

# Expanding the National Immunization Survey-Teen (NIS-Teen) to Evaluate Parental Concerns about Vaccine Safety: What is in the Parental Concerns Module?

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## Background

- Parents who have concerns about vaccine safety or efficacy may delay or refuse the administration of vaccines for their adolescent children. More research is needed to (1) identify and understand the reasons for their concerns, (2) evaluate the association between having concerns and vaccination coverage, and (3) track concerns over time.

## Setting

- Parents of adolescents 13-17 years who are sampled by the National Immunization Survey-Teen (NIS-Teen) are asked questions about their concerns about vaccines. The Parental Concerns (PC) module was conducted during July 2010 through December 2010.

## Population

- Parents of adolescents 13-17 years in the United States.

## Project Description

- Data collected by the NIS-Teen PC module include questions on:
  - Parents' perceptions about the necessity, safety, and efficacy of vaccines;
  - Satisfaction with information about vaccines given by their child's vaccination provider;
  - Influences on their vaccination decisions;
  - Past refusals to vaccinate or requests to delay the administration of vaccines for their teenager; and
  - Types of vaccines that were refused or delayed and reasons for refusal or delay.

## Section A – Parent's Perceptions

### Questions: Parents' opinions about vaccines for teenagers

- On a scale of 0 to 10 with "0" being "strongly disagree and "10" being strongly agree, how much do you disagree or agree with the following statements:
  - "Vaccines are necessary to protect the health of teenagers."
  - "Teenagers receive too many vaccines."
  - "Vaccines do a good job in preventing the diseases they are intended to prevent."
  - "My teenager helps to make the decision about whether he or she will receive a vaccine."
  - "Vaccines are safe."
  - "I have a good relationship with my teenager's health care provider"
  - "I make a point to read and watch stories about health."
  - "In general medical professionals in charge of vaccinations have my teenager's best interest at heart."
  - "If I vaccinate my teenager, he/she may have serious side effects."
  - "If I do not vaccinate my teenager he/she may get a disease such as meningitis and cause other teenagers or adults also to get the disease."
  - "Vaccination should be delayed if a teenager has a minor illness."

## Section B Influences on parents' decisions about vaccines\*

- At visits you made for you teenager's vaccinations, did you talk to a:
  - Doctor?
  - Nurse?
  - Another health professional other than a doctor or nurse?
    - Who did you talk to:
      - Medical assistant?
      - Nurse practitioner?
      - Physician's assistant?
      - Other?
- At visits for you teenager's vaccinations, did his/her healthcare provider:
  - Talk to you about Td or Tdap (Tetanus booster or Tetanus-diphtheria-acellular pertussis vaccine)?
  - Recommend Td or Tdap?
  - Give you enough time to discuss Td or Tdap?
  - Play a role in your decision to get your teenager vaccinated or not to get him/her vaccinated with Td or Tdap?
- How did your teenager's healthcare provider play a role in your decision about getting him/her vaccinated with Td or Tdap?
  - Made you more likely to get your teenager vaccinated?
  - Made you less likely to get your teenager vaccinated?
  - Did not affect your decision?
  - Don't know
  - Refused
- Did your teenager play a role in your decision to get him/her vaccinated or not to get him/her vaccinated with Td or Tdap?
  - Made you more likely to get your teenager vaccinated?
  - Made you less likely to get your teenager vaccinated?
  - Did not affect your decision?
  - Don't know
  - Refused
- Did your teenager receive Td or Tdap on the day that you discussed it with his/her healthcare provider?
- At visits for you teenager's vaccinations, did his/her healthcare provider:
  - Talk to you about the meningitis shot (sometimes called Menactra, Menomune, or Menveo)?
  - Recommend the meningitis shot ?
  - Give you enough time to discuss the meningitis shot ?
  - Play a role in your decision to get your teenager vaccinated or not to get him/her vaccinated with the meningitis shot ?
- How did your teenager's healthcare provider play a role in your decision about getting him/her vaccinated with the meningitis shot ?
  - Made you more likely to get your teenager vaccinated?
  - Made you less likely to get your teenager vaccinated?
  - Did not affect your decision?
  - Don't know
  - Refused

\*Responses included: Yes, No, Don't Know, Refused

## Section B Influences on parents' decisions about vaccines\* (continued)

- Did your teenager play a role in your decision to get him/her vaccinated or not to get him/her vaccinated with the meningitis shot ?
  - Made you more likely to get your teenager vaccinated?
  - Made you less likely to get your teenager vaccinated?
  - Did not affect your decision?
  - Don't know
  - Refused
- Did your teenager receive the meningitis shot on the day that you discussed it with his/her healthcare provider?
- At visits for you teenager's vaccinations, did his/her healthcare provider:
  - Talk to you about the HPV shot (Human papillomavirus vaccine, sometimes called Gardasil or Cervarix)?
  - Recommend the HPV shot ?
  - Give you enough time to discuss the HPV shot ?
  - Play a role in your decision to get your teenager vaccinated or not to get him/her vaccinated with the HPV shot ?
- How did your teenager's healthcare provider play a role in your decision about getting him/her vaccinated with the HPV shot ?
  - Made you more likely to get your teenager vaccinated?
  - Made you less likely to get your teenager vaccinated?
  - Did not affect your decision?
  - Don't know
  - Refused
- Did your teenager play a role in your decision to get him/her vaccinated or not to get him/her vaccinated with the HPV shot ?
  - Made you more likely to get your teenager vaccinated?
  - Made you less likely to get your teenager vaccinated?
  - Did not affect your decision?
  - Don't know
  - Refused
- Did your teenager receive the HPV shot on the day that you discussed it with his/her healthcare provider?
- Did any of the following play a role in your decision about vaccinating your teenager?
  - Drug company advertisements?
  - News coverage?
  - TV shows/talk shows?
  - Internet?
  - Books, magazines, or information from a library?
  - Friends?
  - Family?
  - School requirements?
- At the time when your teenager was vaccinated, did you have any concerns about vaccine safety?
- Do you have any concerns about vaccine safety now?
- Did anyone or anything else play a role in your decision?

\*Responses included: Yes, No, Don't Know, Refused

## Section C – Delay and Refusal\*

- Has there ever been a time when you refused or decided not to get a vaccination for your teenager?
- Did you refuse or decide not to get:
  - A flu vaccine (can be a shot or nasal spray)?
  - Td or Tdap?
  - Meningitis shot?
  - HPV shot?
  - Any other?
- Please tell me all the reasons why you refused or decided not to get vaccines for your teenager. Was it because:
  - Your teenager was ill at the time?
  - You have concerns about short term problems, like fever or discomfort?
    - What were those short term problem concerns?
  - You have concerns about the vaccine causing lasting health problems?
    - What were those lasting health problem concerns?
  - You heard or read bad things about the vaccine in the news such as on the TV, the radio, in the newspaper, or on the internet?
    - What did you hear or read about through the media?
  - You feel that there are too many shots?
  - You wonder about the effectiveness of the vaccine?
- You have concerns about cost?
- You missed or couldn't get an appointment?
- You have transportation problems?
- Getting the vaccine was not convenient?
- The vaccine was not recommended by a healthcare provider?
- You lack knowledge about the vaccine?
- You believe that the vaccine is not needed?
- You were unable to find a healthcare provider that had the vaccine available?
- Your teen is not sexually active ?<sup>†</sup>
- Any other reason?
- Has there ever been a time when you delayed or put off getting a vaccination for your teenager?
- Did you delay or put off getting:
  - A flu vaccine (can be a shot or nasal spray)?
  - Td or Tdap?
  - Meningitis shot?
  - HPV shot?
  - Any other?

\*Responses included: Yes, No, Don't Know, Refused  
†Regarding HPV vaccine only.

## Section C – Delay and Refusal\* (continued)

- Please tell me all the reasons why you delayed or put off getting vaccines for your teenager. Was it because:
  - Your teenager was ill at the time?
  - You have concerns about short term problems, like fever or discomfort?
    - What were those short term problem concerns?
  - You have concerns about the vaccine causing lasting health problems?
    - What were those lasting health problem concerns?
  - You heard or read bad things about the vaccine in the news such as on the TV, the radio, in the newspaper, or on the internet?
    - What did you hear or read about through the media?
  - You feel that there are too many shots?
  - You wonder about the effectiveness of the vaccine?
- You have concerns about cost?
- You missed or couldn't get an appointment?
- You have transportation problems?
- Getting the vaccine was not convenient?
- The vaccine was not recommended by a healthcare provider?
- You lack knowledge about the vaccine?
- You believe that the vaccine is not needed?
- You were unable to find a healthcare provider that had the vaccine available?
- Your teen is not sexually active?<sup>†</sup>
- Any other reason?

\*Responses included: Yes, No, Don't Know, Refused  
†Regarding HPV vaccine only.

## Outcome

- The Parental Concerns module will provide important information on beliefs that may affect immunization rates among adolescents.
- The module may be repeated in subsequent years in the NIS-Teen to evaluate trends in those concerns. Information obtained from the module may be used by CDC and others to help develop better materials to communicate with parents who have vaccination concerns.

