

Childhood Immunizations



CULTURAL APPROACHES TO SUPPORT PARENTS WHO ARE VACCINE HESITANT

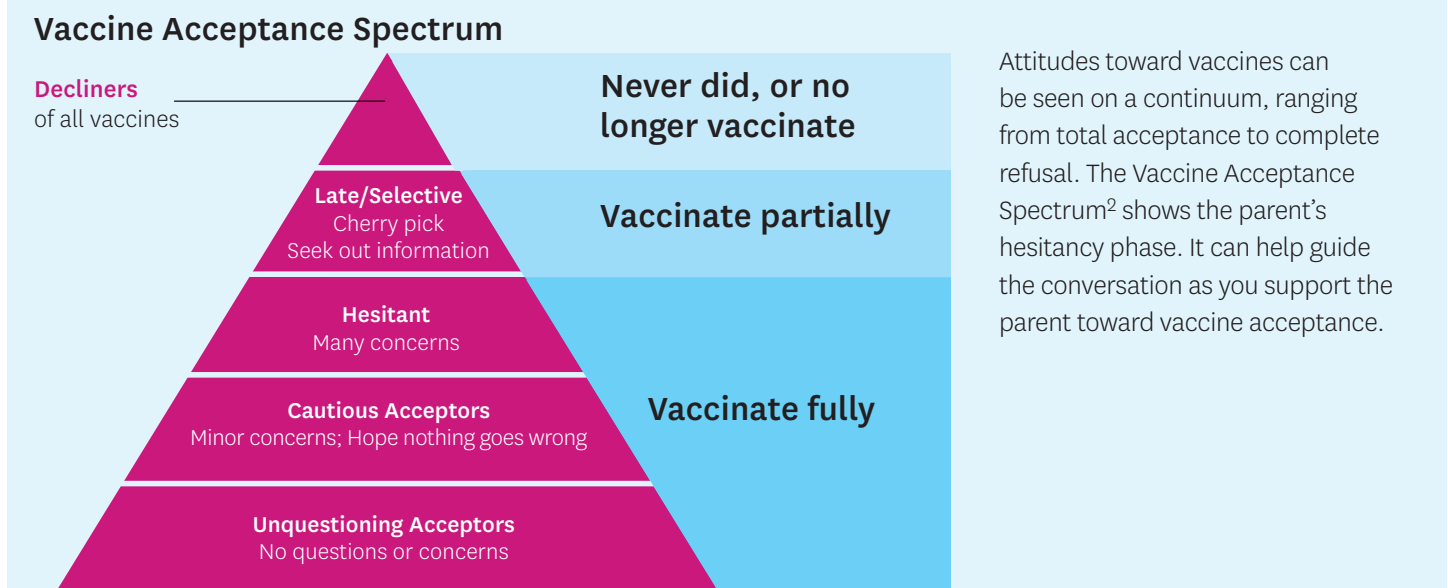
Parents are primarily responsible for making the decision to get their child immunized. Medical providers have a vital duty to support parents with decision making. You can do this in many ways. Some include engaging in culturally appropriate childhood immunization practices and offering information that builds trust with vaccine-hesitant parents.

Vaccine hesitancy defined

Vaccine hesitancy is a “delay in acceptance or refusal of vaccines despite availability of vaccination services.”¹ Recent trends show that vaccine hesitancy among parents continues to grow as some parents begin to:

- Follow other childhood vaccination schedules,
- Become selective about which vaccines to give their child, or
- Refuse vaccines altogether.

One in four parents reported serious concerns toward vaccinating their children. ²	Percentage of children ages 10 to 35 months who are fully immunized ³								
 Vaccine hesitancy may cause decreasing vaccine coverage and an increasing risk of vaccine-preventable disease outbreaks and epidemics.  Research shows that vaccine hesitancy is complex and involves emotional, cognitive, cultural, spiritual, social and political factors. ²	Childhood immunization data shows that Black children are less likely to be fully immunized, compared to other cultural groups. <table border="1" data-bbox="1104 1039 1529 1306"> <tr> <td>Asian</td> <td>72.4%</td> </tr> <tr> <td>Black</td> <td>66.5%</td> </tr> <tr> <td>Hispanic</td> <td>70.4%</td> </tr> <tr> <td>Non-Hispanic white</td> <td>71.5%</td> </tr> </table>	Asian	72.4%	Black	66.5%	Hispanic	70.4%	Non-Hispanic white	71.5%
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¹www.who.int/immunization/sage/meetings/2014/october/SAGE_working_group_revised_report_vaccine_hesitancy.pdf.

²www.ncbi.nlm.nih.gov/pmc/articles/PMC7712553/.

³https://minorityhealth.hhs.gov/. Asian: https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=52; Black: https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=22; Hispanic: https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=67.

(continued)

Cultural experiences influence vaccine hesitancy

Culture, religion, personal preferences and other factors influence a parent’s immunization decision. Cultures are dynamic and complex. Medical providers can influence and support parents by respecting cultural beliefs, addressing concerns and sharing information that can change attitudes and foster vaccine acceptance. The chart below lists key historical and current barriers experienced by population groups when seeking health care, including immunizations.

Population group	Historical and current barriers
Asian⁴	<ul style="list-style-type: none"> Westernized health care “norms” may be contrary to traditional health behaviors. This can result in the patient being labeled as noncompliant. Stereotyped as the “healthy model minority” but may have health problems providers overlooked. Provider may lack cultural competence.
Black⁵	<ul style="list-style-type: none"> Historical legacy of mistreatment at the hands of the medical profession, including unethical experiments. Distrust of doctors includes a lack of interpersonal and technical skill. Perceived quest for profit; expectations of racism and mistreatment during routine care.
Hispanic⁶	<ul style="list-style-type: none"> Long history of mistreatment at the hands of the medical profession, including forced sterilization. Poor patient/provider communication; medical information tends to be biased toward proficient English speakers. Immigration concerns.

Individual rights and religion also influence a parent’s decision to immunize

People in most cultures believe each person should protect their family and community by taking steps to avoid illness and making others sick. This can support vaccination.

However, parents may feel the pressure to be vaccinated pushes them to make decisions that are not in their child’s best interest. It may take a series of discussions to explore all of the parent’s concerns, such as personal choice, religious preferences, etc. As a medical provider, you can discuss limitations that might exist with vaccine schedules and any possible alternative vaccines (i.e., synthetic vaccines). You can also use the tips below when you talk with the parents.

Communication tips

Population group	Tips	Examples
Asian⁴	<ul style="list-style-type: none"> Partner with traditional (local health departments, immunization coalitions) and non-traditional partners (grocery stores, temples, parenting groups). Use a community ally to build credibility and trust. Educate on access to care and how to navigate the health care system. Provide vaccine information in the parent’s preferred language. 	<p>Host a shot clinic at an accessible community location.</p> <p>Make dual-language immunization reminder cards and immunization records for the most common languages spoken at your practice.</p>
Black⁷	<ul style="list-style-type: none"> Build trust and support through a community ally or agency (community organizations, faith-based groups, Black-owned businesses). Increase numbers of Black medical professionals. Address false information on social media by providing information (using clear and simple language) that is written for the Black community to improve vaccine confidence. 	<p>Offer flexible clinic hours with Black doctors and medical staff.</p> <p>Promote flexible clinic hours to faith-based communities.</p>
Hispanic⁸	<ul style="list-style-type: none"> Provide vaccine information in the parent’s preferred language. Stress that vaccines are safe and available regardless of immigration status. Partner with Hispanic-serving community-based groups that have good outreach to workers. 	<p>Make dual-language immunization reminder cards and immunization records for the most common languages spoken at your practice.</p> <p>Use promotores to help provide vaccines and educate the community.</p>

Questions?

For more information and resources, contact Cultural.and.Linguistic.Services@healthnet.com.

⁴Best Practice Toolkit: Immunization Education and Service-Delivery Initiatives for Asian American Communities. National Asian Women’s Health Organization, 2009.

⁵Understanding African Americans’ Views of the Trustworthiness of Physicians <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1924632/>.

⁶University of Michigan - Latinos and Science, Medical Distrust http://www.umich.edu/~ac213/student_projects06/smrm/Doctors_Sean.html.

⁷Addressing Justified Vaccine Hesitancy in the Black Community. www.ncbi.nlm.nih.gov/pmc/articles/PMC8009077/.

⁸We need to get more Latinx people vaccinated. Here’s how. www.aamc.org/news-insights/we-need-get-more-latinx-people-vaccinated-heres-how.