



HELPING PROVIDERS HAVE CONVERSATIONS WITH FAMILIES ABOUT COVID-19 VACCINE WEBINAR

December 13, 2021

Before We Start...

- All participants will be muted for the presentation.
- You may ask questions using the Q&A box, and questions will be answered at the end of the presentation.
- Continuing education is available for nurses, medical assistants, pharmacists, and pharmacy technicians attending the webinar or watching the recording. If you're watching in a group setting and wish to claim CE credit, please make sure you register for the webinar and complete the evaluation as an individual.
- You can find more information on our webinar page here:
www.doh.wa.gov/YouandYourFamily/Immunization/ImmunizationNews/ImmunizationTraining/HelpingProvidersHaveConversationswithFamiliesaroundCOVID19VaccinationWebinar

Continuing Education

- The planners and speakers of this activity have no relevant financial relationships with any commercial interests pertaining to this activity.
- Information about obtaining CEs will be available at the end of this webinar.

Continuing Education

- This continuing nursing education activity was approved by the Montana Nurses Association. MNA is accredited with distinction as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation. Upon successful completion of this activity, 1.0 contact hours will be awarded.
- This program has been granted prior approval by the American Association of Medical assistants (AAMA) for 1.0 administrative continuing education unit.
- This training was approved by the Washington State Pharmacy Quality Assurance Commission (PQAC) for pharmacist education. Upon successful completion of this activity, 1.0 credit hour of continuing education will be awarded.

COVID Vaccines for Kids – What Parents Need to Know

December 13, 2021



Gretchen LaSalle, MD FAAFP

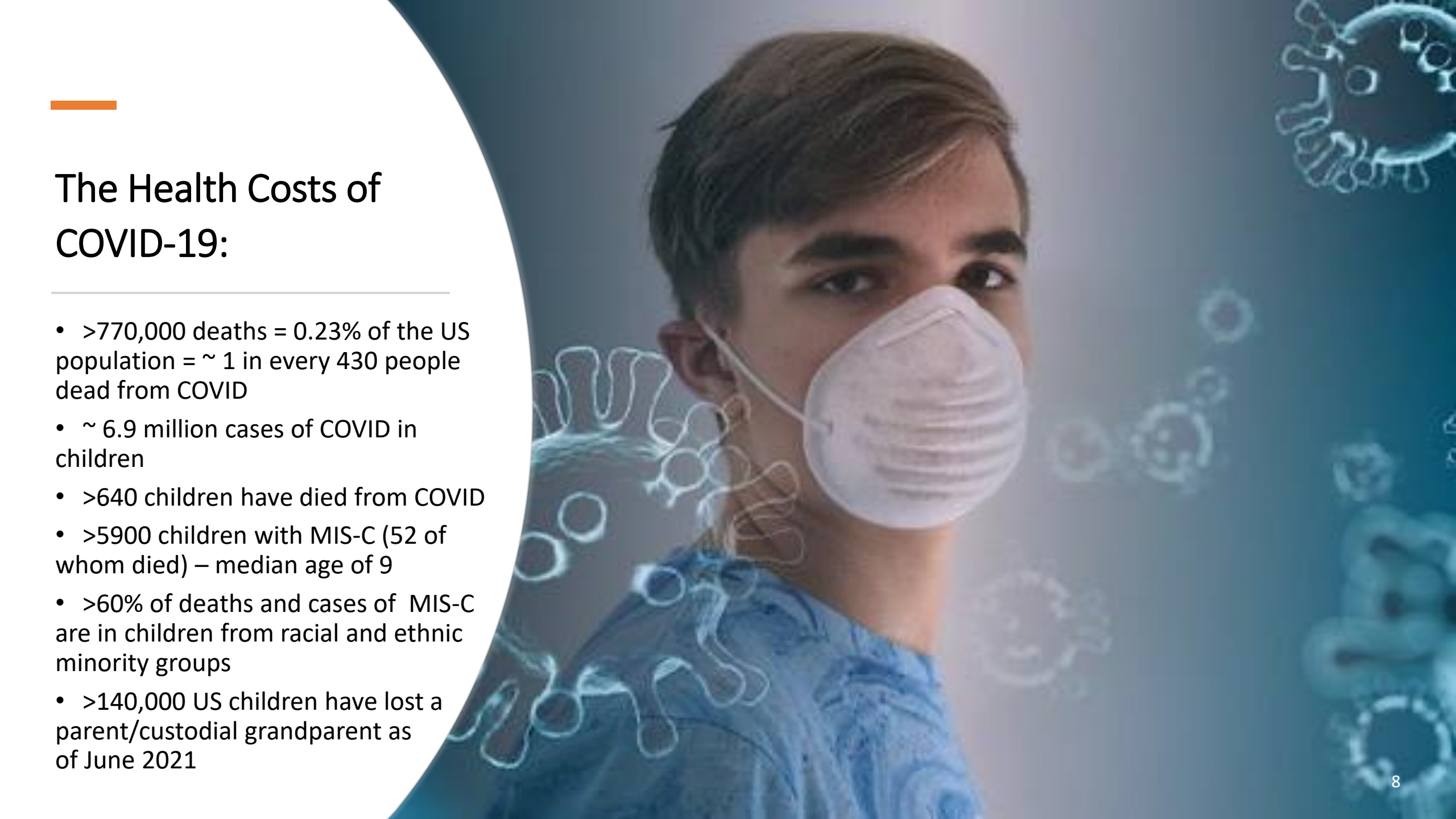
2020 AAFP Vaccine Science Fellow

Associate Clinical Professor, WSU Elson S. Floyd College of Medicine

Objectives

- Discuss the effects of COVID illness and the COVID pandemic on children
- Review effective approaches to the COVID vaccine discussion
- Discuss how the vaccine conversation may differ when working with patients from various racial/ethnic groups
- Learn responses to common misconceptions and parental concerns about the COVID vaccine for kids

While kids suffer fewer serious physical effects of SARS-CoV-2 infection, the Pandemic has been devastating for our children in many other ways



The Health Costs of COVID-19:

- >770,000 deaths = 0.23% of the US population = ~ 1 in every 430 people dead from COVID
- ~ 6.9 million cases of COVID in children
- >640 children have died from COVID
- >5900 children with MIS-C (52 of whom died) – median age of 9
- >60% of deaths and cases of MIS-C are in children from racial and ethnic minority groups
- >140,000 US children have lost a parent/custodial grandparent as of June 2021



The Financial Costs of COVID-19:

- Nearly 1 in 8 adults with children reported lack of sufficient food during the pandemic
- 1 in 5 renters with children were not able to pay rent during the pandemic
- 24.1 million people (including 6.3 million children) live in households affected by unemployment

The Social, Emotional and Academic Costs of COVID-19 in Children

- 1 in 4 children now suffer from depression
- 1 in 5 children now struggle with anxiety
- Negative effects on academic growth in K-12 students – behind in math/reading
- Widening of pre-existing academic disparities
- Increased risk of violence/abuse

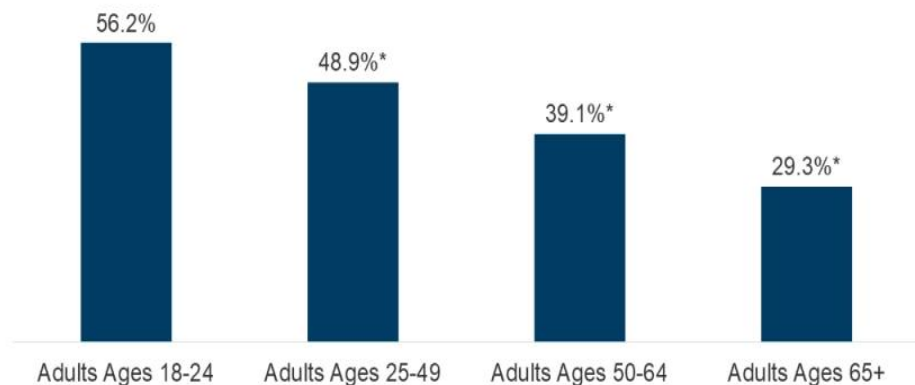


And because kids don't exist in a vacuum...

Effects of COVID-19 on Mental Health and Substance Use in Adults – by age and essential worker status

Figure 3

Share of Adults Reporting Symptoms of Anxiety and/or Depressive Disorder During the COVID-19 Pandemic, by Age

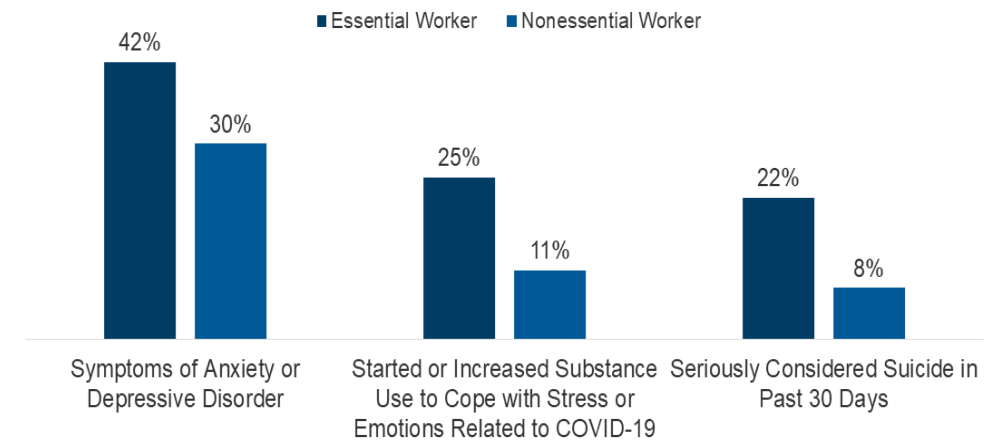


NOTES: *Indicates a statistically significant difference between adults ages 18-24. Data shown includes adults, ages 18+, with symptoms of anxiety and/or depressive disorder that generally occur more than half the days or nearly every day. Data shown is for December 9 – 21, 2020.
SOURCE: U.S. Census Bureau, Household Pulse Survey, 2020.



Figure 8

Among Essential and Nonessential Workers, Share of Adults Reporting Mental Distress and Substance Use, June 2020



NOTES: Data is among adults ages 18 and above. Essential worker status was self-reported.
SOURCE: Czeisler ME, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049–1057. DOI: <http://dx.doi.org/10.15585/mmwr.mm6932a1>



Vaccination is the key to ending pandemic suffering

How do we convince those that are still unconvinced?

Total Vaccine Doses

Delivered 580,893,145

Administered 466,348,132

Learn more about the [distribution of vaccines](#).

198.2M

People fully vaccinated

44.0M

People received a booster dose**

At
Least
One
Dose

Fully
Vaccinated

Booster
Doses***

Fully
Vaccinated*
People

Count

Percent of
US
Population

Total

198,211,641

59.7%

Population
≥ 5 Years of
Age

198,202,157

63.5%

Population
≥ 12 Years
of Age

197,384,435

69.6%

Population
≥ 18 Years
of Age

184,332,834

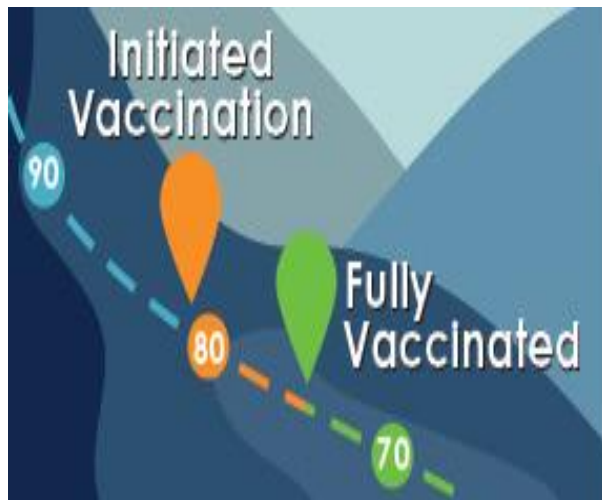
71.4%

Population
≥ 65 Years
of Age

47,385,496

86.5%

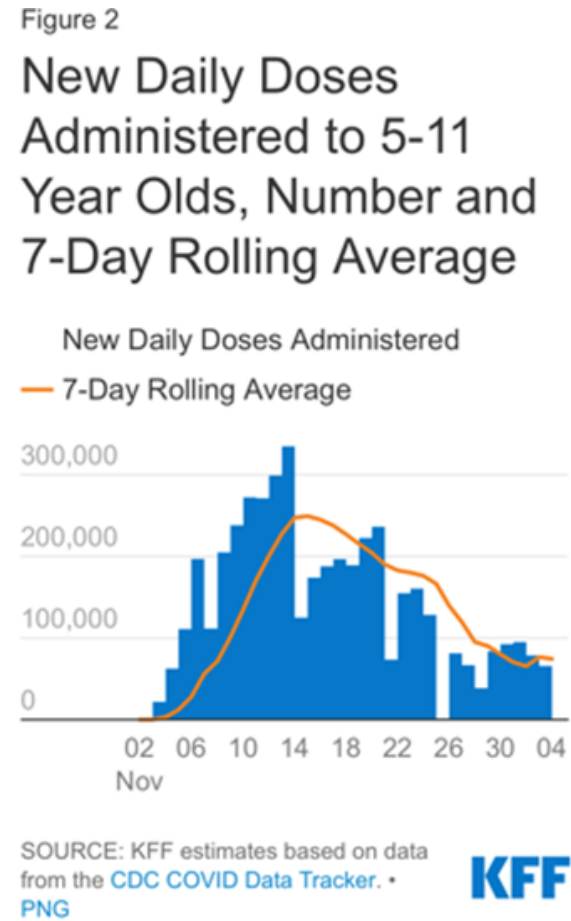
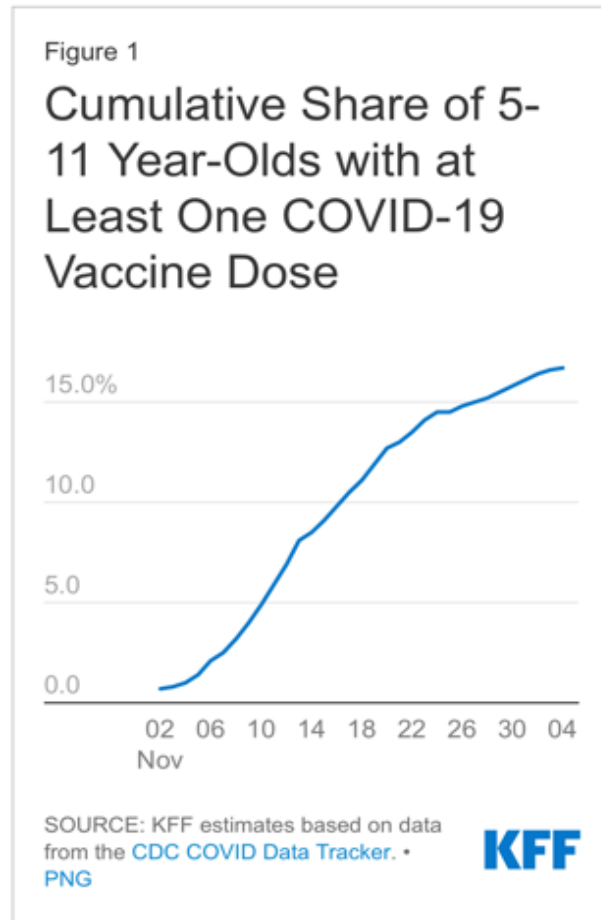
Status of COVID-19 Vaccination in Washington State



As of November 29, **80.8%*** of the population 12 and up has **received at least one dose** and **74.6%*** is **fully vaccinated**.

*This percent includes aggregate data from the Department of Defense and Department of Veterans Affairs and is higher than the DOH data dashboard.

How are we doing with vaccinating our 5–11-year-olds? (as of 12/5/21)



Before you enter into a
vaccine conversation

Remember...

- **Make no assumptions**
- Maintain an open & inviting posture
- Acknowledge the spectrum of vaccine acceptance
- Recognize that people are just trying to make the best decisions they can with the information they've been given
 - Sometimes they are using misguided information
- Approach with empathy and an attempt to understand
 - With all the information that is out there, discerning the truth can be difficult

Remember...

- Make no assumptions
- **Maintain an open & inviting posture**
- Acknowledge the spectrum of vaccine acceptance
- Recognize that people are just trying to make the best decisions they can with the information they've been given
 - Sometimes they are using misguided information
- Approach with empathy and an attempt to understand
 - With all the information that is out there, discerning the truth can be difficult

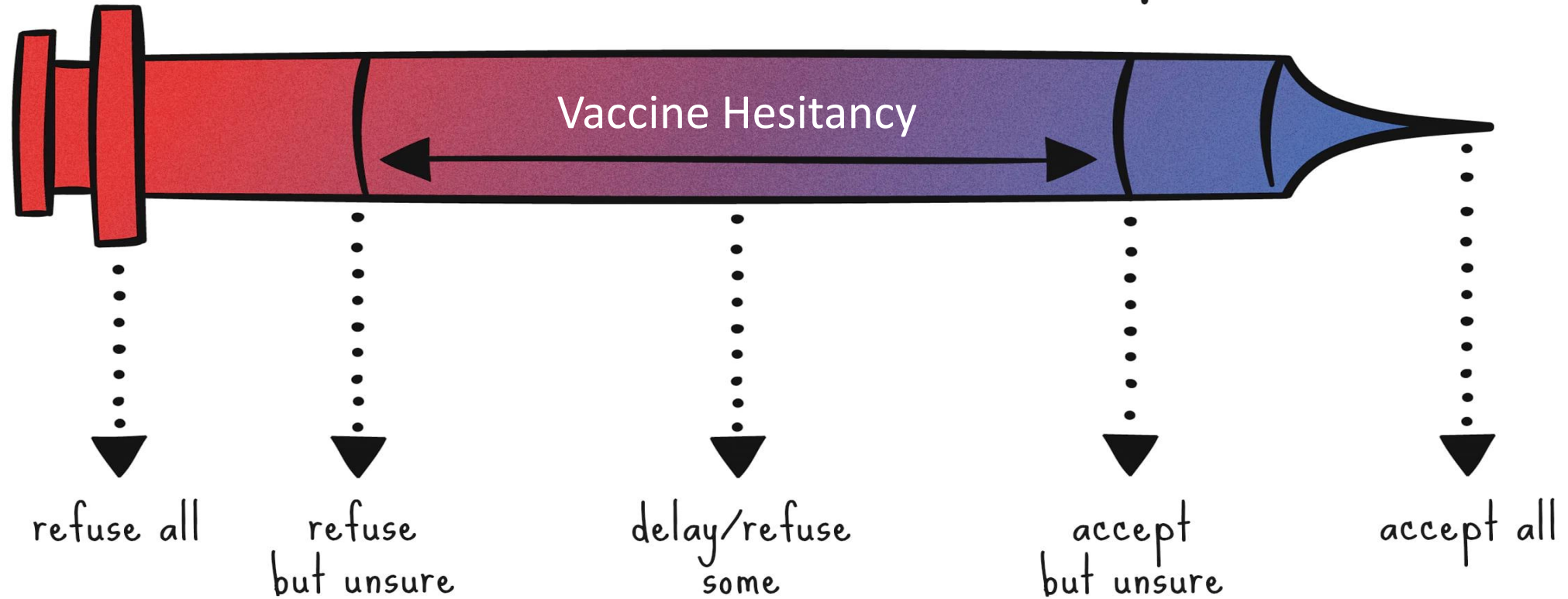
Maintain an open & inviting posture



Remember...

- Make no assumptions
- Maintain an open & inviting posture
- **Acknowledge the spectrum of vaccine acceptance**
- Recognize that people are just trying to make the best decisions they can with the information they've been given
 - Sometimes they are using misguided information
- Approach with empathy and an attempt to understand
 - With all the information that is out there, discerning the truth can be difficult

Continuum of Vaccine Acceptance



Remember...

- Make no assumptions
- Maintain an open & inviting posture
- Acknowledge the spectrum of vaccine acceptance
- **Recognize that people are just trying to make the best decisions they can with the information they've been given**
 - Sometimes they are using misguided information
- Approach with empathy and an attempt to understand
 - With all the information that is out there, discerning the truth can be difficult

Remember...

- Make no assumptions
- Maintain an open & inviting posture
- Acknowledge the spectrum of vaccine acceptance
- Recognize that people are just trying to make the best decisions they can with the information they've been given
 - Sometimes they are using misguided information
- **Approach with empathy and an attempt to understand**
 - With all the information that is out there, discerning the truth can be difficult

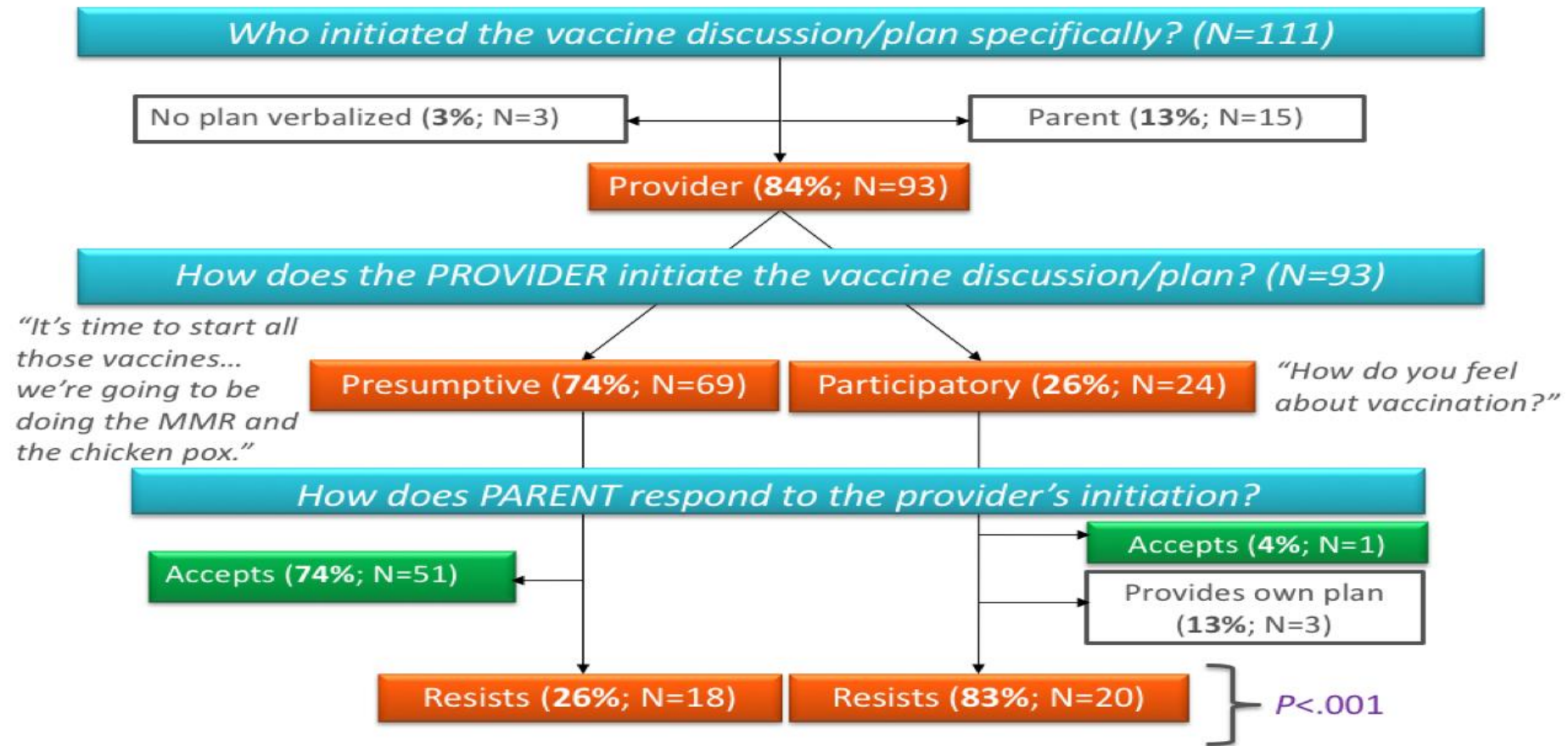
Proven Approaches to the Vaccine Discussion



- Use the Presumptive Approach
- Bundle your recommendations
- Use motivational interviewing techniques
- Make it personal
- Practice persistence
- Be patient

Presumptive vs Participatory Approach

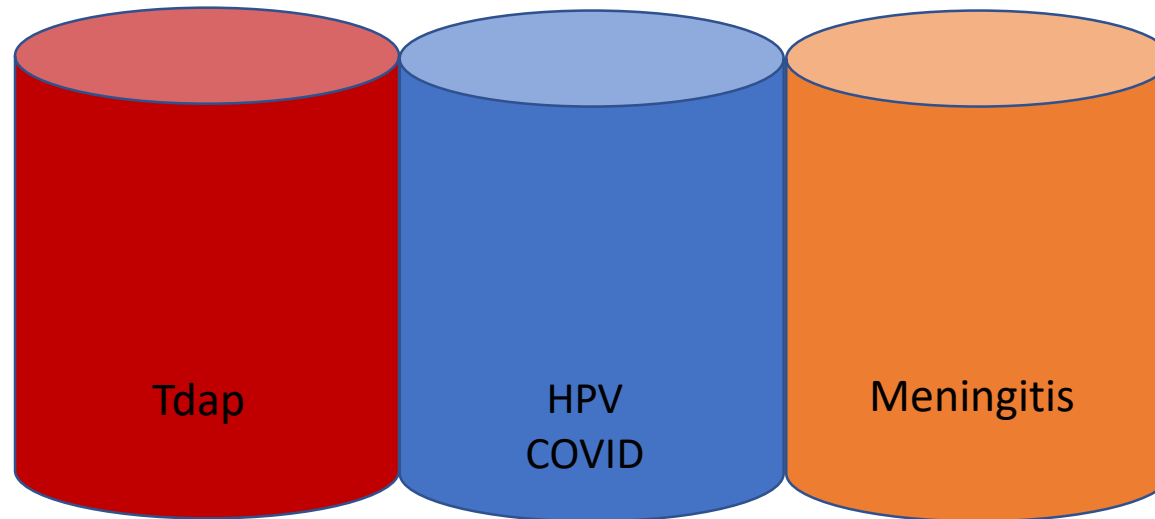
- Presumptive approach – presumes that the patient/parent is going to go along with recommendations.
 - “It’s flu season so we’ll get you your flu shot before you go.”
- Participatory approach – invites the patient/parent to guide the decision making.
 - “It’s flu season. What do you want to do about a flu shot?”



How might this be different for a COVID vaccine discussion?

- More a question than a statement?
 - “We don’t have your COVID vaccine information in the chart yet. Do you have your vaccine card with you?”
- It depends on whether you’re dealing with someone who is already eligible or who is newly eligible for a vaccine
 - “COVID vaccines are finally available for our younger kids! Let’s get the vaccine for Jacob before you go.”

Bundling Your Recommendations



- Also called... discussing vaccines in the “same way on the same day”
- Particularly helpful for vaccines that are harder to convince people to get
- Would not have been possible with COVID vaccines earlier on - thankfully, that has changed!

The Bundled vs Unbundled Approach

- Bundled:
 - “You’re due for your Tdap, COVID, HPV cancers, and Meningitis vaccines. If you haven’t already had these done elsewhere, we’ll get those for you before you go.”
- Unbundled:
 - “You’re due for your Tdap and Meningitis vaccines. We also have the COVID and HPV vaccines to offer.”

Motivational interviewing techniques

- Different frameworks to accomplish the same task
 - Clarify concerns
 - Validate feelings
 - Provide confidence in your expertise
 - Refute myths
 - Offer a **strong recommendation**

3As

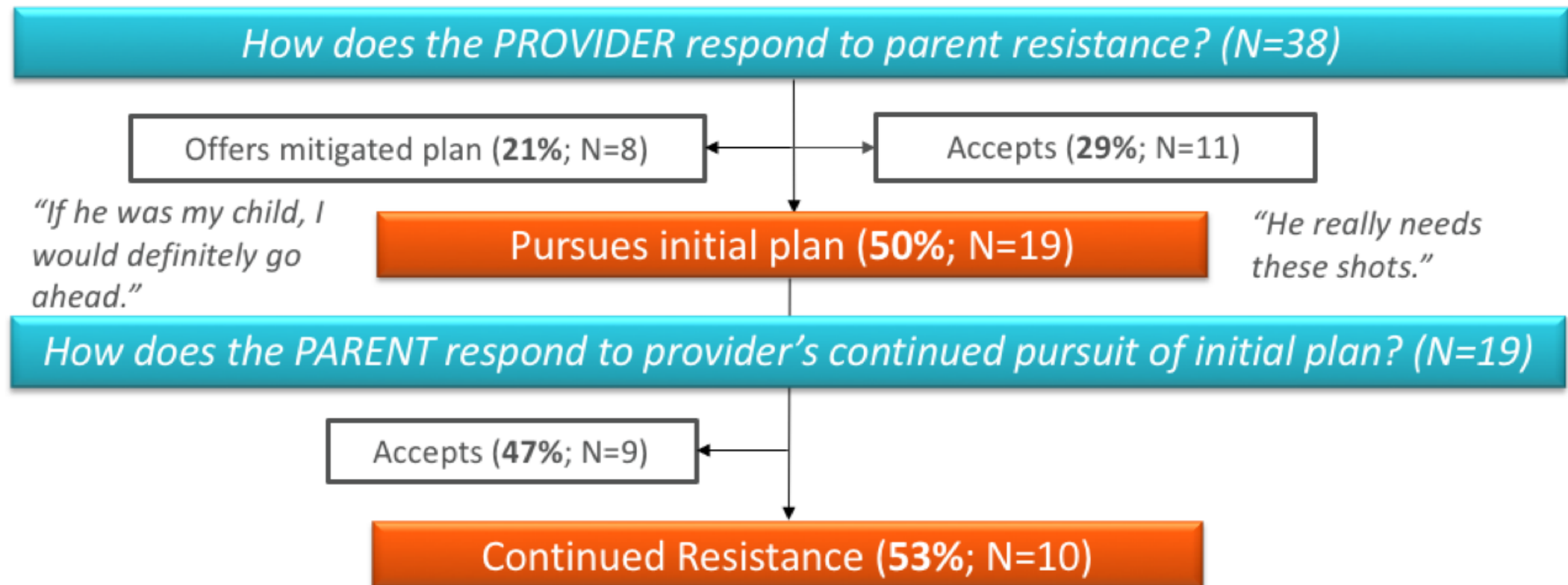
Approach to Motivational Interviewing

- **Ask:** Don't just stop with a "no" response. Dig deeper.
 - "Tell me what worries you about the COVID vaccines. What are you hearing?"
- **Acknowledge:** restate the concern and acknowledge its importance.
 - "If I understand you correctly, you are worried about.... Is that correct?"
 - "I can see why that would concern you. If that were true, I wouldn't want you getting the vaccine either. **May I share with you** what I know about that concern?"
- **Advise:** share the facts about their concern and offer a strong recommendation.
 - "Researchers have looked at this question and find no evidence that it is true. In fact, the risk of this from the COVID infection itself is significantly greater than the very rare risks of the vaccines. That is why I took the vaccine myself, gave it to my family, and **strongly recommend** it for all of my patients."

Make It Personal

- Let patients know that you vaccinate yourself and your family
- Tie recommendations to something personal in the patient's life
- Use real-life anecdotes to discuss harm from vaccine-preventable disease

Practice Persistence

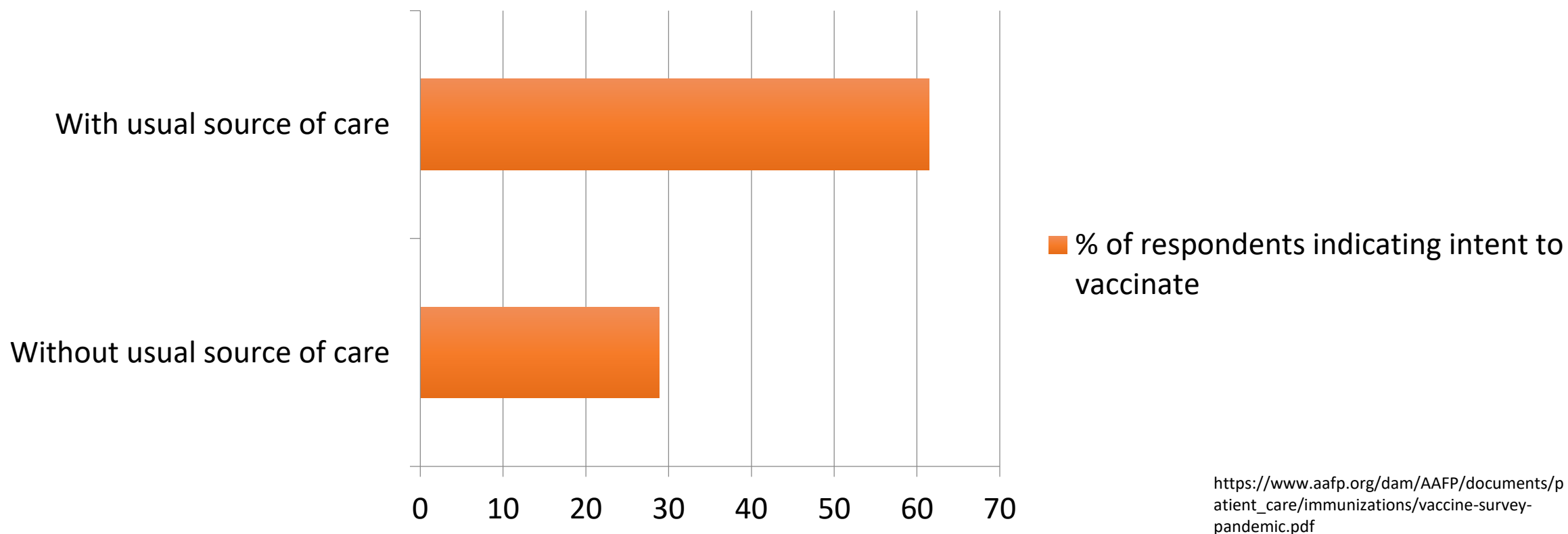


Be Patient

- It's a marathon, not a sprint (sort of)
 - It takes time to develop trust
 - Some people will want time to review more information
 - Experiences may affect patients' choices
 - Children will grow up hearing your pro-vaccine message

Your Vaccine Recommendation Matters

Intent to vaccinate against COVID-19 in those with and without a usual source of care



https://www.aafp.org/dam/AAFP/documents/patient_care/immunizations/vaccine-survey-pandemic.pdf



Anisa Ibrahim, MD FAAP

Clinical Associate Professor of Pediatrics, University of Washington

Medical Director , Harborview Pediatric Clinic

Combating Common Myths about Covid Vaccine in Children

Combating misinformation about covid vaccine is very important to Pediatricians and health advocates

Its important to know which myths are out there in order to address these concerns

Create safe spaces for parents to bring up concerns and approach each interaction with compassion and understanding



Myth: Covid-19 Vaccine Was Rushed

Covid-19 vaccine is safe and effective for children

Technology used to create the vaccine has been studied for decades

All safety and regulatory processes were followed, none were rushed



Myth: Children do not get sick from Covid-19 and therefore do not need the vaccine

- Although pediatrics cases are less severe than adult, children can contract and become ill from Covid 19
- More children have been getting hospitalized with severe infection from the Delta variant, now the dominant variant
- Pediatric Multisystem Inflammatory Syndrome is a covid related condition and is life threatening
- We are still learning about covid and do not know long effects and its impacts on health



Myth: Covid-19 Vaccine Impacts Fertility

- There is NO evidence that Covid-19 vaccine affects fertility
- Many people have become pregnant after receiving Covid-19 vaccines

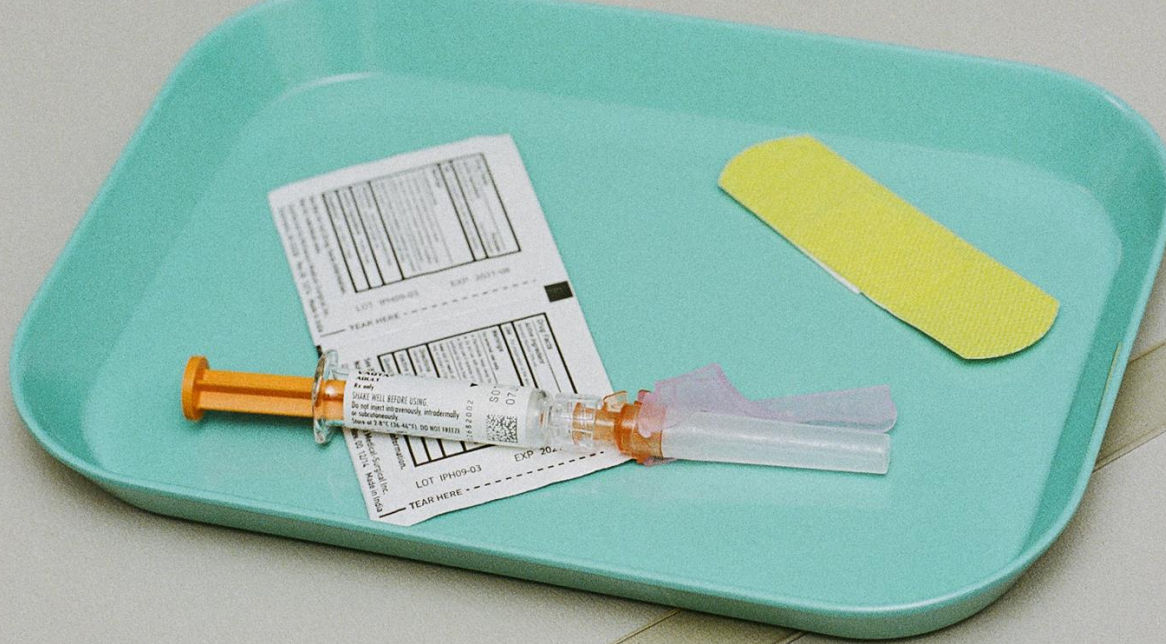
Myth: Covid-19 Vaccine Will Alter My Child's DNA

Big concern for some families: explain the science

Covid-19 vaccine does not target DNA and therefore can not alter it

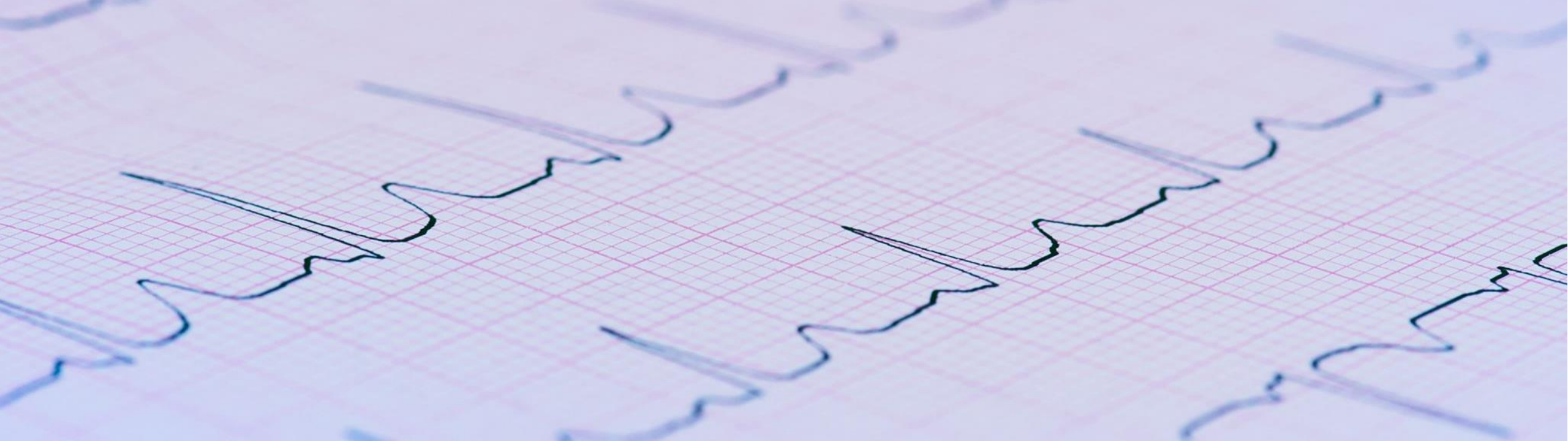
Pfizer vaccine is made with mRNA technology, mRNA instructs your body to make protective proteins, it does not interact with DNA

Your body breaks down and eliminates mRNA once it receives the instructions



Concern: We do not know enough about long-term side effects

- Vaccine safety studies for all vaccines have shown us that side effects, including rare side effects, occur within 6-8 weeks
- We have over one year of covid vaccine safety data now with over
- Now have over 200 million fully vaccinated people in the US
- Covid vaccine is safe and we continue to have strong monitoring systems in place



Concern: The Covid-19 Vaccine will cause myocarditis

- Myocarditis can occur but is rare
- Majority recovered with little or no treatment and rest
- There were no reports of myocarditis in the clinical trials with more than 3000 children
- Risk of myocarditis from Covid-19 infection is much higher

Cross Cultural Considerations

Vaccine misinformation is rampant in diverse communities as well and this is further compounded by several issues including

- lack of trust in medical community (with reason)
- lack of language access
- lack of outreach into communities
- lack of access to scientifically sound medical information
- systemic and institutional racism and discrimination



Lack of Trust in Medical Community

- Acknowledge that harm has been caused by the medical profession to communities of color and specifically the Black community in the past
- Allow space to discuss concerns
- You are likely a trusted person, give a strong recommendation and be transparent about what we know and do not know

Creating a safe environment

After making a strong recommendation, be ready to answer any questions

“I know you want to do what is best for your child, are there any questions I can answer for you”

Create opportunities for ongoing discussion- use every opportunity to offer vaccines

Let the family know that you will be here to support them, even if they decide against getting the vaccine today



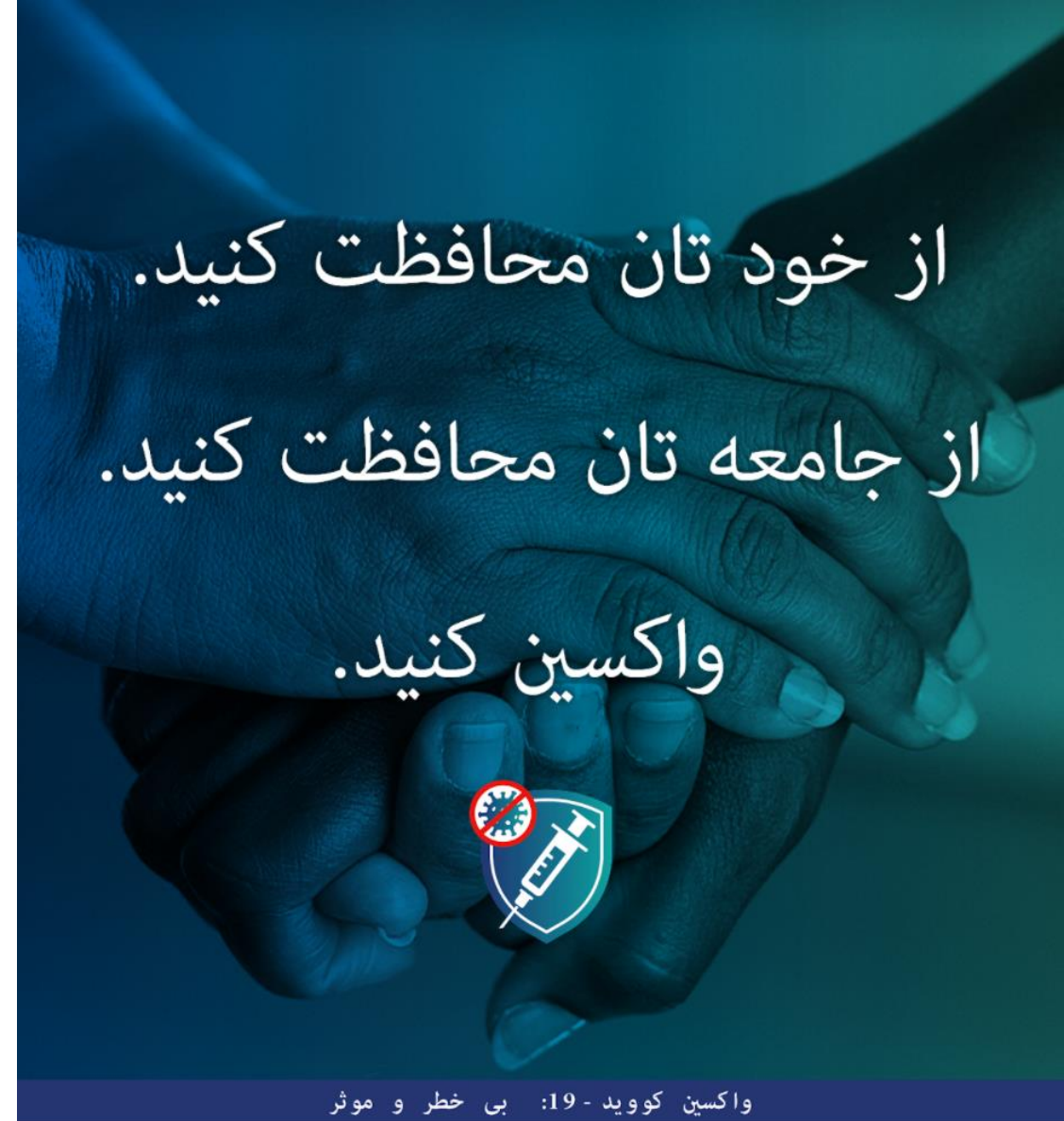
Language Access

Language inclusion is important and should not be an afterthought

All materials should be translated, there are great resources out there!

Many communities prefer to receive information via conversation, video as opposed to written information

Always consider literacy, be intentional about having or creating audio and video in a variety of languages





Outreach into Communities

Always think about the

- Messenger
- Message
- Modality

Obtaining Continuing Education

- Continuing education is available for nurses, medical assistants, pharmacists and pharmacy techs.
- Expiration date is 3/14/22
- Successful completion of this continuing education activity includes the following:
 - Attending the entire live webinar or watching the webinar recording
 - Completing the evaluation available after the webinar or webinar recording
 - **On the evaluation, please check Yes if you're interested in CEs and please specify which type of CE you wish to obtain**
- **Please note:** CE certificates are NOT generated after evaluation completion—CE certificates will be sent by DOH via email within a few weeks after evaluation completion.
- If you have any questions about CEs, contact Trang Kuss at trang.kuss@doh.wa.gov.

Questions?



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.