

“This ad would make me talk to my doctor:” Formative research to develop a vaccination social media campaign in rural Tennessee

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Goals

The purpose of this study is to conduct formative audience research to evaluate communication strategies and message testing to design a social media campaign for ImmunizeTN. The purpose of the social media campaign is to increase awareness of childhood immunizations, including HPV vaccination and build resilience to vaccine misinformation among parents in rural and under-resourced areas of Tennessee.

ImmunizeTN

- Mission of ImmunizeTN is to create a healthy, thriving Tennessee free of vaccine-preventable diseases.
- ImmunizeTN provides a space for collaboration and coordination between ImmunizeTN members, vaccination stakeholders and other community members to increase vaccine literacy, build vaccine confidence, and improve vaccination rates in Tennessee.

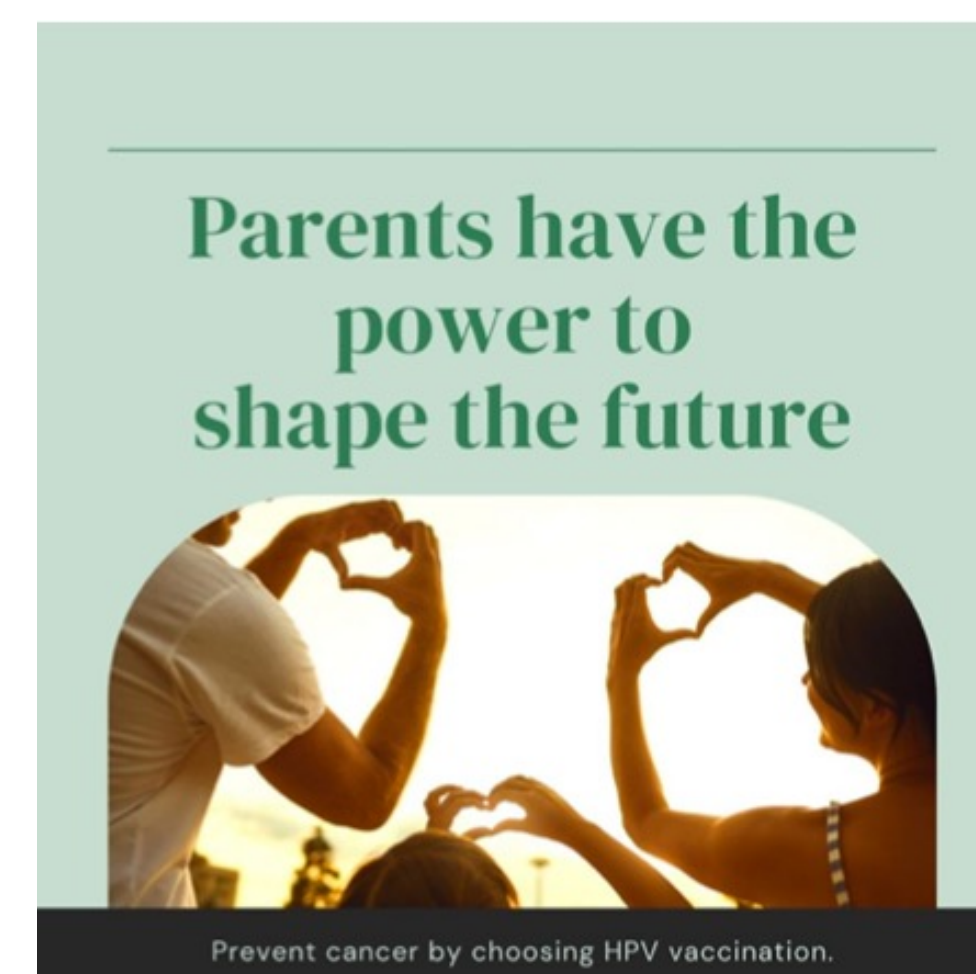
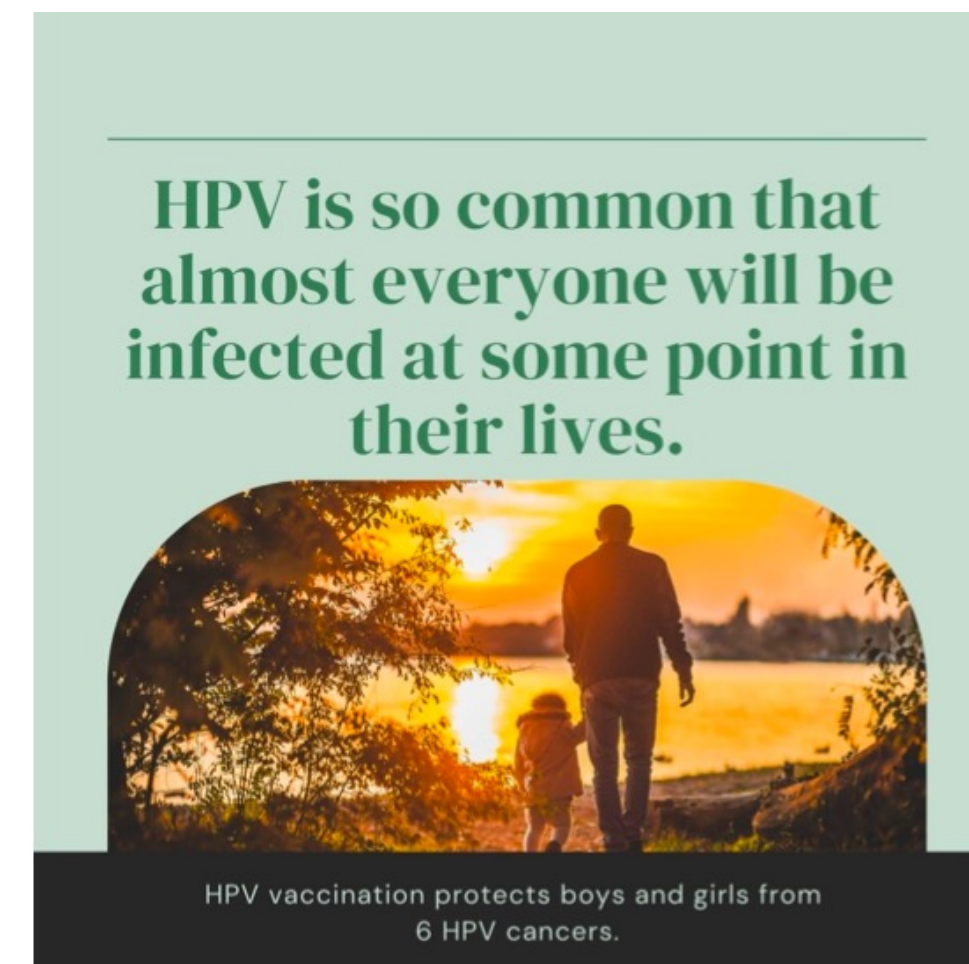
HPV Vaccination Hesitancy

- Vaccine hesitancy is defined as the refusal to accept vaccines despite availability of vaccine services which is influenced by factors such as complacency, convince and confidence.
- Only 52.9% of TN ages 13-17 are fully vaccinated for HPV.
- HPV vaccination rates decreased 75% during the pandemic.
- COVID-19 exposed new levels of vaccine hesitancy due to factors such as decline in the public trust of experts, preferences for alternative health, political polarization and belief-based extremism.

Why Rural Communities?

- HPV vaccination initiation (≥ 1 dose) was 11% lower for adolescents living in most rural areas compared to adolescents living in mostly urban areas.
- Individuals in rural areas face higher Human papillomavirus (HPV) cancer burden and increased HPV cancer mortality.

Examples of Message Testing



Why Social Media?

- More than 86% of U.S. adults get news from their smartphone, computer or tablet compared to traditional news sources such as the TV or radio.
- Meta-analysis have shown social media sites such as Facebook appear to be effective in promoting changes in health-related behaviors.
- Ideas about health and behavior are shaped by the communication and technology that we interact with everyday.
- Misinformation and anti-vaccine movement has large presence on traditional social media platforms.

Methods and Results

- Parents to a child ages 5-17 years old living in TN took the web-based survey which investigated vaccine confidence and preferences regarding vaccine communication and message testing,

Characteristics	Total (N=332)
What best describes the general areas where you live?	
Urban	37.05%
Suburban	31.63%
Rural	31.33%
Race	
White or Caucasian	92.23%
Black or African American	13.86%
Asian or Asian American	2.71%
American Indian or Native American	1.20%
Other	0.30%
Gender	
Man	42.47%
Woman	56.33%
Agender	0.30%
Prefer not to Disclose	0.90%
Age	
18-24	0.60%
25-34	24.10%
35-44	52.11%
45-54	52.11%
55-64	0.60%
Education	
Public School	74.40%
Home school	6.33%
Special Education School	5.42%
Magnet School	3.92%
Religious Private School	3.6%
Charter School	3.31%
Secular or Non-religious private school	1.81%
Other	1.20%

- Vaccine Literacy Scale Scores using HLVA-It Scale:
- Functional Vaccine Literacy (language capabilities/semantic system): **2.68**
- Interactive/Communicative Vaccine Literacy (problem solving and decision making/cognitive): **3.11**
- Critical Vaccine Literacy (Cognitive): **3.18**

- UNC Perceived Message Effectiveness Mean Score: **3.74**

- Vaccine Hesitancy Scale for HPV Vaccine Mean Score: **2.7778**

Conclusion

- Higher mean value corresponds to higher vaccine literacy level.
- Functional vaccine literacy shows need for more accessible language
- Vaccine Hesitancy Scale mean shows parents are hesitant but responded positively to social norm messaging and information about vaccines.
- Effective messages helped parents gain confidence in their decision to vaccinate their children.