

Alberta Doctors' Digest

Talking to vaccine-hesitant parents

Dr. Tehseen Ladha, a pediatrician and executive member of the AMA's Section of Pediatrics, says she has seen an uptick in vaccine hesitancy in her practice in recent years, a trend familiar to many primary care providers.

While conversations about vaccines can be sensitive, she notes that a pluralistic approach is often an effective tool for cultivating trust in the physician–patient relationship.

“A pluralistic approach is one in which we navigate differences or polarization in a way that acknowledges each other's humanity and lived experience, and holds empathy for one another, while still being able to discuss something that might be emotionally charged.”

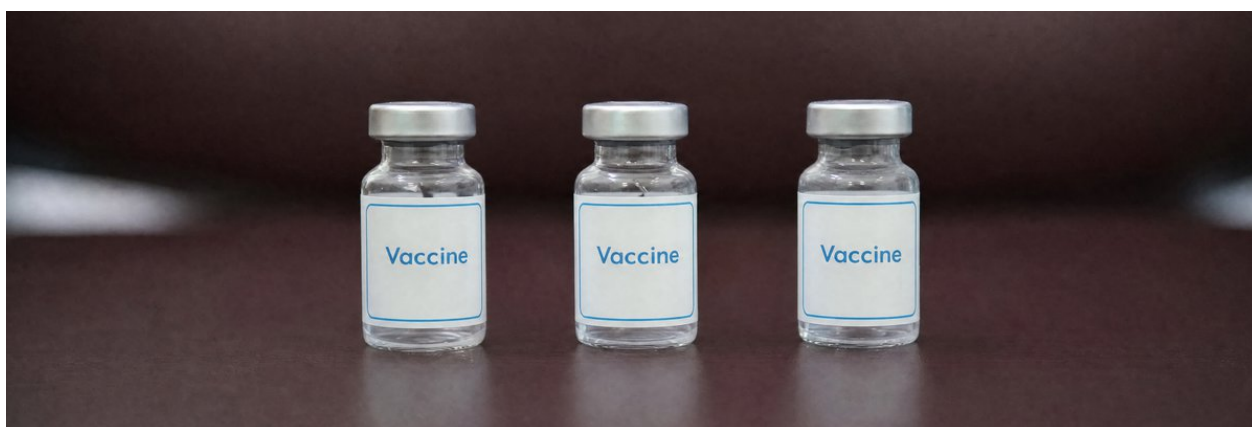
Drawing on experiences from her practice, she shares several techniques that support constructive conversations about immunizations.

Start with curiosity

Avoid entering the conversation with pre-formed conclusions, Dr. Ladha recommends. Instead, begin with open, neutral questions that set the tone for a respectful and open discussion.

“It's important to acknowledge the other person's humanity and not label them as anti-vaxxers or anti-science — which we see a lot of on social media,” she says. “I will often ask, ‘I understand your child hasn't had their vaccinations—is that correct?’”

In many cases, parents cite barriers such as limited access to a primary care provider, scheduling or transportation issues, rather than outright opposition.



When concerns about vaccines arise, the goal is not to win a debate, but to reach a shared understanding. (Image credit: Marvin Polis and ChatGPT)

Focus on shared understanding

When concerns about vaccines arise, the goal is not to win a debate, but to reach a shared understanding.

“If they seem defensive, I reinforce that I’m just curious,” she says. “I try to understand what they’re worried about, while also sharing my concerns about their child’s health should they not receive their immunizations. This is meant to take us from division to dialogue.”

Identifying and verbalizing common ground or shared goals, such as a shared desire to keep the child safe and healthy, can help reinforce trust even if views differ.

Address concerns with humility

Disinformation and misinformation are often at the root of vaccine hesitancy. While this can be frustrating for physicians, dismissing concerns outright can erode trust.

“If people feel patronized, or that a doctor dismissed them, they will seek out groups that listen, even if those groups share misinformation,” she reminds us.

Dr. Ladha emphasizes the importance of humility and an openness to investigate concerns, particularly when physicians don’t have an immediate answer.

“If I’m not familiar with a particular concern, such as a compound they believe to be in a vaccine, I will say to them ‘I didn’t know about that, but I’ll look it up and I can tell you more at our next appointment.’”

Respond to personal experiences with care

Personal experiences and anecdotes about adverse effects can strongly influence beliefs about vaccine harms, and disputing them is rarely effective.

“It’s scary if a loved one has had an adverse effect, whether it’s directly related to the vaccine or not,” she says. “It’s important to acknowledge those experiences before sharing evidence-based information and resources.”

Depending on the situation, Dr. Ladha may also discuss some of the safeguards in place to monitor vaccine harms, such as the Vaccine Adverse Events Reporting System.

Keep the door open for future conversations

Not all conversations lead to immediate change, and that’s OK.

“My goal is ultimately to develop trust and rapport, and ideally optimize a child’s health,” Dr. Ladha says. “Even if I can just get them to think about it a bit more, or trust me, or share an experience, that’s progress.”

These conversations often require multiple touch points, and families need time to process information that challenges deeply held beliefs or elicits strong emotions.

“Even when someone has the information, they may need time to process and reflect,” she says. “They have to get there on their own, and I always invite them to talk to me again when they’re ready.”

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