

Health Questions asked by Older Adults to CDC-INFO: Lessons from Across the Nation

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Background

Despite the availability of vaccines, pneumonia and influenza continue to be the fifth leading cause of death of adults 65 years or older in the United States (CDC National Center for Health Statistics 2001). Despite this threat, concerns about the safety and effectiveness of vaccines are the most commonly cited barriers to getting immunized, among all age groups—indicating the need for an emphasis by health educators on vaccine safety.

Within the theories of social marketing and health communication, audience research focuses on understanding the nature and extent of the public health burdens that affect the target audiences. This poster presents findings of an assessment of questions received by CDC-INFO from adults 65 years of age and older in addition to their overall satisfaction ratings with the delivery of responses from CDC-INFO. The CDC National Contact Center (CDC-INFO) received phone inquiries from approximately 35,310 adults ages 65 and older. Based on the findings we can learn how to inform strategic health communication to older adults nationwide.

Objectives

- Understand frequently asked questions to CDC-INFO by adults 65 years of age and older
- Assess older adult satisfaction with CDC-INFO and interpret how satisfaction lends to behavior change
- Explore the implications for public health education, health communication, and social marketing for older adults

What is CDC-INFO?

The CDC-INFO contact center combined more than 40 separate hotlines, interactive voice response services systems, information clearinghouses and in-house informal systems operated the Centers for Disease Control and Prevention (CDC) into one national integrated service. CDC's national contact center delivers health information 24/7 in English and Spanish on over 400 health and safety topics to consumers, healthcare providers, and professionals. CDC-INFO received an average of 35,955 phone calls, 8,821 emails, and 7,811 publication orders each month in FY 2009.



History	Highlights
<ul style="list-style-type: none"> ➤ Launched in 2005 ➤ CDC-INFO employs 94 staff at its National Contact Center ➤ Delivers health information 24/7/365 ➤ Serves consumers, healthcare providers and professionals ➤ English and Spanish service ➤ Handles inquiries by telephone, e-mail, and mail 	<ul style="list-style-type: none"> ➤ Handles more than 1.6M telephone inquiries answered since 2005 ➤ Responds to over 140,000 e-mails answered since 2005 ➤ Fulfills an average 7,811 publication orders monthly

Methods

- Demographic data are collected from callers who participate in a voluntary brief satisfaction survey after speaking to a CDC-INFO customer service representative. Seamless data collection allows this information to be linked to the service record for each of these callers, which includes the topic of the inquiry, as well as the verbatim question-asked. Frequencies of topics for older adults were calculated and the top nine topics of interest were pulled for a drill-down analysis.
- Each of these nine topics was parsed by theme such as disease transmission, symptoms, and vaccine side effects. For example, inquiries on the topic of vaccines and immunizations were coded as pertaining to side effects by searching for the keyword "side effects" or "side" or "vaccine." Each inquiry was coded according to theme in order to find commonalities across topics.
- Overall caller satisfaction is also measured by a brief, automated survey at the conclusion of the call. All inquirers are offered the option to participate in this survey.

Limitations

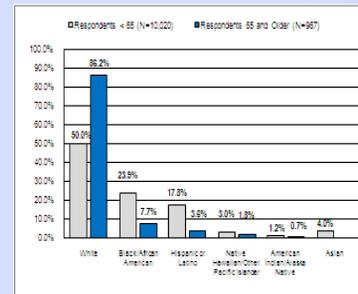
- This is a convenience sample of callers who may not be representative of all callers 65 years or older or all CDC-INFO callers in general
- The time-period of study overlapped with the 2009 H1N1 event, leading to more people calling about H1N1 or flu vaccines than normal

Results

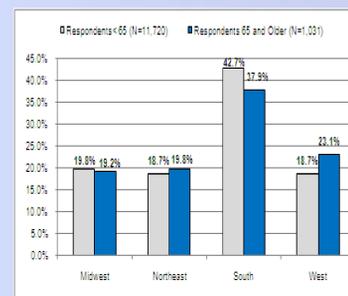
- Survey data were collected from 13,472 callers between November 16, 2008 and January 16, 2009. Older adults represented 7.7% of this sample (N=1,036).
- Older adult participants represented all regions of the United States. The majority of older adult respondents were Caucasian (86%), female (66%), and first-time callers to CDC-INFO (88%).
- Older adults express equivalent levels of satisfaction compared to younger age groups.

N=13,742 respondents, including 1,036 adults identifying as 65 years or older

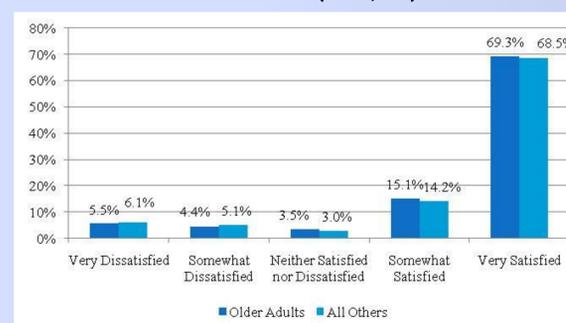
Caller Race/Ethnicity (N=13,472)



Caller Region (N=13,472)



Caller Satisfaction with CDC-INFO (N=13,472)



Frequently Asked Questions

Older adults were primarily interested in:

Ingredients and side effects of vaccinations (30.2%; n=313)

- "What are the side effects of the flu, pneumococcal, and Zostavax (shingles) vaccines?"
- "What products do the flu and pneumococcal vaccines contain?"

International Travel Vaccinations (25.7%; n=266)

- "What vaccines do I need to get before traveling outside the U.S.?"
- "Do I need to take anti-malaria medication for my travels and which should I take?"



A larger percentage of older adults receiving information on immunization services endorsed the highest rating on every measure of satisfaction compared to older adults receiving information on non-immunization topics. Four in five older adults expressed the highest level of overall satisfaction with CDC-INFO (79.2%). The greatest proportion of older adults expressed the highest level of satisfaction with the ability of the CSR to understand what they needed (89.7%).

In FY 2009, one in five older adult respondents were planning to get immunized as a result of what they learned from CDC-INFO. (22.0%; n=27)

Lessons Learned

Older adults are using CDC-INFO as a resource for CDC health information about vaccinations. CDC-INFO is fulfilling these needs based on the relatively high satisfaction of older adults with vaccine-related inquiries compared to adults with other inquiries, and yielding self-reported behavior change.

More research is needed to understand older adults' health information seeking behavior. A larger sample of older Hispanic, Black, and minority adults is needed to determine if vaccine information is a primary interest for older adults of color as well.

Furthermore, it is necessary to explore relative differences in satisfaction and barriers to vaccinations between older and younger adults to inform interventions. This information can inform key health education messages.