Invoking Empathy to Reduce Vaccination Exemptions

Letter from Lindsay Diamond, Ph.D.

“We stopped vaccinating. Our doctors were good - very good. They never coerced, they didn’t criticize, they just said, over and over, things to the effect of, ‘I disagree with your decision, and want you to consider all of the risks you’re taking.’ Visit after visit, they tried, gently and sometimes firmly. They reminded us that their own young children were vaccinated. They increased the pressure a little, and they kept trying. They gave us studies. They showed us pictures.”

This is a poignant response to a Reddit discussion entitled, “Ex Anti-Vaxxers, what changed your mind? [Serious].” When I saw this comment, I was immediately taken with how this response perfectly mirrored the response from my child’s pediatrician when I inquired whether she had ever transitioned a family from vaccine-hesitant to fully vaccinated. She reflected on a particular family in her practice and believed through kindness, patience, and persistence, she was able to convince the parents to give their children all of the recommended immunizations.

As we uncover stories from parents who transition away from vaccine hesitancy, common themes emerge. These parents look for arguments from people who share their identity, they look for empathy from someone with whom they share a personal connection, and they look for advice from doctors. In many cases, medical providers can serve all of these roles. Of course, providers have to fit that into an ever-shortening appointment time with an ever-increasing list of objectives. So, how do we accomplish this?

We work together. In 2015, I co-founded a local non-profit, Community Immunity, with Karli Carston. Our hypothesis was that prenatal vaccine education is insufficient. When exhausted and overwhelmed parents suddenly face the decision of whether or not to vaccinate at birth, the loudest voices of family members, friends, and neighbors win. The intense desire to protect this new life comes to conflict with any lingering fears or concerns.

In 2016, Community Immunity partnered with Boulder County Public Health to conduct focus groups with local parents. Nearly all parents who participated in the focus groups regretted not having more opportunities to discuss immunizations with their doctors during their prenatal care. In fairness, infant immunization does not typically fall under the purview of obstetrics, so it is entirely reasonable that the conversations around vaccines during prenatal care are often limited to relevant adult immunizations.

We would like to collaborate with local health care providers to brainstorm ways we can improve access to reliable, evidence-based

Tips to Keep Patients and Health care Personnel Safe from Measles

As of May 10, 2019, 839 cases of measles have been reported in 23 states this year. This is the greatest number of cases reported in the U.S. since measles was eliminated in 2000.

So far this year, one measles case has been reported in Colorado. As of May 13, 2019, no additional cases have been reported; however, given the ongoing measles outbreaks worldwide, it is very likely there will be additional measles cases in Colorado this year.

Follow the measures below to keep patients and health care personnel safe from measles:

- **Think measles.** Ask patients with clinical symptoms compatible with measles (e.g. generalized maculopapular rash and fever, especially if accompanied by cough, coryza, or conjunctivitis), about recent travel, and verify their vaccination status.

- **Isolate suspect measles patients immediately.** To minimize additional exposures, move any patient suspected of having measles from waiting areas as soon as they are identified.

- **Know your county resources.** To ensure a prompt public health response, including guidance on testing, report suspect cases to Boulder County Public Health at 303-413-7523 (or 303-413-7517 after hours).

- **Ensure that all patients are up-to-date on MMR vaccine.** Remember, your strong recommendation is critical for vaccine acceptance. Visit https://www.cdc.gov/vaccines/vpd/mmr/public/index.html to review current MMR recommendations.

- **Ensure that all health care personnel is protected.** All health care personnel should have presumptive evidence of measles immunity documented and on file at their work locations.

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The Community Counts on You!

There is always the potential for extended, widespread medical events like epidemics and pandemics; exposures to biohazards or radiation that require long-term prophylaxis and monitoring; or trauma that impacts mental health. When events like these happen, providers like you - sometimes referred to as the existing medical infrastructure - are key to caring for the community.

While public health and health care coalitions (HCC) will respond and provide guidance, we will return the care of patients back to you as soon as possible. We tested this approach with H1N1, relying on providers to provide vaccine to their own patients instead of holding public clinics like many other communities did. This model works best because it allows one-on-one patient care from a provider who knows them, can assess their medical history, and can provide the most appropriate care.

Over the next year or so, you can expect your practice’s HCC representative to request your participation in drills or exercises that prepare you to respond to a range of incidents. Please say “yes.” If you want more information about how to get involved, contact Boulder County Public Health at 303-413-7500 or healthinfo@bouldercounty.org.

Public Health Agencies Continue Efforts to Curb Hepatitis A Outbreak

The outbreak of hepatitis A in Colorado continues to affect people experiencing homelessness, people with substance use issues, and people who are incarcerated in city and county jails. Between October 2018 and May 8, 2019, 57 people in 4 counties have been identified as part of the outbreak. Local public health agencies across the state have provided nearly 6,000 hepatitis A vaccinations to at-risk populations and have put in countless hours providing education in an ongoing effort to mitigate the outbreak. Since December 2017, Boulder County Public Health has provided free hepatitis A vaccinations in settings serving people experiencing homelessness; in April 2019, efforts were expanded to the Boulder County Jail. To date, staff has conducted 17 free Hepatitis A clinics and provided over 300 vaccines to people in high-risk groups or people serving high-risk groups.

You can help to slow this outbreak by encouraging hepatitis A vaccine for anyone at increased risk for infection, including anyone experiencing homelessness, those who report substance use issues, and anyone who has recently been incarcerated. For additional information about this outbreak, visit www.colorado.gov/pacific/cdphe/hepa; click on “Colorado Hepatitis A Outbreak Report.”

Submitted by: Kaylan Stinson, Regional Epidemiologist, kstinson@bouldercounty.org and Betty Tovar, Public Health Nurse, btovar@bouldercounty.org

Submitted by Lindsay Diamond, Community Immunity, lindsay@coimmunity.org

• Stay up to date. To support health care providers during the current outbreak, the CDC has developed a digital Measles Outbreak Toolkit for Healthcare Providers, available at www.cdc.gov/measles/toolkit/healthcare-providers.html.

Submitted by Kaylan Stinson, Epidemiologist, kstinson@bouldercounty.org

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