

# Equitable Immunizations: A Provider Playbook for Health Literacy and Childhood Vaccination

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## Introduction

Childhood vaccinations are a critical part of early childhood development and ensuring long-term wellbeing. However, immunization rates among children in North Carolina have been declining across all racial and ethnic groups with Black and African American children experiencing the sharpest decline.<sup>1</sup> These disparities in vaccine uptake highlight the need for targeted efforts to build trust, address health literacy barriers, and ensure equitable access to immunizations. As healthcare providers, it is essential to approach vaccine discussions with empathy, cultural competence and an understanding of the unique challenges that different communities face.

This playbook is designed to support clinicians in improving childhood vaccination rates by incorporating best practices in health literacy, culturally responsive communication, and trust-building strategies. By ensuring families receive clear, accessible, and culturally respectful information about childhood vaccinations, you play a pivotal role in increasing vaccine confidence.

While the primary focus is on Black children under the age of two, these best practices can be applied to patients from diverse backgrounds, including American Indian, Asian, and Hispanic/Latino families.

### Key Takeaways for Providers

1. Trust is the Foundation of Vaccine Conversations
2. Health Literacy Impacts Vaccine Decision
3. Cultural Influences and Social Networks Matter
4. Data and Local Insights Inform Strategy
5. Addressing Social Determinants of Health (sDOH) Can Improve Access
6. Tailored Outreach and Community Partnership Can Help Improve Vaccine Uptake
7. Effective Communication Can Shift Perspectives

## Health Literacy Best Practices

Health literacy is more than just the ability to read and understand medical information – it is about ensuring that members and their families have access to clear, relevant and

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<sup>1</sup> NC DHHS, Vaccination Disparities Fact Sheet

appropriate health education that empowers them to make informed decisions. This aligns with the Healthy People 2030 goal to “increase the health literacy of the population”.<sup>2</sup>

Each community has varying levels of health literacy due to systemic inequities, past negative experiences with healthcare, or a lack of accessible information in their communities.

Clinicians like you can help bridge this gap by:<sup>3</sup>

- **Using Plain Language:** Avoid medical jargon and use simple, relatable terms.
  - Example: Instead of “immunization schedule,” say “shot plan.”
  - Example: Instead of “contraindications,” say “reasons your child might need to delay a shot.”
- **Encouraging Questions:** Create an open environment where families feel comfortable voicing their concerns without fear of judgement.
- **Confirming Understanding:** Instead of asking, “Do you understand?” use a teach-back method to ensure that you have communicated clearly.
  - e.g., “Can you tell me when your baby’s next shots are due?”
  - e.g., “Can you tell me in your own words why this shot is important?”
- **Utilize Visual Aids:** Provide pamphlets, simple charts, diverse images or culturally relevant videos to reinforce vaccine education and illustrate vaccination schedules and benefits.
- **Provide Bilingual Support and Culturally Tailored Materials:** Provide your practice handouts in multiple languages and ensure content reflects diverse cultural values and beliefs.
- **Use Storytelling:** Share relatable stories of other parents who vaccinated their children and the positive health outcomes they experienced.
- **Leverage Community Partnerships:** Collaborate with trusted community leaders, such as faith-based organizations, local advocacy groups, and culturally specific healthcare workers.

## Understanding Cultural Influences on Vaccine Decision-Making

Cultural beliefs, historical experiences and systemic barriers influence health decisions in minority communities, including attitudes towards childhood immunizations. Vaccine hesitancy among minority communities is not simply a matter of personal choice – it is

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<sup>2</sup> ODPHP, *Healthy People 2030*, n.d.

<sup>3</sup> DeWalt et al., *AHRQ Toolkit*, 2010.

deeply rooted in historical, social and systemic factors. The shadow of medical racism, exemplified by events like the Tuskegee Syphilis Study has left a legacy of mistrust towards the healthcare system. While these historical injustices do not define present-day medical practice, their impact lingers, shaping community perception.<sup>4</sup>

Misinformation and disinformation further complicate vaccine acceptance. Social media platforms and word-of mouth networks can amplify fears, reinforcing the idea that health care systems can be dismissive, inaccessible or even harmful. While this is challenging to combat, healthcare decisions are rarely made in isolation. For many families, health decisions are also shaped by cultural and religious influences. Faith-based organizations play a crucial role in community health perceptions, and some families may choose to seek guidance from community & spiritual leaders before making medical decisions. Understanding these influences can help you approach these conversations with cultural humility, patience, and respect.

Clinicians like you play a critical role in addressing these concerns with cultural humility, building trust, and ensuring equitable access to immunizations. By acknowledging and respecting these influences, you are then able to build stronger, more trusting relationships with the communities you serve.

## Key Considerations for Providers

### 1. Acknowledge Historical and Cultural Context

As a clinician, it is imperative to recognize and validate concerns about medical mistrust, rather than dismissing them. Acknowledging these past injustices while focusing on transparency can help build rapport and trust between you and your patients. Share how modern vaccine research, safety measures and diverse clinical trials work to protect communities.

### 2. Use Trusted Messengers and Partner with Community

Many families turn to extended family and community leaders for guidance on healthcare decisions. To support this, engage in your community to partner with local churches, community centers and other organizations to share vaccine information in ways that are more culturally relevant and credible.<sup>5</sup> Many Black/African American families prioritize

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<sup>4</sup> Scharff et al., *J Health Care Poor and Underserved*, 2010.

<sup>5</sup> Badlis et al., *Vaccine*, 2024.

collective well-being. Framing immunizations as a way to protect the whole family and community can resonate more deeply.

## Addressing Social Determinants of Health (sDOH) in Vaccine Uptake

Even when families are willing to vaccinate their children, structural barriers can make it difficult to follow through. Black and African American families, particularly those in underserved communities may face challenges such as:<sup>6</sup>

- Transportation limitations – lack of reliable transportation can make it difficult to attend well child visits.
- Work schedule conflicts – Working parents or guardians may struggle to find time for their child’s medical appointments.
- Healthcare access disparities – Some families live in “healthcare deserts” with limited pediatric services.

Here are a few strategies to help you address these barriers:

1. Offer flexible appointment times if your practice is able - including weekend and evening hours.
2. Inform families about free [transportation services](#) to and from appointments for Medicaid covered services
3. Connect families to mobile clinics or home-based vaccination programs if available in your service area.

## Addressing Implicit Bias

Implicit bias in healthcare can erode trust and contribute to vaccine hesitancy. Studies show that Black patients often receive less information, face more dismissive attitudes, and experience lower rates of shared decision-making.<sup>7</sup> Our providers are our first line of defense in countering these biases. To address implicit bias:

1. Take time to recognize your own personal biases – Engaging in self-reflection and training can help improve your cultural competency.
  - a. Carolina Complete Health, in collaboration with NC AHEC and The Prepaid Health Plans, streamlined the Cultural Competency training requirement for Providers. If you are interested in completing this training, please view the

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<sup>6</sup> [Ryan, Commonwealth Fund, 2017](#)

<sup>7</sup> [Hostetter & Klein, Commonwealth Fund, 2021.](#)

[Implicit Bias, Cultural Humility and Cultural Consciousness Training](#) that was created by the Department of Health and Human Services and endorsed by each PHP.

- i. Once completed, please kindly attest to your training by filling out [this brief survey](#).*
2. Provide the same level of attention, patience and education to each patient.
3. Acknowledge historical injustices by validating concerns rather than dismissing them.

## Effective Communication Strategies

Vaccine discussions should be a dialogue, not a directive. Many hesitant parents and guardians do not oppose vaccinations outright – they just need their concerns validated and addressed in a respectful way.

### Best Practices for Vaccine Conversations:

- **Tailor Your Communication to the Member’s Needs:** Some patients prefer detailed explanations, while others may benefit from brief, action-oriented discussions. Assess each family’s needs and tailor communication accordingly.
- **Use Motivational Interviewing:** Motivational interviewing has been shown to decrease parental vaccine hesitancy. Instead of trying to convince, ask open-ended questions and guide the conversations based on the member or guardian’s response.<sup>8</sup> This technique involves engaging in a collaborative conversation to strengthen a person's motivation and commitment to change.<sup>9</sup>
- **Avoid Judgement:** Responses like “you just need to trust the science” can shut down conversations with members. Instead, acknowledge the concern and use of language that invites the member into a discussion.
  - E.g., “I am happy to collaborate with you to keep your baby healthy, let’s talk about your concerns.”
- **Share Personal and Community Success Stories:** Many parents find reassurance in knowing that other families in their community have chosen to vaccinate their children.

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<sup>8</sup> *IHI Vaccine Communication Guide, 2022.*

<sup>9</sup> [Center for Disease Control and Prevention, 2021.](#)

- **Provide Decision-Making Support:** Help parents weigh the risks of vaccine-preventable diseases against the benefits of immunization.



## Resources

### Child Vaccination Discussions: A Provider Quick Reference Guide

#### Begin with Empathy, Respect and Invite Collaboration

Greet parents/guardians and members warmly, make eye contact, and acknowledge cultural or personal concerns.

Ex. "I know that making health decisions for your baby is important. I want to make sure you have all the information you need."

#### Assess Understanding and Address Misinformation

Ask about what they've heard:

Ex. "Have you come across any information about vaccines that concerns you?"

Ex. "Can you tell me what you've heard about vaccines?"

#### Share Simple and Clear Information

Offer transparency about vaccine benefits, side effects and research

Remind caregivers that delaying shots can leave their children unprotected

Ex. "These shots help keep your baby safe from serious illnesses like measles and pneumonia"

Emphasize timeliness by providing parents and guardians with a timeline

Ex. "Your next shots are due in X months"

#### Use Visual Aids

Show the vaccination schedule and mark the patient's completed and upcoming vaccines

Share educational videos for parents to view before their next visit

#### Confirm Understanding

Ask parents or guardians to summarize next steps in their own words

Ex. "Just to be sure we are on the same page, can you tell me when your child's next shots are?"

#### Encourage Questions

"What other concerns do you have about vaccines?"

#### Build Trust and Support

"If you ever have any questions, we are here to help. You can always call our office before hand or discuss things at your next visit."

## Printable Vaccine Schedule

[Your Child Needs Vaccines as They Grow: 2025 Recommended Immunizations for Birth Through 6 Years Old](#)

## Printable Resources to Support Your Discussions with Parents or Guardians

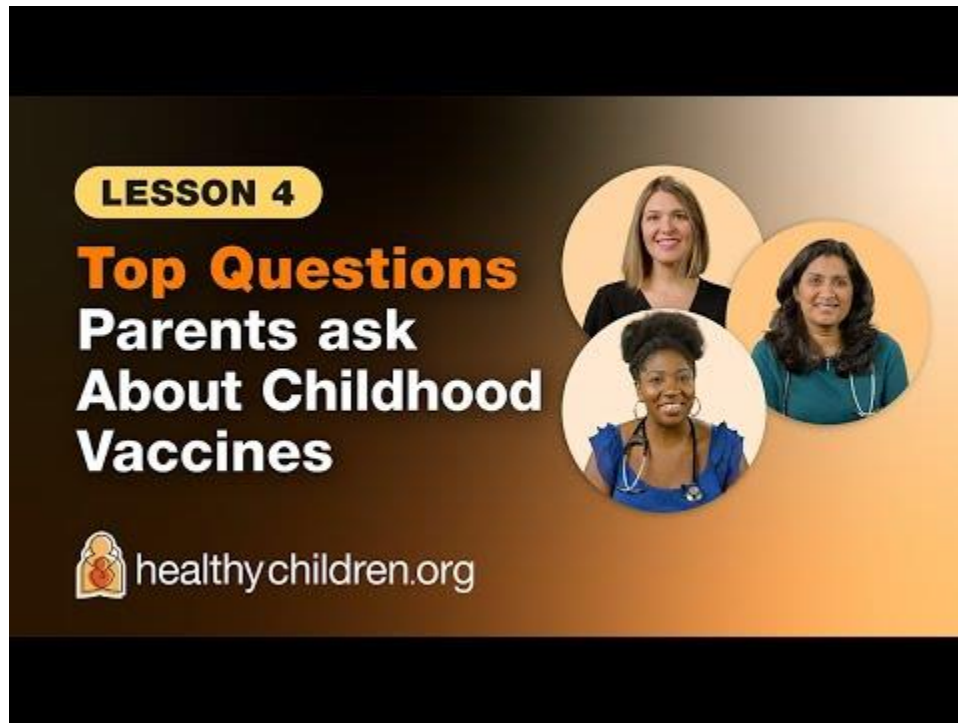
1. [Clear Answers and Smart Advice About Your Baby's Shots - Immunize.org](#)
2. [Immunizations for Babies: A Guide for Parents - Immunize.org](#)
3. [Reliable Sources of Immunization Information: Where Parents Can Go to Find Answers](#)
4. [Infographics and Discussion Guides](#)
5. [AAP Immunization Schedule Birth - 6 years of Age](#)
6. [Diseases and Recommended Immunizations - AAP](#)
7. [Communication about Vaccinations](#)
8. [NCIOM Healthy Moms Healthy Babies](#)
9. [UNC Sheps Center Health Literacy Universal Precautions Toolkit](#)
10. [John Hopkins Childhood Immunizations](#)

Culturally Tailored Videos

Lesson 1: (English & Español)



Lesson 4: Top Questions Parents ask about Childhood Vaccines



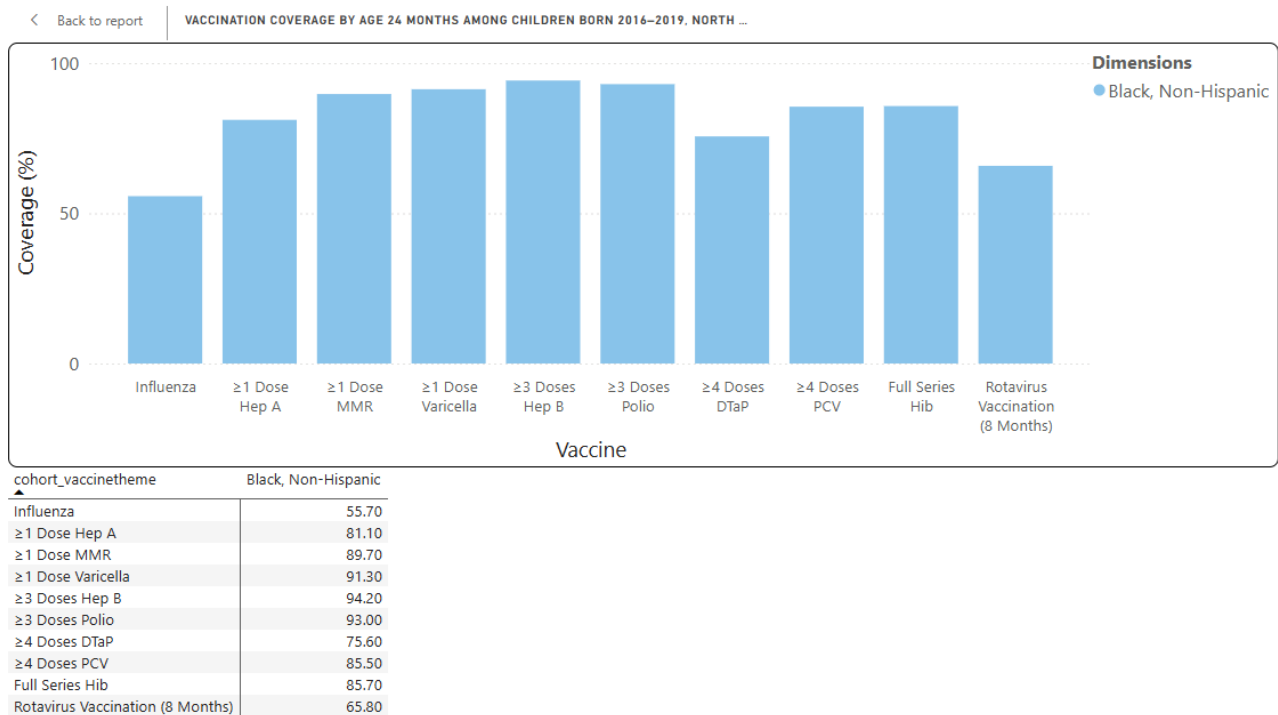
Video: Finding out the Truth about Vaccines



## Additional Data Sources for Clinicians

### 1. [CDC Child VaxView Dashboard](#)

- a. **Description:** The CDC ChildVaxView dashboard is an interactive tool designed to provide comprehensive vaccination coverage data for children aged 19-35 months. It offers national, regional, state, and selected local area vaccination coverage estimates using interactive maps, trend lines, bar charts, and data tables. This dashboard helps public health officials, healthcare providers, and policymakers watch vaccination rates and find areas needing improvement to ensure children receive timely immunizations.



## References

Badlis, S., Yu, H., Klusaritz, H., Tan, A. S. L., Dooley, T., Heggs, H., et al. (2024). Engaging trusted messengers to increase COVID-19 pediatric vaccine uptake in Philadelphia: Lessons from the VaxUpPhillyFamilies program. *Vaccine*. Retrieved April 14, 2025, from <https://www.sciencedirect.com/science/article/pii/S0264410X24006649>

Centers for Disease Control and Prevention. (n.d.). Your child needs vaccines as they grow! Vaccines & Immunizations. U.S. Department of Health and Human Services. Retrieved April 14, 2025, from <https://www.cdc.gov/vaccines/imz-schedules/child-easyread.html>

Centers for Disease Control and Prevention. (2021). Vaccination strategies. Retrieved from [https://archive.cdc.gov/www\\_cdc\\_gov/vaccines/covid-19/downloads/vaccination-strategies.pdf](https://archive.cdc.gov/www_cdc_gov/vaccines/covid-19/downloads/vaccination-strategies.pdf)

Cox, K., Deane, C., Lopez, M. H., & Sahgal, N. (2024, June 15). Black Americans and mistrust of the U.S. health care system and medical research. Pew Research Center. Retrieved April 14, 2025, from <https://www.pewresearch.org/race-and-ethnicity/2024/06/15/black-americans-and-mistrust-of-the-u-s-health-care-system-and-medical-research/>

DeWalt, D. A., Callahan, L. F., Hawk, V. H., Broucksou, K. A., Hink, A., Rudd, R., & Brach, C. (2010). *Health Literacy Universal Precautions Toolkit*. Agency for Healthcare Research and Quality. Retrieved April 14, 2025, from <https://www.shepscenter.unc.edu/wp-content/uploads/2013/05/Health-Literacy-Universal-Precautions-Toolkit.pdf>

Hostetter, M., & Klein, S. (2021, January 14). Understanding and ameliorating medical mistrust among Black Americans. Commonwealth Fund. Retrieved April 14, 2025, from <https://www.commonwealthfund.org/publications/newsletter-article/2021/jan/medical-mistrust-among-black-americans>

North Carolina Department of Health and Human Services. (2024). *Best practices for improving pediatric immunization and well-child visit rates for North Carolina Medicaid standard plans*. Retrieved April 14, 2025, from <https://medicaid.ncdhhs.gov/documents/best-practices-immunizations-and-well-child-visits-improvement-standard-plans/download?attachment>

North Carolina Department of Health and Human Services. (2023). Racial Disparities in vaccination: Medicaid fact sheet. NC Medicaid. <https://medicaid.ncdhhs.gov/racial-disparities-vaccination-fact-sheet-0/download?attachment>

Office of Disease Prevention and Health Promotion. (n.d.). Increase health literacy of the population (HC/HIT-R01). Healthy People 2030. U.S. Department of Health and Human Services. Retrieved April 14, 2025,

from <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-communication/increase-health-literacy-population-hchit-r01>

Seervai, S. (2017, December 1). Listening to low-income patients: Obstacles to the care we need, when we need it. Commonwealth Fund. Retrieved April 14, 2025,

from <https://www.commonwealthfund.org/blog/2017/listening-low-income-patients-obstacles-care-we-need-when-we-need-it>

Wolf, E. R., O'Neil, J., Pecsok, J., Etz, R. S., Opel, D. J., Wasserman, R., & Krist, A. H. (2020). Caregiver and clinician perspectives on missed well-child visits. *The Annals of Family Medicine*, 18(1), 30-34. <https://doi.org/10.1370/afm.2466>