

Parental Vaccine Hesitancy and Available Online Vaccine Information

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Background

- Rates of recommended childhood vaccinations in the US are declining
- In Kansas, the percentage of children entering kindergarten on the recommended vaccination schedule was 66% in 2014
- To understand this trend, online vaccine websites were analyzed for credibility and a parent survey was developed

Methods

- Online Data Analysis: websites with vaccine information were scored for credibility using 5 criteria for websites by Cornell University
- Cross-Sectional Survey: developed by interprofessional team of faculty and students based on the Parent Attitudes about Childhood Vaccine Survey
- Setting: convenience sample of women in Sedgwick County, Spring 2016
- Statistical Analysis: data examined using descriptive statistics

Results

Table 1. Online Vaccine Website Credibility

	Frequency	Percent
Website Credible	27	41.5
Website Non-Credible	38	58.5
Total	65	100.0

Cross-Sectional Survey

- N=163 women (with children under 10 years of age); 20% Hispanic (n=30)
- Average family size of 2 children (n=54, 37%)
- Most earning \$30-\$50,000 (n=40, 25%)
- Type of insurance:
 - Medicaid (n=27) = 18%
 - Private (n=106) = 72%
 - Tri-care (n=15) = 10%
- Frequent vaccine informational sources:
 - Primary Care Provider=45%;
 - Internet=29%; Friends/Family=14%
- Most agreed vaccines necessary for safety of general population (n=130) = 88%

Table 2. Parent Attitudes about Childhood Vaccines by Insurance Type

	Medicaid	Private	Tri-Care
Vaccines cause harm	27%	35%	27%
Following schedule	96%	91%	93%
Satisfied w/schedule	85%	76%	87%
Consider vaccines safe	82%	77%	80%

Discussion

- The majority (60%) of websites reviewed were rated as non-credible sources of vaccine information
 - Most women reported primary care provider and the internet as the most frequent sources of information
- Women with Medicaid were more likely to follow recommended vaccine schedule, consider vaccines safer, and less likely to report vaccines cause harm
- Income and ethnicity were representative of Sedgwick County demographics but sample was limited due lack of randomization

Conclusions

- Results highlight the need to target future vaccine health promotions to private insured populations to address the decreasing adherence to recommended schedules
- **Public Health Advocacy Action**: an increased volume and more frequent online public health presence is urgently needed related to vaccine safety