# Barriers and Motivators for Adult Vaccination in New York City

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## Introduction

- Current adult vaccination rates in New York City (NYC) are low
- The NYC Department of Health and Mental Hygiene (DOHMH) conducts a Community Health Survey (CHS) annually. CHS provides robust data on the health of New Yorkers, including estimates of vaccination coverage
- Only 44% of adults  $\geq$  18 years received influenza vaccine according to 2015 CHS data, far below the Healthy People 2020 goal of 70%
- Only 50% of adults  $\geq$  65 years received pneumococcal vaccination according to 2012 CHS data, far lower than the Healthy People 2020 goal of 90%
- The NYC DOHMH Bureau of Immunization (BOI) promotes the Standards for Adult Immunization Practice through development of provider and patient education resources
- To develop these communications, BOI gained insights about the behaviors and attitudes toward vaccinations among providers and NYC public

# Objectives

BOI conducted qualitative research to achieve the following objectives:

- 1. Examine behaviors and attitudes toward vaccinations among NYC adults and providers
- 2. Assess the extent to which providers make recommendations about vaccinations and understand how to encourage stronger recommendations
- 3. Investigate practice-level barriers to implementing the Standards for Adult Immunization Practice
- 4. Understand barriers and motivators to getting vaccinations for NYC adults
- 5. Inform the development of adult immunization toolkit for providers

## Methods

- BOI conducted 11 focus groups among NYC adult providers (n=7) and adult patients (n=4) in February 2016
- The focus groups lasted approximately 90 minutes each
- Qualitative analysis of the focus groups was conducted, including examination of the verbal and written exercises

#### **Providers**

- Focus groups had 6 participants each, stratified by:
  - 1. Primary care physicians (3 groups)
- 2. Mid-level providers (3 groups): nurses, midwives and physician assistants
- 3. Specialty physicians (1 group): cardiologists, oncologists, hematologists and obstetrician/gynecologists
- Provider groups included a mix of providers/practice type, gender,
  NYC boroughs and race/ethnicity

### **Patients**

- Focus groups had 8 participants each, stratified by:
- 1. General population
- 2. African-American/Caribbean
- 3. Asians
- 4. Spanish-speaking Latinos
- Groups of patients contained a mix of education, household income (including minimum of 50% under \$50,000 per year), gender, age and NYC borough
- Each patient group included 3 participants on Medicaid
- The Spanish-speaking group contained respondents who spoke Spanish at least more than half the time in their household and a mix of foreign-born status

## Results

#### **Patients and Providers**

- Vaccines are important but not a top concern for providers and patients
  - Providers, especially specialists, focus primarily on treating illnesses
  - Patients tend to associate vaccinations with children
- Patients and providers believe that preventive health is important and that vaccinations are a critical component of preventive health
  - The idea that vaccinations prevent serious diseases is easily understood and accepted

## **Providers**

- Most providers strongly support vaccinations
- Most providers understand discussion with patients is necessary for an effective recommendation and are willing to do this

#### <u>Barriers</u>

- Time is a significant barrier to vaccinating patients
  - Providers often lack time to address patients' questions and concerns and prioritize acute health issues over vaccination
- Providers often do not actively recommend vaccines due to cost concerns
  - Providers say the return on investment for vaccinations is low
  - Insurance coverage issues are a common challenge for providers

#### **Motivators**

 Providers believe that outside education from trusted sources would help facilitate vaccination discussions with their patients and save time

## **Patients**

- Patients want to play an active role in their healthcare decisions
  - Patient satisfaction is becoming increasingly important and influences how providers make recommendations to their patients
  - Provider recommendations are important for patients, but they also expect a discussion
- Patients want to verify their provider's advice with outside information
  - While provider recommendations are critical for patients, they often consult additional sources of information
  - The Centers for Disease Control and Prevention (CDC) and NYC
    DOHMH are trusted information sources for patients

#### **Barriers**

- Patients are not aware of or are misinformed on recommended vaccines
- Patients are concerned about adverse side effects from vaccines
- Patients wary of vaccines are likely to put it off and never return

#### **Motivators**

- Accurate, simple information on vaccinations helps motivate patients
- Understanding the risks and benefits of vaccinations is an important motivator for patients to get recommended vaccines
  - Health values messaging, like protecting one's self and family from disease, helps to motivate patients

## Conclusions

- Patients can be motivated to seek out the vaccines they need
- Protection for one's self and family is a key motivator for patients
- Patient materials with accurate, simple information on recommended vaccines can both educate patients and facilitate discussion with providers
- Encouraging patients to get vaccinated that same day is important
- Providers should adopt best practices to effectively recommend and bill for needed vaccines

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