

CIC 2018 CCI | December 4-6
4 - 6 décembre
OTTAWA

Exploring parents' reactions to emotional and non-emotional measles vaccination promotion messages: a qualitative analysis

By Alexandra Paradis
and

Ève Dubé, Dominique Gagnon, Josh Greenberg, Ryan Maier, Chantal Sauvageau, Maryline Vivion and Michelle Driedger

Funded by CIRN

Disclosure Statement

- I have no affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.

Context

- Vaccine-hesitant parents: which type of message?
- Narrative communication: telling a story
- Objective:
Explore how parents with diverse vaccination attitudes perceive four stories with varying characteristics:
 - Character (doctor vs. mother)
 - Emotionality (emotional vs. non-emotional)

Intervention

Mother

Doctor

Emotional

**Mother changes
anti-vaccine stance
after four-year-old
son battles measles**



Non-emotional



Intervention

Mother

Doctor

Emotional



**‘Part of me will always blame myself’:
Pediatrician promotes immunization after patient is hospitalized with measles**

Non-emotional



Intervention

Mother

Doctor

Emotional



Non-emotional

‘Vaccines Work!’ New campaign takes factual approach to encourage vaccination



Intervention

Mother

Doctor

Emotional



Non-emotional



A bad case of misinformation: Doctors work to debunk myths around measles vaccine

Data collection and analysis

- Participants: parents of children ≤ 2 yrs old
- 4 focus groups : Winnipeg and Quebec City
- Attitude to vaccination classification:

Favorable / Hesitant / Unfavorable

(V-F)

(V-H)

(V-U)

- Perception of each story: content analysis

Results

Participants characteristics

- 7♂ + 21♀ = 28 participants
- Highly educated sample in general
- Vaccination attitude

Vaccine-favorable (V-F)	20
Vaccine-hesitant (V-H)	7
Vaccine-unfavorable (V-U)	1

Mother-emotional story

Title : **Mother changes anti-vaccine stance after four-year-old son battles measles**

- Positive reactions in general
 - Relatable and touching
- Favourite story of
 - ≈ Half the **V-F** parents
 - The **V-U** mother
- The **V-H** parents: just an anecdote
- 1 **V-F** and 1 **V-H** parent: manipulative

They're just stories. I think I'd still want to back it up with my own research and make my decision based on what I find, so...
(**V-H** mother)

Doctor-emotional story

Title: **‘Part of me will always blame myself’: Pediatrician promotes immunization after patient is hospitalized with measles**

- Negative reactions in general
 - Overdramatic
 - Blames the parents who don’t vaccinate
- Favourite story of
 - Small minority of parents

That’s a guilt-trip on paper.

(V-F mother)

Non-emotional mother story

Title: **‘Vaccines Work!’ New campaign takes factual approach to encourage vaccination**

- Negative reactions in general
 - Distracted by details
 - Don't care for this mother's opinion
- Favourite story of
 - No one

It's practically a woman from the street corner.
(V-F father)

Non-emotional doctor story

Title: **A bad case of misinformation: Doctors work to debunk myths around measles vaccine**

- Positive reactions in general
 - Informative and more neutral
- Favourite story of
 - majority of **V-H** parents
 - many **V-F** parents
- Disliked by the **V-U** mother

I like this story. I don't feel like it's telling me 'Vaccinate your kid'. I feel like it's saying 'Measles exists. People have forgotten what it does. [...]

There is a vaccination campaign. From there on, make your decision, go inform yourself'.

(**V-H** father)

Summary and Conclusion

- Preferences according to vaccination attitude

V-F	V-H	V-U
-Emotional mother -Non-emotional doctor	Non-emotional doctor	Emotional mother

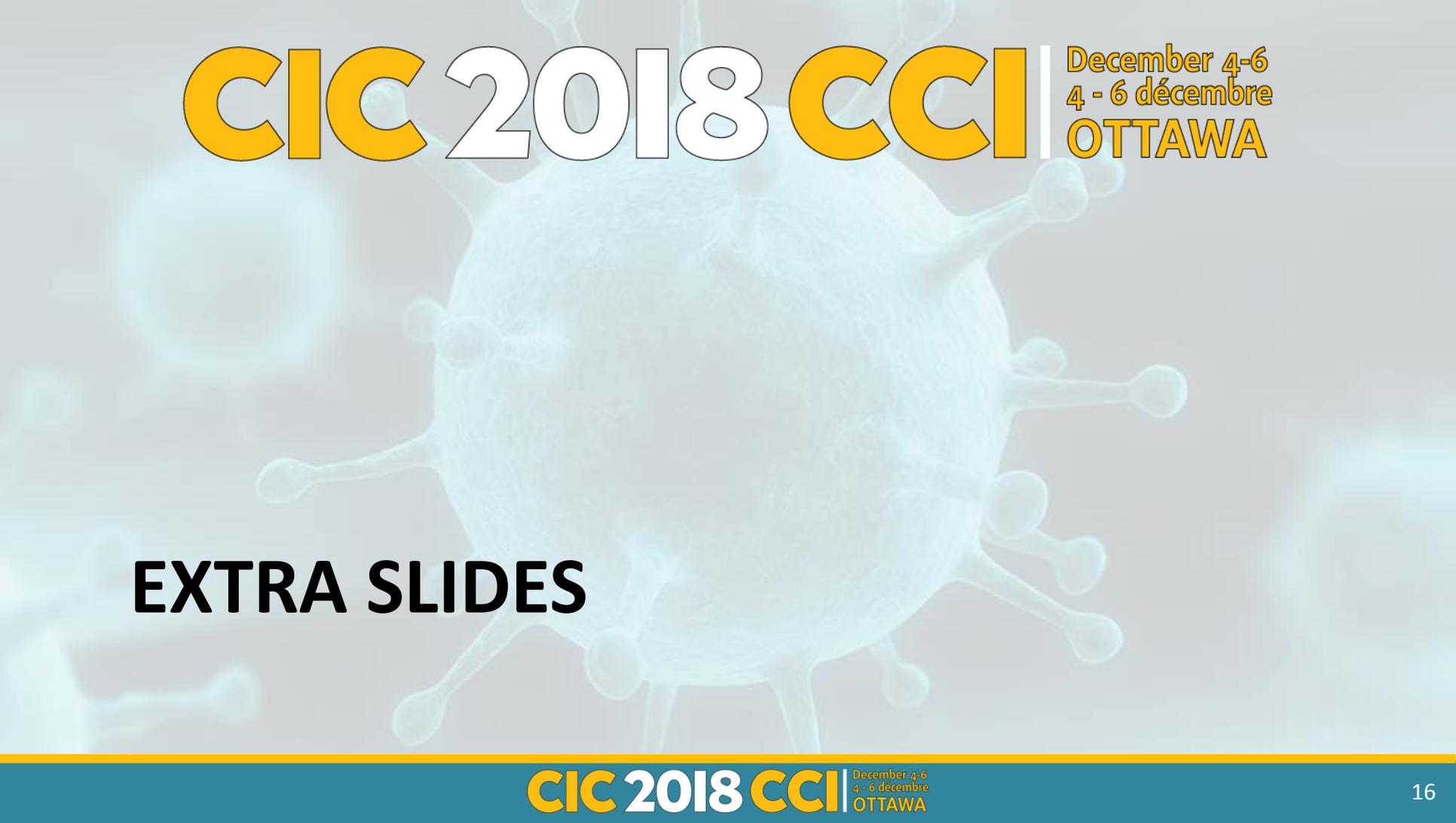
- Narratives may have their place in vaccination promotion
- Further investigation needed
- Importance of pre-testing your communications

CIC 2018 CCI

December 4-6
4 - 6 décembre
OTTAWA

December 6, 11:00 to 12:30 session:
TAKING ON THE CHALLENGE OF
VACCINE HESITANCY -
INTERVENTIONS AT THE PRACTICE
AND POPULATION LEVEL

THANK YOU FOR YOUR ATTENTION

The background of the slide features a large, detailed illustration of a virus particle, likely a coronavirus, rendered in a light blue, semi-transparent style. The virus has a spherical body with a textured surface and several prominent, spike-like protrusions extending from its surface. The overall aesthetic is clean and scientific.

CIC 2018 CCI

December 4-6
4 - 6 décembre
OTTAWA

EXTRA SLIDES

Vaccine attitude classification

- 1- From the literature, determine characteristics associated with similar vaccination attitude categories (favorable, unfavorable, hesitant)
- 2- Analyse verbatim to highlight those characteristics and make a first classification
- 3- Compare results to Parental Attitudes about Childhood vaccination (PACV) (results 25-50 : possible hesitation; results >50: clear hesitancy or unfavorable attitude)
 - If differences between verbatim and PACV, reconsider classification
- 4- Revise classification with other researcher until consensus

Modifications made to the stories

- Harmonization in the way informations about measles communication were given
- For doctor-emotional story:
 - Less dramatic wording
- For non-emotional mother story:
 - More details given about the mother's experience

Guilt-inducing excerpt of emotional-doctor story

He's diagnosed babies with Leukemia, found toddlers with heart defects, and told budding athletes they may never walk again.

But [Doctor Avery] said the day he told Caroline Willis that her son had measles still haunts him.

“As a doctor, you're used to delivering a diagnosis and saying something like, ‘This isn't your fault,’ or ‘Kids have accidents, it happens. It's normal,’” Avery explained. “But with Branden, with measles, that was preventable. Branden wouldn't have been hospitalized had he been vaccinated.”