Survey

Vaccine hesitancy and vaccine-preventable diseases

Vaccine-preventable diseases (VPDs) are defined as diseases for which there are vaccines available via routine vaccination programs. The VPDs included in this survey are: diphtheria, tetanus, pertussis, polio, haemophilus influenza type b, pneumococcal disease, meningococcal disease, measles, mumps, rubella, varicella, and rotavirus. Influenza, HPV and Hep B vaccines are excluded. This survey aims to understand vaccine hesitancy among families who have had a child contract a VPD whereby the child or a sibling of the child was not vaccinated or vaccination was delayed by parental choice. Any infant/child who has contracted a VPD but is too young to have received all doses of the vaccine according to the recommended immunization schedule is excluded from this survey. Your contribution is greatly appreciated.

1. Which of the following best describes your practice?
   - General paediatrician
   - Paediatric subspecialist; specify:
   - Other health care provider, specify:

2. Please indicate the first three digits of the postal code of your practice: ___  ___  ___

3. Practice setting (check all that apply):
   - [ ] Urban
   - [ ] Suburban
   - [ ] Rural/remote
   - [ ] Academic
   - [ ] Non-academic
   - [ ] Inpatient hospital ward
   - [ ] ED/urgent care centre
   - [ ] Outpatient clinic
   - [ ] Private office/community setting

4. In the past 12 months, have you seen a patient(s) who was diagnosed with a VPD whereby the patient or a sibling was not vaccinated or vaccination was delayed by parental choice?  Yes  No

   If YES, how many?  □ 1–3  □ 4–6  □ 7–9  □ ≥10

5. Please indicate which VPD the patient was diagnosed with:
   - [ ] Diphtheria
   - [ ] Tetanus
   - [ ] Pertussis
   - [ ] Polio
   - [ ] Haemophilus influenza type b
   - [ ] Pneumococcal disease
   - [ ] Meningococcal disease
   - [ ] Measles
   - [ ] Mumps
   - [ ] Rubella
   - [ ] Varicella
   - [ ] Rotavirus

6. What was the status of the child’s vaccination against the VPD prior to contracting the VPD?
   - [ ] No immunization
   - [ ] Partial immunization

7. Was this disease acquired outside of Canada?  Yes  No  Don’t know

8. Did this family refuse other vaccinations for this patient?  Yes  No  Don’t know

9. Please specify the age and sex of the patient:  Age: _____ (years)  Sex:  [ ] Male  [ ] Female

10. Please specify your relationship to the patient:
    - [ ] I am the patient’s primary healthcare provider
    - [ ] I am treating the patient for a VPD in hospital/emergency dept.
    - [ ] Other, please specify:

11. Please indicate the outcome/level of care provided to the patient for the VPD:
    - [ ] Office setting care
    - [ ] Emergency department care
    - [ ] Admitted to hospital ward
    - [ ] Admitted to ICU
    - [ ] Death
    - [ ] Other, please specify:

12. What were the parental concerns that resulted in the patient not being vaccinated? (check all that apply)
    - [ ] Autism
    - [ ] Too many vaccines
    - [ ] Vaccine additives
    - [ ] Weakened immune system
    - [ ] Risk of vaccine greater than disease
    - [ ] Previous adverse experience (child, parent, family/friend)
    - [ ] Other, please specify:

13. Did you use a formal strategy or structured approach to discuss vaccination with the vaccine-hesitant parent(s) PRIOR to the patient contracting a VPD?  Yes  No  I did not know the family prior to the VPD

14. Did you use a formal strategy or structured approach to discuss vaccination with the vaccine-hesitant parent(s) AFTER the patient contracted a VPD?  Yes  No

15. Please indicate your impression as to whether the vaccine hesitant parent(s) is likely to consent to vaccination for the patient in the future.  [ ] Unlikely to vaccinate  [ ] Likely to vaccinate  [ ] Don’t know

16. Please indicate your impression as to whether the vaccine hesitant parent(s) is likely to consent to vaccination for the patient’s sibling(s) in the future.  [ ] Unlikely to vaccinate  [ ] Likely to vaccinate  [ ] Don’t know  [ ] N/A – only child

17. Are you aware of tools that exist for managing vaccine hesitancy (e.g., CPS Practice Point – Working with vaccine-hesitant parents)?  Yes  No

   If YES, have you used any of these tools?  Yes  No

Investigators: K Allen, B Fallon, D Tran

Please return this survey with your monthly reporting form. Thank you for your participation.

08/2017