



Vaccine Messaging and Communication

State Public Health Symposium
Atlanta, GA

June 22, 2022



State Action on Vaccine Messaging & Communication

Raise Awareness

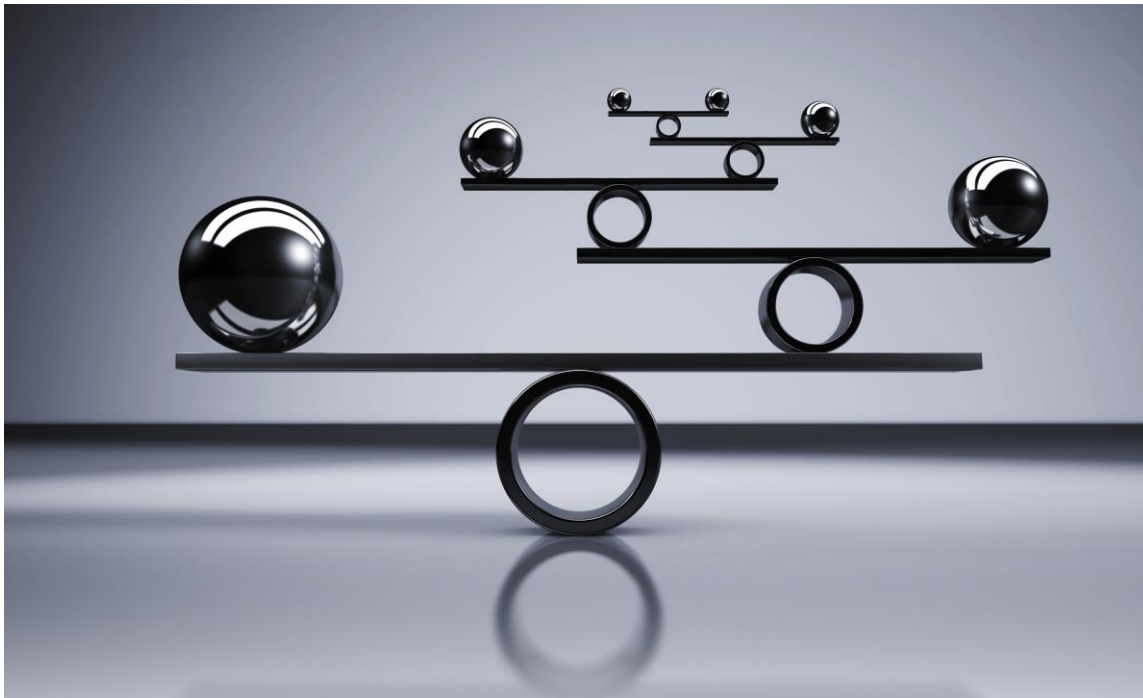
Disseminate Accurate Information & Address
Equity

Raise Awareness

- **Illinois [HR 196](#)** (2019) – Increases public awareness of the importance of preteens and adolescents receiving vaccines against meningococcal disease, HPV, influenza, tetanus, diphtheria, pertussis, measles, mumps and rubella, and promotes outreach and education efforts concerning vaccination.
- **Nebraska [LR 95](#)** (2021) – Recognizes August as National Immunization Awareness Month and cites the importance of vaccines to maintain and improve child and adolescent health.
- **South Carolina [HR 5226](#)** (2020) – Calls attention to the connection between HPV and cervical and other cancers and spreads awareness of vaccine protection.



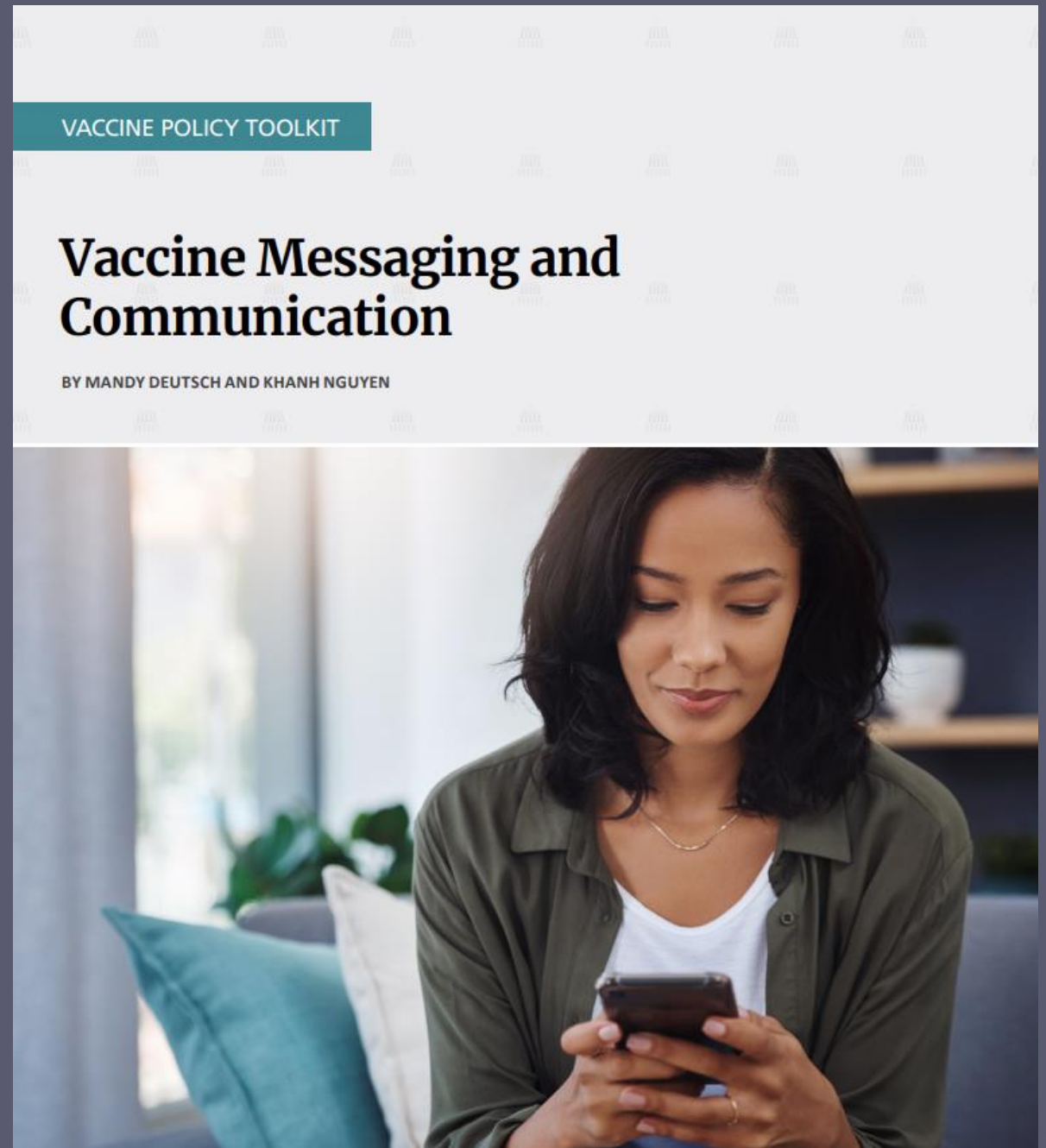
Disseminate Accurate Information & Address Equity



- **Arkansas [HB 1547](#)** (2021) – Requires all data and information about the safety and effectiveness of any FDA-approved vaccine be available on a public website maintained by the health department.
- **Florida [HB 9](#)** (2021) – Prohibits the dissemination of false or misleading vaccine information with specified intent.
- **Massachusetts [HB 5164](#)** (2020) – Requires health equity in design, development, implementation and oversight of the state's vaccine plan, including culturally and linguistically diverse public education and outreach.

NCSL Resources

- [State Public Health Legislation Database](#)
 - Vaccines: Access, Insurance & Workforce, Registries & Reporting, Requirements
- [Maternal and Child Health Database](#)
 - Child Immunization Requirements
- [State Action on Coronavirus \(COVID-19\)](#)
 - Health: Vaccine
- [Vaccine Policy Toolkit](#)
- [States With Religious and Philosophical Exemptions From School Immunization Requirements](#)



Faculty



Joe Smyser, PhD, MPH

Chief Executive Officer
Public Good Projects



Claire Hannan, MPH

Executive Director
Association of Immunization Managers

Vaccine Communications

Joe Smyser, PhD, MSPH
CEO, PGP
joe.smyser@publicgoodprojects.org

Social Listening Programs

Mis/Disinformation Monitoring



PROJECT VCTR

Since 2019, Project VCTR has tracked vaccine-related public communications within all 50 US states. Each week, PGP's analysts provide insights on trending or emerging misinformation, as well as legislation and advocacy related to vaccines.

Project VCTR is a free resource designed for health organizations, health educators, or members of the press who report on health.



Vaccination
Demand
Observatory

The VDO is a UNICEF-led initiative that identifies, tracks, and responds to vaccine misinformation. It provides three services that work together in concert: (1) Identifying misinformation & information gaps; (2) responding to misinformation through local UNICEF offices; and (3) training and technical assistance.



PROJECT VCTR

March 1, 2020 - June 21, 2022
All vaccine references in U.S.

Total Mentions

484.3M

Total Mentions

Average Counts

574,593

Average Per Day

23,941

Average Per Hour

Potential Impressions

8.5T

Potential Impressions

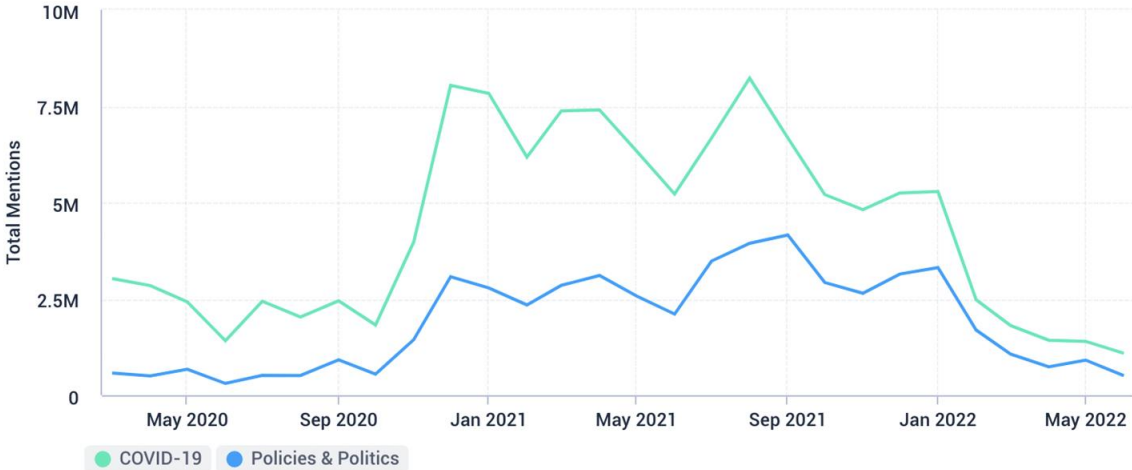
Conversation Theme Trends

Week **Month**



Conversation Theme Trends

Week **Month**

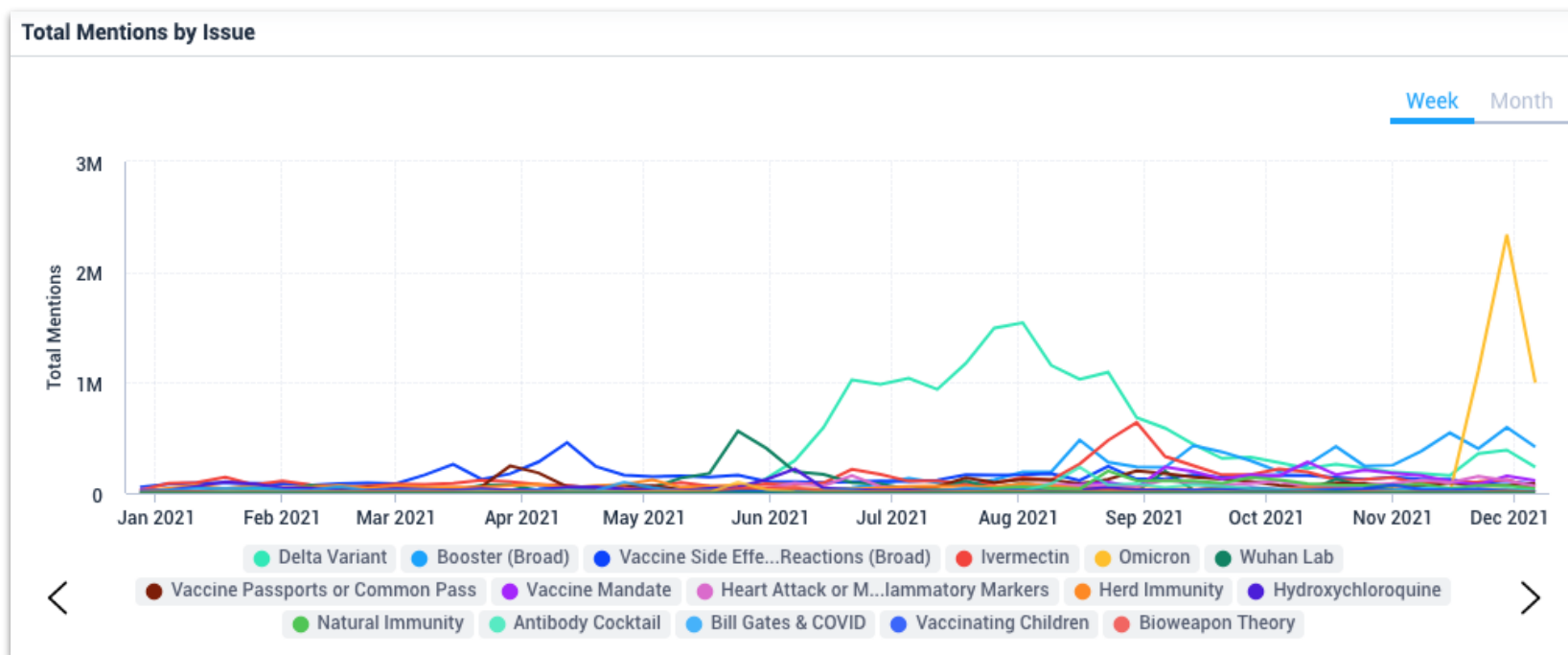




PROJECT VCTR

Deeper into COVID narratives

Some of the most widely discussed throughout 2021:



Jan. 2021

COVID
Origins

Vaccine
Side Effects

Bioweapon/
Man-made
Virus

Delta
Variant

Vaccine
Alternatives

Omicron
Variant

Boosters &
Vaccinating
Children

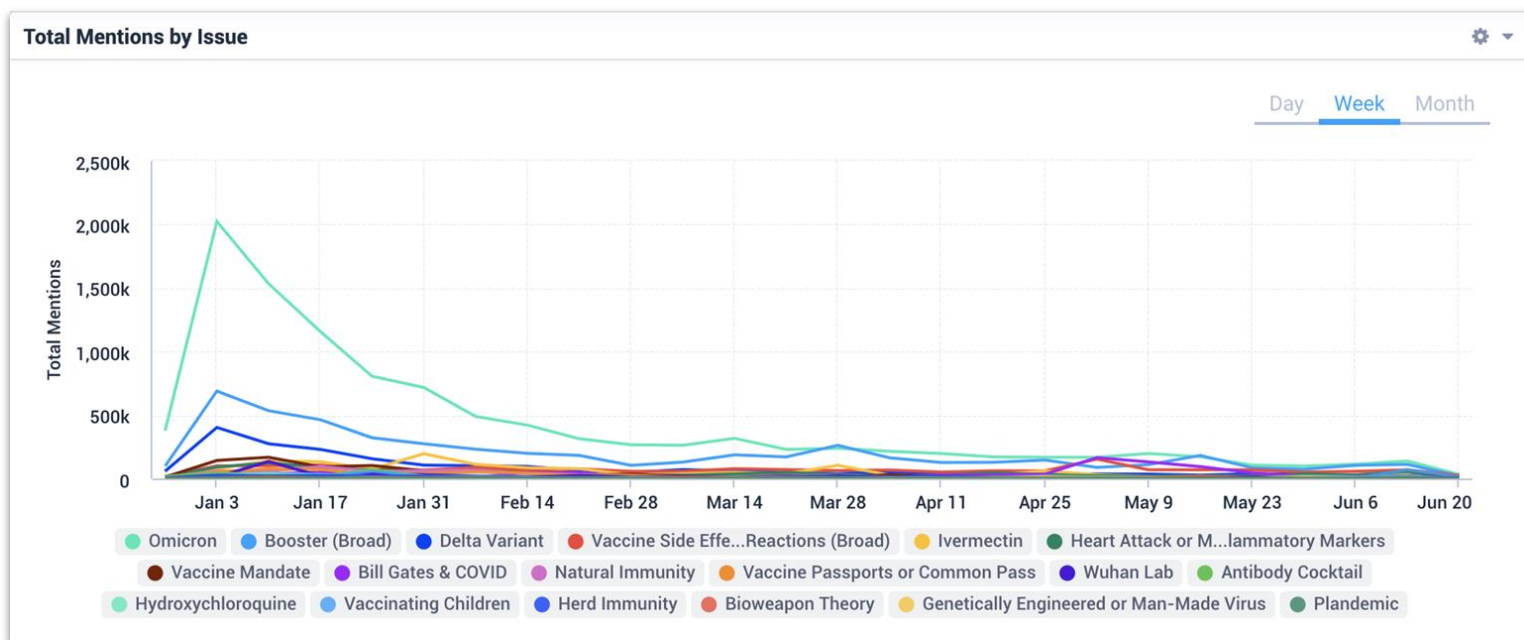
Dec. 2021



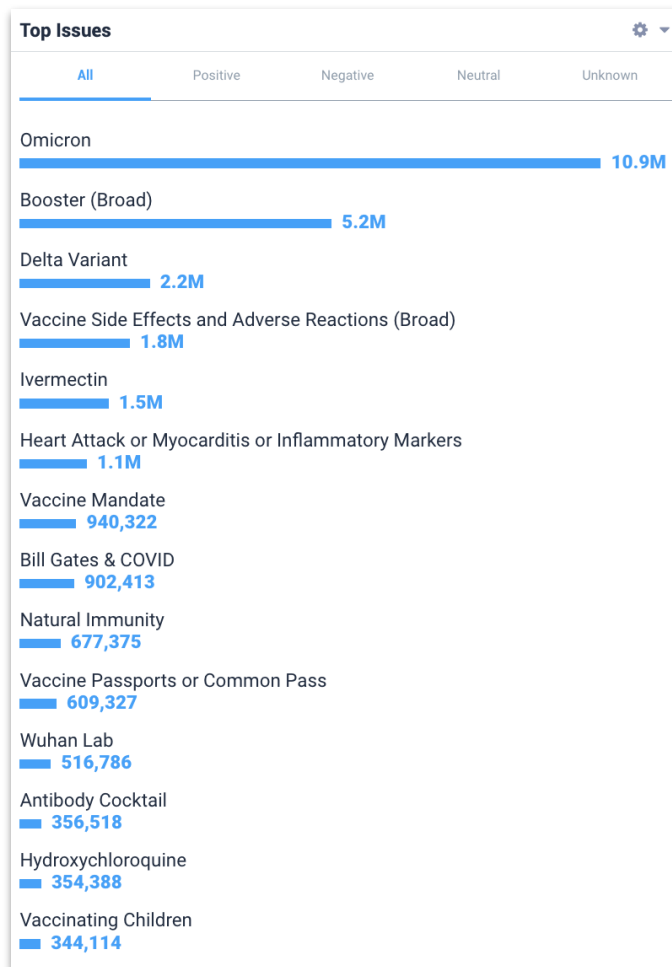
PROJECT VCTR

Deeper into COVID narratives, 2022

People are still discussing variants, boosters, and side effects:



January 1st - June 21st, 2022

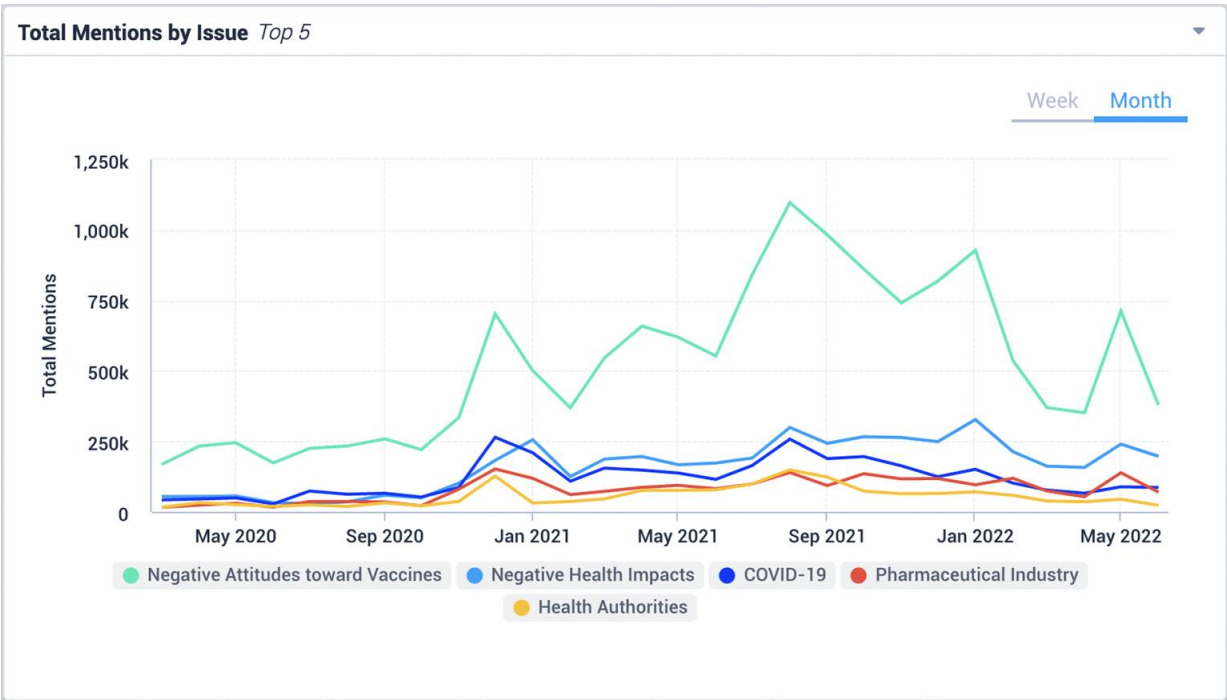




PROJECT VCTR

March 1, 2020 - June 21, 2022
Vaccine opposition references in U.S.

Total Mentions	Average Counts	Potential Impressions
14.7M Total Mentions	<div>17,384 Average Per Day</div> <div>724 Average Per Hour</div>	104.1B Potential Impressions



Bonnevie, E., Gallegos-Jeffrey, A., Goldberg, J., Byrd, B., & Smyser, J. (2021). Quantifying the rise of vaccine opposition on Twitter during the COVID-19 pandemic. *Journal of communication in healthcare*, 14(1), 12-19.

Bonnevie, E., Goldberg, J., Gallegos-Jeffrey, A. K., Rosenberg, S. D., Wartella, E., & Smyser, J. (2020). Content themes and influential voices within vaccine opposition on Twitter, 2019. *American journal of public health*, 110(S3), S326-S330.



PROJECT VCTR

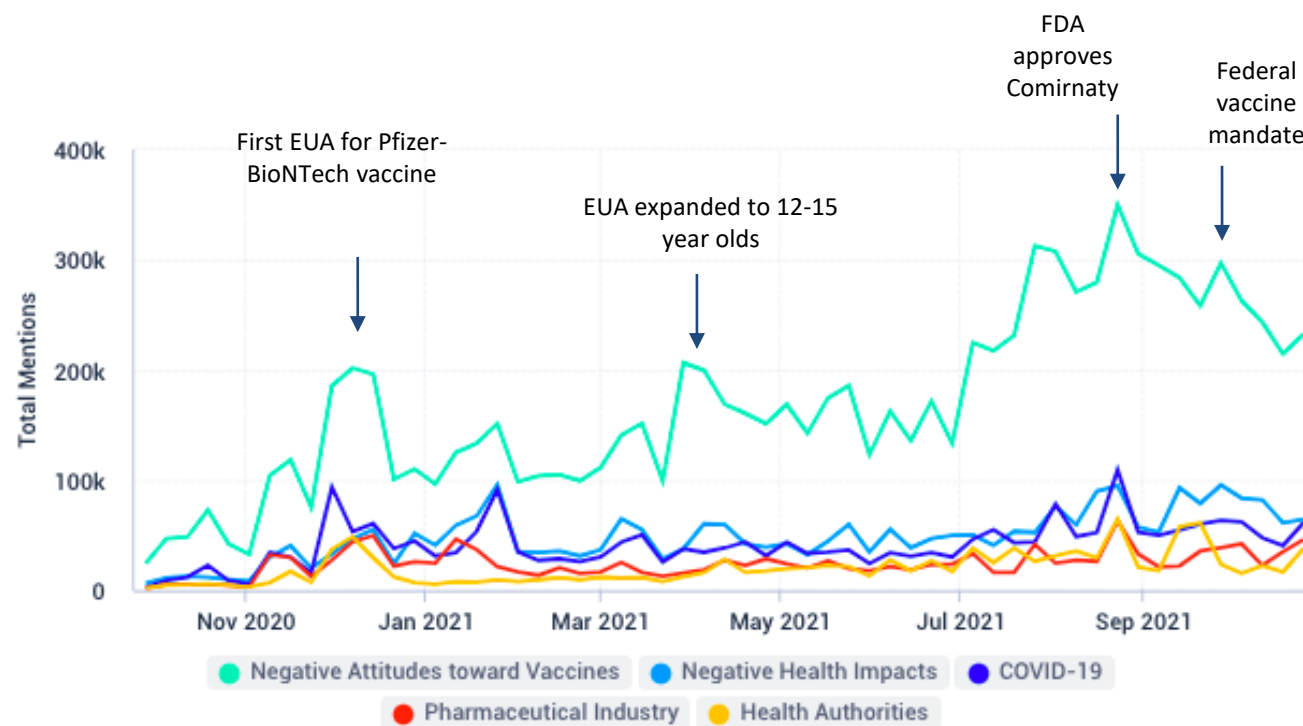
Drivers of Vaccine Misinformation

Anti-vaccine rhetoric was led by niche groups up to 2020, but the pandemic has exploded it into the mainstream. It's becoming inseparable from identity.

Vaccine misinformation spikes every time federal, state, or local authorities make decisions.

During the pandemic, a top anti-vaccine Twitter account referenced vaccines over 47,000 times before it was suspended.

Even though many more groups are skeptical or opposed to vaccines than prior to 2020, the talking points still come from identifiable sources.



Each issue represents a complex conversation.

Emerging Data

Vaccine Skepticism



- Skepticism and opposition to COVID-19 vaccine policy is now extending to all other vaccines.
- Political identity appears to be the main driver – this is very new - and messaging by well known anti-vaccine and anti-government individuals and groups are leveraging this.
- US discourse on vaccines is reaching every corner of the globe. We find statements from US elected officials, fringe health care providers, and pundits shared and echoed in even the most remote places on Earth.

Vaccine Messaging and Communication

State Vaccine Confidence and Communication Campaigns



Claire Hannan, MPH
Association of Immunization Managers
Executive Director

NCSL State Public Health Symposium
June 22, 20



Association of
Immunization
Managers

About AIM – Who We Represent

- The **Association of Immunization Managers (AIM)** represents the 64 immunization programs that receive funding from CDC's National Center for Immunization and Respiratory Diseases (NCIRD)
- 50 states, 6 major cities, 8 territories/federated states
- AIM works to:
 - Collaborate with partners
 - Promote efficient allocation of resources
 - Promote development/implementation of policies and programs
 - Provide a forum for information sharing and leadership development

Today's Discussion

- Background: vaccination rates and what is at stake
- Building confidence in vaccines
 - Supplemental funding to state and local health agencies
 - CDC guidance
- State communication and confidence campaigns
 - Public perceptions (KANSAS)
 - Community engagement (WISCONSIN, TEXAS)
 - Provider education (INDIANA, NORTH DAKOTA, WA STATE)
 - COVID campaign example (ALASKA, MARYLAND)
- Tips and resources

Building Confidence: Supplemental Funding and Guidance

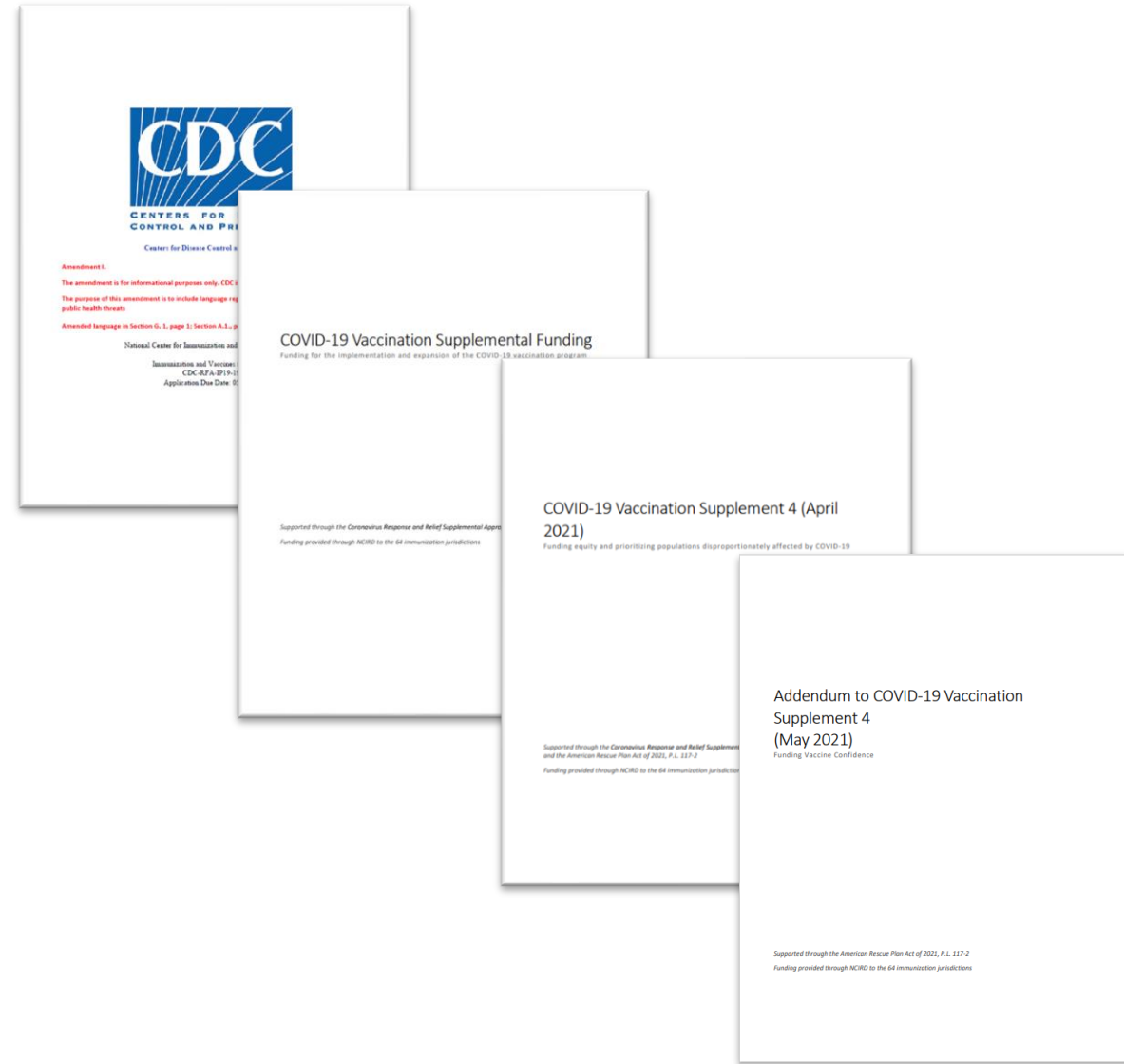
COVID-19 supplemental funding guidance for immunization program awardees

- **COVID-19 Funding**

- Coronavirus Response and Relief Supplemental Appropriations Act of 2021
- The American Rescue Plan Act of 2021

- **Supplemental Funding Opportunities**

- COVID-19 Vaccination Supplemental #3 Funding Guidance
- COVID-19 Vaccination Supplemental #4 Guidance
- Addendum to COVID-19 Vaccination Supplement 4



Using a community driven approach to reduce vaccination disparities

- This guidance provides a community-driven approach to identifying partners as well as increasing vaccine confidence and uptake using five steps
 1. Use data to identify and prioritize communities of focus
 2. Identify relevant government officials and community partners
 3. Understand barriers in community and create an implementation plan
 4. Help community partner networks implement plans
 5. Conduct continuous program evaluation



Increasing COVID-19 Vaccine Uptake among Members of Racial and Ethnic Minority Communities:
A Guide for Developing, Implementing, and Monitoring Community-Driven Strategies

US Department of Health and Human Services/Centers for Disease Control and Prevention/National Center for Immunization and Respiratory Diseases
January 28, 2021

A Community-Driven Approach for Increasing COVID-19 Vaccine Confidence and Uptake:

To build vaccine confidence and increase uptake among members of racial and ethnic minority communities, immunization awardees can establish or bolster existing partnerships with community organizations, leaders, and other local partners to define barriers and assist in development and implementation of strategies—offering them a seat at the table, providing support to help implement strategies, and continuously engaging their knowledge, insights, and lived experiences as a part of planning and engagement. This guidance provides a community-driven approach to identifying partners and increasing vaccine confidence and uptake using five steps, as seen in Figure 2 and the summary below.



Figure 2: Community-driven approach

Step 1: Use data to identify and prioritize racial/ethnic minority communities that may be less likely to receive a COVID-19 vaccine.

Step 2: For each community of focus, identify relevant government officials and community partners to form a “community partner network.”

Step 3: Work with the community partner network to understand barriers in the community and create an implementation plan for vaccination messaging, outreach, and administration.

Step 4: Help community partner networks implement plans, providing funding and support as needed.

Step 5: Conduct continuous program evaluation through data collection and analysis to inform possible changes to the ongoing strategies.

State Communication and Confidence Campaigns

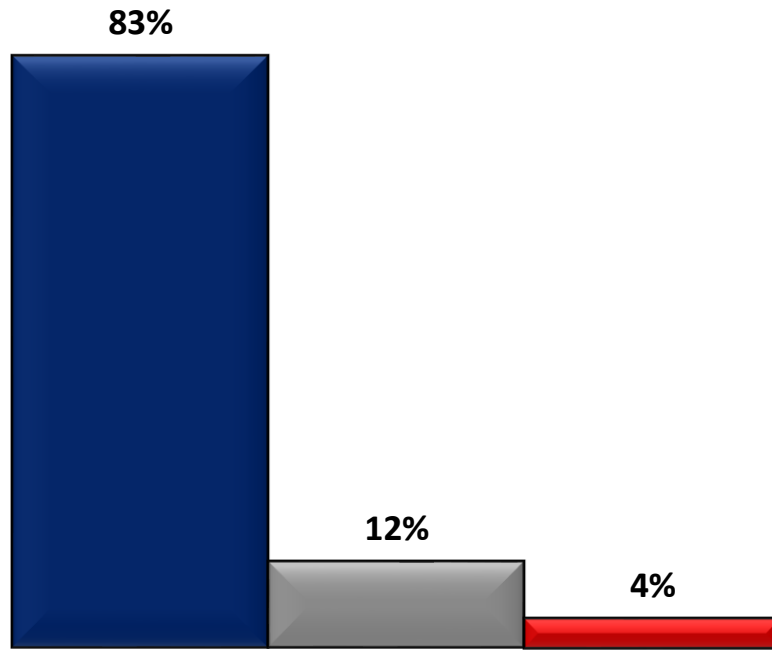


Kansas Statewide Survey: Attitudes Toward Vaccines

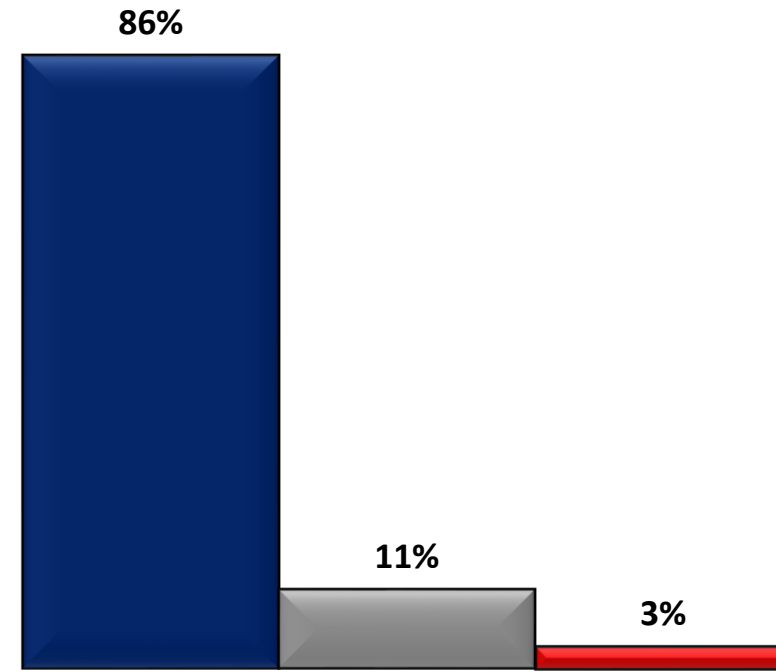
Key findings from a statewide survey of 600 registered voters
in Kansas, conducted January 27-February 3, 2022.

More than 80% of Kansas voters say wellness vaccines are completely/mostly safe and completely/mostly effective.

“Do you believe wellness vaccines are completely safe, mostly safe, somewhat safe, mostly unsafe or completely unsafe?”



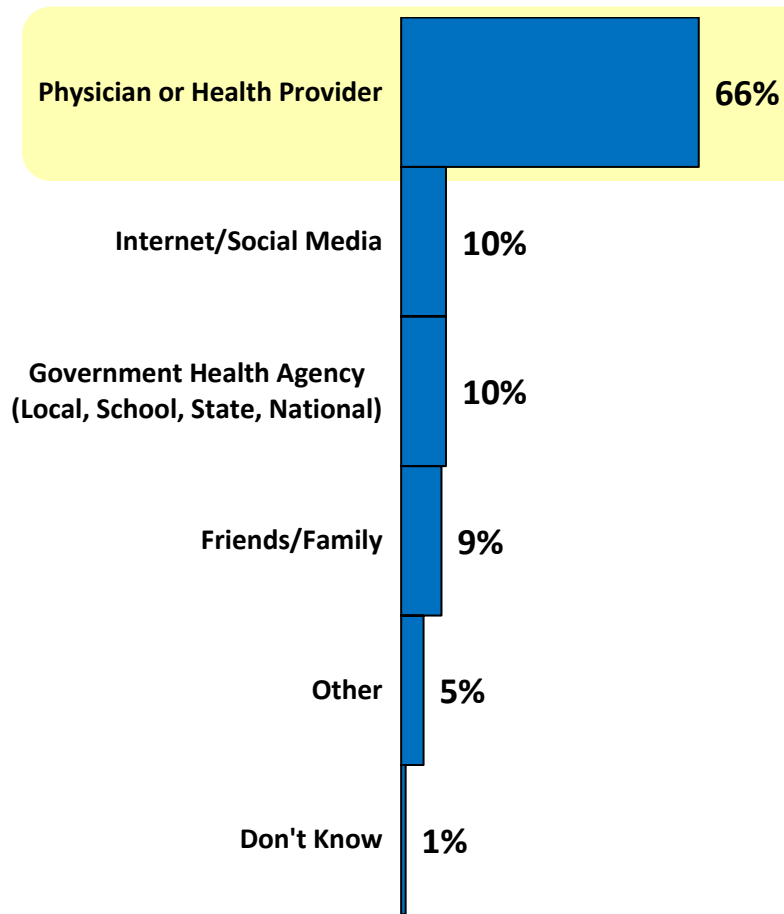
“Do you believe wellness vaccines are completely effective, mostly effective, somewhat effective, mostly ineffective or completely ineffective?”



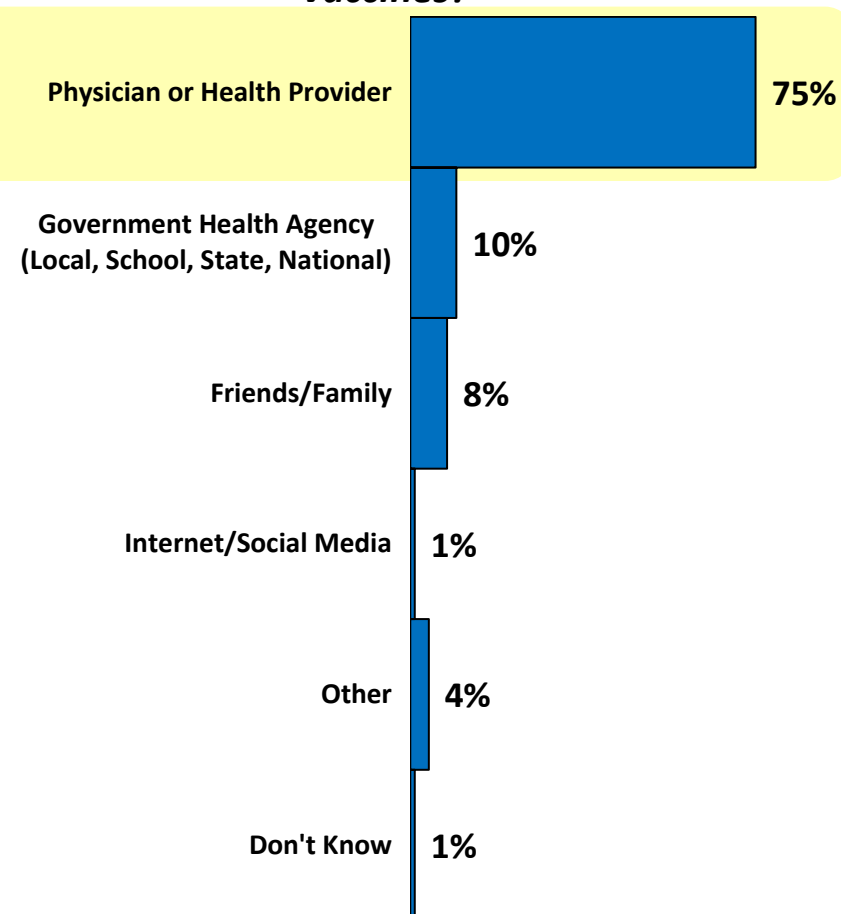
■ Completely/Mostly ■ Somewhat ■ Mostly/Completely Unsafe/Ineffective

When it comes to wellness vaccine info, physicians are the dominant source of information and by far the most trusted.

“Where do you receive most of your information about wellness vaccines?”^



“What source would you say you trust the most when it comes to information about wellness vaccines?”^^

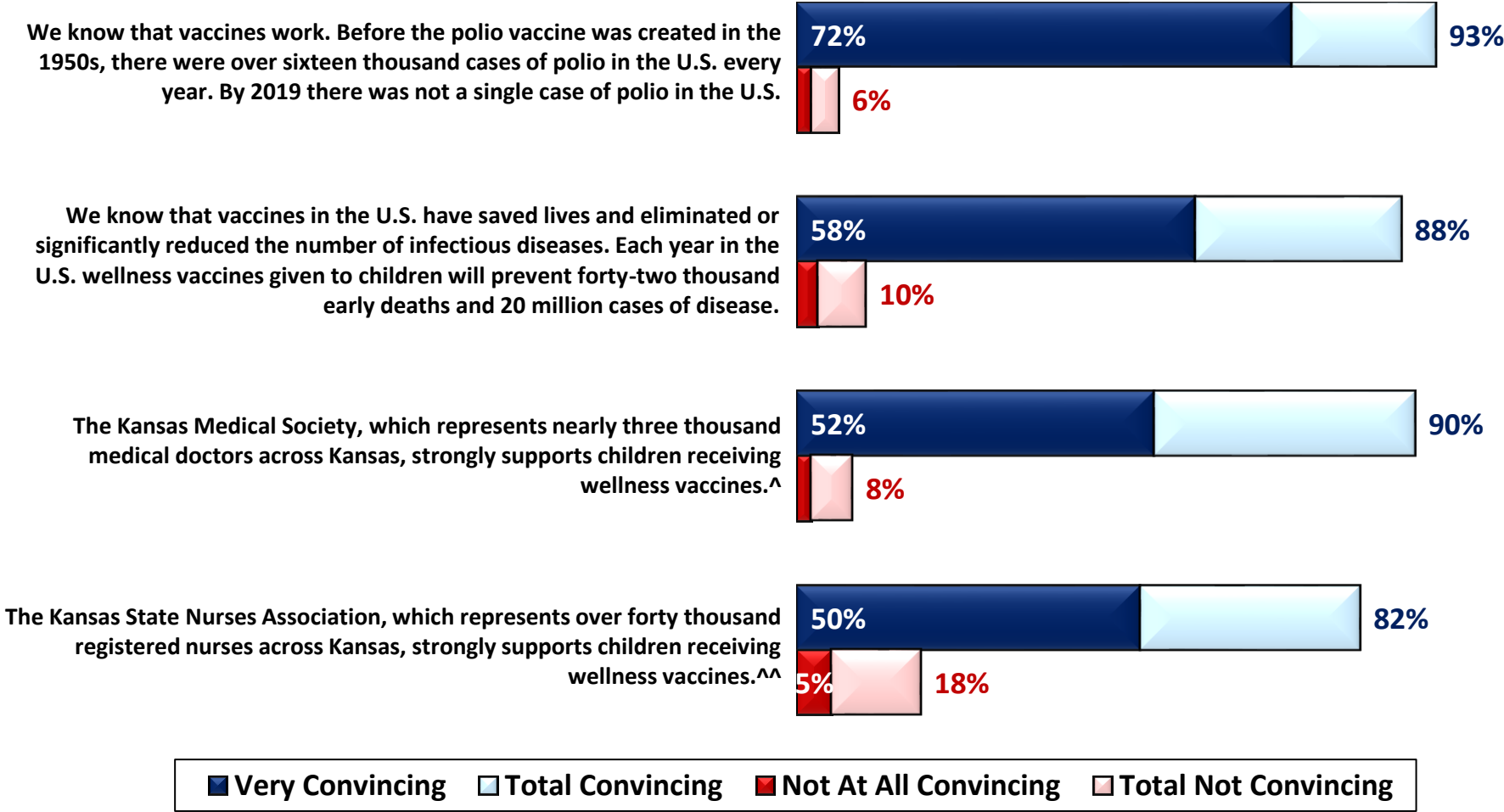


[^]Split Sample A, N=296; ^{^^}Split Sample B, N=304.

All four messages in support of taking wellness vaccines resonate strongly; the polio example resonates the most.

“Now I'd like to read you some statements people have made in support of taking wellness vaccines, and after I read each statement, please tell me if you think that statement is very convincing, somewhat convincing, not very convincing, or not at all convincing as a reason to take wellness vaccines.”

Ranked by % Very Convincing



[^]Split Sample A, N=296; ^{^^}Split Sample B, N=304.

Wisconsin Department of Health Services

Vaccination Community Outreach Grant Program



Over 4K Vaccination
Events

Over 131K
vaccinations
administered



Over 24K education
events



Nearly 3T paid and
social media ads



Estimated trillions of
impressions

Funded Projects

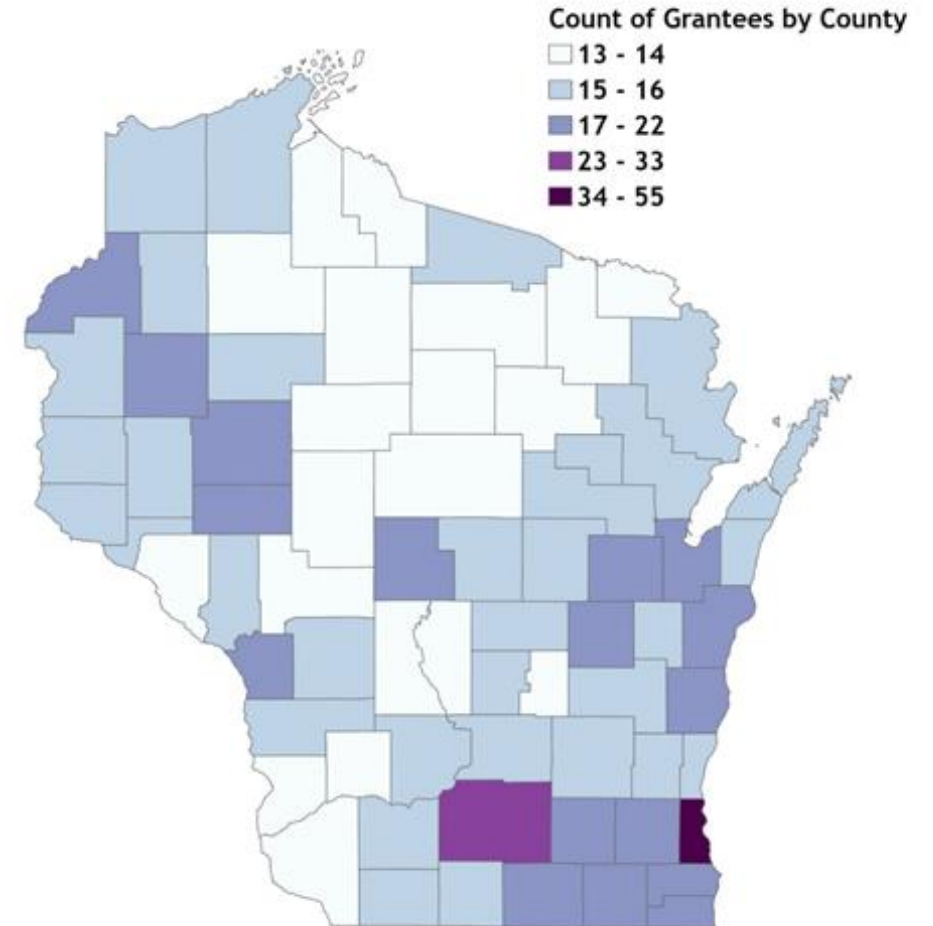
Funded organizations include:

- Federally Qualified Health Centers (FQHCs)
- School districts
- Local/tribal health departments
- Community-based organizations

Round 1: 6.3M to 101 Community level organizations

Round 2: 11.6M to 135 Community level organizations

Count of Round 1 VCO Grantees by County



Successes



“Our goal was for 5,000 households to be reached through door-to-door canvassing, and we exceeded that goal with **over 8,000+ households reached** over a 7-week period.”

Sherman Park Community Association



“We were able to help vaccinate **over 400 Hmong and Southeast Asian elders and adults**. Individuals shared with us that if it was not for our mobile vaccine clinics, they would not have been able to get vaccinated because they lacked the computer skills to register online...[and] due to language barriers”

The Hmong Institute

Utilize and Build Trusted Relationships



“the trust that exists in pre-existing relationships between OASD liaisons and family members helped families feel more comfortable about the vaccine.”

Oshkosh Area School District

“Focus more on **one-on-one outreach activities** in communities with low vaccination rates. Empower community members to share their own experiences when they get vaccinated to dispel myths and misconceptions. **Personal experience was the most requested and effective way to share vaccine information.**”

Wisconsin Literacy Inc.

Texas COVID-19 Vaccine Outreach & Education Grant Program

Building vaccine confidence through supporting local community focused activities.



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Creative

Community

Engagement

Partnerships

&

Locations



Communication Service for the Deaf (CSD)
& Deaf Action Center (DAC)



BOYS & GIRLS CLUBS
OF CENTRAL TEXAS



Images From Events & Community Conversations



Images

From

Community

Messaging



The flyer is for a community health event at the Quang Duc Buddhist Temple. It features logos for VANA (Vietnamese American Nurses Association) and the Houston Unity Lions Club. The main title is 'Your Health Is Our Priority' in blue text, accompanied by a large pink heart with a white checkmark inside. The event details are: Quang Duc Buddhist Temple, 17703 French Rd, Houston, TX 77084, Sunday, March 27, 2022, from 9AM to 1PM. It lists two categories of services: Health Services (including vision, bone density, cholesterol, hypertension, blood glucose, Pap smear, colon cancer, breast exam, and health scans) and Other Services (including creating a will, COVID-19 testing and vaccination, smoking cessation, Medicare/Medicaid/ACA Marketplace enrollment, diabetes prevention, funeral pre-planning, fire safety, and other resources). Contact information is provided as 832-404-8345. At the bottom, there are logos for various partner organizations including H-E-B Pharmacy, Texas Woman's University, HOPE Clinic, VAPHA, BPSSB, Molina, Amerigroup, TMT Insurance, United Healthcare, and Dignity.

Logos: Vietnamese American Nurses Association (VANA), HOUSTON UNITY LIONS CLUB

Your Health Is Our Priority

Quang Duc Buddhist Temple
17703 French Rd, Houston, TX 77084
Sunday, March 27, 2022
From 9AM - 1PM

HEALTH SERVICES

- Vision screening
- Bone density screening
- Cholesterol screening
- Hypertension screening
- Blood glucose screening
- Sign-up for Pap smear exam
- Colon cancer with FIT test provided
- Clinical breast exam & schedule for mammogram
- Health Scans: BMI, visceral fat, antioxidant level

OTHER SERVICES

- Create a Will
- Covid-19 Test
- Covid-19 Vaccine (adult & children)
- Covid-19 Booster (bring vaccine card)
- Smoking Cessation
- Medicare, Medicaid, ACA Marketplace (Obama Care)
- Diabetes prevention
- Funeral pre-planning
- Fire safety & prevention information
- And many other resources

Contact Us 832-404-8345

Logos: H-E-B Pharmacy, TEXAS WOMAN'S UNIVERSITY, HOPE CLINIC, VAPHA, BPSSB, MOLINA, Amerigroup, TMT INSURANCE, United Healthcare, Dignity



Ongoing Vaccine Confidence Campaign

890M Vaccine Impressions in 2021

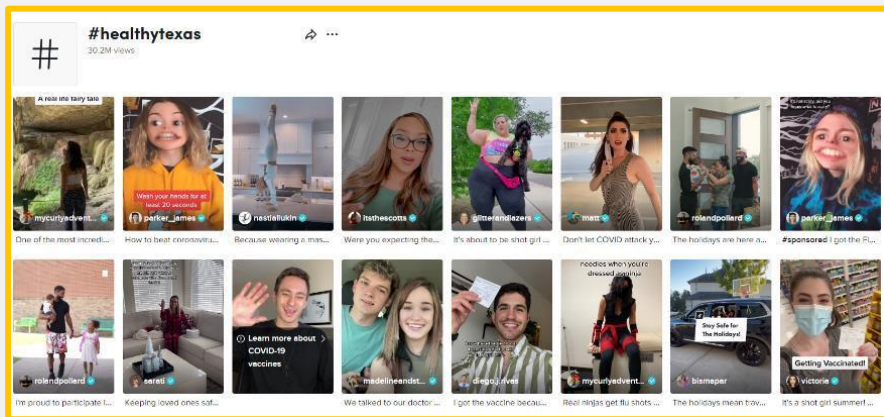
First COVID shot protection is like:



Second COVID shot protection is like:




Booster shot protection is like:



Community-based Vaccine Confidence Building

LESSONS LEARNED




- Offer COVID vaccine + other vaccines
 - Address misinformation
 - Messages from local, trusted medical professionals
 - Partnerships with trusted community members:
churches, workplaces, or schools
 - Flyers and posters in common community spaces
 - Information in multiple languages
- 

Community-based Vaccine Confidence Building

LESSONS LEARNED



- Fear tactics and dire warnings ineffective
 - Specific and targeted messaging
 - One-on-one conversation at community events
 - Messaging focused on overall healthy behaviors or community health
- 



"COVID-19 vaccine-hesitant individuals became less hesitant after a brief recommendation from a doctor."

We are rounding the corner into another pandemic summer, and COVID vaccine uptake for children continues to be slow. That's a problem as new COVID-19 variants continue to spread. With boosters for children 5 - 11 being approved and the possibility that a vaccine for children under five may finally be available for children this summer, it's essential to be ready to have conversations with parents.

[Researchers at UMass Medical School](#) found that "COVID-19 vaccine-hesitant individuals became less hesitant after a brief recommendation from a doctor." That means doctors and healthcare providers have a unique opportunity to persuade parents who may be on the fence. Luckily, there are tips to help you with those conversations.

A recent [study](#) conducted by IUPUI in collaboration with the Indiana Department of Health and the Indiana Department of Education looked at the factors that differentiate COVID-19 vaccine intentions among Indiana parents.

The researchers determined that to motivate parents that are hesitant to vaccinate their children, rather than highlighting the risks of COVID, healthcare providers should emphasize the safety and efficacy of the vaccine. Click the button below to read a summary of the findings.

Conference: North Dakota State University Center for Immunization Research and Education (CIRE)

**TRANSCENDING COVID-19 VACCINE BARRIERS:
Strategies to Increase Confidence and Acceptance**

**June 16-17, 2021
FREE Virtual
Conference**



Conference Objectives

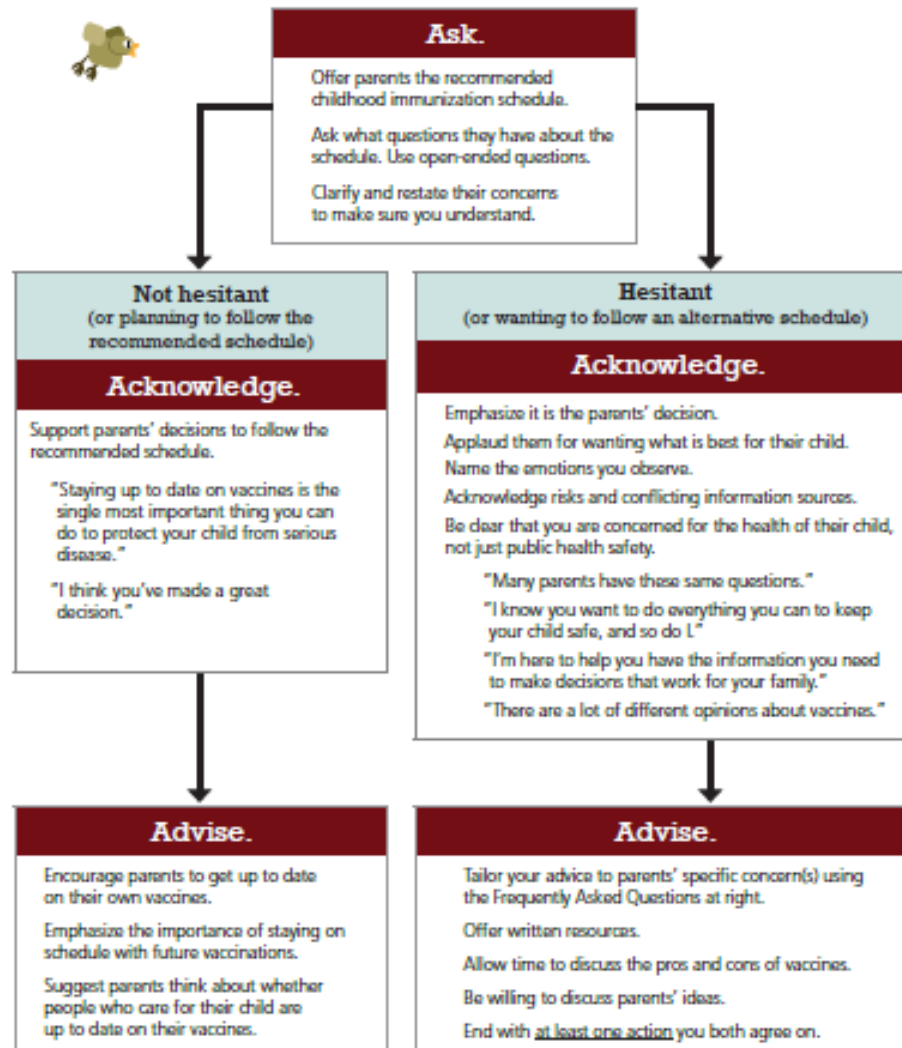
- Explore strategies to address COVID-19 vaccine with patients, to ultimately increase vaccination rates in healthcare practices.
- Examine the role social media can play in COVID-19 vaccine communication.
- Summarize COVID-19 vaccine safety monitoring systems and safety data.



WORKING TO ADDRESS VACCINE CONFIDENCE
IN WASHINGTON STATE

Intervention: respectful, proactive communication

Ask. Acknowledge. Advise.



Frequently Asked Questions

What are the benefits of vaccines?

Vaccines protect against diseases that can harm your child. Some of these diseases can cause serious long-term health problems or death.

Vaccines have saved more lives than any other medical intervention, including antibiotics or surgery. Vaccines also help prevent disabilities such as blindness and paralysis that can be caused by disease.

What are the risks of vaccines?

Vaccines can cause mild side effects that usually appear within a couple days. The most common are fever or soreness where the injection was given.

Serious side effects from vaccines are extremely rare. For example, one child in a million may have a severe allergic reaction to the DTaP vaccine. There is no evidence that vaccines are linked to chronic diseases such as autism, autoimmune disease, asthma, or diabetes.

The benefits of vaccines far outweigh the risks.

Haven't we gotten rid of these diseases in the U.S.?

No. The vaccines we recommend are for diseases that still show up in the U.S., so children are still at risk. You may have heard about whooping cough (pertussis) becoming more common in the Northwest—there were more than 4,000 cases in Washington and Oregon between 2004 and 2007. Other diseases may be just a plane ride away.

Will my child be exposed to toxins from these vaccines?

No. Vaccines do contain some additives. Vaccines today contain fewer additives than the ones you may have had as a child. But some additives are necessary for vaccines to be safe and effective.

Aluminum is present in some vaccines to improve immune response. However, healthy babies quickly eliminate aluminum from their bodies. In fact, babies get more aluminum from breast milk or formula in their first six months of life than they do from vaccines.

The influenza vaccine—or "flu shot"—is the only childhood vaccine that contains the mercury-based preservative thimerosal. But our best evidence clearly shows that thimerosal in vaccines does not cause autism or other harmful effects. The form of mercury known to be dangerous to health has never been in any vaccines.

Why does my child need all these vaccines at such a young age? Is it safer to delay some shots?

The vaccines we offer to young babies are for diseases that are especially dangerous to them. These diseases can have devastating long-term effects on your baby's health.

It is actually more dangerous to delay vaccines than to give them. This is because the diseases that vaccines prevent are more severe than any side effects. Most of the time, young babies are exposed to these diseases from people around them every day, such as brothers, sisters, parents, and other family members and caregivers.

Isn't this too many shots at one visit?

There is no evidence that getting more than one vaccine at the same time will harm your child. Newborn babies successfully respond to many more new substances every day than are in the vaccines we recommend. The human immune system can recognize and respond to thousands of organisms in the body at the same time. This is true even for newborn babies.

Your choice to stick to the recommended vaccine schedule actually makes your child's immune system stronger.

Can I separate the MMR vaccine into individual shots?

Separate MMR shots are not available in the U.S. But that's a good thing. When the MMR was given separately, there were gaps of time when children were still vulnerable to the serious diseases the MMR prevents: measles, mumps, and rubella.

We use the combination MMR because we know it is safe—and because it protects against three diseases in only one shot. That's less discomfort for your child.

Can I use an alternative schedule?

The evidence suggests that there is no benefit to delaying vaccines. In fact, it actually places your child at risk for getting a disease that vaccines could otherwise prevent.

There is flexibility within the recommended schedule. Let's look over it together and come up with a plan that you're comfortable with.

For more resources visit
vaxnorthwest.org

Sleeves Up, Alaska

- **Sleeves Up for Summer**
 - Community-driven campaign to increase COVID-19 vaccinations statewide
 - Events planned by local communities, business groups and health care and community organizations
- **Sleeves Up for School (2021-2022)**
 - DHSS provided information about COVID-19 vaccinees for Alaska's youth and families



Maryland Department of Health GoVAX Campaign

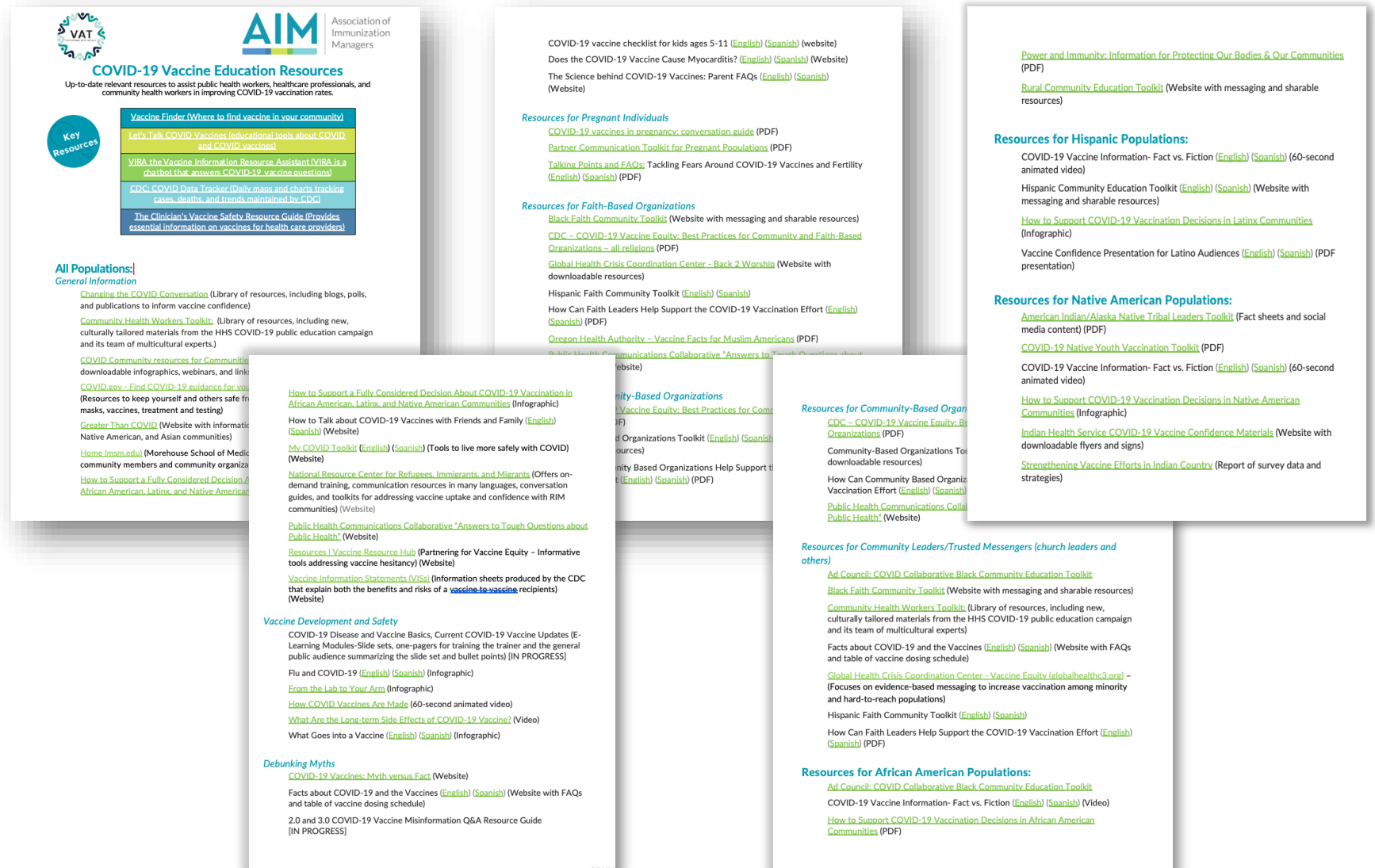


The Awosika Family / Montgomery County, MD

Resources

COVID-19 Communication Resources

Resources to improve informed decision-making, health equity & COVID-19 vaccination coverage in communities.



General Resources/Toolkits for Communities


Community Health Workers Toolkit: We Can Do This

Toolkit Materials

Jump to Resource Type ▾

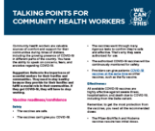
Informational Content

Answers to frequently asked questions, talking points, tips, and other science-based information about COVID-19 and the vaccines to use in your conversations and share in-person and through direct mailings, newsletters, emails, and social media accounts.




How to Talk to Your Community About COVID-19 Vaccines

Information on the vaccines and preventive measures for the target audience.



Talking Points for Community Health Workers

Guide for how to build vaccine confidence with the target audience.




Vaccine Confidence Presentation for Latino Audiences

Presentation about COVID-19 vaccines to help build vaccine confidence in Latino audiences.

COVID-19 Community Resources

COVID-19 Community Resources

DOWNLOAD CENTER VIDEOS KEY MESSAGING WEBINARS ADDITIONAL RESOURCES



Welcome to the COVID-19 Community Resource Center. This site was created to support community-based organizations, specifically those that serve communities of color, in their tireless efforts to protect the people in their communities from COVID-19. Here you will find free resources to complement your existing work.

If you are looking for something specific that is not currently available, please tell us what you need by filling out this [short survey](#) and we will review your request.

Summary of Key Activities

- Community-driven messaging and messengers
- Building trusted relationships in communities
- Reviewing science and data with providers
- Education campaigns for public
 - Using familiar voices
 - Acknowledging questions are okay but vaccinating is the norm
 - Encourage discussion with pediatrician/medical home
- Monitoring and dispelling myths and misinformation

Tips for Vaccine Policy Discussions

- Know the audience (constituent versus organized natl campaign)
- Expect media and public attention
- Build on core values and common ground
 - Everyone wants children to be healthy
- Don't get bogged down arguing the specific details of the science
 - Science and data must be considered in their totality
- Be respectful: put information out that is factual and accurate
- Be empathetic: listen to constituents; acknowledge that it is ok to have questions
- Invest in data and evaluation
- Invest in communities

Thank you!



immunizationmanagers.org



[@AIMimmunization](https://twitter.com/AIMimmunization)



Association of Immunization
Managers



Association of
Immunization
Managers

Thank you!



Khanh Nguyen
khanh.nguyen@ncsl.org

Shannon Kolman
shannon.kolman@ncsl.org

Tahra Johnson
tahra.johnson@ncsl.org