Meredith Kersten Preece, Emily Clancy

Background:
The Colorado Children’s Immunization Coalition (CCIC) sought to gain an up-to-date view of parents’ opinions toward vaccination to design messaging and better target its parent-focused initiatives.

Objectives:
Objectives were to:

1. Measure parents’ levels of support of immunization, test messages, and measure awareness of vaccine policies and organizations that provide immunization information
2. Explore motivations for supporting or opposing immunization and identify motivations for and hesitations about advocating for immunization
3. Define CCIC’s key audiences
4. Identify how to most effectively influence behavior and impact policy through messaging

Methods:
The research consisted of an online survey of 412 parents and online bulletin boards with 17 parents to further assess opinions. Throughout this process an audience discovery was completed and CCIC’s current messages were audited.

Results:
The research showed that most parents vaccinate; however, more than 1 in 3 has concerns about the safety of vaccines, and nearly all parents see it as their role to question the safety of vaccines.

Additional findings include:
- Many parents plan to or have delayed or refuse vaccines (29%), and some of these parents self-identify as “pro-vaccine.”
- Messages that focused on the risks of not vaccinating were most compelling to vaccine-hesitant parents.
- Doctors are the most influential source in planning for immunizations.
- Influenza and HPV are the most frequently refused vaccines.
- The CDC is the most broadly trusted organization for vaccination information.
- A general discomfort in publicly advocating/sharing views exists among pro-vaccine parents.
Conclusion:
Vaccine-hesitant and vaccine-accepting parents have differing opinions of vaccination, and the messages they receive should reflect their values. Parents' role in questioning vaccines should be respected and met with messages that empower them to make educated decisions. Pro-vaccine parents should be offered simple and effective ways to speak up and positively influence vaccine policy.
Background:
There is much interest in increasing uptake of recommended adult immunizations, including influenza vaccination. Research has found knowledge of adult immunization recommendations and beliefs regarding vaccine efficacy associated with vaccination but less is known about whether vaccine-related confidence and decision making factors are related to acceptance. Three sets of general preferences – natural vs. technology-based health interventions, doubter vs. believer in mainstream medicine, and minimalist vs. maximalist with respect to treatment options - have been linked to acceptance of health treatment recommendations, but not yet been applied to vaccination acceptance.

Objectives:
1) Assess adults’ knowledge and confidence regarding adult vaccines; 2) measure participants’ health-related decision making preferences; and 3) examine associations between decision making preferences, confidence, and influenza vaccination beliefs, intentions, and behaviors.

Methods:
The National Opinion Research Center’s (NORC) AmeriSpeaks panel, a probability-based panel designed to be representative of the U.S. household population, was used to survey 1,005 adults 19 years old and older. The survey was fielded in October 2016, using Internet and phone. The margin of error was +/- 3.9%.

Results:
Most adults had low familiarity regarding adult vaccines and vaccination recommendations. 42% reported receiving a flu vaccination in past 12 months. Health-related decision making preferences were strongly associated with vaccine confidence and beliefs as well as influenza vaccination intentions and self-reported flu vaccination. Notable demographic differences were also found with respect to decision making preferences, with 19-49 year olds often having different preferences than those 65 and older.

Conclusion:
Notable relationships exist between confidence, decision making preferences, and demographics, and between these factors and adult vaccination intentions and behavior. Identifying and using decision making preferences can 1) help healthcare providers better understand adult patients’ decision making regarding vaccines and 2) improve adult vaccination communication and education efforts, including for flu vaccination.
Building a Strong Immunization Coalition
Lindsay Miller

**Background:**
The Immunization Action Planning Committee (IAPC) is an immunization coalition formed in 1993 in Richland/Wilkin counties of North Dakota and Minnesota. It is a coalition with over 20 years of experience in promoting immunizations, with an overall goal of increasing immunization rates by 90%. The group is comprised of public and private partners whose goal is to improve adult and children’s health through the use of immunizations. Using the benchmarks of Healthy People 2020, its target is to reduce vaccine preventable disease rates and increase vaccine coverage in all ages.

**Setting:**
Public and private sectors of Richland and Wilkin Counties in North Dakota and Minnesota.

**Population:**
Across the lifespan.

**Project Description:**
We will discuss the keys to maintaining a long term coalition through key members, communication, funding and resources used and advantages of immunization coalitions. We will also take an in depth look at what our coalition has learned in 20+ years of experience and has identified as keys maintaining a long term coalition including: meeting times, member talents, clear deadlines, ways to keep members active. An outline of previous immunization coalition promotion techniques and community events will be discussed and outlined including the use of billboards, social media, radio, vaccination conferences including CEU’s.

**Results/Lessons Learned:**
Increased community involvement and awareness of immunizations and vaccine preventable diseases.