



ASSOCIATION OF IMMUNIZATION MANAGERS

May 6, 2015

Bruce Gellin, MD, MPH
Deputy Assistant Secretary for Health
Director, National Vaccine Program Office
U.S. Department of Health and Human Services
200 Independence Avenue SW, Room 715H
Washington, DC 20201

Dear Dr. Gellin:

The Association of Immunization Managers (AIM), representing the 64 federally-funded state, local and territorial immunization programs, appreciates this opportunity to comment on the HHS National Vaccine Program Office's (NVPO) Draft Report and Recommendations for Consideration for Addressing the State of Vaccine Confidence in the United States.

Immunization program managers play an important role in the nation's highly successful childhood immunization efforts. High immunization coverage rates in children have prevented millions of infections and saved countless lives. However, the rise of vaccine hesitancy -- exemptions from state vaccination requirements and delays in children receiving ACIP recommended vaccines -- threatens the public health gains made through high immunization rates. AIM commends NVPO for its development of the Draft Report and Recommendations for Consideration for Addressing the State of Vaccine Confidence and fully supports the recommendations put forth in the report. The draft report and recommendations address major issues critical to reducing vaccine hesitancy and keeping immunization rates high including measuring and tracking vaccine confidence, communication strategies, healthcare provider strategies and policy strategies.

AIM agrees with the recommendation for states and territories with existing personal belief exemptions to assess their policies to assure that exemptions are only available after appropriate parent education and acknowledgement of risks, to their child and the community, of not vaccinating. This recommendation is aligned with the AIM Position Statement on Personal Belief Exemptions from State Vaccination Mandates.

AIM additionally supports the report's recommendation to create a repository of evidence-based best practices for informing, educating and communicating with parents in an effort to increase vaccine confidence. According to the 2013 AIM Annual Survey, immunization programs reported that the vaccine confidence/hesitancy activity they conduct most often is sharing patient education resources with providers.

The recommendation to strengthen systems for monitoring vaccination coverage and attitudes and behaviors is also something that AIM supports strongly. Immunization information systems (IIS) and electronic health records (EHR) can be used to collect data on vaccine refusals and delays. Almost all states and territories have an IIS that captures data for children, and in many states and territories greater than 95% of children in the jurisdiction are included in the IIS. (MMWR (Dec, 2013) 62(49); 1005-1008) Monitoring of vaccine hesitancy is vital to understanding which populations need more education and support to increase their confidence and use of vaccines.

AIM suggests the addition of several items to the recommendations put forth by NVAC in the draft report. AIM encourages NVAC to support exploration of including vaccine hesitancy activities in Vaccines for Children (VFC) provider AFIX (Assessment, Feedback, Incentives, eXchange) visits. The AFIX model provides an opportunity for providers to learn about how vaccine hesitancy might be affecting their practices by analyzing patient immunization data, and how to improve their practice's immunization rates.

AIM also suggests including a coordinated communication campaign by immunization stakeholders to the report's recommendations. It is critical that messages from the wide variety of organizations promoting immunizations are clear and consistent. AIM suggests that communications messages are culturally appropriate to the different groups that are vaccine hesitant, and communications materials be created in several languages to better reach the nation's diverse population.

Finally, AIM encourages NVAC to include the need for ongoing funding to support vaccine confidence efforts at the state and local level. Immunization programs regularly interface with providers and the public on issues surrounding immunization and need financial support to work on a variety of activities to increase vaccine confidence and education about the importance of vaccines. Current funding provided to the awardees through the Section 317 Public Health Immunization Program is not enough to support significant communication and education to address vaccine hesitancy or research its causes. Section 317 funding, although flexible, is focused on supporting awardee achievement of grant requirements in 5 areas: program stewardship and accountability, assessing program performance, assuring access to vaccines, developing the Immunization Information System (IIS) infrastructure, and improving and maintaining preparedness.

Funding for vaccine confidence activities would be used by state and local programs to support structural changes like improving and maintaining the IIS to capture vaccine exemptions and refusals, devote staff time to this issue, develop plans to reach target populations, conduct evaluation and assessment of activities, and implement communication and educational efforts.

AIM commends NVPO for creating the Draft Report and Recommendations for Consideration for Addressing the State of Vaccine Confidence in the United States. Appropriate investment to support the strategic approach outlined by the draft recommendations, as well as a concerted effort by the wide spectrum of immunization stakeholder partners, will be essential to reducing levels of vaccine hesitancy and immunization exemptions in the U.S. AIM supports the common goals of education and improving understanding about the need for immunization and is dedicated to working with our members to create a substantial and lasting impact on vaccine hesitancy. AIM looks forward to working with NVPO, along with federal and non-federal stakeholders, to meet the recommendations laid out in the draft report.

Thank you again for this opportunity to offer our comments on the Draft Report and Recommendations for Consideration for Addressing the State of Vaccine Confidence in the United States

Sincerely,

A handwritten signature in black ink, appearing to read "P. Talebian".

Pejman Talebian, MA, MPH
Chair

A handwritten signature in black ink, appearing to read "Claire Hannan".

Claire Hannan, MPH
Executive Director