



# A Select Bibliography of Actions to Promote Vaccine Literacy: A Resource for Health Communication

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# A Select Bibliography of Actions to Promote Vaccine Literacy: A Resource for Health Communication

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In this bibliography, the researchers provide an introduction to the available evidence base of actions to promote vaccine literacy. The research team organized interventions to create a tool that can inform health communicators and practitioners seeking a resource focused on strategy and implementation design for actions that support vaccine literacy. This scoping bibliography is honed specifically to respond to the urgency of the current pandemic, when supporting and increasing vaccine literacy offers promise for achieving the critically needed high levels of vaccination. Over the course of the coming months and year, this bibliography will be a dynamic and “living” document hosted and maintained on [vaccineliteracy.org](http://vaccineliteracy.org).

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## Background and Introduction

In this bibliography, the researchers provide an introduction to the available evidence base of actions to promote vaccine literacy. The research team organized interventions to create a tool that can inform health communicators and practitioners seeking a resource focused on strategy and implementation design for actions that support vaccine literacy. This scoping bibliography is honed specifically to respond to the urgency of the current pandemic, when supporting and increasing vaccine literacy offers promise for achieving the critically needed high levels of vaccination.

To create and distribute this resource quickly, the bibliography is not exhaustive or complete. Similarly, new and innovative strategies will continue to emerge during the COVID-19 vaccine roll-out. Over the course of the coming months, this bibliography will be a dynamic and “living” document hosted and maintained on [vaccineliteracy.org](http://vaccineliteracy.org). The research team encourages the readership to submit additional relevant literature to the website to continue to expand and update this resource.

## Methodology

Library databases and electronic journals were searched on October 20, 2020, to compile a database of bibliographic citations relevant to human communication and vaccine acceptance. Databases included Communication & Mass Media Complete, CINAHL, PsycInfo, PubMedCentral (PMC), and Web of Science. Google Scholar was also searched. The search was limited to English-language articles published 2008 through January 2021. Keywords used included: *vaccination* or *vaccine*

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or vaccines or immunize, or immunization combined with communication or hesitancy, or confidence or acceptance. References of selected articles were assessed for additional relevant articles and other words/phrases. A separate web search for gray literature was conducted using Google. Phrases searched were “vaccine literate” OR “vaccine literacy” OR “vaccine Hesitant” OR “vaccine hesitancy” among others. We excluded conference papers, articles that did not explicitly discuss vaccination, and articles about vaccine efficacy, surveillance, coverage, or development.

Publications that were written in English and international in scope were included. Web pages and gray literature were also included. Conference papers, articles that did not explicitly discuss vaccination, and articles about vaccine efficacy, surveillance, coverage, or development were excluded.

Three researchers (HL, MM, LR) independently screened approximately 2,500 titles and abstracts, either coding articles within the subgroup organization or excluding them. The team then reviewed a sample of the initial coding procedure from each researcher’s section to confirm alignment in categorization. In both the first and second screens, researchers resolved disagreements for inclusion and exclusion with discussion and consensus. A total of 348 titles were included.

The bibliography is organized according to the socioecological level (individual, interpersonal, or community) of implementation for each intervention. While studies often transverse multiple levels, the researchers categorized articles based on their primary emphasis of either the audience or the messenger. For example, an article evaluating the efficacy of a school-based vaccine education program was placed at the interpersonal level to reflect the student-teacher dyad central to the intervention. A study that measured vaccine uptake before and after the distribution of pamphlets was categorized as individual level to reflect the knowledge that had been gained.

Within the socioecological levels, subcategories indicate the main tactics to promote vaccine literacy: health education and message framing at the Individual and Interpersonal levels; and interactions with technology or the engagement of learned intermediaries, respectively. At the community level, the emphasis on implementation shifts to the format or platform used for the intervention, for example, social media communication pilots, or community engagement for message design and dissemination.

Finally, the “enabling environment” includes strategies that operate at the organizational and public policy level, these studies offer analysis of strategic programs within the structures and systems that facilitate vaccine literacy for organizational members or the public.

The final three categories of the bibliography fall outside the socioecological model, offering reviews of implementation strategies, significant editorials and essays penned by thought leaders, and lastly, internet resources for further and ongoing reference.

## Vaccine Literacy in the Time of COVID-19

### *Vaccine Literacy in the Time of COVID-19*

The definition and operationalization of *vaccine literacy* captures the multidimensional elements that must work cohesively to ensure high uptake of vaccines. While “literacy” is traditionally

measured on an individual-level, *vaccine literacy* cannot be removed from the interpersonal relationships, information sources, infrastructure, policies, and economic factors that ultimately facilitate it and must be assessed when fostering a vaccine confident public. Indeed, vaccine literacy is the ‘whole of society’ approach to understanding vaccination decision-making.

### **Vaccine Literacy Definition and Tenets<sup>1</sup>**

Vaccine literacy is a fundamental health literacy urgently required to address this current pandemic. Vaccine literacy occurs when the skills and abilities of people align with the content, processes, and systems needed to access and get vaccinated. Everyone, or their caretaker or family members, should be able to understand what they need to know and do related to their health, and specifically now for vaccination for COVID. Ultimately, this is dependent on content, processes, and systems for vaccination being easy to successfully access, navigate, and use.

Vaccine literacy is facilitated by eight tenets:

1. Individual knowledge informed by clear, trustworthy, up-to-date evidence
2. Ability to discern fact from fiction
3. Listening, encouraging questions, and dialogue
4. Providing understandable, trustworthy, up-to-date answers to questions
5. Understanding risks and benefits of vaccination for self and society
6. Successful education, access, and systems for vaccination
7. Prudent policies that incentivize vaccination and equity
8. Transparency, clarity, and confidence in vaccine quality, safety, and efficacy.

Strengthening vaccine literacy in our communities and institutions requires the commitment to build clear, accessible channels for advocacy, dialogue, and non-judgmental communication. Through its selected research, this bibliography offers a blueprint that pushes past calls for further research and prioritizes implementation strategies with a mind toward action and results.

As vaccines for COVID-19 continue to be distributed and administered over the next few years, the landscape of vaccine sentiment, communication, and policy will surely change. The aim of this living bibliography will be to reflect that changing landscape and offer continued support for health communicators and the practitioners.

## **Acknowledgments**

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## **Individual**

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