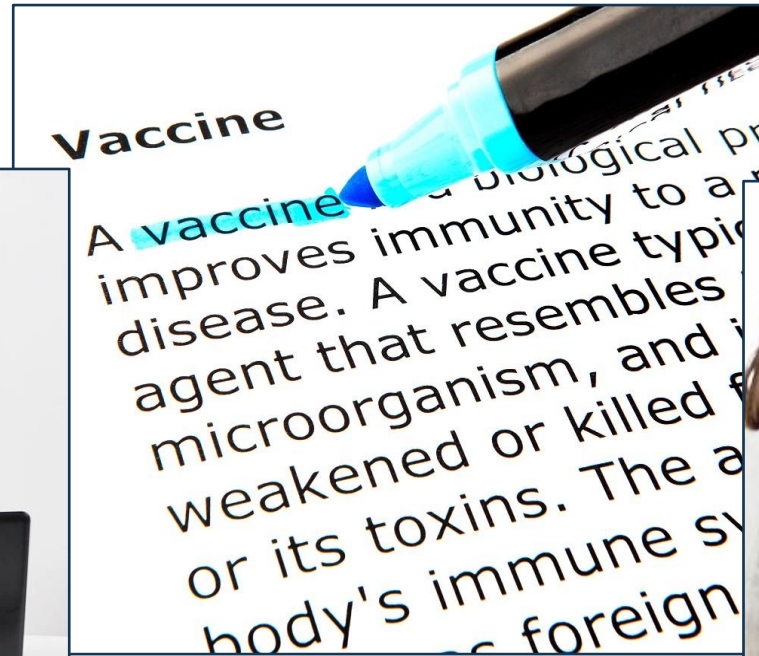
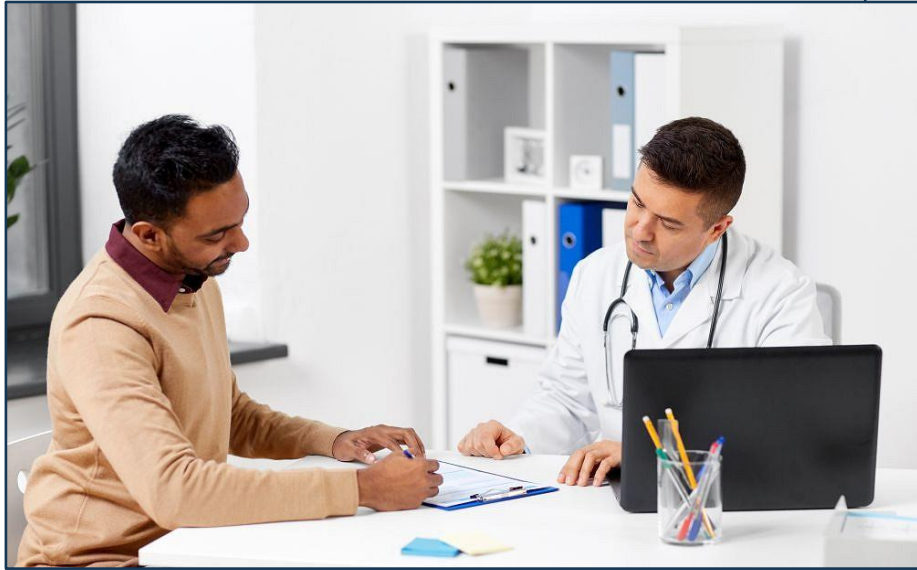
- **Improves Communication:** employing strategies like presumptive language, the announcement approach, and sandwiching recommendations to communicate the benefits of vaccines clearly and confidently to parents.
- **Identify Barriers:** by identifying barriers to vaccinations, we can help address them. By addressing hesitancy, misinformation, or logistical challenges!
- **Data-Driven Solutions:** Using practice-level immunization data pulled from NJIIS, helps to track missed opportunities and areas for improvement by allowing providers to select where the targeted interventions will be focused.
- **Promotes Vaccine Education:** Supports providers in educating parents about the safety and importance of vaccines, increasing trust and confidence.

**Real-time IQIP Example:** Providers office wanted to focus on increasing the second HPV vaccine administration rate. A targeted outreach approach was created for adolescent vaccines.

### 6-Month Immunization Coverage Change July 2024 – January 2025



# Resources





# Provider Educational Resources



## Vaccines for Children

INFORMATION FOR  
HEALTH CARE  
PROVIDERS



### Patient Eligibility

Patients eligible to receive VFC vaccines are children (0-18 years old) who are:

✓ **Medicaid Eligible**

Medicaid eligible or enrolled in a Medicaid program (NJ FamilyCare Plan A only)

✓ **Uninsured**

Patients who have no insurance

✓ **Underinsured**

Patients whose insurance does not cover some or all vaccines. Underinsured patients can receive VFC vaccine at Federally Qualified Health Centers.

✓ **American Indian or Alaskan Native**



### Benefits of VFC Program

- Reduces providers' out-of-pocket costs
- Allows providers to charge an administrative fee to offset the costs of doing business
- Keeps patients in medical home for comprehensive health care
- Provides ACIP-recommended vaccines
- Helps providers avoid missed opportunities for immunizations

### Program Best Practices



Screen for VFC eligibility at each visit



Do not charge for VFC-supplied vaccines



Comply with the ACIP-recommended Immunization schedules



Maintain records of all children immunized with VFC vaccine in the New Jersey Immunization Information System



Provide vaccine information statement materials and records of distribution

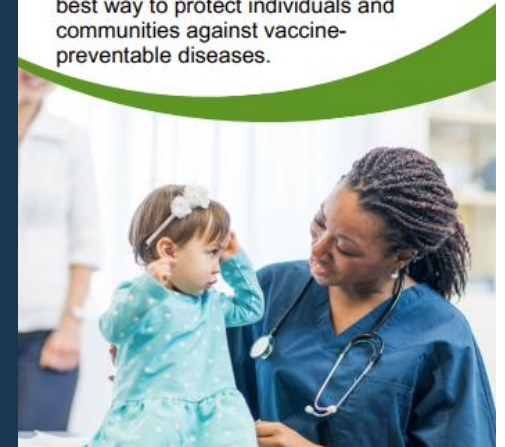


Comply with NJ VFC ordering accountability and quality assurance requirements

### About the Program

The Vaccines for Children (VFC) program was established by Congress in 1994 to increase access to vaccination for children who might not get vaccinated because of financial barriers. The VFC program is a Title XIX Medicaid program. The Centers for Disease Control and Prevention uses federal funds to purchase vaccines and distribute them at no cost to enrolled public health clinics and provider locations.

The VFC program aims to support providers who administer vaccines to underserved and at-risk populations. Ensuring that all children and adolescents are vaccinated in accordance with the Advisory Committee on Immunization Practices (ACIP) recommended schedule is the best way to protect individuals and communities against vaccine-preventable diseases.



# Provider Toolkit for Vaccine Confidence

## STRATEGIES FOR INCREASING VACCINATIONS IN PROVIDER PRACTICES



Increase vaccination rates and successfully deliver vaccines through efficient systems and programs. Use the strategies below to promote a culture of immunization!

### 1. INCLUDE ALL STAFF IN VACCINATION EFFORTS

Provide staff with vaccine education and stress the significance of a consistent message about their importance. All staff members, not just medical staff, should take advantage of every opportunity to promote vaccination.



### 2. CHOOSE AN IMMUNIZATION CHAMPION

An immunization coordinator or champion can help ensure:

- proper vaccine storage and handling
- vaccination education for staff
- consistent vaccine messaging
- improve workflow through quality improvement strategies.



### 3. USE STANDING ORDERS

Use standing orders to identify patients that are eligible for vaccination, provide information to patients regarding risks and benefits of vaccination, record patient refusals, and allow for documentation of vaccine administration to patients.



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## HOW TO COUNTER VACCINE MISINFORMATION WITH PATIENTS



Misinformation on social media and other channels can affect vaccine confidence. As trusted messengers, health care providers are essential in helping patients find and follow reliable, evidence-based information.



Follow the steps below to learn how to counter false information.



### USE AN EMPATHETIC, COLLABORATIVE, AND CONCISE APPROACH

Establish trust and likeability with patients so that they follow your guidance over misinformation online or elsewhere. Remember to:

- Listen attentively to people's concerns and communicate clearly and simply.
- Instead of relying solely on scientific information, share your own experience about choosing to vaccinate yourself and your family.
- Maintain a friendly and welcoming tone. Shaming, arguing, or judging can harm efforts to build trust and collaboration.
- Promote collaboration and acknowledge shared goals. Say, "It is clear we both want improved health and safety for everyone in our community, including you."



### KNOW THE SOURCE OF MISINFORMATION

- To address misinformation in your community, you must first learn more about it: where, when, why and how it starts, spreads, and evolves.
- Understand where the questions and knowledge gaps may exist for your patients.
- Listen to and analyze misinformation circulating in your community through social and traditional media.



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## HEALTH LITERACY: ENHANCING PATIENT COMMUNICATION



Limited health literacy can lead to poor health outcomes. The following tips can help you and your staff communicate more effectively with your patients.

### 1. RECOGNIZE POSSIBLE SIGNS OF LOW LITERACY

Patients with low literacy may:

- Have trouble completing forms, providing an accurate medical history, or making appointments.
- Ask fewer questions, not follow through with referrals or medical testing, and be non-compliant with medications or treatments.



### 2. UTILIZE A TEAM APPROACH

All staff should:

- Identify the health literacy needs of their patients. Share those needs with other staff members while being mindful of patient confidentiality.
- Work with patients to meet their literacy needs. For example, staff members can assist patients with completion of forms.



### 3. USE PLAIN LANGUAGE

- Speak slowly, clearly, and avoid using medical jargon that patients may not understand. Ask about their preferred language and arrange for translation services if needed.
- Give information in small and manageable steps by limiting discussion to three key messages or points.



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# Provider Toolkit for Vaccine Confidence Cont'd

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## TIPS FOR HEALTH CARE PROVIDERS: TALKING WITH PARENTS ABOUT VACCINES



Health care providers are parents' most trusted source of information. Follow the tips below to keep the conversation going about vaccines.

### 1. EXPECT PARENTS WILL VACCINATE

When discussing vaccines, remember that most parents want to vaccinate their children; be sure to use the presumptive approach. For example, instead of, "Have you thought about the shots your child needs today?" say, "Your child needs three shots today: DTaP, Hib and Hepatitis B."

### 2. GIVE YOUR STRONG RECOMMENDATION

Your recommendation is critical for vaccine acceptance. For example say:

"These shots are very important to protect your child from serious diseases. I believe in vaccines so strongly that I vaccinated my own children on schedule."

### 3. LISTEN AND RESPOND TO PARENTS' QUESTIONS

Building trust is an important part of parents following your recommendations. You can do this by:

- Approaching the conversation with empathy.
- Practicing active listening and validating their concerns.
- Scheduling an additional appointment to continue the conversation.



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## Tips for Health Care Providers: Talking with Parents about Vaccines



### 4. KEEP THE CONVERSATION GOING ABOUT LOW VACCINE CONFIDENCE OR THE REFUSAL TO VACCINATE

Work with parents to agree on at least one action, such as scheduling another appointment or encouraging them to read the vaccine information you provide. Continue to remind parents about the importance of an on-time vaccine schedule and work with them to catch their child up if they fall behind.

### 5. MAKE SURE VACCINATIONS ARE ACCESSIBLE AND AFFORDABLE

Participate in the Vaccines for Children Program (VFC). VFC provides vaccines at no cost to children who might not otherwise be vaccinated because of inability to pay.

### 6. ADDRESS BARRIERS TO VACCINATION

- **Psychological** - Discuss fears that patients have such as fear of vaccinations and needles; educate them about vaccine misinformation.
- **Physical** - Discuss alternatives for parents who work long hours or have transportation issues. Consider offering extended hours and/or hosting a vaccination event.
- **Missed Opportunities** - Vaccinate at every visit, not just well visits. Schedule the next vaccination appointment before the patient leaves.

For more information about VFC, and to keep the conversation going, visit:

[vaccine-children.org/conversation-tips](https://vaccine-children.org/conversation-tips)  
<https://www.vfcinfo.com/>



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# Parent/Guardian Toolkit for Vaccine Confidence



## Stay Up to Date and Vaccinate

Getting your children vaccinated on-time by following the Centers for Disease Control and Prevention (CDC) Recommended Immunization Schedule can help them stay healthy as they grow older.



### Get Early Protection

Vaccinate before your child is exposed to dangerous diseases; waiting until school begins, may not allow enough time for vaccines to work.



### Attend School and Activities without Delay

Vaccinate your children on time so they can start the new school year, join a sports team or group activities, and travel without delay.



### Avoid Disease-Related Complications

Some diseases could lead to serious complications (e.g., Meningitis could lead to hearing loss, COVID-19 could lead to trouble breathing). Getting vaccinated can help prevent this from happening.



### Prevent the Spread of Illness

Getting vaccinated can help prevent the spread of illness and protect friends, family and other community members, especially those who are too young to be vaccinated or those who are at high-risk for disease.



### Stay Protected

The CDC immunization schedule is carefully designed to provide protection at just the right time. Some vaccines need to be given more than once so your child can remain healthy.



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## How to Make Vaccinations Less Stressful for Your Child



Comfort them with a favorite toy, book, or blanket.



Distract your child by cuddling them, singing, or talking softly.



Smile and let them know that everything is OK.



Take deep breaths with your older child to help with fear and discomfort while they are getting the shot.



Do not threaten your child with shots as a punishment.



Do not scold your child for being frightened or for crying; instead, give them comfort and support.

To stay current with your child's vaccination schedule, scan the QR code below.



SCAN ME

For more information about your child's vaccinations, visit [cdc.gov/vaccines-children/before-during-after-shots/less-stress.html](https://cdc.gov/vaccines-children/before-during-after-shots/less-stress.html)

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## Frequently Asked Questions: Vaccinating Your Child

Most parents choose to vaccinate their children\* but some still have questions. Please see the information below to learn how vaccines will help to keep your child healthy.



**Why are vaccines still necessary? Haven't we gotten rid of most of these diseases that cause serious illness in the US?**

- Vaccine-preventable diseases like measles, whooping cough, and chickenpox have not gone away entirely.
- When vaccines are skipped, people are at risk for becoming sick or developing severe illness.
- If fewer people get vaccinated, the small number of cases that we have could increase greatly.



**Are vaccines safe?**

- Yes, the Centers for Disease Control and Prevention (CDC) and the Food and Drug Association (FDA) take many steps to ensure that vaccines are safe before and after people begin to use them.
- Vaccines can take years to become licensed, but once they are, systems like the Vaccine Adverse Events Reporting System (VAERS) and the Vaccine Safety Datalink (VSD) are used to check on vaccine safety.
- Vaccine side effects are mild (e.g., soreness where the shot was given, low grade fever) and usually last only a few days. Serious side effects from vaccines are uncommon and much less severe than the diseases they prevent.



\*For the CDC's children's vaccine schedule, visit [cdc.gov/vaccines/imz-schedules](https://cdc.gov/vaccines/imz-schedules)



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# Parent/Guardian toolkit for Vaccine Confidence Cont'd



**VACCINE INFORMATION:  
WHERE CAN WE FIND THE TRUTH?**

With so much information about vaccines available on social media, the internet, written articles and other sources, how do we know what information is true or that the sources are trustworthy? The steps listed below will help you find trusted sources as well as factual information about vaccines.

- 1 Is the source trustworthy?**
  - Who wrote the post or article; are they qualified to be a vaccine expert?
  - Will the author benefit personally or financially if their advice is followed?
  - Check the end of the web address to see if the organization/publisher is well-known (e.g., .edu, .gov or .org, .com.).
- 2 Are there any "red flags"?**
  - Does the information seem "one-sided" or biased?
  - Is the information outdated? Is the grammar poor or are words misspelled?
  - Is there a claim of a miracle or secret cure?
- 3 Is the information true or accurate?**
  - Is the information based on scientific evidence and fact?
  - Is the original source listed?
  - Do other sources back up the information?
- 4 Important to Remember:**

Even when you are able to find trusted sources and authors, internet searches, articles, and posts should never replace discussing vaccine concerns with your health care provider.

**Vaccine Information Resources**

1. [cdc.gov/vaccines-children/about/index.html](https://www.cdc.gov/vaccines-children/about/index.html)
2. [vaccineinformation.org](https://www.vaccineinformation.org)
3. [stronger.org/resources/how-to-spot-misinformation](https://www.stronger.org/resources/how-to-spot-misinformation)

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**Protect Your Children  
with Vaccines**

To see if you qualify for the Vaccines for Children program, visit:  
[nj.gov/health/vaccines/programs/vfc](https://nj.gov/health/vaccines/programs/vfc).



**Locations for vaccination:**

- Your health care provider
- Local health department:  
[localhealth.nj.gov](https://localhealth.nj.gov)
- [Vaccines.gov](https://vaccines.gov)
- Federally Qualified Health Centers:  
Scan the QR code or visit:  
[nj.gov/health/fhs/primarycare/fqhc/](https://nj.gov/health/fhs/primarycare/fqhc/)



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# Resources

## NJ DOH Websites

1. [nj.gov/health/covid-19/information/vaccines/](https://nj.gov/health/covid-19/information/vaccines/)
2. [nj.gov/health/vaccines/programs/vfc/](https://nj.gov/health/vaccines/programs/vfc/)
3. [nj.gov/health/cd/vpdp.shtml](https://nj.gov/health/cd/vpdp.shtml)
4. [njiis.nj.gov/core/web/index.html#/home](https://njiis.nj.gov/core/web/index.html#/home)

## Misinformation

5. [hhs.gov/surgeongeneral/reports-and-publications/health-misinformation/index.html](https://hhs.gov/surgeongeneral/reports-and-publications/health-misinformation/index.html)
6. [publichealthcollaborative.org/wp-content/uploads/2024/11/The-Public-Health-Communicators-Guide-to-Misinformation.pdf](https://publichealthcollaborative.org/wp-content/uploads/2024/11/The-Public-Health-Communicators-Guide-to-Misinformation.pdf)
7. [How to Address COVID-19 Vaccine Misinformation | CDC](https://www.cdc.gov/vaccines/imz/downloads/pdf/14c101.pdf)
8. [cdc.gov/vaccines/covid-19/vaccinate-with-confidence/rca-guide/downloads/CDC\\_RCA\\_Guide\\_2021\\_Tools\\_AppendixE\\_SocialListening-Monitoring-Tools-508.pdf](https://www.cdc.gov/vaccines/covid-19/vaccinate-with-confidence/rca-guide/downloads/CDC_RCA_Guide_2021_Tools_AppendixE_SocialListening-Monitoring-Tools-508.pdf)

## Other Websites

9. [HealthyChildren.org - From the American Academy of Pediatrics](https://www.healthychildren.org/From-the-American-Academy-of-Pediatrics/)
10. [aap.org/en/patient-care/immunizations/communicating-with-families-and-promoting-vaccine-confidence/talking-with-vaccine-hesitant-parents/?srsltid=AfmBOoqGfFwn4w4ICMwuHf5ysS3PNj\\_Ug1sL\\_RUD1YED7HYTltKq6co8](https://www.aap.org/en/patient-care/immunizations/communicating-with-families-and-promoting-vaccine-confidence/talking-with-vaccine-hesitant-parents/?srsltid=AfmBOoqGfFwn4w4ICMwuHf5ysS3PNj_Ug1sL_RUD1YED7HYTltKq6co8)
11. [immunize.org/](https://immunize.org/)
12. [voicesforvaccines.org/](https://www.voicesforvaccines.org/)

## Autism

13. [Resource Library - Autistic Self Advocacy Network](https://www.autismspeaks.org/resource-library)
14. [autismspeaks.org/?form=donate&utm\\_medium=paidsearch&utm\\_source=bing&utm\\_campaign=IS-branded-conv&utm\\_content=IS-evergreen&msclkid=8d23881d4308180a205fe02b69458f9d](https://autismspeaks.org/?form=donate&utm_medium=paidsearch&utm_source=bing&utm_campaign=IS-branded-conv&utm_content=IS-evergreen&msclkid=8d23881d4308180a205fe02b69458f9d)

# Role Play



# Role Play Scenario Example: Catch-Up Visit – Multiple Vaccinations After Delay

## Scenario Background

Diego, age 8, is a new patient at the practice. His family recently moved from out of state, and he's behind on several routine vaccines, including MMR, Varicella, and Hepatitis A. His immunization record shows he hasn't had any shots in the last three years. His father (Carlos) is receptive to vaccines overall but seems overwhelmed by how many are recommended during today's visit. He asks if it's safe to "do them all at once."

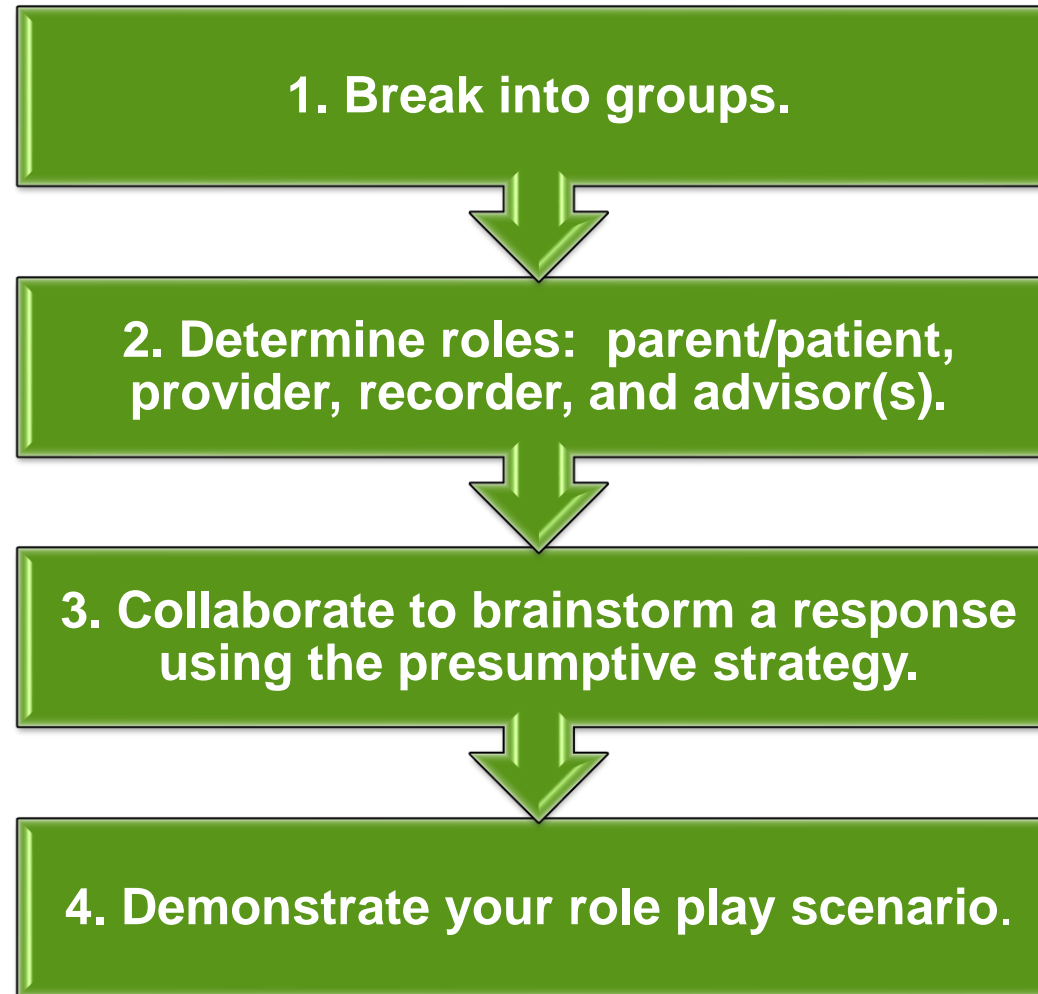
## Parent Concerns

- "That seems like a lot of shots for one visit."
- "Can't we space them out over the next few months?"
- "Will he have a bad reaction if he gets too many?"

## Provider Goals

- Use Presumptive Language approach
- Reassure parent that:
  - Catch-up vaccination is safe and common
  - Delaying increases risk of disease
  - The CDC schedule is designed for safety and efficacy
  - Emphasize the importance of getting back on track ASAP. Esp. before the start of school

# Group Role Play: Now, it's your turn!



# Role Play Scenario # 1:

## Pediatric Well Visit – Kindergarten Entry

### Scenario Background

Ava, age 5, is at a routine well-child visit before starting kindergarten. She's due for DTaP, IPV, MMR, and Varicella. Her parent (Jordan) is unsure about giving “so many shots at once” and brings up online concerns about spacing them out. They're not anti-vaccine but anxious.

### Parent Concerns

- “Does she need all of them today?”
- “Is it safer to space them out?”
- “I read too many at once can overwhelm the immune system.”

### Provider Goals

- Use Presumptive Language approach
- Reassure the parent with confident and empathetic language
- Focus on:
  - Routine Safety
  - Disease Prevention
  - Following the recommended schedule

# Role Play Scenario # 2: Adolescent Well Visit – HPV Vaccine

## Scenario Background

Marcus, age 11, is at a well-child visit with his mother (Tracy). He's due for his first dose of the HPV vaccine, as well as Tdap and meningococcal. Tracy seems generally supportive of vaccines but becomes unsure when she hears HPV is for a sexually transmitted infection. She asks if it's really necessary "right now."

## Parent Concerns

- "He's too young for that vaccine."
- "Can't we wait until he's older?"
- "I heard it's not really needed if they're not sexually active yet."

## Provider Goals

- Use Presumptive Language approach
- Address questions with call and factual reassurance
- Focus on:
  - Cancer prevention
  - Timing for maximum effectiveness
  - Vaccine safety



# Role Play Scenario # 3:

## Preschool Visit – 4-Year Vaccines & Parental Hesitation

### Scenario Background

Mila, age 4, is in for her routine well-child visit before entering Pre-K. She is due for the 4–6-year-old immunizations: DTaP, IPV (polio), MMR, and Varicella. Her mother (Lena) expected just a check-up and becomes hesitant when told shots are due today.

### Parent Concerns

“We weren’t expecting shots today—can’t we just come back another time?”

“I’d rather talk to my husband first before doing something like this.”

“She’s already nervous about being at the doctor, and I don’t want to upset her.”

### Provider Goal

- Use presumptive language approach using plain, non-medical terms.
- Present vaccinations as normal and routine
- Explain the importance of staying on schedule
- Reassure parent

# Role Play Scenario # 4:

## Preteen Visit – HPV Vaccine & Concerns About Side Effects

### Scenario Background

Jayden, age 11, is at his annual physical. He is due for Tdap, meningococcal, and HPV vaccines. When the provider recommends all three, his father (Matthew) expresses concern specifically about the HPV vaccine, referencing stories he's read online.

### Parent Concerns

"I've seen some articles online where people said their kids had bad reactions to the HPV shot."

"I'm just not comfortable giving him something that new if there's any risk."

"He's healthy now—I don't want to take a chance on something that could cause problems."

### Provider Goals

- Use presumptive language approach using plain, non-medical terms.
- Present the HPV vaccine as routine
- Acknowledge parent's concerns but offer reassurance based off experience and data
- Highlight the strong safety record for HPV vaccine and its importance on preventing several types of cancers.

# Role Play Scenario # 5:

## Routine Visit – Flu Vaccine (any age)

### Scenario Background

Sophie is at a routine visit during flu season. Her father (Darryl) says the flu shot “never works” and is unsure if it’s worth doing this year. Sophie previously had mild flu symptoms despite getting the vaccine once.

### Parent Concerns

- “We got the flu shot last year and still got sick.”
- “Isn’t the flu just a cold?”
- “I’ve heard it doesn’t even work well.”

### Provider Goals

- Use Presumptive Language approach
- Reinforce importance of reducing severity
  - Helps alleviate missing school or work
- Protecting vulnerable people

# Role Play Scenario # 6:

## Toddler Visit – MMR Vaccine Hesitancy

### Scenario Background

Noah, 18 months old, is due for his first MMR vaccine. His mom (Jess) expresses concern about stories linking MMR to autism and isn't sure if she's ready to give him the shot yet.

### Parent Concerns

- “I’ve read MMR can cause autism.”
- “I’m thinking of spacing that one out.”
- “I just want to be cautious.”

### Provider Goals

- Use Presumptive Language approach
- Validate parent’s worry while clearly stating the MMR vaccine is safe
  - Emphasize it has been extensively studied
  - With no link to autism
- It is critical for preventing serious disease

# Role Play Scenario # 7:

## Teen Visit – Tdap Vaccine & Peer Misinformation

### Scenario Background

Jada, age 13, is at a routine visit before starting 8th grade. She is due for her Tdap vaccine. During the visit, her mother (Angela) shares that Jada recently said some of her friends told her vaccines can “mess up your body” or “make you infertile.” Angela says she doesn’t believe it herself but now Jada is scared, and she’s unsure how to respond.

### Parent/Teen Concerns

- “Jada said some of her friends told her vaccines aren’t safe.”
- “She’s nervous something bad might happen.”
- “I don’t want to force her if she’s scared and there’s a chance it could affect her later in life.”

### Provider Goals

- Use Presumptive Language approach
- Reinforce importance of staying protected
- Vaccine has been given to millions of teens
- Acknowledge peer concerns while calmly correcting the misinformation
  - Tdap vaccine is routine, well-tested, and essential for long-term health

# THANK YOU



[nj.gov/health](https://nj.gov/health)



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