



MID-WESTERN
HEALTH BOARD

Friday, June 28, 2002

To: Chairman & Each Member
Mid-Western Health Board

Report No:
Item No on Agenda

Report for Meeting of the Board to be held on 12th July, 2002

Summary Report on
"Immunisation: the views of parents and health professionals"
Authors: Department of Public Health, Southern Health Board, May 2002.

Dear Member,

Introduction:

Disease prevention is the key to public health. The current national recommendation in Ireland is that children are vaccinated against ten infectious diseases. Uptake levels of 95% are needed to prevent outbreaks of disease. Uptake is well short of that target, especially for mumps, measles, rubella (MMR) vaccine. The once simple decision to vaccinate is now more difficult and stressful due to the confusing and conflicting information parents are receiving about immunisation. The concerns of parents need to be addressed by health services that understand the factors, positive and negative, influencing the decision.

The study, in summer 2001, looked at parents and health professionals' perceptions and knowledge of vaccines and their experience with the vaccination system. Three stages were involved in the study: (a) identifying the main issues - general practitioners (GPs) related the extent and type of parental concerns about childhood vaccination (sample size=19); (b) focus groups were used to explore the issues raised by GPs among a diverse group of parents (sample size=47) and nurses (23 public health nurses, 14 midwives and 12 practice nurses); and (c) a survey of GPs to see if the findings were representative (101 responses).

Main findings:

The decision by parents whether to vaccinate their child, or not, was very strongly influenced by:

- Fear – (fear if they do, fear if they don't).
- Mistrust of health services (intimated a fear of issues being covered up).
- Concern that the "population approach" appears to disregard their child's individuality.

- Guilt (if they choose not to vaccinate).
- Pressure (to vaccinate from society and health services).
- Confused messages (frequent changes to vaccination schedule and for reasons unclear to both parents and health professionals).
- Insufficient information (about vaccination and the diseases they prevent).
- Time to assimilate information provided on vaccines.

Parents commented that many health professionals did not take seriously their reports of adverse events occurring after vaccination.

Parents seek and expect information from many health professionals, even those not directly involved in vaccination who demonstrate most knowledge.

Parents view media as a useful source of facts on vaccines.

Health professionals felt poorly equipped to answer the concerns of parents. Midwives were identified, by those delivering the service, as having a key information role. They themselves perceived their role to be unclear and they lacked adequate information.

Health professionals considered “negative media” to be the most important factor affecting uptake. They considered the response of authoritative national bodies to be insufficient to negative, often inaccurate, information in the media.

Health professionals show great commitment to obtaining high uptake – taking more time to inform and re-assure parents but it is not always appreciated by parents.

Health professionals involved said there were logistical problems in the primary childhood immunisation system that need to be addressed to increase uptake.

Recommendations:

Information – General

Information on immunisation and vaccines should be produced and disseminated nationally to ensure a consistent message. It should be balanced and complete.

The format and presentation of information needs attention. Misinformation needs to be addressed rapidly by authoritative, scientific and trusted bodies. Regular and timely updates on vaccine related issues for parents and health professionals are required – and increased access to this information and further sources.

Information - for parents

Different formats are required to suit different needs and education levels. Clear and simple leaflets addressing the main issues are essential. Information videos on immunisation should be considered for use in health facilities used by parents of young children. Material produced should be tested with the relevant target group before publication. Accessibility to information should be increased and detailed complex information should be provided to those seeking to further research the issue.

Information – for health professionals

Those on the “front-line” must have detailed, up-to-date and evidence-based information so they can assist parents making their decisions. A rapid cascade system would facilitate adequate and timely information in emergency situations or controversies. Those professionals not directly involved in immunisation also need information. MMR is a priority for information provision.

Health professionals and parents – working together

Health professionals need to acknowledge and address parental fears. Parental feelings of guilt and pressure need to be allayed by supporting and reassuring them about vaccination. Communication skills on several levels need to be developed / improved.

Education

Immunisation is the crucial health issue of our time and this needs to be reflected in undergraduate, continuing medical and nursing education.

Media

Clear, evidence-based information will need to be made available to the media on an on-going basis to ensure an informed public.

Increasing trust and confidence in vaccination and monitoring systems

Changes to the immunisation schedule should be preceded by an information campaign for health professionals / parents – fully explaining the rationale for change. Provide of clear, evidence-based information for health professionals and parents. Parents and professionals perceive accuracy and efficiency of record keeping as a reflection of quality of service – record keeping should be improved.

Widespread use of parent-held child health records should be considered to assist parents and professionals in documenting vaccinations received.

The Irish Medicines Board (IMB) system of monitoring adverse reactions needs to be strengthened and improved with analysis and information going to both the general public and professionals. Consideration should be given to a national no-fault compensation scheme for vaccine adverse reactions.

Vaccination programme issues

The logistical problems in the delivery of the primary childhood immunisation programme need to be addressed – vaccine supply and delivery, computer systems in Boards, accuracy of uptake statistics and payment issues.

Optimise vaccination delivery in GP practices – reminder systems, follow-up defaulters, flagging of charts, minimisation of missed opportunities for vaccination.

The current difficulties encountered by parents and health professionals in obtaining accurate records of vaccination should be addressed – increase the efficiency and user-friendliness of records to authorised individuals. The provision and development of unique individual identification numbers and appropriate information systems is essential.

This conclusions and recommendations of this study will be considered by the Regional Immunisation Committee of the Mid-Western Health Board.

Yours sincerely,

**Dr. Kevin Kelleher,
Director of Public Health.**