



PolicyLab Social Media Toolkit

Evidence to Action Brief: Addressing Vaccine Hesitancy to Protect Children & Communities

Against Preventable Diseases

- **Attached in this toolkit please find the following materials to assist you in disseminating the findings of this research to your networks:**
 - Suggested tweets sharing our *Evidence to Action* Brief (slide 3)
 - Suggested tweets sharing the PolicyLab blog post on the study (slide 4)
 - Suggested tweets to accompany downloadable PolicyLab images to share in social media posts (slides 5 - 10)
 - Suggested tweets about PolicyLab (slide 11)
- **Graphics no longer affect Twitter's character limits and can be included with all suggested tweets.**
- **Do not hesitate to contact Lauren Walens (WalensL@email.chop.edu) if you have any questions about these materials.**

SUGGESTED TWEETS FOR POLICYLAB EVIDENCE TO ACTION BRIEF

New @PolicyLabCHOP Report-Addressing Vaccine Hesitancy to Protect Children & Communities Against Preventable Disease http://bit.ly/E2A_AddressingVaccineHesitancy

Approx. 42,000 adults & 300 kids in the US die from vaccine-preventable diseases each year. @PolicyLabCHOP report: http://bit.ly/E2A_AddressingVaccineHesitancy

A new @PolicyLabCHOP Evidence to Action brief proposes policy solutions to counter vaccine hesitancy: http://bit.ly/E2A_AddressingVaccineHesitancy #vaccineswork

Addressing vaccine hesitancy will protect kids & families from preventable diseases. New @PolicyLabCHOP report: http://bit.ly/E2A_AddressingVaccineHesitancy

Routine immunization of all kids born in one year can reduce health care costs by \$13.5 Bil. @PolicyLabCHOP report: http://bit.ly/E2A_AddressingVaccineHesitancy

Vaccine hesitancy threatens to put children, families & communities at risk. @PolicyLabCHOP shares policy solutions: http://bit.ly/E2A_AddressingVaccineHesitancy

SUGGESTED TWEETS FOR POLICYLAB BLOG

It's on us, as clinicians, policymakers, educators & parents, to counter vaccine hesitancy. New @PolicyLabCHOP blog:

<http://policylab.chop.edu/blog/ironic-rise-vaccine-hesitancy>

A new @PolicyLabCHOP blog explains how growing #vaccine hesitancy in the US threatens population health: <http://policylab.chop.edu/blog/ironic-rise-vaccine-hesitancy>

"Ironically, the success of vaccination is now contributing to a rise in vaccine hesitancy"-
New @PolicyLabCHOP blog: <http://policylab.chop.edu/blog/ironic-rise-vaccine-hesitancy>

Vaccine hesitancy has contributed to undervaccination, which puts whole communities at risk. New @PolicyLabCHOP blog:

<http://policylab.chop.edu/blog/ironic-rise-vaccine-hesitancy>

A new @PolicyLabCHOP blog post explains why it's critical to counter rising vaccine hesitancy in the US: <http://policylab.chop.edu/blog/ironic-rise-vaccine-hesitancy>

Misinformation about #vaccines has contributed to rising vaccine hesitancy in the US.
New @PolicyLabCHOP blog: <http://policylab.chop.edu/blog/ironic-rise-vaccine-hesitancy>

SUGGESTED TWEETS FOR POLICYLAB INFOGRAPHICS (STAKEHOLDERS)

Download the image here: <http://policylab.chop.edu/file/whatcanstakeholdersdojpg>

How can providers, policymakers & other stakeholders address vaccine hesitancy? New @PolicyLabCHOP report: http://bit.ly/E2A_AddressingVaccineHesitancy

Stakeholders at all levels can take action to help reduce #vaccine hesitancy. New @PolicyLabCHOP report shares how: http://bit.ly/E2A_AddressingVaccineHesitancy

Providers, insurers & policymakers can help address vaccine hesitancy & keep kids & communities safe: http://bit.ly/E2A_AddressingVaccineHesitancy
@PolicyLabCHOP



WHAT STAKEHOLDERS CAN DO TO ENCOURAGE VACCINATION

Combining and scaling up these best practices can help ensure that current and future generations of children and adults will continue to see the benefits of vaccines.

- **Health care networks and educators** can work to ensure providers have the training and support they need to make strong vaccine recommendations and adequately address the concerns of hesitant parents.
- **Providers** can make use of available tools and training to understand major vaccine concerns, and prepare themselves for tough conversations.
- **Health plans and insurers** can support provider efforts by adequately reimbursing for the entire cost of vaccination, including purchasing, storage, counseling and administration.
- **Federal legislators** can work to encourage vaccination by allowing payers to use premium differentials within the parameters of the federal law that incentivize use of the recommended vaccine schedule.
- **States** can enforce existing vaccine mandates, make it more difficult to obtain vaccine exemptions and allow vaccines to be given in more convenient locations such as pharmacies.
- **State and local health departments** can help to address each cause of vaccine hesitancy through targeted public awareness and education campaigns.

SUGGESTED TWEETS FOR POLICYLAB INFOGRAPHICS (TALKING POINTS)

Download the image here: <http://policylab.chop.edu/file/talkingpointsjpg>

How can providers assure vaccine-hesitant parents of vaccines' safety & efficacy?

@PolicyLabCHOP shares strategies:

http://bit.ly/E2A_AddressingVaccineHesitancy

Providers can ease vaccine-hesitant parents with a few simple talking points. New






@PolicyLabCHOP report:


http://bit.ly/E2A_AddressingVaccineHesitancy

In a new report, @PolicyLabCHOP shares how providers can contribute to combating #vaccine hesitancy in the US:

http://bit.ly/E2A_AddressingVaccineHesitancy

TALKING POINTS TO ADDRESS VACCINE HESITANT PARENTS

				
Vaccines are safe. They are tested in thousands of people before they are licensed and are monitored extensively after being made available to the public.	Infants experience the same amount of stress during each visit, whether they receive two or five shots at once. Therefore, spreading out the shots over more visits may be more stressful.	Spreading out vaccinations beyond the recommended schedule may be less safe and effective.	The recommended vaccine schedule ensures the best immune response and protection when a child is most at risk of infection.	Delaying vaccines increases the risk of contracting vaccine-preventable diseases and infecting others.

 Children's Hospital of Philadelphia™ PolicyLab

SUGGESTED TWEETS FOR POLICYLAB INFOGRAPHICS (EXEMPTION MAP)

Download the image here: <http://policylab.chop.edu/file/nonmedicalexemptionsjpg>

State exemption policies can significantly limit the reach of immunization programs. Learn more:

http://bit.ly/E2A_AddressingVaccineHesitancy

@PolicyLabCHOP

High rates of nonmedical vaccine exemptions increase risk of preventable disease outbreak

@PolicyLabCHOP report:

http://bit.ly/E2A_AddressingVaccineHesitancy

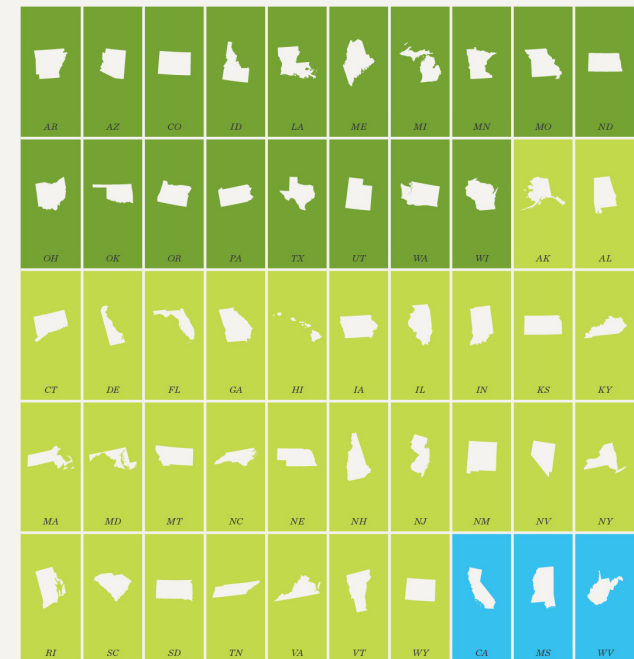
What exemptions does your state allow for vaccinations? Learn more in new

@PolicyLabCHOP report:

http://bit.ly/E2A_AddressingVaccineHesitancy

STATE NON-MEDICAL EXEMPTIONS FROM SCHOOL IMMUNIZATION REQUIREMENTS, 2016

● Religious AND Personal Belief Exemptions ● Religious Exemptions ● Nonmedical Exemptions Not Allowed



*Washington, D.C. also allows Religious Exemptions.

Source: National Conference of State Legislatures. States with Religious and Philosophical Exemptions from School Immunization Laws, January 21, 2016. Retrieved from <http://www.ncsl.org/research/health/school-immunization-exemption-state-laws.aspx>.

SUGGESTED TWEETS FOR POLICYPALB INFOGRAPHICS (MEASLES INCIDENCE)

Download the image here: <http://policylab.chop.edu/file/measlesincidenceaftermmrjpg>

Intentional vaccine delay & refusal has contributed to an uptick in incidence of preventable disease:

http://bit.ly/E2A_AddressingVaccineHesitancy

@PolicyLabCHOP

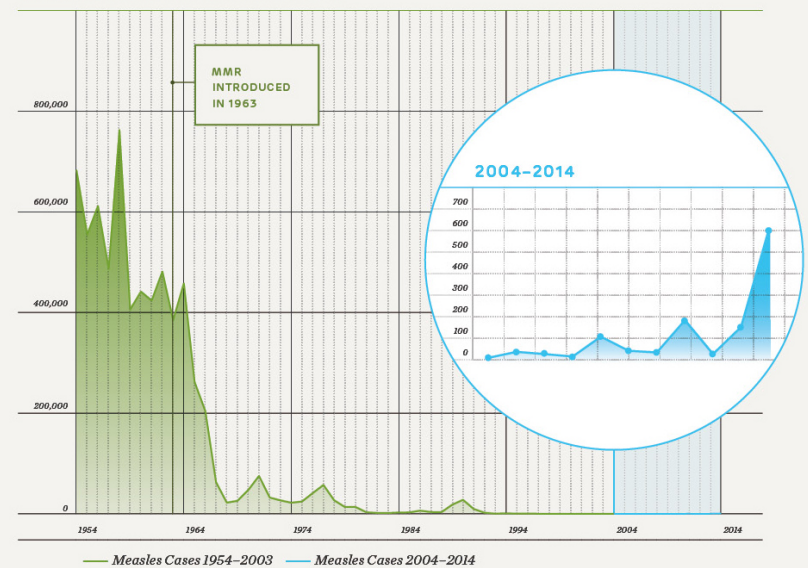
Since 2000, more than 1,500 measles cases have been reported. @PolicyLabCHOP report explains:

http://bit.ly/E2A_AddressingVaccineHesitancy

2014 saw the highest number of #measles cases in two decades. New @PolicyLabCHOP report explains:

http://bit.ly/E2A_AddressingVaccineHesitancy

MEASLES INCIDENCE BEFORE AND AFTER MMR VACCINE INTRODUCTION: 1953-2014



Source: Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases, 13th Edition. Appendix E-1: Reported Cases and Deaths from Vaccine Preventable Diseases, United States, 1950-2013, 2015.

SUGGESTED TWEETS FOR INFOGRAPHICS (MMR VACCINATION COVERAGE)

Download the image here: <http://policylab.chop.edu/file/estimatedvaccinationcoveragemmrjpg>

Many states are failing to reach the target vaccination rate of 95% for routine childhood #vaccines:

http://bit.ly/E2A_AddressingVaccineHesitancy
@PolicyLabCHOP

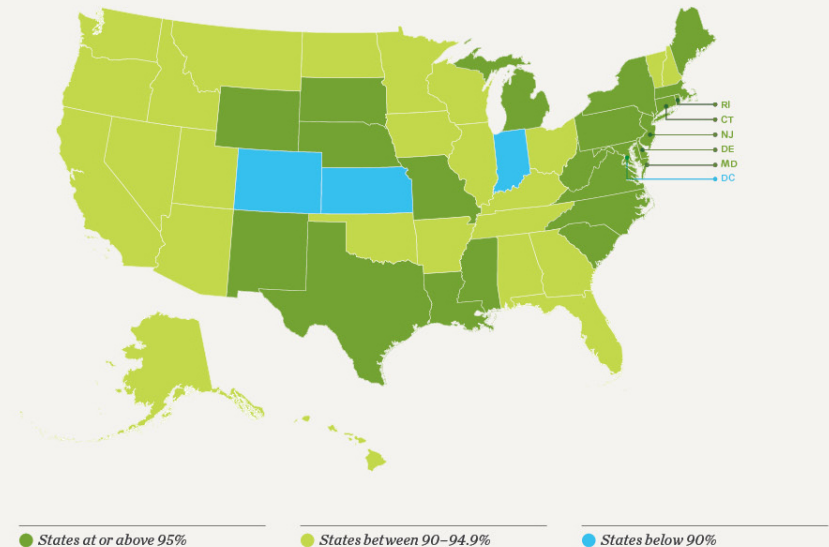
More than half of states have failed to reach the target rate of 95% for MMR #vaccination.

@PolicyLabCHOP report:
http://bit.ly/E2A_AddressingVaccineHesitancy

Vaccine hesitancy compromises herd immunity, a vaccination rate that keeps communities safe.

@PolicyLabCHOP report:
http://bit.ly/E2A_AddressingVaccineHesitancy

ESTIMATED MMR VACCINATION COVERAGE AMONG CHILDREN ENROLLED IN KINDERGARTEN, 2015-2016



Source: Centers for Disease Control and Prevention. SchoolVaxView: 2015-16 School Year Vaccination Coverage Reports. October 2016.

SUGGESTED TWEETS ABOUT POLICYLAB

Learn more about @PolicyLabCHOP's efforts to inform practice & policy to improve child & family health <http://policylab.chop.edu/>

Learn how @PolicyLabCHOP is improving & ensuring insurance coverage, #healthequity & overall #familyhealth <http://policylab.chop.edu/>



**For more information,
please contact
Lauren Walens**

POLICYLAB

Children's Hospital of Philadelphia
3535 Market Street, 15th Floor
Philadelphia, PA 19104

www.policylab.chop.edu

267.426.9837

WalensL@email.chop.edu

TWITTER: @PolicyLabCHOP